

EAC Orientation for Institutional Representatives and Team Chairs

Thursday, July 14, 2016

### **Today's Presenters**

#### Session 1

- Sarah Rajala
  - EAC Chair 2015-16
- Jeff Keaton
  - EAC Vice Chair of Operations 2016-17

#### **Session 2**

- John Orr
  - EAC Chair-Elect 2015-16
- Ann Kenimer
  - EAC Vice Chair of Operations 2015-16

## **Agenda**

#### **Topics and Activities**

- 2:00 2:05 Welcome Who is here, why are we here?
- 2:05 2:40 Recent changes to the criteria; common shortcomings
- 2:40 3:30 Preparing for the visit
- 3:30 4:05 Campus visit
- 4:05 4:25 The post-visit process, accreditation actions, consistency
- 4:25 4:30 Closing
- 4:30 5:00 Q & A

### Who Is Here?

- Institutional representatives, mostly deans
  - Representing schools/colleges of engineering with evaluations scheduled during 2016-17.
- Members of the Engineering Accreditation Commission
  - There are 92 members of the EAC for the 2016-17 cycle plus 4 officers and 13 members-at-large.
  - Commission members serve as Team Chairs for visits.
- ABET Staff

## Why Are We All Here?

- To set the stage for a successful set of evaluation visits in the 2016-17 cycle by developing common understanding and expectations of activities
  - In preparation for the visit
  - During the visit
  - Following the visit

## Recent Changes to the Criteria

# Program Educational Objectives (PEOs) Assessment Not Required

- Effective 2013-14
  - Assessment of PEO attainment is no longer required.
  - Reference to PEOs removed from Criterion 4.
    - "The program must regularly use appropriate, documented processes for assessing and evaluating the extent to which both the program educational objectives and the student outcomes are being assessed."

## Periodic Review of PEOs Still Required

- Effective 2013-14
  - Emphasized by additional wording in Criterion 2
  - "There must be a documented, <u>systematically</u> <u>utilized</u>, and effective process, involving program constituencies, for the periodic review of these program educational objectives <u>that ensures</u> <u>they remain consistent with the institutional mission, the program's constituents' needs, and these criteria."</u>

### **Changes Effective 2014-15**

- Criterion 6. Faculty
  - Wording change in the first sentence
  - The program must be of sufficient number and must have the competencies demonstrate that the faculty members are of sufficient number and they have the competencies to cover all of the curricular areas of the program.

## **APPM** Changes Effective 2014-15

- Changes to policies affecting public release of information, Sections II.A .6 and II.A.7
  - Program must publically state educational objectives and student outcomes.
  - Program must publically post annual student enrollment and graduation data per program.
  - More detail addressing public disclosure of accreditation status including denial or withdrawal of accreditation.
- See <a href="http://www.abet.org/instructions-for-compliance/">http://www.abet.org/instructions-for-compliance/</a> for assistance.

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## **Changes Effective 2016-17**

- New General Criteria for Master's Level Programs
  - Expectations of criteria more clearly articulated
  - Students, program, faculty, facilities, institutional support
- No EAC Baccalaureate Level General Criteria or APPM changes this year

## **Changes Effective 2016-17**

- Program Criteria Changes
  - Civil and Similarly Named Engineering Programs
    - Curriculum
  - Software and Similarly Named Engineering Programs
    - Curriculum
    - Faculty

## **Common Shortcomings**

- Criterion 1: Students
  - Missing prerequisites
- Criterion 2: Program Educational Objectives
  - Process for review of PEOs
  - PEOs aren't consistent with the definition
- Criterion 3: Student Outcomes
- Criterion 4: Continuous Improvement
  - Evaluation of assessment results for continuous program improvement

## **Common Shortcomings**

- Criterion 5: Curriculum
  - Use of constraints / standards in capstone design
- Criterion 6: Faculty
  - Adequate number / professional development
- Criterion 7: Facilities
  - Lab facilities / maintenance, technical support
- Criterion 8: Institutional Support
  - Safety issues

# **Evidence for Compliance Exercise: Round 1**

- Group Exercise
  - Discuss scenarios for Criteria 2 and 4
  - Identify evidence needed to demonstrate compliance
  - Report back to the group

### Preparing for a Successful Evaluation

#### Who Is on Your Team?

- One team chair (TC)
  - Large visits may have one TC and a co-chair
- Typically one program evaluator (PEV) for each program being evaluated
- Possibly one or more observers
- Some of you may have simultaneous or joint visits by more than one ABET commission
  - In this case, there will be two or three team chairs, plus evaluators for all programs being evaluated.

### Who Are the Team Chairs?

- Team chairs are experienced program evaluators.
- They are nominated by ABET Member Societies
  - Elected by the EAC
  - Approved by ABET Engineering Area Delegation.
- New team chairs are trained and mentored by experienced team chairs.
- Institution may decline a team chair for conflict of interest
- Team chairs are evaluated each year against the ABET competencies.

### Who Are the Program Evaluators?

- PEVs are selected and assigned by the professional society responsible for the program being evaluated.
- They have been trained by ABET.
- Each year they are evaluated against the ABET Competency Model.
- If you believe there may be a conflict of interest regarding any proposed program evaluator, you should discuss it with your team chair.
- Please approve PEV nominations as quickly as possible

#### Who Are the Observers?

- Observers may be assigned to the team.
  - Some professional societies require newly trained PEVs to participate in an observer visit before being assigned as a PEV on a team.
  - The state board often assigns an observer.
  - Sometimes international groups ask to observe.
- Observers have no vote in the recommended action.
- Observers normally shadow program evaluators.
- The institution may decline observers generally or may decline to accept a particular observer.

## **ABET Competencies**

- Visit team members are expected to be:
  - Technically current
  - Effective communicators
  - Professional
  - Interpersonally skilled
  - Team-oriented
  - Organized

#### **Feedback**

- Your feedback is a key component in our continuous improvement efforts.
- Institutions after the visit
  - Complete the online TC evaluation.
  - Complete the online PEV evaluations.
- Team chairs after the visit
  - Complete the online PEV evaluations.
- Results are released to TCs and PEVs after the accreditation action is final.

### **Accreditation Timeline** 18-21\* Month Process



### **Timeline Exercise**

 Develop a schedule for accomplishment of required activities

## **Pre-Visit Preparations**

- Self-Study Reports have been submitted
- Team chair assigned / date confirmed
- Most teams complete with program evaluators assigned by the relevant societies
  - You have an opportunity to disqualify a proposed evaluator if you believe a conflict of interest exists.

# Pre-Visit Preparations: What Happens After Team is Assigned?

- TCs and PEVs generally have questions as they review the Self-Study Reports and the transcripts.
  - Advance communication of these questions makes for a more effective visit.
  - Many questions can be answered before the visit.
  - Preparations can be made if questions need to be addressed during the visit.
- The interviews and visit schedules will need to be finalized.
- Agreement should be reached on display materials.
- All communications between PEVs and program leads should be copied to the dean and team chair.

### **Transcript Exercise**

Focused example for discussion at table

### **The Campus Visit**

The institution must demonstrate that the criteria are met.

### **Objectives of the Campus Visit**

- Make a qualitative assessment of factors that cannot be documented in the written Self-Study Report
- Conduct a detailed examination of the materials compiled by the institution
  - What do the students actually do?
  - Are the processes described in Self-Study Report well documented?
- Interview faculty, staff, students and administration
- Provide the institution with a preliminary assessment of its strengths and shortcomings
- Assist the institution and its programs in quality improvement efforts

## Campus Visit Activities Day 0 (Usually Sunday)

- Team meeting for review of preliminary findings
- Tour of facilities supporting the program being evaluated-laboratories, computer rooms, classrooms, etc.
  - PEVs with program chairs
  - TC with dean or with one of the program chairs
- Team visits programs to evaluate materials
  - Course materials
  - Assessment data and analysis
  - Minutes of meetings etc. for review of assessment data
- Team meeting (to review findings) and dinner

## Campus Visit Activities Day 1 (Usually Monday)

8:00 AM - 9:00 AM	Team meets with engineering administration, typically including a presentation by the dean.
9:00 AM - 9:30 AM	PEVs meet with program heads; TC with dean
9:30 AM - 12:00 N	PEVs meet with faculty, students, and staff. TC meets with institutional/college officials: associate dean, president, provost, registrar, finance, admissions, placement, assessment, etc.
12:00 N - 1:30 PM	Optional institutional luncheon for team - often with members of advisory boards, alumni, etc.
1:30 PM - 2:30 PM	Team members meet with representatives of support departments.
2:30 PM - 4:45 PM	Team members continue interviews (TC with college/institutional officials and PEVs with program faculty, etc.), and review of materials.
5:00 PM - ?	ABET team meeting and dinner

## Campus Visit Activities Day 2 (Usually Tuesday)

- Follow-up meetings with faculty and staff as needed
- Private team meeting to finalize findings
- TC briefs dean and PEVs brief program chairs on findings.
- Private team meeting (working lunch)
  - Team finalizes exit statements, visit forms, and documents.
  - A copy of the Program Audit Form will be left with the institution.
- Team conducts exit meeting.
  - The institution CEO should be present for this meeting.
  - Institution CEO (or dean) determines who is present.

## **Display Materials**

- Examples of student work that demonstrates:
  - Attainment of student outcomes
    - Student work used for outcome assessment
  - Implementation of curriculum
    - Evidence of appropriate classification of engineering, math, science topics
  - Demonstration of required components of culminating design experience
    - Use of standards and constraints

# **Evidence for Compliance Exercise: Round 2**

- Group Exercise
  - Discuss scenarios for Criteria 5 and 6 and the APPM
  - Identify evidence needed to demonstrate compliance
  - Report back to the group

## **Exit Meeting**

- <u>Purpose</u>: Report team findings to the institution
   CEO and other institution representatives
- Team chair makes introductory remarks and invites PEVs to read their exit statements.
- Statements include strengths, deficiencies, weaknesses, concerns, and observations (suggestions for improvement).
- Program Audit Form (PAF) that documents the team findings is left with the dean.

## **Program Audit Form (PAF)**

#### **ABET Engineering Accreditation Commission** Program Audit Form

Institution			Visit Dates				
Program Name			Name of the Program	Please choose one of the following			
			Criteria Used in	From dropdown list			
			Evaluation	1 Tolli diopdowii list			
Team Chair			Program Evaluator(s)				
Type of Visit	General Review	Interim Re	eview → Accreditation C	Cycle Criteria:			

PROGRAM AUDIT SUMMARY
(PROVIDE A COPY TO INSTITUTION AT EXIT MEETING)

Use "C" for concern, "W" for	Shortcomings	comings Exit		rtcomings Exit Seven		Draft Statement			Final Statement		
weakness, and "D" for deficiency in	from Previous	Meeting	Day	Team	Editor	Editor	Team	Editor	Editor		
the appropriate line.1	Review	1110011116	Response	Chair	1	2	Chair	1	2		
If the program has no deficiencies or weaknesses, check this line.											
1. STUDENTS											
2. PROGRAM EDUCATIONAL OBJECTIVES											
3. STUDENT OUTCOMES											
4. CONTINUOUS IMPROVEMENT											
5. CURRICULUM											

## PAF Page 2

## ABET Engineering Accreditation Commission Program Audit Form

Institution			Visit Dates	
Program Name			Name of Program	Please choose one of the following
			Criteria Used in	
			Evaluation	
Team Chair			Program	
			Evaluator(s)	
Type of Visit	General Review	Review ☐ Interim Review → Accreditation Cycle Criteria:		

#### DETAILED EXPLANATION OF SHORTCOMINGS

(PROVIDE A COPY TO INSTITUTION AT EXIT MEETING)

The following comments provide detailed information on the shortcomings indicated on the					
Program Audit Summary.					
1. STUDENTS					
2. PROGRAM EDUCATIONAL OBJECTIVES					
3. STUDENT OUTCOMES					
3. STODENT OCTOMES					

### **Important Points**

- All shortcomings identified at the time of the visit will be reflected on the PAF that is left with the institution.
- A shortcoming identified at one level by the team may be framed at a different level later in the editing process for consistency in application of criteria across institutions.
- In rare situations a shortcoming not indicated on the PAF may be included in the draft statement.
- An item identified as an observation at the time of the visit may be cited as a shortcoming in the draft statement for consistency in application of criteria.
- After the visit, all communication with the visit team must be through the TC.
  - No direct contact with PEVs after visit

#### **The Post-Visit Process**

It's not over until the commission votes.

#### **Post-Visit Process**

- Seven-day responses from institutions
  - Correct errors of fact (number of students, number of faculty, etc.) only
  - Other responses will be not be considered until due process.
- Editing cycle
  - Team chairs prepare draft statements.
  - Two levels of editing by members of EAC Executive Committee (Editor 1 and Editor 2)
  - EAC adjuncts edit all statements.
- Draft statements are sent to institutions, typically beginning in January.

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## **Post-Visit Process (2)**

- 30-day due process response from institution
  - This is due 30 days after draft statement is received.
  - Don't wait for the draft to start working!
  - Dean and TC keep communicating during due process.
- Editing cycle
  - TC prepares draft of final statement incorporating response
  - Review by same Editor 1, Editor 2 and EAC adjunct
- EAC takes final accreditation action at Summer Commission Meeting.
- ABET sends final statement and accreditation letter to institution.

## It's Not Final Until the Commission Votes

- Institution may submit supplemental material within a reasonable time prior to the annual EAC meeting.
  - This should be material that was not available when the due process report was submitted, e.g. project reports or transcripts available at end of semester.
  - Communication with your team chair is key.
- Programs are encouraged to solve problems quickly.
  - This is, in fact, the desired result!

# It's Not Final Until the Commission Votes (2)

- Final statement is considered by the commission (EAC), which makes the final decision on accreditation.
- Only "Not to Accredit" can be appealed.
- Note: Seven-day error-of-fact, 30-day due process responses, and post 30-day due process responses should all be sent to TC, Editor 1, Editor 2, and ABET HQ.
  - Contact information included in communication from ABET HQ

#### **Accreditation Evaluation and Actions**

What words might I hear? What do they mean?

## **Keywords of Importance**

- The review is focused on programs, so the applicable terms are applied in the context of programs.
- There are four keywords:
  - Deficiency
  - Weakness
  - Concern

Terms indicating shortcomings

Observation – "friendly advice"

#### **Definitions**

- Deficiency A criterion, policy, or procedure is <u>not</u> satisfied. Therefore, the program is not in compliance with the criterion, policy, or procedure.
- Weakness A program <u>lacks the strength of</u> <u>compliance</u> 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 evaluation.

## **Definitions (2)**

- Concern A program currently satisfies a criterion, policy, or procedure; however, <u>the</u> <u>potential exists</u> for the situation to change such that the criterion, policy, or procedure may not be satisfied.
- Observation A comment or suggestion which does not relate directly to the accreditation action but is offered to assist the institution in its continuing efforts to improve its programs.

#### **Accreditation Actions**

**NGR** Next General Review

IR Interim Report

IV Interim Visit

**SCR** Show Cause Report

**SCV** Show Cause Visit

**RE** Report Extended

**VE** Visit Extended

SE Show Cause Extended

NA Not to Accredit

T Terminate Only for programs being phased out

Interim

only

evaluations

## **Linking Terms to Actions**

Read down the columns...

Terminology		Results of Evaluations			
Weakness	No	Yes	Yes	Yes or No	
Deficiency	No	No	No	Yes	
Type of Review		Possible Actions			
General (Comprehensive)	NGR	IR	IV	SCR or SCV; NA (new program)	
Following IR or IV	RE or VE	IR	IV	SCR or SCV	
Following SCR or SCV	SE	IR	IV	SCR, SCV, or NA	

#### **Duration of Accreditation Actions**

Action	Duration (years)		
NGR	6		
IR, IV, SCR, or SCV	2		
RE, VE, SE	Until NGR year		

### **Interim Evaluations**

#### **Interim Actions**

- Interim Report (IR or SCR)
  - Recommended when the resolution of shortcomings can be documented with a report (e.g., faculty hiring);
  - A different team chair is assigned to review the interim report.
  - No team is sent to campus.
- Interim Visit (IV or SCV)
  - Recommended when the resolution of shortcomings cannot be determined by review of a report, or when previous written information has not been effective in providing the necessary evidence.
  - A new team is sent to visit campus.

#### Interim Evaluation

- IRs or IVs resulting from the 2016-17 cycle will take place in the 2018-19 cycle.
  - Institution will submit report by 1 July 2018.
- ABET HQ forwards the previous final statement for the institution to the TC.
- If an institution has programs with both IV and IR actions, the TC for the IV will also review the IR.
  - TC may discuss IR issues with the dean during the campus visit.
  - No PEV will be assigned for IR reviews.
- The applicable criteria are the criteria that were in effect at the time the shortcomings were identified, unless the institution requests that later criteria be applied.

## Interim Visit (IV)

- Focused on the shortcomings (concerns, weaknesses, and/or deficiencies) noted in the prior review
- The team will evaluate the resolution of the identified shortcomings.
  - If the team determines that circumstances that had previously raised a shortcoming have significantly deteriorated, the issues involved may lead to a finding of weakness or deficiency in the interim evaluation.
- Even though the evaluation is a focused one, <u>if</u> the team becomes aware of a new shortcoming with respect to a criterion, policy, or procedure, the team <u>will</u> cite a new shortcoming.

## Interim Report (IR)

- Report focuses on the shortcomings (concerns, weaknesses, and/or deficiencies) noted in the prior review.
- TC reviews the report and asks questions as needed.
- TC evaluates resolution of the identified shortcomings, drafts a statement, and recommends an accreditation action.
- Statement goes through same editing process as visit report.
- ABET sends draft statement to institution.
- IR due process follows the same timeline as for visits, except that events normally occur earlier in the cycle.
- Subsequent process is same as for visits, with final decision made at annual commission meeting.

### Consistency

## Accreditation Decisions Are Not Simple!

- Each institutional context is unique.
- The EAC tries very hard to ensure consistency.
- The overriding goal is to achieve an end result in which programs with similar observed shortcomings are accorded the same actions.
- Ideally there are no deficiencies or weaknesses, in which case an NGR is the action!

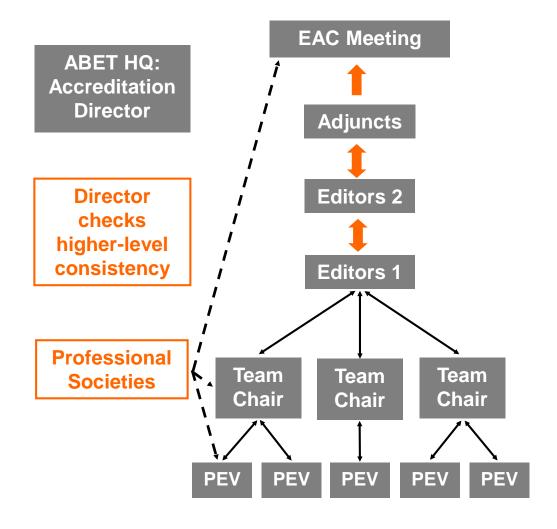
## Consistency at the **Team** Level

- Teams strive to ensure consistency across all programs evaluated at the institution.
  - Consistent depth and completeness of the evaluation across all programs
  - Consistent assignment of appropriate key terms (deficiency, weakness, concern) to describe shortcomings
  - For weaknesses, consistency on interim recommendations — IR versus IV

## **Consistency Checks at the Commission Level**

- The commission also strives to ensure consistency.
  - Accreditation actions must be consistent across all programs and across all institutions.
  - Accreditation actions must be consistent with those given for other programs with similar shortcomings (weaknesses, deficiencies).
  - Consistency is checked at five levels to various degrees of detail.

## **Consistency Checks**





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### **Concluding Thoughts**

### Preparation for a Successful Review

- On-going compliance with the criteria
- Thorough preparation of Self-Study Report
- Supporting materials that are accessible
- Timely seven-day and due process responses
- Good communication with team chair and PEVs

## Nobody Wants to Think About It, But What If...

- The program thinks the PEV does not understand or is being overly picky.
- The sore thumb faculty member is the one the PEV chooses to interview.
- Something unusual happens while the team is on campus.

Don't worry....

#### Most Issues Can be Resolved

- The process is highly self-correcting with good communication
- Many of these issues can be addressed during the visit – let the team chair know
- Most of the rest can be addressed in due process

#### **More Information**

- Reference material (<u>www.abet.org</u>):
  - Accreditation Policy and Procedures (APPM)
  - 2016-17 Criteria
  - Manual of Evaluation Process
  - Program Evaluator and Observer Workbooks
  - Self-Study Questionnaire

## **Q&A Session**

#### **Comments and Questions**