Welcome to the EAC Briefing for Institutional Representatives and Team Chairs

We are glad you are here!
Today’s Presenters

Mo Hosni
- EAC Chair
- 2022-23

Patsy Brackin
- EAC Past Chair
- 2022-23

Lorraine Fleming
- EAC Chair Elect
- 2022-23

Lizette Chevalier
- EAC Vice Chair of Operations
- 2022-23
Agenda

Topics and activities

Welcome – Who is here, why are we here?

Preparing for a successful evaluation

The campus visit

The post-visit process – Accreditation evaluation and actions

Interim actions; Consistency

Common shortcomings

Concluding thoughts/ Q&A
Who Attends These Meetings?

Institutional Representatives
- Representing institutions undergoing evaluation in the 2022-2023 cycle

Engineering Accreditation Commission Members
- Executive Committee
- 2022-2023 EAC Members
- Other Team Chairs

ABET Staff
Why Are We All Here?

- Set the stage for successful evaluations in the 2022-23 cycle
- Develop common understanding and expectations of activities
  - Preparing for the visit
  - During the visit
  - Following the visit
What is Accreditation? And why do it?

Accreditation requires a periodic review and evaluation to determine if educational programs meet defined standards of quality.

Quality Assurance:
ABET accreditation provides assurance that a college or university program meets the quality standards of the profession for which that program prepares graduates.

ABET accreditation is not a ranking system.
What is ABET?

1) ABET is a nonprofit, non-governmental agency that accredits programs in applied and natural science, computing, engineering and engineering technology.

2) Our more than 2,200 experts come from industry, academia and government. They give their time and effort supporting quality assurance activities around the world by serving as Program Evaluators, commissioners, board members and advisors.

3) ABET has ISO 9001:2015 certification.
Who is ABET?

• 35 Member Societies
• ABET Volunteers
• Headquarters Staff (Full-time)
  • President – Michael Milligan
  • Chief Accreditation Officer – Joe Sussman
  • Senior Director, Accreditation Operations – Jane Emmet
  • Accreditation Manager – Ellen L. Stokes
  • International Accreditation Manager – Sherri Hersh
Role of Member Societies

• Provide representative(s) on Board of Delegates
• Provide experts who develop our criteria and policies
• Propose the Program Criteria
• Select the Program Evaluators for each discipline
Who are the ABET volunteers?

- Team Chairs
- Program Evaluators

- Board of Directors – William Wepfer, President
- Board of Delegates – S.K. Ramesh, Chair
- ABET Councils
  - Academic Advisory Council – Cynthia Paschal, Chair
  - Accreditation Council – Ann L. Kenimer, Chair
  - Global Council – Jamie Rogers, Chair
  - Inclusion, Diversity and Equity Advisory Council – Mary Leigh Wolfe, Chair
  - Industry Advisory Council – Richard Hope, Chair
ABET Accreditation Commissions

• Four Accreditation Commissions:
  • **EAC: Engineering Accreditation Commission**
  • CAC: Computing Accreditation Commission
  • ETAC: Engineering Technology Accreditation Commission
  • ANSAC: Applied and Natural Science Accreditation Commission

• Each commission:
  • Commission Members: Team Chairs
  • Executive Committee: Editor 1, Editor 2
  • Supporting staff: Adjuncts (EAC: M. Dayne Aldridge, Douglas R. Bowman, Susan Conry, Winston Erevelles)/Staff Liaisons
More about Accreditation

More information:

https://www.abet.org/accreditation/what-is-accreditation/why-abet-accreditation-matters/
Who Is on Your Team?

*If you have simultaneous or joint visits by more than one commission, you will have a Team Chair and team for each commission.
Who Are the Team Chairs?

• Experienced program evaluators
  • Nominated by ABET Member Societies
  • Recommended by the EAC
  • Approved by ABET Engineering Area Delegation
• New team chairs mentored by experienced peers
• Institution may decline a team chair if there is a conflict of interest
• Evaluated by institution, PEVs, and Editor 1 after the review
Who Are the Program Evaluators?

- Assigned by the member society of the program being evaluated
- Trained by ABET
- Evaluated by team chair, PEVs, and program
- Institution can decline a proposed PEV if there is a conflict of interest
- Please approve TC and PEV nominations timely to finalize your visit team and facilitate preparations
Who Are the Observers?

• Professional societies may require new PEVs to observe a visit prior to serving
• Local/state boards may assign
• International groups may request
• Observers shadow PEVs, but have no vote in the recommended action
• The institution may decline observers generally or specifically
ABET Competencies

- Technically Current
- Effective Communication
- Professional
- Interpersonally Skilled
- Team-oriented
- Organized
Please Submit Post-Visit Feedback

• Key to our continuous improvement
  • Institutions
    • TC evaluation (Dean or a designee)
    • PEV evaluations (Program Chairs)
  • Team chairs
    • PEV evaluations
• No influence on accreditation outcomes
Accreditation Timeline: 18-21* Month Process


(*If required) By OCT 1*
Readiness review

By JAN 31 –
Institution submits
Request for Evaluation

By JULY 1
Institution submits
Self-Study Report

Pre-visit
Preparations; Prepare materials; plan visit

FEB – JUN
Team members assigned; visit dates set; Institution prepares Self-study Report

(JULY –
Commission meets to take final action;
By AUGUST 31 – Institutions notified of final action;
OCTOBER – Accreditation status publicly released)

SEPT to DEC–
Visits take place, followed by 7-day response period

2 to 3 Months after the Visit:
Draft Statement edited and sent to Institutions

(Optional)
30-Day and Post-30-Day Due Process Responses from Institutions

(If necessary)
Draft Statement revised by EAC
Review Preparations
Required with your Self-Study on July 1

1. Upload **one** Self-Study Report section by section or as a single document upload option, including all appendices for **each** program.

1. Upload **one** set of the supplemental materials (**without the academic transcripts**)

The Team Chair and Program Evaluators will be able to access the Self-Study Report through the ABET Accreditation Management System. There will be no need to transmit these materials to the team.
Supplemental materials required with your self-study have some additions

- The general institution catalog covering course details and other institutional information applicable at the time of the review.
- Promotional brochures or literature describing program offerings of the institution.
- Provide the titles of all culminating design projects from the most recent graduating class. If multiple teams work on projects with the same title, provide a way to distinguish the projects. New programs requesting two-year retroactive accreditation should provide titles of all projects for the graduating classes from the two most recent years.
Work with TC for a successful visit

• Help TCs and PEVs to resolve questions on Self-Study Reports and transcripts
  • Advance communication makes for a more effective review
  • Many questions can be answered before the visit
  • Preparations can be made if questions need to be addressed during the visit
• Finalize interview and review schedules
• Agree on review materials and sharing platform
• Copy all communications between PEVs and program leads to dean (or dean’s representative) and TCs
Official Transcripts

The **official academic transcript** contains a listing of all the courses taken by a graduate, year/semester courses were taken, the grades earned, and degree(s) earned.

- The Team Chair will request a specific sampling size of transcripts for each program and will provide a timeframe in which they should be provided to program evaluators.
- Each academic transcript is to be accompanied by the program requirements for the graduate and by worksheets that the program uses to show how the graduate has fulfilled program requirements.
- It is not required to remove names and other personal identifying information from transcripts and associated student records before providing them to the Evaluation Team. However, if desired, personal identifying information may be replaced with a simple alphanumeric code by which the documents may be referred to during the evaluation.
Institution Responsible for Making Support/Display Materials Accessible

• If institutional system is used to provide evidence and documentation, the visit team must be given access to the network and software
  • Guidance and training on the institutional system must be provided so that team members can efficiently process evidence and documentation
  • Timeliness and testing are critical for the team to conduct its work
• Translators must be provided where the language of evidence, documents, and instruction is not English and English translation of supporting materials may be requested to demonstrate attainment of ABET criteria. (see APPM I.D.1.g.)
Required Materials Have Changed

- I.E.5.b.(2) Materials - Evaluators will review materials that are sufficient to demonstrate that the program is in compliance with the applicable criteria and policies. Much of this information should be incorporated into the Self-Study Report (see I.D.1.f); additional evidence of program compliance may be made available to evaluators prior to and during the visit, using an on-line storage location.
  - For on-site visits, display materials may be electronic or printed.
- At least 45 days prior to the review visit, the program evaluator will select a representative sample of design experiences (see Criterion 5.A.7) for which evidence is to be provided. The evidence should be accompanied by rubrics or other tools used for evaluating the projects, and should be available to the program evaluator on the electronic storage platform of the program’s choice at least 30 days prior to the review visit.
Ongoing COVID 19 Impact on Program Delivery

• We understand that in the evaluation period, you may have encountered the following:
  • Faculty and staff working remotely
  • Courses transitioning online
  • Laboratories becoming unavailable
  • Grading system changes to pass/fail
  • Students studying under difficult circumstances
  • Data collection and documentation disrupted
Programs Will NOT Be Judged By Their COVID-19 Response

- Evaluation of compliance with ABET criteria and APPM will be based on the entire accreditation cycle
- Our approach and decision-making will be reasonable without compromising the quality and integrity of the review
Virtual Review Preparations

- Maintain open line of communications with your team chair throughout the planning phase
- Zoom video conferencing is the preferred platform
  - If your institution cannot use Zoom, you will need to find an alternative platform and make it available to the team
  - It is at the TC discretion, in consultation with ABET HQ, to accept an alternative platform
Test Hardware & Apps before a Virtual Visit

• Establish and test minimum IT requirements a few weeks prior to the visit
  • Bandwidth, connectivity, and security
  • Wired (ethernet) connectivity always preferred
  • Ensure stable connectivity and good video quality for interviews
  • Provide A/V hardware, training, and support to all participants

• Orchestrate interviews to ensure smooth transitions
  • Build in breaks between interviews for flexibility
  • Assign IT personnel and program coordinators available for trouble shooting and managing schedule

• Set up backup plans and alternative contact channels with Team Chair(s) and PEVs
Virtual Facility Tours and Interviews

• Programs to provide tours of facilities and labs
  • Combination of narrated/annotated pre-recorded video and interactive videoconference walk-through could be best practice
• Interviews to be conducted by video conferencing
  • Administration, faculty, students, staff, supporting departments, advisory board, etc.
  • No recording allowed
Virtual Facility Tours Require More Preparation

- Allow PEVs to view facilities and instruments/equipment
  - Annotated photographs, correlate with the Self-Study Report
  - Link to sample video: https://vimeo.com/440364471/58abea12e4
Virtual Facility Tours Require More Preparation

- At least one month before the visit, provide narrated, pre-recorded videos
  - Cover all labs, classrooms, library, and computing services utilized by the programs
  - Short videos (~10 min videos/lab or other location)
  - Smartphone quality suffice, but need both audio and video
- Include name, location, signage, general layout, safety, courses supported, instructional equipment, etc.
  - Test early a sample video with the visit team
- Set up live walk-throughs to address questions/follow ups
Harmonized Information Technology Key to Successful Virtual Visits

- Identify all personnel involved in the review
- Provide institution IT point of contact for the team and ABET HQ IT personnel
- Zoom is the default ABET video conferencing platform
  - TC and PEVs expected to set up meetings
  - Institution needs to provide support
- If the institution requires different video conferencing platform, it is required to:
  - provide access, training, and support a few weeks prior to the visit, and
  - set up meetings for the team
The Campus Review
Objectives of the Campus Review

• Tour labs and facilities
• Interview administration, faculty, staff, students, and Advisory Board
• Provide the institution with a preliminary assessment of its strengths and shortcomings
• Assist the institution and its programs in quality improvement efforts
Review Duration

- Review Duration
  - Typically three days for on-site review
  - Virtual reviews may be extended up to one week

- Virtual reviews
  - Participants may be in multiple time zones
  - Additional time may be required in virtual mode
  - The review should NOT extend past one week.
Typical Visit

• Day 0 (Sunday) – lab & facility tours; PEVs meet program chairs; TC meet dean and program chairs; PEVs review course materials; TC & PEVs review Day 0 findings

• Day 1 (Monday) – Dean’s presentation; PEVs brief program chairs, conduct interviews with faculty and students; meet with alumni/advisory boards and support departments; TC brief dean and meets with institution officials; TC & PEVs review Day 1 findings

• Day 2 (Tuesday) – follow up meetings with faculty & staff if needed; Team finalizes findings; PEVs brief program chairs; TC briefs dean; Team draft exit statements & forms; Exit meeting
Support/Display Materials Defined by APPM I.E.5.b. (2) – (8)

• All visits have the same requirements
  • Timing, methods of submission, organization, and presentation may be different
• Determine with the TC (and PEVs) the materials needed and how they will be made available
  • Examples include: student work including major design, meeting minutes, assessment documents
• All review materials must be made available at least one month prior to the start date of a virtual visit
Review Materials

• Meeting minutes and other documentation
  • Review of PEOs
  • Continuous improvement actions
• Implementation of curriculum
  • Evidence of appropriate classification of engineering, math, and basic science topics
Review Materials: Graded Student Work

• The purpose of student work is for the PEVs to evaluate the extent to which Criteria 4 and 5 and the program criteria are satisfied.
  • **Suggested organization:** *Student work organized by outcomes (e.g. folder for each outcome) or by courses (e.g. folder for each course)*
  • Note: the APPM does NOT require access to textbooks

• **Examples of student work that demonstrate:**
  • Attainment of student outcomes
    • Work used for outcome assessment
    • Work that show attainment and *failure* to attain outcomes
  • Demonstration of required components of culminating design experience, including:
    • Use of applicable engineering standards
    • Use of multiple realistic constraints
    • Is based on the knowledge & skills acquired in earlier course work
    • Considers ABET definition of “engineering design”
Virtual Interviews Considerations

- No recordings allowed
- Ensure private, well-connected, and suitably equipped location for one-on-one interviews
- For group interviews, establish participant location, IT requirements, and A/V hardware for productive meetings
- Testing required at each interview location
- Make institutional IT staff available for set up, testing, and troubleshooting prior to and during the visit
Exit Meeting

- **Purpose**: Report team findings to institution CEO and other institution representatives
- Team chair makes introductory remarks and invites PEVs to read their exit statements
- Statements may include strengths, deficiencies, weaknesses, concerns, and observations
- Program Audit Form (PAF) that documents the team findings shared with the Dean
- Programs encouraged to start working on shortcomings immediately after the visit
Virtual Exit Meeting

• Set up and test video conference before the visit
  • Institution IT support key to effective execution
• Coordinate with TC on participants
• No recordings allowed
Planning Summary and Next Steps

• Visit teams trained for virtual visits
• Communicate early and often with the team to assure a trouble-free and productive visit
• ABET Adjunct Accreditation Directors, HQ Staff, and IT team will also be available to help
• We are all in this together. If you have questions, reach out to your TC!
Important to Know about Exit Findings

• Shortcomings reflected on the PAF
• In rare situations, a shortcoming not indicated on the PAF may be included in the draft statement
• 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
• An observation 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-Review Process

It’s not over until the commission votes
Post-Review Process

Exit statements + 7-day response

Draft Statement

Draft to Institution

30-day & optional Post -30-day responses

Draft FINAL Statement

FINAL Statement

TC edits and compiles documents into draft statement

ED1, ED2 and Adjunct edit draft statement to create draft to institution

Institution has 30-days after receipt to respond.

Responses incorporated into the draft statement by TC to create the draft final statement

ED1, ED2 & Adjunct edit draft FINAL statement.

THE COMMISSION VOTES!

Key

<table>
<thead>
<tr>
<th>TC</th>
<th>Team Chair</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED1, ED2</td>
<td>Editor, Member of EAC Executive Committee</td>
</tr>
<tr>
<td>Adjunct</td>
<td>Experienced ABET Staff Editor</td>
</tr>
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</table>
INSTITUTIONAL RESPONSES

7-day response

Correct errors of fact ONLY

For example, graduation data, enrollment data, number of faculty members

Hold ALL other material until the 30-day due process response

30-day due process response

Provide evidence to address shortcoming(s) identified in the visit

DON’T WAIT after the visit to begin drafting this response

POST 30-day due process response

At sole discretion of TC

Must submit 30-day due response

Provide evidence that was NOT available at the time of the 30-day due process response
Important in Post-Review Process

- Communicate with Team Chair throughout the process
- Upload all institutional documents and responses to AMS
- Address and resolve shortcomings quickly. Resolution of shortcomings is the desired result!

<table>
<thead>
<tr>
<th>TARGET DATES</th>
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<tbody>
<tr>
<td>Draft Statement (\textit{uploaded})</td>
<td>January</td>
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<tr>
<td>Commission Votes</td>
<td>July</td>
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<tr>
<td>Final Statement (\textit{uploaded})</td>
<td>August</td>
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</table>

Accreditation actions FINAL only when the Commission votes!

(Note: Only “Not to Accredit” actions can be appealed.)
Accreditation Evaluation and Actions

What words might I hear?  
What do they mean?
# Shortcoming Definitions

<table>
<thead>
<tr>
<th>Deficiency</th>
<th>A criterion, policy, or procedure is not satisfied. Therefore, the program is not in compliance with the criterion, policy, or procedure.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weakness</td>
<td>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.</td>
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<tr>
<td>Concern</td>
<td>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.</td>
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</table>
Other findings

<table>
<thead>
<tr>
<th>Strength</th>
<th>Exceptionally strong, effective practice or condition. A statement that describes what was observed, what makes it stand above the norm, and how it impacts the program positively.</th>
</tr>
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<tbody>
<tr>
<td>Observation</td>
<td>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 (i.e. friendly advice).</td>
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## Accreditation Actions

<table>
<thead>
<tr>
<th>TYPE OF REVIEW</th>
<th>D and W Shortcomings (duration)</th>
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<tbody>
<tr>
<td></td>
<td>No W's, No D's</td>
<td>W, No D's</td>
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<tr>
<td>GENERAL REVIEW</td>
<td></td>
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</tr>
<tr>
<td>existing programs</td>
<td>NGR (6 years)</td>
<td>IR or IV (2 years)</td>
</tr>
<tr>
<td>new programs</td>
<td>NGR (6 years)</td>
<td>IR or IV (2 years)</td>
</tr>
<tr>
<td>following SCR or SCV</td>
<td>NGR (6 years)</td>
<td>IR or IV (2 years)</td>
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<td>INTERIM REVIEW</td>
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<td></td>
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<tr>
<td>following IR or IV</td>
<td>RE or VE (2 or 4 years)</td>
<td>IR or IV (2 years)</td>
</tr>
<tr>
<td>following SCR or SCV</td>
<td>SE (2 or 4 years)</td>
<td>IR or IV (2 years)</td>
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</tbody>
</table>

1. NA—Accreditation action for programs that have not resolved a Deficiency (D) within two years following an SCR or SCV.
2. When the accreditation action is a second consecutive interim review, the remaining shortcomings will be scrutinized during the next general review visit.
3. Interim evaluations only.
4. Initiated by institutions for programs being discontinued or for which accreditation is no longer being maintained.
### Historical Statistics on Accreditation Action

#### Number of Programs (%)

**Onsite Reviews vs Virtual Reviews**

<table>
<thead>
<tr>
<th>Action</th>
<th>Onsite</th>
<th>Virtual</th>
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<tr>
<td></td>
<td>2018</td>
<td>2019</td>
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<tr>
<td>Next General Review</td>
<td>84</td>
<td>89</td>
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<td>Interim Report</td>
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<tr>
<td>Interim Visit</td>
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<td>&lt;1</td>
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<td>Not To Accredit</td>
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## EAC Shortcoming Statistics 2020-21
### Criteria 1, 2, 3, & 4

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<th>Shortcoming Level</th>
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<th>W</th>
<th>C</th>
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<td><strong>Criterion 1: Students</strong></td>
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<td><strong>Criterion 2: PEOs</strong></td>
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## EAC Shortcoming Statistics 2020-21
### Criteria 5, 6, 7 and 8

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<td><strong>Criterion 8: Institutional Support</strong></td>
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# EAC Shortcoming Statistics 2020-21
## Program Criteria, APPM and Master’s Level

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Interim Evaluations
Interim Actions

- Interim Report (IR or SCR)
  - Resolution of shortcomings can be documented with a report (e.g., faculty hiring)
  - New team chair assigned to review the interim report
  - No PEV(s) assigned
  - No campus visit

- Interim Visit (IV or SCV)
  - 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
  - New team performs a visit
Interim Evaluation

• IRs or IVs resulting from the 2022-23 cycle will take place in the 2024-25 cycle
  • Institution will submit report by July 1, 2024

• 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 visit

• Use the applicable criteria in effect at the time the shortcomings were identified, unless the institution requests that later criteria be applied
  • All programs under interim evaluation must use the criteria from the same ABET evaluation cycle
Consistency
Accreditation decisions are a process!

- Each institutional context is unique
- The EAC works very hard to ensure consistency
- The overriding goal is to achieve an end result in which programs with similar observed shortcomings accorded the same actions
Team Level Consistency

Consistency across all programs

- Consistent depth and evaluation completeness
- Consistent use of shortcoming terminology
- Consistent interim recommendation (IR vs IV)
Commission Level Consistency

Commission strives for consistency

- Consistent across all programs and across all institutions
- Consistent with those given for other programs with similar shortcomings (weaknesses, deficiencies).
- Consistency is checked at multiple levels
Levels of consistency checks

ABET HQ: Accreditation Director

Director checks higher-level consistency

Professional Societies

EAC Consistency Committee: Final check

Adjuncts check across all reports they receive

Editors 2 check across all reports they receive

Editors 1 check across all reports they receive

Team chairs check across evaluators
Common Shortcomings
Criterion 1-3

- Criterion 1: Students
  - Ad hoc advising on career or curricular issues
  - Lack of documentation on prerequisite exemptions or course substitutions

- Criterion 2: Program Educational Objectives
  - Lack of documented process for periodical PEO review
  - Incomplete process, or process not followed for PEO review
  - PEOs not consistent with the definition

- Criterion 3: Student Outcomes
  - All aspects of (1) – (7) not included or not evaluated
Criterion 4 and 5

• Criterion 4: Continuous Improvement
  • Assessment results not used for continuous program improvement
  • Data for a specific outcome associated with a class but not disaggregated between programs

• Criterion 5: Curriculum
  • Inconsistent assignment of courses into categories (math/basic science, engineering topics)
  • Insufficient hours in math/basic science or engineering topics
  • Culminating design does not consider constraints / standards
Criterion 6-8 and APPM

- **Criterion 6: Faculty**
  - Adequate number / lack of professional development

- **Criterion 7: Facilities**
  - Issues with maintenance or technical support of labs

- **Criterion 8: Institutional Support**
  - Inadequate support for labs or personnel

- **APPM**
  - Incorrect accreditation citations
  - Inconsistent references to program names
    - Transcripts, degrees, accreditation request, publications
  - Facilities and student lab work safety
    - Team does not perform safety inspections and does not certify compliance
Concluding Thoughts
Preparation for a Successful Review

- Commitment and involvement of college leadership
- Open and timely communication with visit team
- Organized, accessible supporting materials
- Timely due process responses
Nobody Wants to Think About It, But What If…

The program thinks the PEV does not understand or is overly picky

PEV chooses a disgruntled faculty member to interview

Something unusual happens during the visit

Talk to your Team Chair!
More Information

- A copy of the webinar & these slides can be accessed from: https://www.abet.org/accreditation/accreditation-criteria/
- Other reference material (www.abet.org):
  - Accreditation Policy and Procedures (APPM)
  - 2022-23 Criteria for Accrediting Engineering Program
Comments and Questions