



SACS Newsletter



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The Meharry Medical College Mission

Meharry Medical College exists to improve the health and health care of minority and underserved communities by offering excellent education and training programs in the health sciences; placing special emphasis on providing opportunities to people of color and individuals from disadvantaged backgrounds, regardless of race or ethnicity; delivering high quality health services; and conducting research that fosters the elimination of health disparities”

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Message from the President

As many of you know, we have begun the process of preparing for reaccreditation of Meharry Medical College by the Southern Association of Colleges and Schools (SACS). Our site visit is scheduled for the Spring of 2007 with our self study report due by August 2006. I have appointed Dr. A. Cherrie Epps, Senior Advisor to the President, Academic Affairs and Dean Emerita, School of Medicine as Director and Accreditation Liaison of SACS, which includes her serving as chairperson of the Institutional Effectiveness Committee.

Now is the time to begin the institutional self-study process, and I am requesting that each of you become actively involved in the process. The SACS reaccreditation process has changed drastically. The SACS document *The Principles of Accreditation: Foundation for Quality Enhancement* outlines the new focus and will be presented to all participant groups (Board of Trustees, Administration, Faculty, Students and Staff) in the near future.

I share with you a very important statement from the guidebook - "The first task of the Commission when considering accreditation status is to determine the institution's **integrity** and its commitment to **quality enhancement**. These two principles serve as the foundation of the relationship between the Commission and its members and candidate institutions." **Integrity and Quality Enhancement** are defined as follows:

"Integrity. Integrity, essential to the purpose of higher education, functions as the basic contract defining the relationship between the Commission and each of its member institutions. It is a relationship in which all parties agree to deal honestly and openly with their constituencies and with one another. Without this commitment, no relationship can exist or be sustained between the Commission and its member institutions. The Commission's requirements, policies, processes, procedures, and decisions are predicated on integrity."

The Commission on Colleges (COC) expects integrity to govern the operation of institutions. Therefore, evidence of intentionally withholding information, deliberately providing inaccurate information to the public, or failing to provide timely and accurate information to the Commission will be seen as the lack of a full commitment to integrity and may result in the loss of membership in the Commission on Colleges."

"Quality Enhancement. The Commission on Colleges expects institutions to dedicate themselves to enhancing the quality of their programs and services within the context of their missions, resources, and capacities, and to create an environment in which teaching, public service, research, and learning occur."

"The concept of quality enhancement is at the heart of the Commission's philosophy of accreditation; this presumes each member institution to be engaged in an ongoing program of improvement and able to demonstrate how well it fulfills its stated mission. Although evaluation of an institution's educational quality and its effectiveness in achieving its mission is a difficult task requiring careful analysis and professional judgment, an institution is expected to document quality and effectiveness in all its major aspects."

Each Committee is very important in getting the work of the self-study completed so please when asked to serve do so. If by chance you are not asked and know you can make a contribution please contact Dr. Epps by e-mail or phone. We **must** be ready; August 2006 is just eighteen months away.

John E. Maupin, Jr., D.D.S.



A Message from the SACS Accreditation Liaison Officer

Greetings to each of you. This is indeed a special time for all of us as we move forward with the SACS self-study for our reaffirmation year in 2007. The Time Line provided by SACS is included. This SACS Newsletter will periodically provide each of you pertinent information to enable you to be more knowledgeable about the new accreditation process and how you can be of assistance and involved. Included is the list of SACS Self-study chairs and co-chairs, along with internal orientation meeting dates for senior staff, leadership of each school, students, faculty, chairs and co-chairs, and staff. There will also be a special kick-off meeting for the campus community with the president. Please know that the Chairs and Co-Chairs have been provided some suggested names for their committee membership and they will be contacting those individuals and other interested persons inviting them to serve. SACS Self-Study Committees will include faculty members, administrators, alumni, Board of Trustees members, and students. If there is a particular committee that you think can use your talents, you are invited to contact my office or the chairperson of a particular committee to let them know of your interest to serve.

In addition to the above self-study committees, a new and important document must be developed based on an institutional need – The Quality Enhancement Plan (QEP) focus. Identification of this specific institutional need will be identified by a survey to be distributed campus-wide.

The SACS accreditation process is an on-going process. I look forward to working with all of you over the next two years.

A. Cherrie Epps, Ph.D.

The Process of Accreditation

The Commission evaluates an institution and makes accreditation decisions based on the following (*The Principles of Accreditation: Foundations for Quality Enhancement*):

1. **Compliance with the Principles of Accreditation** defined as integrity and commitment to quality enhancement;
2. **Compliance with the Core Requirements**. An institution responds to each Core Requirement by either confirming compliance or explaining those situations for which there is non-compliance;
3. **Compliance with Comprehensive Standards**. The Comprehensive Standards set forth requirements in the following three areas: Institutional Mission, Governance and Effectiveness; Programs and Resources. Guidelines for commonly accepted standards of good practice within the larger community of the Commission's membership and describe one method for documenting faculty competence. Guidelines are not comprehensive standards;
4. **Compliance with additional Federal Regulations**. The U.S. Secretary of Education recognizes accreditation by the Commission on Colleges in establishing the eligibility for Title IV of the Higher Education Amendments and other federal programs;
5. **Quality Enhancement Plan (QEP)**. The Plan is part of an ongoing planning and evaluation process. Engaging the wider academic community, the QEP is based upon a comprehensive and thorough analysis of the effectiveness of the learning environment for supporting student learning and accomplishing the mission of the institution. It is used to outline a course of action for institutional improvement by addressing one or more issues that contribute to institutional quality, **with special attention to student learning**.

Meharry Medical College

SACS Committees

SACS Newsletter Staff

**A. Cherrie Epps,
Ph.D.,**

Publisher

**Annie W. Neal,
Ph.D.**

Editor

**Patricia Morris
Hammock**

*Layout Design &
Production Assistant*

SACS Steering Committee

Committee on Institutional Mission

Committee on Institutional Effectiveness

Committee on Educational Programs

Committee on Continuing Education, Outreach & Service

Committee on Faculty

Committee on Educational Support

Committee on Student Development Services

Committee on Governance and Administration

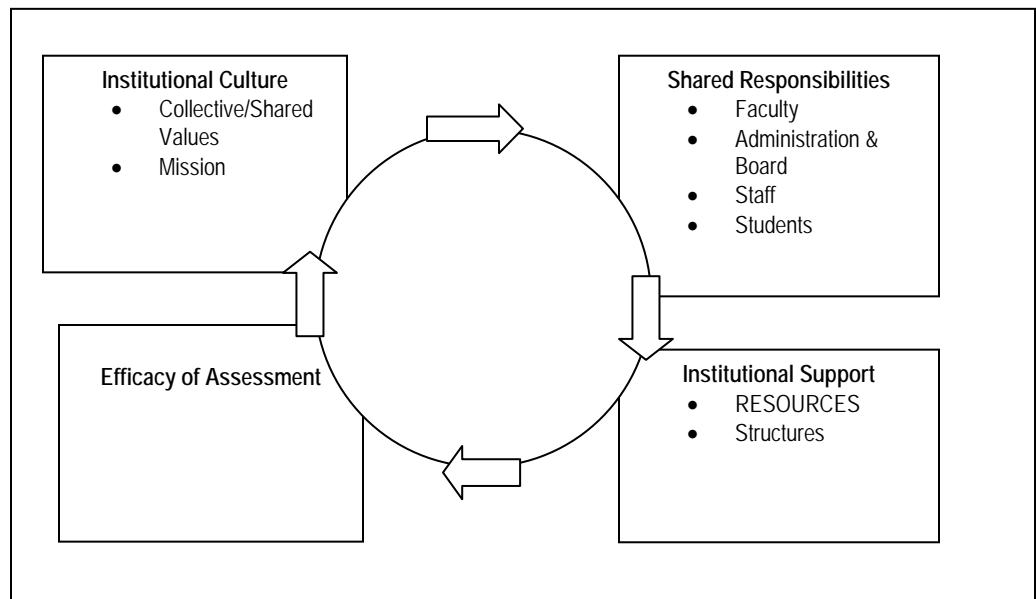
Committee on Institutional Advancement, Grants & Contracts and Related Entities

Committee on Financial Resources

Committee on Physical Resources

Committee on Health Services

Campus involvement in preparation for SACS



SACS Liaison Office

First Floor
Clay Simpson Clinical
Skills Assessment
Center
Meharry Medical College
1005 Dr. D. B. Todd, Jr.
Blvd.
Nashville, TN 37208

Phone

615.327.5935

Fax

615.327.5803

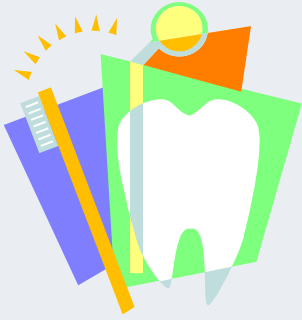
E-mail

sacsliaison@mmc.edu

COMING SOON!!!

We'll be on the Web!

sacs.mmc.edu



**Meharry Medical
College
SACS Executive
Leadership
Team**

- President
- Accreditation Liaison
- Institutional Compliance Officer
- Board of Trustees Member
- Faculty Representative
- Administration Representative



Internal SACS Orientation Schedule

President to meet with Leadership Team	March 2005
Dr. Epps to meet with Senior Staff	March 2005
SACS Orientation (Campus-wide)	March 15, 2005
Survey to be distributed to Faculty/Staff/Students	March 2005

**Time Line for Reaffirmation Tracks (SACS)
Reaffirmation Year: 2007
Track B**

Track B – Time line for institutions offering graduate and undergraduate programs or only graduate programs

Orientation of Leadership Teams	June 13, 2005
Compliance Certification Document Due	September 10, 2006
Off-site Peer Review Conducted	November 6-10, 2006
Quality Enhancement Plan Due	2007 (Approx. Jan./Feb. 2007)
On-site Peer Review	March 12 –April 27, 2007
Review by the commission on Colleges	Dec 1-3, 2007
Institutional Status Report to Follow	TBD

SACS Committee Chairs & Co-Chairs

Steering Committee	Juanita Buford, Ed.D., Chair, SOM, Linda Sander, Ph.D., Vice Chair, SOM
Institutional Purpose	Gwinnett Ladson, M.D., Chair, SOM William Scales, D.D.S., Co-Chair, SOD
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Organization and Administration	Annie W. Neal, Ph.D., Chair, SOM Leilani Bouleware, J.D., Co-Chair, Office of the Pres.
Institutional Advancement Grants, and Contracts, Related Entities	Bernard Turner, Ed.D., Chair, Institutional Adv. Peter Dolce, Ph.D., Co Chair, ORSS
Financial Resources	Dora Moore, CPA, M.B.A., Chair, B&F LaMel Bandy-Neal, M.B.A., Co-Chair, B&F
Physical Resources	Ferdinand Villalta, Ph.D., Chair, SOM Frank Hatcher, Ph.D., Co-Chair, SOM
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