DEAC
DISTANCE EDUCATION ACCREDITING COMMISSION

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April 25, 2024

Dr. Cheri St. Arnauld
President and Chief Academic Officer
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Dear Dr. St. Arnauld:

The Distance Education Accrediting Commission (the Commission) met on March 25, 2024 to consider its February 1, 2023 show cause directive (as amended by the Commission's September 7, 2023 directive expanding the February 1 directive to encompass Standard XI. Financial Responsibility, Part Three, DEAC *Accreditation Handbook)* to direct Aspen University (AU or Aspen) to show cause why its accreditation should not be withdrawn. The Commission also evaluated Aspen's application for renewal of its accreditation.

The Commission's review of the record for the initial and expanded show cause directives included the February 1, 2023 letter and the September 7, 2023 letter from the Commission to Aspen, the February 5, 2024 Chair's Report and the Federal Student Assistance (FSA) Report pertaining to the October 19, 2023 on-site evaluation, Aspen's response to the February 5, 2024 Chair's Report, and the Commission's February 16, 2024 letter pertaining to AU's January 19, 2024 meeting with the Arizona Board of Nursing (AZ-BON) and the institution's March 6, 2024 response to the same. The Commission's review of Aspen's application for renewal of its accreditation included the February 5, 2024 Chair's Report and Aspen's response to that report.

Upon careful consideration of this record, the Commission determined that:

1) the show cause directive will continue in effect and will next be reviewed at the June 2024 Commission meeting; and
2) action on Aspen's *Application for Renewal of Accreditation* will be deferred until January 2025 in order to permit the institution to provide additional evidence of the steps it has taken to comply with DEAC standards as further specified below in this letter. Aspen is also required to undergo additional curriculum reviews for its degree programs in Addiction Studies. Those reviews will be scheduled for September 2024.

The specific reasons for the Commission's decisions, the standards pertinent to those decisions, and the actions required of the institution are set forth below in two parts. Part one of this letter addresses the standards, conduct, and documentation AU must demonstrate and/or provide for the Commission's review of the show cause directive at the June 2024 Commission meeting. Part two of this letter addresses the standards and documentation AU must provide to demonstrate compliance with DEAC accreditation standards when the Commission meets to consider Aspen's application for renewal of accreditation at the January 2025 Commission meeting.

Part One: Accreditation Standards and Procedures Referenced in February 1, 2023 Show Cause Directive as expanded by the Commission by letter dated September 7, 2023

Standard X.B. Reputation of Institution, Owners, Governing Board Members, Officials and Administrators
The institution and its owners, governing board members, officials, and administrators possess sound reputations, a record of integrity, and ethical conduct in their professional activities, business operations, and relations. The institution must promptly notify DEAC of any investigative, enforcement, legal or prosecutorial actions which may be initiated or which are current against the institution, its owners, governing board members, officials and administrators. Such notification shall include an explanation of the circumstances giving rise to such actions and the institution's response to the same as well as its explanation of why such actions should not be deemed a concern with respect to the integrity of the named persons or institutions.

Standard XI.E., Demonstrated Operations.
In all respects, the institution documents continuous sound and ethical operations, including the necessary resources to accommodate demand and assure that all learners receive a quality educational experience. The institution's name is free from any association with activity that could damage the reputation of the DEAC accrediting process, such as illegal actions, fraud, unethical conduct, or abuse of consumers.

Section XVII.E., Notification Reports, Part Two, Process and Procedures
An institution must immediately notify DEAC, in writing, of any actions the institution plans to take or has taken, or of actions taken or expected to be taken against it by any accrediting, licensing or state agency if those actions have the capacity to affect the compliance of the institution with DEAC accreditation standards and/or the reputation of the institution or DEAC, either directly or indirectly (e.g., through media coverage). This includes the institution's resolution of any complaints in a forthright, prompt, amicable, and equitable manner to DEAC's satisfaction.

A. Background on Notice and Disclosure Concerns:

In its February 1, 2023 show cause directive, the Commission summarized numerous instances where Aspen had failed in its notice obligations to DEAC. The directive also summarized failures by Aspen to competently and forthrightly interact with state licensing/authorization regulatory authorities and with state SARA portal organizations. The directive was unequivocal in its requirement that the institution should be proactive, accurate, comprehensive, and current in its communications with DEAC in the event of actions occurring at the institution or actions taken or expected to be taken by any accrediting, licensing, or state agency if such actions might impact Aspen's compliance with DEAC standards, DEAC reporting requirements, or compliance with the requirements of any such regulatory authority.

B. Events Surrounding and Including the January 19, 2024 AZ-BON Meeting

On January 19, 2024, the AZ-BON held a special meeting, the sole purpose of which was to consider whether to accept the automatic voluntary surrender of Aspen's AZ-BON provisional authorization for the BSN program as of January 2, 2024, as provided under the September 2022 Consent Agreement it had entered into with Aspen, or to delay the effective date of the Board's acceptance of the resignation until September 29, 2024 (the originally agreed-upon surrender date). The later

date would allow Aspen to complete the teach-out of the 37 students enrolled in Aspen's BSN program at clinical sites outside of Arizona (Florida, Tennessee, and Texas).

Aspen did not provide DEAC with advance notice of the January 19, 2024 special AZ-BON meeting. Rather, DEAC was informed by Mr. LaMountain (AZBPPSE) on January 18, the day before the scheduled special meeting, of both the meeting and of the jeopardy the 37 out-of-state BSN students would face should the AZ-BON accept the license resignation as of January 2, 2024. Both DEAC and Mr. LaMountain immediately reached out to the AZ-BON, seeking to delay the effective date of the provisional authorization surrender until the welfare of the out-of-state students could be protected or at least ameliorated.[1] Mr. LaMountain and representatives of DEAC, including DEAC's executive director, attended the AZ-BON special meeting by telephone. DEAC did not receive any communication from Aspen with respect to the January 19 meeting until January 22.

On February 16, 2024, DEAC sent Aspen a letter expressing concern not just with Aspen's failure to provide DEAC with advance notice of the AZ-BON special meeting on January 19, 2024, and of the risks facing the 37 out-of-state BSN students, but also with respect to certain statements made by Aspen counsel and other Aspen representatives during the course of the meeting. These included inconsistencies in Aspen's statements, both before and during the meeting, with respect to the anticipated completion dates of the Arizona and non-Arizona BSN cohorts. [2]

Aspen responded to DEAC's February 16, 2024 letter by a letter dated March 5, 2024. Rather than allay DEAC's concerns, the March 5 letter served only to heighten them. For example,

- The letter stated that Aspen only learned on the day of the meeting, and only as a result of a conversation with AZBPPSE Executive Director LaMountain, that AZ-BON's acceptance of Aspen's surrender of the AZ-BON provisional authorization would result in an immediate withdrawal of the program from AZBPPSE authorization, which would in turn result in the loss of Aspen's state authorizations to provide the BSN program in Florida, Tennessee, and Texas. The loss of state authorizations would also require DEAC to remove the program from Aspen's scope of accreditation.
- The March 5 letter also stated that, on January 17, two days before the special meeting, Aspen's counsel had discussions with the AZ-BON Board Staff regarding the Board's analysis and conclusion as to the proper construction of the Aspen-AZ-BON Consent Agreement, "*as well as the impact such a determination might potentially have on the 37 students outside Arizona." (emphasis added)* Aspen itself did not at that point reach out to the other triad partners, DEAC and AZBPPSE, to make them aware of the issue and seek their support for a resolution that could protect those students from whatever impact had been identified and discussed. Rather, Aspen stated that they expected the meeting "would be nothing more than a formal confirmation that Aspen's provisional authority had been surrendered on January 2."
- Aspen's letter states: "On the following day, January 18, Aspen concluded that it would likely not be successful if it challenged Board Staff's interpretation of the Consent Agreement and therefore decided that it would not make such a challenge. One factor in Aspen's decision

[1] According to Aspen's March 5, 2024 letter, Aspen representatives did not understand until January 19 that loss of the AZ-BON provisional authorization would mean loss of its state authorizations to continue the teach-out in the three non-AZ states.

[2] The dates for completion of the program provided by Aspen during the January 19 meeting were also inconsistent with those in the January 18 press release issued by Aspen Group, Inc.

making was that it was ending its relationship with AZ-BON on a positive note, having successfully completed the teach out for its Arizona location, and did not want to cause reputational harm by formally disputing Board Staff's interpretation of the Consent Agreement."

- Notwithstanding Mr. LaMountain's statements to the contrary on January 19 and DEAC's reaffirmation of those statements in its letter of February 16, Aspen continued to represent that Aspen's "ability to continue providing instruction in those [non-Arizona] states" was dependent on DEAC's accreditation --- rather than that Aspen's ability to offer instruction in those states was immediately lost when Aspen lost Arizona authorization for the program.[3]
- Aspen's March 5 letter did not respond to DEAC's direct questions with respect to certain statements made by Aspen during the hearing.

C. January Chair's Report and Aspen Response to the Report

"An institution's preparation and submission of an SER is intended both to demonstrate an institution's compliance with DEAC's accreditation standards (see Part Three of the DEAC *Accreditation Handbook*) and to provide the institution with a useful tool of self-assessment." (Part Two, Section IV.A). The February 5, 2024 Chair's Report provides a largely positive assessment of Aspen's SER and of the cooperation and responsiveness of the institution during the site visit. However, the report notes a number of material issues where assertions made by Aspen in its SER were not supported by findings of the team.[4] These included, by way of example

- inadequate qualifications of certain faculty, academic staff and academic leadership;
- the absence of timely program reviews; and
- problems with the Psychology and Addiction program.

For example, the SER states with respect to Standard VI.C (Instructors, Faculty and Staff): " At an absolute minimum, all faculty must possess an advanced academic degree in the specialty area of instruction for which they are assigned courses. All faculty possess either a master's degree or a doctorate in the disciplinary area."[5] The SER does not disclose that, in actuality, faculty who did not meet these qualifications were teaching General Education courses at the bachelor's degree level, that not all programs were reviewed on a timely basis, and that the Psychology and Addiction program had inadequacies in faculty, curriculum, and leadership.

The Commission recognizes that the SER, in fulfilling its purpose of demonstrating compliance with DEAC accreditation standards, is often framed in a way that presents the institution in the most positive light and will typically focus on the institution's strengths rather than its weaknesses. The Commission also recognizes, as did the Chair's Report, that Aspen is a school with considerable

[3] The Aspen letter rather continues to point to DEAC as the cause of its plight, stating: "[Aspen] was simply trying to provide factual information about DEAC's accreditation of Aspen, . . . and the impact the voluntary surrender of Aspen's Arizona provisional authority would have on DEAC's accreditation, *and with it, Aspen's ability to continue providing instruction in those states*." (italics added)

[4] The inconsistencies between Aspen's representations in the SER and the on-site team's findings contributed to the extended period of time required to finalize the Chair's Report and also made more complex the Commission's evaluation of both the Chair's Report and Aspen's response to the same.

[5] Similar language is found in the SER with respect to Undergraduate Degrees under the same Standard VI. (p.195)

strengths and a strong infrastructure. However, given the Commission's stated concern with candor on the part of Aspen leadership, given the acknowledged challenges facing the institution resulting from the forced closure of Aspen's BSN program and the associated strain on the institution's financial strength, and given that the objective of the SER is to provide an accurate, complete, and current representation of the institution's operations, the unclear nature of certain aspects of Aspen's SER resulted in a decision by the Commission to defer action on accreditation renewal and require additional evidence of corrective actions. [6]

Commission Findings
Numerous interactions between Aspen and DEAC following the Commission's issuance of the February 1, 2023 show cause directive and continuing through the DEAC on-site evaluation team's visit in October 2023 had appeared to indicate that the Aspen management team was in fact committed to more forthright, open, direct, and reliable communications with both DEAC and state regulators. The communications and events surrounding the January 19, 2024 AZ-BON suggest that, in fact, minimal progress has been made.

In light of the foregoing, the Commission determined that AU must more effectively support in its actions its repeated verbal commitments to re-establish its reputation and relationships with triad partners, including state authorization entities, to ensure that the institution is able to serve all students through ongoing operations and teach-out commitments. In connection with this effort, the Commission directs Aspen to provide an action plan on how it intends to rebuild its reputation and good standing with DEAC and state regulatory authorities.

In addition, as several of AU's teach-out agreements will expire in 2024, AU must also provide evidence that these agreements are extended through 2025 or as long as the show cause order remains in effect.

Standard XI.A. Financial Practices
The institution shows that it is financially responsible by providing complete, comparative financial statements covering its two most recent fiscal years and by demonstrating that it has sufficient resources to meet its financial obligations to provide quality instruction and service to its students. Financial statements are audited or reviewed and prepared in conformity with generally accepted accounting principles in the United States of America or International Financial Reporting Standards. The institution's budgeting processes demonstrate that current and future budgeted operating results are sufficient to allow the institution to accomplish its mission and goals.

and

Standard XI.C. Financial Stability and Sustainability
The institution maintains adequate administrative staff and other resources to operate effectively as a going concern and is not exposed to undue or insurmountable risk. Any risk that exists is adequately monitored, manageable, and insured. In the event the financial operations of the institution are supported by a parent company or a third party, audited or reviewed financial statements are provided by the supporting entity to demonstrate that the supporting entity possesses sufficient financial resources to provide the institution continued financial sustainability, as well as the commitment to do

[6] P. 17 of SER: "Aspen has spent two years navigating the concerns that have been raised by DEAC and other regulators regarding the BSN Pre-licensure program, the loss of NC-SARA, and the University's financial status."

so. If the institution's financial performance is included within the parent corporation's statements, a supplemental schedule for the individual institution is appended to the parent statement.

The Commission considered the financial statements included in Exhibits 90, 91, and 92 of the institution's response to the Chair's Report. The Commission noted that the liquidity position for the institution and Aspen Group, Inc. (AGI) appears to be improving, and profitability appears to be rebounding. Despite operating losses at the parent level ($4,067,263), the internally prepared statements for both Aspen University and AGI for the period ended December 31, 2023 also indicate an improving cash position. The Commission would like to see that these trends are continuing.

In addition, the Commission noted Aspen's statement that:

> Aspen University maintains a rolling 24-month financial forecast, updated quarterly, which guides the University relative to marketing spending, faculty, staffing requirements, enrollment and student body projections, academic operations, enrollment center staffing and G&A expense planning." . . . [Further, the rolling forecast] is adjusted throughout the year based on actual results, as new programs and courses are developed, and in response to enrollments and faculty needs." (AU response, p. 86)

Based upon the information and exhibits provided by Aspen University in response to Standards XI.A. and XI.C., the Commission is requiring the following:

1) A quarterly financial report, with budget compared to actual results for the quarter beginning on February 1, 2024 and extending through the 2nd quarter of its fiscal year;
2) Quarterly program-level enrollment report, including projections compared to actual results beginning on February 1, 2024 and extending through the 2nd quarter of its fiscal year.
3) Quarterly ratio analysis, beginning on February 1, 2024; the ratios should include as a minimum the current ratio and the primary reserve ratio.
4) The FY2025 budget.
5) Aspen University's rolling 24-month financial forecast and specific examples of how the forecast has informed decision-making for the most recent quarter ending April 30, 2024 and plans for the first quarter of Aspen's 2025 fiscal year.

Finally, the Commission noted that the institution's description relative to a potential loss of Title IV eligibility does not fully address the potential financial impact on the organization. The institution is required to provide the following:

1) A report indicating (a) the number of students participating in Title IV funding, in the aggregate and by program, and (b) the percentage of Aspen revenues associated with Title IV funding, in the aggregate and by program; and

2) A description of how and the extent to which a loss of Title IV eligibility would impact the financial position of the university,

Standard III.D. Comprehensive Curricula
Curricula and instructional materials are sufficiently comprehensive for students to

achieve the stated program outcomes. Their organization and content are supported by reliable research and practice. The organization and presentation of the curricula and instructional materials reflect sound principles of learning and are grounded in distance education instructional design principles. The curricula and instructional materials reflect current knowledge and practice. Curricula and instructional materials are kept up to date, and reviews are conducted and documented on a periodic basis. Instructions and suggestions on how to study and how to use the instructional materials are made available to assist students to learn effectively and efficiently.

5. Bachelor's Degree
Bachelor's degree programs are designed and offered in a way that appropriately balances distinct types and levels of education and must include a comprehensive curriculum with appropriate coursework to achieve the program outcomes.

6. Master's Degree
Master's degree programs are designed and offered in a way that provides for a distinct level of education and fosters independent learning and an understanding of research methods appropriate to the academic discipline. Graduate-level courses are based on appropriate prerequisites, learning outcomes, and assessments. Institutions establish whether graduate courses are completed in a prescribed sequence to facilitate student achievement of program outcomes.

The Chair's Report notes that Aspen University submitted a non-substantive change to DEAC on April 21, 2020, changing the name of the Psychology and Addiction Counseling programs to Psychology and Addiction Studies. Despite implementing this change in 2020 and notwithstanding the material change in focus reflected by the name change, the evaluation team noted that the course materials for the program remained unchanged and that the program had not undergone a program review since 2018. This gap in the review cycle not only deviated from Aspen University's standard program review cycle but led to a material shortcoming given the published change in scope of the program. Additionally, when the School of Nursing and Health Sciences Advisory Council evaluated the Psychology and Addiction Studies programs in 2018, the Council included only one member with a background in addiction studies, raising concerns about the depth of expertise applied to the council's review.

In response to the concerns highlighted in the Chair's Report regarding deficiencies in the curriculum and instructional components of the bachelor's and master's degree programs in Psychology and Addiction Studies, Aspen University committed to addressing these issues by hiring an additional instructional designer to facilitate a thorough program review. The university stated that the process would commence in Spring 2024 and conclude by the year's end. (AU response, p. 25) The Commission, however, deemed this response insufficient and lacking in urgency. Students will have been enrolled in a program with significant deficiencies potentially since 2018, and possibly earlier. There was concern that the review of the program had only been scheduled after the Chair's Report identifying the University's nonconformity with its internal policy was issued.

The Commission requires the following:

1) AU must demonstrate that a thorough review of the BAPAS and MAPAS program curricula has been conducted, that the faculty for both programs have been re-evaluated for competence

and expertise, and that the testing and capstone projects are sufficient to demonstrate that students graduating from those programs meet program outcome expectations. AU is required to identify and provide background information for each of the Committee members assigned to each program review, showing alignment with its *Program Review Manual* that states the Committee will include "a mix of faculty, experts from the field, students, and school administration. Provide names, titles, and organizations. The Committee Chair will be a member of the school administration, e.g., Dean, Program Director, or other Director." AU must also provide evidence it has collected the data gathered*,* as listed in the *Program Review Manual,* to initiate the program review. Provide the following to the Commission: (a) the evaluation reports of the program reviewers; (b) the analysis, conclusions, and recommendations of the reviewing Committee; and (c) the steps taken by Aspen with respect to the program following the program review.

2) AU must provide an updated *Program Review Manual* that further details how the data gathered and the subsequent review process reflect current knowledge and practice and are conducted in accordance with the institution's published program review schedule. The institution should also consider employer feedback and other industry inputs in its program review process and must demonstrate how this collected data has been considered and incorporated, if and when applicable, in the Psychology and Addiction Studies undergraduate and graduate programs.

Aspen University must provide the requested documentation for Standards X.B., XI.A., XI.C., XI.E and III.D. by **June 1, 2024** for review by the Commission at its June 2024 meeting.

Part Two: Accreditation Standards of Concern and Documentation Required for the January 2025 Commission Meeting

Standard II.B. Strategic Planning
The institution has a systematic process of planning for the achievement of goals that support its mission. The institution's planning process involves all areas of the institution's operations (e.g., admissions, academics, technology, etc.) in identifying strategic initiatives and goals by evaluating external and internal trends as they affect the future. At a minimum, the strategic plan addresses finances, academics, technology, admissions, marketing, personnel, and institutional sustainability. The strategic plan is reviewed and updated annually using established metrics designed to measure achievement of strategic planning goals and objectives. The plan helps institutions set priorities, manage resources, and set goals for future performance.

The Chair's Report acknowledged Aspen University's strategic planning efforts but pointed out that the existing plan did not look beyond 2024 and neither addressed the institution's ongoing regulatory, educational, and financial challenges (in large part but not wholly due to the problems with the BSN program) nor outlined a clear path for effective implementation of the stated strategy. In response to the Chair's Report, Aspen University submitted a draft of its 2025-2027 strategic plan for Trustee approval, expected by late March 2024. This draft introduces new metrics, specifies roles for responsible individuals, and details certain resource needs, including personnel numbers and marketing expenditures. However, the Commission found that the plan needs clearer alignment between financial resources and strategic objectives. To address this gap, Aspen University must enhance its strategic plan

with specific resource allocations tailored to its strategic objectives, ensuring these allocations are consistent with its current enacted budget and forecasts.

Standard III.D.1. Program Advisory Council
The institution maintains an Advisory Council for each major group of programs or major subject matter disciplines it offers. The Advisory Council includes members not otherwise employed or contracted at the institution, consisting of practitioners and employers in the field for which the program prepares students. Advisory Councils

a. meet at least annually;
b. provide advice on the current level of skills, knowledge, and abilities individuals need for entry into the occupation; and
c. provide the institution with recommendations on the adequacy of educational program outcomes, curricula, and course materials.

The Chair's Report required Aspen University to demonstrate the inclusion of individuals with expertise in psychology and addictions on the Nursing and Health Care Sciences Advisory Council to ensure adequate review and curriculum development support in these areas. Aspen University responded by updating the advisory council roster, incorporating at least three additional members with backgrounds in psychology and addiction studies. Moving forward, Aspen University is required to provide evidence of these members' participation in meetings, as documented in meeting minutes, and to show tangible evidence of their contributions towards the revision and improvement of the BAPAS and MAPAS programs.

Section V.A, Curricular Review, Part Two, Processes and Procedures, DEAC *Accreditation Handbook*
By no later than September 30, 2024, and following the implementation of a program review for the BAPAS and MAPAS programs, Aspen University must submit the curriculum for these programs for a curricular review by a DEAC subject matter specialist.

Standard III.H. Exams and other Assessments
Examinations and other assessment techniques provide adequate evidence of the achievement of stated learning outcomes. The institution establishes and enforces grading criteria that it uses to evaluate and document student attainment of learning outcomes.
3. FIRST PROFESSIONAL AND DOCTORAL DEGREES
The institution assesses student achievement through multiple means of evaluation that includes a doctoral dissertation or final research project as well as other forms of assessments such as qualifying examinations, comprehensive examinations, or other assessments that demonstrate student mastery of the stated program learning outcomes. The institution requires students to successfully complete all coursework and a doctoral dissertation or final research project to graduate from the program.

The Chair's Report called for Aspen University to validate that the comprehensive assessments within the DSCS program effectively evaluate students' knowledge and mastery of the subject matter. In response, Aspen University detailed its approach of incorporating proctored assessments throughout the courses within the program, instead of relying on a singular comprehensive examination. Aspen stated in its document entitled “Education Frameworks” that, although every course is an experience that builds towards the dissertation, the dissertation (EDD/DSCS) officially begins when the candidate

enters the first dissertation course and ends when they have successfully defended the dissertation to the committee members. (See p. 9 of Education Frameworks)

In its next response, AU must provide further explanation, including assessment data, to demonstrate that this approach to the comprehensive exam is effective in preparing students for the dissertation. AU should include in its response evidence of how it is measuring whether students have achieved the program learning outcomes in all programs where this approach is used. For example, the Problem-Based Research in Action course includes EdD students. How does AU verify and report on outcome achievement for each distinct program? This could include a rubric to demonstrate how the grading criteria align with the distinct program learning outcomes.

The Chair's Report also required AU to provide evidence that the level of rigor for assignments and examinations throughout the Master of Science in Public Health are at the graduate level and are aligned with the program outcomes. In response, AU provided several types of assessments used in the MS Public Health Program that appear to be at the graduate level. It was not apparent, however, that AU has aligned these assessments with the program learning outcomes as required in the Chair's Report. In its next response, AU should include a curriculum map to confirm this alignment.

Standard III.I Student Integrity and Academic Honesty
The institution publishes clear, specific policies related to student integrity and academic honesty. The institution affirms that the student who takes an assessment is the same person who enrolled in the program and that the examination results will reflect the student's own knowledge and competence in accordance with stated learning outcomes.
2. DEGREE PROGRAMS
In addition to the requirements for non-degree programs above, degree-granting institutions meet this requirement by administering proctored assessments at intervals throughout the program of study and provide a clear rationale for placement of the proctored assessments within the program. Proctors use valid government-issued photo identification or other means to confirm student identity.

The Chair's Report required Aspen University to supply documentation that it implemented three proctored exams in its Business programs. This documentation needed to detail the specific courses featuring proctored exams across the programs and describe how these exams are systematically integrated throughout the Business curriculum. However, the syllabi provided revealed that some of these exams would not be implemented until the end of March 2024. In its follow-up, Aspen University is expected to present documentation that proctoring has been fully implemented.

Standard IV.J. Student Complaints
The institution has policies and procedures for receiving, responding to, and addressing student complaints. The policies and procedures should embody the principles of fairness, responsiveness, respect, due process and proportionality.
1. <u>Institutional Complaints</u>
DEAC requires institutions to have written complaint policies and procedures for the purposes of receiving, responding to, addressing, and resolving complaints made by students, faculty, administrators, or any party, including one who has good reason to believe that an institution is not in compliance with DEAC accreditation standards.

2. At a minimum, the institution's policy instructs students how to file a complaint or grievance and the maximum time for resolution. The institution's complaint policy and procedures are available to all students. The institution defines what it reasonably considers to be a student complaint.
3. The institution reviews in a timely, fair, and equitable manner any complaint it receives from students. When the complaint concerns a faculty member or administrator, the institution may not complete its review and make a final decision regarding a complaint unless, and in accordance with its published procedures, it ensures that the faculty member or administrator has sufficient opportunity to provide a response to the complaint. The institution takes any follow-up action, including enforcement action if necessary, based on the results of its review.

The Chair's Report highlighted students' varied responses to certain administrative practices at the university, including frequent advisor changes, a perceived lack of responsiveness by faculty/advisors, and insufficient faculty feedback. Students reported that the transitions between advisors were difficult, primarily due to inadequate communication about these changes. Additionally, although students were familiar with Aspen University's complaint policy, many expressed confusion over the process and noted a lack of guidance on how to effectively use this policy when presenting concerns to their advisors. The Chair's Report required Aspen University to explain how the complaint process is disclosed to students and support its explanation with examples of how such disclosures are presented to students, extending beyond the disclosures available in the student catalog.

Aspen University submitted an extensive account of its complaint process, including details on how academic advisors can support students through this process. Both the university catalog and website describe the complaint policy, which specifies the need to submit a Complaint Form. However, the actual Complaint Form could not be located on the institution's website. In accordance with Standard IV.J., which mandates that the institution's Complaint Policy and procedures be readily accessible to all students, Aspen University is required to provide evidence that the Complaint Form is easily accessible on its website. Additionally, the university should ensure that clear instructions for accessing the Complaint Form are included in the catalog. In addition, Aspen should review and revise its published complaint procedures, as required, to ensure that the procedures are clearly communicated, easy to use by students, and understood by faculty, advisors and other student-facing staff who may be approached by students with complaints/concerns.

Standard V.A Student Achievement
The institution evaluates student achievement using indicators that it determines are appropriate relative to its mission and educational offerings. The institution evaluates student achievement by collecting data from outcomes assessment activities using direct and indirect measures. The institution maintains systematic and ongoing processes for assessing student learning and achievement, analyzes data, and documents that the results meet both internal and external benchmarks, including those comparable to courses or programs offered at peer DEAC-accredited institutions. The institution demonstrates and documents how the evaluation of student achievement drives quality improvement of educational offerings and support services.

According to a chart in the Chair's Report, five programs have graduation rates that fall below the DEAC benchmarks. AU was required to provide additional analysis and data for programs reporting graduation rates that fall below DEAC benchmarks. The Commission found that additional information is needed to assess AU's compliance with this standard. Accordingly, AU must provide more information, including

how it is actively rectifying issues such as outdated curriculum that it states are impacting graduation rates. AU must also demonstrate how its Satisfactory Academic Progress process is adequate to support student completion and describe other initiatives and interventions the institution is employing to improve its graduation rates.

In addition, the Commission's analysis of data provided by AU noted that in some cases, exclusions account for half of the students entering a cohort. AU must include a list of reasons for these exclusions, including a justification of how these are appropriate based on DEAC standards, AU demographics, and time to completion. AU must also explain why such a high percentage of students fall within its exclusions and offer alternative applicable metrics for excluded students with respect to progression, persistence, and graduate rates.

Standard VI.C.4 Undergraduate Degree Faculty
Faculty teaching undergraduate degree program courses possess, at a minimum, a degree at least one level above that of the program they are teaching and demonstrate expertise in the subject field of the discipline. Faculty teaching general education courses at the undergraduate level, including occupational/technical associate degrees, must possess a master's degree in the assigned general education subject field or have a master's degree and 18 semester credit hours in the general education subject field.

The Chair's Report noted that "[d]ue to recent cost-cutting measures, the institution has released the vast majority of its general education faculty and is using faculty from other programs to teach general education courses. While there are a sufficient number of qualified faculty in the physical sciences, the institution has numerous faculty teaching in the areas of English, Communications, and Social Sciences who do not possess the appropriate graduate degrees. The Psychology and Addiction Studies program has not adequately demonstrated that the qualifications and credentials of its faculty align with the courses that faculty are assigned." In response, Aspen University submitted a table detailing 32 faculty members, including their names, the courses they instruct, and their degree specialization and level. However, the qualifications of faculty members assigned to general education were not adequately clarified in the provided chart. To address this, Aspen University is required to furnish the academic transcripts for Carmen Silver, Joanna Oestmann, and Kay Bennett, showing that each has attained a minimum of 18 graduate credits in their respective fields of study. Additionally, Aspen University should include an explanation of the criteria and process used to ascertain that these faculty members are qualified to teach the designated general education courses.

Aspen University must provide the requested documentation for Standards II.B, III.D,1, III.H, III.I, IV.J, V.A and VI.C.4 by **December 1, 2024** for review by the Commission at its January 2025 meeting.

Additional Notes with Respect to the Extension of the Show Cause Directive and the Deferral of Action on Aspen's Application for Reaccreditation and Recertification of Title IV Eligibility

Substantive Changes. The Commission is aware that AU has been operating under a show cause directive for over one year. The Commission further recognizes that AU may desire to implement certain substantive changes which would improve the quality of the institution's educational offerings and the services it provides to its students. After considering the situation of AU, the challenges facing the institution, and the nature of the deficiencies and concerns identified by the Chair's Report and/or

by the Commission independently, the Commission has determined that AU may submit substantive change reports for changes that would materially support the institution's progress to full compliance with DEAC accreditation standards notwithstanding the continuance of the show cause directive.

DEAC Notification Procedure. In accordance with its procedure for Notification and Information Sharing (DEAC Accreditation Handbook, Part Two, Processes and Procedures Section XV.E.) and 34 Code of Federal Regulations §602.26(b)(1), the Commission provides written notice to the U.S. Secretary of Education, the appropriate state licensing or authorizing agencies, and the appropriate accrediting organizations at the same time it notifies the institution of the decision, but no later than 30 days after the Commission makes a decision to place an institution on Show Cause or continue a show cause directive. DEAC will also publish a notice in the directory section of its website when an accreditation decision has been deferred by the Commission. The notice will include a summary of the reasons for the deferral of accreditation renewal and the next date on which the institution will be reviewed by the Commission.

Disclosures to Students and Prospective Students. The Commission requires the institution that is subject to the show cause directive to disclose the action to all current and prospective students within seven business days of receipt of the written notice of the continuing show cause directive. Such notice must, at minimum, meet the requirements of Section XVI.A.2. Processes and Procedures. AU must assure that such disclosures regarding the accreditation status of the institution remain current.

Sincerely,

Leah K. Matthews
Executive Director

cc: Ms. Traci Lee, Chair of the Accrediting Commission
Kevin LaMountain, AZBPPE