

# Preparing for Interim Reviews in the 2025-26 Accreditation Cycle

Presented by the Computing Accreditation Commission to Institutional Representatives March 2025



Computing Accreditation Commission

## **Today's Presenters**

## Scott Murray, CAC Chair

## Harold Grossman, CAC Adjunct

## WELCOME!

#### Webinar will be recorded

- The recording and the slides will be available on ABET's public website
- All Institutional Representatives will receive a follow up email with the link to the recording and slides and instructions to their location on the ABET public website.

#### Q&A

- You have opportunity to ask questions throughout the webinar
- Use the Q&A button at the bottom of your Zoom screen.

#### No tech support

We will not be able to provide technical support during today's webinar. Recording will be available after the webinar is completed.

If we are unable to address all your questions due to time constraints, please follow up with Harold Grossman at: hgrossman@abet.org

### Agenda

- 1) Interim Review Overview
- 2) Report Expectations and Examples
- 3) Review Timeline and Process



## Our mutual goal is for you to have a successful and productive accreditation review!

## **Description of Interim Reviews**

An Interim Review addresses shortcomings (D, W, and C) remaining from the last CAC accreditation action.

- Programs submit a focused report addressing only unresolved shortcomings from the previous review (NOT a comprehensive self-study report addressing all criteria).
- Evaluation is based on the questions:
  - 1. What has been done to resolve the remaining shortcomings identified in the last review?
  - 2. Have the remaining shortcomings been resolved?
- Interim Reviews <u>can cite new findings</u> if they become evident in the course of conducting an interim review.

## **Interim Review Types**

Reports	Visits	
Interim and Show Cause Reports	Interim and Show Cause Visits	
Institution has programs with prior accreditation actions requiring a progress report to evaluate remedial actions taken by the program	Institution has programs with prior accreditation actions requiring an on- site review to evaluate remedial actions taken by the program	
<ul> <li>Interim Report (IR) –</li> <li>Program has ≥ 1 Weaknesses and no Deficiencies (most common)</li> </ul>	<ul> <li>Interim Visit (IV) – Program has ≥ 1 Weaknesses and no Deficiencies</li> </ul>	
<ul> <li>Show Cause Report (SCR) –</li> <li>Program has ≥ 1 Deficiencies</li> </ul>	<ul> <li>Show Cause Visit (SCV) –</li> <li>Program has ≥ 1 Deficiencies</li> </ul>	

### **Review Criteria**

- All programs under interim review (IR, IV, SCR or SCV) have a choice on criteria cycle, but must use the current APPM.
- The institution designates which criteria when the RFE is filed. The RFE may be modified if desired.

Accreditation Policy and Procedure Manual (APPM)	General Criteria and Applicable Program Criteria
Programs must use:	Programs can use:
the current (2025-26) Accreditation Policy and Procedure Manual (APPM)	<ul> <li>The current relevant criteria (2025-26)</li> <li>OR</li> <li>For a first interim cycle: the relevant criteria (2023-24)</li> </ul>
	<ul> <li>For a second interim cycle: the relevant criteria (2021-22)</li> </ul>

Access criteria and APPM at abet.org/accreditation/accreditation-criteria/

# Pause to address any questions or comments





#### Report

#### **Expectations and Examples**

## **Report Template**

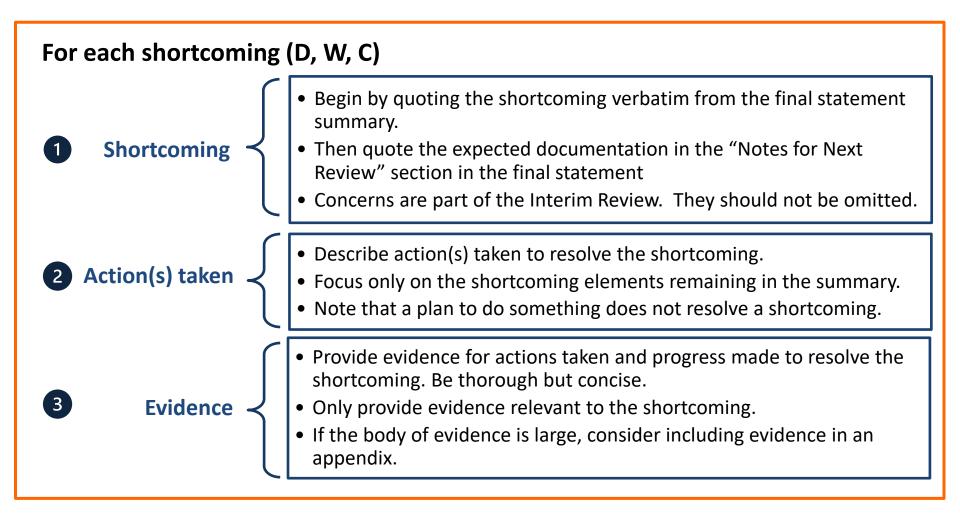
- The report does not have to be long, but should follow a logical sequence
  - Address shortcomings in the same order as they appeared in the most recent Final Statement to the Institution.
  - Address all expected documentation cited in the Final Statement for each shortcoming.
- It must clearly and adequately address the shortcoming(s)

Additional evidence should clearly demonstrate action(s) taken to address and/or strengthen compliance with the associated criterion, policy, or procedure

#### Use Template (C004) for Interim Reports:

https://www.abet.org/accreditation/accreditation-criteria/instructions-for-submission-of-interimreview-reports/

## **Report Structure**



## **Interim Report Submission**

A separate report should be prepared for each program with unresolved shortcomings even if multiple programs have identical shortcomings.

#### Report Submission

- Reports are uploaded into AMS (Accreditation Management System).
- Submit reports as separate files for each program.
- Submit as a read only PDF file.
- Submit by July 1, 2025.

## **Example: Shortcoming Summary** and Notes For Next Review

Program Weakness:

 Criterion 4, Continuous Improvement. The program's student outcome assessment and evaluation process in not yet regularly carried out with results systematically utilized as input for the program's continuous improvement.

This weakness will be examined carefully at the next review. For that review, the CAC anticipates the preparation of documentation with respect to this shortcoming that focuses on the following items:

- documentation showing ongoing student outcome assessment data collection and evaluation, and
- minutes of department meetings describing any decisions relating to student outcome assessment-based program improvements.

#### **Example shortcoming: Criterion 1- Students**

#### Shortcoming: Prerequisite requirements are not enforced

In two of six transcripts reviewed, students took courses without appropriate prerequisites. There is a manual system to remove students from courses if prerequisite courses have not been successfully completed. Documentation of approval reasons for taking courses without the appropriate prerequisites was provided for only one of the two students.

**Evidence examples** supporting resolution of the shortcoming:

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- A revised process, implemented by the institution to automatically prevent students from registering for classes without proper prerequisites
- A revised process that requires documentation of justification for overriding prerequisites
- Documentation of implementation of these changes (including samples)

Note that each program is unique and should determine its own appropriate way to resolve shortcomings. The examples provided here are only one possible way to have addressed the shortcoming.

#### **Example shortcoming: Criterion 4 – Continuous Improvement**

## Shortcoming: Student Outcome assessment is ad hoc and assessment data is not evaluated to identify possible improvement actions

The program had a detailed plan for assessing six student outcomes but changed to repeatedly assessing the same three student outcomes two years ago. During this transition, ad hoc assessments were conducted, but resulting data were not evaluated to identify potential improvement actions. **Evidence examples** supporting resolution of the shortcoming:

- Documentation of revised continuous improvement plan, containing:
  - Assessment cycle for each student outcome
  - Example of assessment data collected showing the level of attainment of student outcomes
- Results of evaluation of assessment data as input to the continuous improvement process.
- Documentation of improvement actions identified and taken

Note that each program is unique and should determine its own appropriate way to resolve shortcomings. The examples provided here are only one possible way to have addressed the shortcoming.

#### **Example shortcoming: Criterion 7 - Facilities**

Issue: Computers and software are old and not compatible with modern computing capabilities

The program uses computer equipment that is a decade old and not compatible with modern software needs. Furthermore, some laboratory exercises clearly refer to software that is no longer readily available. **Evidence examples** supporting resolution of the shortcoming:

- Documentation of updated computers and upgraded software
- Paid invoices verifying purchases of new computers and current software
- Photographs showing laboratories with new computers
- Laboratory exercises embedded in relevant courses showing effective use of new software
- X A plan without implementation does not count as action to resolve a finding.

Note that each program is unique and should determine its own appropriate way to resolve shortcomings. The examples provided here are only one possible way to have addressed the shortcoming.

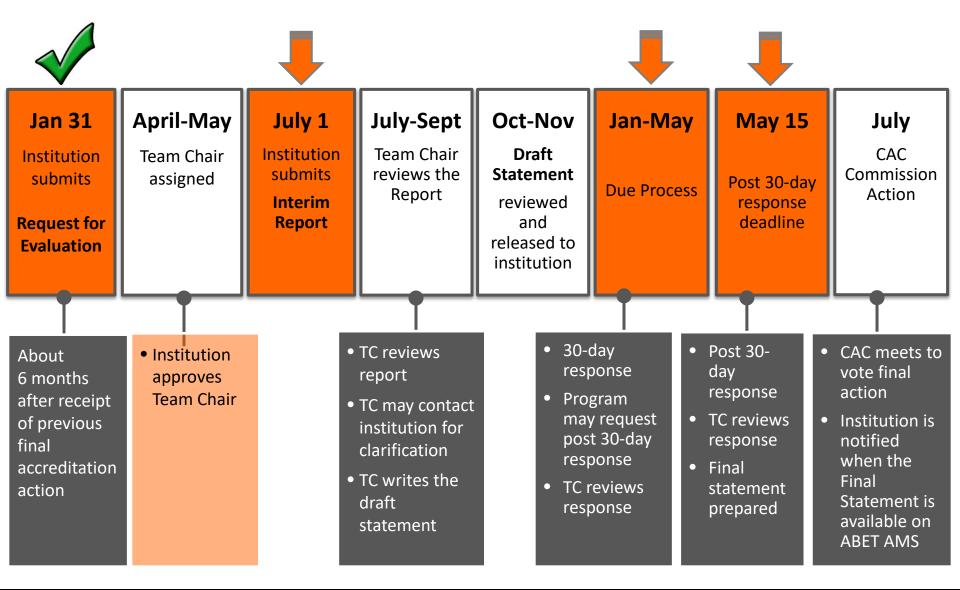
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#### **Review Timeline and Process**

#### **Interim Review Process and Timeline**



### **Additional Steps for Reviews "with Visit"**

- Institution submits Request for Evaluation by January 31<sup>st</sup> (about 6 months after accreditation action).
  - Team chair (TC) assigned in April or May.
  - TC works with institutional representative to set visit dates.
  - **PEV(s) are assigned** in May or June.
    - Usually, one PEV per program, but depends on reason for evaluation.
    - Number of days depends on complexity of evaluation.
  - Institution submits Interim Report by **July 1**<sup>st</sup>.
  - Interim report should mention or list additional evidence the team can expect to see during the evaluation (focusing only on the remaining shortcomings).
  - Team conducts the on-site visit and reports in the Exit Meeting

#### Institutions with Programs of Both Types (report only and with visit)

- Programs requiring interim reports follow normal interim report procedures.
- The schedule for an Interim Visit review will focus on resolving remaining shortcomings and may be shorter than a full review visit.

Program A	• IV or SCV	<b>Visit</b> - focus on resolving remaining shortcomings, likely to be abbreviated
Program B	• IR or SCR	Report- Interim Report Procedure

#### **All Interim Evaluations**

During the review process:

> A **new shortcoming** may be cited, ...

... if a new issue becomes apparent as the TC reviews progress on shortcomings or compliance with the criteria or APPM.

#### Finding severity level can change.

**APPM: I.E.8.a.(2)(b)** Weakness – A Weakness indicates that a program lacks the strength of compliance with a criterion, policy, or procedure to ensure that the quality of the program will not be compromised. Therefore, remedial action is required to strengthen compliance with the criterion, policy, or procedure prior to the next review.

... If there has been no remedial action to strengthen compliance with the criterion, the severity of the shortcoming may change, e.g., from Weakness to Deficiency.

#### What happens next?

#### Possible actions

- If all Weaknesses and Deficiencies are resolved, the recommended action will be report extended (RE), visit extended (VE) or show cause extended (SE). If validated by the CAC, accreditation will extend until next general review.
- If at least one Weakness remains with no Deficiencies, the recommended accreditation action will require another interim review or visit (IR or IV).
- For a show cause reviews (SCR or SCV), if Deficiencies remain, the recommended accreditation action will be to not accredit (NA).

#### How it gets to you

- Commission votes on accreditation actions at the July Commission Meeting.
- Institutions are notified in August that Final Statement and Accreditation action is available via AMS.
- Only "Not to Accredit" actions can be appealed.

# Pause to address any questions or comments





## Thank you! Questions?