# NAACLS DCLS SELF-STUDY REPORT REVIEW

Name of Program(s):

City, State:

Name, Title and Credentials of Program Director:

Name Medical Director (if applicable):

1. **Sponsorship**
2. Primary Sponsoring Institution

The sponsor of an educational program must be one of the following:

1. A post-secondary academic institution accredited by an institutional accrediting agency that is recognized by the U.S. Department of Education and given the authority to provide doctoral education, with access to a teaching hospital with diagnostic diversity and healthcare expertise [ ] YES [ ] NO[ ] NA
2. An institution recognized by the national government or a regional/national accrediting agency for higher education of the country in which it is located as a post-secondary academic institution with doctoral degree-granting authority. The institution must have access to a teaching hospital with diagnostic diversity and healthcare expertise (for programs outside of the United States) [ ] YES [ ] NO[ ] NA
3. Consortium Sponsor

A consortium is a separate and distinct entity consisting of two or more members that exists for the purpose of operating an educational program.

 [ ] YES [ ] NO[ ] NA

At least one member of the consortium must meet the requirements of a sponsoring institution specified in I.A. [ ] YES [ ] NO[ ] NA

The memorandum of understanding is signed by all members. [ ] YES [ ] NO[ ] NA

This document shall contain the following elements:

1. Governance of the consortium. [ ] YES [ ] NO[ ] NA
2. Lines of authority within the consortium for the educational program [ ] YES [ ] NO[ ] NA
3. Responsibilities of each member in the delivery of the educational program [ ] YES [ ] NO[ ] NA
4. Multi‐location Sponsor
5. A specified campus location of an entity that controls a system of campuses, which is accredited by an institutional accrediting agency that is recognized by the U.S. Department of Education and given the authority to provide doctoral education. The specified campus location delivers the educational program in its entirety and awards a minimum of a certificate at the completion of the program [ ] YES [ ] NO[ ] NA
6. A specified location of an entity that controls a system of hospitals, medical centers, or laboratories accredited by an applicable recognized agency (see Standards Compliance Guide), which awards a minimum of a certificate at the completion of the program

[ ] YES [ ] NO[ ] NA

* 1. Responsibilities of the Sponsor
		1. The sponsor has primary responsibility for:
			1. supporting curriculum planning and course selection by program

faculty and staff. [ ] YES [ ] NO

* + - 1. Appointing faculty and staff [ ] YES [ ] NO
			2. Maintaining student transcripts permanently [ ] YES [ ] NO
			3. granting the degree documenting satisfactory completion of the educational program. [ ] YES [ ] NO
			4. receiving and processing applications for admission to the program.

 [ ] YES [ ] NO

* + - 1. ensuring that appropriate personal safety measures are addressed

for students and faculty. [ ] YES [ ] NO

* + - 1. Ensuring that all provisions of the Standards are met [ ] YES [ ] NO
			2. Ensuring that the students have obtained or will obtain the appropriate

degree and/or certification of completion [ ] YES [ ] NO

* + - 1. Supervision of research efforts [ ] YES [ ] NO
		1. The sponsor ensures that the activities assigned to students in the clinical setting support doctoral level studies. [ ] YES [ ] NO
		2. There is a description of the exchange of information between the sponsor and its affiliates.

 [ ] YES [ ] NO

There are documented examples of ongoing communication between the sponsor and its affiliates for the exchange of information and coordination of the program.

 [ ] YES [ ] NO

* + 1. There is a description of how the sponsor provides eligible students the opportunity to participate in applied clinical experiences. [ ] YES [ ] NO
		2. The sponsor has a formal affiliation agreement with all other entities that are involved in the education of the students, which describes:

a. The relationship

b. The roles [ ] YES [ ] NO

c. The responsibilities of the sponsor and that entity [ ] YES [ ] NO

* + 1. There is a description of how the sponsor’s mission statement supports:

a. the purpose of the institution. [ ] YES [ ] NO

b. provides for a doctoral program and the conduct of research and activites

 [ ] YES [ ] NO

**COMMENTS:**

*To add lines to the table:*

*1) Under the “Review” tab, select Protect Document > Restrict Formatting and Editing > Stop Protection*

*2) Highlight one line fully hit Ctrl-C on the keyboard, move cursor to directly below the table, right-click and select “Paste by Appending Table.”*

*3) Re-enforce protection on the document under the “Review” tab, select Protect Document > Restrict Formatting and Editing > Yes, Start Enforcing Protection > OK (do not create a password)*

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| **Clinical****Affiliate(s)**[ ]  **None** | **Completed Clinical Facility Fact Sheet** | **Site Specific Objectives and Evals, Unique Rules, & Policies. *(when applicable)*** | **Signed Current Affiliation Agreement** |
| **Y** | **N** | **Y** | **N** | **Y** | **N** |
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**COMMENTS:**

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| **Std. IB Consortium Participating Entity**[ ]  **None** | **City/State** | **Consortium Education Coordinator** |
|  |  |  |
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**COMMENTS:**

1. **Assessment and Continuous Quality Improvement**
	1. **Systematic Assessment:**

The program has described a formal plan for continually and systematically evaluating the program based on the program/college/institution mission and stated outcomes/goals. [ ] YES [ ] NO

The program has described how the results of outcome measures are reviewed and evaluated, the individuals and/or groups involved in the process, and how the information is used in program planning, curriculum development and improvement in making recommended changes.

 [ ] YES [ ] NO

The program has submitted their mission statement and outcomes/goals. [ ] YES [ ] NO

The program has submitted a schedule representing timelines for identified assessment methods.

 [ ] YES [ ] NO

The program has submitted a full documented plan for continuous and systematic assessment of the effectiveness of the program. [ ] YES [ ] NO

**COMMENTS:**

* 1. **Outcome Measures**

A description of outcome measures used by the program and their frequency of implementation was submitted. [ ] YES [ ] NO

The description included feedback from:

Students [ ] YES [ ] NO

Graduates [ ] YES [ ] NO

Advisory Groups [ ] YES [ ] NO

Academic Instructors [ ] YES [ ] NO

Clinical Instructors [ ] YES [ ] NO

The following documentation was provided:

Examples of tools used to collect data for outcome measures [ ] YES [ ] NO

Examples of review and evaluation of outcome measures [ ] YES [ ] NO

Examples of changes implemented as a result of outcome measure review and evaluation [ ] YES [ ] NO

Ongoing evaluation of the effectiveness of changes [ ] YES [ ] NO

 **COMMENTS:**

1. **Resources**
	1. **General Resources**
		1. Description of how the faculty cohort possesses the depth and diversity of expertise and experience necessary to structure, deliver and assess the effectiveness of the program provided[ ] YES [ ] NO

The description provides evidence that cohort provides required depth, diversity, and experience.

[ ] YES [ ] NO

1. Resource assessment is part of continuous program evaluation. [ ] YES [ ] NO

Documentation of program evaluation information/data used to evaluate resource adequacy as part of continuous evaluation provided [ ] YES [ ] NO

1. Resources are sufficient to allow achievement of program goals [ ] YES [ ] NO

**COMMENTS:**

* 1. **Financial Resources** are sufficient for the continued operation of the educational program. [ ] YES [ ] NO
		1. An institutionally approved budget is submitted OR, [ ] YES [ ] NO[ ] NA
		2. A written statement of continued financial support for the educational program from an executive officer of the sponsor is submitted. [ ] YES [ ] NO[ ] NA

**COMMENTS:**

 **C. Physical Resources**

1. Physical resources such as facilities, equipment and supplies, information resources, and instructional resources are sufficient to achieve the program goals. [ ] YES [ ] NO

**COMMENTS:**

 **D. Institutional Resources**

1. Institutional resources are adequate to facilitate each student’s attainment of doctoral level competencies as defined in the program’s goals. [ ] YES [ ] NO

**COMMENTS:**

1. **Students**
	1. Publications and Disclosures
		1. The following are clearly defined, published and readily available to prospective and enrolled students.
			1. Program mission statement [ ] YES [ ] NO
			2. Program goals and competencies [ ] YES [ ] NO
			3. Program accreditation status including the name, address and contact information for NAACLS [ ] YES [ ] NO
			4. Results of program outcomes identified in Standard IIB [ ] YES [ ] NO
			5. List of clinical facilities [ ] YES [ ] NO
			6. Admission criteria, both academic and non-academic, including essential functions, advance placement, etc. [ ] YES [ ] NO
			7. A list of course descriptions with credit hours (if applicable) [ ] YES [ ] NO
			8. Names and academic rank of title of program director and faculty [ ] YES [ ] NO
			9. Current tuition and fees with withdrawal and refund policy [ ] YES [ ] NO
			10. Service work policies for students [ ] YES [ ] NO
			11. Policies and procedures for:
				1. Advising guiding students through the program while maintaining confidentiality and impartiality [ ] YES [ ] NO
				2. Clinical assignment when placement cannot be immediately guaranteed [ ] YES [ ] NO
				3. Student grievance and appeals process [ ] YES [ ] NO
				4. Criteria for progression in the program, including probation, suspension, and possible dismissal [ ] YES [ ] NO
			12. Rules for acceptable personnel and academic conduct while in the program, including behavior expectations [ ] YES [ ] NO

**COMMENTS:**

* 1. Student Records
		1. Student records (admission, evaluation, counseling, advising, grades, credits, etc...) are maintained according to governmental or sponsor regulations. [ ] YES [ ] NO
		2. Student transcripts with legal name, grades, and credits, and dates of attendance are permanently maintained by the program. [ ] YES [ ] NO
	2. Health and Safety
		1. Health

a. The program provides evidence that the health and safety of students, faculty, and patients during educational activities are adequately safeguarded. [ ] YES [ ] NO

* + 1. Safety

a. There is documentation, and a description of how each student enrolled has received basic biohazard and safety training [ ] YES [ ] NO

* 1. Admission

1. Documentation provided that admission to the program requires a baccalaureate degree

 [ ] YES [ ] NO

2. Documentation provided that admission to the program requires certification as a Medical Laboratory Scientist/Medical Technologist [ ] YES [ ] NO

**COMMENTS:**

1. **Operational Policies**
	1. Student recruitment and admission is non-discriminatory in accordance with governmental regulations and those of the sponsor. [ ] YES [ ] NO
	2. Documentation and explanation provided that faculty recruitment and employment practices are non-discriminatory in accordance with the governmental regulations and those of the sponsor. [ ] YES [ ] NO
	3. Documentation of any formal student complaints and their resolution must be submitted. [ ] YES [ ] NO[ ] NA
	4. Granting of the degree/certificate is **NOT** contingent upon the students passing any type of external certification or licensure examination. [ ] YES [ ] NO
	5. Documentation for a general plan for potential temporary and permanent closures, addressing possible student transition and completion opportunities is provided. [ ] YES [ ] NO
	6. Extra curriculuar work in clinical settings outside of academic hours is noncompulsory

 [ ] YES [ ] NO

* 1. Students are not substituted for regular staff during student experience. [ ] YES [ ] NO

Trainee experiences are educational and balanced and all competencies can be achieved. [ ] YES [ ] NO

**COMMENTS:**

1. **Administration (no information needed)**
2. **Program Administration**
	1. Program Director

Faculty Fact Sheet is complete [ ] YES [ ] NO

* + 1. A letter is confirming NAACLS Program Director approval or official Board Award recognizing the individual as Program Director status provided. [ ] YES [ ] NO
		2. The Program Director
			1. Is responsible for program

Organization [ ] YES [ ] NO

Administration [ ] YES [ ] NO

Instruction [ ] YES [ ] NO

Evaluation [ ] YES [ ] NO

Continuous quality improvement [ ] YES [ ] NO

Curriculum planning and development [ ] YES [ ] NO

Directing other program faculty/staff [ ] YES [ ] NO

General effectiveness of the program [ ] YES [ ] NO

* + - 1. Has input into budget preparation process [ ] YES [ ] NO
			2. Participates in a minimum of 36 hours of documented continuing professional development every three years [ ] YES [ ] NO
			3. Is responsible for maintaining NAACLS accreditation/approval of the program

 [ ] YES [ ] NO

* + - 1. Has regular and consistent contact with students, faculty and program personnel [ ] YES [ ] NO

**COMMENTS:**

 3. **Faculty Appointments**

a. The Program Director has a faculty appointment at the sponsoring institution or at each affiliated academic institution [ ] YES [ ] NO

**COMMENTS:**

* 1. Site Program Coordinator (required for multi-location only; assigned to each participating site)

Faculty Fact Sheet is complete [ ] YES[ ] NO [ ] NA

* + 1. A letter confirming Site Program Coordinator approval is provided. [ ] YES [ ] NO
		2. **Responsibilities:** The Site Program Coordinator is responsible for:
			1. Coordinating teaching and clinical education [ ] YES[ ] NO
			2. Evaluating program effectiveness [ ] YES[ ] NO
			3. Maintaining appropriate communication with the program director [ ] YES[ ] NO

**COMMENTS:**

* 1. Faculty and Clinical Liaison

* + 1. Didactic Instructor Appointments

Faculty Fact Sheets for primary faculty/instructors are complete [ ] YES[ ] NO

Ongoing professional development is evident to fulfill the instructional responsibilities of the program faculty [ ] YES[ ] NO

a. Didactic Instructor Qualifications

* + - * 1. Faculty demonstrate adequate knowledge and proficiency in their content area [ ] YES[ ] NO
				2. Faculty demonstrate the ability to teach at the appropriate level [ ] YES[ ] NO
			1. Faculty responsibilities MUST include participation in:
				1. Teaching courses [ ] YES[ ] NO
				2. Evaluating student achievement [ ] YES[ ] NO
				3. Developing curriculum, policies and procedures [ ] YES[ ] NO
				4. Assessment of program outcomes [ ] YES[ ] NO

**COMMENTS:**

2. Clinical liaison is designated clearly on clinical affiliate fact sheet and meets qualifications required for the discipline and level of program as described in Standard VII.C.A.2. [ ] YES[ ] NO [ ] NA

a. The clinical liaison qualifications are:

i. Demonstrates the ability to oversee clinical experiences of the students ; [ ] YES[ ] NO [ ] NA

ii. Demonstrates knowledge of the advanced practice [ ] YES[ ] NO [ ] NA

b. The clinical liaison responsibilities include:

iii. Coordinating clinical instruction at the site [ ] YES[ ] NO [ ] NA

iv. Maintaining effective communication with the program director or designee as evidenced by the representative sample [ ] YES[ ] NO [ ] NA

**COMMENTS:**

* 1. Advisory Committee

The name(s) comprising the advisory committee are included. [ ] YES[ ] NO

The relationship of the advisory committee member(s) to be the program is stated. [ ] YES[ ] NO

* + 1. Responsibilities**:** The advisory committee has input into the program/curriculum that maintains its current relevancy and effectiveness. [ ] YES[ ] NO

**COMMENTS:**

1. **Curriculum Requirements**
	1. Instructional areas
		1. The students’ progress through the program, including the sequence of both didactic and applied (clinical) education learning activities, is explained [ ] YES[ ] NO

Documentation of the program schedule and course descriptions which includes the sequence of courses with associated credit hours, including which courses are designated as didactic work and/or clinical experience is provided. [ ] YES[ ] NO

Curriculum provided qualifies as advance practice [ ] YES[ ] NO

**COMMENTS:**

* + 1. Applied or translational research project, final treatise or capstone experience requried. [ ] YES[ ] NO

Components include research design, statistics, grant writing, protection of human subjects and research ethics [ ] YES[ ] NO

**COMMENTS:**

* + 1. Opportunities are assured for students to educate and provide consultation. [ ] YES [ ] NO

**COMMENTS:**

* + 1. Curriculum addresses advanced theory and clinical correlation across all major areas of instruction . [ ] YES[ ] NO

Documentation of how the curriculum addresses the following advanced theory and clinical correlation - in regard to pre-analytical, analytical and post-analytical components is provided

* principles and methodologies [ ] YES[ ] NO
* performance of assays [ ] YES[ ] NO
* problem-solving [ ] YES[ ] NO
* troubleshooting techniques [ ] YES[ ] NO
* interpretation, evaluation, and application of clinical procedures and results

 [ ] YES[ ] NO

* statistical approaches to data evaluation [ ] YES[ ] NO
* design and implement principles and practices of quality assessment, evaluation of quality assurance/quality improvement [ ] YES[ ] NO
* continuous assessment of laboratory services for all major areas practiced in the contemporary clinical laboratory [ ] YES[ ] NO

As well as documentation for all major areas practiced in the contemporary clinical laboratory

* Clinical Chemistry [ ] YES[ ] NO
* Hematology/Hemostasis [ ] YES[ ] NO
* Immunology [ ] YES[ ] NO
* Immunohematology/Transfusion medicine [ ] YES[ ] NO
* Microbiology [ ] YES[ ] NO
* Urine and Body Fluid Analysis [ ] YES[ ] NO
* Laboratory Operations [ ] YES[ ] NO
* Molecular Diagnostics [ ] YES[ ] NO

**COMMENTS:**

* + 1. Standard VIII Matrix addresses advanced knowledge in scientific areas that affect patient care . [ ] YES[ ] NO

**COMMENTS:**

* + 1. Curriculum addresses the following health care knowledge necessary to provide and coordinate patient care as impacted upon by laboratory testing
* development and application of clinical decision making [ ] YES[ ] NO
* development and application of critical paths/test algorithms [ ] YES[ ] NO
* utilization review [ ] YES[ ] NO
* patient and provider safety [ ] YES[ ] NO
* quality systems [ ] YES[ ] NO
* medical error prevention. [ ] YES[ ] NO

**COMMENTS:**

* + 1. A variety of clinical experiences are included in clinical rounds [ ] YES[ ] NO

**COMMENTS:**

* + 1. Standard VII Matrix addresses collecting, managing, and applying information from patient records in a confidential manner [ ] YES[ ] NO

**COMMENTS:**

* + 1. Sufficient interpersonal and communication skills development, to function in direct patient care with diverse communities of patients and family members and with other healthcare practitioners as an independent provider of health care is provided. [ ] YES[ ] NO

**COMMENTS:**

* + 1. Standard VIII Matrix addresses knowledge in development, interpretation, and application of health care policy and legislation [ ] YES[ ] NO

**COMMENTS:**

* + 1. Adequate development of leadership and management skills, as applied to health care services, is provided. [ ] YES[ ] NO

**COMMENTS:**

* + 1. Standard VIII Matrix addresses knowledge in health care service delivery and access through skills developed in resource management, outcomes analysis and analysis of costs relative to benefits [ ] YES[ ] NO

**COMMENTS:**

* 1. Learning Experiences

* + 1. Curriculum design reflects the mission and philosophy of both the program and institution [ ] YES[ ] NO

Curriculum design provides the basis for program planning, implementation and evaluation. [ ] YES[ ] NO

Instruction provides properly sequenced learning experiences [ ] YES[ ] NO

**COMMENTS:**

* 1. Evaluations

A description of the evaluation system(s) utilized by the program to assess the effectiveness of instruction, the frequency of use of the various evaluation tools, and how the results of the evaluation are utilized in program evaluation and revision is provided [ ] YES[ ] NO

A description of the the program’s policies and procedures of progression through the program and course evaluation. is provided [ ] YES[ ] NO

Documentation of evaluation systems provided to the student is included. [ ] YES[ ] NO

Evidence is provided of an adequately written evaluation system. [ ] YES[ ] NO

Institution or departmental policy for academic progression is provided. [ ] YES[ ] NO

* + 1. The evaluation systems serve as a reliable indicator of the effectiveness of instruction and are utilized in monitoring course content and design. [ ] YES[ ] NO

**COMMENTS:**

# NAACLS SELF-STUDY REVIEW REPORT

**Summary Page**

**Important Notice:**

The self-study reviewer does not have the authority to speak on behalf of nor bind NAACLS regarding a program's compliance with the Standards, nor can they predict accreditation actions. These responsibilities rest solely with the NAACLS Board of Directors, which has the exclusive right to determine whether or not accreditation to be granted or continued.

NOTE: This page is compiled on the basis of information supplied to the self-study reviewer by the program director and other officials. **NAACLS makes no representation as to its accuracy. The responsibility for accuracy of the information provided to the self-study reviewer rests solely with the program director and other officials.**

Name of Program:

City, State:

**Concerns**

1. In the table below list all concerns, including missing documentation

2. If there are multiple concerns within a Standard, list each concern on a separate line.

|  |  |
| --- | --- |
| **Standard #** | **Missing Documents/Concerns** |
|       |       |
|       |       |
|       |       |

**Additional comments**:

# NAACLS SELF-STUDY REVIEW REPORT

**Signature Page**

**\*\*\*Please complete and attach as the last page of the Self-Study Review\*\*\***

**Name of Program:**

**City, State:**

**First Reviewer**

Name and Title:

Institution:

Address:

City/State/Zip:

Telepone/Email

Signature: Date:

**Second Reviewer** [ ] NA

Name and Title:

Institution:

Address:

City/State/Zip:

Telephone/Emai

Signature: Date: