

# AABInternational

## STEPS TO ACCREDITATION FOR EDUCATOR MEMBERS

### FORM 212

**Note: the following is an overview of the process whereby the AABI Board determines whether an institution and its candidate aviation program(s) is/are in compliance with the AABI Criteria, and thereby ensures that AABI bases its accreditation decisions on how well an institution or program meets its accreditation standards.**

1. The institution must be a member of AABI to be eligible for accreditation of its aviation degree programs.
2. The institution begins the process by submitting an application (which includes the AABI Institutional Information Form and the AABI Form 202 A, 202B, and/or 202G (respectively, for Associate degree/2-year programs; Baccalaureate degree programs; and Graduate programs), the appropriate application fee, one copy of the current school catalog (or link), one copy of the aviation program curriculum, and one copy of the course descriptions for all aviation courses utilized by the program. All documents must be submitted electronically via flash drive or Google Drive link. Email submissions are not allowed.
3. The AABI vice president of accreditation (who also serves as the Accreditation Committee chair), the assigned accreditation evaluator (AE), and the assigned Accreditation Committee reviewer(s) (ACRs) review the application documents. The vice President of Accreditation prepares a review summary document, which includes evaluation comments from each of the reviewers. This document is provided to the institution Point-of-Contact (POC) for guidance in preparing the Self Study Report (SSR—AABI Form 204), when the institution's programs are admitted to candidacy. The AABI president also adds review comments that are incorporated in the review summary document.
4. The AABI vice president of accreditation, in concert with the assigned AE and ACR(s) determines the institution's program status (i.e., admission to candidate status, deferred for additional information/evidence, or denied). If the decision at this point is to defer candidacy pending submission of additional information or evidence, the institution POC is advised of the required additional information.
5. The vice president of accreditation notifies the president and AABI office staff of the decision regarding candidate status and submits the summary review document to the AABI office.
6. The AABI president notifies the institution, by letter, advising of the status decision. If the program(s) is/are approved for candidate status, the notification also includes the current

Form 201 (Accreditation Criteria Manual) and Form 204 (Outline for a Self-Study Report). If deferred or denied, the office staff advises the institution of the reasons for deferral or denial and provides the reviewers' guidance for additional information or evidence that must be submitted to bring the application to accepted status and the program(s) to candidacy.

7. Once its programs are admitted to candidacy, the institution completes a Self-Study Report (SSR). The SSR should be completed and submitted to the AABI Office within 10 months of the date of candidacy. When an extension to the expected time interval for submission of the SSR is necessary and requested by the institution and approved by the AABI president and vice president of accreditation, the institution is assessed additional fees for the SSR submission extension request.
8. The institution submits a digital copy of the SSR on a flash drive or by Google Drive link. Email submissions are not allowed. If the institution has had a catalog change since acceptance of their application, an electronic copy of the new catalog must also be submitted.
9. An electronic copy of the SSR (and new catalog, if applicable) is sent to the vice president of accreditation, the assigned AE, and the assigned ACR(s) for review. As was done for the review of the Form 202, the reviewers submit their observations, concerns, and recommendations to the vice president of accreditation, who compiles the responses into a master review document. In this case, the master review document is provided to the Visiting Team chair, for use as she/he deems appropriate by the Visiting Team.
10. The vice president of accreditation advises the president whether the SSR is complete and accepted, or additional information/evidence is required before SSR acceptance and scheduling of the team visit. If the SSR is accepted, the vice president of accreditation recommends scheduling of the team visit and selection of the Visiting Team chair and Visiting Team members.
11. After the review and acceptance of the SSR, the AABI office notifies the institution of three possible dates for a team visit. A list of Visiting Team members is sent to the institution; the institution has the option of striking up to five members from this list, for reasons of conflict of interest. When the institution has responded with their requested date and the list of potential team members to be removed from consideration, the vice president of accreditation and the vice president of operations collaborate to select a chair for the Visiting Team.
12. When the Team chair has been selected and has agreed to serve, the AABI office, in consultation with the vice president of accreditation and the chair of the Visiting Team, selects the Visiting Team members and secures their willingness to serve on the visit.
13. The AABI office notifies the institution POC of the confirmed date of the visit, the names of the Visiting Team chair and Team members, and sends AABI Form 201 (Criteria Manual), Form 206 (Information and Procedures for the Visiting Team), Form 207 (Typical Schedule for a Visiting Team), and Form 208 (Evidence Guide). All Team members also receive a copy of the SSR. In addition, the Team chair is provided with a

copy of the application (Form 202) and, if this is a reaffirmation, the chair is also sent the previous Visiting Team Report and interim report(s), if applicable.

14. The AABI office sends the Visiting Team members a travel expense report (with explanation of travel procedures) and Form 214 (Team Member Assessment of the Performance of the Visiting Team Chairperson) to team members, and Form 215 (Chairperson's Assessment of the Performance of the Visiting Team Member) to the Team chair. The latter performance assessments are to be completed and returned to the AABI Office within 10 days of the completion of the visit. AABI pays the expenses of the Visiting Team, including an honorarium for each team member, from the deposit paid by the institution prior to the visit. The institution is invoiced for any amount exceeding the deposit or reimbursed for any unused deposit funds.
15. The AABI office sends the Visiting Team chair a Form 210 (Visiting Team Recommendation to the Accreditation Committee and Board of Trustees) to be completed and submitted for each program evaluated.
16. The Visiting Team chair coordinates with the institution POC to prepare a detailed schedule for the visit. A timetable worksheet, including Board action, is prepared by the AABI office. Copies are sent to the Team and the institution POC.
17. Approximately two weeks prior to the on-site portion of the Team Visit, two (separate) pre-visit virtual briefing sessions are conducted by the Visiting Team, with the Team chair presiding over the briefings. One of these briefings is to review the program(s)' Assessment and Continuous Improvement process, and the second is to review the program(s)' Safety Culture and Safety Program (for those programs that utilize laboratory equipment, including flight programs that operate training aircraft). The AABI staff have developed a detailed checklist for each briefing topic, which lists for the institution the persons (by title) expected to attend and participate in the briefing and the evidence/briefing material expected to be presented. The AABI president and vice president of Accreditation generally attend these briefing sessions as observers. The goal of the two briefings and the purpose for conducting them prior to the on-site portion of the team visit is to ensure the institution has (and is actively using) an Assessment Plan and Process, and (for programs utilizing laboratory equipment) the institution has (and is actively using) a verifiable Safety Plan and Process, which includes the four pillars of SMS (Safety Management System). These two areas have consistently been areas of weakness for many AABI accredited programs, and the pre-visit briefings allow both the Visiting Team and the institution to fully evaluate each area, determine what evidence is available or not available, and allow the Team chair to request additional evidence prior to the onsite portion of the team visit.
18. Normally, the Visiting Team members conduct the on-site portion of the visit as planned and coordinated with the institution. When required by health issues (e.g., COVID) or other issues that preclude a safe environment for an in-person visit, AABI may elect to have the team conduct its visit and fact-finding by virtual meetings. An AABI staff liaison or other designated AABI observer may participate when deemed necessary by the Visiting Team chair, the vice president of accreditation, and/or the president.

19. After the team visit, the vice president of accreditation and the AABI office receive the Visiting Team's first draft of the Visiting Team Report (VTR) from the Visiting Team chair, for review and appropriate input. The staff comments and suggested edits are sent to the Team chair, who will consider and generally incorporate their input into the second draft of the VTR.
20. The chair of the Visiting Team sends the second draft of the VTR to the institution POC, for review and correction of factual errors *only*. This version of the VTR contains the list of Strengths and Weaknesses identified by the Visiting Team but does not include any Suggestions or Recommendations. The POC is given seven days to complete this review and return the document with the list of errors to the Visiting Team chair.
21. The Visiting Team chair incorporates these corrections to errors in fact in the "master" VTR, which results in the final Visiting Team Report. The final version of the VTR is then sent by the Visiting Team chair to the vice president of accreditation, the AABI office, and the AABI president, along with Form(s) 210 to the AABI office only
22. The chair of the Visiting Team completes a Form 215 (Chairperson's Assessment of the Performance of the Visiting Team Members) for each team member. The other Visiting Team members must each complete a Form 214 (Team Member's Assessment of the Performance of Visiting Team Chairperson). These are returned to the AABI office to be filed in the Visiting Team members' files.
23. The AABI president sends the final Visiting Team Report to the president of the institution, for the institution's official response to all Recommendations cited by the Visiting Team. Recommendations are cited for failure to comply with a MUST statement in the AABI Criteria. Although not required, the institution may elect to also respond to the Suggestions cited by the team. Suggestions result from a Weakness observed/cited by the Visiting Team when the Weakness is not a failure to meet a MUST statement.
24. The institution submits their institutional response to the final Visiting Team Report to the AABI president. The response must be signed by the institution's president (or equivalent). The institution is allowed 30 days to complete and return their official response.
25. At least thirty days prior to the next AABI Board meeting, the AABI office sends the final Visiting Team Report and the institution's response, along with the completed Form(s) 210, to the members of the Board of Trustees and the members of the Accreditation Committee.
26. The Accreditation Committee reviews the Visiting Team Report and the institutional response, in closed session. The vice president of accreditation chairs the meeting and prepares meeting minutes for the Board of Trustees, which are presented orally to the Board, in closed session.
27. The Board discusses the report of the Accreditation Committee and its recommended actions and by formal vote makes its decision regarding the accreditation/reaffirmation of the candidate program(s).

28. If the Board action is to accredit or reaffirm accreditation of the program(s), an official Board Action Letter is sent to the institution by the AABI president within 30 days of the action.
29. The Board may also require an interim report that provides evidence of completion of specific actions required by the Board, and the due date for reporting the completion of those actions.
30. Possible actions by the Board include:
  - Grant accreditation as an initial action.
  - Grant provisional accreditation, for a period determined by the Board.
  - Not to accredit.
  - Reaffirm accreditation for existing accredited programs.
  - Extend accreditation for accredited programs that may expire.
  - Revoke accreditation for existing accredited programs.
  - Defer accreditation for additional information/actions by the institutions.
  - Suspend accreditation for a specified period of time.
  - Reinstate accreditation for programs in suspended status.

### **INTERIM REPORT**

1. The institution is informed of the interim report requirement, items to be addressed in the report, and deadline date of submittal.
2. Interim reports must be signed by the institution's Chief Executive Officer (CEO).
3. The institution submits interim report to AABI.
4. The president/AABI central office reviews report and submits to Accreditation Committee chair.
5. The Accreditation Committee reviews report.
6. The Accreditation Committee chair prepares report for the Board with recommendations.

### **APPEAL PROCESS**

1. The institution may appeal any adverse action by notifying AABI of its intent to appeal within 30 days of the date the president/AABI central office's letter was postmarked.
2. The institution submits a formal letter of appeal within 60 days of the letter of notification by AABI.
3. The president/AABI central office submits the formal letter of appeal to the chairperson of AABI's Board of Trustees.
4. The chairperson appoints three trustees to an Appeal Panel. No Board or Visiting Team member that participated in the process or denial decision may serve on such a panel.

5. The Appeal Panel meets at the next AABI meeting and within 24 hours of hearing the appeal, reports to the Board. If the AABI meeting is not within a 60-day period, the institution may request a special meeting of the Board.
6. The Board reviews and deliberates on the Appeal Panel's report and recommendations, acts on the report and makes a final decision.
7. An official Letter of Notification of the appeal action is sent to the institution by the president/AABI central office within 30 days of the action.