



Applied Sociology, Clinical Sociology, Public Sociology and Sociological Practice Program

Accreditation Policies and Procedures

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Commission on the Accreditation of Programs in Applied and Clinical Sociology

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Applied Sociology, Clinical Sociology, Public Sociology and Sociological Practice Program Accreditation

Policies and Procedures

1.0 Introduction

- 1.1 The Commission on the Accreditation of Programs in Applied and Clinical Sociology (hereafter referred to as the Commission) was incorporated in the State of Michigan by the predecessors of the Association for Applied and Clinical Sociology (specifically, the Society for Applied Sociology and the Sociological Practice Association) in 1995 to develop, promote, and support quality sociological education and practice in applied and clinical areas. In 2005, the Commission extended its purview to include engaged public sociology, in recognition of the discipline's growth in this area of education and practice. As of incorporation the Commission has served as a nonprofit corporation, organized and operated as an exempt Business League under Section 501(c)(6) of the Internal Revenue Code, or corresponding section of any future federal tax code.
- 1.2 The Commission conforms to the principles of nondiscrimination with regard to age, sex (including sexual orientation and gender identity), religion, national origin, race or color, disability, or genetic status, as governed under Title VII of the Civil Rights Act of 1964, and other Federal laws including the Americans with Disabilities Act, and numerous state antidiscrimination laws, applying to non-religious, non-profit corporations.
- 1.3 In support of the above stated goals, the Commission has developed an accreditation review process. This review process involves four components: (1) a program self-study and report for review by an accreditation review committee (2) a site visit and report by a site visit team, inviting comment from the program, (3) an interim report on accreditation (without recommendation) by the accreditation review committee, also inviting comment from the Program, and (4) a final report on accreditation (with recommendation) by the Commission, based upon all available evidence. A suggested timeline informed by past program experience can be found in *Appendix A*.
- 1.4 Programs accredited by the Commission will be listed on the CAPACS website, and in "The Registry of Accredited Applied Sociology, Clinical Sociology, Public Sociology and Sociological Practice Programs" (hereafter referred to as the "Registry of Programs") at the Baccalaureate, Masters, and Doctoral Levels. The "Registry of Programs" is an unpublished document, and part of the Commission's records. It is used for internal purposes only. Accredited programs are invited to download and use the Commission's "CAPACS Accredited" logo in their informational materials (hardcopy and digital formats), registered under domestic and international trademarks with the United States Patent and Trademark Office (USPTO), following the guidelines published on the CAPACS website. The Commission assumes no liability or obligation arising out of the use of the list of accredited programs and its registered logos by individuals and organizations.

- 1.5 Graduates from accredited programs will be listed in “The Registry of Graduates in Accredited Applied Sociology, Clinical Sociology, Public Sociology and Sociological Practice Programs” (hereafter referred to as the “Registry of Graduates”) at the Baccalaureate, Masters, and Doctoral Levels. The “Registry of Graduates” is an unpublished document, and part of the Commission’s records. It is used for internal purposes only.
- 1.6 Deadlines for each step in the accreditation review process, including payment of specified fees, must be met by the Applicant Program (hereafter referred to as the Program) for it to continue in the process.
- 1.7 Any member of the Commission who has a potential conflict of interest is expected to exclude her or himself from all actions in an accreditation review process.
- 1.8 Results of the accreditation review process will be released by official action of the Commission only. No individual member of the Commission, accreditation review committee member or chair, staff member or others involved in the process shall make any disclosure about individual program evaluations during or after the completion of the review process.
- 1.9 The documents (hardcopy or digital format) used by the applicant program for the accreditation process for applied sociology, clinical sociology, engaged public sociology and sociological practice programs are the:
 - a. *Accreditation Application Form.*
 - b. *Standards* at the Baccalaureate, Masters, or Doctoral Level.
 - c. *Self-study Guidelines* at the Baccalaureate, Masters, or Doctoral Level (for completing the Self-study Report).
 - d. *Accreditation Policies and Procedures.*
 - e. *Accreditation Review Process Guidelines.*
- 1.10 Programs seeking initial accreditation or re-accreditation must provide complete and detailed documentation for use by the Commission in determining conformity with the Standards. The burden of proof rests with the Program.
- 1.11 In assessing each program for accreditation, the Commission shall base its conclusions on:
 - a. Conformity to the Standards.
 - b. Overall quality of the Program.
- 1.12 The Commission reserves the right to make accreditation decisions for individual programs based on review of available evidence.
- 1.13 The Commission may grant departures from the Standards based upon written justification from the Program.
- 1.14 The initial accreditation will be for a period of up to five (5) years. Accreditation may be *full* or *provisional*. A program that is not accredited will receive a determination of *accreditation denied* (see Section 8.3). Re-accreditation will be for a period of up to seven (7) years. Re-accreditation may be *full* or *probationary*. A program that is not

re-accredited will receive a determination of *Revoked Accreditation* (see Sections 9.2 and 9.3).

- 1.15 Failure to apply for re-accreditation in a timely manner will result in loss of accreditation.

2.0 Eligibility Requirements

- 2.1 Application for accreditation is open to Baccalaureate, Masters, and Doctoral Level programs in sociological practice, applied sociology, clinical sociology and engaged public sociology. Applicant Programs must meet the Preconditions for Review as outlined in the Standards (See Section 1.0, in the Baccalaureate, Masters, and Doctoral Level Standards) and as documented in the initial application form.

3.0 Fees

- 3.1 The current fee schedule is listed below. It is subject to periodic review.

Application Fee	\$ 100
Accreditation Fee	\$2,000
Annual Fee	\$ 500

- 3.1.1 A non-refundable application fee is due upon submission of a Program's completed *Accreditation Application Form*.
- 3.1.2 A Program will pay a set accreditation fee at the time of submission of its self-study report. This fee will be divided as follows: (1) The first half of this fee covers the initial committee review of the self-study report; this portion of the fee is non-refundable; (2) The remaining half of the fee covers the site visit and final report; this portion is refundable if the Commission determines that a site visit cannot be scheduled within two (2) years of the date of submission of the self-study report. The review committee will make a recommendation to the Commission after its initial review on whether it believes a site visit can be scheduled within two years. If a site visit cannot be scheduled within two years, the review committee will make a recommendation to the Commission about whether to refund that half of the fee.
- 3.1.3 Other fees may be required.
- 3.1.4 Consistent with Section IV.G.3 of the *Accreditation Review Process Guidelines*, the Program is responsible for reimbursing the Site Visit Team Members within two weeks of submission of an expense report.
- 3.1.5 Commission institutional dues and review/accreditation fees must be paid for a program to be listed on the CAPACS website and in *The Registry of Accredited Programs*.

4.0 Application for Accreditation or Reaccreditation

- 4.1 Application forms and other information related to the accreditation process are available from the Commission's Executive Office. Questions regarding the process should be directed to this office.
- 4.2 An application for accreditation or re-accreditation must be sent to the Commission's Executive Office to initiate the process. The Executive Office is the current Chair's office. The application form must contain original signatures of the chief academic officer, academic dean, department chair, and program director. A program description from the catalog and/or published brochure describing the program must accompany the application. The Program description may be hardcopy or digital format (e.g., MS Word document, PDF, or URL link on the website).
- 4.3 An Initial Application for Accreditation shall be valid for 18 months from the date of receipt of that Application. Failure to submit the self-study report during that time will result in the need to resubmit a new Initial Application to the Commission's Executive Office.
- 4.4 A Program may voluntarily withdraw from the accreditation review process at any time.
- 4.5 An accredited Program may choose not to apply for re-accreditation. If an accredited Program chooses not to apply for re-accreditation, the Commission will withdraw its accreditation.

5.0 Self-Study Report

- 5.1 Self-study Reports are required as part of the accreditation and re-accreditation process.
- 5.2 The Self-study Report must comply with the *Accreditation Review Process Guidelines*, and include full text narratives and supporting documentation for all required elements.
- 5.3 Upon receipt of the Self-study Report, the Commission Chair will review the Report for completeness. Reports deemed "complete" will be sent to an Accreditation Review Committee by the Chair and Vice Chair of the Commission in consultation with the Executive Committee of the Commission. The Chair will return incomplete reports to the Program for resubmission resulting in possible delays. Refer to the *Accreditation Review Process Guidelines* for more detailed information on the submission, review, and acceptance of the Self-study Report.
- 5.4 After review and acceptance of the Self-study Report by the Accreditation Review Committee, a site visit will be scheduled. Programs will have up to two years from the time of submission of the self-study report to host the site visit.
- 5.5 The Commission may require an updated Self-Study Report if circumstances warrant it (See Section 11.4, in this Document).

6.0 Accreditation Review Committee

- 6.1 The Chair and Vice Chair of the Commission appoint the Accreditation Review Committee (hereafter referred to as the Committee), and designate the Committee Chair and Site Visit Team, in consultation with the Executive Committee.
- 6.2 The Committee shall consist of a chair plus four (4) additional members. Two (2) of the additional members shall serve as the Site Visit Team.
- 6.3 The Chair of the Committee serves as the primary contact with the Program.
- 6.4 Members of the Committee shall have appropriate training to carry out their responsibilities.
- 6.5 Persons affiliated with the Program, such as a faculty member or former faculty member, students or former students, external advisers, or others with potential conflicts of interest shall not serve on the Committee.
- 6.6 The Accreditation Review Committee reviews the Self-study Report; conducts the pre-site visit screening; communicates deficiencies that may preclude a site visit to the program; schedules the site visit; communicates findings in an interim report on accreditation, without recommendation, for comment by the Program; and writes a final report on accreditation, with recommendation, to the Commission. These activities will be conducted in accordance with the *Accreditation Review Process Guidelines*.

7.0 Site Visits

- 7.1 Site visits will be scheduled only during the following months: September, October, November, February, March, and April. *If the Commission determines that a program has valid reasons for requesting a different month for scheduling the site visit, it may grant an exception. An example would be to accommodate a nontraditional academic term or calendar year for a domestic or international program.*
- 7.2 Site Visits will be conducted in accordance with the *Accreditation Review Process Guidelines* and will be two to three days in duration.
- 7.3 The Program will be responsible for the expenses of the Site Visit Team.
- 7.4 The Site Visit Team will conduct an exit meeting with the Program Director and other departmental representatives, and institutional administrators as requested. The exit meetings provide an overview of the strengths and weakness of the program, and review the subsequent steps in the accreditation review process. Before departing, the Site Visit Team will provide the Program with a site visit report that includes a summary of the program's strengths and weaknesses and compliance with the standards. The Program will be invited to return comments and clarifications.

7.5 The Site Visit Team will provide a copy of the Site Visit Report to the Chair of the Accreditation Review Committee.

8.0 Accreditation Review Committee Report and Recommendations

8.1 The Accreditation Review Committee will examine all documents submitted in connection with the accreditation review process. This review includes the Site Visit Report, and any comments and clarifications returned by the Program.

8.2 The Committee will prepare an interim report on accreditation, without recommendation, that will be sent to the Program for final comment and clarification.

8.3 Following the receipt of a response from the Program, the Committee will prepare a full report on accreditation to be sent to the Commission. This report will include a recommendation for one of the following accreditation statuses:

- ✓ **Full Accreditation:** a status granted to a Program when the available evidence indicates that an Applicant Program is in substantial compliance with all of the Standards of the Commission. Full accreditation is awarded for five (5) years.

- ✓ **Provisional Accreditation:** a status granted to a Program when an Applicant Program is in substantial compliance with the Standards of the Commission, and any deficiencies are such that they can be corrected within a short period of time. Provisional accreditation shall not exceed two (2) years. During that time, if the Program can correct the deficiencies, the Program will be awarded Full Accreditation for the remainder of the five (5) year accreditation period. If the deficiencies have not been corrected within the two (2) year period, the Program will no longer be accredited.

- ✓ **Accreditation Denied:** when the available evidence indicates that an applicant Program is in substantial non-compliance with the Standards of the Commission.

9.0 Re-accreditation Process

9.1 A Program will be notified one (1) year in advance of the need to apply for re-accreditation.

9.2 A Program seeking re-accreditation will undergo the same accreditation review process as specified in this document. Re-accreditation will be for a period of up to seven (7) years.

9.3 Following the receipt of a response from the Program, the Accreditation Review Committee will prepare a full report on accreditation to be sent to the Commission. The report will include a recommendation for one of the following re-accreditation statuses:

- ✓ **Full Re-Accreditation:** a status granted to a Program when the available evidence indicates that an Applicant Program is in substantial compliance with all of the Standards of the Commission.
- ✓ **Probationary Re-Accreditation:** a status granted to a Program when an accredited Program experiences changes that cause the Program to fall below substantial compliance of all the Standards of the Commission. Programs on probationary status will be given a maximum of two (2) years to correct the problems that have caused them to fall below Commission Standards. If the Program successfully remedies the deficiencies, the Program will be restored to Full Accreditation status. If the Program is unable to correct the deficiencies within the two (2) year period, the Program will no longer be accredited.
- ✓ **Revoked Accreditation:** when the available evidence indicates that an applicant Program is in substantial non-compliance with the Standards of the Commission.

9.4 If the Commission determines that a currently accredited program has valid reasons for requesting a delay in its scheduled review, the Commission may extend its accreditation for up to one (1) year.

9.5 If an accredited program chooses not to apply for re-accreditation, the Commission will withdraw its accreditation.

10.0 Commission Final Report on Accreditation/Re-Accreditation

10.1 The Commission will review the final report on accreditation and recommendation of the Accreditation Review Committee and make a final determination on accreditation/re-accreditation of the Program.

10.2 The Program Director, the chief academic officer, and the president will be notified in writing of the Commission's determination and will receive a copy of the Commission's final report on accreditation/re-accreditation. Reasons for *Provisional Accreditation, Probationary Accreditation, Accreditation Denied, and Revoked Accreditation* will be specified.

10.3 Only Programs receiving *Full Accreditation, Provisional Accreditation, or Probationary Re-accreditation* will be listed on the CAPACS website, and in the Commission's "Registry of Programs" at the Baccalaureate, Masters, and Doctoral levels. Only these Programs are eligible to use the "CAPACS Accredited" logo in their informational materials (hardcopy and digital formats), registered under domestic and international trademarks with the United States Patent and Trademark Office (USPTO), following the guidelines published on the CAPACS website. *For additional information and disclaimers on the list and "Registry of Programs," and the approved use of the Commission's logos by accredited programs, please see Section 1.4, in this document.*

- 10.4 A Program receiving *Provisional Accreditation* or *Probationary Re-accreditation* will be permitted to correct deficiencies within a period specified by the Commission and submit evidence of compliance. At that time, the Commission will make a re-determination of the accreditation status of the Program.

11.0 Maintenance of Accreditation Status

- 11.1 To maintain accreditation during the period approved by the Commission, and to remain listed on the CAPACS Website and in the Commission's "Registry of Programs," the Program must pay the annual fee as specified by the Commission. Payment of the annual fee also is required to maintain the Program's eligibility to use the "CAPACS Accredited" logo in its informational materials (hardcopy and digital formats), registered under domestic and international trademarks with the United States Patent and Trademark Office (USPTO), following the guidelines published on the CAPACS website. *For additional information and disclaimers on the list and "Registry of Programs," and the approved use of the Commission's logos by accredited programs, please see Section 1.4, in this document.*
- 11.2 An accredited Program must submit an annual report by July 1st, to the Vice Chair of the Commission for review. This report will specify continuities and changes in the Program's resources, faculty, administration, and curriculum. The annual report will become part of the Program's permanent accreditation file. Continued accreditation is contingent upon maintaining the standards by which the program was most recently accredited and/or making progress towards removing deficiencies identified by the Commission.
- 11.3 If the annual report is not received on time and/or does not receive formal acceptance, the Commission may decide to pursue further inquiry which may lead to probationary accreditation or a decision that the program's accreditation be revoked. The Vice Chair of the Commission will communicate the Commission's findings to the Program.
- 11.4 If substantial changes occur, the Program shall notify the Commission of the nature of the changes. Substantial changes are defined as changes in the preconditions of program eligibility and/or the addition or deletion of a degree, major, or concentration. The Commission may require the Program to submit an updated Self-study Report to maintain its accredited status; a site visit also may be required. Based upon a review of the substantial changes and required information, the Commission may award *Full Re-accreditation*, grant *Probationary Re-accreditation*, or determine that the Program's accreditation be revoked (*Revoked Accreditation*).

12.0 Appeal of Commission Decisions on Accreditation/Re-Accreditation

- 12.1 Grounds for appeal are that the final determination is clearly erroneous as to fact or interpretation of the Standards or that there was a procedural error in the accreditation/re-accreditation review process.
- 12.2 A Program initiating an appeal will retain its current accreditation status (See Section 8.3 or 9.3, in this document) until the appeal process is completed.

- 12.3 A Program wishing to appeal (hereafter referred to as the Appellant) must submit a request for a hearing to the Commission Chair in writing within 30 days of notification of the Commission's final determination on accreditation/re-accreditation. The request shall state specifically the basis of the appeal and include an agreement to bear all costs as indicated, below, in Section 12.10, of this document.
- 12.4 Within 30 days, the Commission Chair shall provide the Appellant with a list of six names of impartial persons (and brief biographical sketches) as potential members of the Appeals Panel (hereafter referred to as the Panel). Each of these persons shall have agreed that he or she is willing to serve on the Panel and have been enjoined from discussing the matter with anyone. Members of the Commission and the Program's Accreditation/Re-Accreditation Review Committee are not eligible for panel selection.
- 12.5 The Appellant shall review the list of six (6) names and have an opportunity to strike no more than two (2) persons.
- 12.6 The Commission Chair will select three (3) persons from the remaining pool.
- 12.7 The three (3) persons selected will constitute the Appeals Panel. The Commission will notify the Panel members of their selection. Within thirty (30) days of notification, the Panel members will select one of their members to serve as Panel Chair and notify the Appellant and the Commission.
- 12.8 Within thirty (30) days of selection, the Panel Chair shall determine the date and the site of the hearing in conjunction with the Appellant and the Commission. After consultation with the Commission Chair and the Appellant, the Panel Chair shall decide whether the hearing is open or closed and who will be in attendance. The Panel Chair shall then formally notify the Appellant and the Commission Chair of the date and location of the hearing at least 30 days in advance of the hearing. The hearing must be held within 90 days of the selection of the Panel Chair.
- 12.9 The Commission will provide each Panel member and the Appellant with:
- a. A copy of the appeal request stating the grounds for the appeal.
 - b. A copy of the Accreditation Self-Study Report.
 - c. A copy of the Site Visit Team Report.
 - d. A copy of the Accreditation/Re-Accreditation Review Committee Report and Recommendation.
 - e. A copy of the Commission Final Report on Accreditation/Re-Accreditation,
 - f. Copies of the Annual Reports, if applicable.
 - g. A copy of the published version of the accreditation *Standards* used in the review process.
 - h. A copy of the published version of the *Accreditation Policies and Procedures* used in the review process.
 - i. A copy of the published version of the *Accreditation Review Process Guidelines* for completing the Self-Study Report used in the review process.
 - j. Any relevant correspondence and documentation on file.

- 12.10 The Appellant shall pay all travel expenses of the Panel members and all other costs associated with the hearing except the Commission's legal fees, if any.
- 12.11 At least two (2) weeks before the hearing, the Appellant may request in writing that a transcript of the hearing be made. The Appellant must pay for the transcript costs. If the Commission desires a transcript, the costs will be shared equally.
- 12.12 The hearing must be conducted in the presence of all Panel members. The procedures must include the right of the Appellant and Commission to appear before the Panel, to be represented by counsel if so desired, to present oral and documentary evidence, to cross examine witnesses, and to present oral argument within the time limits prescribed by the Panel Chair.
- 12.13 The final decision of the Panel shall be based on all of the evidence presented.
- 12.14 Within thirty (30) days of the completion of the hearing, the Panel shall submit its decision and rationale in writing to the Appellant and Commission.
- 12.15 The decision of the Appeals Panel is binding upon both parties.
- 12.16 Public statements concerning the Appellant's accreditation/re-accreditation status shall be withheld until the Panel has notified both parties of the Panel's final decision.

Appendix A

Accreditation and Re-Accreditation Process

Suggested Timeline

1. Process Begins: The Program submits a completed *Accreditation Application Form* with non-refundable *application fee* of \$100 to the Commission Chair. If the preconditions are met per the application information, the program begins work on the self-study report. The Program will refer to the following documents throughout the review process: (a) the accreditation *Standards* (at the Baccalaureate, Masters, or Doctoral Level); (b) the accreditation *Self-study Guidelines* (at the Baccalaureate, Masters, or Doctoral Level), for completing the Self-study Report; (c) the *Accreditation Review Process Guidelines*, and (d) the *Accreditation Policies and Procedures* for Applied Sociology, Clinical Sociology, Public Sociology, and Sociological Practice Programs.

Estimated time: 2-3 weeks

2. The Program prepares the Self-study Report.

Estimated time: 2-3 months

3. The Program submits the Self-study Report (1 copy) *with accreditation fee* of \$2000 to the Commission Chair. The Self-study Report is a single digital document in MS Word or PDF format that includes a table of contents with live links to the narrative and supporting materials in the appendices. The Commission Chair reviews the Self-study Report for completeness. If the Self-study Report is deemed “complete,” the Chair and Vice Chair of the Commission form an Accreditation Review Committee, and designate the committee chair and site visit team, in consultation with the Executive Committee. The Commission Chair requests an additional five (5) copies of the Self-study Report for distribution to the committee, and provides the Program Director with the email addresses of the members of the Accreditation Review Committee for the distribution.

Estimated time: 3-4 weeks

4. The Accreditation Review Committee reviews the Self-study Report and schedules a conference call, and additional conference calls as necessary.

Estimated time: 2-3 months

5. If the Self-study Report is deemed acceptable by the Accreditation Review Committee, a site visit is scheduled.

Estimated time: 2-3 weeks

6. The Site Visit Team conducts a site visit hosted by the Program in September, October, November, February, March, or April (see Section 7.1, in this documents for exceptions).

Estimated time: 3 days (Refer to *Accreditation Review Process Guidelines* for details.)

7. The Site Visit Team writes a Site Visit Report and submits it to the Program Director for clarifications and supporting documentation as necessary, and to the Chair of the Accreditation Review Committee for distribution to the full committee. The Chair of the Accreditation Review Committee schedules a conference call, and additional conference calls as necessary, and prepares an interim "Report on Accreditation" (without recommendation) for comment by the Program.

Estimated time: 3-4 weeks

8. The Chair of the Accreditation Review Committee writes the final "Report on Accreditation and Recommendation," for the Commission, incorporating any changes.

Estimated time: 2-3 weeks

9. The Chair of the Accreditation Review Committee submits the final "Report on Accreditation and Recommendation" to the Commission Board (summer meeting/August or winter meeting/February) with all available evidence for review. The Board accepts or rejects the recommendation.

Estimated time: 1 day

10. Process ends:

- The Program is recommended and accepted by the Commission Board for *Full Accreditation* (up to 5 years).
- The Program is recommended and accepted by the Commission Board for *Provisional Accreditation* (2 years).
- A program that is not recommended and accepted for accreditation by the Commission Board will receive a determination of *accreditation denied* (see Sections 1.14, and 8.3, in this document).
- The Program is recommended and accepted by the Commission Board for *Full Re-accreditation* (up to 7 years).
- The Program is recommended and accepted by the Commission Board for *Probationary Re-accreditation* (2 years).
- A program that is not recommended and accepted for re-accreditation by the Commission Board will receive a determination of *Revoked Accreditation* (see Sections 1.14, 9.2, and 9.3, in this document).