



August 23, 2019

VIA EMAIL & FEDERAL EXPRESS  
(candrews@ncra.org)

Ms. Cynthia Andrews  
Sr. Director, Education and Certification  
National Court Reporters Association  
12030 Sunrise Valley Dr., Suite 400  
Reston, VA 20191-3484

***Re: Reaccreditation Denied;  
(Appealable – Not a Final Action)***

***ACCET ID #275***

Dear Ms. Andrews,

At its August 2019 meeting, the Accrediting Commission of the Accrediting Council for Continuing Education & Training (ACCET) voted to deny reaccreditation to the National Court Reporters Association, located in Reston, Virginia.

The decision was based upon a careful review and evaluation of the record, including the institution's Analytic Self-Evaluation Report (ASER), the on-site visit team report (visit conducted February 11-12, 2019), and the institution's response to that report, dated March 28, 2019. Upon its review at the April 2019 meeting, the Commission determined that the institution's response adequately addressed only one of the 18 weaknesses raised in the on-site team report and voted to extend the institution's accredited status until August 30, 2019 and defer further action pending receipt of an interim report. The Commission further voted to issue a show cause directive, requiring the institution to provide a compelling rationale as to why its accredited status should not be withdrawn due to serious concerns regarding the number and pattern of areas of non-compliance with ACCET standards, policies, and procedures.

The institution's interim report, submitted for review at the Commission's August 2019 meeting, consisted of a letter, dated June 28, 2019, requesting an extension of the submission date for the interim report, indicating that the institution was hopeful that it would be able to address the 17 findings but was unable to do so because of its "focus on two of our three main programs for the year." The letter also indicated that the institution has made "small steps" and provided a copy of a transcript of professional development for the Senior Director, Education and Certification, in response to weaknesses cited in Standard II-C: Human Resources Management and a training PowerPoint in response to weaknesses cited in Standard VI-C: Instructor Orientation and Training. No other response or documentation to address the remaining interim report issues was provided with

the June 28, 2019 submission. Consequently, the Commission determined that the institution has not adequately demonstrated compliance with respect to ACCET standards, policies, and procedures, relative to the following findings:

1. Standard I: Goals

The institution failed to demonstrate that it establishes broad goals that support the institution's mission and are consistent with the Principles of Ethics for ACCET. The team report indicated that the institution's goals did not align with the mission statement and did not reflect ACCET's Principles of Ethics.

*The institution's response to the team report did not provide current, overarching goals, as required by the standard. Consequently, the Commission directed an interim report to provide evidence of overarching goals aligned with ACCET Standard I-B: Goals, to be finalized and included with the response to demonstrate their incorporation into institutional effectiveness measurements. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

2. Standard I-C: Planning

The institution failed to demonstrate that it has sound, written one-year and longer-range (three to five year) plans that encompass both the educational and operational objectives of the institution. The plans include specific and measurable objectives, along with corresponding operational strategies, projected time frames, required resources, and method(s) for subsequent evaluation, that are utilized to measure progress in achieving the established objectives. The team report indicated that the institution's plans did not encompass educational objectives such as curriculum review and revision, personnel training and development, student services, and student assessment.

*The institution's response to the team report did not provide evidence of planning documents including specific and measurable objectives, as required by this standard. Consequently, the Commission directed an interim report to include institutional planning documents containing specific and measurable objectives, along with corresponding operational strategies, projected time frames, required resources, and method(s) for subsequent evaluation, that are utilized to measure progress in achieving the established objectives. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

3. Standard II-A: Governance

The institution failed to demonstrate that it has a clearly identified and accountable governance structure which delineates authority for the approval of institutional policies and responsibility for the overall direction and effectiveness of the institution. The team report indicated that the institution did not demonstrate that its governance structure, had developed and maintained policies to ensure the effectiveness of its educational programs or its compliance with ACCET accreditation requirements.

*The institution's response to the team report did not provide documentation to evidence the governance responsibilities of the institution's Board of Directors or the Council of the Academy of Professional Reporters (CAPR), as required by this standard. Consequently, the Commission directed an interim report to include documentation to demonstrate that its governance structure, whether emanating from the Board of Directors or CAPR, has developed and maintained policies to ensure the effectiveness of the institution's educational programs and its compliance with ACCET accreditation requirements. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

4. Standard II-B: Institutional Management

The institution failed to demonstrate that its management develops and effectively implements policies within an organizational framework, or that written policies and procedures guide the operations of the institution. The team report indicated that the institution did not demonstrate that it maintained policies and procedures to guide its day-to-day operations as required by this standard. Inconsistent implementation and lack of written policies and procedures were systemic as evidenced by weaknesses in standards throughout the report.

*The institution's response to the team report did not provide documentation of policies and procedures that guide the day-to-day operations of the institution nor a timeline regarding the development and implementation of policies relating to program design, materials, implementation, grading, and remuneration, as required by the standard. Consequently, the Commission directed an interim report to include evidence of the development and implementation of written policies and procedures that govern its operations, with a timeline for the development and implementation of policies relating to program design, materials, implementation, grading, and remuneration. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

5. Standard II-C: Human Resource Management

The institution failed to demonstrate that it develops and implements written human resource policies and procedures to govern the recruitment, selection, hiring, orientation, supervision, evaluation, retention, training, and professional development of all personnel. The team report indicated that the institution did not provide written policies and procedures for the recruitment of new personnel or policies governing staff professional development. It also indicated that the institution did not have documentation of in-service training or professional development for staff or instructors. In addition, the team report noted inconsistencies in supporting documentation for ACCET Document 21- ACCET On-Site Visit-Personnel File/Qualifications Checklist as it relates to performance evaluation, professional development, and I-9s.

*The institution's response to the team report only indicated future plans to address issues in this standard and did not show evidence of the implementation of policies and procedures guiding the recruitment of new personnel or policies governing staff professional development, as required by the standard. Consequently, the Commission directed an interim report to include documentation to show that policies and procedures are in place to ensure compliance with this standard. In addition, the report was to include the missing records of those employees identified in the team report as having incomplete personnel records. The institution's interim report included a "Continuing Education Transcript Report" for [REDACTED] to demonstrate the implementation of professional development activities. However, systematic and effective implementation of policies and procedures relative to the ongoing professional development of faculty and staff cannot be demonstrated in practice over time by the example of one course taken by one employee. Except for this single document, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

6. Standard III-B: Financial Procedures

The institution failed to demonstrate that it implements written policies and procedures for proper financial controls or that tuition charges are applied fairly and consistently. It did not demonstrate that receipt of tuition payments and other monies is properly recorded and tracked, or that cancellation and refund policies are consistently administered; and comply with statutory, regulatory, and accreditation requirements. The team report indicated that the institution's refund policy for webinars and e-seminars specifies that a \$30.00 or \$35.00 processing fee applies to cancellations, which is not compliant with the requirements of ACCET Document 31 – Cancellation and Refund Policy. The team report further indicated that the institution did not have policies and procedures governing the documentation of student accounts. Further, the institution did not have written policies and procedures for refund processing. Finally, the institution was unable to verify payment on the Federal 941's from July 1, 2018 – December 31, 2018.

*The institution's response to the team report did not provide evidence of the implementation of policies and procedures as required by this standard, nor evidence of payment verification on Federal 941's from July 1 – December 31, 2018. Consequently, the Commission directed the institution to submit an interim report to include details of its webinar and e-seminar extension and cancellation request form and cancellation policy. The commission directed that the institution update its cancellation and refund policy in all appropriate materials, including but not limited to: 1) enrollment agreements; 2) manuals; 3) brochures; and 4) websites, and other materials, and directed it to provide evidence of these updated materials, including any trainings and meeting minutes. Further, the interim report was to include documentation for the updated policies and procedures for student accounts and refund processing. Finally, the Commission required verification of payment on Federal 941's from July 1 – December 31, 2018. However, the institution's interim report submission was not responsive to the Commission's interim report directives relative to the standard.*

Therefore, the institution did not demonstrate full compliance with this standard.

7. Standard IV-A: Educational Goals and Objectives

The institution failed to demonstrate that its courses have appropriate educational goals and objectives, or that curriculum content and learning experiences are preplanned and present a sound, systematic educational methodology. The team report indicated that individual course offerings did not have written educational goals and objectives. Further, the team report indicated that curricular content and learning experiences were not structured in a form appropriate for e-learning, as they did not support active learning and engage students as required by ACCET Document 3.E-Learning – eLearning Template.

*The institution's response to the team report indicated that it would expand its conference submission guidelines to all new webinars, seminars, and e-learning to include measurable learning objectives, and that guidelines and templates would be created and presented to the Board for approval in August 2019. However, no documentation was provided in the response; as a result, the institution did not demonstrate that its courses have appropriate educational goals and objectives, as required by this standard. Consequently, the Commission directed the institution to submit an interim report, to include evidence that the institution's courses have appropriate educational goals and objectives and that the curriculum content and learning experiences are preplanned and present a sound, systematic educational methodology. However, the institution's interim report was not responsive to the Commission's interim report directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

8. Standard IV-B: Program/Instructional Materials

The institution failed to demonstrate that program materials, including syllabi, lesson plans, instructional guides, and texts demonstrate the appropriate scope, sequence, and depth of each

program or course in relation to the stated goals and objectives. The team report indicated that course design and presentation are assigned to untrained presenters, and that course materials are not vetted. The team report also indicated that the institution did not utilize syllabi or lesson plans, and there were no learning objectives or assessments.

*The institution's response to the team report provided a list of planned actions to demonstrate compliance with this standard by August 2019, with no supporting documentation to demonstrate that it systematically and effectively implements written policies and procedures to govern the development and utilization of instructional materials. Consequently, the commission directed the institution to submit an interim report to include evidence of the development and implementation of written policies to continuously monitor and improve the curriculum and that its policies focus on a comprehensive review of the curriculum's expected learning outcomes. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

9. Standard IV-D: Curriculum Review and Revision

The institution failed to demonstrate that it implements effective written policies to continuously monitor and improve the curriculum. The team report indicated that the institution did not have written policies and procedures for the review and revision of its programs, nor any documentation to demonstrate that such review has taken place.

*The institution's response to the team report did not demonstrate that it has an appropriate curriculum review and revision process of its educational programs, as required by the standard. Consequently, the Commission directed the institution to submit an interim report, to include evidence of the development and implementation of written policies and procedures for curriculum review and provision. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

10. Standard V-A: Instructional Methods

The institution failed to demonstrate that instructional methods encouraged active and motivated responses from students or that written policies and procedures were in place to ensure that the curricula were followed and that there was consistency of application by all instructional staff. The institution failed to demonstrate that its instructional methodology was consistent with contemporary training industry standards. The team report indicated that the institution had no policies or procedures for course design, and no policies for ensuring that presenters are following any prescribed instructional methodology. In addition, the team report stated that only one of the eight instructors observed by the team actively engaged with students, and that none of the webinars provided students with content interaction, as required by ACCET Document 3.E-Learning.

*The institution's response to the team report indicated that it would create written procedures for the creation of course design and instructional methodology for implementation by December 2019, however, the institution's response did not include any documentation to demonstrate that written policies and procedures were being systematically and effectively implemented to ensure that the curricula were followed and that there was consistency of application by all instructional staff. Consequently, the Commission directed the institution to submit an interim report to include evidence of the development and implementation of written policies and procedures for course design and instructional methodology for use by its instructional personnel. However, the institution's interim report was not responsive to the Commission's directives.*

Therefore, the institution did not demonstrate full compliance with the standard.

#### 11. Standard V-B: Learning Resources, Equipment, and Supplies

The institution failed to demonstrate that adequate, appropriate and up-to-date learning resources were readily available for instructor and student use and for the effective delivery of the institution's education and training. The team report indicated that the institution's learning management system (LMS) did not facilitate student-to-content interactivity; nor was there any indication of an examination as to how the LMS could support student engagement and facilitate the student's learning experience as required by ACCET Document 3.E-Learning.

*The institution's response to the team report did not provide documentation of adequate and appropriate learning resources for instructor and student use for the effective delivery of the institution's education and training. Consequently, the Commission directed the institution to submit an interim report to demonstrate and document e-learning course content interactivity and student engagement. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

#### 12. Standard VI-B: Supervision of Instruction

The institution failed to demonstrate that regular classroom observations are conducted at least annually by qualified supervisors and, along with student and supervisory feedback, are documented and effectively utilized to enhance the quality of instruction. The team report indicated that the institution did not have a policy or procedure for the supervision of CEU course presenters other than informal observation of the live sessions at the annual convention. The team report stated that there was no policy for collecting or using the data from student surveys to evaluate or improve the quality of instruction.

*The institution's response did not demonstrate with documented evidence of supervisory and student feedback that it systematically and effectively implemented written policies and*

*procedures for the supervision of CEU course presenters. Consequently, the Commission directed the institution to submit an interim report to include documentation of the development and implementation of written policies and procedures for the supervision of instruction based on both supervisory and student feedback. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

13. Standard VI-C: Instructor Orientation and Training

The institution failed to demonstrate that it develops and implements written policy for the effective orientation and training of instructional personnel to ensure a consistent, high level of instruction. The team report indicated that instructors who taught the live webinars (IDL), are not trained in the effective use of the technology and methodology to ensure a high level of instructional quality and effective communications with students, as required by ACCET Documents 3.IDL and 3.E-Learning.

*The institution's response to the team report did not demonstrate with documented evidence that it systematically and effectively implements policies and procedures for instructor orientation and training. Consequently, the Commission directed the institution to submit an interim report to include evidence of the development and implementation of written policies and procedures for the orientation and training of instructors. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

14. Standard VIII-A: Performance Measurements

The institution failed to demonstrate that it implements written performance measurements that are periodically evaluated and updated to ensure instructional effectiveness. The institution failed to demonstrate that it has a sound, written assessment system that contains a set of defined elements, such as grading scale, weighting factors, tests, quizzes, reports, projects, attendance, and participation, that are appropriately related to the performance objectives of the course. The team report indicated that many of the CEU courses did not include learning objectives or a method of assessing student learning.

*The institution's response to the team report did not demonstrate that it had written learning objectives or a method of assessing student learning for CEU courses. Consequently, the Commission directed the institution to submit interim report to include evidence of the development and implementation of learning objectives in its CEU courses with supporting documentation of its method of assessing student learning. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.



15. Standard VIII-C: Student Progress

The institution failed to demonstrate that it utilizes a sound and clearly defined assessment system established by the institution or that it documents student progress consistently in accordance with institutionally established performance outcomes communicated to all students. It failed to demonstrate that students are informed of their progress on a regular and timely basis or that it utilizes sound written policies and procedures to determine student compliance with these requirements and to document the results. The team report indicated that CEU courses did not include assessments, and noted that the LMS did not have the capability of notifying students when they are close to the 30-day expiration date for courses.

*The institution's response to the team report did not demonstrate that student progress was documented consistently in accordance with institutionally established performance outcomes and was communicated to all students, or that students were informed of their progress on a regular and timely basis. Consequently, the Commission directed the institution to submit an interim report to provide evidence that student progress is documented consistently and is communicated to all students, and that students are informed of their progress on a regular and timely basis. However, the institution's interim report is not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

16. Standard IX-A: Student Satisfaction

The institution failed to demonstrate that it implements effective means to regularly assess, document, and validate student satisfaction relative to the quality of education, training, and student services provided, or that student feedback is utilized to improve the education, training, and student services provided by the institution. The team report indicated that the institution did not have written policies and procedures, or an implemented process, for tracking and analyzing student satisfaction. The report stated that institution did not demonstrate a regular, ongoing process for reviewing, analyzing, and documenting student feedback.

*The institution's response to the team report indicated that it was developing policies and procedures to bring it into compliance with the standard, but that the timeline for completion of this process was scheduled for December 2019; therefore, the institution's response did not demonstrate that it systematically and effectively implements policies and procedures to assess, document, and validate student satisfaction, as required by this standard. Consequently, the Commission directed the institution to submit an interim report to include documentation of the development and implementation of written policies and procedures for the assessment, documentation, and validation of student satisfaction data. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

#### 17. Standard IX-C: Certification and Licensing

The institution failed to demonstrate that it records and tracks certification examination results of course participants and uses the results to measure and improve the quality of the educational programs offered. The team report indicated that the institution did not have written policies or procedures to analyze and evaluate certification exam data, nor could it demonstrate how that data had been used to measure and improve the quality of the educational programs offered.

*The institution's response to the team report indicated that it was developing policies and procedures to bring it into compliance with the standard and that the timeline for the completion of the development of written procedures was scheduled for August 2019; therefore, the institution's response did not demonstrate that it analyzes and evaluates exam data in order to measure and improve its educational programs. Consequently, the Commission directed the institution to submit interim report to provide evidence of the development and implementation of written policies and procedures for analyzing and evaluating exam data, with documentation as to how it uses the data to measure and improve the quality of its educational programs. However, the institution's interim report was not responsive to the Commission's directive.*

Therefore, the institution did not demonstrate full compliance with this standard.

Since denial of reaccreditation is an adverse action by the Accrediting Commission, the institution may appeal the decision. The full procedures and guidelines for appealing the decision are outlined in Document 11, Policies and Practices of the Accrediting Commission, which is available on our website at [www.accet.org](http://www.accet.org).

If the institution wishes to appeal the decision, the Commission must receive written notification no later than fifteen (15) calendar days from receipt of this letter, in addition to a certified or cashier's check in the amount of \$8,500.00, payable to ACCET, for an appeals hearing. This notification must be accompanied by an affidavit signed by an authorized representative of the institution indicating that a Notice of Status of Accreditation notifying interested parties of the Commission's adverse action has been disseminated to new enrollees and posted in conspicuous places at the institution and online to include, at minimum, the admissions office and student lounge or comparable location. In addition, the institution must submit a written teach-out plan that is in accordance with ACCET Document 32 – Closing/Teach-Out Policy.

In the case of an appeal, a written statement, plus six (6) additional copies regarding the grounds for the appeal, saved as **PDF documents and copied to individual flash drives**, must be submitted to the ACCET office within sixty (60) calendar days from receipt of this letter. The appeal process allows for the institution to provide clarification of and/or new information regarding the conditions at the institution at the time the Accrediting Commission made its decision to deny or withdraw accreditation. The appeal process does not allow for consideration of changes that have been made by or at the institution or new information created or obtained after the

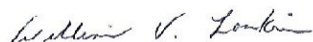
Commission's action to deny or withdraw accreditation, except under such circumstances when the Commission's adverse action included a finding of non-compliance with Standard III-A, Financial Stability, whereupon the Appeals Panel may consider, on a one-time basis only, such financial information provided all of the following conditions are met:

- The only remaining deficiency cited by the Commission in support of a final adverse action decision is the institution's failure to meet ACCET Standard III-A, Financial Stability, with the institution's non-compliance with Standard III-A the sole deficiency warranting a final adverse action.
- The financial information was unavailable to the institution until after the Commission's decision was made and is included in the written statement of the grounds for appeal submitted in accordance with the ACCET appeals process; and
- The financial information provided is significant and bears materially on the specified financial deficiencies identified by the Commission.

The Appeals Panel shall apply such criteria of significance and materiality as established by the Commission. Further, any determination made by the Appeals Panel relative to this new financial information shall not constitute a basis for further appeal.

It remains our hope that the accreditation evaluation process has served to strengthen your institution's commitment to and development of administrative and academic policies, procedures, and practices that inspire a high quality of education and training for your students.

Sincerely,



William V. Larkin, Ed. D.  
Executive Director

WVL/sef

CC: Mr. Herman Bounds, Chief, Accreditation Division, US ED (aslrecordsmanager@ed.gov)  
Ms. Charity Helton, Accreditation Division, US ED (charity.helton@ed.gov)  
Ms. Sylvia Rosa Casanova, Director for Private and Put-of-State Postsecondary Education,  
State Council of Higher Education for Virginia (sylviarosacasanova@schev.edu)