

# Preparing for an ANSAC Evaluation Site-Visit

Workshop for Institutional Representatives

Presenter: Robert D. Soule

April 11, 2018



## **Session Agenda**

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

#### Introduction

- ANSAC Representatives
  - ✓ Bob Soule, ANSAC Chair
  - ✓ Hamid Fonooni, ANSAC Past Chair
  - ✓ Torey Nalbone, Chair Elect
  - ✓ Alice Greife, ANSAC Vice Chair of Operations

#### Institutional Representatives

- ✓ Name and Title
- √ Type of program
- ✓ New or reaccreditation
- Questions about the accreditation process

#### **General Considerations**

### **Our Goals Today are:**

- to develop common understandings of, and expectations for, the evaluation activities;
- to set the stage for a successful set of evaluation visits in the 2018-19 cycle.

### 2018 Symposium Sessions

- ANSAC Institutional Rep Day Activities
  - Geared to programs with visits the following fall. It allows interaction before Self-Study submitted
- Preparing the Self Study for ANSAC
  - Executive Committee members available to answer questions at the symposium

#### 2018 Symposium Sessions(Cont'd)

#### Accreditation under the ANSAC General Criteria and Discussion of the revised Criterion 3 and 5

 ANSAC has revised Criterion 3 and 5, which will go into effect for 2019-20 visits. The session will discuss the changes as well as accreditation under the general criteria for programs where there is no program criteria.

#### ANSAC Town Hall

- Summary of Symposium Sessions
- Chance to clear up any questions

# **Expected Outcomes for This Workshop**

- to become familiar with accreditation process;
- to foster a good ("smooth") evaluation process;
- to become aware of the most common shortcomings;
- to understand the processes by which accreditation actions are determined and their implications for your programs;
- to be able to establish a good working relationship with your team chair.



## **Learning Objectives**

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



## **ABET Organization**

- Board of Directors (12)
- Board of Delegates (~53)
- Applied and Natural Science
- Accreditation Commission (~23)

# **ABET Organization**

ABET is essentially a group of over 2,200 volunteers from academia, industry, and public 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 and Natural Science Accreditation Commission
- Computing Accreditation Commission
- Engineering Accreditation Commission
- Engineering Technology Accreditation Com.
- 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
- Serve on commission committees
- Assure quality of evaluation process
- Make final determination of accreditation actions

## Institution's Responsibilities

- Request Accreditation
- Prepare Program Self-Study Report
- Implement Criteria and Policy and Procedures Requirements
- Host Visit
- Respond to Reports
  - 7-Day Response to PAF and Exit Statement
  - 30-Day Due Process
  - Supplemental Information if needed



# **Types of Evaluation**

Comprehensive

Focused



## Types of Evaluation

- Comprehensive Evaluations of all programs under a particular commission's purview must be conducted simultaneously every six years.
- Focused

SET



## **Types of Evaluation**

- Comprehensive Evaluations of all programs under a particular commission's purview must be conducted simultaneously every six years.
- Focused Evaluations occur when a program was found to have deficiencies or weaknesses in the prior evaluation. The evaluation could be done by either report or visit, depending upon the commission's findings.

#### **The Evaluation Team**



How many are in a visiting team?

Who is responsible for reviewing the program?

#### True or False

ABET is transparent about all matters related to the institutions?

## **ABET Competencies**

#### Visit team members are expected to be:

- Technically Current
- Effective Communicators
- Professional
- Interpersonally Skilled
- Team-Oriented
- Organized

#### Who Is on Your Team?

- One Team Chair assigned by ANSAC
- Typically one Program Evaluator (PEV) for each program being evaluated with a minimum of two PEVs (i.e., a team of three, including the team chair) 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, if the institution opts to have a simultaneous visit, there
    will be two or more Team Chairs and evaluators for all programs
    being evaluated on campus at the same time..
- Some visits will be joint with two commissions evaluating a single program. For ANSAC, that occurs only for construction management programs that either have engineering in the name as well or engineering technology.

#### **Your Team Chair**

- A Commissioner who was appointed by and represents a member society of ABET; elected by ANSAC and approved by the ABET Applied and Natural Science Area Delegation.
- 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 a professional society with responsibility for the program to which he or she is assigned.
- Trained by ABET 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 have no "vote" in the recommended action vote.
- Some professional societies require trained program evaluators to participate in an observer visit 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 and ConductsOn-Site Visit
- Mentors Evaluators
- ✓ Prepares Statement
- Recommends Action
- Presents to ANSAC
- Advocates for Institution

#### **Program Evaluators**

- ✓ Review Reports
- ✓ Conduct On-Site Visit
- Analyze and Report Results
- Recommend Action
- Assist 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 and Natural 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 applied and natural science and the technical competency to use the techniques, skills, and modern tools for professional practice 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.
- 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.



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

What about assessment data? What are adequate data?

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- Does evidence for each outcome have to be in the form of work the student has produced?

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- 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.

### 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

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- 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 (closing the loop)

Documentation of results and evidence that results are being used to improve the program

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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
- ✓ Other

# 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.



- 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.

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  - NOT satisfied. Therefore, the program is not in compliance with the criteria.

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



#### **True or False**

Program Educational Objectives describe what students are expected to know and be able to do by the time of graduation.

#### **True or False**

Professional certifications, national tests, and licensure would be some examples that can be used to assess Student Outcomes.



## **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

### For a General Review

<b>Evaluation</b>		<u>Action</u>		<b>Duration</b>
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

### For an Initial 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	NA	Not to Accredit	

### For a Focused or Interim Review

Evaluat Weak?	<u>ion</u> Def?		<u>Action</u>	<u>Duration</u> [Years]
No	No	RE	Report Extended	2-4
No	No	VE	Visit 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

#### For an Interim Review of a Show Cause Report or Visit

<b>Evaluation</b>			<u>Action</u>	<b>Duration</b>
Weak?	Def?			[Years]
No	No	SE	Show Cause Extended	2-4
Yes	No	IR	Interim Report	2
Yes	No	IV	Interim Visit	2
_	Yes	NA	Not to Accredit	

## **The Accreditation Process**

## **Accreditation Process**

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

#### **January**

Institution requests accreditation for applied or natural science programs.

#### May

Team chairs (TC) assigned, dates set, team members chosen and prepared.

#### **Year 1 (2018)**

#### February - May

Institution prepares selfevaluation (Program Self-Study Report). Due July 1

#### September - December

#### **January**

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November - January
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August - September Institutions informed of actions.

-- Year 2 (2019)

#### **December - February**

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

#### July

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

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## **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.

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# The Self-Study Report

- This is the foundation document.
- Use questionnaire template supplied by ABET ANSAC
- 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

### **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.
   Program notes in RFE preferred visit dates and whether requesting simultaneous visit with another commission team.
- Team chair submits bios of PEVs for institution review between May and August. Institution vets for conflict of interest.
- Team chair meets with institutional rep at ABET July Commission Meeting (optional).
- Team will discuss self-study and identify issues before visit.
- Team chair and/or PEVs remain in contact with the institution prior to visit to obtain information and/or get additional questions answered.

### **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 <u>overall</u> for each criterion.
- Explain impact of each concern, weakness, and defim ciency.
- 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 ANSAC team and the institution itself.
- Any communications between a program head and program evaluator should be copied to the Dean and Team Chair.

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## **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 can host one luncheon.
   Generally the institution will 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 campus to evaluate materials for the program(s) under review.
- 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 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.

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## **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.
- 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 editors and ANSAC Chair
- Draft Statement consistent with ANSAC Chair decision

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

## I.A. Public Release of Accreditation Information By the Institution/Program

- I.A.1. 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.
- I.A.1.a. ABET publicly identifies programs whose accreditation has been denied or withdrawn by ABET.
- I.A.1.b. ABET publicly identifies programs whose accreditation has been placed on Show Cause due to one or more cited deficiencies in Criteria compliance.

- I.A.1.c. If ABET places a program on Show Cause or denies or withdraws a program's accreditation, then the institution/program must provide to the public, upon request, a statement summarizing ABET's reasons for the Show Cause accreditation action or the 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 receipt of the Final Statement to the Institution.
  - I.A.1.c.(1) ABET will post on its public website a notice regarding the availability of this statement from the institution/program.
- I.A.1.d. In the event that the program files an official request for reconsideration or immediate re-visit in accordance with APPM I.J., the 60-day period for public notification will begin when the APPM I.J. processes have provided a final accreditation action.

#### I.A. Public Release of Accreditation Information By the Institution

- I.A.5. The institution must avoid any implication that a program is accredited under a specific commission's general or program criteria against which the program has not been evaluated. No implication should be made that accreditation by one of ABET's commissions applies to any programs other than the accredited ones.
- I.A.6. Institution catalogs and similar publications must clearly indicate
  the programs accredited by the commissions of ABET as separate
  and distinct from any other programs or kinds of accreditation. Each
  accredited program must be specifically identified as "accredited by
  the \_\_\_\_\_ Accreditation Commission of ABET, http://www.abet.org."
  - I.A.6.a. Each ABET-accredited program must publicly state the program's educational objectives (PEOs) and student outcomes (SOs).
  - I.A.6.b. Each ABET-accredited program must **publicly post** annual student enrollment and graduation data per program.

#### I.C.4. Program names must meet ABET requirements.

- **I.C.4.a.** The program name must be descriptive of the content of the program.
  - i.c.4.a.(1) Each program in a country where English is not the native language must provide ABET with both the name of the program in English and the name of the program in the official language(s) of the country.
- **I.C.4.b.** 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).
  - I.C.4.b.(1) The program name must be distinguishable from the degree conferred.
  - If there is an option or similar designation implying a specialization within the program, it must be displayed separately from and in a subordinate position to the program name.

- **I.C.4.c.** The program name determines the commission and the criteria applicable to its review.
  - **I.C.4.c.(1)** Every program must meet the General Criteria for the commission(s) under which it is being reviewed.
  - **I.C.4.c.(2)** If a program name implies specialization(s) for which Program Criteria have been developed, the program must satisfy all applicable Program Criteria.
  - **I.C.4.c.(3)** A program may choose to have an option, or similar designation implying specialization within the program, reviewed as a separate program.
  - **I.C.4.c.(4)** If a program name invokes review by more than one commission, then the program will be jointly reviewed by all applicable commissions.

### **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)
- "Draft Statement" prepared by Team Chair; edited by an ANSAC executive committee member, ANSAC chair, and ABET HQ; and sent to institution.
- 30-day "Due Process" response from institution
- Revised & edited "Draft Statement" becomes "Final Statement".
- ANSAC will accept "Supplemental Information" if needed
- ANSAC takes final accreditation action at the July Commission Meeting.
- ABET sends "Final Statement" and accreditation letter to institution (August or September).

### **Opportunity for Evaluation of Team**

After the visit the Dean or designee 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!
- Final report considered by the entire Applied and Natural Science Accreditation Commission, which makes final decision on accreditation at their July meeting.
- Only "Not to Accredit" can be appealed.

# It's Not Done Until the Commission Votes

- Institution may submit supplemental material within a reasonable time prior to annual ANSAC meeting.
  - Supplemental 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, or faculty hirings.
  - 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, ANSAC Chair, and ABET HQ.

## **Interim Reports**

- For 2018-19 cycle, institution submits report by July 1, 2018.
- ABET HQ forwards the 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 the institution opts to apply later criteria.

# **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.
- A 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 3 changing for 2019-20

Note that Criterion 3 has been revised, but the revisions will not go into effect until the 2019-20 cycle so not applicable for programs being visited in the 2018-19 cycle. Those programs will need to comply with the revised criteria when they come up for their next general review six years later. Proposed changes can be found on ABET website at the back of the ANSAC criteria booklet.

# 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

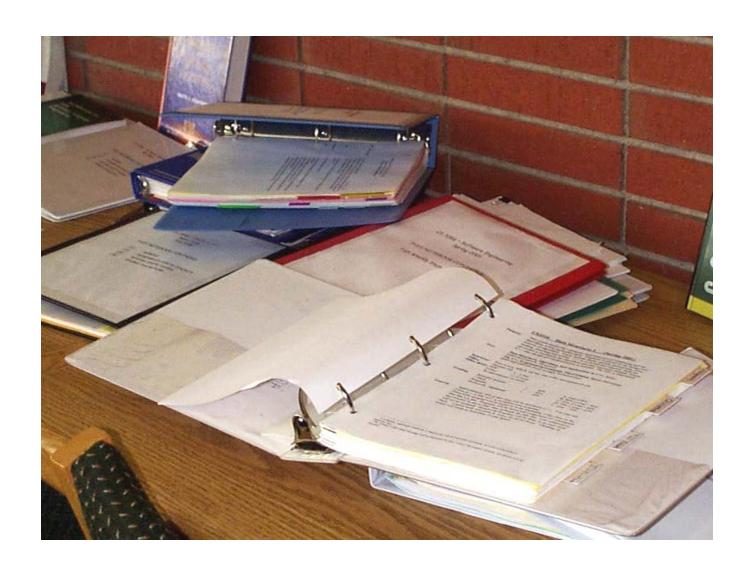
The curriculum requirements specify subject areas appropriate to applied and natural science programs but do not prescribe specific courses.

- 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?
- Does the program have a culminating project or experience in the senior year?

# Criterion 5 changing for 2019-20

Note that Criterion 5 has been revised, but the revisions will not go into effect until the 2019-20 cycle so not applicable for programs being visited in the 2018-19 cycle. Those programs will need to comply with the revised criteria when they come up for their next general review six years later. Proposed changes can be found on ABET website at the back of the ANSAC criteria booklet.

ABET 11:





#### **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. This is generally completed in the student's final year.
- 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.

#### 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

#### 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

#### 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

#### 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.)



## **Learning Objectives**

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

**Questions?**