

1007 North Orange Street 4th Floor, MB #166 Wilmington, DE 19801 www.msche.org

STATEMENT OF ACCREDITATION STATUS

The Statement of Accreditation Status (SAS) is the official statement of the Middle States Commission on Higher Education (MSCHE) about each institution's current accreditation status and scope of accreditation. The SAS also provides a brief history of the actions taken by the Commission.

Institution:	ESSEX COUNTY COLLEGE Newark, NJ
Address:	303 University Avenue
	Newark, NJ 07102
Phone:	(973) 877-3000
URL:	www.essex.edu
Accreditation Liaison Officer (ALO):	Mr. John Runfeldt
Commission Staff Liaison:	Dr. Paul Starkey, Vice President

Accreditation Summary

For more information, see the Commission's Accreditation Actions Policy and Procedures.

Phase: Accredited

Status: Accreditation Reaffirmed

Accreditation Granted: 1974

Last Reaffirmation: 2018

Next Self-Study Evaluation: 2022-2023

Alternative Delivery Methods

The following represents approved alternative delivery methods included in the scope of the institution's accreditation:

Distance Education

Approved to offer programs by this delivery method

Correspondence Education

Not approved for this delivery method

Credential Levels

O Approved Credential Levels

The following represents credential levels included in the scope of the institution's accreditation:

- **Postsecondary award (< 1 year)** Included within the scope:
- Postsecondary award (1-2 yrs) Included within the scope:
- Associate's Degree or Equivalent Included within the scope:

Locations

The following represents branch campuses, additional locations, and other instructional sites that are included within the scope of the institution's accreditation:

Location	Туре
ECC - West Essex Branch Campus 730 Bloomfield Avenue West Caldwell, NJ 07006	Branch Campus
FOCUS 433 Broad Street Newark, NJ 07102	Other Instructional Site
West Caldwell School of Technology 620 Passaic Avenue West Caldwell, NJ 07006	Other Instructional Site

Definitions: For definitions of branch campus, additional locations, or other instructional sites, see the **Commission's Substantive Change Policy and Procedures**.

Accreditation Actions

The following represents the MSCHE accreditation actions taken in the last ten (10) years. For more information, see the **<u>Commission's</u> <u>Accreditation Actions Policy and Procedures</u>** *and* <u>**the Substantive Change Policy and Procedures**</u>.

March 5, 2020	To note that the Mid-Point Peer Review has been conducted. To request that, beginning in 2020 and in conjunction with each Annual Institutional Update prior to the self-study visit in 2022-2023, the institution provide further evidence of (1) the improvement of key indicators of student success, including retention and graduation rates (Standard IV), (2) an annual independent audit confirming financial viability with evidence of follow-up on any cited concerns (Standard VI), and (3) enrollment management planning linked to budget development (Standard VI).
June 27, 2019	To acknowledge receipt of the monitoring report. The next evaluation visit is scheduled for 2022-2023.
June 21, 2018	To accept the monitoring report and to note the visit by the Commission's representatives. To remove probation because the institution is now in compliance with Standard 3 (Institutional Resources) and Standard 4 (Leadership and Governance) and to reaffirm accreditation. To request a monitoring report, due April 1, 2019, demonstrating (1) sustainability of implemented corrective measures (formerly Standard 3, now Standard VI and formerly Standard 4 now Standard VII) and further evidence of (2) clearly documented and communicated planning and improvement process that provide for constituent participation, (3) financial planning and budget process that are aligned with mission, goals and objectives and are evidence-based, (4) assessment of the effectiveness of planning, resource allocation, institutional renewal, and availability of resources (Standard VI) and (5) periodic assessment of the effectiveness of governance, leadership and administration (Standard VII). The next evaluation visit is scheduled for 2022-2023.
November 16, 2017	To accept the monitoring report and to note the visit by the Commission's representatives. To note that the institution is now in compliance with Standard 8 (Student Admissions and Retention). To place the institution on

probation because of insufficient evidence that the institution is currently in compliance with Standard 3 (Institutional Resources) and Standard 4 (Leadership and Governance). To note that the institution remains accredited while on probation. To note further that federal regulations limit the period during which an institution

may be in non-compliance to two years. To request a monitoring report, due March 1, 2018, documenting evidence that the institution has achieved and can sustain compliance with Standard 3 and Standard 4, including but not limited to evidence of the development and implementation of (1) a financial planning and budgeting process aligned with the institution's mission, goals and plan that provides for an annual budget and multi-year budget projections, both institution-wide and among departments; utilizes planning and assessment documents; address resource acquisition and allocation for the institution (2) adequate institutional controls to deal with financial, administrative and auxiliary operations, and rational and consistent policies and procedures in place to determine allocation of assets (3) an annual independent audit confirming financial responsibility, with evidence of follow-up on any concerns cited in the audit's accompanying management letter (4) the analysis and improvement of financial practices (Standard 3) and written governing documents, such as a constitution, by-laws, enabling legislation, charter or other similar documents that: delineate the governance structure and provide for collegial governance, and the structure's composition, duties and responsibilities; assign authority and accountability for policy development and decision making including a process for the involvement of appropriate institutional constituencies in policy development and decision making, provide the selection process for governing body members and (5) periodic assessment of the effectiveness of the institutional leadership and governance (Standard 4). A small team visit will follow submission of the monitoring report. To direct a prompt Commission liaison guidance visit to discuss the Commission's expectations. To remind the institution of its obligation to inform the Commission about any and all significant developments related to any investigation(s) conducted by state, federal, or other agencies. Copies of the report(s) that follow from any of these investigations must be submitted to the Commission within 10 business days of their completion. Upon reaffirmation of accreditation, the next evaluation visit is scheduled for 2022-2023.

November 16, 2017 To note the visit by the Commission's representative.

June 22, 2017 To note the visit by the Commission's representatives. To remind the institution of the Commission's action of November 17, 2016, to place the institution on warning because of insufficient evidence that it is currently in compliance with Standard 3 (Institutional Resources), Standard 4 (Leadership and Governance), and Standard 8 (Student Admission and Retention) and to request a monitoring report due September 1, 2017. To note that the institution remains accredited while on warning. Upon reaffirmation of accreditation, the next evaluation visit is scheduled for 2022-2023.

November 17, 2016

To accept the monitoring report and to note the visit by the Commission's representatives. To warn the institution that its accreditation may be in jeopardy because of insufficient evidence that the institution is currently in compliance with Standard 3 (Institutional Resources), Standard 4 (Leadership and Governance), and Standard 8 (Student Admission and Retention). To note that the institution remains accredited while on warning. To request a monitoring report, due September 1, 2017, documenting evidence that the institution has achieved and can sustain compliance with Standards 3, 4, and 8, including but not limited to evidence of the development and implementation of (1) adequate institutional controls to deal with financial operations, with evidence that rational policies and procedures for expenditure control are being consistently followed (Standard 3); (2) (a) procedures for the periodic assessment of the effectiveness of institutional leadership and governance, including annual evaluations of the president and self-assessment by the Board, and the use of such assessment results to inform decision making and continuous improvement, and (b) a conflict of interest policy for the Board which ensures that potential conflicts are disclosed and that they do not interfere with the impartiality of Board members or outweigh the greater duty to secure the academic and fiscal integrity of the institution (Standard 4); and (3) a comprehensive enrollment management program, including the assessment of how effectively such practices support admission, retention, remediation, and related services (Standard 8). A small team visit will follow submission of the monitoring report. To direct a prompt liaison guidance visit to discuss Commission expectations. To note the institution's obligation to inform the Commission about any and all significant developments related to any investigation(s) conducted by state, federal, or other agencies. Copies of the report(s) that follow from any of these investigations must be submitted to the Commission within 10 business days of their completion. Upon reaffirmation of accreditation, the institution will return to its established evaluation schedule.

July 22, 2016To note that an extension has been granted for the submission of a monitoring report, requested in the
Commission's action of June 23, 2016, that provides evidence and documentation of ongoing institutional
compliance with Standards 3, 4, 5, 6 and 8. The monitoring report is now due September 1, 2016.

June 23, 2016 To reject the supplemental information report because it provided limited institutional responses to requested information and did not present evidence and analysis in a manner conducive to Commission review. To request a monitoring report, due August 1, 2016, including but not limited to documented evidence of (1) resource allocation procedures that provide for (a) adequate institutional controls to deal with financial, administrative and auxiliary operations, (b) rational and consistent policies and procedures to determine and monitor the allocation of assets,

and (c) periodic assessment of the effective and efficient use of institutional resources (Standard 3); (2) a governing body that (a) certifies to the Commission that the institution is in compliance with the Requirements of Affiliation, the accreditation standards, and all policies of the Commission, (b) adheres to a conflict of interest policy that assures the impartiality of governing body members and the academic and fiscal integrity of the institution, and (c) undertakes the periodic assessment of the effectiveness of institutional leadership and governance (Standard 4); (3) an administration characterized by (a) a chief executive officer, with the combination of academic background and other qualities appropriate to an institution of higher education, whose primary responsibility is to lead the institution toward the achievement of its goals, (b) administrative leaders with appropriate skills, degrees and training to carry out their responsibilities and functions, (c) qualified staffing appropriate to the goals, type, size and complexity of the institution, (d) clear documentation of the lines of organization and authority, and (e) improvements based on the periodic assessment of the effectiveness of administrative structures and services (Standard 5); (4) equitable and consistent treatment of all institutional constituencies in the application of (a) fair and impartial practices in the hiring, evaluation and dismissal of employees, (b) administrative reviews, (c) institutional governance and management practices, (d) policies regarding student evaluation, and (e) improvements based on periodic assessments of institutional integrity (Standard 6); and (5) basic skills and enrollment management policies and procedures that (a) support and reflect the mission of the institution, (b) ensure that admitted students who marginally meet or do not meet the institution's qualifications achieve expected learning goals and higher education outcomes at appropriate points, and (c) makes use of periodic assessments of policies and procedures related to admission, remediation, retention, and graduation (Standard 8). A small team visit will follow submission of the monitoring report. To note the institution's obligation to inform the Commission about any and all significant developments related to any investigation(s) conducted by county, state, federal or other agencies. Copies of the report(s) that follow from any of these investigations must be submitted to the Commission within 10 business days of their completion. The date for the next accreditation review will be determined by the Commission when it revises the accreditation cycle.

April 11, 2016Staff acted on behalf of the Commission to request a supplemental information report, due May 12, 2016,
addressing recent developments at the College which may have implications for current and future compliance with
Standard 3 (Institutional Resources), Standard 4, (Leadership and Governance), Standard 5 (Administration), and
Standard 6 (Integrity).

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August 31, 2015	To acknowledge receipt of the substantive change request. To include the online AS in Business Administration and the online AA in Liberal Arts within the scope of the institution's accreditation. The Periodic Review Report is due June 1, 2018.
November 20, 2014	To accept the progress report. The Periodic Review Report is due June 1, 2018.
March 7, 2013	To accept the monitoring report and to note the visit by the Commission's representatives. To remove the warning and to reaffirm accreditation because the institution is now in compliance with Standard 14 (Assessment of Student Learning). To request a progress report due by October 1, 2014, documenting further evidence of (1) the implementation of an organized, systematic, and sustainable process to assess the achievement of student learning goals in all programs that foster student learning and development, including general education (Standards 14 and 12), and (2) the completion of a new institutional strategic plan that reflects assessment results, and that incorporates and evaluates goals from the institution's technology plan, facilities plan, and enrollment management plan (Standard 7). The Periodic Review Report is now due June 1, 2018.
June 28, 2012	To accept the monitoring report and to note the visit by the Commission's representatives. To note that the institution is now in compliance with Standard 7 (Institutional Assessment). To continue to warn the institution that its accreditation may be in jeopardy because of insufficient evidence that it is in compliance with Standard 14 (Assessment of Student Learning). To note that the institution remains accredited while on warning. To request a monitoring report, due December 1, 2012, documenting evidence that the institution has achieved and can sustain compliance with Standard 14 (Assessment of Student Learning). To request that the monitoring report include, but not be limited to, evidence of an organized, systematic, and sustainable process to assess the achievement of student learning goals in all programs that foster student learning and development, and that (1) uses direct measures that are clearly related to the goals they are assessing; (2) provides sufficient, convincing evidence that students are achieving key learning outcomes; (3) uses results to improve teaching and learning; and (4) uses student learning report also provide evidence (5) that institutional assessment information is used to gain efficiencies in programs, services, and processes and to inform decision-making about institutional planning and resource allocation (Standard 7); and (6) of the further implementation and assessment of appropriate general education learning outcomes, including technological competency, consistent with the institution's overall plan for assessing

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student learning (Standard 12). A small team visit will follow submission of the monitoring report. The due date for the next Periodic Review Report will be established when accreditation is reaffirmed.

November 17, 2011 To note the visit by the Commission's representative. To remind the institution that its accreditation may be in jeopardy because of insufficient evidence that the institution is currently in compliance with Standard 7 (Institutional Assessment) and Standard 14 (Assessment of Student Learning). To note that the institution remains accredited while on warning. To remind the institution of the monitoring report, due March 1, 2012, documenting that the institution has achieved and can sustain compliance with Standards 7 and 14, including but not limited to the development and implementation of (1) an organized and sustainable assessment process, including direct measures, to evaluate and improve institutional effectiveness, with evidence that assessment information is used to gain efficiencies in programs, services, and processes (Standard 7); and (2) an organized and sustainable process to assess the achievement of student learning goals at the course and program levels, with evidence that assessment information is used to improve teaching and learning (Standard 14). In addition, to request that the monitoring report document (3) the implementation of a comprehensive enrollment management plan for recruitment and retention, with evidence of the use of relevant data for decision-making (Standard 8); and (4) the articulation and assessment of appropriate general education learning outcomes, including technological competency (Standard 12). A small team visit will follow submission of the monitoring report. The due date for the next Periodic Review Report will be established when accreditation is reaffirmed.

June 23, 2011 To warn the institution that its accreditation may be in jeopardy because of insufficient evidence that the institution is currently in compliance with Standard 7 (Institutional Assessment) and Standard 14 (Assessment of Student Learning). To note that the institution remains accredited while on warning. To request a monitoring report, due March 1, 2012, documenting that the institution has achieved and can sustain compliance with Standards 7 and 14, including but not limited to the development and implementation of (1) an organized and sustainable assessment process, including direct measures, to evaluate and improve institutional effectiveness, with evidence that assessment information is used to gain efficiencies in programs, services, and processes (Standard 7); and (2) an organized and sustainable process to assess the achievement of student learning goals at the course and program levels, with evidence that assessment information is used to improve teaching and learning (Standard 14). In addition, to request that the monitoring report document (3) the implementation of a comprehensive enrollment management plan for recruitment and retention, with evidence of the use of relevant data for decision-making

(Standard 8); and (4) the articulation and assessment of appropriate general education learning outcomes, including technological competency (Standard 12). To direct a prompt liaison guidance visit to discuss the Commission's expectations. A small team visit will follow submission of the monitoring report. The due date for the next Periodic Review Report will be established when accreditation is reaffirmed.

Information about the Middle States Commission on Higher Education

The Middle States Commission on Higher Education (MSCHE) is an institutional accreditor in the United States and is recognized by the U.S. Secretary of Education and the Council for Higher Education Accreditation (CHEA). MSCHE accreditation applies to an institution as a whole rather than the specific programs within an institution. MSCHE does not approve or accredit individual programs. The MSCHE accreditation review cycle is continuous and accreditation does not expire. Each institution is reevaluated and monitored on a regular and consistent basis in accordance with the institution's assigned accreditation review cycle and Commission policy and procedures. An institution maintains its accreditation unless it is voluntarily surrendered or withdrawn by the Commission for cause, after the institution has been afforded due process. The institution's current accreditation phase and accreditation status are displayed on the institution's listing in the Institution Directory and in the Statement of Accreditation Status (SAS).