



PREPARING FOR AN ASAC EVALUATION VISIT

Workshop for Institutional Representatives

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Wednesday April 13, 2016



Session Agenda

- Introductions
- The Accreditation Process
- The Evaluation Team
- Terms & Terminology
- Campus Visit
- After the Campus Visit
- Examples of What the Evaluation Team Looks For
- Common Findings



Introductions

Introduction

- ASAC Representatives
 - Neil Hutzler, ASAC Chair
 - Paul Male, ASAC Past Chair
 - Bob Soule, ASAC Vice Chair of Operations
- Institutional Representatives
 - Name and Title
 - Type of program?
 - New or reaccreditation?

Why Are We Here?

- To develop common understandings of and expectations for the accreditation process and evaluation activities
- To set the stage for a successful set of evaluation visits in the 2016-17 cycle

New Date for Institutional Rep Mtg

- We have moved the meeting with institutional representatives to the ABET Symposium to discuss the self-study as well as the fall visit.
- This also affords you an opportunity to learn more about ASAC and the accreditation process at the Symposium.

2016 Symposium Sessions

- ASAC Institutional Rep Day Activities

Now moved to April, geared to programs with visits the following fall. It allows interaction before Self Study submitted

- Preparing the Self Study for Applied Science

Both full day pre-symposium workshop and shorter synopsis presentation at symposium

- Accrediting Programs under ASAC General Criteria

Expands the scope of ASAC

Symposium Sessions, Cont'd

- Partially Virtual Pilot Program

Now in 3rd year – only team chair goes to campus; Program evaluators participate remotely

- Joint and Simultaneous Visits

For first time, ASAC participating in joint visits of construction management programs whose names also invoke either EAC or ETAC

Symposium Sessions, Cont'd

- Natural Science Accreditation Pilot
 - First visit in 2015-16, with visits planned to three other institutions in 2016-17
 - Use of pilot general criteria that is inclusive of Natural Science and Mathematics programs
- ASAC Town Hall
 - Summary of Symposium Sessions
 - Chance to clear up any questions

Expected Outcomes for This Workshop

- Be familiar with accreditation process.
- Better understand how to foster a good (“smooth”) evaluation.
- Become aware of the most common shortcomings.
- Understand the processes by which accreditation actions are determined and their implications for your programs.
- Be able to develop a good working relationship with your evaluation team.



Learning Objectives

- ABET Organization
- Accreditation Process
- Responsibilities of the Institution and Review Team
- Definitions and Terms
- Pre-, On-Site, Post-Visit Activities
- Accreditation Actions
- How to Avoid Problems
- Example Site Visit Problems



ABET Organization

- Board of Directors
- Board of Delegates
 - Delegates represent member societies
 - Applied Science Area Delegation
 - Computing Area Delegation
 - Engineering Area Delegation
 - Engineering Technology Area Delegation

ABET Organization

It is important to understand that ABET is essentially a group of over 2000 volunteers from academia and industry that is assisted by a core staff of professionals at headquarters.

Leadership Responsibilities

- Develop and promote the mission of ABET
- Ensure quality of evaluation process
- Provide timely reports to program requesting accreditation
- Maintain central data base



ABET Organization

- Four Accreditation Commissions
 - Applied Science Accreditation Commission
 - Computing Accreditation Commission
 - Engineering Accreditation Commission
 - Engineering Technology Accreditation Commission
 - Commissioners are nominated by member societies

Commission Responsibilities

- Develop and update general criteria
 - Most criteria are harmonized across commissions
- Approve program criteria
- Assign team chairs to planned visits
- Assure quality of evaluation process
- Make final determination of accreditation actions

Institution's Responsibilities

- Implement Criteria
- Request Accreditation (RFE)
- Prepare the Program Self-Study Report
- Host a Visit
- Respond to Reports
 - 7-Day Response to Program Audit Form and Exit Statement
 - 30-Day Due Process
 - Post-due process, if needed



Types of Evaluation

- **Comprehensive** – Evaluations of all programs under a particular commission's purview must be conducted simultaneously every six years. On-site visit required.
- **Focused** – Evaluations that occur when a program was found to have deficiencies and/or weaknesses in the prior evaluation. Requires a report. Could require a visit.



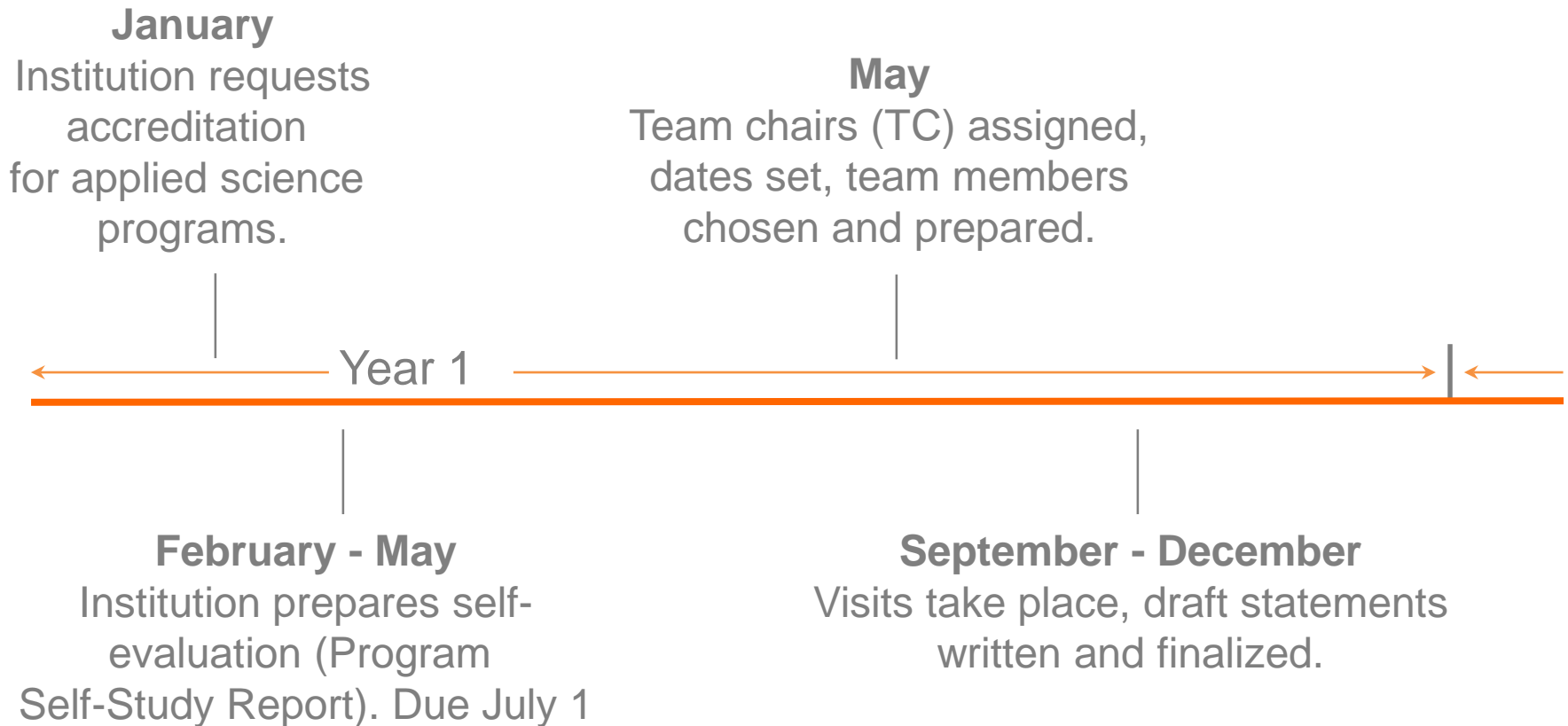
The Accreditation Process

Accreditation Process

- Timeline
- Pre-Visit Activities
- Campus Visit
- Post-Visit Activities

The Accreditation Timeline

Year 1



The Accreditation Timeline

Year 2

November - January

Draft statements edited and preliminary statements sent to institutions.

February - March

TC, editor, ASAC Chair change draft statement to include due process response.

August - September
Institutions informed of actions.



December - February

Institutional due process response to draft statement and return to ABET.

July

ASAC meets to take final action.
TC presents results before the ASAC.



Institutional Preparation Process

- On-going compliance with criteria.
- Apply to ABET for accreditation or reaccreditation.
- Prepare program Self-Study Report.
- Assemble supporting materials to be presented at an on-site visit to demonstrate achievement of student outcomes.

The Self-Study Report

- This is the foundation document.
- Use questionnaire template supplied by ABET ASAC on ABET web site.
- The campus visit serves to validate the program as presented in the Self-Study Report.
- Specifics can/should be clarified before the campus visit.
- Due to ABET HQ by July 1

Accreditation Components

- **The Self-Study Report includes a complete description of how and the extent to which the program satisfies each of the criteria requirements:**
 - **Students**
 - **Program Educational Objectives**
 - **Student Outcomes**
 - **Continuous Improvement**
 - **Curriculum**
 - **Faculty**
 - **Facilities**
 - **Institutional Support**
 - **Program Criteria**

Questions?



The Evaluation Team

ABET Competencies

- Visit team members are expected to be:
 - Technically Current
 - Effective Communicators
 - Professional
 - Interpersonally Skilled
 - Team-Oriented
 - Organized

Who Is on Your Visit Team?

- One team chair assigned by ASAC
- Typically one program evaluator (PEV) for each program being evaluated with a minimum team of three for new accreditation actions
- Possibly one or more observers
- Some institutions may have simultaneous visits where more than one commission has programs to be evaluated.
 - In this case, there will be two or more team chairs and evaluators for all programs being evaluated.
- Some visits will be joint with two commissions evaluating a single program

Your Team Chair

- Was nominated by and represents a member society of ABET; elected by the ASAC and approved by the ABET Board of Delegates
- Is an experienced program evaluator
- New team chairs are trained and mentored by experienced team chairs.
- Team chairs are evaluated against the ABET competencies listed previously.

Program Evaluators

- Selected by the professional society with responsibility for the program to which he or she is assigned.
- Were trained by ABET and/or one of the professional societies and will be evaluated using the ABET Competency Model.
- Reviewed by the institution for any conflicts of interest.

Observers

- Observers may be assigned to the team.
- Observers are to observe and have no “vote” in determining the recommended action.
- Some professional societies require trained program evaluators to participate as an observer before being assigned as a program evaluator on a team.
- State boards of licensure often assign an observer.
- An observer will normally “shadow” a PEV.
- The institution may decline observers generally or may decline to accept a particular observer.

Responsibilities of Team

Team Chair

- Assembles Team
- Organizes On-Site Visit
- Mentors Evaluators
- Prepares Statements
- Recommends an Action
- Presents to ASAC
- Is the Institution's Advocate

Program Evaluator

- Reviews Reports and Accompanying Documents
- Conducts On-Site Visit
- Analyzes and Reports Results
- Recommends an Action
- Assists Team Chair with Post-Visit Actions



Conflict of Interest

- Expectations for ABET representatives:
 - Behave in an ethical and professional manner.
 - Disclose real or perceived conflicts of interest.
 - Recuse themselves from discussions or decisions related to real or perceived conflicts of interest.



Confidentiality

- Information supplied by institution and derived from the visit is for confidential use of ABET and the Applied Science Accreditation Commission.
- ABET has specifically authorized professional societies to participate in the accreditation process.
- General information about ABET and the commissions is available on the ABET website at **www.abet.org**.

ABET Team Interactions

- Team chair contacts institution in May to set up or confirm a visit date and provide an outline of activities for the visit process.
- Team chair submits bios of program evaluators (PEVs) for institution review between May and August.
- Team chair and institution set up a line of communication.
- Team will discuss self-study and identify issues before visit.
- Team chair and/or PEVs to remain in contact with institution prior to visit to obtain information and/or get additional questions answered prior to the visit.

Transcript Request

- The team chair will also ask the institution to provide 6-10 transcripts selected randomly.
- Institution should also provide documentation to support analysis of transcript (e.g., degree audit, waiver requests, etc.)



Terms & Terminology



ABET Definitions

- You will find the definitions of ABET's terms in the *Accreditation Policy and Procedure Manual (APPM)*.

Program Educational Objectives

- Broad statements that describe what graduates are expected to attain within a few years after graduation.
- PEOs are based on the needs of the program's constituencies.
- There must be a process to review and update PEOs.
- Must be “publicly stated” per APPM.

Are These PEOs?

- Graduates of the program will have:
 - A solid understanding of the basic principles of mathematics, science, and engineering and the technical competency to use the techniques, skills, and modern tools for practice in engineering as well as for graduate education.
 - The ability to work in a team and develop problem-solving skills that include oral and written communication skills to effectively communicate technical and professional information.

Are these really broad statements that describe what graduates are expected to attain within a few years of graduation?

No, they are not really PEOs but rather student outcomes.

Student Outcomes

- Student outcomes describe what students are expected to know and be able to do by the time of graduation.
- These relate to the knowledge, skills, and behaviors that students acquire as they progress through the program.

Program Educational Objectives FAQs

- What if the PEOs really sound like a collection of student outcomes (instead of objectives)?
 - If PEOs are not PEOs, there is a Criterion 2 shortcoming.
- What if PEOs are ambiguous or reflect student outcomes retooled to apply after graduation?
 - The team must determine if they meet the intent of the criterion. There may likely be a shortcoming.
- What if there is no process for determining the needs of the program's constituents?
 - If the PEOs do not incorporate constituents' needs, there is a Criterion 2 shortcoming, most likely a deficiency.



Student Outcomes Assessment

- One or more processes that identify, collect, and prepare data to evaluate the attainment of student outcomes.
- Effective assessment uses relevant direct, indirect, quantitative, and qualitative measures as appropriate to the outcome or objective being measured.
- Appropriate sampling methods may be used as part of an assessment process.
 - Not necessary to assess every course.
 - Not necessary to assess every term.

Continuous Improvement Issues

- Are all SOs (a) through (k) + being regularly assessed and evaluated?
- Do the assessment and evaluation determine the extent of attainment of the SOs?
- Are those results systematically used as input to continuous improvement of the program?

Criterion 4 FAQs

- What about assessment data? What are adequate data?
 - Does it all have to be objective/direct? (NO)
 - Can it be subjective? (Some of it may be, but the evaluation should not be based only on subjective assessment.)
 - Is the observation or conclusion of course instructor adequate? (Depends on his or her basis for the observation)
 - Does evidence for each outcome have to be in the form of work the student has produced? (No, but the team needs to be convinced that the extent to which student outcomes are attained has been determined.)

Evaluation

- One or more processes for interpreting the data and evidence accumulated through assessment processes.
- Determines the extent to which student outcomes are being attained.
- Evaluation results in decisions and actions regarding program improvement.

What ASAC Is Looking For

- Processes in place which provide for:
 - Definition of desired, measurable outcomes
 - Collection of data linked to the outcomes
 - Analysis of data and evaluation of results
 - Implementation of change
 - Repeat cycle and review

What ASAC Is Looking For

- Documentation of results and evidence that results are being used to improve the program, for example:
 - Student portfolios
 - Nationally-normed examinations
 - Alumni and employer surveys
 - Placement data
 - Performance indicators

Level of Expectation

- Exactly which attributes must each graduate have?
 - A system must be in place to ensure that all graduates have, to some minimum extent, achieved the prescribed student outcomes.
 - The level of achievement may vary.

Keep in Mind

- The institution must provide evidence that they have a working and effective system of assessment in place.
- The institution must describe a clear relationship between program educational objectives, student outcomes, and measurable indicators of success with required levels of achievement.
- The evaluation team is assessing programs based on the criteria and the strength of the evidence provided by the institution, not on their own personal references.

Terminology

- Each institution is free to define its own terminology.
- For example, if “goal” is the term used to define the expected accomplishments of graduates the first few years after graduation, this is completely acceptable to ABET.
- The Self-Study Report should clarify this terminology.



Key Terms with Respect to Compliance with Criteria

- **Compliance** – The program satisfies the applicable criteria.
- **Concern** – A program currently satisfies a criterion, policy, or procedure; however, the potential exists for the situation to change such that the criterion, policy, or procedure may not be satisfied.



Key Terms

- **Weakness** – 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 evaluation.
- **Deficiency** – A criterion, policy, or procedure is NOT satisfied. Therefore, the program is not in compliance with the criteria.



Possible 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 |

Actions and Durations

For a General Review

| <u>Evaluation</u> | | <u>Action</u> | | <u>Duration</u> |
|-------------------|----------|---------------|---------------------|-----------------|
| Any Weak? | Any Def? | | | [Years] |
| No | No | NGR | Next General Review | 6 |
| Yes | No | IR | Interim Report | 2 |
| Yes | No | IV | Interim Visit | 2 |
| — | Yes | SC | Show Cause | 2 |

Actions and Durations

For a Focused or Interim Review

| <u>Evaluation</u> | | <u>Action</u> | | <u>Duration</u> |
|-------------------|------|---------------|---------------------|-----------------|
| Weak? | Def? | | | [Years] |
| No | No | RE | Report Extended | 2-4 |
| No | No | VE | Visit Extended | 2-4 |
| No | No | SE | Show Cause Extended | 2-4 |
| Yes | No | IR | Interim Report | 2 |
| Yes | No | IV | Interim Visit | 2 |
| — | Yes | SC | Show Cause | 2 |
| — | Yes | SCR | Show Cause Report | 2 |

Questions?



The Campus Visit

Objectives of the Campus Visit

- Make a qualitative assessment of factors that cannot be documented in a written questionnaire.
- Conduct a detailed examination of the materials compiled by the institution.
- Provide the institution with a preliminary assessment of its strong points and shortcomings.

Evaluate/Document/Recommend

- The team will:
 - Identify issues for each criterion.
 - Select key term that applies overall for each criterion.
 - Explain impact of each concern, weakness, and deficiency.
 - Recommend an accreditation action.

Communication is Critical!

- The dean (or designee) and the team chair must plan and be informed of all activities.
- The team chair should be the conduit for any communication between ASAC team and the institution.
- Any communications between a program head and program evaluator should be copied to the dean and team chair.

Team Requirements

- The institution should provide a room at the school that can be locked and contains computers and a printer so the team can work there privately.
- Monday luncheon – The institution should invite faculty, students, graduates, and the Industrial Advisory Committee members (if the program has one).
- The team will develop a list of faculty and school officials they would like to interview in advance of the site visit, so please make sure these individuals are available.
- Meeting with students on Monday afternoon.

Campus Visit Activities – Day 0 (Usually Sunday)

- Team visits programs to evaluate materials.
- Tour facilities.
 - PEV with program chair
 - Team chair with dean
- Team meets in the evening to review findings.

Campus Visit Activities – Day 1

Typical Team Chair Schedule

| | |
|-------------------|---|
| 8:00 AM - 9:00 AM | Team meets with administration. |
| 9:00 AM - 12:00 N | TC meets with dean, associate dean, president, provost, registrar, finance, admissions, placement, assessment |
| 12:00 N - 1:30 PM | Optional luncheon; meetings as per team requirements |
| 1:30 PM - 4:00 PM | Continue meetings with college/ institutional officials |
| 4:00 PM - 4:45 PM | Prepare for team meeting |
| 5:00 PM - ? | ABET team meeting and dinner |

Campus Visit Activities – Day 1

Typical PEV Schedule

| | |
|--------------------|---|
| 8:00 AM - 9:00 AM | Team meets with administration. |
| 9:00 AM - 10:00 AM | PEV meets with program head |
| 10:00 AM - 12:00 N | PEV meets with faculty, students, and support staff (appointments based on pre-visit assessment.) |
| 12:00 N - 1:30 PM | Optional luncheon; meetings as per team requirements |
| 1:30 PM - 4:45 PM | Continue meetings with program faculty, etc. Review program materials. |
| 5:00 PM - ? | ABET team meeting and dinner |

Campus Visit Activities

Day 2 (Tuesday)

- Finalize exit meeting statements.
- Brief program chairs and dean on findings.
- Private team meeting (working lunch)
- Team finalizes visit forms and documents (see PEV Workbook).
 - Program Audit Form (A copy will be left with the institution.)
 - Exit statement
- Team conducts exit meeting.
- The institution CEO should be present for this meeting.
- Institution CEO (or dean) determines who is present.

Exit Meeting with Institution CEO

- Purpose: Report team findings to the institution CEO and answer clarifying questions.
- Team chair makes introductory remarks and invites PEVs to read their exit statements.
- Statement includes strengths, deficiencies, weaknesses, concerns, and observations, as necessary.
- Program Audit Form (PAF), which documents the team findings, is left with the dean.

Program Audit Form (PAF)

- Form left with institution at exit interview.
- Reflects the shortcomings discerned in any of the criteria as a result of reviewing the Self-Study Report and conducting the on-site evaluation.
 - Cites specific wording from criterion
 - Describes observations
 - Explains the impact of shortcoming

Important Point!

- All shortcomings identified at the time of the visit will be reflected on the PAF that is left with the institution.
 - It is possible that a shortcoming identified at one level by the team may be framed at a different level later in the editing process if consistency in application of criteria across institutions demands it.
- An item identified as an observation at the time of the visit may be cited as a shortcoming in the statement of findings if consistency in application of criteria demands it.
- After the visit, all communication with the visit team must be through the team chair . No direct contact with PEVs.

The Decision-Making Process

- Preliminary decision before visit begins
- Monday night recommendation
- Team decision at conclusion of visit
- Decisions by editor and ASAC Chair
- Draft statement consistent with ASAC Chair decision

APPM Requirements

Are there APPM issues that we should pay particular attention to in evaluations?

II.A. Public Release of Accreditation Information By the Institution

II.A.1. Institutions are required to represent the accreditation status of each program accurately and without ambiguity.

Programs are either accredited or not accredited. ABET does not rank programs.

- II.A.6. Each accredited program must be specifically identified as “accredited by the Applied Science Accreditation Commission of ABET, <http://www.abet.org>.”
- **II.A.6.a. Each ABET-accredited program must publicly state the program’s educational objectives and student outcomes.**

APPM Requirements

II.A. Public Release of Accreditation Information By the Institution

- **II.A.6.b. Each ABET-accredited program must publicly post annual student enrollment and graduation data per program.**
- **II.A.7. When a program submits a request for evaluation to ABET, it agrees to disclose publicly its accreditation status to assist external stakeholders, such as students, parents, and the general public, in making appropriate education decisions.**
- **II.A.7.a. ABET publicly identifies programs whose accreditation has been denied or withdrawn by ABET.**

APPM Requirements

- **II.A. Public Release of Acll.A.7.b.** If ABET denies or withdraws its accreditation, then the institution/program must provide, upon request from the public, a statement summarizing ABET's reasons for denial or withdrawal of accreditation; that statement can be accompanied by a response from the affected program addressing the ABET decision. This statement must be available within 60 days of the final decision by ABET. ABET will post on its public website a notice regarding the availability of this statement from the institution/program.
- **II.A.7.c.** In the event that the program files an official request for appeal, reconsideration, or immediate re-visit in accordance with APPM II.L., the 60-day period for public notification will begin when the APPM II.L. processes have provided a final accreditation action.

APPM Requirements

II.E.4. Program names must meet ABET requirements.

- The program name must be descriptive of the content of the program.
- The program name must be shown consistently on transcripts of its graduates, in the institution's electronic and print publications, and on the ABET Request for Evaluation (RFE).
- If a program name implies specialization(s) for which Program Criteria have been developed, the program must satisfy all applicable Program Criteria.
- A program may choose to have an option, or similar designation implying specialization within the program, reviewed as a separate program.
- If a program name invokes review by more than one commission, then the program will be jointly reviewed by all applicable commissions.

APPM Requirements

Number of graduates

II.E.5. To be eligible for an initial accreditation review, a program must have had at least one graduate within the academic year prior to the academic year of the on-site review.

Questions?



After the Campus Visit

Post-Visit Process

- 7-day response from institution (to clear up errors of fact in the oral exit statement or on the PAF)
- A draft statement is prepared by TC; edited by an ASAC commissioner, ASAC chair, and ABET HQ; and sent to institution.
- 30-day due process response from institution
- Revised & edited draft statement becomes final statement.
- ASAC will accept additional information, if needed, after the due process response.
- ASAC takes final accreditation action at the July Commission Meeting.
- ABET sends final statement and accreditation letter to institution (August).

Opportunity for Evaluation of Team

- After the visit the dean or designate has the opportunity to evaluate the team chair and program evaluators against the ABET Competency Model.

Ongoing Resolution of Issues

- Programs are encouraged to solve problems quickly.
 - **This is, in fact, the desired result!**
- The final report is considered by the entire Applied Science Accreditation Commission, which makes the final decision on accreditation at its summer meeting.
- Only “Not to Accredit” can be appealed.

It's Not Done Until the Commission Votes

- Institution may submit additional material within a reasonable time prior to annual ASAC meeting.
 - Material provided after the 30-day due process period should be material that was not available when the due process report was submitted, e.g., end-of-semester project reports, transcripts, or faculty hires.
 - Communication with your team chair is key to ensuring relevancy.
 - Submit supplemental material by June 1
- Note: 7-day, due process, and supplemental information should be sent to Team Chair, Editor 1, ASAC Chair, and ABET HQ.

Interim Reports

- For 2016-17 cycle, institution submits report by 1 July 2016.
- ABET HQ forwards the assigned TC the previous statement for the institution.
 - No program evaluator will be assigned for IR reviews.
- The applicable criteria are the criteria that were in effect at the time the shortcomings were identified, unless it is in the institution's interest to apply later criteria.
- The evaluation is focused on the shortcomings from the previous statement.

Questions?

Examples of What the Evaluation Team Looks For

Criteria

- Criterion 1: Students
- Criterion 2: Program Educational Objectives
- Criterion 3: Student Outcomes
- Criterion 4: Continuous Improvement
- Criterion 5: Curriculum
- Criterion 6: Faculty
- Criterion 7: Facilities
- Criterion 8: Institutional Support

Criterion 1 – Students

- The program must:
 - Evaluate student performance, advise students, and monitor students' progress.
 - Have and enforce policies for acceptance of transfer students and validation of courses taken elsewhere.
 - Have and enforce procedures to assure that all students meet all program requirements.

Criterion 2 – Program Educational Objectives (PEOs)

- The program must have in place:
 - Published PEOs consistent with mission and these criteria.
 - Process that periodically documents and demonstrates that the PEOs are based on the needs of the program’s constituencies.
 - A process that periodically reviews the PEOs to ensure they remain consistent with the institutional mission and needs of the program constituents.

Criterion 3 – Student Outcomes

- The program must demonstrate that (a) – (k) are attained.
 - Note: For associate degree programs, (a) – (i) listed under “Associate Degree Programs.”
- Student outcomes are defined as (a) – (k) plus any additional ones articulated by the program.
- Student outcomes must foster attainment of the PEOs.
 - There must be an assessment and evaluation process that periodically documents and demonstrates the degree to which outcomes are attained, which is addressed under Criterion 4 – Continuous Improvement.

Criterion 4 – Continuous Improvement

- Programs shall use appropriate, documented processes for assessing and evaluating the extent to which the student outcomes are being attained.
- Each program must show evidence of actions taken to improve the program.
- These actions should be based on available information.
- The improvements can be based on any available information!

Assessment & Improvement Evidence

Among the materials that the institution collects for display should be:

- Examples of assessment tools
- Summary of results
- Faculty meeting minutes
- Advisory Board meeting minutes

Criterion 5 – Curriculum

- The curriculum requirements specify subject areas appropriate to applied science programs but do not prescribe specific courses.
 - How does the curriculum align with the program educational objectives?
 - How does the curriculum and its associated prerequisite structure support the attainment of the student outcomes?

Display Materials

Course Materials

- Courses appear appropriate to accomplish the program educational objectives and program outcomes.
- Student work indicates active engagement and demonstration of learning.
- Evidence with respect to specific outcomes (including those in the criteria) as appropriate to the assessment plan.
- A few missing items, or even entire missing courses, are not necessarily systemic problems. PEVs will pursue any major gap to see if it represents a serious problem.

Laboratory Reports

- Evidence (lab reports) of appropriate student learning (not just cookbook)
- Evidence to support program outcomes
- Evidence of faculty reviewing and correcting written communications
 - Not just check marks – written reports!
 - Provide corrections to grammar and composition.

Curriculum Culminating in Comprehensive Projects or Experiences Based on Cumulative Knowledge and Skills

- Evidence that all students complete a comprehensive project or experience that draws on previous courses and incorporates standards and realistic constraints.
- Student reports (or some other mechanism) should demonstrate this via a complete project report.

Criterion 6 – Faculty

- Sufficient number to maintain continuity, stability, oversight, student interaction, and advising
- Competence of faculty members must be demonstrated by such factors as education, professional credentials and certifications, etc.
- Responsibility and authority to improve the program
- Some program criteria have additional requirements.

Criterion 7 – Facilities

- Classrooms, offices, laboratories, and associated equipment must be adequate to support attainment of the student outcomes and to provide an atmosphere conducive to learning.
 - The team will tour the facilities as part of the visit process.
 - Examples of facilities may include teaching labs, computer labs, libraries, advising centers, etc.

Facilities

- Classrooms
 - Appropriate physical arrangement
 - Equipped with appropriate technology
 - Not overcrowded
- Support facilities
 - Sufficient computer access, with appropriate off-hours access
 - Appropriate spaces for students to gather (not an explicit criterion but relates to several criteria)
 - Appropriate shop with parts, repair facilities, etc.
- Faculty offices
 - Sufficient size, privacy

Facilities

- Labs/Design Studios
 - Sufficient number and size of labs
 - Appropriate coverage across the breadth of specializations within the program
 - Appropriate equipment, in good repair
 - Appropriate student access (evening and weekend access?)
 - Appropriate technician support and instructional support in lab

Facilities

- Labs/Design Studios (cont.)
 - Comments from students about the lab experience
 - Is there some type of “Laboratory Plan” for maintaining and upgrading the instructional laboratories? This is not required by ABET, but in general, a formal or informal plan of some sort should exist.

Criterion 8 – Institutional Support

- Institutional support and leadership must be adequate to ensure the quality and continuity of the program.
 - Resources include institutional services, financial support, and staff (both administrative and technical).

Program/Degree-Specific Criteria

- In addition to the eight General Criteria, the team will assess the program's compliance with applicable program- and degree-specific criteria, unless the program is being reviewed under the General Criteria only.
- Applicable program specific criteria are determined by the program title.
- Additional degree criteria apply to master's degree programs.



Common Findings

Common Findings

- 1) Continuous Improvement Process
 - No systematic plan
 - A plan but it is not implemented
 - No or minimal data collected
 - Collected data not assessed
 - Results not used to improve program

Common Findings

2) Student Displays

- Student displays out of date or not organized
- Lack of documentation showing written and oral communications
- Inability to tie-in student materials (coursework) to program educational objectives or student outcomes

Common Findings

3) Transcripts

- Prerequisites not met.
- Lack of oversight provided in courses that students select.
- Course transfer issues involving students from community college or other institutions into the program.
- No documentation for waivers

Common Findings

4) Faculty

- Faculty member not identified as administratively in charge of the program (applies to some program criteria)
- Inadequate number of faculty to handle the program
- Lack of documentation to address replacement of faculty due to retirement or to other professional opportunities (new job)
- Issues associated with professional development, external consulting, and professional certification (PE, CIH, CSP, etc.)

Questions?