

Two CAEP Pathways to Accreditation:  
**The *Inquiry Brief* and the *Program Quality Audit Report***

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**Commission Logic of Accreditation**

1. Evidence of Capacity for Program Quality
2. Evidence of Candidate Competence
3. Evidence of a System of Quality Control & Program Improvement

**CAEP Pathways to Accreditation**

Focus on Research	Focus on Continuous Improvement
Candidate competence & accomplishment	Quality control system functions as designed & leads to higher quality
Program reform that contributes to research on practice	Significant Growth toward Target Indicators of Quality

**Two Key Questions**

- Do the program's graduates understand what the faculty claim the graduates know and can do?
- What have the faculty learned from their monitoring and inquiry into the program's quality to make the program better?

**Assurance based on evidence**

- Upon what evidence do the program faculty members rely
  - to support their claims that the program's graduates are *competent*?
  - to convince themselves that their assessments are reliable and valid?
  - to convince themselves that program changes & requirements improve the program's quality?

**Generally available indicators of program quality**

- Grades (major, pedagogy, & clinical)
- Scores on Standardized tests (candidates' entrance, exit, and license scores and perhaps graduates' own students' scores)
- Surveys – students, alumni, employers
- Ratings – portfolios, work samples, cases
- Basis for Rates – hiring/tenure, gain scores, certification, graduate study, professional awards, publications, NBPTS, etc.

### ***Inquiry Brief: main sections***

1. Introduction (demographics & values)
2. Claims and rationale for assessments
3. Methods of assessing
4. Results
5. Discussion of results and plan of inquiry
6. References

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### ***Inquiry Brief: Appendices***

- A. *Internal audit* of quality control system – it works as designed and makes things better
- B. Evidence of capacity and commitment
- C. Qualifications of the program faculty
- D. Program requirements & alignments with state and/or professional association standards
- E. Inventory: analysis of available measures
- F. Copies of locally developed assessments
- G. *Programs accredited by other agencies*

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### ***Focus of the Inquiry Brief***

- 1.0 Evidence of Candidate Acquisition of
  - 1.1 Subject Matter Knowledge
  - 1.2 Pedagogical Knowledge
  - 1.3 Caring & Effective Teaching Skill
  - 1.4 Each includes evidence of three cross-cutting themes & evidence of validity
    - Learning how to learn (critical reflection)
    - Multicultural perspectives & accuracy
    - Technology
  - 1.5 *Valid interpretations of the assessment evidence*

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### ***The Program Quality Audit Report (PQAR)***

1. Program demographics & claims
2. Description of the program's Quality Control System (QCS)
3. Method of conducting the Internal Audit
4. Findings from the Internal Audit with regard to each part of the TEAC system (1.1-3.2.6)
5. Interpretation of the audit findings
6. Plans for modifications of QCS and further inquiry

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### ***Appendices to the PQAR***

- A. (not needed)
- B. Evidence of institutional commitment
- C. Qualifications of the program faculty
- D. Program requirements & alignments with state and/or professional association standards
- E. Inventory: analysis of available measures
- F. Copies of locally developed assessments

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### ***Focus of the PQAR***

What can the faculty conclude about –

1. Whether its quality control system works as designed & improved anything (learning, efficiency, cost)
2. The validity of its assessments
3. The results of its assessments
4. The results of its inquiry into what factors influence candidate learning
5. The need for further inquiry

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## Capacity in the IB & PQAR

- The *Quality Control System* monitors & investigates the capacity of the faculty, curriculum, students, facilities, resources, etc. for quality
- **Parity** on common program features with other units at the institution
- **Sufficiency** on unique features of the program (clinical, curriculum)



## TEAC accreditation process at a glance

- Application & Candidate status
- Formative evaluation (optional)
- *Inquiry Brief* or *Program Quality Audit Report* submitted and declared auditable
- Call-for-comment and Direct Online Surveys of Faculty, Students, Cooperating Teachers, etc.
- Audit visit and Audit Report
- Analysis of the case by panelists & staff
- Accreditation Panel recommendation
- Accreditation Committee decision
- Acceptance or appeal of the decision
- Annual Report (Appendix E & updated data tables)



## What is a single program?

- **Program structure.** Options have essentially the same requirements, rationale, logic, and faculty
- **Quality control system.** Options share the same quality control system
- **Evidence.** The evidence can be aggregated honestly across options



## Structure of the Audit

- Purpose is to verify targets (text, figures, data, etc.) in the *IB* or *PQAR*
- Some audit tasks are done from the TEAC office, but most are conducted on-site
- Team of two – four trained auditors
- Local practitioner nominated by program
- State representative in protocol states
- TEAC staff member as lead auditor
- Two – three days in length



## Steps in the Audit Visit

- Auditors' Summary of the Case
- Clarification questions
- Audit tasks (target, probe, finding, verdict)
- Probes: Data re-analysis, interviews, posed scenarios, scoring videos & portfolios, class observations, examination of student work, record checks, tours, corroboration
- Determination of institutional commitment



## Accuracy of *IB* or *PQAR*: Audit Opinions from the Site Visit

- **Clean Opinion:** At least 90% targets verified
- **Qualified Opinion:** At least 75% targets verified and/or more than 25% have errors of any kind (trivial and consequential)
- **Adverse Opinion:** More than 25% of the targets are not verified
- **Disclaimer Opinion:** More than 25% of the targets could not be audited
- Number of **Disclaimer + Not Verified** is more than 25% of targets



## Panel Agenda

- **Case Analysis:** evidence that is consistent and inconsistent with the quality principles and any rival hypotheses are presented
- Program representatives may observe deliberations & the vote, answer questions, correct errors
- Super-majority panelist vote required for recommendations (accreditation status & term, weaknesses, stipulations)

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## Standards of evidence used by the Accreditation Panel

- **Evidence is reliable:** chance is not a credible explanation for the evidence
- **Evidence is valid:** rival explanations are not credible & evidence is consistent with claims & TEAC principles
- **Evidence is of sufficient magnitude:** 75% guideline or heuristic is applied to the empirical maximum (the mean of the top ten percent) when no other guidance is available.

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## Accreditation Committee

- Makes the accreditation decision based on the panel's recommendation & total record
- Certifies that TEAC's policies and procedures were followed throughout.
- Panel standard is that the evidence is consistent with principles & claims
- Committee standard for reversal requires evidence that proves the opposite of panel's recommendation

## "Optimal" Accreditation Rates

- Only 28% had no weaknesses or stipulations cited
- 39% had problems that were required to be remedied in two years to maintain status
- Thus, only 61% were in compliance by the USDE criterion
- 92% achieved the status they sought
- 98% were accredited on the first attempt
- 100% were eventually accredited

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## Accreditation Findings

- No cash cows found (the opposite in fact)
- Teacher education students do as well or better in Arts & Science discipline courses as those majoring in the disciplines
- Online surveys show high, but differential, levels of satisfaction with graduates' competence and programs' features
- Disconnect between clinical components and "academic" components of programs