Preparing for Interim Reviews: 2024-25 Accreditation Cycle

Presented by the
Engineering Technology Accreditation Commission
to
Institutional Representatives

March 6, 2024
WELCOME!

We will be recording today’s webinar
- 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 using the Q&A button at the bottom of your Zoom screen.

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

If we are unable to address all your question due to time constraints, please follow up with Tom Hall at thall@abet.org
Our mutual goal is to have a successful and productive accreditation review!
Today’s Presenters

Berrin Tansel  
Member-at-Large  
Executive Committee

Gary Clark  
Member-at-Large  
Executive Committee

Stephen Carr  
Commissioner  
Training Committee
## Common Terms and Acronyms

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<th>Acronym</th>
<th>Meaning</th>
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<td>Engineering Technology Accreditation Commission of ABET</td>
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<td>Editor 1 and Editor 2 assigned to each visit/review, who edit the Draft and Final Statements for consistency</td>
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<td>Adjunct</td>
<td>ABET Adjunct Accreditation Director for ETAC</td>
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Description of Interim Reviews

An Interim Review addresses shortcomings (D, W, and C) remaining from the last ETAC 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 may cite new findings if they become evident in the course of conducting an interim review.
## Interim Review Types

<table>
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<td><strong>Interim &amp; Show Cause Reports</strong></td>
<td><strong>Interim and Show Cause Visits</strong></td>
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<tr>
<td>Institution has programs with prior accreditation actions such that a progress report will be required to evaluate remedial action</td>
<td>Institution has programs with prior accreditation actions such that an on-site review will be necessary to evaluate remedial actions taken by the institution</td>
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<tr>
<td>• Interim Report (IR) – Program has one or more Weaknesses (no Deficiencies) (most common)</td>
<td>• Interim Visit (IV) – Same criteria as IR</td>
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<tr>
<td>• Show Cause Report (SCR) – Program has one or more Deficiencies</td>
<td>• Show Cause Visit (SCV) – Same criteria as SCR</td>
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Review Criteria

• All programs under interim review (IR, IV, SCR or SCV) must be reviewed under either the same criteria used in the most recent review or current criteria.

• The institution designates which criteria when RFE is filed. RFE may be modified if desired.

Accreditation Policy and Procedure Manual (APPM)

In all cases, the current Accreditation Policy and Procedure Manual (APPM) is used.

abet.org/accreditation/accreditation-criteria/

General Criteria and Program Criteria

Programs can use:

• The current criteria (2024-25)

OR:

• For a first cycle IR or SCR: programs may use the relevant applicable criteria (2022-23)

• For a second cycle IR: programs may opt to use the relevant applicable criteria (2020-21)
Resources

https://www.abet.org/accreditation/accreditation-criteria/

Accreditation Policy and Procedure Manuals

<table>
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<th>2024-2025</th>
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Engineering Technology Accreditation Commission (ETAC)

- ETAC Program Evaluator Workbook
- Facilities — Sample Thermo Fluids Lab Tour and Live Walkthrough Video
- Facilities — Annotated Photos of Equipment in a Thermo-Fluids Lab
- Guidance on Materials
- ETAC Program Self-Evaluation Tool
- 2024-2025 Questionnaire Template for Interim Reports

- 2024-2025 Institutional Representatives Webinar: Self-Study Reports shall be on March 5 from 10am – noon EST
- 2024-2025 Institutional Representatives Webinar: Interim Reviews shall be on March 6 from 10am – noon EST

Promote Your ABET Accreditation
ABET-Accredited Logos
Accreditation Criteria & Supporting Documents
Self-Study Templates
Accreditation Changes
Accreditation Fees and Invoice
Fees For Programs Outside The U.S.
Find Programs
Report Structure

and

Expectations and Examples
Report Template

Use Template (T004) for Interim Reports posted at:

https://www.abet.org/accreditation/accreditation-criteria/

- If an interim review is required by more than one Commission for the set of programs from your institution, then a separate report should be prepared for each Commission, reflecting the previous Final Statement from that Commission.

- 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.
  - Provide context to the shortcomings as the Team Chair performing the interim review will not have access to the self-study report from the previous General Review.
  - Address all points 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
Interim Report Template

https://www.abet.org/accreditation/accreditation-criteria/self-study-templates/
Report Structure

For each shortcoming (D, W, C)

1. Shortcoming
   - Begin by quoting the shortcoming verbatim from 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 remaining shortcoming elements.
   - 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 to your Institution’s ABET homepage (through ABET Accreditation Management System (AMS)) by dean or dean’s delegate (not by individual programs).
- Submit reports as separate files for each program.
- Submit as pdf READ-ONLY by July 1.

Team Chair (for Interim Report) and PEV assignment (for Interim Visit)

- Team Chairs are typically assigned in May. If your institution has both an Interim Report and Interim Visit review from the same Commission, the same Team Chair from that Commission will review the Interim Report and lead the visiting team.
- Program evaluators for the interim visit will be assigned in the usual manner and copies of the Interim Report will be provided upon direction by the Team Chair.
This criterion states: “Student progress must be monitored to foster success in attaining student outcomes, thereby enabling graduates to attain program educational objectives.”

In two of six transcripts reviewed, students took courses without appropriate prerequisites. There is a manual system removing students from courses if prerequisite courses are not in place. However, 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 are provided to show possible ways to address the shortcoming.
Example shortcoming: Criterion 4 – Continuous Improvement

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

This criterion states: “The program must regularly use appropriate, documented processes for assessing and evaluating the extent to which the student outcomes are being attained. The results of these evaluations must be systematically utilized as input for the program’s continuous improvement actions.”

The program had a detailed plan for assessing eleven student outcomes but changed to five student outcomes three 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 are provided to show possible ways to address the shortcoming.
Example Shortcoming: Criterion 5(b)- Curriculum

Issue: No evidence of application of mathematics above the level of algebra and trigonometry

This criterion states: “5(b). Baccalaureate degree programs will include the application of integral and differential calculus or other mathematics above the level of algebra and trigonometry appropriate to the student outcomes and program educational objectives.”

During the visit, there was no evidence identified of the application of mathematics above the level of algebra and trigonometry appropriate to the student outcomes of the program.

Evidence examples supporting resolution of the shortcoming:

- Sample of course presentations or course work demonstrating the applications of mathematics above the level of algebra and trigonometry appropriate to the student outcomes
- Examples of student work
- Syllabus of required courses that include the application of mathematics above the level of algebra and trigonometry (along with evidence of material coverage in the course)

Note that each program is unique and should determine its own appropriate way to resolve shortcomings. The examples are provided to show possible ways to address the shortcoming.
Example shortcoming: Criterion 7 - Facilities

Issue: Equipment and instrumentation are old and not compatible with modern industry equipment

This criterion states: “Modern tools, equipment, computing resources, and laboratories appropriate to the program must be available, accessible, and systematically maintained and upgraded to enable students to attain the student outcomes and to support program needs.”

The program uses laboratory equipment and instrumentation that is decades old and not compatible with modern industry equipment. Furthermore, some software applications are over 15 years old and no longer comparable (in interface or capabilities) with software used in industry.

Evidence examples supporting resolution of the shortcoming:

- Documentation of upgraded or updated equipment and software
- Paid invoices verifying purchases of new equipment and software
- Photographs showing the new equipment in service
- Student work samples from relevant courses showing the upgraded software and equipment in use

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 shortcomings. The examples are provided to show possible ways to address the shortcoming.
Section I.E.5.b.(1) Facilities states: “… instructional and learning environments are adequate and are safe for the intended purposes.”

The university’s laboratory safety inspections are not consistently addressed by the program (e.g., chemical labeling). In addition, appropriate safety equipment is not present, e.g., eyewash station in laboratory area. Lack of appropriate safety equipment and processes puts students and staff at risk of injury.

Evidence examples supporting resolution of the shortcoming:

- Documentation of process to ensure that lab inspection results are addressed
- Meeting minutes documenting faculty approval of the new safety process
- Photos of labeled chemicals or new equipment
- Inspection documents demonstrating that safety issues have been addressed

Note that each program is unique and should determine its own appropriate way to resolve shortcomings. The examples are provided to show possible ways to address the shortcoming.
Accreditation Policies and Procedures

★ NEW for 2024 – 2025:

• I.A.6.a. In at least one location readily accessible by the public (such as program home page or institution catalog), written media referring to accreditation must provide the following details for each specific ABET-accredited program: “accredited by the ________ Accreditation Commission of ABET, https://www.abet.org, under the commission’s General Criteria and Program Criteria for ________.” If the program was evaluated under more than one set of program criteria, each Program Criteria must be listed.

• If the program was accredited under General Criteria only, the program must be identified as “accredited by the ________ Accreditation Commission of ABET, https://www.abet.org, under the commission’s General Criteria with no applicable program criteria.” If the program was accredited by more than one commission, the accreditation details must be provided for each commission.
Accreditation Policies and Procedures

New for 2024 – 2025:

• I.A.6.b. Each ABET-accredited program must publicly state its Program Educational Objectives (PEOs) and Student Outcomes (SOs) as defined in the glossary appended to this APPM and as utilized by accreditation General Criteria 2 and 3.

Note that it is no longer required to publicly post annual student enrollment and graduation data specific to the program.
Review Process
Interim Review Process and Timeline

<table>
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<th>Jan 31</th>
<th>April-May</th>
<th>July 1</th>
<th>July-Sept</th>
<th>Oct-Nov</th>
<th>Jan-May</th>
<th>May 20</th>
<th>July</th>
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<tr>
<td>Institution submits Request for Evaluation</td>
<td>Team Chair assigned</td>
<td>Institution submits Interim Report</td>
<td>Team Chair reviews the Report</td>
<td>Draft Statement reviewed and released to institution</td>
<td>Due Process</td>
<td>Post 30-day response deadline</td>
<td>ETAC Commission Action</td>
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**About 5 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
- ETAC meets to vote final action
- Institution is notified when the Final Statement is available via ABET AMS
IR and SCR Evaluations

July-Sept
Team Chair reviews the Interim Report

- TC reviews the last final statement(s) and focuses on shortcomings **not resolved** in the last final statement(s).
- 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.

- TC prepares the Draft Statement
- Draft Statement is reviewed by Editors 1 and 2 and ETAC Adjunct.

Oct-Nov
Draft Statement reviewed and released to institution

Institution is notified that Draft Statement is available via ABET AMS
IR and SCR Evaluations

During the review process:

➢ A new shortcoming may be cited.

If a new issue becomes apparent 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.
Due Process After Receiving Draft Statement

- Dec-Jan: Due Process after receiving Draft Statement

- Jan-Feb: Due Process 30-day Response
  - 30-day response should include evidence of measures taken to address any remaining shortcomings in Draft Statement.
  - If additional time 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 revises Draft 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 measures taken to address any shortcomings in Draft Statement.
  - TC reviews response and revises Draft Statement

- May 20: Post 30-day response deadline

- July: ETAC Commission Action
  - ETAC meets to vote final action
  - Institution is notified (in August) when the Final Statement is available via ABET AMS

- TC prepares the Final Statement
What happens next?

• If Weaknesses and Deficiencies are resolved, the recommended action will be report extended (RE) or show cause extended (SCE). If validated by the ETAC, accreditation will extend until next general review.

• For an interim report, if Weaknesses remain, the recommended accreditation action will be either for another interim review (IR or IV) or potentially a SCR or SCV.

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

• 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.
Accreditation Actions

Final Statement (Aug./Sept.)

- Any Weaknesses?
  - Yes: Visit Required?
    - Yes: Interim Visit
    - No: Interim Report
  - No: Any Deficiencies?
    - Yes: New Program?
      - Yes: Previous Action SC?
        - Yes: Not to Accredit*
        - No: SC Visit/Report
      - No: Previous Action IR?
        - Yes: Report Extended
        - No: Previous Action IV?
          - Yes: Visit Extended
          - No: Previous Action SC?
            - Yes: Show Cause Extended
            - No: Next General Review
    - No: Visit Extended

*Only “Not to Accredit” can be appealed
Interim 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**).
Interim Report reviews along with “with Visit” reviews (continued)

- 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.
Interim Review with Visit Process and Timeline

Jan 31
Institution submits Request for Evaluation

April-June
Team Chair assigned PEVs assigned

July 1
Institution submits Interim Report
PEVs assigned

July-Sept
Team Chair and PEVs review the Report

Sept-Dec
Site visit
Number of days depends on complexity of evaluation

Dec-May
Due Process

May 20
Post 30-day response deadline

July
ETAC Commission Action

About 6 months after previous final accreditation action

- Institution approves Team Chair
- Institution approves PEVs
- Usually, one PEV per program

- TC and/or PEVs may contact program for clarification

- Team visits institution
- Team reports at the exit meeting.

- TC Prepares Draft Statement
- 7-Day response
- 30-day response
- Program may submit post 30-day response if 30-day response was submitted

- Post 30-day response
- Final Statement prepared

- ETAC meets to vote final action
- Institution is notified when the Final Statement is available via ABET AMS
Resources

• General and Program Specific Criteria (by Commission) and APPM
• Institutional Representative Training webinars and slides
• Program Evaluator Workbooks
  https://www.abet.org/accreditation/accreditation-criteria/

• Self-Study Questionnaire Templates and Templates from Interim Reports
  https://www.abet.org/accreditation/accreditation-criteria/self-study-templates/

• Accreditation Criteria Changes
  https://www.abet.org/accreditation/accreditation-criteria/accreditation-changes/
Thank you!

Questions?

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Gary Clark: gac@ksu.edu
Stephen Carr: s-carr@northwestern.edu

Please provide us your feedback for this presentation

https://app.meet.ps/attendee/3e459jc0

- There are 5 very short questions
- Poll should begin automatically when this meeting ends
- Link can be opened using any browser or a smart phone