

Guideline for TABEE Decision Meeting

Introduction

The Decision Meeting is an annual event where TABEE Commissioners gather to make the accreditation decisions on all programs evaluated during that cycle. The Meeting also brings together with the Team Chair leading their evaluation, in an effort to answer any questions and provide details about the upcoming visit.

Participants

- | | |
|--|-------------------|
| 1. Commission for engineering program accreditation/ engineering technology program | (Voting right) |
| 2. TABEE Coordinators for program visit | (Voting right) |
| 3. Team Chairs of the program evaluators | (Voting right) |
| 4. Intervenors/ Editors | (Voting right) |
| 5. TABEE staff | (No voting right) |
| 6. International observers | (No voting right) |

Agenda

1. Welcome and Introduction-Meeting Chair (Commission Chair)
2. Meeting Procedures Overview (Commission Chair)
 - Review of TABEE five levels of consistency checks
 - Confirmation of the conflict of interest and confidentiality clauses
 - Review Guidelines for drafting accreditation statement
 - Decision meeting documents
 - Review of Voting Procedures
 - Team chair reporting
 - Level of compliance by criterion
 - Status of continuous improvement
 - Accreditation action recommendation
 - Comments from TABEE commissioners/ coordinators/ Intervenors/ team chairs
 - Discussion and motion
 - Vote on motion (secret ballot) on each program
 - Announcement of Voting Outcomes (Meeting chair)
3. Concluding remarks and meeting adjourn (Meeting chair)

Consistency Check

A consistency check system has been established to assure that consistency is met among programs in the same discipline as well as in programs in different disciplines.

The system comprises 5 levels.

LEVEL 1 INITIAL REVIEW

TABEE Secretariat (with the assistance from the intervenors) checks for the format and the completeness of the Self Evaluation Report (SER) submitted by the programs, including some essential requirements such as 4 years programs, 120 to 150 credits in the semester system, 2 years of data collection, program outcomes assessment, etc. The intervenors then decide whether to accept the request for accreditation or not. They may give recommendations to the programs on how to improve the SER.

LEVEL 2 CONSISTENCY BETWEEN PEV TEAMS

Coordinators for program visit check for consistency between PEV teams reviewing different programs of the same university in the same days.

LEVEL 3 CHECK FOR CONSISTENCY AMONG PROGRAMS IN THE SAME DISCIPLINE AND ACROSS ALL DISCIPLINES

Intervenors/Editors: Intervenors check for consistency among programs in the same discipline while the editors check for consistency among programs in different disciplines. It should be noted that in 2021 the intervenors and the editors are the same group of experts doing both jobs (due to small number of programs to be reviewed).

LEVEL 4 CHECK FOR DECISION BETWEEN ACCREDITATION ACTIONS

EAC Decision Meeting checks for accreditation actions to assure consistency among programs and then make decisions.

LEVEL 5 CONFIRMATION THE ACCREDITATION DECISIONS

TABEE Board confirms the accreditation decisions taken by the EAC Decision Meeting

The system is summarized in the chart shown in Figure 1.

Consistency Check

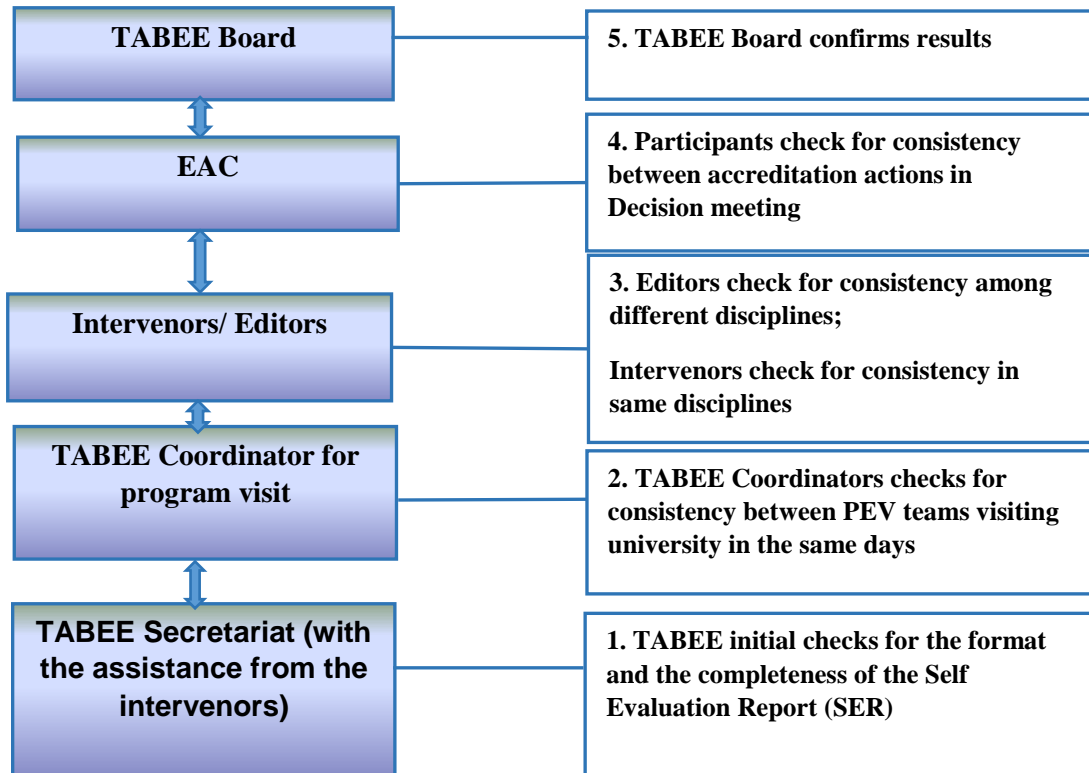


Figure 1 TABEE Consistency Check

TABEE Conflict of Interest Declaration

Please review the following conflict of interest clauses. Please voluntarily identify and be excused being involved in the accreditation process if you:

- a. Having, in the past three years, held or is currently holding a full-time or part-time position in the program;
- b. Having been awarded the highest academic degree by the program;
- c. Having been awarded an honorary degree by the university that the program belongs to;
- d. Having spouse or relative removed from work or enroll in the program;
- e. Holding a paid position, as an advisory committee member or a board member, etc. in the university that the program belongs to;
- f. Serving as a member of the program's advisory or self-study committee during the same academic year when the accreditation occurs;
- g. Having any other stake-holding affiliations with the Program that is capable of undermining accreditation objectivity.

Confidentiality Clause

All information present are to be used for the purpose of accreditation. Unless receiving official approval, none of the information here is to be made public. All written notes at this meeting are confidential; not to be released. All parties involved with the accreditation process must not discuss nor release related information to the public.

The Accreditation Actions

The accreditation actions available to the commissions are:

- 1) Full Accreditation for accreditation cycle of 6 years.
- 2) Accreditation with Requirements for a period not exceeding 3 years. Review report on program improvement is required for program monitoring.
- 3) Provisional Accreditation (For the new program curriculum which does not have program graduate.). The provisional accredited program must submit program self- evaluation report after completing 2 classes of program graduation.)
- 4) Defer Accreditation.
- 5) Decline Accreditation or Revoke Accreditation.

Detailed description of accreditation result and conditions is tabulated in accreditation result table as followings.

| Accreditation Result Table | |
|---|---|
| Accreditation Status | Full accreditation |
| Period | 6 years |
| Requirements | None |
| Findings | All accreditation criteria met, may have suggestions |
| Program Reporting Obligations | Interim report (after 3 years) on improvement and significant development |
| TABEE Follow-Up Review | TABEE subcommittee review interim report. |
| Expected Outcome Of Follow-Up Review | No change to accreditation status, unless there are the major program changes in program objectives and program outcomes. |

| Accreditation Result Table | |
|---|---|
| Accreditation Status | Accreditation with requirements |
| Period | Not more than 3 years (1 -3 years depending on time requirement for improvement to be addressed.) |
| Requirements | <ol style="list-style-type: none"> 1. Evaluator team or 1 selected evaluator reviews self-review report and supporting documents showing requirements have been met. 2. Report review may include, <ol style="list-style-type: none"> 1) Program visit and/or, 2) Follow-up review report for demonstration that requirements have been met and /or, 3) Program executive meeting for demonstration of program improvement on the requirements. |
| Findings | One or more accreditation criteria are not met, need suggest on improvement. |
| Program Reporting Obligations | Self-review report and supporting documents showing requirements have been met. |
| TABEE Follow-Up Review | Program evaluator team reviews follow-up report according to requirements and report to TABEE subcommittee for revise of accreditation result. |
| Expected Outcome Of Follow-Up Review | <ol style="list-style-type: none"> 1. Upon completing requirements, TABEE may revise accreditation status to be 6 years from previous full program evaluation. 2. If requirements not met, TABEE may consider either defer accreditation, decline accreditation or revoke accreditation. |

| Accreditation Result Table | |
|---|--|
| Accreditation Status | Provisional accreditation |
| Period | Not more than 3 years |
| Requirements | N/A |
| Findings | <ol style="list-style-type: none"> 1. New curriculum offered not less than 3 years and do not have program graduates 2. Development of the program outcomes is undertaken and it is likely that program can satisfy accreditation requirements by the time student graduates. 3. Evaluator team may have suggestions for improvement. |
| Program Reporting Obligations | N/A |
| TABEE Follow-Up Review | N/A |
| Expected Outcome Of Follow-Up Review | Program prepares self-evaluation report and apply for accreditation upon completing 2 graduation classes |

| Accreditation Result Table | |
|---|--|
| Accreditation Status | Defer accreditation |
| Period | 1 year |
| Requirements | N/A |
| Findings | <ol style="list-style-type: none"> 1. One or more accreditation criteria are not met (deficiency), requires suggest on improvement 2. Do not have assessment of program outcomes, do not have or cannot confirm program outcomes (graduate attributes) on course portfolio |
| Program Reporting Obligations | Revise self-evaluation report and supporting documents and improve on weaknesses. |
| TABEE Follow-Up Review | Same program evaluator team carries out follow up review and re- program visit. |
| Expected Outcome Of Follow-Up Review | TABEE may consider either decline accreditation or revoke accreditation or award accreditation. |

| Accreditation Result Table | |
|---|--|
| Accreditation Status | Decline accreditation or revoke accreditation |
| Period | Requires at least 2 years for improvement. Need re-application for accreditation and submission of self-evaluation report. |
| Requirements | N/A |
| Findings | <ol style="list-style-type: none"> 1. Do not have assessment of program outcomes, do not have or cannot confirm program outcomes (graduate attributes) on course portfolio. 2. Program outcomes do not match accreditation criteria. 3. Cannot improve on program deficiency after defer accreditation. |
| Program Reporting Obligations | N/A |
| TABEE Follow-Up Review | N/A |
| Expected Outcome Of Follow-Up Review | N/A |