The BOARD OF EXAMINERS UPDATE is designed to share the actions of the Unit Accreditation Board and refinements of NCATE’s review process. It is disseminated at the start of onsite visits in the fall and spring. Issues and changes reported here should be reviewed by team members during their first team meeting.
The Continuous Improvement Pathway to accreditation has completed its pilot phase. NCATE staff would like to thank all BOE members and chairs who helped create this new pathway.

This Special Edition of the *BOE Update* provides information on the new BOE Offsite and Onsite Report templates. There is also a Quick Guide to answer your questions and those of the units you are working with.

Please review the information carefully and refer to it as you conduct Offsite and Onsite reviews.

THANK YOU FOR YOUR CONTINUED SERVICE WITH THE BOARD OF EXAMINERS!
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CAEP APPOINTS VICE PRESIDENT OF ACCREDITATION AND PROGRAM REVIEW AS NCATE AND TEAC UNIFY

On June 28, 2012 the Council for the Accreditation of Educator Preparation (CAEP) announced the appointment of Monique Lynch as the Vice President for Accreditation and Program Review for the new accrediting organization as the National Council for Accreditation of Teacher Education (NCATE) and the Teacher Education Accreditation Council (TEAC) unify. Formal unification of the two organizations is expected sometime during 2013. Prior to this appointment, Lynch served in the role of Vice President for Program Review for NCATE.

Lynch will provide leadership on all CAEP, NCATE, and TEAC accreditation pathways and ensure integration between two core functions – accreditation and program review. This new role will provide a seamless integration of CAEP, NCATE, and TEAC accreditation functions, while focusing on streamlining processes to increase effectiveness.

“Unifying all accreditation pathways and program review will allow CAEP to better serve preparation providers and our state partners by streamlining and improving our processes,” said James G. Cibulka, president of NCATE and CAEP. “With the expertise and leadership that Monique brings to the table, I am confident that CAEP is poised to drive excellence in teacher preparation and add value to all of our stakeholders and the field as a whole.”

UPDATE OF CONTINUOUS IMPROVEMENT BOE REPORT TEMPLATES

With the completion of the Continuous Improvement Pathway pilot, the BOE Offsite and Onsite report templates are now final. The two reports should been seen as a continuum. The BOE Offsite Report lays the ground work for the IR Addendum, onsite visit, and the BOE Onsite Report. The BOE Onsite Report describes what was found through the review of additional exhibits and interviews. The focus of the Onsite Report is on how the unit addressed any Continued Areas for Improvement and Areas of Concern, and on the list of evidence to be validated in the Offsite Report. Other information in the Offsite Report does not have to be repeated in the Onsite Report. If, however, the team finds evidence onsite that does not validate or contradicts offsite findings, that should be included in the onsite review and report.

The “Purpose of the BOE Offsite Report” at the beginning of the Offsite Report template is intended to help BOE members and institutions better understand how the offsite and onsite reviews work together. Prompts in both templates have been reworded and reorder for clarity, and a question about program review has been added to Standard 1 in the Offsite Report.

Both templates now include the Criteria for Movement Toward Target rubric:
<table>
<thead>
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<th>Moving Toward Target</th>
<th>Insufficient Progress</th>
</tr>
</thead>
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</tr>
<tr>
<td>standard.</td>
<td>plans and timelines for attaining target level in all elements of the standard.</td>
<td></td>
</tr>
</tbody>
</table>

Teams will use the rubric to provide feedback in the Offsite Report. In the Onsite Report teams will make a recommendation to the UAB about the unit’s movement toward target. BOE teams will start using this rubric during the Fall 2012 onsite visits, but units will not be required to address an Insufficient Progress recommendation until the Spring 2013 onsite visits.

Most units will be Moving Toward Target and this is the requirement. Very few units will be at Target for the entire standard. Units making insufficient progress will be asked to submit an interim report.

Below are the prompts (in bold) in both reports with explanations of the information expected under each. Because prompts are repeated for each standard, the standard number is indicated with an x.

**BOE OFFSITE REPORT**

*NOTE: For consistency across units, prompts and their order should not be changed by BOE members.*

Indicate the standard(s) that the unit has selected to move to the target level for its upcoming accreditation review

The team should indicate the standard(s) and level(s) the unit has selected as the target standard.

x.1  Preliminary Findings

  x.1.a What did the evidence reveal about the unit continuing to meet this standard?

Using the evidence provided in the Institutional Report (IR) and exhibits summarize how well the unit appears to be meeting the standard. The statement of evidence should address all elements of the standard, but does not have to be organized by element. Any Areas of Concern cited later in the report should be supported in this section.

  **1.1.b How were unit programs reviewed by the BOE? What trends emerged? What do these trends reveal about the unit’s programs?**

This prompt is only in Standard 1.
How were the unit programs reviewed? Explain which organizations reviewed the unit’s program reports, SPAs or the state. How did the team handle the review of recognition reports? Did one team member review all reports or where they divided among team members?

What trends emerged? Are there noticeable trends across time? Across programs?

What do these trends reveal about the unit’s programs? How successful are the programs at meeting program standards? How successful is the unit in ensuring quality across programs?

x.2 Moving Toward Target or Continuous Improvement.
Please respond to x.2.a if this is the standard on which the unit is moving to the target level. If it is not the standard on which the unit is moving to the target level, respond to x.2.b.

x.2.a Movement Toward Target. Based on the criteria for Movement Toward Target, provide a summary of the unit’s performance.

This prompt is answered only for the standard **the unit selected** as their target standards. If this is not the target standard simply enter “Not applicable to this standard.”

Using the Criteria for Movement Toward Target, provide feedback on the unit’s claims in the IR on movement toward target. Units are asked to:
- Describe areas of the standard at which the unit is currently performing at the target level.
- Summarize activities and their impact on candidate performance and program quality that have led to target level performance.
- Discuss plans and timelines for attaining and/or sustaining target level performance as articulated in unit Standard x.

If the team does not find that the unit is moving toward target, include requests for additional evidence under “Evidence for the Onsite BOE Team to validate during the onsite visit.”

x.2.b Continuous Improvement. What activities and outcomes demonstrate that the unit has been engaged in continuous improvement?

This prompt is answered for standards the unit **did not select** as their target standard(s). Target-level work on these standards should be noted under Preliminary Findings.

Provide feedback on how well the unit is using data for continuous improvement and plans to continue their work based on the IR:
- Summarize activities and changes based on data that have led to continuous improvement of candidate performance and program quality. (**NOTE: answered for Continuing Accreditation only**)
- Discuss plans for sustaining and enhancing performance through continuous improvement as articulated in unit Standard x.

If the team does not find that the unit is using data to improve or plans to do so, include requests for addition evidence under “Evidence for the Onsite BOE Team to validate during the onsite visit.”
x. 3  Feedback on correcting previous areas for improvement (AFIs)

Any AFIs from the previous onsite review will be cited as both Corrected and Continued in the template. Based on the IR and exhibits the team makes a preliminary decision of whether the AFIs are corrected or continued. If the team cannot determine that an AFI has been corrected, it should be continued. This will give the unit an opportunity to provide additional evidence in its IR Addendum and onsite. Remember to write a rationale explaining why the AFI corrected or continued.

If an AFI is continued, include evidence necessary to correct it under “Evidence for the Onsite BOE Team to validate during the onsite visit.”

x.4  Areas of concern related to continuing to meet the standard

Areas of Concern (AOCs) indicate where the unit may not be meeting the standard at the acceptable level based on review of documentation. They become Areas for Improvement (AFIs) in the Offsite Report if not adequately addressed in the IR Addendum or onsite.

AOCs are standards-based, brief (usually one sentence), and state why the unit appears not to be at the acceptable level. The corresponding rationale supports the AOCs by explaining what findings lead the team to cite the AOC. The rationale is standards-based, more detailed than the AOC (could be as long as a few sentences), and describes the conditions at the unit.

Remember to include evidence that would address AOCs under “Evidence for the Onsite BOE Team to validate during the onsite visit.”

For more information on AOCs see: “Refresher on Areas for Improvement and Rationales,” BOE Update Spring 2012, p. 7
http://www.ncate.org/LinkClick.aspx?fileticket=UuCJn5W03JKd&tabid=467

Sample Areas for Improvement:
http://www.ncate.org/LinkClick.aspx?fileticket=%2bi0ncGjU3gQ%3d&tabid=93

x.5  Evidence for the Onsite BOE Team to validate during the onsite visit

This section is the team’s request for follow up by the unit in the IR Addendum, exhibits, and during the onsite visit. A strong BOE Offsite Report including a clear list of evidence will make completing the review a smoother process for all parties.

There are a few points to keep in mind:

- The team must request evidence that addresses continued areas for improvement (AFIs) and areas of concern (AOCs).
- If the team does not see evidence of target level work on the standard selected by the unit for moving toward target, request evidence that might support the unit’s claim that they are moving to target on this standard.
- Evidence requested should help the unit confirm actual practice and support claims in the IR and exhibits.
- Only request evidence that addresses the standard. NCATE’s Exhibit List should be used as a guide for team’s requests.
In most cases the list of evidence to be validated will have three to eight items. It may be longer if the evidence provided in the IR and exhibits was limited.

For more information on requesting evidence see:
“Guidance on Requesting Evidence in the Offsite BOE Report,” BOE Update Spring 2012, p. 5
http://www.ncate.org/LinkClick.aspx?fileticket=UrCMKTnWKUA%3d&tabid=467

The BOE Offsite Report Template is available on the NCATE website:
http://www.ncate.org/LinkClick.aspx?fileticket=AedgVWM4gF8%3d&tabid=93

BOE ONSITE REPORT

x.1 Overall Findings. What did the evidence reveal about the unit continuing to meet this standard?

The Onsite Report does not repeat information from the Offsite Report. Instead it follows up on the Offsite Report by providing new information discovered in additional and revised documents and through interviews. The Overall Findings section focuses on any Continued Areas for Improvement and Areas of Concern, and the list of evidence to be validated in the Offsite BOE Report.

While onsite the BOE team may find evidence that contradicts what was presented in the IR and accepted by the team during the offsite review, including corrected AFIs. The team should consider this new evidence and take it into consideration in the onsite review and report.

x.2 Moving Toward Target or Continuous Improvement.

Please respond to x.2.a if this is the standard on which the unit is moving to the target level. If it is not the standard on which the unit is moving to the target level, respond to x.2.b.

x.2.a Movement Toward Target. Based on the criteria for Movement Toward Target, provide a summary of the unit’s performance.

This prompt is completed for the standard the unit selected as the target standard only. Using the Offsite Report, IR Addendum, new exhibits, and interviews determine the unit’s progress on moving to the target level. The team should support its recommend on the unit’s progress on movement toward target in this section. Please refer to the Criteria for Movement Toward Target when writing this section.

x.2.b Continuous Improvement. What activities and outcomes demonstrate that the unit has been engaged in continuous improvement?

Complete this section for the standards the unit did not select as the target standard. Following up on the Offsite Report, and using IR Addendum, new exhibits, and interviews summarize how well the unit is using data to improve programs and unit operations.

x.2.b.i Strengths. What areas of the standard are being addressed at the target level?

If the team sees evidence of work at the target level in a standard the unit did not select as target, please note the efforts under this prompt. The Strengths prompt should not be answered if there is no target-level activity on a non-target standard.
x.3 Areas for Improvement and Rationales

Areas for Improvement (AFIs) indicate where the unit is not meeting the standard at the acceptable level based on review of documentation and the onsite visit. They may lead to the standard being recommended as not met.

AFIs are standards-based, brief (usually one sentence), and state why the unit is not at the acceptable level. The corresponding rationale supports the AFI by explaining what findings lead the team to cite the AFI. The rationale is standards-based, more detailed than the AFI (could be as long as a few sentences), and describes the conditions at the unit.

AFIs may be continued from the previous accreditation review or be Areas of Concern (AOCs) from the Offsite Report that were not adequately addressed. The team may also cite new AFIs if they found evidence onsite that the unit is not meeting an aspect of the standard at the acceptable level.

For more information on AFIs see: “Refresher on Areas for Improvement and Rationales,” BOE Update Spring 2012, p. 7
http://www.ncate.org/LinkClick.aspx?fileticket=UrCMKTnWKUA%3d&tabid=467

Sample Areas for Improvement:
http://www.ncate.org/LinkClick.aspx?fileticket=%2bi0ncGjU3gQ%3d&tabid=93

x.4 Recommendations

Team make two separate recommendations to the Unit Accreditation Board:

- Based on the entire review the team comes to consensus on how the unit is meeting each standard and selects Met, Not Met, or Not Applicable for each level and each standard.

- Also taking the entire review into consideration the team comes to consensus on the unit’s movement toward target on the standard and level the unit selected: Target, Moving Toward Target, Insufficient Progress. Select Not Applicable for standards the unit did not select as target standards.

The BOE Onsite Report Template is available on the NCATE website:
http://www.ncate.org/LinkClick.aspx?fileticket=gnYze1UyV0w%3d&tabid=93

REMEMBER!!!

The recommendation on movement toward target is separate from the recommendation on meeting the standard.

To meet the standard the unit must be at least at the Acceptable Level on the NCATE Standards Rubric.

Use the Criteria for Movement Toward Target rubric for the Movement Toward Target recommendation.
What is the context of the Continuous Improvement (CI) self-study and review pathway?

The National Council for Accreditation of Teacher Education (NCATE) requires that education units seeking accreditation complete a self-study and host a site visit through which the accreditor determines whether or not the provider meets standards related to evidence of candidate performance, use of data in program self-improvement, and institutional capacity and commitment for quality. In completing its standards-focused self-study, a provider selects one of three pathways, of which the Continuous Improvement self-study format is one. Regardless of the pathway/format selected, the provider must present evidence that it meets all NCATE standards.

What is the focus of the Continuous Improvement (CI) Accreditation Pathway?

With the renewed vision for accountability and continuous improvement, the CI pathway aims to ensure quality and build capacity of educator preparation providers, leading beyond adequacy to target level performance. The Continuous Improvement pathway allows an institution to focus on its own improvement. Institutions select a standard or standards on which it will focus its efforts moving toward its next accreditation review and visit.

Who is eligible for the CI Pathway?

Institutions seeking accreditation for the first time as well as institutions seeking continuing accreditation may select the CI pathway.

What is the scope of the CI Accreditation Review?

The CI accreditation review focuses on the professional education unit, which is defined as the administrative body at a college or university that has primary responsibility for the preparation of school personnel. The accreditation review is based on the Unit Standards and requires the inclusion of all programs in the institution for the initial and advanced preparation of teachers and other professional education personnel to work in P-12 settings. However, an institution, as noted above, selects a standard or standards upon which it intends to make significant progress, culminating in target level performance.

What are the specific requirements for the CI Pathway?

1. Meeting the Standards. In its IR and exhibits the unit is expected to address how it is meeting the Unit Standards.

2. Movement Toward Target. The unit selects and demonstrates movement toward and/or performance at the target level for one or more standards. The unit may select the same or different standard(s) for the initial and advanced programs.

The unit is expected to report and provide evidence on the following:

- Describe components and/or elements of the standard at which the unit is currently performing at the target level.
- Summarize activities and their impact on candidate performance and program quality that have led to target level performance.
- Discuss plans and timelines for attaining and/or sustaining target level performance as articulated in the unit standard.

When addressing standard(s) on which the unit is moving toward or performing at the target level, the unit should use the “target” level rubrics under each standard as the guide for preparation of the IR and Exhibits.

**What are the Components of the Institutional Report (IR) and Exhibits for the CI Pathway?**

The institution summarizes unit processes and outcomes in its Institutional Report, and provides clear, convincing, and sufficient evidence in its exhibits.

**A. First Accreditation**

Institutions seeking accreditation for the first time address the standards and their elements, using the *Institutional Report and Exhibits for First Accreditation* template.

<table>
<thead>
<tr>
<th>Components of the IR and Exhibits for First Accreditation</th>
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<tbody>
<tr>
<td>I. Overview &amp; Conceptual Framework</td>
</tr>
<tr>
<td>II. Standards 1-6</td>
</tr>
<tr>
<td>1. Summary of processes and outcomes on meeting the standard and each of its elements</td>
</tr>
<tr>
<td>2. a. Movement Toward Target, or</td>
</tr>
<tr>
<td>b. Continuous Improvement</td>
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<tr>
<td>3. Exhibits</td>
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</table>

**B. Continuing Accreditation**

Institutions seeking continuing accreditation address the standards holistically with reference to elements, using the *Institutional Report and Exhibits for Continuing Accreditation* template.

<table>
<thead>
<tr>
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<tr>
<td>I. Overview &amp; Conceptual Framework</td>
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<td>II. Standards 1-6</td>
</tr>
<tr>
<td>1. Overall statement with summary of processes and outcomes on meeting the standard</td>
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<td>2. a. Movement Toward Target; or</td>
</tr>
<tr>
<td>b. Continuous Improvement</td>
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<tr>
<td>3. Exhibits</td>
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**What are the Data Expectations for the CI Pathway?**

For the purposes of unit accreditation, a limited number of years of data are required. Data reported on assessments in the IR for unit accreditation should be for the most recent 12-month period. When the BOE team conducts the onsite visit, it should find evidence that the institution has three years of data for continuing accreditation and two years of data for first accreditation. As a general rule NCATE expects institutions to regularly and systematically collect, compile, aggregate, summarize, analyze, and use data throughout the full (five to seven years) accreditation cycle between onsite visits.
What are the Processes for Review and Accreditation Visits in the CI Pathway?

A. Offsite Review

The Offsite Board of Examiners (BOE) Team will be convened electronically to conduct an Offsite Review within two months after the submission of IR and exhibits in AIMS. Documents reviewed include:

<table>
<thead>
<tr>
<th>Accreditation Reports and Supporting Exhibits for Offsite Review</th>
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<tr>
<td>▪ IR and Exhibits</td>
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<tr>
<td>▪ Program reports submitted for state and/or national review</td>
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<td>▪ National Recognition Reports</td>
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<td>▪ Annual Reports</td>
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<tr>
<td>▪ Title II data</td>
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<tr>
<td>▪ Other relevant national or state reports uploaded in AIMS</td>
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</table>

The Offsite BOE Report produced by the team will be made available to the unit in AIMS within three weeks after the offsite review.

<table>
<thead>
<tr>
<th>Elements of the Offsite BOE Report</th>
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<tbody>
<tr>
<td>1. Statement about the evidence</td>
</tr>
<tr>
<td>2. Comments on the unit's progress toward meeting the target level on unit-selected standard(s)</td>
</tr>
<tr>
<td>3. Feedback on correcting previous Areas for Improvement (AFI)</td>
</tr>
<tr>
<td>4. List of and rationales for Areas of Concern related to continuing to meet the standard</td>
</tr>
<tr>
<td>5. List of evidence for the Onsite BOE Team to validate during the onsite visit</td>
</tr>
</tbody>
</table>

B. IR Addendum and Exhibits

The unit has the opportunity to submit responses to the Offsite BOE Report through an IR Addendum and Exhibits.

- The IR addendum and exhibits should address questions and concerns noted in the Offsite BOE Report ONLY.
- The current recommendation for the IR Addendum is for 25 pages, not including exhibits. Revised or new exhibits supporting the IR Addendum should be submitted as exhibits with URL links and clearly labeled as new or revised.
- IR Addendum should be submitted in AIMS 30 to 60 days prior to the Pre-Visit conducted by the BOE chair.
- See Guidelines for IR Addendum and Exhibits for more information.

C. Pre-Visit

The Onsite BOE Team chair, state team co-chair (if joint or concurrent visit with the state), and state consultant conduct a previsit with the unit head and NCATE coordinator at the institution. The previsit provides the opportunity for the key participants in the onsite visit to meet, review the CI IR Addendum, provide suggestions related to supportive evidence, and arrange the logistics for the conduct of the onsite visit, including the roles of individuals involved in the visit, interview schedule, visits to schools, and other logistical details.
D. Onsite Visit

The onsite visit for **first** accreditation will be conducted from Sunday through Wednesday. The onsite visit for **continuing** accreditation will be conducted from Sunday through Tuesday. The length of the visit may be modified following the pre-visit if circumstances suggest that a change is warranted.

The BOE onsite team is charged with continuing the work of the offsite BOE team. Documentation available to the onsite BOE team will include the institutional report (CI IR), the unit’s IR addendum that addresses any areas of concern raised in the offsite review, any new exhibits requested by the offsite BOE team, updated exhibits, appropriate state reports, and information in NCATE’s Accreditation Information Management System (AIMS), including but not limited to SPA program reports, as applicable.

**What occurs during the CI onsite accreditation visit?**

During the visit the BOE team will validate that standards continue to be met and resolve any areas of concern noted by the Offsite BOE Team. Throughout the visit the BOE team will also review the unit’s progress at implementing the target standard(s). The BOE team may use the following methods:

- **Sampling:** consisting of a review of assessments to ensure their use for program improvement; accessing the unit’s database to see how data are collected and disaggregated; and reviewing selected documentation such as candidate records, data from assessment system, faculty evaluations, diversity, faculty service/collaborative activities, and scholarly work. An initial list of evidence to be validated by the Onsite BOE Team will be included in the Offsite BOE Team Feedback Report.
- **Observations:** Tour facilities and visit external partners (such as P-12 schools) related to the target standard(s).
- **Interviews:** Limited in number and predetermined during the pre-visits by onsite BOE Team chair in consultation with state co-chair, state consultant, and institutional representatives; flexible to context of institution and the standard(s) selected for moving toward target.

The Onsite BOE Team will only review the evidence that validates the CI IR, make recommendations concerning continuation or removal of AFIs, and provide feedback on the status and implementation of the standard(s) selected for moving toward target. The Onsite BOE Team makes recommendations to the Unit Accreditation Board (UAB) regarding whether standards continue to be met at initial and advanced levels for the UAB to make a determination of continuing or first accreditation. The onsite BOE Team will also include a statement about the status of the standard(s) selected for moving toward target.

**How is Movement Toward Target considered in the Accreditation Decision?**

The Unit Accreditation Board will render an accreditation decision based on whether standards are being met. In addition, the board will grant a distinct decision on Movement Toward Target based on the same criteria used at the onsite BOE review.
<table>
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<td>Insufficient evidence was provided to demonstrate that the unit is moving toward target level with plans and timelines for attaining target level for the standard.</td>
</tr>
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</table>

**What Happens if the Unit Receives a decision of Insufficient Progress?**

A mid-cycle *Interim Progress Report on Moving Toward Target* will be required for units receiving Insufficient Progress. Current reporting requirements for the IR and Exhibits will be used for the interim progress report.

- Describe components and/or elements of the standard at which the unit is currently performing at the target level.
- Summarize activities and their impact on candidate performance and program quality that have led to target level performance.
- Discuss plans and timelines for attaining and/or sustaining target level performance in all elements as articulated in the unit standard.

**How is CI progress monitored throughout the accreditation cycle?**

Units that selected the CI Pathway must report their progress Movement Toward Target on the selected standard(s) in the NCATE PART C/ Annual Report.

**What resources are available?**

The CAEP eResources room is an electronic library containing recent examples of unit and program documents for both NCATE and TEAC institutions; including successful SPA Reports, sample Institutional Reports, BOE Reports, Conceptual Frameworks, sample Inquiry Briefs, and Audit Reports.

**Who do I contact if I have more questions?**

Please contact **Patty Garvin**, Director of Accreditation for Continuous Improvement, for further information on the CI process. Her contact information is: Phone: 202-466-7496, Email: patty@ncate.org

BOE members should contact **Stephanie Kowal**, Site-Visit Coordinator, with questions about team assignments. Her contact information is: Phone: 202-466-7496, Email: stephanie@ncate.org