Preparing for Interim Reviews in the 2023-24 Accreditation Cycle

Presented by the Computing Accreditation Commission to Institutional Representatives
March 27, 2023
Today’s Presenters

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Webinar will be recorded

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

Q&A

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

No tech support

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

If we are unable to address all your questions due to time constraints, please follow up with Harold Grossman at: hgrossman@abet.org
1) Interim Review Overview
2) Report Expectations and Examples
3) Review Timeline and Process

Our mutual goal is for you to have a successful and productive accreditation review!
Description of Interim Reviews

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

• Programs submit a **focused report** addressing only unresolved shortcomings from the previous review (NOT a comprehensive self-study report addressing all criteria).

• Evaluation is based on the questions:

  1. **What has been done** to resolve the **remaining shortcomings** identified in the last review?

  2. Have the remaining shortcomings **been resolved**?

• Interim Reviews **could cite new findings** if they become evident in the course of conducting an interim review.
## Interim Review Types

### Reports

**Interim and Show Cause Reports**

Institution has programs with prior accreditation actions requiring a progress report to evaluate remedial actions taken by the program

- **Interim Report (IR)** – Program has \( \geq 1 \) Weaknesses and no Deficiencies (most common)
- **Show Cause Report (SCR)** – Program has \( \geq 1 \) Deficiencies

### Visits

**Interim and Show Cause Visits**

Institution has programs with prior accreditation actions requiring an on-site review to evaluate remedial actions taken by the program

- **Interim Visit (IV)** – Program has \( \geq 1 \) Weaknesses and no Deficiencies
- **Show Cause Visit (SCV)** – Program has \( \geq 1 \) Deficiencies
# Review Criteria

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

## Accreditation Policy and Procedure Manual (APPM)

Programs must use:
- the current **(2023-24)**

## General Criteria and Applicable Program Criteria

Programs can use:
- The current relevant criteria **(2023-24)**
  - OR
  - For a first interim cycle:
    - the relevant criteria **(2021-22)**
  - For a second interim cycle:
    - the relevant criteria **(2019-20)**

Access criteria and APPM at [abet.org/accreditation/accreditation-criteria/](https://abet.org/accreditation/accreditation-criteria/)
Pause to address any questions or comments
Report

Expectations and Examples
Report Template

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

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

Use Template (C004) for Interim Reports:
https://www.abet.org/accreditation/accreditation-criteria/instructions-for-submission-of-interim-review-reports/
For each shortcoming (D, W, C)

1. **Shortcoming**
   - Begin by quoting the shortcoming verbatim from the final statement summary.
   - Then quote the expected documentation in the “Notes for Next Review” section in the final statement.
   - Concerns are part of the Interim Review. They should not be omitted.

2. **Action(s) taken**
   - Describe action(s) taken to resolve the shortcoming.
   - Focus only on the shortcoming elements remaining in the summary.
   - Note that a plan to do something does not resolve a shortcoming.

3. **Evidence**
   - Provide evidence for actions taken and progress made to resolve the shortcoming. Be thorough but concise.
   - Only provide evidence relevant to the shortcoming.
   - If the body of evidence is large, consider including evidence in an appendix.
Interim Report Submission

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

Report Submission

- Reports are uploaded into AMS (ABET Accreditation Management System).
- Submit reports as separate files for each program.
- Submit as pdf READ-ONLY.
- Submit by July 1.
In two of six transcripts reviewed, students took courses without appropriate prerequisites. There is a manual system to remove students from courses if prerequisite courses have not been successfully completed. Documentation of approval reasons for taking courses without the appropriate prerequisites was provided for only one of the two students.

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

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

Note that each program is unique and should determine its own appropriate way to resolve shortcomings. The examples provided here are only one possible way to have addressed the shortcoming.
Example shortcoming: Criterion 4 – Continuous Improvement

Issue: SO assessment is ad hoc and resulting data not evaluated to identify improvement actions

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

Evidence examples supporting resolution of the shortcoming:

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

Note that each program is unique and should determine its own appropriate way to resolve shortcomings. The examples provided here are only one possible way to have addressed the shortcoming.
Example shortcoming: Criterion 7 - Facilities

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

The program uses computer equipment that is a decade old and not compatible with modern software needs. Furthermore, some laboratory exercises clearly refer to software that is no longer readily available.

Evidence examples supporting resolution of the shortcoming:

✓ Documentation of updated computers and upgraded software
✓ Paid invoices verifying purchases of new computers and current software
✓ Photographs showing laboratories with new computers
✓ Laboratory exercises embedded in relevant courses showing effective use of new software

X A plan without implementation does not count as action to resolve a finding.

Note that each program is unique and should determine its own appropriate way to resolve shortcoming. The examples provided here are only one possible way to have addressed the shortcoming.
Pause to address any questions or comments
Review Timeline and Process
Interim Review Process and Timeline

Jan 31
Institution submits Request for Evaluation

April-May
Team Chair assigned

July 1
Institution submits Interim Report

July-Sept
Team Chair reviews the Report

Oct-Nov
Draft Statement reviewed and released to institution

Jan-May
Due Process

May 15
Post 30-day response deadline

July
CAC Commission Action

About 6 months after receipt of previous final accreditation action

- Institution approves Team Chair

- TC reviews report
- TC may contact institution for clarification
- TC writes the draft statement

- 30-day response
- Program may request post 30-day response
- TC reviews response

- Post 30-day response
- TC reviews response
- Final statement prepared

- CAC meets to vote final action
- Institution is notified when the Final Statement is available on ABET AMS

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Additional Steps for Reviews “with Visit”

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

July 1
Institution submits Interim Report

July-Sept
Team Chair/Team reviews the Interim Report

• TC reviews the last final statement(s), focusing on shortcomings that were not resolved (i.e., those that appear in the summary).
• TC evaluates the interim report contents to determine:
  "Have shortcomings identified in the last review been resolved?"
• TC may contact institutional rep with questions to clarify interim report content.
  • For example, "Please explain how the assessment data in Table 3 were obtained."
  • This is not an opportunity for the institution to rewrite the interim report – just provide requested clarifications.

Oct-Nov
Draft Statement reviewed and released to institution

Institution is notified that Draft Statement is available in ABET AMS
**Common Due Process**

**After Receiving Draft Statement**

- **Oct-Nov**
  - Draft Statement released to institution

- **Jan-Feb**
  - Due Process
  - 30-day Response
  - 30-day response should include evidence of measures taken to address any shortcomings remaining in Draft Statement.
  - If additional time is needed for collecting evidence, program’s 30-day response should indicate that a post 30-day response will be submitted. Inform the TC about this request.
  - TC reviews response and prepares Final Statement

- **Feb-May**
  - Due Process
  - Post 30-day Response
  - A post 30-day response can be submitted only if a 30-day response was submitted.
  - Post 30-day response should include evidence of any additional measures taken to address shortcomings in Draft Statement.
  - TC reviews response and prepares Final Statement

- **May 15**
  - Post 30-day response deadline

- **July**
  - CAC Commission Action
  - CAC meets to vote final action
  - Institution is notified (in August) when the Final Statement is available via ABET AMS
Institutions with Programs of Both Types (report only and with visit)

- Programs requiring interim reports follow normal interim report procedures.

- The schedule for an Interim Visit review will focus on resolving remaining shortcomings and likely be abbreviated.

Program A • IV or SCV

Program B • IR or SCR

Visit - focus on resolving remaining shortcomings, likely to be abbreviated

Report - Interim Report Procedure
All Interim Evaluations

During the review process:

- A **new shortcoming** may be cited, ...
  
  ... if a new issue becomes obvious as the TC reviews progress on shortcomings or compliance with the APPM or the criteria.

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

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

Possible actions

• **If all Weaknesses and Deficiencies are resolved**, the recommended action will be report extended (RE), visit extended (VE) or show cause extended (SE). If validated by the CAC, accreditation will extend until next general review.

• **If Weaknesses remain with no Deficiencies**, the recommended accreditation action will be for another interim review (IR or IV).

• **For a show cause reviews (SCR or SCV), if Deficiencies remain**, the recommended accreditation action will be not to accredit (NA).

How it gets to you

• Commission votes on accreditation actions at the July Summer Commission Meeting.

• Institution is notified in August that Final Statement and Accreditation action is available via AMS.

• Only “Not to Accredit” action can be appealed.
Pause to address any questions or comments
Thank you!

Questions?

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