# Accreditation Commission
## Policy and Procedure Manual

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ACCREDITATION COMMISSION POLICY AND PROCEDURE MANUAL

Part One: Introduction

Mission and Vision of the Association for Clinical Pastoral Education, Inc. (ACPE)

Mission
Advancing exceptional experience-based theological education and professional practice to heal a hurting world.

Vision
We will be an organization where people of diverse faith traditions, backgrounds, and cultures collaborate to provide innovative experiential education. We will lead in the theory and practice of clinical education for spiritual care. We will promote and broaden the provision of quality professional theological education in a variety of settings.

Purpose of Accreditation
The Accreditation Commission establishes procedures and guidelines, detailed in the ACPE Accreditation Manual, for granting and maintaining the accreditation of an ACPE center and its programs. The Accreditation Commission has authority to take action on all accreditation matters, including granting, deferring, denying, suspending, or withdrawing accreditation for any center, subject to the ACPE appeal process.

Through its accreditation process, ACPE seeks to:
- assure quality in clinical pastoral education (CPE).
- assure students of consistency in educational programs.
- recognize achievement in creative programming.
- promote fairness in conduct and evaluation of educational programs.
- integrate unique clinical/educational resources.
- facilitate planning and evaluation.

Purpose of Accreditation Policy and Procedure Manual
The Accreditation Commission under governance of ACPE has established the following accreditation policies, procedures and appendices (accreditation reporting formats) to foster quality and consistency in the ACPE clinical pastoral education programs. This policy and procedure manual outlines the authority and function of the Accreditation Commission, composition of the Commission, qualification and credentials of the persons involved in accreditation evaluation and working meetings per year. In addition and most importantly, the Accreditation Commission is tasked along with the ACPE Standards Commission to develop clear and effective accreditation process definitions, policies and procedures and reporting requirements to eliminate procedural confusion and increase timely compliance with ACPE CPE accreditation. Please refer to the ACPE 2010 Definition of Terms Interim Revisions 2015 for definitions of all terms used in this document.

Note: all references to CPE throughout this document are understood to be ACPE accredited Clinical Pastoral Education (ACPE-CPE).
Part Two: Accreditation Commission

Authority

The Accreditation Commission (hereafter the “Commission”) is established under the governance of the Association for Clinical Pastoral Education, Inc (ACPE) as the agency responsible for establishing polices and procedures for work prior to and including accreditation of CPE centers and programs.

- The Accreditation Commission has authority to take action on all accreditation matters, including granting, suspending or withdrawing accreditation for any center or program, subject to the appeal process of ACPE. The Commission establishes procedures and guidelines governing accreditation processes for accredited centers (ACPE Standard 300).
- Changes in accreditation policy, procedures and criteria are subject to review and approval of the ACPE Board of Representatives.
- The Commission participates in review of ACPE standards to ensure they are adequate to evaluate the quality and relevance of education provided in ACPE accredited centers and relevant to the educational needs of students.
- The Accreditation Manual interprets, but does not supersede, ACPE standards.
- The U.S. Department of Education, Office of Post-Secondary Education, recognizes ACPE as a national accrediting body making ACPE accredited centers eligible to participate in these Federal programs:
  - International Exchange Visitors Program.
  - Veterans Educational (tuition) Benefits.

Function

ACPE has established policies governing the function of the Accreditation Commission and ACPE accreditation processes. These include:

- setting minimum qualifications for those involved in accreditation reviews, processes and decisions.
- making available the credentials/resumes of persons involved in accreditation reviews and decisions.
- avoiding bias and conflict in accreditation decisions.
- implementing processes for orienting and training persons involved in accreditation reviews and decisions.
- defining the role of regional accreditation committees.

Composition

The Accreditation Commission is comprised of a maximum of 14 voting members and will include educators, two public members and a practitioner:

- Commission chair nominated by the Commission and confirmed by the Board. The chair serves one three year term and may not serve two consecutive terms;
- Nine regional representatives recommended to the Representation and Nomination Committee (RANC) by each region;
- Two at-large members, one of whom must be employed as a practitioner/clinician, nominated by the Commission and subject to Board approval; and,
• Two public members nominated by the Commission and subject to Board approval. Commission members may serve two three-year terms. In the event a member completes a term for another member, that person is eligible to complete two full terms of office. The RANC nominates Commission members, chair and chair-elect to the Board, which appoints these persons. Prior to the beginning of the chair’s last year in office, the Commission recommends a chair-elect to the RANC. The chair-elect serves one year prior to becoming chair. The chair-elect has no vote unless that person is also a regional representative or at-large member. The chair votes only in case of a tie.

Communication between the Commission, the Regions, and the ACPE National Office
While the Accreditation Commission is responsible for all accreditation issues throughout the organization, it depends on robust communication with the regions and with the national office. Accreditation matters flow back and forth between the Commission, regional accreditation committees, and the national office. In the spirit of collegiality, face-to-face interaction, and clarity, most accreditation matters begin at the regional level. Because centers are located within regions and because regional accreditation committees know regional matters best, center-centric matters should be reported to the regional accreditation committee prior to being moved to the Commission or national level. Of highest importance is that communication be clear and complete in these matters, and that the processes and procedures outlined in the Accreditation Manual and in these policies and procedures be followed. The Commission is always interested in hearing feedback on processes, policies, and procedures that do not support center-centric focus.

Types of Accreditation and Accredited Member Centers
Accreditation by ACPE recognizes and confers accredited member status to three types of centers:

• Multi-Institutional Sponsor (System Center),
• Single Institutional Sponsor (Institutional Center), and
• Freestanding Center.

The following models visually represent the appropriate structure for accreditation of member centers.
Types of Accredited Centers

Model 1: Multiple Institutional Sponsor

Accredited System ACPE Center

Educational Placement
- Requirement: Educational Agreement
- No Accreditation is extended; only allows for placement of educational site

Satellite Program
- Requirement: Satellite Program Contract and Placement Specific Handbook
- Uses Accreditation of Host Center

Placement Site
- Requirement: Placement Agreement and Placement specific Handbook
- No Accreditation is extended; only allows for placement of clinical ministry

Host

Accredited System Component Sites
Types of Accredited Centers

Model 2: Single Institutional Sponsor

Institution Sponsored CPE

- Educational Placement
  - Requirement: Educational Agreement
  - No Accreditation is extended; only allows for placement of educational site

- Satellite Program
  - Requirement: Satellite Contract
  - Uses Accreditation of Host Center

- Placement Site
  - Requirement: Placement Agreement
  - Satellite program contract must specify placement agreement

Host

Placement Site
- Requirement: Placement Agreement
- No Accreditation is extended; only allows for placement of clinical ministry
Types of Accredited Centers

Model 3: Freestanding Center
Independently Incorporated CPE Center with no Sponsor

Requirement:
Placement Agreement

Placement Site
Requirement: Placement Agreement
No Accreditation is extended; only allows for placement of clinical ministry

Freestanding Sponsored Center

Educational Placement
Requirement: Educational Agreement
No Accreditation is extended; only allows for placement of educational site

Satellite Program
Requirement: Satellite Contract
Uses Accreditation of Host Center

Placement Site
Requirement: Placement Agreement
Satellite program contract must specify placement agreement
Qualifications and Credentials of Persons Involved in Accreditation Evaluation

Persons involved with ACPE accreditation work (Commission members, regional accreditation committees and others who participate in accreditation site review) must have sufficient knowledge and expertise to permit competent assessment of programs of clinical pastoral education. They will include educators, practitioners and public members as required. They must have one or more of the following qualifications:

- post-baccalaureate theological degree;
- successful completion of two or more units of clinical pastoral education;
- professional practice of ministry for five years or longer;
- post-baccalaureate degree in a field related to education or sociology or appointment to the faculty of a seminary or university;
- recognized certification by the Association of Professional Chaplains or a related cognate group; or
- medical or allied health professional practice.

Additional criteria for the practitioner member of the Commission include:

- successful completion of four or more units of ACPE clinical pastoral education;
- professional practice of ministry for five years or longer;
- currently employed in a pastoral care ministry position and
- ACPE clinical member.

Additional criteria exist for Public Members, who may not be:

- employed by or associated with agencies or institutions affiliated with ACPE, Inc.;
- in service as an officer or staff member of a cognate ministry or chaplaincy group;
- an ACPE officer or employee, or
- the spouse, domestic partner, parent, child, or sibling of anyone in active practice in an accredited ACPE member center or any of the above.

Requirements and Duties of Persons Involved in Accreditation

All persons participating in the accreditation process are required to:

- Be familiar with the ACPE Accreditation Manual in general and know the requirements for the specific type of reviews.
- Have working knowledge of ACPE standards and all accreditation review processes and criteria.
- Sign and abide by the non-disclosure agreement (See Appendix 1) when participating in accreditation processes and reviewing or using student records during accreditation review.
- Present themselves in a professional manner, conducting their work with a spirit of collegiality and service.
- Complete an orientation to Standards of the Association for Clinical Pastoral Education and the ACPE Accreditation Manual, with special focus understanding the following guidelines for fulfilling roles and responsibilities. The Chair of the Commission is responsible for orienting Commissioners. This orientation will take place through several avenues, which may include e-mail correspondence, conference calls, or in-person orientation at Commission meetings.
- In addition, public members sign and abide by the declaration of qualification as a public member. (Appendix 19).
Requirements and Duties of Persons Serving in the Roles of Site Team Members

More detailed information regarding persons involved in accreditation evaluations can be found in the Training Manual for the National Site Team Chairs.

Roles and Responsibilities of a Regional Accreditation Committee Chair

Congratulations on being selected chair of your region’s accreditation committee. Your role will involve a variety of responsibilities at the regional and Commission level. The expectations outlined below may not include expectations of your particular region.

Proceedings of Regional and National Accreditation Meetings

- Communicate dates, times, location of bi-annual meetings (Spring and Fall).
- Formulate the working agenda and convene committee meetings.
- Convey and implement financial policy including authorization of expenses.
- Ensure minutes are kept, approved, and disbursed per regional protocol.
- Provide members and the region at large continuing education.
- Convey and implement financial policy including authorization of expenses.
- Instruct site team members about their role and relationship with site team chairs.
- Familiarize committee members with forms and documents for reviews and presentations.
- Educate site team members on criteria to evaluate personal bias versus objectivity.
- Review Code of Conduct for site team members.
- Select, support, and mentor strong site team members.

Lead Responsibilities within the Region

- Master the process and particular paperwork for each type of accreditation review.
- Keep a file of trained, qualified, competent, knowledgeable Site Team Members.
- Retain and manage the master set of regional files on centers.
- Report to the region actions and matters of accreditation.
- Provide the region continuing education regarding accreditation.
- Serve as liaison between the region and Commission for questions or concerns.
- Consult with supervisors, centers and potential host centers for new programs.
- Receive copy of notification of supervisory changes.
- Discover and monitor vacancies to avert forfeiture of accreditation.
- Take and address postponement requests noting the cycle date is unchanged.
- Accept copies of substantive change in centers or programs.
- Grant or deny provisional approval.
- Interface with the Commission about a called review or adverse action.
- Manage findings of cross-commission concern about ethics or certification.
- Understand in detail the time cycle for requests to come to the Commission.
- Provide promptly to the Commission Chair all regional actions and/or concerns.
- Consult, provide clarification, and/or hear and process accreditation concerns.
- Report commission actions to centers within your region.
Joint Responsibilities

Regional accreditation committee chairs who serve as Commissioners have joint responsibilities between the region and the ACPE Accreditation Commission.

Annual Reports
- Receive reports by deadline (January 15) and, if late, recommend notation for Standard 300.1.
- Organize and review reports through committee.
- Allow requests for additional material.
- List all reports for block vote by the Commission at its Spring Meeting.
- Where applicable, recommend notation citing the unsatisfied standard(s) in writing.

Ten Year Reviews or Accredited Member requests from Satellite Program or Candidacy Center
- Assist centers in scheduling a Spring or Fall Commission Decision.
- Take the lead in working with National site team chair to select Site Team Members to complete the team and to set a time for the site visit.
- Ask to be copied in communications during the process.
- Mentor centers as needed.

Five Year Reviews
- Assign reviewer pairs; one reviewer will serve as lead and be the administrative contact
- Confirm receipt of all documentation by the March 31 deadline.
- Request to be copied in communications during the process if desired or needed.
- Receive a copy of the reviewers’ preliminary report to the center.
- Receive a copy of the center responses due within 30 days.
- Receive a copy of the reviewers’ final report suggesting committee action to:
  - receive the report and affirm the center,
  - obtain more information and make recommendations,
  - consult with the center, or
  - request a site visit.
- Submit to Commission a written summary of affirmations for vote on the consent agenda.
- If notations are recommended, cite standards in writing and submit to Commission for review and possible assignment of notations.

Request to Add a Satellite Program
- Ensure documentation is filed under the Host Center.
- Receive a completed satellite program checklist.
- Receive a written request to add a satellite program.
- Confirm the location of the satellite program. If cross-regional, coordinate all activity with that region’s accreditation committee chair.
- Confirm the required program agreement is signed properly.
• Confirm student handbook is site-specific and complies with Standards.
• Determine satisfactory supervisory involvement.
• Grant or deny provisional approval and document reasoning.
• Share permission to start CPE with the host center.
• Clarify whether the request includes being listed in ACPE directory.
  o Per listing, plan a one-person site visit within six months to confirm compliance.
  o Require and receive a visit report verifying compliance with standards.
  o Obtain a formal recommendation by the regional committee.
  o Submit to ACPE the region’s written recommendation and file, which includes:
    ▪ the site visit report,
    ▪ program agreement, and
    ▪ handbook.
• Ensure the request receives a final decision by the Commission.

**Request to Add Supervisory CPE**
• No site visit is required.
• Receive three copies of all required materials to review for compliance:
  o Written proposal that includes:
    ▪ Reasoning for addition of supervisory CPE,
    ▪ Prospects of supervisory students,
    ▪ Demonstration of sufficient faculty for this level of programming
    ▪ Connection with institutional mission
    ▪ Demonstration of sufficient funding, and
    ▪ A student handbook with curriculum that meets Standards for supervisory CPE.
• Send letter of provisional approval to center and copy Commission Chair and ACPE accreditation staff.
• Communicate to accredited member center authorization to begin supervisory CPE.
• Complete regional review, approval, and submittal to the Commission for a final decision.

**Request to Add a Component Site**
• Confirm the location of the component site. If cross-regional, coordinate all activity with that region’s accreditation committee chair.
• Receive statements from ACPE/region to verify good financial standing.
• Review revised administrative plan, program organization for compliance.
• Confirm student handbook is site specific and complies with Standards.
• Secure a qualified regional site visit chair if an on-site visit is necessary.
• Conduct regional review, vote, suggest add/not add for Commission action.
Request to Start a Candidacy Center

- Receive a completed candidacy center checklist.
- Confirm whether the proposed candidacy center is in your ACPE Region or cross-regional.
- Confirm that the feasibility study is complete.
- Confirm that the student handbook complies with Standards.
- Contact supervisor to begin discussion of assignment of regional site team chair.
- Receive site team report.
- Grant or deny provisional approval of candidacy status and document why.
- Advise the Commission Chair and Accreditation staff of this decision.
- Share permission to start CPE with the candidacy center.
- Ensure the request receives a final decision by the Commission.

Understanding the National Commission’s Review Cycle

The Accreditation Commission requires reviews at certain times within a cycle, which is within a twelve month period of time. Regional accreditation chairs are involved in these reviews.

The Commission acts on:
- Annual Reports at its Spring Meeting,
- Five Year Reviews at its Fall Meeting,
- Ten Year Reviews and Requests for Accredited Member Status at each meeting, and,
- Other business as required at each meeting.

Other final actions are associated with the date of request and time of visit:
- A Center in Ten Year Review submits material 30 Days before a visit.
- A Site Team Chair has 14 days after a visit to provide Site Visit Report—Part I
- The applicant/center provides the team and Reviewer a written response within 30 days.
- Within 14 days, the site team provides the Accreditation Commission Chair with all material plus Site Visit Report—Part II Final Recommendations.
- The Accreditation Commission Chair assigns a Commission reviewer.
- The Commission reviewer writes and provides a report to the Commission at its next regularly scheduled meeting and ensures that all review materials are available at the meeting for reference or review as needed by the entire Commission.

Duties as a Commission Member

All members of the Accreditation Commission have responsibilities related to the successful work of the Commission and ACPE, Inc. Commissioners must:

- Attend all meetings.
- Fulfill responsibilities as assigned, including assignments as Commission reviewers, for subcommittees, and in regard to complaints.
• Submit to the Commission Chair all material, agenda, and decisions for national action, including formation of consent agenda items and other agenda items from the region at least forty-five days prior to the Commission’s scheduled meeting.
• Prepare Commission reviewer reports for assigned centers and recommend Commission’s final action; bring all reviewed materials to the Commission meeting so they are available to all Commissioners if needed for decision making.
• Inform Commissioners about regional accreditation activities and concerns.
• Serve on sub-committees of the Commission as assigned.
• Serve as members of national taskforces or as Commission representatives, as assigned.
• Participate in continuing education events for ACPE leaders.
• Consult across commissions.
• Assist in reviewing to maintain current manuals.
• Assist in requests to provide continuing education or orientation.
• Share wisdom and learn from emergent curriculum in Commission business.
Part Three: Commission Meetings

The following items detail the structure and operating policies that the Accreditation Commission uses in its meetings, which may occur in person, by telephone, or via other electronic technology.

Frequency
There shall be at least two working meetings per year, one at the time of the ACPE Annual Conference and another at the time and place of the annual meeting of the Board and commissions. Other meetings may be held, at the discretion of the Accreditation Commission Chair, at other times, either in person or by video conference telephonic or other electronic means.

Agenda
The Commission chair, in consultation with Commission members and the ACPE Accreditation staff, sets the agenda. Voting is by simple majority. The chair votes only in the case of a tie.

Commission Review Requirements
The following requests require reviews at the Commission level:
- Ten Year Review.
- Five Year Review if notations are recommended from the regional accreditation committee.
- Request for Accredited Member Center status from satellite program or candidacy center.
- Addition of Supervisory CPE.
- Self-Report of Non-Compliance with Standards, for notation recommendation.
- Removal of Notations and Deficiencies.
- Requests for Review Postponement.

The following requests do not require reviews at the Commission level but must be reported to the Commission for acceptance:
- Addition of Satellite Program.
- Program Changes.
- Requests for Voluntary Withdrawal of Accreditation.

Consent Agenda
The Commission uses a consent agenda process to expedite routine, procedural decisions and decisions likely to need no further action by the Commission. The consent agenda is presented by the ACPE Accreditation Commission Chair at the beginning of a Commission meeting. Any items may be removed from the consent agenda by the request of any member, without question. Items not removed from the consent agenda may be adopted by general consent without debate. Removed items may be taken up immediately after the consent agenda or placed later on the agenda at the discretion of the Chair. Examples would include, but not be limited to:
- Approval of minutes;
- Approval of requests not requiring discussion (e.g., requests for withdrawal of accreditation, program changes, etc.).
• Approval of reviews not requiring notations, commendations, deficiencies, or discussion, as determined by the Commission reviewer (reviews of annual reports, five- and ten year reviews, and new requests for accredited membership);
• Final approval of proposals or reports that the Commission has been dealing with for some time and with whose implications all members are familiar;
• Routine matters such as appointments to committees;
• Reports provided for information only; and,
• Correspondence requiring no action.

All other requests which have notations, commendations, deficiencies, or are in need of discussion will not be included on the consent agenda.

The following process is used in creation and use of the consent agenda:

• The standard review process currently in place will continue to be used: regional accreditation committee chairs will provide a list of centers for review, and those documents requiring review by a Commission reviewer will be assigned for a final recommendation to the Commission. Apart from this list, the regional accreditation committee chairs and the Commission reviewers will supply the ACPE Accreditation Commission Chair with a list of other centers needing action, which could be considered for the consent agenda.
• Commission reviewers will send the Chair the list of those centers to be recommended for the consent agenda two weeks after having received the material.
• The ACPE Accreditation Commission Chair will make reports and other matters for the meeting agenda known in advance and distributed with an electronic agenda package thirty (15) days prior to the beginning of Commission meetings.
• When preparing the meeting agenda, the chair will include for the agenda those declarations of whether or not the matters can be included on the consent agenda as received from the regional accreditation committee chairs and from public and at large members.
• The list of proposed consent agenda items will be e-mailed to all Commission members two (2) weeks prior to the meeting of the Commission.
• The consent agenda and supporting documents will be provided to the commissioners the night before the beginning of the Commission meeting.
• The chair will ensure that the consent agenda adoption is at a time on the agenda to ensure the greatest number of members possible present for its vote.
• At the beginning of the meeting, the chair will poll the Commission to determine if any items will be removed from the consent agenda and discussed individually.
• If a member requests that an item be removed from the consent agenda, it must be removed. Commissioners may request that an item be removed for any reason. Commissioners may wish, for example, to discuss the item, to query the item, or to register a vote against the item.
• Once an item has been removed from the consent agenda, the chair will determine at which time in the meeting the matter will be considered. If the item removed from the consent agenda is a review with need for discussion of a subcommittee, the subcommittee will meet and provide a recommendation to the Commission.
When no further items are to be removed, the chair or secretary reads the numbers of the remaining consent items. Then the chair states: “If there is no objection, these items will be adopted.” After pausing for any objections, the chair states, “As there are no objections, these items are adopted.” It is not necessary to ask for a show of hands.

All items removed from the consent agenda will be voted on separately during the course of the Commission meeting.

When preparing the minutes, the secretary will include the full text of the resolutions, reports or recommendations adopted on the consent agenda.

If issues emerge later in the Commission meeting about a center which was part of the consent agenda adoption, the Commission may choose to rescind its previous vote, discuss issues, and vote again, according to Robert’s Rules of Order.

Meeting Minutes
The Commission chair submits minutes of meetings to the Board for review and to ACPE for the record. The record of commission accreditation actions are kept as specified in the 2010 Accreditation Manual Interim Revisions 2015, Appendix 7E, “Guide for Policy on ACPE Accreditation Records.” Minutes are available to the ACPE and the Commission within 45 days of the end of the meeting. These minutes are not available to the general membership or to the public.

Meeting Protocol
ACPE makes every effort to establish clear and effective controls to prevent bias conflicts of interest by the Commission members, regional committee members, consultants, administrative staff; and other agency representatives.

Bias and Conflict of Interest
“Bias” refers to a pre-existing impression or opinion, either positive or negative, about a center, the institution in which it is located, or its staff, which might affect one’s ability to assess accreditation matters objectively. “Conflict of interest” is any circumstance in which a person, close associate or institution might be adversely affected by or benefit from an accreditation decision. CPE center representatives, regional accreditation committee members, Commission members, or the regional committee chair or Commission chair may request a person to withdraw from discussion and vote about a center if the person is judged to hold a bias about the center under review or its staff because:

- the center previously employed or had an association with the person, or
- the person has demonstrated lack of objectivity about the evaluation of the program or center under review.

All persons involved in policy making or accreditation decisions (Board of Representatives, Accreditation Commissioners, consultants, and administrative staff) will receive initial training and annually sign the Conflict of Interest statement.

Withdrawal from the Review Process
Persons involved in accreditation review or accreditation decisions are expected to withdraw from the review process if they have a conflict of interest or hold a bias about the center under review.

Sub-committees
The Commission may assign a sub-committee(s) of the Commission to review an accreditation
request and formulate recommendations for action by the Commission. Sub-committees may also be assigned for work regarding educational complaints.

**Review/Revisions of Standards and/or the *Accreditation Manual* and Policies and Procedures**

**Commission Proceedings**

ACPE accredits only those institutions that are legally authorized under applicable state law to provide a program of education beyond the secondary level. See ACPE 2010 *Accreditation Manual Interim Revisions 2015* Part Two. I. A. Accreditation of Centers and Programs.
Part Four: Operational Policies and Procedures

The following are operational policies and procedures set by the Accreditation Commission in regard to the processes required for centers to maintain membership or add programs.

Annual Reports
Each Accredited Member Center, Satellite Program, and Candidacy Center must complete and file an Annual Report by January 15 of each year. These reports are managed through regional accreditation committees, and these committees make recommendations to the Accreditation Commission about them at the Spring meeting each year. Regional accreditation committee chairs will follow the procedures listed in the 2010 Accreditation Manual Interim Revisions 2015 to assist centers in completing these reports and making recommendations to the Commission annually. Unless the regional accreditation committee recommends a specific action about a specific center, the annual reports from each region become part of the consent agenda for affirmation at the Spring Commission meeting.

Processes for Adding Programs, Placements, and Inactive Membership Status.
Regional accreditation committee chairs will follow the procedures listed in the 2010 Accreditation Manual Interim Revisions 2015 to assist centers in the following processes:
- Adding a Satellite Program;
- Adding Supervisory CPE;
- Adding Component Sites;
- Starting a Candidate Center;
- Changes in Centers/Programs;
- Adding an Educational Placement Site;
- Request for Inactive Status; and
- Request for Reactivation of Membership Status.

Process for Attending to Centers’ Self-Reports of Standards Non-Compliance (See 2010 Accreditation Manual Interim Revisions March 2015, Part Two. II. G.)

Centers applying for continued Accredited Membership, Satellite to Accredited Member or Candidate to Accredited member status. (See 2010 Accreditation Manual Interim Revisions March 2015, Part Two policy and steps for each accreditation process.)

Preparation for Five Year Reviews
Five year reviews are conducted at the regional level and then forwarded to the Commission for a vote. Only if the regional accreditation committee has recommended notations does the Commission assign a Commission reviewer to present a five year review with notations to the Commission for its vote. All other five year reviews are accepted by virtue of the regional recommendation that the centers’ accreditation be continued without notation. Commendations are not given for five year reviews. All initial requests for candidacy centers and satellite programs that want to be listed are done at the regional level. Please see Appendix 18: Process Map of Timeline to Accreditation.
Preparation for a Site Visit
The regional accreditation committee chair serves an important function in the process of a site visit. The regional chair assists in two particular ways: coordination of the formation of a site team and a site visit date with the National site team chair, and support of the Center with consultation and mentoring to bring about a successful site visit.

Support of Site Team Formation and a Site Visit Date
Regional chairs work with National site team chairs to form site teams composed of educators and practitioners that will best support the centers being reviewed. One member of the team will be a practitioner. This person will serve as a full member of the team and participate in all aspects of the site visit, particularly providing insight and feedback related to the ways in which CPE is provided through curriculum and clinical settings, how it is received by students, and how well the program prepares students to provide spiritual care. The requirements for a practitioner on the site visit team are: at least four completed units of ACPE CPE, five or more years professional practice of ministry, and current employment in a pastoral care ministry position.

Because of the importance of forming teams that will be unique to the centers’ needs, regional chairs should become aware of regional members’ abilities and competency in using the tools and methods of ACPE CPE, such as the action/reflection model. In consultation with National site team chairs, regional chairs suggest persons they believe will be capable of hearing the unique stories and narratives of centers being reviewed, as well as those who will be competent to judge how centers are meeting ACPE Standards. As well, the regional chair works with the National site team chair and the center to determine a date for the site visit. In short, regional chairs should be prepared to:

- Suggest members of the region to serve as site team members;
- Instruct appointed members in their role and relationship with national site team chairs;
- Support and mentor strong site team members through on-going regional training, education, and feedback;
- Provide consultation and mentoring to centers being reviewed;
- Work with the center, chair, and supervisor(s) to locate a date for the site visit; and,
- Stay in touch with centers in regard to accreditation matters.

Preparation for Ten Year Reviews or Accredited Member Center Requests
Regional chairs serve importantly during the process of ten year reviews or accredited member center requests. When regional chairs engage in early stages of these review processes, centers achieve better outcomes in review processes. Regional chairs:

- Assist centers and national site team chairs to schedule reviews for Commission action
- Select site team members to complete the team in collaboration with the national site team chair assigned by the Commission chair.
- Request copies of communications during the process for regional center files.
- Provide mentoring and/or consultation to the center as it moves through its review.

Ten year reviews and requests for accredited center membership from satellite programs or candidate centers are attended to by national site team chairs and regional accreditation committee chairs. Please refer to the training manual for the national site team chairs.
The Commission chair assigns the reviewer and advises the regional accreditation chair of that assignment. The regional accreditation chair and the national site team chair work together to form the site team, which includes at least two members from the region. The regional accreditation chair negotiates with the center and the national site team chair about dates. The work of the regional accreditation chair or designee is complete at this point, except to provide coaching and mentoring for the center as it prepares for its review. The material from the review comes directly from the national site team chair to a Commission presenter for all ten year reviews, satellite program to accredited member reviews, or a candidacy center to accredited member reviews. See Appendix 18 Process Map of Timeline to Accreditation.

Timely Reporting Requirements
All accredited member centers are required to report about their work in a timely manner, according to Standard 300.1: “All ACPE centers shall maintain compliance with ACPE Standards, reports, procedures, and fees as detailed in the ACPE Accreditation Manual.”

Student Evaluations
In accordance with Standard 308.8.1, student evaluations are due to students within 45 calendar days of the close of the unit. In rare, unusual circumstances, this deadline may be extended through the supervisor negotiating with the student and receiving approval from the regional accreditation chair. The supervisor’s evaluation will document this process, and such extensions must be reported on the center’s next annual report.

Student Unit Reports
All accredited member centers are required to submit names of and credit (or zero credit) for all students enrolled in their programs (including any who do not complete the program) by completing student unit reports to ACPE within 45 days of the end of each unit. Reports are filed electronically through the members-only section of the ACPE website (www.acpe.edu). Mailed or faxed reports are not accepted. Copies are forwarded automatically to the regional director and regional accreditation chair. If unit reports are not received within 45 days following the end of each unit of CPE Level I/II and Supervisory CPE, the center will be given a notation for Standard 300.1. Each region has within its own policies and procedures processes for communication between regional directors and regional accreditation committees regarding late student units. Retroactive credit for student units is not allowed.

Response to Notations, Requests, or Reviews
All accredited member centers, satellite programs, and candidacy centers must respond in a timely manner to any notations, requests, or reviews required by the Accreditation Commission as outlined in Standard 300.1. When in non-compliance with Standard 300.1, the center will be given the following notation:

Assign a notation for Standard 300.1 because of a late response. The Center is required to send an Interim Annual Report to the Accreditation Commission by (March 1 or September 1). The Center will use the annual report form for the report. The report will include information about the work of the center since
January 1. The Center must include with the interim annual report its plan of action to come into compliance with Standard 300.1.

When a center does not respond adequately within the timeframe specified by the Commission to remove a notation, the Commission may grant an Extension under the following conditions:

- The Center is without an ACPE Accredited Supervisor during the assigned period.
- The Center hires a new supervisor during the specified period of the notation.
- The center does not offer enough units to demonstrate compliance within the specified time.

The Commission, in consultation with the center’s regional accreditation committee chair will verify the center’s circumstances before rendering a decision.

An Extension can be no more than six months. If the Commission decides not to offer an Extension, one of the following actions may occur:

- Suspend the program; or
- Terminate Accredited Membership.

If the Commission grants an Extension, the Commission will notify the center in writing specifying the period granted to remove the notation.

**Listing or Advertising in the ACPE Directory**

Listings in the ACPE Directory are determined by the accreditation status of centers and satellite programs and by the status of supervisors in good standing.

*Accredited Member Centers*

All accredited member centers are listed, and the names of the Associate and ACPE Supervisors associated with them are included in that listing. Supervisory Education Students and Supervisory Candidates may not be listed in the directory of accredited centers.

*Satellite Programs*

A satellite program may be listed after having had a site visit and been approved as a satellite program by the Accreditation Commission. Regional accreditation chairs attend to these site visits and make recommendations to the Commission about listings.

*Candidate Centers*

Candidate centers or centers in the process of reviews to become accredited members with no recommended deficiencies or notations may be listed upon recommendation of the regional accreditation chair after a successful site visit and recommendation from the regional accreditation committee for accredited member status. Candidate centers are not required to be listed, so a regional accreditation committee chair may provide provisional permission to operate without action by the regional committee. The listing of these provisionally approved candidate centers would be followed with this disclaimer: “Pending Final Approval by the Accreditation Commission.” The permission to list provisionally would also allow the candidate center to advertise appropriately in other venues, though the disclaimer must appear in all communication.
(e.g., brochures, advertisements, student handbooks, etc.). After the Accreditation Commission vote, the disclaimer will be removed. If the candidate center is not granted accreditation by the Accreditation Commission, the listing will be removed until it has final approval by the Accreditation Commission.

**Component Sites**
Component Sites may be listed upon recommendation of the regional accreditation chair after a successful site visit and the regional accreditation committee.

**Updates to the Directory**
Updates to the directory should be sent to accreditation@acpe.edu. Staff will enter these into the center’s accreditation record and refer them to the webmaster to update the web page. No provisional listings will be accepted unless the regional chair of accreditation authorizes the national office to do so and provides the appropriate personnel with the information.

**Student Record: Confidentiality and Privacy Language**
Student records are confidential files maintained by a CPE center that may contain admissions material, reports, evaluations, individual contract for learning, and other material related to a student’s CPE experience. In addition, CPE centers must maintain privacy of these records. Please see the ACPE 2010 Accreditation Manual Interim Revisions 2015, Appendix 7B “Guide for Student Records.”

**Complaint Processes**
Complaints may be filed by students, members of ACPE, or the general public. See the ACPE 2010 Accreditation Manual Interim Revisions 2015, Appendix 10 Policies for Complaints Against the ACPE Accreditation Commission and Appendix 11 Complaints Alleging Violations of ACPE Educational Standards in Educational Programs. Also refer to the 2015 Processing Complaints of Ethics Code Violations in ACPE.

**Called Reviews**
Commissioners will be called upon to chair called reviews of centers found substantially out of compliance with ACPE Standards. The process of a called review will follow that described in the 2010 Accreditation Manual Interim Revisions 2015. The Commissioner serving as chair will use the Commission presenter’s report (see Appendix 15) with appropriate accommodations (e.g., there will not be a self-study) and including the reasons given by the Accreditation Commission as to the purpose of the called review. The Commissioner serving as chair will also complete a Report of Commission Work (Appendix 17) prior to presentation to the Commission.

**Vacancies and Performance Issues of Regional Accreditation Committee Chairs**
The Commission is comprised of persons who are elected from regions, and it has adopted the following processes in relation to those who become members of the Commission.

**Vacancies**
When a vacancy occurs on the Commission, the position will be filled as soon as possible. In regard to vacancies of public or at-large members, the position will be filled within 60 days. The Commission Chair, in consultation with the accreditation staff of ACPE, Inc., will propose names
to the Commission for its consideration. The Commissioners will vote, either in person or by use of technology, for or against the candidate. The newly elected member will begin participation at the next scheduled meeting. If a regional accreditation chair resigns, the position must be filled within 60 days, either by a new regional chair or by an interim regional chair, according to the process within the particular region. During the vacancy, the Commission Chair will forward all material about business of that region to the regional director or his or her designee for response.

**Performance Issues**
The Accreditation Commission recognizes that each region has unique ways in which to choose its leaders, among which are the regional accreditation committee chairs. However, because the work of the Accreditation Commission requires active, on-going, high-level participation from the regional accreditation committee chairs, who are considered Commissioners, persons filling these roles have concomitant responsibilities to function at a level of responsibility toward the Accreditation Commission. If a regional accreditation committee chair does not respond adequately to accreditation requests from the region, the Accreditation Commission Chair and the accreditation staff of ACPE may intervene with the regional director to assure that the accreditation needs of that region’s Accredited Member Centers are met. As well, a complaint may be filed against the Commission using the complaint processes described earlier in this section regarding the actions of the regional accreditation committee chair.

**Appeal Process**
See Appendix 9 Appeal of Adverse Accreditation Decisions in the 2010 Accreditation Manual Interim Revisions 2015

**Materials Maintained by the region in Member Centers’ Files**

Materials maintained in a member center’s files are:
- self study or feasibility study (self study includes annual center reports).
- Site Visit Reports I and II (for Ten Year Review and site visits, if any, required by Commission between review cycles).
- center response to Site Visit Report I.
- record of any regional accreditation committee action with the center, including:
  - reports of consultations and/or site visits, and
  - correspondence related to the center’s accreditation.
- Commission presenter’s report.
- report of Commission action.
- regional reviewer’s report for Five Year Review.
- regional committee recommendation for Five Year Review.
- Commission action on Five Year Review.
- center response to notation(s) and/or any adverse action imposed by Commission.
- presenter’s report for notations. report of Commission actions to remove notations or adverse actions.
- substantive change decisions and associated significant correspondence.

**Notification of Substantive Change Steps**
See 2010 Accreditation Manual Interim Revisions 2015 Part Two. II. U.
Policy and Process for Collecting and Assessing Enrollment Data

Accreditation Commission

The Commission will review enrollment and completion data for each accredited center, as well as overall data and trends related to number of accredited centers and student units completed.

- Annually, usually at the Fall meeting, the Commission will review statistical data from an annual staff-generated report to assess overall trends in number of centers, number of student units registered by region, voluntary withdrawals, accreditation actions taken during the year, and other related data.
- Annually, usually at the Fall meeting, the Commission will review a report of all students enrolled and units registered for each center during the previous year (Fall through Summer). Regional accreditation chairs will investigate any center’s report of a significant increase in enrollment to verify the center continues to have required resources (faculty, financial support, educational space, etc) to support the increased enrollment or any center’s report of a significant decrease in enrollment to determine the cause. Regional accreditation chairs will provide consultation and assistance to such centers as needed and bring to the Commission any recommendations for action.
- At six month intervals, the Commission will review a summary of student units reported during that time period. Regional accreditation chairs will follow up with centers in their region reporting zero credits awarded to determine if there are significant issues in the center and monitor for trends that may signify significant issues.

Accredited Member Centers:
- Retain face sheets for all students who enroll and complete orientation for a ten year period.
- Report annually (Annual Report, Appendix 1, 2010 Accreditation Manual) if the center has met the threshold requirement (75% of students oriented to the program completed the program over the past ten years). The annual report is reviewed regionally.
- Complete a student unit report (enrollment date, completion date, credit awarded) for each student enrolled within 45 days of the end of the unit. Instructions for completing student unit reports are found in the 2010 Accreditation Manual Interim Revisions 2015, Appendix 12.

Regional Accreditation Committees:
- Review annual reports for all centers in the region (due January 15 each year).
- Bring a recommendation for action to the Accreditation Commission at its next regularly scheduled meeting for any center found not to have achieved the 75% threshold.

Ten Year Site Reviewers

- Audit at least a 20% sample of student records, reconciling face sheets with student units reported during the ten year review cycle.
- Report findings indicating compliance or noncompliance with Standard 308.10 Over a ten year accreditation period, 75% of students entering units of CPE (Level I/Level II) or Supervisory CPE receive credit for those units.
APPENDIX 1

ACPE ACCREDITATION COMMISSION

ACPE NON-DISCLOSURE AGREEMENT FOR INFORMATION FROM STUDENT RECORDS *

I understand that as a member of the ACPE Accreditation process, I may have access to information from confidential student records. I will not retain copies of those records or information, nor will I disclose or use any information I might obtain from them in any process other than the one in which I am currently authorized to participate.

__________________________________________            ______________________
Signature of ACPE Member                              Date
or Commission Public Member
A commendation is an honor and acknowledgment of excellence given to a center as recognition of superiority in an aspect of its operation or accreditation materials during the ten year review. A commendation is part of the Commission’s final action, when appropriate, designating a certain portion of a center’s documentation, operations, or program design and execution as exceptional (See 2010 Definition of Terms Interim Revisions 2015). Specific Standards must be cited for commendations.

When a site team believes a center’s work is worthy of a commendation(s), the site team will create a separate document from the Site Team Report Parts I and II, describing clearly the exceptionality of the work. No information about proposed commendations is shared with the center at this point. The site team will provide this document to the Commission presenter along with the Site Visit Report—Part I, the center response, Site Visit Report—Part II, and center materials, with a copy to the regional accreditation committee chair.

If the Commission reviewer concurs with the proposed commendation, the presenter may recommend the proposed commendations to the Commission. If the Commission presenter does not agree with the proposed commendation, the presenter does not move the commendation through the Commission’s process.

At the time of the center’s review by the Commission, the Commission reviewer will make recommendations about any proposed commendation(s) in the final review. The Commission will vote on the commendation(s) as a part of its regular business.

After the Commission’s final vote, any commendation(s) will be communicated to the center and published in the ACPE newsletter.

When the center of a current member of the Commission receives proposed commendation(s), the matter will be handled in the same manner as any other business of a center of a current Commission member. The member will abstain from discussion or vote on such issues.
APPENDIX 3

ACPE ACCREDITATION COMMISSION

PROPOSED CHANGES IN CENTERS AND PROGRAMS:
REPORT OF REGIONAL ACTIONS

Note: attach Changes in Centers and Programs Form and associated documentation submitted by the center.

Submission Date: _______________
Accredited Member: _____________________________________________________________
Address: _____________________________________________________________________
Supervisors: ___________________________________________________________________
Region: _______________________________________________________________________

PROVISIONAL ACTION BY THE REGION: (Regional accreditation chair communicates change to ACPE within 30 days.)

Date of action _______________
Provisional action(s): ______________________________________________________________________

REGIONAL COMMITTEE DISCUSSION, ACTION/RECOMMENDATIONS: (Regional accreditation chair will present change to Commission for action at its next meeting)

Date of action: _______________
Discussion/Action(s)/Recommendation(s): ______________________________________________________________________

ACCREDITATION COMMISSION DISCUSSION, ACTION AND VOTE: (Regional chair will complete this form and provide it, along with all documentation, to the national office)

Date of action _______________
Discussion, action(s), vote: ______________________________________________________________________
APPENDIX 4

ACPE ACCREDITATION COMMISSION
REGIONAL REVIEWER REPORT TO ADD A SATELLITE PROGRAM

Submission Date: ______________________  Region: ______________________
Satellite Program Center: ______________________________________________
Satellite Program Supervisors: __________________________________________
Address: ___________________________________________________________________
Accredited Member Host Center: ____________________________________________
Supervisors at Accredited Member Host Center: ________________________________
Types of programs: CPE Level I /Level II _____ Supervisory CPE _____

Evaluation of Materials:
1. Material Submitted
   _____ Written request to add a Satellite Program
   _____ “Accreditation Review Request and Face Sheet” (2010 Accreditation Manual Interim
         Revisions 2015, Appendix 3)
   _____ Copy of Satellite Program agreement/contract
      _____ Delineates educational and administrative mechanisms of relationship
      _____ Includes delineation of Supervisory Involvement of Training Supervisor if
            Satellite Program employs/contracts a Supervisory Candidate or SES
      _____ All needed signatures present
   _____ History of CPE at Satellite Program site
   _____ Satellite Program Specific Student Handbook
   _____ Specific Handbooks of Clinical/Educational Placements (include copies of agreements)
   _____ If to be listed in ACPE Directory:
      _____ Site Visit scheduled for _________________________
      _____ “Accreditation Review Request and Face Sheet” (2010 Accreditation Manual
            Interim Revisions March 2015) Appendix 3)
      _____ Copy of Regional Accreditation Committee’s recommendation and file of material
            (to include: site visit report verifying compliance with ACPE Standards, Satellite
            Program agreement/contract, and satellite program specific student handbook(s),
            copy of Clinical Placement Handbook Materials and Agreements (if any clinical
            placement sites), Copy of the Regional Reviewer Report)

2. Summarize Request for Addition of a Satellite Program
3. Date Provisional Status given: ______________________
4. Evaluate if Satellite Program agreement or contract is in compliance.
5. Evaluate if the Student Handbook is in compliance.
6. Identify requests for additional information from Accredited Member Center, if any, and
   describe Accredited Member Center’s response to request for additional information.
8. Additional critique and/or recommendations.
9. Regional Committee recommendation:
   a) Grant addition of Satellite Program with or without recommendations or notations.
   b) Deny request to add a Satellite Program.

Reviewers: ________________________________ ________________________________
Date: ________________________________

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APPENDIX 5

ACPE ACCREDITATION COMMISSION
REGIONAL REVIEWER REPORT TO ADD SUPERVISORY CPE

Submission Date: __________________ Region: __________________

Accredited Member: ___________________________________________________________

Address: ________________________________________________________________

Supervisors: _______________________________________________________________

Evaluation of Materials:
1. Check List: Material Submitted
   ___ Copy of Provisional Letter
   ___ “Accreditation Review Request and Face Sheet” (2010 Accreditation Manual
      Interim Revisions March 2015 Appendix 3)
   ___ Written request to add supervisory CPE
   ___ Rationale for this new program
   ___ Congruence of proposal with mission/goals of the Accredited Member Center
   ___ Summary of Accreditation History of CPE at Accredited Member Center
   ___ Survey of prospective student enrollment
   ___ Provision for additional faculty, financial and support resources
   ___ Complete CPE Supervisory Student Handbook/Sections of master Student Handbook
   ___ Compliance of Student Handbook and other materials with ACPE standards
   ___ Detailed curriculum in compliance with Standards and Certification Manual
   ___ Specific Manual(s) for any Clinical Placement(s)/Educational Placement(s)
   ___ copy of Clinical Placement Agreements
   ___ copy of Educational Placement Agreements
   ___ Copy of Supervisory Student agreement(s)/contract template(s)
   ___ delineation of Supervisory Involvement of Training Supervisor
   ___ delineation of administrative/educational mechanisms by which
      the Supervisory Education Student is related to the Accredited
      Center and the Training Supervisor(s)
   ___ information about benefits, stipend, responsibilities, etc.

2. Summarize Request for Addition of Supervisory CPE
3. Evaluate Supervisory Program contract(s) for compliance
5. Evaluate the Supervisor CPE Curriculum for compliance
6. Identify requests for additional information from center.
7. Describe Center’s response to request for additional information.
8. Include additional critique and/or recommendations.
9. Provide regional committee recommendation:
   a) Add Supervisory CPE with or without recommendations or notations, or
   b) Deny request to add Supervisory CPE.

Reviewer(s): ____________________________  ______________________________

Date:  ______________________________

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APPENDIX 6

ACPE ACCREDITATION COMMISSION
REGIONAL REVIEWER REPORT TO ADD A COMPONENT SITE

Submission date: ____________________ Region: ____________________
Component site location: ____________________________________________
Component site supervisor(s): ________________________________________
Address: ___________________________________________________________________
System center: __________________________________________________________
Supervisors at accredited system center: ____________________________________
Types of programs:                CPE Level I /Level II _____             Supervisory CPE _____

Evaluation of Materials:

1. Material Submitted
   ____ “Accreditation Review Request and Face Sheet” ("Accreditation Review Request and Face Sheet" (2010 Accreditation Manual Interim Revisions March 2015 Appendix 3), with copy to regional accreditation chair and regional director with request to add a component site
   ____ Materials (three copies) prepared for submission to regional accreditation chair:
      ____ Statement of good financial standing from ACPE;
      ____ Statement of good financial standing from region;
      ____ Revised administrative plan demonstrating:
         ______ Linkage between component site and central administrative authority; and
         ______ Organization of component to offer programs in compliance with ACPE Standards;
      ____ Site-specific student handbook; and
      ____ Appendix 5, Part I (p. 65ff) indicating where in the student handbook(s) required standards are addressed.
   ____ Materials (three copies) submitted to regional accreditation chair at least forty-five days (postmarked) prior to the start of any program at the component site.

2. Summarize Request for Addition of a Component Site

3. Evaluate:
   ____ a revised administrative plan, demonstrating linkage of component to central administrative authority and organization of component site to offer programs in compliance with ACPE Standards;
   ____ site-specific student handbook; and,
   ____ Appendix 5, Part I (p. 65ff)

4. Evaluate if the student handbook is in compliance.

5. Identify requests for additional information from accredited member center, if any, and describe accredited member center’s response to request for additional information.

6. Include additional critique and/or recommendations.

7. Indicate regional committee recommendation:
   a) Grant addition of component site with or without recommendations or notations, or
   b) Deny request for to add a component site.

Reviewers: ____________________    ____________________
Date: __________________________
APPENDIX 7

ACPE ACCREDITATION COMMISSION
REGIONAL REVIEWER REPORT TO ADD A CANDIDATE CENTER

Submission date: _______________ Region: ____________________

Component site to be accredited: ________________________________________________

Component site supervisors: ___________________________________________________

Address: _____________________________________________________________________

Accredited member system center:  _____________________________________________

Supervisors at accredited member system center: _________________________________

Types of programs:                CPE Level I /Level II _____             Supervisory CPE _____

Evaluation of Materials:

1. Material Submitted
   _____ “Accreditation Review Request and Face Sheet” “Accreditation Review Request and Face Sheet”
   (2010 Accreditation Manual Interim Revisions March 2015 Appendix 3)
   _____ Feasibility study and other required materials completed:
      _____ Accreditation Review Request and Face Sheet (Appendix 3, p. 63);
      _____ Center Disclosure Information form (Appendix 4, p. 64);
      _____ Statement of good financial standing from ACPE;
      _____ Statement of good financial standing from region;
      _____ List of professional advisory group members (name and title);
      _____ Student handbook (primary document for assessing compliance with many ACPE
      standards; material does not need to be duplicated in feasibility study document);
      _____ Appendix 5, Part I (p. 65ff) indicating where in the student handbook(s) required
      standards are addressed; and
   _____ Feasibility study includes:
      _____ Description of feasibility study process and methodology
      _____ Description of professional advisory group’s involvement
      _____ Documentation of how center plans to comply with ACPE standards (do
      not repeat material in student handbook)
      _____ Report of changes proposed as result of feasibility study
      _____ Assessment of potential to comply with standards (strengths/limitations)
      _____ Description of center’s future plans.
   _____ Copy of all required materials sent to each member of the regional site visit team at
   least 30 days (postmarked) prior to site visit._____

2. Summarize request to become a Candidate center.

3. Date provisional status given: __________________

4. Evaluate if the student handbook is in compliance.

5. Additional critique and/or recommendations.

6. Regional committee recommendation:
   a. Grant candidate status;
   b. Specify areas of deficiency and require the center to report on corrective actions
      within a specified time, not to exceed one year; or
   c. Deny candidate status.

Reviewers: ____________________________________________________________________

Date: ______________________________________________________________________
APPENDIX 8

ACPE ACCREDITATION COMMISSION
REGIONAL REVIEWER REPORT FOR THE FIVE YEAR REVIEW

Part I—Preliminary Report

Center: __________________________________________________________

Address: ______________________________________________________________________

Supervisors: _______________________________________________________________

Region: _______________________________________________________________________

Types of programs: _______ CPE (Level I /Level II) _________ Supervisory CPE

Evaluation of Materials:

1. Assure face sheet and checklist are included.

2. Review and summarize annual reports, including Accreditation Committee and Commission Actions.


5. Identify requests for additional information and recommendations for the center.

Regional Reviewers: __________________________  __________________________

Date: ______________________________

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APPENDIX 9

ACPE ACCREDITATION COMMISSION
REGIONAL REVIEWER REPORT FOR THE FIVE YEAR REVIEW

Part II—Final Report

Center: ____________________________________________________________

1. Describe and evaluate center’s response to the Reviewers’ Report, Part I.

2. Evaluate if the student handbook is in compliance. (2010 Accreditation Manual Interim Revisions 2015 Appendix 5, Part I)

3. Recommend Regional Committee action:
   a) Continued Accredited Membership with or without recommendations or notations, or
   b) Request consultation and/or site visit at the center’s expense.

Regional Reviewers: ____________________________ ____________________________

Date: ________________________________
APPENDIX 10

ACPE ACCREDITATION COMMISSION
REGIONAL REVIEWER REPORT
New Candidate Center, Addition of Supervisory CPE, Satellite Program Listing Site Visit

Center: ____________________________________________________________

Address: __________________________________________________________________

Supervisor(s): __________________________________________________________

Accreditation Request: __________________________________________________

Reviewer: __________________________________________________________________

Checklist
Indicate materials present and fees paid:

Check List:                Material Submitted and Fees Paid (refer also to checklist for specific accreditation review

process in the 2010 Accreditation Manual Interim Revisions March 2015)

_____ “Accreditation Review Request and Face Sheet” (2010 Accreditation
Manual Interim Revisions March 2015, Appendix 3)

_____ Statement from ACPE that center is in good financial standing

_____ Statement from region that center is in good financial standing

_____ Center’s self study/feasibility document

_____ Appendix 5, Part I (2010 Accreditation Manual Interim Revisions
March 2015)

_____ Site team recommendation(s)

_____ Commendation(s), if any

Review
1. Identify and critique the center’s self study/feasibility document.
2. Evaluate the site team’s visit.
3. Review the site team’s evaluation of the center’s response.
   a. Record the site team’s vote.
   b. Record the site team’s recommendations, including verbatim Standard citation(s).
4. Review the site team’s recommendations for commendation(s), if any.
5. Record your recommendations to the regional accreditation committee:
   a. Concurrence with site team’s response.
   b. Concurrence with site team’s response with exceptions and/or additions, including recommended Standard deficiencies or notations.
   c. Disagreement with site team’s report and/or response including recommended Standard(s) deficiency(ies) or notation(s) or
   d. Concurrence (or not) with site team’s recommendations for commendation(s).
6. Additional critique and/or recommendations.
APPENDIX 11

ACPE ACCREDITATION COMMISSION
REGIONAL ACCREDITATION COMMITTEE CHAIR CHECKLIST
For Ten Year and New Accredited Member Center Reviews

Center: ______________________________________________________________________

Address: _____________________________________________________________________

Institution: __________________________________________________________________

Phone: _________________________ Fax: _____________________ E-mail _____________

Check and date each item as it is completed


_____ Advised of name of National site team chair by Chair, Accreditation Commission.

_____ Set site visit date in collaboration with national site team chair.

_____ Set site visit date.

_____ Began discussion with national site team chair.

_____ Completed team formation.

_____ Received accreditation review materials from center.

_____ Received Site Visit Team Report Part I from national site team chair.

_____ Received response by Center to site visit team report.

_____ Received Site Visit Team Report—Part II and site team recommendation(s).
APPENDIX 12

ACPE ACCREDITATION COMMISSION
SITE VISIT REPORT—PART I

Center: ___________________________ Date(s) of visit: ____________

Center address: _________________________________________________________________

Center supervisor(s): _____________________________________________________________

Site team chair: __________________________________________________________________

Team members: __________________________________________________________________

1. Check List: Material Submitted and Fees Paid (refer also to checklist for specific accreditation review process in the 2010 Accreditation Manual Interim Revisions 2015)
   ___ Statement from ACPE that center is in good financial standing
   ___ Statement from region that center is in good financial standing
   ___ Self Study/Feasibility Document
   ___ Annual Reports (up to 4 years)
   ___ Action Reports from Prior Reviews
   ___ Student Handbook
   ___ Center Disclosure Information (Appendix 4, 2010 Accreditation Manual Interim Revisions 2015)

2. Describe the site team’s pre-visit orientation to its role and responsibilities and actions taken to familiarize the team with ACPE standards and accreditation procedures.

3. Briefly summarize the history and current description of the center, including the pastoral care program/department.

4. Briefly summarize the center’s prior accreditation history. What deficiencies and/or notations were assigned? What concerns were identified? How were concerns, deficiencies, and notations addressed?

5. Assess the center’s self study/feasibility study process and the resulting document.

6. Describe each component of the site visit.

7. List strengths and limitations of the center and programs. Include:
   a) an assessment of the center’s financial viability to offer programs of CPE as reflected in financial audit statements;
   b) a description and assessment of center’s measurement of students’ achievement after completing CPE (Level I/Level II) and Supervisory CPE.

8. Summarize the standards issues needing to be addressed by the center in its response to the site team preliminary report.

Within 14 days from site visit, complete Part I and send it to the Center. Copy the regional accreditation chair and the Accreditation Commission Chair.
Complete this section after receiving the Center response to Site Visit Report—Part I.

1. Comment on the Center’s written response to the site team visit and Site Visit Report—Part I. Assess the center’s compliance or feasibility for compliance (candidacy) with ACPE Standards. Include 2010 Accreditation Manual Interim Revisions 2015, Appendix 5 Part I and Part II, providing distinct evidence that the information provided by the center is correct, and make additional comments if necessary to document points of non-compliance.

2. Summarize specific issues for discussion by the Accreditation Commission.

3. Prepare a separate document, listing any commendations (See Appendix 3, Commendations for Centers) that may be appropriate for the center. Describe the portion of the center’s documentation, operations, or program design and execution found to be exemplary. Specific Standards must be cited for commendations.

4. Note that the site visit team finds no areas of noncompliance or describe areas of noncompliance or deficiency(ies), citing the specific standard(s) involved.

5. Record the site visit team’s vote on its recommendation for action.

Combine Site Visit Report Part I, the Center Response, Site Visit Report Part II, all Center materials and correspondence, and any recommendations for commendation(s) and submit to the Accreditation Commission Chair, for assignment to a Commission Presenter. Send a copy of the Site Visit Report, Part II, to the Center and the regional chair of accreditation.

NOTE: Any recommendations for commendation(s) are shared only with the Commission presenter and the Accreditation Commission Chair. They are not to be made available to the Center.
APPENDIX 14

COMMISSION PRESENTER REPORT
Ten Year or New Accredited Member Review

Center: __________________________________________________________
Address: __________________________________________________________
Supervisor(s): _____________________________________________________
Accreditation request: _____________________________________________
Reviewer: __________________________________________________________

Checklist:
Indicate materials present and fees paid:
_____ Material Submitted and Fees Paid (refer also to checklist for specific accreditation review process in the 2010 Accreditation Manual Interim Revisions 2015)
_____ Statement from ACPE that center is in good financial standing
_____ Statement from region that center is in good financial standing
_____ Center’s self study/feasibility document
_____ Appendix 5 Part I—Assessment of Student Handbook(s) & Curriculum(ae)
_____ Appendix 5 Part II—Assessment of CPE Program Infrastructure and Educational Implementation
_____ Site Visit Report Part I and Part II
_____ Center’s response to site visit report
_____ Site team recommendation(s)
_____ Commendation(s), if any (See Appendix 3 for more information and requirements)

Review:
1. Identify and critique the center’s self study/feasibility document.
2. Evaluate the site team’s visit.
3. Evaluate the site team’s report.
4. Critique the center’s response to the site team’s report
5. Review the site team’s evaluation of the center’s response.
6. Record the site team’s vote.
7. Record the site team’s findings, including standards’ noncompliance or deficiencies.
8. Review the site team’s recommendations for commendation(s), if any.
9. Record your recommendations on the Report of Commission Work
   a. Concurrence or Disagreement with site team’s response.
   b. Concurrence or disagreement with site team’s recommendations for commendation(s).
10. Additional critique and/or recommendations.

Presenter signature: ________________________________________________
APPENDIX 15

ACPE ACCREDITATION COMMISSION
REVIEWER’S REPORT FOR REMOVAL OF NOTATIONS

Date: ______________________________

Center: ________________________________________________________________

Address: _________________________________________________________________

CPE supervisors(s): ___________________________________________________________

Chief Executive Officer: _______________________________________________________

Person to whom CPE supervisor(s) report and title: _________________________________

Presenter: ___________________________________________________________________

1. Describe the notation(s) being addressed as reported to the Center by the Accreditation Commission.

2. Summarize Center’s response to the notation(s).

3. Specify recommendations to the Accreditation Commission.

Presenter signature: _____________________________________________________________

Copies of the report will also be sent to the center and placed in the center’s permanent accreditation file in the ACPE office.
APPENDIX 16

ACPE ACCREDITATION COMMISSION
REPORT OF COMMISSION WORK

This form is completed by the Commission Presenter and provided to the Commission for its vote.

Center Name: _________________________________________________________________________
Type of Center: _____ Institutional _____ System _____ Free Standing
Address: _____________________________________________________________________________

Phone: ___________________ Fax:______________________ E-mail___________________________
Principal ACPE Supervisor: _____________________________________________________________
Institution’s Chief Executive Officer and title: ______________________________________________
Person to whom the CPE Supervisor reports and title: _______________________________________
Host Center/Host Institution: (if applicable) ______________________________________________
If satellite program or component, name ________________________________________________
Supervisor and Address: ______________________________________________________________

The center requests the Commission grant or approve the following:
____ Candidacy                       ____ Accredited Membership          ____ Continued Accredited Membership
____ Five Year Review           ____ Remove Notation(s)                ____ Postpone Review
____ Add Supervisory CPE    ____ Add a Satellite Program           ____ Add a Component Site
____ Close a Program              ____ Withdraw Accreditation (Voluntary)
____ List Satellite Program in Directory

Commission presenter: ____________________________________________________________________
Recommendation:

Commission discussion:

Commission action:  ____ Grant w/wo notation(s) ____ Assign Notation (list Standards)
                   ____ Deny request               ____ Give commendation(s)
                   ____ Suspend Accreditation (Adverse Action)  ____ Withdraw Membership (Adverse Action)

Commission motion:

Vote: ___________________________  ____ Yes  ____ No  ____ Abstain

Commission Chair: ___________________________ Date: ___________________
Presenter or Regional Chair: ___________________________ Date: ___________________

Next Review Date: ___________________________
APPENDIX 17

ACPE ACCREDITATION COMMISSION
PROCESS MAP OF TIMELINE TO ACCREDITATION

Please see the following pages for information about the timelines of accreditation reviews for Reviews for Requests for Accredited Member Status and the Ten Year Review.
# Accreditation Process Map for Requests for Accredited Member Status (New Centers)

**How to use this table:** Read across for the responsibilities of each party. Actions to be completed concurrently are located on the same row; actions to be completed subsequently follow row by row. “Chair” is chair of Commission or Committee in column.

<table>
<thead>
<tr>
<th>National Office</th>
<th>Accreditation Commission</th>
<th>Accredited Center</th>
<th>Regional Accreditation Committee</th>
<th>Site Visit Team</th>
</tr>
</thead>
</table>
| **Receive requests & send information to Center supervisor,**  
  **Copy to Committee Chair** | Acknowledge receipt of request to Center and Committee Chair | Send request to Commission Chair  
  Copy to Regional Acc. Chair; National Office | | |
| **May accept assistance from regional mentor**  
  **Consults from Committee at Center expense** | Chair identifies mentor, if necessary  
  Notifies Center Supervisor  
  Copies Commission Chair | | | |
| Chair chooses Site Team Chair from national pool | Make revisions and return to Site Team Chair | Works with Site Team Chair to form team (two members from Center region); determine date | Site Team Chair reviews Center documents.  
  If sufficient, schedule site visit  
  If insufficient, return to center for further work | |
| | Make revisions and return to Site Team Chair | | Repeat above as needed until documents are sufficient | |
| | Work with Site Team Chair for visit agenda | Provide support as requested, needed | At site visit, Chair gives:  
  Verbal report on key findings | |
| | | | Within 14 days, written report to Center | |
| Within 30 days, Commission Chair forwards to Commission Presenter | Within 30 days of center response, evaluates process, site visit chair/members to Commission Chair | | Reviews Site Team Report—Part I  
  Completes Site Team Report—Part II  
  Sends material to Commission Chair in 14 days | Chair, Site Team, ensures Center returns of feedback tool to the Commission within 30 days of receipt of Report—Part II. |
| Within 60 days, Commission Presenter:  
  **Completes Report for Centers**  
  Sends to Commission & Committee Chairs  
  Eligible Centers for consent agenda | Commission Chair creates consent agenda | | ||
| Within 7 days of Commission actions, sends Action Report to:  
  **Center**  
  **Regional Committee Chair**  
  **National Center file**  
  **Board of Reps** | Commission phone vote on consent agenda | | ||
| Within 14 days of decisions:  
  **Notify agencies per Accreditation Manual**  
  **Update listings in directories** | Chair supplies feedback from Center to Regional Chair & Site Team Chair  
 Creates regular agenda for Spring, Fall meetings (repeat above step) | Respond to Center regarding any feedback | Respond to Center regarding any feedback |
## Accreditation Process Map for Continued Accredited Membership (Ten Year Review)

### How to use this table:
Read across for the responsibilities of each party. Actions to be completed concurrently are located on the same row; actions to be completed subsequently follow row by row. “Chair” is chair of Commission or Committee in column.

<table>
<thead>
<tr>
<th>National Office</th>
<th>Accreditation Commission</th>
<th>Accredited Center</th>
<th>Regional Accreditation Committee</th>
<th>Site Team</th>
</tr>
</thead>
</table>
| ❖ Send reminders to Supervisor;  
❖ Copy Commission/Committee Chairs; notify agencies as needed | ❖ Send request to the Commission Chair  
❖ Copy to Committee Chair; National Office |  
| Acknowledge request to Center, Committee Chair | Continue preparatory work for documents | ❖ Chair identifies mentor, if necessary  
❖ Notifies Center Supervisor  
❖ Copy Commission Chair |  
| Chair chooses Site Team Chair from national pool | ❖ May accept assistance from regional mentor  
❖ Consults from Committee at Center expense | Regional Chair/Site Team Chair choose team (two from Center region); determine date | Works with Committee Chair to form team |
| ❖ Make revisions to documents per consultation  
❖ Send to Site Team Chair |  
| Site Team Chair reviews Center documents:  
❖ If sufficient, schedule site visit  
❖ If insufficient, return to Center for further work |  
| Make revisions and return to Site Team Chair |  
| Work with Site Team Chair: visit components, agenda | Provide support as needed | Work with Center: visit components, agenda |
| At site visit, Site Team Chair gives:  
❖ Verbally reports key findings |  
| Within 30 days, responds to Site Team Report—Part I |  
| Within 30 days, Commission forwards to Commission Presenter | Within 30 days of center response, evaluates process, site visit chair/members to Commission Chair | Chair, Site Team, ensures Center returns feedback to Commission w/in 30 days of Report—Part II |
| Within 60 days, Commission Presenter:  
❖ Completes Report for Centers  
❖ Sends to Commission & Committee Chairs  
❖ Eligible Centers for consent agenda |  
| Commission Chair creates consent agenda |  
| Within 7 days of Commission actions, sends Action Report to:  
❖ Center  
❖ Regional Committee Chair  
❖ National Center file  
❖ Board of Reps |  
| Within 14 days of decisions:  
❖ Notify agencies per Accreditation Manual  
❖ Update listings in directories |  
| ❖ Commission Chair supplies feedback from Center to Committee Chair & Site Team Chair  
❖ Creates regular agenda for Spring, Fall meetings (repeat above step) | Respond to Center regarding any feedback | Respond to Center regarding any feedback |

Within 14 days, Site Team written report to Center

Within 30 days, responds to Site Team Report—Part I

Within 30 days, Commission forwards to Commission Presenter

Within 30 days of center response, evaluates process, site visit chair/members to Commission Chair

Within 60 days, Commission Presenter:
❖ Completes Report for Centers
❖ Sends to Commission & Committee Chairs
❖ Eligible Centers for consent agenda

Commission Chair creates consent agenda

Within 7 days of Commission actions, sends Action Report to:
❖ Center
❖ Regional Committee Chair
❖ National Center file
❖ Board of Reps

Within 14 days of decisions:
❖ Notify agencies per Accreditation Manual
❖ Update listings in directories

❖ Commission Chair supplies feedback from Center to Committee Chair & Site Team Chair
❖ Creates regular agenda for Spring, Fall meetings (repeat above step)

Within 30 days, responds to Site Team Report—Part I

Within 30 days, Commission forwards to Commission Presenter

Within 30 days of center response, evaluates process, site visit chair/members to Commission Chair

Within 60 days, Commission Presenter:
❖ Completes Report for Centers
❖ Sends to Commission & Committee Chairs
❖ Eligible Centers for consent agenda

Commission Chair creates consent agenda

Within 7 days of Commission actions, sends Action Report to:
❖ Center
❖ Regional Committee Chair
❖ National Center file
❖ Board of Reps

Within 14 days of decisions:
❖ Notify agencies per Accreditation Manual
❖ Update listings in directories

❖ Commission Chair supplies feedback from Center to Committee Chair & Site Team Chair
❖ Creates regular agenda for Spring, Fall meetings (repeat above step)
APPENDIX 18

THE ASSOCIATION FOR CLINICAL PASTORAL EDUCATION, INC.

PUBLIC MEMBER DECLARATION OF QUALIFICATION

NAME OF PUBLIC MEMBER ___________________________________________________

CAPACITY:

_____ Commissioner (commission) _____________________________________________

_____ Other (list) ___________________________________________________________

By my signature, I attest that I am not

- employed by or associated with agencies or institutions affiliated with ACPE, Inc.;
- in service as an officer or staff member of a cognate ministry or chaplaincy group;
- an ACPE officer or employee, or
- the spouse, domestic partner, parent, child, or sibling of anyone in active practice in an accredited ACPE member center or any of the above.

____________________________________________  __________________________
Signature of Public Member     Date