



THE *SELF STUDY*:
PROCESS and PRODUCT



ABFSE

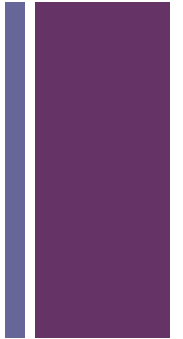
AMERICAN BOARD OF
FUNERAL SERVICE EDUCATION



Self Study is an essential element for Accreditation and re-accreditation

Self Study as a formal process

- Critically examines program structure and substance
- Evaluates program's effectiveness regarding *each* of the Standards
- Identifies strengths and deficiencies
- Indicates where modifications and improvements are necessary



+ Self Study



- The Self Study process *results in:*
a **Self Study document**

Self study document is submitted
electronically via **WEAVE**



Understand vocabulary



- Program Director / Program Coordinator
- Program v. institution
- Public / private
- Single purpose / multi-purpose
- Gatekeeper
- “*Regionally*” accredited / ABFSE accredited only
- Credit hour / quarter hour



Preparation for SS and site visit



Homework:

- Reading list (slide 8)
- WEAVE



From the reading list you will learn



- Self study
(*aka* comprehensive review)
- Site visit
- How to prepare for both



Reading List

ABFSE Accreditation & Policy manual

- Chapter V – Accreditation procedures

- Chapter IX – Standards
(effective 2025)

- Appendix B (fillable forms)

Forms B-3, B-4, B-6

Possibly B-1 or B-2





READING LIST



- Chapter V: The Accreditation Procedure
snapshot of the on-site visit *and* what happens after the Team leaves.
- Chapter IX: *READ AND RE-READ*
the ABFSE Accreditation Standards
must be addressed in the Self Study.
Team will follow them as they visit your Program.
- Current Standards effective January 1, 2025
Replaces version from January 1, 2020



Accreditation Standards (12)



- Sponsorship, Organization & Administration
- Program Learning Outcomes
- Administrative Practices
- Finance
- Curriculum
- Faculty
- Facilities
- Library/Learning Resources
- Students
- Program Planning & Assessment/Evaluation
- Default rates
- Relative to Subject matter
- Length in Credit Hours

+ more READING LIST



- **Appendix B:** Has forms to attach to your Self Study - Forms B-3, B-4, & B-6.

- possibly B-1 or B-2, if applicable

- Don't overlook the "Curriculum Distribution by ABFSE Content" Form B-6 Review Standard 5 Curriculum for this

- **Appendix E:**

Required *if* you offer any course (or more) in a distance mode.

- established in October 2019



Form B-6 & Appendix E

- Form B-6 is:
 - “Curriculum Distribution by ABFSE Content Area”
 - (Standard 5 - Curriculum)
- Appendix E – if you offer course(s) via Distance Learning

+ Appendix B (all submit)



- Form B-3

- Transmittal Form
(with signatures)

- Form B-4

- Program and
Institution Data Form
(in Weave)

+ *Some programs submit*



- Form B-1
Application for
Candidacy
- Form B-2
Application for Initial
Accreditation



CANDIDACY



Read Chapter IV. It specifies the points you will need to cover, depending on the conditions under which you are applying.
(see also Form B-1)

Fees in Appendix D



INITIAL ACCREDITATION (follows Candidacy)

Read Chapter III.C, (begin pages 3-1),
plus Chapter IX
and Appendix B, C and E.
(See also Form B-2)





THE SELF STUDY IS KEY

■ TO A SUCCESSFUL SITE VISIT



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+ GETTING STARTED



- **Begin early.** It makes sense to give the process an **academic year**.
- Use a **STEERING COMMITTEE**.
- Do **NOT** try to do it all yourself.



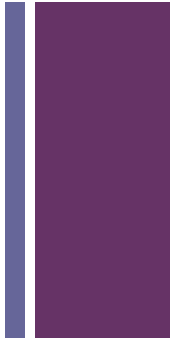


STEERING COMMITTEE AT WORK





Steering Committee examples



- Get faculty, student and advisory group input on matters close to the program.***
- Let the money gurus work on *FINANCE* Standard.
- Let the library staff do that Standard.
- Ask Student Services and Administration to do their part.



View Self study as an on-going **process**



not a once every 7 years event

When that happens (on-going process)

- Stress is minimized
- Programs improve
- Change comes in manageable increments



Welcome to Weave



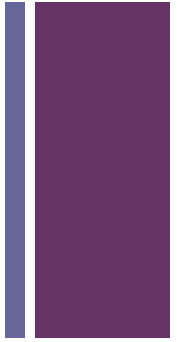
- To create a SS, think in terms of
WEAVE

(electronic submission of SS)

- **Login to access your account**

<https://app.weaveeducation.com/login>

+ Think in terms of WEAVE



- Description of compliance with each standard/sub-standard
- Questions to guide response(s)
- Provide evidence (attach/upload)



WEAVE simplifies creation of the SS document



- Weave provides focus for your responses
- Weave coaches you – when & what documents to upload
- Weave provides organization
- **One** Log-in/Password is necessary
- Support is available

+ WEAVE eliminates headaches



~~Table of Contents~~

~~Page numbers~~

~~Hot links~~

~~Separate Exhibits~~

~~Minimizes duplication~~

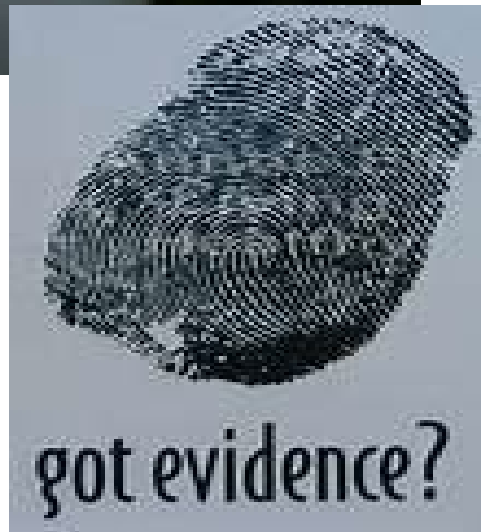
~~Hard copy~~

+ Expectations in Weave

- Respond to **each** standard and sub-standard
- Provide 'evidence' to document your statements
- Attach/Upload **excerpts!!**

For the team and COA, excerpts eliminate links to page 1 of a 50-page document with the needed info is somewhere about page 27

+ EVIDENCE IS CRUCIAL





Suggestion



- Maintain (create) a folder to collect *evidence*.
 - Save individual files to be uploaded in response to questions in Weave.
(documents, forms, .pdf excerpts, etc.)
 - Will simplify the upload process
 - NAMING of the files is essential!!!!



Example:

Standards, sub-standards, uploads

1.4 The sponsoring institution must provide, or arrange for the provision of, all portions of the required curriculum including all

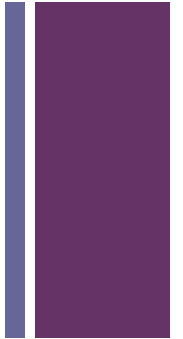
no response expected – *spaceholder* standard

1.4.1 classroom, laboratory, clinical field experiences, and

Weave question(s) to answer

1.4.2 services necessary to support the curriculum in funeral service education as specified in the Standards.

Weave question(s) to answer





NO links



- WEAVE is the repository of the SS.
- **Access to the data must be available for future reference**
 - reason for uploads/reason for no links.
- No hard copy is submitted.
(school can print a hard copy for own use)
- In the *old days* (pre-JURA/WEAVE) links to *external* appendices and evidence were encouraged.

+

<https://app.weaveeducation.com/login>



USERNAME

PASSWORD

[Forgot Username?](#) or [Password?](#)

Log In

Or

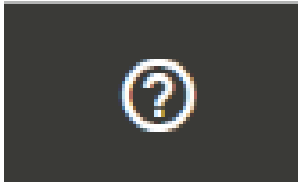


Sign in with Google



Help with Self Study in WEAVE



- Call ABFSE office
(816) 233-3747, Ext. 3
(910) 471-4332
Mike Landon
help with ABFSE standards and WEAVE
input
- need WEAVE help? (with the program)
click on  *top ribbon*

+ Mike to demo Weave





Self Study review/approval



- Mandatory
- Consult with M. Landon throughout the process
- Ask for review as a section is completed
- Do NOT wait till the entire SS is finished to ask for a review
- Mandatory Review *at least* 30 days prior to submission date

+ Results?

- Make the SS *process* work to **improve** your program.





DON'T LET THE SS TAKE YOU DOWN THIS RABBIT HOLE





SS realities



- Program Director typically pulls it together.
- PD acts as Quarterback to ensure that the right things are being done. Hands off assignments to the people best positioned to get the job done.
- Be sure to respond to each Standard
- N/A is appropriate sometimes, but *not* as an excuse

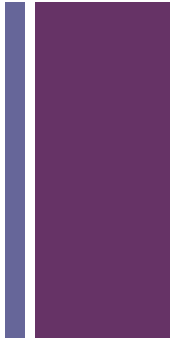


Remember: View Self study as an on-going process

not a once every 7 years event

When that happens

- Stress is minimized
- Programs improve
- Change comes in manageable increments





External EDITOR



- Review grammar, spelling, etc. for professional results.
Be sure the language makes sense to an *outsider*.
- Review, don't rely on **spleen** check!!
Proof read.
- Ensure that necessary **evidence** is provided.
- Missing parts complicate the site visit.
Raises questions? What are you trying to hide?



Recommendation

■ Sign-off

Be sure necessary approvals are received.

ABFSE doesn't care about *sign-offs*, but your Admin probably does.

Don't let approvals be reason for missed deadlines.





Yikes!!!!

ARE WE HAVING FUN YET?





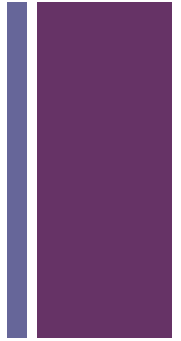
IS THIS *TORTURE*?



- Only if you lose sight of the purpose of the self study process.
- Self study is intended to make you periodically reflect on the whole program, on the issues, forms, published materials, and processes that might be improved.
- Get other stakeholders involved!



THE HIT LIST: trouble spots



- **Standard 2:** failure to address Program Learning Outcomes.
- **Standard 10:** little on-going evaluation, sporadic collection of data, little use made of data.
- Write the assessment plan & USE it
 - demonstrate improvements made
 - connect to the Program Learning Outcomes



+ The Hits keep coming

- Affiliation Agreements
 - signed and current
 - ~~'interruption'~~ clause (*change*)
- Preceptors
 - training
 - credentials
- Clinical program
 - site inspections



+ The Hits keep coming

- Faculty
 - **original** transcripts
- Curriculum distribution B-6
 - does not require a course for every ABFSE outline, but evidence that outline content is covered
- Budget
 - adequate to support; not judging salaries, etc.
- Program Director
 - responsibility – chain of command, curriculum, preceptors

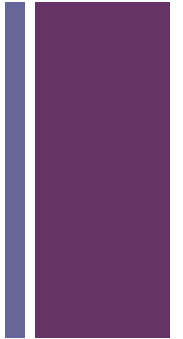


+

more



shutterstock · 113340178



■ Complaints

- written (and resolution)

■ Library / Learning resources

- not counting books
- current holdings
- adequate access
- program participation in acquisitions?
- demonstration of use

emphasize **all** learning resources

■ Standards for *gatekeepers* 11,12



VIRTUES AND VICES

Description, Analysis, Projection



- Feel free to tout the program's **STRENGTHS** (with examples and **evidence**).

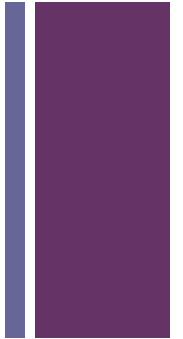
- You can discuss **FLAWS** you've fixed and problems that you've discovered through the process that still need to be corrected. What are you doing about this?



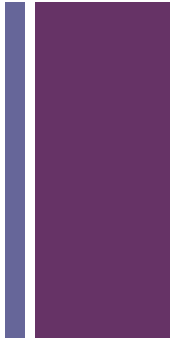


???????

Description, Analysis, Projection



- The Self Study should consider the past, the present, and the future of your program.
- Where will you be going in terms of the Standard? Is change on the horizon? Will you tinker with some aspect of your program to improve it? = Projection.
- You can talk about it!



- After completing the descriptive questions for the standard you are invited to provide a summary of the program's compliance efforts. (optional).
- This summary would include analysis of the effectiveness of practices with attention to strengths, weaknesses, achievements and problems etc.
- Projection includes future plans to enhance strengths or correct weaknesses.



New Standards January 1, 2025



- Not totally new, but certainly updated.

+ Distance Education

(27 of 58 programs had DE grads in 2024;
32 of 58 offer some funeral courses via DE)

- When you offer 50% or more of your program via DE, **COA approval is required!!!**
(requires approval via Substantive Change;
DE for Covid response was temporary)
- Response to DE questions is required **if** your program offers even 1 funeral course via DE
- DE questions are integrated throughout the SS



In 2025



- DE questions are integrated throughout the SS
- Sub Change for DE uses the same Weave platform for submission, but focuses on DE



APPENDIX C: Guide for the Self Study Process and Report



- Review Appendix C for basic recommendations



THE SITE VISIT:



- **A Team Chair** (an educator from a discipline other than funeral service, someone with administrative and accreditation experience).
- **A faculty member** with at least five years experience teaching/administering an ABFSE-accredited program.
- **A funeral service licensee** with at least five years of experience as a practitioner.



THE VISITORS COME TO LOOK



+ THE SITE VISITORS



- Expect to learn about a lot about your program through your Self Study *before* they arrive.
- Will focus on seeing evidence too bulky to include (case reports for seven years), on things difficult to prove (rapport) and on places (clinical sites) where written description doesn't tell the whole story.



Typical site visitor assignments



- Team members collaborate to review standards:
 - Chair: 1,3, 4, 10, 11*, 12*
 - Educator: 2, 5,6, 7, 10
 - Practitioner: 4, 6, 7, 8, 9
- Team reviews SS in advance of the site visit
- May request additional evidence



What should you do for the visitors?



In consultation with the Team Chair,

- set up housing, ground transport, and meal arrangements for the Team's stay.
- Collaborate with the Team Chair on a schedule in advance of the visit.



For the site visit

- Provide a **private** Team Room where all three can plug in computers;
 - when necessary, physical evidence should be here & organized.
- Need **internet access**.
- Identify a **different space for interviews** so the Team Room can be used at the same time.



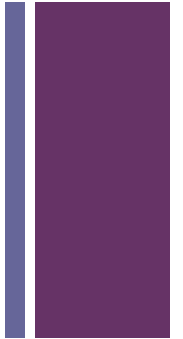


Current On-site schedule

3-day event

- Arrival/first afternoon:
tour selected clinical locations
- Day two: full day on site:
 - Interviews
 - Prepare final draft of team reports
- Day 3: exit briefing;

Final day: afternoon fly out (ideal).





Exception for large programs and...



- May require an extra day to review evidence files, i.e. case reports, affiliation agreements, transcripts, etc.
- Particularly when digital records and privacy issues prohibit preview by the team



Current On-site schedule

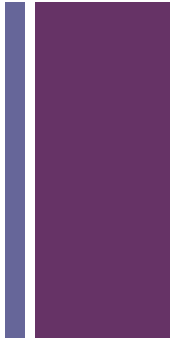


- Sunday arrival – Tuesday departure
has been traditional (Tu-Th; M-W, W-F??)
- Students, faculty, administration, etc. must
be available for interviews
 - Advisory Board members, too
- Set schedule accordingly



Current On-site schedule

- Must factor travel time
- Coordinate arrival of team members
Return to airport
- Multiple offerings/degrees require more time to evaluate
e.g. degree + diploma; Assoc & Bachelor;
Distance Ed & traditional delivery





YOU'LL KNOW THE RESULTS



- Visit concludes with an exit interview, the team will share their findings.
- If the visit *discovers* something, you will have time to begin fixing it before you see the COA.



After the site visit, WHAT'S NEXT?



- Within 30 days: the Team Report goes to the ABFSE.
- Within 45 days: the ABFSE Executive Director submits the Report to the chief administrator of the institution/program.
- The institution/program has the opportunity to comment on the Report and to file materials addressing the facts and conclusions in the Report before the Committee on Accreditation (COA) meeting takes place.
- At the appropriate COA meeting, the program/institution has opportunity to address the COA before COA makes its decision on accreditation.
- (note: COA meets April & October)



Remember

- Site visit team is 'eyes and ears' for COA

- They do **not** make accreditation decisions

- They prepare a report



- Accreditation decisions are made by the COA!!!!





THE PROGRAM DIRECTOR, NOW THAT IT'S OVER





+ On the following slides

- Issues/questions that consistently arise.





Structure, Organization, Administration



- The program/institution must provide evidence that it assumes responsibility for
 - 1.1.1 curriculum content,
 - 1.1.2 classroom teaching and clinical education,
 - 1.1.3 appointment and evaluation of faculty,
 - 1.1.4 policies and procedures for admission, and ...



Structure, Organization, Administration 1.3.2



- The institution must maintain the by-laws, agenda, minutes or other governing documents pertaining to the governing board for review since the last comprehensive review.
- These documents must be available for review by the site visit team.
- Attach the **last 2 BOT** agendas and minutes as evidence.



Structure, Organization, Administration 1.3.2



- For multipurpose institutions, attach the **last 2 BOT** agendas and minutes as evidence with a link to other past minutes.
- *Exception*, if there was specific BOT action regarding the program (since the last accreditation) then those excerpts should be included also.
Cut/paste.
- Site visit team and COA cannot be expected to scroll 7 years of minutes to find isolated references to FS (for a public institution).



Organization/administration, etc.



- Program Director:
 - Responsibility and employees that report directly or indirectly
 - Academic background
 - Release time
- “*Regionally*” accredited vs. ABFSE as sole accreditor



Program Learning Outcomes (Standard 2)



- Must have.
- Must evaluate.
- Can add more than those in manual, but do **not** delete.



Administrative practices and ethical standards



- Be sure that publications and advertising accurately portray the realities of the program/institution. (all sources)
- Proper accreditation statement.
- Proper references to any non-accredited programs are prescribed.
- Written policies for complaints
(includes reporting to ABFSE and follow-up)

+ Finance



- “The learning resources budget shall be adequate for proper support of the curriculum.”
- “Acceptable accounting practices must be employed and the most current audited financial statements must be provided.”
- Questions for ‘gatekeeper’ schools



Curriculum



- Curriculum distribution (form B-6).
- Evidence of the embalming technical competence of each graduate.
- Off –campus clinical sites (embalming & funeral directing)
- On-campus RA
- Funeral Directing tasks

+ Faculty

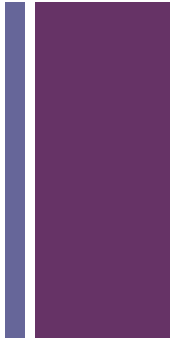


- Faculty credentials, licensing and certifications
- Preceptor credentials
- Student-teacher ratios (30:1; 25:1; 5:1)



Facilities

- Each program must maintain an on-campus embalming/preparation space either fully functional or for demonstration purposes. The embalming space must be of sufficient size to accommodate at least one preparation table. It must have an electric embalming machine, instruments, and real or simulated chemicals. In the case of a demonstration lab, it must adequately reflect an actual functional embalming laboratory.





Facilities



- Funeral homes in which off-campus instruction takes must be licensed by the appropriate authorities; (proof)
- Off-campus instruction must take place in locations which offer adequate learning space for students involved. In the case of embalming instruction, preparation room facilities must be of sufficient size to allow for satisfactory participation by each student involved; (inspections)



Facilities



- All facilities must satisfy federal, state, and local regulations. (inspections)
- Must have written affiliation agreements with ***each*** off-campus instructional site. Agreements must specify the responsibilities of the program/institution and the instructional site relative to supervision and instruction of students and liability. Personnel at the instructional site ***may*** be given adjunct faculty appointments by the institution.



Library/learning resources



- Learning resources must be accessible to students outside of regular classroom hours. The program must require student utilization of these resources.
- An acquisition policy relevant to Funeral Service Education must be in place and funeral service personnel must be involved with the annual acquisitions related to this program.

+ Students



- Evidence that students in the program meet ABFSE minimum admissions requirements.
- Must have written policies and procedures ensuring safety of its students.
- Must provide opportunities for student involvement in program and institutional governance.



Planning & assessment - Standard 10



- The concept of program planning and assessment has at its core a documented plan to measure program effectiveness and implement necessary improvements.
- This plan will incorporate guidelines, procedures and methodologies of planning and assessment and ensure instructional quality and student outcomes.

+ Planning & assessment

- Ongoing system of planning and assessment must include the following:
 - Provisions for collecting, maintaining, and analyzing data since last comp review. (7 yrs)
 - Opportunities for continuous feedback by students, faculty, and other constituents.
 - Regularly scheduled student evaluations of courses and faculty.
 - Regularly scheduled supervisory evaluation of faculty and program administrators.



Planning and assessment - continued



- Results of **annual** surveys of graduates and employers to include satisfaction with instructional quality, preparation for employment, and expectations of employment;
- Methods used to measure the attainment of expected instructional outcomes; and
- Documentation of how the assessment efforts are used to improve instructional and program quality.
- AND NBE scores, graduation rates and employment rates.



Planning and assessment

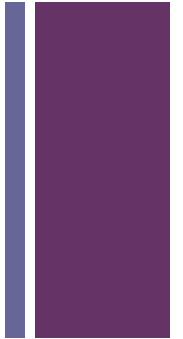


- If the program has been evaluated previously by ABFSE, the program must document what has been done since the last review to correct any deficiencies that may have been cited in reference to the Standards.



APPENDICITIS

- **Appendix B** has forms to submit with the Self Study. *Fillable* versions are available.
- **Appendix C** has suggestions for compiling the Self Study plus a “heads up” on useful evidence to include or have ready on site.
- If you have **ANY** courses offered via **distance**, review **Appendix E**.
DE questions are included in WEAVE.





THE PRODUCT: your Self Study and its Evidence



THE GOAL of SS is

- Demonstrate/document that the PROGRAM covers the Standards.
- Include **EVIDENCE** to support what you say.
- BE HONEST. If you find a flaw, project what you are doing to *FIX* it. It is OK to celebrate your strengths.



<https://app.weaveeducation.com/login>

Examples follow



Standard



- Weave has a question(s) to guide your response to the standard.
- Narrative response
- Be sure to number your response to match the question.



5.4.6.d Embalming case reports validating student participation are required, must be uniform in nature, and signed by the student and the instructor or preceptor.

1. Provide a sample Embalming Case Report to demonstrate compliance with Standard 5.4.6. (During the site visit, the team will review completed case reports for the past 7 years or since the last site visit.)
2. Describe how embalming case reports are used to validate the tasks performed by each student.

Narrative

1. Please see the attached Clinical Case Report.
2. Students must detail their actions and decisions, including the assessment of the body, selection of chemicals, and techniques used. This documentation allows instructors to review the accuracy and appropriateness of the tasks performed, ensuring that students are applying theoretical knowledge correctly and following established protocols. These reports serve as a means of accountability and skill validation. By requiring students to document each step, instructors can identify any deviations from standard practices. Instructors review each student's embalming case report before signing off, ensuring that the tasks are completed over the course of the year.



Not OK.



2.1 The mission of an ABFSE-accredited program must be to educate students in every phase of funeral service so that program graduates are prepared for entry-level employment in funeral service.

1. Provide evidence that the 'Program Learning Outcomes' as described in Standard 2.1 (2.1.1 - 2.1.10) are utilized verbatim by the Program.

Narrative

Please see attached.



Expected response

(there are exceptions to the narrative requirement)

5.1 Each program must document curriculum distribution by ABFSE content area by completing Form B-6, (found in Appendix B) "Curriculum Distribution by ABFSE Content Area."

1. Provide a completed Form B-6 for each accredited (or under consideration for accreditation) funeral service program offered.

Narrative

1. Please see attached form B6.

+ Not recommended.



4.5 Institutions for which ABFSE is the gatekeeper must demonstrate a ratio of current assets to current liabilities that is at least 1:1 for the most recent fiscal year.

1. Provide evidence to indicate that the ratio of current assets to current liabilities for the institution is at least 1:1 for the most recent fiscal year.

Narrative

1. Please see attached "FY23 Balance Sheet".

+ See example of 3,4,5,6

5.4.2 Business Management and Professional 16 minimum semester (24 quarter) credits. The curriculum must involve an appropriate distribution...

1. If applicable, describe any difficulties encountered with maintaining compliance with the curriculum distribution as identified in Standard 5.4.2.
2. If applicable, discuss future plans for curricular change in this area.
3. Describe how/where Accounting (5.4.2.a) content is covered in the accredited program, IF not demonstrated via Form B-6.
4. Describe how/where Funeral Service Management (5.4.2.b) content is covered in the accredited program, IF not demonstrated via Form B-6.
5. Describe how/where Funeral Merchandising (5.4.2.c) content is covered in the accredited program, IF not demonstrated via Form B-6.
6. Describe how/where Cremation (5.4.2.d) content is covered in the accredited program, IF not demonstrated via Form B-6.



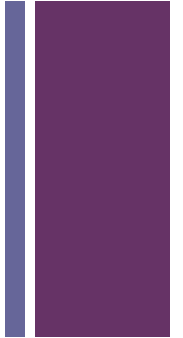
Appropriate response (**numbered**)



3. Accounting (5.4.2.a) content is covered in the course ACCT1011, Fundamentals of Financial Accounting.
4. Funeral Service Management (5.4.2.b) content is covered in the course MOR2015, Funeral Merchandising.
5. Funeral Merchandising (5.4.2.c) content is covered in the course MOR2015, Funeral Merchandising.
6. Cremation (5.4.2.d) content is covered in the course MOR2020, Mortuary Law and Compliance. .
7. Funeral Directing (5.4.2.e) content is covered in the course MOR2035, Funeral Directing and Counseling.



Use URL *only when requested*



3.2 Any reference by a program to accreditation in catalogs, bulletins, or other official publications and communication or other media must comply with Standard 3.

1. Demonstrate that references to the accredited programs include the mandated accreditation statement. If more than one program is offered, all accredited programs must be included in the accreditation statement.
2. LIST all of the documents or locations where the accreditation statement appears. Provide the URL for access to the documents. Include comments, if necessary.

+ Is this a description?



7. Describe the documents or publications where financial policies for tuition, fees, and refund information are found. Provide the documents and/or web page where the relevant financial policies are found.

7. Please see the attached "Catalog Pages 15-19".