

1.2.12. Programs Found Out of Compliance Between Reviews

While accreditation status is reviewed at periodic intervals, programs are expected to maintain compliance between review cycles. Social work programs are solely responsible for implementing, demonstrating, and maintaining compliance with the EPAS at all times.

Programs are accountable to the set of EPAS under which they are currently operating. The Commission on Accreditation (COA) may issue implementation timelines, requirements, and guidance when a new set of EPAS is published that may impact which set of standards the program is accountable to for compliance.

The accreditation status obtained at initial accreditation or reaffirmation only covers the components that were reviewed in the benchmarks or self-study at the time of the COA review. Changes may take place within the program prior to its next scheduled accreditation review. Refer to section *1.2.4 Program Changes* in the EPAS Handbook detailing which changes impact compliance with EPAS and require reporting to the COA or DOSWA. Programs are required to report changes per this policy, and reporting changes that impact compliance may result in a special compliance review between review cycles. DOSWA staff are required to report potential noncompliance issues to the COA in alignment with this policy.

Consultation & Concern or Noncompliance Issues

While DOSWA staff may provide consultative services regarding potential concerns and/or noncompliance issues, the COA has sole and complete authority as the final arbiter of compliance with the EPAS or other evaluative criteria as the decision-making body. Therefore, the DOSWA staff are required to report potential noncompliance to the COA.

Required Reporting of Noncompliance Issues

When the DOSWA becomes aware of a potential noncompliance issue, including yet not limited to programs self-reporting program changes, next steps are as follows:

1. The program's accreditation specialist will attempt to arrange a courtesy phone call with the program's primary contact as soon as possible to discuss the issue and explain next steps. The specialist may include the DOSWA Executive Director as needed. Should the specialist be unable to schedule a phone call within 30-days, they will proceed to the next step.
2. The program will then receive an email communication from the accreditation department beginning the special compliance review process. The department will request a report including a formal written response to the relevant

standard(s) with which the program may be noncompliant as well as a time-bound plan of action for addressing any noncompliance issues. The program will be provided with a due date within 60-days.

3. The program's plan should detail and demonstrate its good faith effort and due diligence to restore full compliance within three (3) months from the date the report is submitted.
4. If the program successfully submits the required report by the deadline provided, the report will be reviewed by the program's accreditation specialist who may consult with the DOSWA Executive Director as needed.
 - a. If the program is unable to document a plan to restore full compliance within three (3) months, then the program is automatically referred to the COA Executive Committee and the program is notified.
 - b. If the program documents a plan to restore full compliance within three (3) months from the date the report is submitted, then the program will be issued a follow-up report due within those three (3) months to ensure implementation of the plan.
 - i. If the follow-up report reveals that the noncompliance issue was resolved, then the report is accepted, the review process concludes, and the program is notified.
 - ii. If the follow-up report reveals that the noncompliance issue persists, then the program is automatically referred to the COA Executive Committee and the program is notified.
5. The specialist may refer the report for substantiation and possible action by the COA Executive Committee at any time during the review process.

The COA recognizes that special circumstances may occur, including but not limited to sudden departure of key personnel, that cause a program to be temporarily noncompliant with (1) one or more accreditation standards. Thus, this policy is structured to provide a grace period of about (5) five months from the time the DOSWA becomes aware of a potential noncompliance issue until the program must restore full compliance. On a case-by-case basis, the grace period may be reduced or bypassed, at the COA's discretion, to ensure the accrediting body can take action to preserve the integrity of the accreditation process. If noncompliance issue(s) are identified during other COA Executive Committee review processes (e.g., waivers, etc.), at the discretion of the Committee, the Committee may take immediate action or refer the matter to the accreditation specialist to execute the special compliance review process per this policy.

Programs are encouraged to implement interim plans to remain compliant during times of changes or transitions. It is expected that programs understand, implement, and maintain compliance with the EPAS at all times.

Refer to section *1.2.11. Document Submission Policy* of the EPAS Handbook for formatting and submission requirements of the report.

Once the program is referred to the COA Executive Committee, the Committee may choose one of the following decision types:

| Decision Options for <i>Special Compliance Review</i> | |
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| Find Program in Compliance with the EPAS and/or Other Evaluative Criteria and Concludes Special Compliance Review | COA finds the program in compliance with all educational policies and accreditation standards. The special compliance review concludes, no further action is required, and a COA letter is sent. |
| Request a Progress Report to be Reviewed by the COA Workgroup | The COA finds the program in compliance with all educational policies and accreditation standards but identifies one or more areas of concern that must be addressed in a progress report. The COA's letter identifies specific areas of concern and a due date for the progress report. |
| Request a Progress Report to be Reviewed by the Accreditation Specialist | The COA finds the program in compliance with all educational policies and accreditation standards but identifies one or more areas of concern that must be addressed in a progress report. The COA's letter identifies specific areas of concern and a due date for the progress report. |
| Defer Decision for One Meeting and Request Clarifying Information to be Reviewed by the COA Workgroup | COA finds that the program's documentation is insufficient to make a decision, so the program must submit documentation or clarification necessary for COA to make a decision at the next meeting. |
| Defer Decision for One Meeting and Request Clarifying Information to be Reviewed by the COA Executive Committee | COA finds that the program's documentation is insufficient to make a decision, so the program must submit documentation or clarification necessary for COA to make a decision at the next meeting. |
| Order a Modified In-person or Virtual Visit | The COA believes that the program may be out of compliance with one or more educational policies and/or accreditation standards. A site visitor or commissioner visitor is sent, at the program's expense, |

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| | onsite or virtually with instructions to review specific compliance issues and the program is reviewed at the next COA meeting following the visit. |
| Place the Program on Conditional Accredited Status | The COA finds the program out of compliance with one or more educational policies and/or accreditation standards and places it on conditional accredited status if it believes that noncompliance issues can be resolved by the program within one (1) year. The COA's letter identifies specific areas of noncompliance. Conditional status is an adverse decision, and programs may request reconsideration. If the program accepts the COA's decision, it submits a restoration report. |
| Initiate Withdrawal of Accredited Status | The COA initiates withdrawal of accredited status if the program is found to be out of compliance with one or more educational policies or accreditation standards and the COA does not believe that noncompliance issues can be resolved within one (1) year. The COA's letter identifies specific areas of noncompliance and instructs the program to work with its accreditation specialist to arrange for the graduation or transfer of its students and determine when the program's accreditation will be withdrawn. The decision to initiate withdrawal of accredited status is an adverse one, and programs may request reconsideration. After its official withdrawal date, a program may apply for candidacy status. |

Failure to Submit the Report

If the program fails to submit a report by a given deadline, it will result in the program being placed on conditional accredited status before or at the next COA meeting by the COA Executive Committee.

Failure to Report Noncompliance Issues

If a program is found to be operating out of compliance for (6) six months or more without reporting to the DOSWA and COA, the program may be placed on conditional accredited status before or at the next COA meeting by the COA Executive Committee.

Placement on conditional status is an adverse action, and programs may request reconsideration. Refer to section *1.2.6. Appeals of COA Decisions* in the EPAS Handbook for information on how to request reconsideration. If the program accepts the COA's decision, it must submit a restoration report within one (1) year of being placed on conditional accredited status. Refer to section *2.6.4. Restoration Report Decisions* in the EPAS Handbook for a list of decision types after submitting a restoration report.

Complaints Regarding Program Compliance

Persons, groups, or organizations related to the program that wish to file a formal complaint to the COA refer to section *1.2.1. Complaints Regarding Program Compliance* in the EPAS Handbook. Complaints must pertain to matters related to program compliance with accreditation standards and educational policy. The COA is not authorized to adjudicate, arbitrate, or mediate individual faculty or student grievances against a program. The COA may select one from a variety of decision types as a result of a complaint review, including adverse actions.

Annual Collection of Program Assessment Outcomes

The DOSWA staff collect assessment outcomes annually between and during regularly scheduled accreditation reviews. This process is a continuing accreditation requirement, independent of any regularly scheduled review that may be underway. Program assessment outcomes are published publicly in the [Directory of Accredited Programs](#). Programs are required to use the most updated form available on the [CSWE website](#) to report outcomes to their stakeholders and the public. Specific instructions will be sent to programs by DOSWA staff regarding this annual collection process. Failure to maintain updated assessment outcomes may result in a special compliance review.