

Accreditation Manual:
Optometric Residency Programs

Accreditation Council on Optometric Education

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Chapter I--Introduction to the Accreditation Council on Optometric Education and its Role in Residency Accreditation

The Purpose of Accreditation

Accreditation is a system for recognizing that educational institutions and programs affiliated with those institutions have attained a level of educational effectiveness, integrity, and quality which entitles them to the confidence of the educational community and public they serve. In most countries, the establishment and maintenance of educational standards is the responsibility of a central government bureau. However, the American system of voluntary non-governmental evaluation, called accreditation, has evolved to promote both regional and national approaches to the determination of educational quality.

Although accreditation is basically a private, voluntary process, accrediting decisions are used as consideration in many formal actions -- by governmental funding agencies, state licensing boards, scholarship commissions, foundations, and potential students. Accreditation at the postsecondary and professional level performs a number of important functions, including the encouragement of efforts to increase educational effectiveness. The accrediting process requires educational institutions and programs to conduct a self-study to determine if their mission and goals are being achieved; to consider the expert recommendations and suggestions of an impartial site visit team comprised of members with appropriate expertise which evaluates the entity based on its ability to meet established standards; and to plan and execute internal actions to address the recommendations of the accrediting body. Those programs meeting the criteria are publicly designated. Since accreditation status is reviewed on a periodic basis, accredited institutions and professional programs are required to continuously monitor their program and conduct an assessment of outcomes.

Accreditation in Optometric Education

The primary purpose of accreditation in optometry is to assure the continuing quality of those educational programs that are subject to the accrediting process. The primary method of accomplishing this purpose is to determine the degree to which specific programs comply with pertinent Accreditation Council on Optometric Education (ACOE) standards. It is the responsibility of site visit teams to make these determinations and of ACOE to determine accreditation status based on the findings and recommendations of its teams.

However, there are other elements of the accrediting process that are critical to the success of the accreditation mission. It is important that the process be open, honest, respectful, and constructive. The team chair is responsible for assuring that these elements are understood by the team and appreciated by those in the program being accredited. The team chair should foster this atmosphere during the team orientation and in the way in which the site visit is conducted by:

1. **Creating a sense of mutual trust between the team and those in the program being evaluated.**

This implies that trust and respect should permeate the site visit process. The team should understand and appreciate that by virtue of requesting an accreditation visit, the program has voluntarily opened itself to scrutiny. The self-study is an intense process that indicates the program's desire to undergo self evaluation.

The team must demonstrate that it is taking its role seriously by reading and understanding fully the program's self-study and knowing of past ACOE actions concerning the program. Moreover, the team should conduct itself in a way that demonstrates a desire to listen and understand.

2. Making it clear that the team's function is to provide a valuable service to the program.

The team must evaluate programs, make judgments, and reach conclusions in a manner that is fair and without prejudice. Criticisms should be constructive. The team should behave as a body of experts in accreditation that seeks to enhance the program on the basis of its stated mission and goals and ACOE's standards.

3. Demonstrating a regard for the program's uniqueness and autonomy.

The standards are at once specific and wide ranging regarding the elements that constitute a sound educational program. However, they should not be interpreted as a vehicle to squelch innovation. The team should be made aware that the standards provide a framework for excellence into which different means for educational planning and implementation can be utilized, and the program should be viewed in this light.

The team members should also appreciate that the accreditation visit is not for the purpose of prescribing a particular program structure or specific means for enhancement. The program must be respected in terms of its autonomy, and given credit for its ability to determine the means to respond effectively to the team's recommendations and suggestions.

The Accreditation Council on Optometric Education

History and Composition of the Council

The Accreditation Council on Optometric Education, formerly known as the Council on Optometric Education, was established in 1934 by the House of Delegates of the American Optometric Association. Currently, the Council is composed of eleven members, nine of whom are members of the American Optometric Association, and two public members. With respect to members of the Council who are members of the American Optometric Association:

- * Three are optometrists of outstanding professional experience, who are not affiliated with any school or college of optometry and who are not members of any state board of optometric examiners;
- * Two are members of the Association of Regulatory Boards in Optometry at the time of their initial appointment;
- * Three are optometrists associated with optometric educational institutions accredited by the Accreditation Council on Optometric Education, with one of the three having expertise in optometric residency education;

- * One is an optometric technician and/or a person involved in optometric technician education.

The two public members of the Council are individuals who are not educators in or members of the profession of optometry.

The statement of mission, goals and objectives of the Council may be found in Appendix A.

Recognition of the Accreditation Council on Optometric Education

The Accreditation Council on Optometric Education is recognized by the United States Department of Education (USDE) as the accrediting body for professional optometric degree, optometric residency, and associate degree optometric technician programs.

In connection with its statutory duty to determine institutional eligibility for federal aid funds, the United States Department of Education conducts a program of evaluation, review and recognition of accrediting bodies to ensure that their actions are valid and reliable indicators of the quality of the educational programs offered by the accredited institutions. Educational institutions that are accredited by USDE recognized accrediting agencies are eligible for federal funds, provided certain other requirements are met.

The ACOE has also been recognized by the Council on Higher Education Accreditation (CHEA), a private, nonprofit national organization that coordinates accreditation activity in the United States. CHEA recognition signifies that the ACOE and other recognized accrediting agencies have met CHEA's standards for recognition.

The activities and policies of the Accreditation Council on Optometric Education are regularly reviewed by the USDE and CHEA to ascertain whether the ACOE conducts a valid, responsive and reliable accreditation process. These external reviews help to ensure that the Accreditation Council on Optometric Education is conducting its accreditation activities in a reliable manner that is responsive to public concerns.

Policy concerning provision of information to the Secretary of the U.S. Department of Education

The Accreditation Council on Optometric Education will submit the following information to the Secretary of the U.S. Department of Education, either as a matter of course or on request:

1. Notice of final accrediting action taken by ACOE with the respect to the programs it accredits.
2. A copy of the ACOE annual report.
3. A copy, updated annually, of the directory of accredited programs.
4. A summary of the ACOE's major accrediting activities during the previous year (an annual data summary), if so requested by the Secretary to carry out the Secretary's responsibilities in specific federal legislation and regulation.
5. The name of any program it accredits that ACOE has reason to believe is failing to meet its Title IV Higher Education Act (HEA) program responsibility or is engaged in fraud or abuse, including the reason for the concern.

6. Any proposed change in the ACOE's policies, procedures or accreditation standards that might alter the ACOE's scope of recognition by the Secretary of Education or compliance with applicable federal legislation and regulations.
7. If the Secretary requests, the ACOE will provide information that may bear upon an accredited or preaccredited institution's compliance with its Title IV, HEA program responsibilities, including the eligibility of the institution or program to participate in Title IV, HEA programs. The Secretary may ask for this information to assist the Department in resolving problems with the institution's participation in the Title IV, HEA programs.

Statement of Policies and Non-Discrimination

The Accreditation Council on Optometric Education does not practice, condone or perpetuate discrimination on the basis of age, sex, religion, race, creed, national origin, or disability. Further, the Council urges each institution to pursue an active affirmative action policy regarding the recruitment of underrepresented and disadvantaged students, faculty, staff and administrators.

Statement of Policy on Conflict of Interest and Guidelines

The Accreditation Council on Optometric Education believes that in order to carry out its responsibilities of accreditation, maintain credibility in the accreditation process, and confidence in its decisions, each member of the Council must be free to make decisions regarding accreditation without any undue pressure or perceived alliance to any institution that the Council recognizes or to any political entity or organization within the optometric profession.

Evaluation policies and procedures of the Accreditation Council on Optometric Education shall provide a system to ensure fairness and impartiality in all aspects of the evaluation process. Procedures for selection of representatives of the Council who participate in site visits to programs should reinforce this impartiality. Representatives of the Council should avoid even the appearance of impropriety or conflict of interest. Representatives of the Council include Council members, consultants, administrative staff, and other agency representatives.

No member of the Accreditation Council on Optometric Education should participate in any way in accrediting decisions in which the member has a pecuniary or personal interest or with respect to which, because of present institutional or program association, the member has divided loyalties or conflicts on the outcome of the decision.

If there is reason to believe that a person representing the Council might not objectively evaluate the program, the Council Administrative Director should be notified. If there is uncertainty as to a possible conflict of interest, the Administrative Director should be consulted immediately and the Chair of the Council is empowered to make the final determination to resolve any questions regarding real or perceived conflicts. The following are examples indicating the probability of a conflict of interest, but are not all-inclusive:

- 1) the representative is known to be a graduate, a current or former resident, a consultant, candidate for or a current or former faculty member or administrator of the institution;
- 2) the representative has a family member employed by or affiliated with the institution;
- 3) the representative has served as a consultant or in some other official capacity at the institution.

Chapter II -- Standards of Accreditation

This chapter includes a statement of standards for accreditation of optometric residency programs. These standards can be best understood with a prefatory definition of a residency.

Definitions of Optometric Residency, Sponsor and Affiliate

An optometric residency program is a post-doctoral, educational program centered on clinical training that results in the resident's attainment of advanced competencies in eye, vision, and health care.

The wording throughout these standards will refer to "sponsor" and "affiliated school or college of optometry ("affiliate")." In the case of a program sponsored by a school or college of optometry, that school or college will fill the responsibilities of both the sponsor and affiliate.

The reader of these standards is also referred to the appended glossary of terms to further aid in the understanding of the terminology used in these standards.

The Accreditation Council on Optometric Education has adopted the following standards of accreditation by which all optometric residency programs seeking accreditation are measured. The programs will be evaluated during Accreditation Council on Optometric Education site visits to determine their compliance with these standards. The standards define expectations of the Accreditation Council on Optometric Education with regard to an accredited optometric residency program and provide a framework for a program's self-study process. Depending on the stage of development of the program being evaluated, some of the components of the following standards may be considered to have greater or lesser priority.

Format of the Standards

The accreditation standards are divided into six major areas with sub-standards further defining each of these areas. Following each sub-standard is a list of items which must be submitted to the Accreditation Council on Optometric Education with the program's self-study or as an appendix to the self-study before an evaluation visit is conducted. Additional resource materials which should be available for the evaluation team's review at the time of the site visit are also included in the required documentation after each substandard.

Standard I: Mission, Goals, Objectives, Outcomes, and Program Improvement

1.1 The program must have a mission statement that describes the overall purpose(s) of the program.

Required Documentation:

- *Program's mission statement*

1.1.1 The program must be centered on clinical training that results in the resident's attainment of advanced competencies in eye, vision, and health care.

1.2 One or more goals must specify the accomplishments necessary to achieve the mission.

Required Documentation:

- *Program goals*

1.3 One or more objectives for each goal must specify how that goal is to be met.

Required Documentation:

- *Program objective(s) for each goal*

1.4 The program must annually review the fulfillment of its objectives to determine the degree to which it has attained its mission and goals.

Required Documentation:

- *Description of review process*
- *Copy of most recent annual review (except for programs seeking initial accreditation)*

1.5 The program must modify its educational program if indicated by the annual review.

Required Documentation:

- *Analysis of findings*
- *Program improvement plans*

1.6 The program must achieve at least a 70% completion rate within the seven year period before each site visit, or the ACOE will take appropriate action to review the program as determined by the ACOE.

Required Documentation:

- *Analysis of completion rate*

1.7 Within the seven year period before each site visit, 70% of those who have completed the residency must have worked in a clinical, education, research or administrative setting within one year of completion of the residency, or the ACOE will take appropriate action to review the program as determined by the ACOE.

Required Documentation:

- *Tabulation of career placement rates in related fields of residents within one year of completion.*
- *Listing of known reasons for non-placement of any residents who did not work within one year of program completion (i.e. personal choice, unable to find work in desired area, health issues, etc.)*

Standard II: Curriculum

2.1 The program must have a curriculum that enables the educational elements of the mission, goals, and objectives of the program to be fulfilled.

Required Documentation:

- *Written curriculum description*
- *Typical weekly schedule of the residents*

2.1.1 The term of the program must be equivalent to a minimum of 12 months of full-time training.

2.2. The resident's involvement in patient care must be sufficient to enable the mission, goals, and objectives of the program to be fulfilled.

Required Documentation (to be available on site):

- *A record of the resident's patient encounters that includes diagnoses, the level of case complexity, and the level of the resident's involvement (direct, precepting, or observational)*

2.2.1 Patient care provided by the resident and the faculty must be consistent with current clinical care guidelines and accepted standards of practice.

Required Documentation:

- *Description of quality management process*
- *Description of clinical guidelines and clinical practice protocols*

2.3 The resident must be supervised in the delivery of patient care services.

2.3.1 Progressively increasing responsibility based upon demonstrated clinical competence must be assigned to the resident in the delivery of patient care services.

Required Documentation:

- *Written supervision policy*

2.4 The curriculum must include scholarly activities (for example--research, teaching, journal club, poster or paper presentations, and/or the preparation of a manuscript of publishable quality).

Required Documentation:

- *Record of scholarly activities undertaken by individual resident(s)*

2.5 The curriculum must include didactic activities (for example--lectures, case conferences, continuing education courses, and/or grand rounds).

Required Documentation:

- *Record of didactic activities undertaken by individual resident(s)*

Standard III: Administration

3.1 A school or college of optometry accredited by the Accreditation Council on Optometric Education must be the program sponsor or the affiliate (by written agreement) to provide educational direction to the program.

Required Documentation:

- *Written agreement between sponsor and affiliate (if applicable)*

3.2 The organizational structures of the affiliate and the sponsor must enable professional autonomy in the delivery of optometric services in accordance with the mission, goals, and objectives of the program.

Required Documentation:

- *The affiliate's organizational chart as it relates to the residency (if applicable)*
- *The sponsor's organizational chart as it relates to the residency*

3.3 The school or college of optometry must have a director of residency programs whose qualifications and time dedicated to the program are adequate to provide educational guidance to the program.

Required Documentation:

- *Curriculum vitae of the director of residency programs*

3.4 The program must have a coordinator whose qualifications and time dedicated to the program are adequate to administer the program.

Required Documentation:

- Curriculum vitae of the program coordinator
- Weekly schedule of the program coordinator

3.4.1 The coordinator must be principally located at the primary training site.

3.4.2 The coordinator must hold a faculty appointment at the affiliated school or college of optometry.

3.5 The program must be evaluated by the resident at least semi-annually.

Required Documentation:

- *Completed program evaluations*

Standard IV: Faculty

4.1 The coordinator and other faculty of the program must have the qualifications to educate and train the resident in accordance with the mission, goals, and objectives of the program.

4.1.1 The coordinator and other faculty of the program must hold a doctoral level degree in a clinical discipline or hold the appropriate terminal degree for the subject area taught.

4.1.2 The coordinator must have completed an accredited residency program or obtained a minimum of three years of clinical experience or clinical teaching experience.

Required Documentation:

- *Abbreviated biographical sketch for each faculty member with whom the resident interacts at least weekly*

4.2 The coordinator and other faculty must have the professional autonomy and the authority to provide clinical care to train the resident in accordance with the mission, goals, and objectives of the program.

Required Documentation:

- *Clinical care authorization (e.g., clinical privileges document)*

4.3 The coordinator and other faculty must have sufficient time dedicated to the program to educate and train the resident.

Required Documentation:

- *Each faculty's weekly schedule as is applicable to the residency program.*

4.4 The resident must evaluate at least semi-annually the coordinator and each faculty member.

Required Documentation:

- *Completed faculty evaluation forms for each faculty member with whom the resident interacts at least weekly.*

Standard V: Residents

5.1 The program must have a written selection procedure including admission eligibility criteria which must be provided to applicants when requested.

5.1.1 Admissions eligibility criteria must include the requirement that prior to matriculation applicants must have attained the Doctor of Optometry (O.D.) degree from a school or college of optometry accredited by the Accreditation Council on Optometric Education.

5.1.2 Non-discrimination policies must be followed in selecting residents.

5.1.3 The program's publications, advertising and student recruitment materials and activities must present an accurate representation of the program.

Required Documentation:

- *Selection procedure*
- *Admissions eligibility criteria*
- *Application*
- *Recruitment advertisements/brochure*

5.2 Applicants to the program must be provided the program's policies regarding the duties and obligations of the resident and/or of the program to include:

5.2.1 Duration of the resident's training program,

5.2.2 Expected weekly hours of resident's attendance including on-call duties,

5.2.3 Resident's compensation, which cannot be contingent upon productivity of the resident,

5.2.4 Resident's health, professional and leave benefits,

5.2.5 Resident's professional liability protection for both internal and external clinical settings,

5.2.6 Requirements for residency completion and awarding of certificate.

Required Documentation:

- *Documents and/or policies addressing the above items provided to applicants*

5.3 The resident's orientation to the program must include information on:

5.3.1 Clinical practice protocols,

5.3.2 Infection control,

5.3.3 Facility safety policies,

5.3.4 Counseling, remediation, and dismissal of the resident,

5.3.5 Receiving, adjudicating, and resolving resident complaints,

5.3.6 Due process provided to the resident on adverse decisions.

5.3.7 The program's academic calendar, including the program's start date, end date and significant deadlines for program requirements,

5.3.8 Criteria used to assess resident performance.

Required Documentation:

- *Orientation plan*
- *Documents and/or policies addressing the above items provided to resident*

Required Documentation (to be available on site):

- *Written policy, and, if applicable, records of receiving,*

adjudicating, and resolving resident complaints

5.4 The resident must receive at least two interim and one final written performance evaluations.

Required Documentation:

- *Completed forms used to evaluate the resident*

Standard VI: Resources and Facilities

6.1 The physical facilities, equipment, and support from ancillary staff must enable the mission, goals, and objectives of the program to be fulfilled.

Required Documentation:

- *Description of facilities, equipment, and ancillary staff*

6.2 The resident must have access to current educational and informational resources.

Required Documentation:

- *Description of current educational and informational resources*

Revision of Optometric Residency Standards

The Accreditation Council on Optometric Education is committed to conducting a valid and reliable accrediting process. Review and revision of the optometric residency program standards is a regular part of the Council's activities. Programs or individuals who wish to suggest changes of the standards are invited to submit their suggestions in writing. The procedure for revision of standards is as follows:

1. The Council will review the standards at least every five years.
2. As part of the standard review process, the Council will circulate contemplated changes to accredited programs, schools and colleges of optometry, state boards of optometry, the U.S. Department of Education, and other interested parties. The comment period will be a minimum of 30 days.
3. Following review of comments on the standards, the Council may elect to recirculate a revised draft for additional comments. The comment period will be a minimum of 30 days.
4. When the comment solicitation and review process is complete, the Council will take action to adopt the standards.

The Council may review, revise, delete or add individual standards at any time it deems appropriate in accordance with the following process. If, through its system of review, the Council determines that it needs to change any individual standard, or the standards as a whole, the ACOE shall initiate the revision process within 12 months of determining that a change is necessary. The ACOE will complete the revision process in a reasonable period of time. Before finalizing any changes to the standards, the ACOE will provide notice to its constituency and other interested parties and provide a response time of a minimum of 30 days to comment on the proposed changes. The ACOE will consider comments received from interested parties in the revision process.

Chapter III -- Self-Study Process

The self-study is a key component in the ACOE accreditation process as it is in most accrediting processes for institutions of higher learning in the United States.

The primary purpose of the self-study is to involve the entire community of the residency program (sponsor and affiliate) in "looking at itself" for the purpose of self improvement and long term planning. It engages members of the community in a critical review of the residency's mission, goals and programs; in considering the impact of societal and economic changes affecting the residency; and in identifying the program's strengths and weaknesses in the achievement of intended outcomes.

Moreover, the self-study report orients the evaluation team to the program. The self-study describes the entity that is being evaluated as to its resources, the constituencies whom it serves and who serve it, its mission, goals, objectives and the degree to which they are being met, its physical plant, and other factors. Essentially, a well done self-study enables the evaluation team member to obtain more than a superficial sense of the essence of the program.

Guidelines for the Self-Study Process

The following recommendations will help foster the constructive attitudes and participation essential for a productive self-study.

1. The program supervisor and the director of residencies at the school or college of optometry should work together to plan and guide the self-study to completion. It is essential to get an early start. (The self-study will be due to the ACOE office two months before the site visit.)
2. Program administrators, administrators from the program sponsor, faculty members, residents and administrators of the affiliated educational institution should be involved in conducting a self-study.
3. The quality of the self-study process will be improved by focusing on the inter-relationships of various activities of the program to its stated goals and objectives.
4. The self-study must include a critical appraisal of the program's weaknesses and problems, as well as its strengths.
5. The self-study should include a clear enunciation of plans for remedying the program's deficiencies and weaknesses.

Focus on Outcomes

As noted above, the essential purpose of the self-study is to assess the results -- the outcomes -- of the program's efforts in pursuit of its mission and goals. Whereas mission and goals statements indicate the desired outcomes, statements of objectives should serve as specific means to accomplish these outcomes as well as criteria by which to determine the degree to which the mission has been accomplished.

The following definitions may be useful:

1. **Mission** -- The mission statement should express the overall purposes, intent and uniqueness of the program or institution. It is a statement of the fundamental reasons for a residency's existence.
2. **Goals** -- Goals specify the end results necessary to achieve the mission; they should elaborate each of the major components of the mission. They provide clarification and specificity for components of the mission statement.

For example, if one element of the mission is to "train the resident to function in a leadership role within a large managed care medical center" a goal derived from this could be "to provide the resident with an understanding of the inner workings of a managed care system."

3. **Objectives** -- As the goals were derived from components of the mission, specific objectives should flow from the goals. Objectives are the specifications on how the particular goal is to be reached. They are statements which define outcomes attributable to the mission and goals of a residency. To continue with the example, some objectives could be:
 - a. The resident will attend and report on at least three presentations covering the basics of managed care.
 - b. The resident will read and present his/her interpretation to the staff of at least 3 articles in the library folder entitled "Managed Care."
 - c. The resident will attend at least 5 of the Medical Center's long range planning committee meetings.
 - d. The resident will present at least two hours of lecture on the role of optometry in a managed care setting to medical and optometric interns.

These objectives at once inform the resident of his/her responsibilities in terms of the stated goal, and provide a method for the residency supervisor to determine if these responsibilities have been met.

For an example of a statement of mission, goals and objectives refer to appendix A which contains the ACOE's statement of mission, goals and objectives.

The Self-Study Process and Document Structure

Programs should initiate the self-study process at least 12 months before the scheduled site visit. Prior to this, the program should adopt a timetable for the self-study that starts with the appointment of the self-study committee, includes each step in the process, and ends with the date the self-study is to be sent to the Accreditation Council on Optometric Education (at least two months prior to the site visit).

The Accreditation Council on Optometric Education standards of accreditation for optometric residency programs state the conditions, resources, and other factors that the Council requires in the residency program. As such, they should be addressed point by point.

While the Council does not prescribe the format of the self-study, experience has shown a report presented on a standard-by-standard basis can demonstrate compliance with standards as well as give the program a framework in which to state areas of concern and areas of strength. Further, this format provides a concise basis for discussion between the program representatives and the site visit team. It should be noted that each standard and sub-standard must be addressed by dialogue. Tables, charts, etc. are not acceptable as sole submission for any standard or sub-standard.

The program must submit the required documentation listed after each of the standards in Chapter 2 within or as appendices to its self-study.

There are published materials on the subject of self-study. For a current bibliography, contact the administrative director of the Accreditation Council on Optometric Education.

Chapter IV -- Application and Evaluation Procedures

Initial Application

Inquiries about accreditation of a proposed optometric residency program should be directed to the Administrative Director or Manager, Accreditation Council on Optometric Education, American Optometric Association, 243 North Lindbergh Blvd., St. Louis, MO 63141. In response to an inquiry, the Accreditation Manual: Optometric Residency Programs will be sent to the inquiring institution. In addition, the Accreditation Council on Optometric Education is available to interested institutions for consultation and advice regarding the accreditation procedures and standards of the Accreditation Council on Optometric Education.

In order for an optometric residency program to be eligible for review for initial accreditation by the Accreditation Council on Optometric Education, a program must:

1. Be sponsored by or affiliated with an accredited school or college of optometry.
2. Have appointed a program supervisor;
3. Have completed and submitted a self-study report according to the requirements outlined in Chapter III; and
4. Submit a formal letter of application from the chief executive officer of the affiliated school or college of optometry.

The self-study report will be reviewed by the chair of the Accreditation Council on Optometric Education to determine whether basic planning and development have progressed to a degree that would warrant an on-site visit as required prior to the consideration of an accreditation status. If the self-study report is deemed unacceptable or indicates deficiencies or weaknesses in the program to make it clearly unaccreditable, the Council may postpone an on-site visit until the problems have been corrected. After a site visit team conducts a formal on-site visit, the team's evaluation report is submitted to the Council for its review. If the program is found to meet the Council's standards, the Council will grant an appropriate preaccreditation or accreditation status. (Further details on this evaluation process may be found in this chapter.)

Evaluation of "On the Campus" Residencies

When more than one residency is on-site at a school or college of optometry, the school or college can structure the residencies as individual programs, or where appropriate, (see below), under an "umbrella" arrangement. In the first instance, each individual program will be evaluated by ACOE as an independent entity. The dean or president may request that the individual programs be visited as a group, with some economy of effort resulting from providing one set of materials that applies to all programs.

An "umbrella" residency is an entity which the school or college identifies as a single residency program, with more than one area of emphasis. Each of these emphasis areas must provide for at least one residency position. An umbrella residency program must meet all of the following conditions:

- a) Education and training for all residents must occur on the school's or college's campus for a majority of the time.

- b) There will be a core didactic and clinical curriculum common to all emphasis areas.
- c) Additionally, there will be an identifiable portion of the didactic and clinical curriculum tailored to each area of emphasis.
- d) A resident's curriculum will have no more than 2 emphasis areas.
- e) The self-study will have individualized sections as appropriate for each emphasis area.
- f) If, at any time within the residency accreditation cycle, an emphasis area does not have a resident, the program shall provide evidence in its annual report and in its self-study related to the following:
 - 1) Names, addresses, and telephone numbers of the two immediate previous residents in the vacant emphasis area;
 - 2) Patient care logs of the residents;
 - 3) Quarterly evaluations of the residents;
 - 4) Complete program schedules of these residents; and
 - 5) Evaluation of the program completed by these residents.

If a school or college desires to alter the composition of existing areas of emphasis or plans to add one or more areas of emphasis, a letter addressing the proposed change or addition must be submitted to the ACOE for its consideration. The terms of accreditation of an umbrella residency will be determined by the least favorable status of any of its areas of emphasis/components, as determined by ACOE. All ACOE's policies and procedures relating to non-umbrella programs will apply to umbrella programs.

Renewal of Accreditation

Programs which hold an accreditation status will be re-evaluated on a regular basis. Normally, the month and year of the next evaluation is scheduled by the Council at the time it grants accreditation. The Accreditation Council on Optometric Education may elect to request a new self-study and re-evaluate a program at any time with due notice to assess the effects of substantive changes in the program or to monitor developing situations. Programs will routinely be revisited at intervals no longer than seven years.

Evaluation visits will not be conducted during vacations and breaks since resident and faculty input are valuable components of the accreditation process.

The Accreditation Council on Optometric Education will not normally grant delays in the submission of the self-study and discourages an accredited program from requesting delays in its regularly scheduled accreditation visit. In extenuating circumstances, the program must submit a written request in a reasonable amount of time prior to the scheduled visit. This request must include documentation of the following:

1. The reason for the requested delay;
2. A report of the program's progress to date on the recommendations of the last evaluation report of the Council;
3. Other supporting documentation.

Evaluation Visit Procedures

Third Party Comments

The Accreditation Council on Optometric Education periodically evaluates accredited programs for compliance with ACOE standards. This process includes the consideration of third-party comments. The Council will publish the dates of upcoming site visits in its semi-annual newsletter, in its annual report and in special mailings as deemed appropriate by the Council including, but not limited to, a release for publication in the *Chronicle of Higher Education*.

Third party comments must address substantive matters relating to the quality of the program and the ACOE standards and should be addressed to the administrative director of the Council at ACOE, 243 N. Lindbergh Blvd., St. Louis, MO 63141. Comments must be received 30 days prior to the program's scheduled site visit date. (In cases where the exact date is not yet determined when the listing is published, the month and year of the visit will be listed, and the comments must be received by not later than the first day of the month preceding the site visit. All third party comments must be signed.)

Comments will be forwarded to the evaluation team and to the appropriate program director for response during the evaluation visit process.

Selection, Training, and Composition of the Evaluation Team

An on-site evaluation team which visits an optometric residency program normally comprises two members. Each evaluation team shall include one educator and one practitioner. Evaluation teams are appointed by the chair of the Accreditation Council on Optometric Education. The staff of the Council will consult with the residency director and/or supervisor to obtain advice concerning perceived needs. When the members of the evaluation team are selected, the names of the proposed members of the team will be provided to the residency director and/or supervisor to determine whether there are any conflicts of interest perceived with any of the proposed members. If the program finds a real or potential conflict of interest with respect to a proposed team member, or any other problem which might interfere with the objectivity of the proposed team member, the Council chair will take action when deemed appropriate.

The chair of the evaluation team has undergone a formal training program on the Council's process and standards and has previously served as a member of an evaluation team. The team chair may be either a Council member or a trained consultant. Nominations for the pool of trained consultants who are eligible to serve as chairs of residency evaluation teams are solicited from a broad representation of the profession, including, but not limited to, Council members, deans and presidents of the schools and colleges of optometry, educators, state boards, and professional organizations/societies. Following receipt of nominations for the consultant pool, the Council reviews the credentials of the nominated individuals, and send invitations to those it deems appropriate based on their previous experience, education and training, and other appropriate criteria.

The Council also maintains a pool of consultants who have completed the ACOE training process. These individuals have identified credentials and accompany the team chair on a visit.

The Evaluation Team's Schedule

The length of an evaluation visit may vary depending on the complexity of the program, but on-site visits to optometric residency programs are usually scheduled for one day. The chair of the evaluation team will consult with the residency director or supervisor to develop the visit schedule. Although there is no rigid schedule for site visits, the Council expects each of the following elements to be included at some point in the visit.

1. An executive session of the team to be held prior to the initiation of the visit. The agenda, the schedule of the visitation, review of protocol for evaluation team members, identification of areas needing clarification with the representatives of the residency program, and discussion of the materials provided as they relate to the standards of the Accreditation Council on Optometric Education are some of the topics discussed at this meeting.
2. An entrance interview with the residency supervisor and others whom he or she may designate on the first day of the visit to discuss the following topics: the residency supervisor's perceptions of the strengths, weaknesses and areas of concern of the program; the team's perceptions of areas which will require exploration and clarification during the site visit; discussion of the relationship of the optometric residency program to the affiliated educational institution; and other subjects selected by the residency supervisor and the evaluation team chair. The entrance interview will orient the team to particular areas of concern and the residency supervisor to the methods and procedures of the team.
3. A tour of the physical plant of the optometric residency program including clinical sites, offices, library and external clinical sites when feasible.
4. Conferences with the residency supervisor and/or residency director from the affiliated school or college to discuss the program's compliance with each of the nine standards.
5. A conference with the resident(s) (no faculty or administrators present) will be scheduled to provide the team with input on resident perceptions regarding the effectiveness of the program.
6. Conferences with faculty members.
7. Meetings with appropriate administrators from the sponsor and/or affiliate at the discretion of the chair.
8. A team meeting will be held near the end of the visit to allow the team to formulate its impressions and prepare a presentation of its findings for the exit interview.
9. An exit interview will be held as the final session of the on-site visit which will provide the program supervisor and others they may designate with insight into the findings of the team.

Protocol for On-Site Visitations

Protocol for the program

Program supervisors are expected to cooperate with the team during the evaluation visit by providing them with information and additional background materials when requested.

Program supervisors are requested to provide the Council administrative director with suggestions for lodging of the team as well as for necessary ground transportation. Programs should not schedule social activities for the team that interfere with the function of evaluation.

The program should provide the team with a conference room with reasonable privacy for team meetings and individual assignments. The program is asked to have the additional documents requested in Chapter 2 available for the team's inspection in the conference room.

During the course of the visit, the program will be expected to provide the team with access to all facilities.

Protocol for Evaluation Team Members

The Accreditation Council on Optometric Education has developed the following guidelines for evaluation team members.

1. The primary function of an evaluation team is program analysis. Social engagements may interfere with this function. Individual team members should not accept social invitations from host administrators or faculty.
2. Team members will be mailed the program's self-study report, previous evaluation report, and previous annual reports of the program, not less than 45 days prior to the visit. Team members must thoroughly review these materials prior to the visit, and should request any additional needed materials as soon as the need is identified.
3. Team members must participate throughout the duration of the visit. Late arrival or early departure is a significant breach of etiquette that adversely affects the rapport and competence of the team and reduces its efficiency and effectiveness.
4. Although team members may discuss general findings and recommendations with program administrators during the exit interview, team members must not express personal or team opinions regarding the accreditation status of the program under evaluation. Decisions relative to the accreditation status of educational programs are made exclusively by the Accreditation Council on Optometric Education at regularly scheduled meetings, and only after thorough discussion and in-depth review of the evaluation reports.
5. Team members are expected to participate actively in conference discussions during the site visit, but they are cautioned to refrain from expressing their own personal opinions regarding teaching methodology or practice technique. Comparisons to the team member's individual program or practice setting should be avoided.

6. The consultant is expected to prepare a report on the areas of the program assigned by the evaluation team chair **within two weeks** of the site visit.
7. A draft of the evaluation report will be sent to the team when it is compiled. Prompt response by team members to the draft of the evaluation report is essential to the timely preparation of the final report for the Council.
8. When evaluation reports are presented to the Council for review and action during regularly scheduled meetings, evaluation team chairs and consultants may be asked to be available to participate via telephone conference in the discussion of the programs being evaluated, and, if necessary, to explain and elaborate on the reports.
9. Team members must treat all information and data obtained from whatever source regarding the program under evaluation as confidential. In addition, the disclosure of personal or team opinions with respect to the accreditation status of the program being evaluated is unauthorized at any time before, during or after the on-site visitation.
10. Three months following the Council's notification of approval of the formal report, evaluation team members are expected to destroy their written materials relating to the visit.

Compilation of Evaluation Team Reports

The evaluation team report must serve not only the Council as an accurate basis for accreditation decisions, but also must provide officials and administrators of the clinical and educational institutions as an impartial guide to the qualitative aspects of their residency programs. Evaluation team reports, therefore, should reflect the Council's sensitivity to the multi-faceted problems which confront institutions, and should also demonstrate the professionalism of the Council in its efforts to provide constructive analysis and recommendations for the improvement of the optometric residency program. Following the evaluation visit, each consultant is expected to prepare a report on the areas assigned within two weeks of the site visit.

The evaluation team chair will assemble all sections of the report and edit the document to ensure consistency and accuracy. The ACOE staff will assist the evaluation team chair in preparing the report and in distributing it to the team members for comment.

Although there is no rigid format of an evaluation report, each of the major standards listed in Chapter 2 of this manual must be addressed. The comments should indicate not only areas which are not in compliance, but also areas which are weak or areas of strength. Following discussion of the standards, the team should prepare a draft summary which highlights the strengths and weaknesses of the program, and draft recommendations and suggestions for program enhancement. The final summary, which is called the Council Summary, will be finalized by the Council when the report is considered.

Review of Factual Accuracy

When accepted by the evaluation team, the draft report will be transmitted by the evaluation team chair to the residency supervisor with a copy to the residency director of the affiliated school or college of optometry for review of the report for factual accuracy. The draft report submitted to the program will not include the draft summary, or any team recommendations,

suggestions or statements regarding accreditation status. In reviewing the draft report, the program should concentrate on issues of fact. The program may challenge the factual accuracy of any aspects of the evaluation team report by submitting additional written information to the evaluation team chair through the administrative director of the Council. The evaluation team chair may modify the draft based on factual information or comments submitted by the institution.

The draft report reflects conditions at the time of the site visit. Consequently, changes the institution has made since that time will not be identified in the site visit report. They may be reported to the Council in the program's next annual report or, if appropriate, in a petition for reconsideration of accreditation as described in Chapter 5.

Financing the Accreditation Process

The American Optometric Association bears most of the expense for the activities of the Accreditation Council on Optometric Education. However, the cost of any on-site visitation to evaluate an optometric residency program by the Accreditation Council on Optometric Education is borne by the institution visited. Following the visit, the institution will be billed for the expenses of evaluators, consultants and Council staff. All accredited programs and programs applying for initial accreditation or pre-accreditation will also be billed an annual fee toward the cost of administration. Optometric residency programs sponsored by the Department of Veterans Affairs will pay an increased annual accreditation fee in lieu of the cost of the actual site visit expenses. Details about the current annual fees are available from the administrative director of the Council.

Chapter V -- Accreditation Procedures

The Council views accreditation as an ongoing process which is subject to change based on changes in the program and sponsoring or affiliated institution. The following procedures are designed to assist the Council in performing its responsibilities to help ensure the quality and continued improvement of optometric education.

Council Review of Evaluation Reports and Description of the Liaison Program

For each residency evaluation visit where a member of the Council is not on the team, a member of the Council is designated by the Council chair as a "liaison" to the team. The liaison Council member serves as an advisor to the team chair and communicates the team's findings and presents the team's evaluation report to the Council. The liaison Council member is expected to read the self-study and consult with the team chair prior to the site visit.

The liaison Council member serves as the initial reviewer of the team draft report. After review and approval by the liaison Council member, the draft report is transmitted to the program by the ACOE administrative director for review of factual accuracy.

The liaison Council member is expected to be fully prepared for the presentation of the team report to the Council. This includes detailed review of the self-study, team report, and all pertinent correspondence, such as the response to factual accuracy. These materials are forwarded to the liaison Council member by the ACOE administrative director.

Following receipt of the response to factual accuracy from the program, the team chair makes the appropriate changes to the report. In consultation with the liaison Council member, the team chair also drafts the suggestions and recommendations which accompany the report to the Council. Lastly, the team chair consults with the liaison Council member to assist the Council member with determining the level of accreditation the liaison Council member recommends to the Council. In the event there is a difference of opinion, the views of both the team chair and liaison Council member are submitted in writing to the Council for determination.

The report with the suggestions and recommendations are then submitted to the Council for consideration at its next regularly scheduled meeting. All evaluation team reports are reviewed by the Council in executive session. Executive sessions are restricted to Council members, staff and consultants who may be invited by the Council chair. Non-Council member team chairs are not expected to attend Council meetings unless specifically arranged by the Council chair.

The liaison Council member is expected to have open communication with the team chair in order to facilitate discussion of the report. If the liaison Council member has any questions regarding the report these should be discussed with the team chair and clarified prior to the ACOE meeting at which the report is to be presented. In addition, the liaison Council member should inform the team chair of the dates of the ACOE meeting at which the report will be considered and obtain a telephone number where the team chair can be reached during the time frame of the meeting. Telephone contact during the meeting may be needed to clarify ambiguities or to answer questions which arise during Council's discussion of the report.

At the Council meeting, the liaison Council member presents the report to the Council for its action. When the Council reviews an evaluation report to determine the accreditation of a program, the Council follows the steps listed below:

- ◆ Acceptance of the report.
- ◆ Finalization and adoption of Council Summary, recommendations, which are items recommended for corrective action since they have the potential to jeopardize the program's accreditation status if no corrective action is taken, and suggestions, which are suggested as improvements that would substantially enhance the potential for excellence in the program.
- ◆ Determination of the level of compliance for each of the standards—met, met in part or not met. For standards, which are not met or met in part, the Council specifies the reason the standard is not considered fully met. For all areas where a standard is not fully met, there is a corresponding recommendation that must be met to address the concern and to come into compliance with the standard.

After making the above determinations, the Council determines an appropriate accreditation status as outlined below. Members of the Council are expected to withdraw from consideration of the accreditation decision of a program when the member or the Council feels there may be a conflict of interest. (See Chapter 1 for a statement on conflict of interest.)

Accreditation and Pre-Accreditation Decisions

Accreditation decisions are based on the Council's judgment of the total educational effectiveness of the program. This judgment in turn is based on the degree to which the residency program meets the standards of the Accreditation Council on Optometric Education.

Pre-Accreditation Status

Candidacy Pending Designation -- The Candidacy Pending designation is a pre-accreditation classification and is awarded to optometric residency programs at Veterans Affairs facilities that are in their planning stages, prior to receipt of Veterans Affairs funds. The award of the designation is based on review of the submitted self-study report, and signifies that the educational setting, governing body and organizational pattern appear appropriate for the development of a residency program that will meet the accreditation standards of the Council. The Council will schedule an on-site evaluation of the program as soon as a resident is placed.

Accreditation Status

The Accreditation Council on Optometric Education may decide to grant one of the two following accreditation statuses to a residency program following adoption of the evaluation team report and recommendations. Accreditation status may be lowered or revoked if the Council determines that the program is not making sufficient progress on recommendations from the Council.

Accredited -- A classification granted to an educational program indicating that the program generally meets the standards for accreditation. This classification indicates that the program has no deficiencies or weaknesses that compromise the educational effectiveness of the total program. However, recommendations relating to marginal compliance with certain standards, and suggestions relating to program enhancement may be included in evaluation reports.

Accredited with Conditions -- A classification granted to an educational program with major deficiencies or weaknesses with reference to the standards of accreditation that compromise the educational effectiveness of the program. This classification indicates that the accreditation of the program is in jeopardy. Programs with this classification will be required to submit progress reports and shall undergo a full on-site evaluation visit within 18 months.

The Council accredits optometric residency programs for periods of time no longer than seven years. The accreditation is measured from the date of the most recent evaluation visit. Programs should avoid using phrases such as "accreditation has been continued for a seven year period." ACOE accreditation is not necessarily for a specific period since it is subject to continual review. Depending on the outcomes of annual reports, progress reports, interim visits, substantive program changes and other significant events affecting a program, the Council may decide to schedule a full on-site evaluation visit before the original seven year accreditation period is complete. Thus, while Council policies dictate that residency programs be evaluated at least once every seven years, programs may be evaluated more frequently.

In the event the Council determines that a program is not in compliance with any of the Council's standards, the Council shall require that such program take prompt action to correct such non-compliance with the relevant Council standard(s) within the applicable frame as follows: 12 months from the date of the Council's decision if the program is less than one year in length; 18 months from the date of the Council's decision if the program is at least one year but less than two years in length; or two years from the date of the Council's decision if the program is at least two years in length. In the event the program does not bring itself into compliance with the applicable Council standard(s), the Council shall take prompt adverse action against the program. The Council may extend the applicable time period for good cause.

When the Council signifies its desire to visit and evaluate an accredited program, a failure by that program to extend an invitation for a site visit may be interpreted as a lack of interest in further accreditation by the Council.

Denial of Accreditation -- Accreditation will be withdrawn or withheld from programs which the Council judges to be substantially not in compliance with the standards of the Accreditation Council on Optometric Education. Programs which are denied accreditation may appeal the decision or request reconsideration as outlined later in this Chapter.

Withdrawal from Consideration of Accreditation

An optometric residency program may withdraw its application for any status of accreditation or pre-accreditation at any time before a final decision is made on that request by submitting its intention to withdraw from consideration, in writing, to the administrative director of the Accreditation Council on Optometric Education.

Any previously accredited or pre-accredited program wishing to have its name removed from the Council's list of accredited programs should have the chief executive officer of the institution notify the administrative director of the ACOE in writing. The Council will report that the program has voluntarily withdrawn from the accreditation process on its next annual listing of accredited programs.

Reinstatement of Accreditation

A program which has voluntarily withdrawn from accreditation, or which has had its accreditation revoked by the Accreditation Council on Optometric Education, may apply for reinstatement of accreditation by following the procedures outlined for initial application for accreditation in Chapter 4 of this manual. A self-study and evaluation visit will be required.

Notification of Accreditation Decisions

A notification letter will be sent to the chief executive officer of the affiliated educational institution within 30 days of the Council meeting at which the accreditation decision was made. Concurrently, a copy of the letter and accompanying documents will be sent to the program supervisor and director of residencies at the affiliated school or college.

The letter will include the accreditation classification that has been determined, the length of time until the next scheduled re-evaluation visit, a copy of the evaluation report that was the basis for the Council's decision, and recommendations and suggestions for program enhancement. It will delineate the reasons for any change in accreditation status and specify the time lines for interim visits and/or progress reports. The letter will include a statement regarding the program's compliance with the standards and the program's expected time frame for coming into compliance with any unmet standards. The letter will also contain a statement regarding procedures for requesting reconsideration and appeal of the Council's accreditation decisions.

Appeal Process for Accreditation Decisions

The Council will provide the chief executive officer of the affiliated educational institution a specific statement of reasons for any adverse accrediting decision. The ACOE will notify the U.S. Department of Education, appropriate state agencies and appropriate accrediting agencies of an adverse action or a decision to grant or continue the "accredited with conditions" status at the same time the program is notified. The decision of the ACOE becomes final at the end of 30 days following the program's receipt of notification of the action, if the program does not file a petition for reconsideration or appeal as specified in the following procedures. The ACOE will notify the public through its web site of a final decision for an adverse action or to grant or continue "accredited with conditions" within 24 hours of notifying the program of the ACOE's final decision. The Council may reconsider any adverse accreditation decision on its own motion, or upon the petition of an institution or program.

An adverse accreditation decision means an official Council action, such as the withdrawal or denial of an accreditation or preaccreditation classification.

Petition for Reconsideration

A program desiring the Council to reconsider an adverse decision or determination of "accredited with conditions" must submit to the Council, in writing, a "Petition for Reconsideration" stating, with all necessary documentation, that:

the facts upon which the Council decision was based no longer exist or have changed significantly;

the Council's ruling is clearly erroneous based on its construction of the facts; or

the Council's ruling is clearly erroneous based on its interpretation or application of the Accreditation Manual: Optometric Residency Program; or

any combination of the above.

This Petition for Reconsideration must be filed with the Council no later than 30 days following notification of the Council's decision. The Council will consider the program's petition and any oral presentation which the program may wish to make. If the problems or deficiencies that precipitated the adverse action have been corrected, or if upon further consideration and evaluation the Council agrees that some error of construction, interpretation, or application has occurred, the Council will take appropriate action.

Appeal of Accreditation Decisions

If, following reconsideration, the Council again acts to withdraw, deny or lower the accreditation status of the program, or to continue the program as "accredited with conditions", the chief administrative officer of the educational institution or program affected may appeal the Council's decision to an ad hoc Appeals Panel. The appeal must be in writing and filed with the Secretary-Treasurer of the American Optometric Association (AOA) within 30 days of receipt of notice of the Council's action upon reconsideration.

The program in its appeal shall allege, with necessary documentation, that:

the Council's ruling is clearly erroneous based on its construction of the facts; or

the Council's ruling is clearly erroneous based on its interpretation or application of the Accreditation Manual: Optometric Residency Programs; or

both of the above.

A program may not appeal to argue that the facts upon which the Council based its action have changed or no longer exist; such an argument must be made to the Council in the reconsideration proceeding.

Within 30 days of receipt of the Appeal, the president of the AOA shall name three (3) persons to an ad hoc Appeals Panel, and three alternates, no one of whom shall be a member of the Accreditation Council on Optometric Education or a member of the Board of Trustees of the AOA, or have had affiliation with the institution or program filing the appeal or with the accreditation process relating to that institution or program.

The administrative director of the Accreditation Council on Optometric Education will determine the willingness to serve of the designated principals and alternates and notify the institution or program of the names of the three principals. If the institution shows good cause why a named principal is unacceptable, an alternate will be selected who is acceptable to both parties.

The Appeals Panel shall meet within 90 days of the date on which the program was notified of the adverse decision of reconsideration by the Accreditation Council on Optometric Education, or on a date which is mutually acceptable to the institution or program, the Appeals Panel and the Council. The institution or program may have one (1) representative appear before the Panel to

make oral and/or written presentations and to respond to questions from the Panel. The chair of the Accreditation Council on Optometric Education shall designate a representative to appear before the Appeals Panel to support the decision of the Council and to respond to questions of the Panel. Either party may be represented by counsel; however, the proceeding shall be conducted on an informal basis.

The Accreditation Council on Optometric Education is the agency of the profession which has been established to evaluate and accredit optometric educational programs. As such, its judgment is entitled to great weight and shall not be modified or reversed simply because the Appeals Panel, if it had initially heard the evidence, might reasonably have reached a different result.

The purpose of the Appeals Panel is to review the appeal to determine whether prejudicial error has occurred, not to completely rehear the entire matter. Therefore, only if the Appeals Panel concludes that the Council could not reasonably have acted as it did, may the Appeals Panel so direct the Council as to the action it considers appropriate. The Panel decision may be to sustain, modify or reverse the decision of the Council or to remand the matter to the Council for further reconsideration with recommendations. Notice of the decision shall include a statement of the specifics on which the decision is based.

There will be no change in the accreditation classification of the program pending disposition of an appeal. The Appeals Panel shall forward its findings and conclusions to the Council for action. The institution or program will receive written notification of the findings of the Appeals Panel.

The cost related to appeal procedures shall be underwritten by the program and the Council on an equally shared basis.

Monitoring Accredited Programs

The Accreditation Council on Optometric Education employs a number of mechanisms to monitor accredited programs in the interim between evaluation visits. These mechanisms are described below.

The Annual Report

Annual reports are tools to assist the Accreditation Council on Optometric Education with monitoring and evaluating the program's compliance with accreditation standards in the interim period between evaluation visits. The annual report should provide the Council with the following information:

- * Notification of significant developments at the program;
- * An overview of the state of affairs at the program;
- * Plans for the coming year;
- * A summary of outcome assessments made during the previous year;

- * Number of residents for the present year and projections for resident positions for the future year;
- * Number of applicants for present year;
- * Outcomes data;
- * A description of progress made on implementing each of the recommendations and suggestions of the previous evaluation report; and
- * Notification of the nature and extent of any substantive changes contemplated in the program.

The annual report must be submitted to the Council by September 1 of each year. The Council will review the reports at its Fall meeting, and representatives of the program may request or may be requested to meet with the Council at its Fall meeting to explain or elaborate on their report.

Programs will be notified following the Fall meeting if their report satisfied a recommendation of the evaluation report or if further action is needed.

The Progress Report

The progress report is a mechanism which requires the director of residencies and program supervisor of a program to submit a document indicating the degree to which recommendations contained in the most recent formal Council evaluation report or other identified concerns have been implemented. The Council may require a progress report of any accredited program. Determination of need for the progress report will be made by the Council when it reviews the program's evaluation report or annual report. The Council will specify a due date when the progress report is required. Following receipt of the report from the program, the Council will review it at its next regularly scheduled meeting. If the progress reported is satisfactory, a program with the status of accredited with conditions may be raised to accredited status. On the other hand, if the progress reported is unsatisfactory or the report is not received by the due date, the Council may require a representative of the program to appear before it and explain the lack of progress, schedule a special re-evaluation to determine the basis for the lack of progress or take other action it deems appropriate.

In preparing the progress report, the program should focus on the particular areas requested by the Council and should also report on progress made on each recommendation of the most recent evaluation report, except those that the Council has accepted as having been satisfied. The program should describe in detail its accomplishments toward implementing the specific recommendation or addressing the area of concern. Other areas identified by the program should also be included in the report.

The Council expects that progress reports will include the observations of faculty who are directly responsible for the areas covered by the particular recommendations.

Interim Visits

The Accreditation Council on Optometric Education may elect to conduct an interim visit to a program between full evaluation visits. Interim visits are initiated by the Council or at the request of the institution for several reasons:

1. As the result of concerns identified in an evaluation report or interim visit report;
2. Lack of progress on concerns identified in an evaluation visit, interim visit or progress report, or during the annual report review;
3. As the result of a substantive program change;
4. Change in leadership of the program; or
5. Other concerns which come to the attention of the Council.

Interim visits, by their very nature, address a specific area of concern. However, an interim visit for the purpose of addressing issues broader in scope may be considered at the discretion of the Council. The program must submit a report on the area(s) being evaluated during the visit, at least one month prior to the visit.

Interim visit teams are generally composed of two evaluators at least one of whom is a member of the Accreditation Council on Optometric Education or a trained consultant. The length of the interim visit varies depending on the scope of the visit. The ACOE chair, interim visit chair, or the Council staff will consult with the program supervisor or director of residencies to establish the length and agenda for the visit.

Following the interim visit, the team will prepare a report which will be sent to the program for review of factual accuracy. It will then be submitted to the Council for consideration. The following are examples of outcomes that might result from an interim visit:

- * Acceptance of the report by the Council with a full evaluation visit scheduled at the previously determined time;
- * Additions and/or deletions to the current list of recommendations may be made;
- * Acceptance of the report by the Council with a request by the Council for a full evaluation visit to occur on a modified schedule based on continuing concerns resulting from the interim visit;
- * A changed accreditation status;
- * Loss of accreditation.

If a negative decision results from an interim visit, the program will have the opportunity to appeal according to procedures described previously in this Chapter.

Substantive Change

Through the annual report, progress reports and interim visits, the Council continuously monitors the general quality of the education provided by accredited programs. An optometric residency program receives its recognition on the basis of evaluation and accreditation of its educational program. Any institution which contemplates a substantive change in its optometric residency program should receive concurrence from the Accreditation Council on Optometric Education prior to formal adoption thereof. By "substantive change," the Accreditation Council on Optometric Education means new educational policies, practices, or programs that affect:

- * The Mission;
- * The organizational relationship of the residency with its sponsoring or affiliated institution;
- * The scope, length and/or content of the program;
- * Resources.

The following are examples of changes that the Council considers substantive. This list is not all inclusive, and the Council reserves the right to exercise its judgment to determine whether a change is substantive.

- * A change in the program supervisor.
- * Significant reduction or loss in funding for the program.
- * New affiliations with other institutions.
- * Increase or decrease in number of residents.
- * Increase or decrease in faculty.
- * Substantial change in financial resources.
- * Substantial change in mission of the affiliate, sponsor or program.

Proposed substantive changes must be submitted to the Council in writing for assessment and approval prior to implementation. Failure to comply with this policy may result in the scheduling of an interim site visit, or in extreme cases, the lowering or withdrawal of the program's accreditation status after due notice and an opportunity for a hearing.

Program Inactivity or Deficiency

In the course of reviewing an optometric residency program, the ACOE may withdraw its accreditation, regardless of its current accreditation status, under the following circumstances:

1. The program has been without at least one resident for two or more years.
2. The program has incurred a major loss of resources, e.g., faculty, facilities or funding, without reasonable expectation of rapid replacement.
3. A natural catastrophe prevents the program from functioning as accredited.

Chapter VI -- In the Public Interest

The Accreditation Council on Optometric Education takes seriously its responsibility as an accrediting body to inform and assure the public about the quality of educational programs in optometry. The Accreditation Council on Optometric Education publishes an annual list of accredited optometric residency programs, which is available upon request from the administrative director of the Council. The list states each program's accreditation status and the date of the next regularly scheduled Council evaluation visit. The Council also publishes an annual report which it submits to the AOA House of Delegates listing its accreditation decisions, the names of the programs which are removed from the list of accredited programs, and reasons for removal.

The Accreditation Council on Optometric Education will regularly monitor catalogs and appropriate publications of optometric residency programs to determine that programs are accurately portrayed to the public. If the program elects to publicly disclose its ACOE accreditation status, it must accurately list its status and include the Accreditation Council on Optometric Education's name, address and phone number. Further, the Council requires that programs be accurate in all references to the areas and levels for which accreditation has been received.

Confidentiality of Accreditation Reports

Council policy specifies that evaluation reports are confidential and are not disclosed except to the sponsoring and affiliated institutions involved. Premature and/or unauthorized disclosure of information reflecting the evaluation team's or Council's conclusions and recommendations concerning the accreditation status of an accredited program may seriously jeopardize the Council's position as an accrediting agency, and adversely affect the program or institution. The Council expects the chief executive officer of optometric educational institutions to make Council evaluation reports available to faculty members, and others directly concerned.

Council members, evaluation team members and consultants are not authorized under any circumstances to disclose information obtained during on-site visitations or during Council meetings. The extent to which evaluation reports are made public is determined by the chief executive officer of the educational institution. It is the obligation of the Council to maintain the confidentiality of its relationships with institutions and programs and not to announce publicly any action with respect to a residency program other than its accreditation classification or its removal from the accredited list.

However, if an institution so conducts its affairs that they may become a matter of public concern, the Council may find it necessary to make public its actions. Moreover, when the Council is thus forced to make its actions public, it cannot avoid the necessity of explaining, to whatever extent it deems necessary and appropriate, the basis for its action. This may result in some departure from the usual confidential character of the Council's relations with an institution.

Procedures for Review of Complaints about Accredited Programs

The Accreditation Council on Optometric Education, through its established procedures of evaluation and monitoring, attempts to ensure that optometric residency programs maintain high standards of educational quality.

The Accreditation Council on Optometric Education was not created to serve and will not serve as an arbiter or mediator of disputes that may arise between the optometric residency programs and other parties. However, the Council is interested in hearing from groups or individuals who may have specific complaints relating directly to the quality of the education offered by accredited optometric residency programs, or the lack of compliance with the accreditation standards and requirements of the Council.

Procedures for Filing a Complaint

An individual or group desiring to file a complaint with the Accreditation Council on Optometric Education shall submit the complaint in writing, signed by the complainant, to the Administrative Director or the Chair of the Council. The complaint should be specific in detail and include whatever documentation is available to support the complaint. Upon request, the Council may withhold or protect the identity of the complainant.

Complaints received by the Council that do not relate to the standards of accreditation or the quality of the program's education or that do not have sufficient documentation to warrant an investigation will be disposed of in an appropriate manner at the discretion of the ACOE chair.

Upon receipt of a relevant complaint, the Council will forward within 10 business days a copy to the chief executive officer of the program, or other appropriate person, for response and appropriate documentation. If the name of the complainant is being withheld/protected, the Administrative Director shall summarize the complaint prior to forwarding to the institution or program. The chief executive officer of the program will have 20 business days to respond to the complaint and to provide appropriate documentation. The chair of the Council may grant an extension of time to respond to the complaint if warranted. A request for delay must be submitted in writing. If a site visit is scheduled within the response time frame, the response may be provided as set forth below.

If an on-site evaluation is scheduled within two months of the receipt of the complaint, the Council will also refer the complaint to the chair of the evaluation team visiting the program for investigation and action during the regular course of the evaluation process. If the complaint is not referred to the chair of the next evaluation team, the chief executive officer of the program, or other appropriate person, will be asked to provide the Council with a written summary of actions that led to the complaint and any actions taken as a result of the complaint, including appropriate documentation available to support the summary.

Upon the receipt of the response from the institution, if feasible, the chair of the Council will encourage informal efforts to resolve the differences. If the differences are not resolved within a reasonable time, not to exceed 90 days, and appear to be substantial and directly related to the quality of education offered by the accredited program or the lack of compliance with the standards and requirements of accreditation, the chair of the Council will appoint two members

of the Council, including one public member, who will investigate the complaint. The public member will preside and direct the investigation.

The investigation may, but need not necessarily, include a visit to the institution against which the complaint was filed and may involve such hearings as deemed appropriate. This two-member investigative team shall have access to any and all information relevant to its inquiry. Upon completion of the investigation, the chair of the team shall report to the Council at its next regularly scheduled meeting. The Council shall take appropriate action, including but not limited to dismissing the complaint, requiring a focus visit, or scheduling a full evaluation visit. The complainant and the institution will be informed of the results of the investigation.

The institution shall inform its students of the Council's mailing address and/or telephone number, the procedures for filing complaints, and that only complaints relating directly to the quality of the education or the lack of compliance with standards and requirements of accreditation will be considered by the Council. The Council will not intervene on behalf of individuals or act as a court of appeal for individuals in matters of admission, appointment, promotion or dismissal of faculty, staff or students. The Council will not consider complaints on matters that are not related to the standards of accreditation or the quality of education at the program.

The costs related to the complaint process will be divided equally between the Council and the program.

Procedure for Complaints Not Related to Accreditation Decisions

- 1) A complaint or inquiry regarding the Accreditation Council on Optometric Education (ACOE) other than the merits of an accreditation decision may be initiated by filing a written complaint with the ACOE. The complaint must identify the specific matters complained of, set forth in detail the facts and reasons claimed to support the allegations and must include pertinent documents in possession of complainant relating to the complaint.
- 2) Upon receipt of a written complaint regarding ACOE actions other than the merits of accreditation decisions, the ACOE shall have 45 days to conduct an investigation of the allegations in the complaint where warranted. If it is determined that no investigation is warranted, the complainant shall be so informed. The investigation may include, without limitation, interviews with persons having information regarding the allegations and a review of materials relevant to the complaint. Any individual with information regarding the allegations may also be asked to provide documents and comments relating to the complaint.
- 3) The Chair of the ACOE may appoint an individual or a committee to conduct the inquiry into the allegations of the complaint. (If the complaint concerns the Chair, the ACOE may appoint an individual or committee to conduct the investigation.) Following the investigation, the individual or committee shall prepare a written report to the ACOE stating the findings of the investigation. The person(s) filing the complaint will be provided with a copy of the written report and will be provided with an opportunity to submit written comments to the ACOE on the investigation report. Any written comments shall be submitted to the ACOE within thirty (30) days following receipt of the report.

- 4) Following review of the findings and additional written comments, if any, the Council at a duly scheduled meeting shall make a determination with respect to the allegations of the complaint. Within 15 business days following the decision, a written report shall be prepared specifying factual findings of the ACOE and the actions, if any, that the ACOE will take with respect to the complaint, including but not limited to dismissing the complaint, requiring a new site visit evaluation, or other remedial action. The complainant(s) will be provided with a copy of the ACOE decision.
- 5) The person(s) filing the original complaint may appeal the decision of the Council by filing the appeal, in writing and stating specific reason(s) for the appeal, with the Secretary-Treasurer of the Board of Trustees of the American Optometric Association, within 30 days following notification of the decision of the Council. Within 15 days of receipt of the Appeal, the President of the AOA shall name three (3) persons to an ad hoc Appeals Panel, and three alternates, no one of whom shall be a member of the Accreditation Council on Optometric Education or a member of the Board of Trustees of the AOA, or have had affiliation with the institution, program, or person(s) filing the appeal or with the accreditation process relating to an institution or program. No additional fact finding may be undertaken regarding the initial complaint, unless requested by the Appeal Panel.
- 6) Within 60 days after appointment, the Appeal Panel shall schedule and convene a meeting to hear or receive presentations from the complainant and the Council or their respective representatives. The complainant(s) will have an opportunity to have one (1) representative appear before the Appeal Panel to make oral and/or written presentations and to respond to questions from the Panel. The Accreditation Council on Optometric Education will designate a representative to appear before the Panel to support the decision of the Council and to respond to questions of the Panel. Either party may be represented by counsel; however, the proceeding shall be conducted on an informal basis.
- 7) The Appeals Panel shall review the materials presented and shall reach a decision within 15 days of the meeting. The Appeal Panel decision may be to sustain, modify or reverse the decision of the Council or to remand the matter to the Council for reconsideration with recommendations. The decision of the Appeal Panel shall be in writing, shall state the pertinent finding of facts and conclusions, and the actions approved by the Panel. The Appeal Panel shall forward its findings and conclusions to the Council for action, and shall provide complainant(s) with a copy of the Appeal Panel decision.

During the period of the investigation, the ACOE will maintain the confidentiality of the information and documents submitted to it, except to the extent it deems necessary and appropriate in order to conduct a thorough inquiry.

Consideration of Actions of Other Accrediting Groups and Notification of Withdrawals

The Accreditation Council on Optometric Education will review the accreditation or pre-accreditation status of any optometric residency program located within an institution that has been placed on public probation or that has had its accreditation or pre-accreditation status revoked by any recognized accrediting agency. The purpose of the review will be to determine if

the ACOE should take adverse action against the program or lower its accreditation status to “accredited with conditions.” The Council will provide the program with due notice of its intended review. Programs which are currently accredited by ACOE as well as those seeking initial accreditation are required to notify ACOE if the accreditation of their parent institution is revoked, or if the parent institution is placed on public probation.

The Accreditation Council on Optometric Education shall take into account decisions made by recognized institutional accrediting agencies or State agencies. If the ACOE determines that an institution sponsoring a ACOE accredited program or a program seeking ACOE accreditation is the subject of an interim action or threatened loss of accreditation or legal authority to provide postsecondary education, the ACOE will act as follows:

Programs accredited by ACOE

If a recognized institutional accrediting agency takes adverse action with respect to the institution offering the program or places the institution on public probationary status, the ACOE shall promptly review its accreditation of the program to determine if it should take adverse action against the program.

The ACOE shall not renew the accreditation status of a program during any period in which the institution offering the program--

1. is the subject of an interim action by a recognized institutional accrediting agency potentially leading to the suspension, revocation, or termination of accreditation or pre-accreditation;
2. is the subject of an interim action by a State agency potentially leading to the suspension, revocation, or termination of the institution's legal authority to provide postsecondary education;
3. has been notified of a threatened loss of accreditation, and the due process procedures required by the action have not been completed; and/or
4. has been notified of a threatened suspension, revocation, or termination by the State of the institution's legal authority to provide postsecondary education, and the due process procedures required by the action have not been completed.

Programs applying for accreditation by ACOE

In considering whether to grant initial accreditation to a program, the ACOE takes into account actions by:

1. recognized institutional accrediting agencies that have denied accreditation or pre-accreditation to the institution offering the program, placed the institution on public probationary status, or revoked the accreditation or preaccreditation of the institution; and
2. a State agency that has suspended, revoked, or terminated the institution's legal authority to provide postsecondary education.

Granting of ACOE accreditation notwithstanding actions by other agencies

If the ACOE grants accreditation to a program notwithstanding the actions described in this policy, the Council shall provide to the Secretary of the U.S. Department of Education within 30 days of ACOE action, a thorough explanation, consistent with the accreditation standards, why the previous action by a recognized institutional agency or the State does not preclude ACOE's grant of "accreditation."

The ACOE will, upon request, share with other appropriate recognized accrediting agencies and recognized state approval agencies information about the accreditation or preaccreditation status of a program and any adverse actions it has taken against the accredited or preaccredited program.

As an accrediting agency recognized by the U.S. Department of Education (USDE), the Accreditation Council on Optometric Education will notify the USDE Secretary of any action the Council takes to withdraw an accredited status from a program or to place an accredited program on a publicly announced probationary status. As required for recognition by the USDE, the Council will forward a notice of all final accrediting actions taken at each meeting to the USDE Secretary. The Council will also notify the Secretary of ACOE's final decision to deny, withdraw, suspend or terminate the accreditation of a program at the same time it notifies the program.

When the Council makes a final decision to deny, withdraw, suspend, or terminate a program's accreditation status, it shall notify the affected program within 30 days after such action. That notification letter shall include a statement that the Council must make available to the Secretary of the U.S. Department of Education, appropriate accrediting agencies and the public the decision and a brief summary of the Council's reasons for the determination as well as any comments that the program may wish to make regarding such decision. The notice shall request that the program submit any brief comments that would be made available to the public not later than a specified date that is within 50 days after such final decision is made. The Council reserves the right to ensure that such comments are accurate and not defamatory.

Within sixty (60) days after the Accreditation Council on Optometric Education makes a final decision to deny, withdraw, suspend, or terminate a program's accreditation status, ACOE shall make available to the Secretary of the U.S. Department of Education, the appropriate accrediting agencies, and the public, such decision and a brief summary of the reasons for the ACOE's determination, as well as any comments that the affected program may wish to make regarding such decision.

Within 30 days of receiving notification of voluntary withdrawal from accreditation or preaccreditation from a program, the Accreditation Council on Optometric Education will notify the US Department of Education, the appropriate state board of optometry and other appropriate state agencies, appropriate accrediting agencies, and upon request, the public of the program's decision to voluntarily withdraw.

If a program lets its accreditation or preaccreditation lapse, the ACOE will notify the US Department of Education, the appropriate state board of optometry and appropriate state agencies, appropriate accrediting agencies and upon request, the public within 30 days of the date on which the accreditation lapses. Accreditation or preaccreditation lapses when a program

fails to continue the regularly scheduled process of accreditation, and no extension in which to comply has been requested by the program and granted by the ACOE.

Chapter VII -- Conclusion

The Accreditation Council on Optometric Education's prime purpose as an accrediting agency is to ensure the quality and continued improvement of optometric education by establishing and applying valid and reliable educational standards that reflect the evolving practice of optometry. In the final analysis, accreditation and its self-study procedures should provide stimulation to programs to ensure continued improvement through the assessment of levels of achievement of its mission, goals and objectives.

The Accreditation Council on Optometric Education in its evaluation of optometric residency programs welcomes inquiries relative to the interpretation of its standards and procedures. The Council reserves the right to collect data periodically from each of the residencies participating in its accreditation program and may re-visit and re-evaluate any of them at any time, provided that proper notice and adequate opportunity for preparations are allowed. Finally, the Accreditation Council on Optometric Education is committed to providing accurate public information to potential residents, the government and the public who may have questions about optometric education. Its regularly published lists will provide an overview of programs' accreditation status.

Appendix A

Mission of the Accreditation Council on Optometric Education

The Accreditation Council on Optometric Education serves the public by establishing, maintaining and applying standards to ensure the academic quality and continuous improvement of optometric education that reflect the evolving practice of optometry. The scope of the Accreditation Council on Optometric Education encompasses professional optometric degree, optometric residency, and optometric technician programs.

Goals and Objectives of the Accreditation Council on Optometric Education

Goal 1

To serve the public and the community of interest by ensuring the continued effectiveness of the Council.

Objectives

1. Maintain an independent and objective accreditation process.
2. Inform the public and the communities of interest regarding the accreditation status of programs.
3. Develop and implement policies with integrity and high ethical standards.
4. Continue to seek the most cost effective way to provide the services of the Council.
5. Develop and disseminate information that demonstrates the effectiveness of the Council's operations.
6. Maintain liaison between the Council and its constituents.
7. Keep the community of interest informed of current trends and developments in specialized accreditation.
8. Serve as a resource on accreditation.

Goal 2

To develop, maintain, apply and periodically review the Council's accreditation processes and the standards for accreditation of optometric education and training programs in the United States and Canada.

Objectives

1. Review optometric education and training programs and make accreditation decisions in accordance with Council's standards and procedures and the program's mission, goals and objectives.
2. Establish and disseminate standards, policies and procedures in accreditation manuals for the programs accredited by the Council.
3. Comprehensively review the standards for accreditation at least every five years.
4. Solicit suggestions from accrediting teams relative to standards, procedures and process.
5. Solicit suggestions from the community of interest relative to standards, procedures and process.
6. Identify competent individuals to participate in accreditation site visits and provide appropriate training.

7. Evaluate the performance of site visitors and team chairs and use the results of the evaluations to identify areas needing emphasis in the training process.
8. Monitor programs in the interim between evaluation visits through the use of annual reports, progress reports and interim visits.

Goal 3

To foster continuous improvement of optometric education by assisting the Council and its constituents in remaining current regarding the evolving nature of optometric practice, health care policy and delivery, health professions education, and higher education.

Objectives

1. Collect, review and disseminate to Council members and the Council's constituents information relating to optometric practice, health care policy and delivery, health professions education, and higher education that impact on optometric accreditation.
2. Continue dialog with representatives of optometric organizations, health care delivery systems, health professions, and higher education.
3. Ensure that the orientation and training process for Council members, staff and consultants includes relevant information on optometric practice, health care policy and delivery, health profession education, and higher education.

Goal 4

To foster continuous improvement of optometric education by encouraging innovation and creativity in optometric education programs.

Objectives

1. Communicate to the community of interest that the Council encourages innovation and creativity in optometric education programs.
2. Ensure that the policies and the procedures of the Council do not inhibit innovation.
3. Ensure that the Council and consultants perceive innovation as a necessary and positive approach to foster continuous improvement in optometric education.

Goal 5

To assure the continued effectiveness of the accreditation process by the development and application of continuous quality assurance, self-assessment, and external review of the Council.

Objectives

1. Maintain recognition by the U.S. Department of Education.
2. Seek external review by organizations that recognize accrediting bodies and follow accepted codes of good practice.
3. Engage in planning and conduct periodic self-assessments.
4. Evaluate and test the validity and reliability of the Council's processes.
5. Maintain a committee structure that involves Council members and other experts in planning, quality improvement, and self-assessment.
6. Seek regular input from the community of interest relative to planning, quality improvement, and self-assessment.

Glossary of Terms

(This glossary provides a quick reference of commonly used terms in the manual.)

Accreditation	The process of self-study and external review which ensures that a program of residency education meets or exceeds the standards applicable to that program.
Affiliated School or College of Optometry	An ACOE accredited school or college of optometry that has educational responsibility for a residency that is sponsored by a non-ACOE accredited health care entity. Faculty appointment and curriculum development are examples of educational responsibilities of the affiliated school or college of optometry.
Curriculum	A structured, integrated educational plan developed to meet the mission, goals and objectives through patient care, didactic and scholarly activities.
Director of Residencies	That individual at the affiliated school or college of optometry who is administratively responsible (regardless of title) for the overall quality of the residency program(s) of that institution.
Health Care Delivery Entity	Any health care delivery organization or facility which provides primary, secondary or tertiary health care by appropriately licensed providers.
Goals	Goals specify the end results necessary to achieve the mission; they should elaborate each of the major components of the mission. They provide clarification and specificity for components of the mission statement.
Long Range Planning	The process of continual re-evaluation of the mission, goals and objectives coupled with the development of the resources necessary to accomplish the mission, goals and objectives.
Mission	A statement of the fundamental reasons for a program's existence.
On the campus Residency	A residency program which includes training at a school or college of optometry at least four out of five days each week.
Objectives	Statements which define outcomes attributable to the mission and goals of a residency.
Outcome	An assessable quantity or quality relative to the overall success of a program in the achievement of its mission, goals and objectives.
Publish	To make available to the communities of interest (students and their families, counselors, education community, and the general

	public) via one or more of the following means (1.) catalog, (2.) brochure, (3.) Internet site.
Required documentation	Documentation which the Council expects the program to provide as evidence that the program meets the standard. It is required unless the program can provide other satisfactory evidence that it meets the standard.
Residency	An optometric residency program is a post-doctoral, educational program centered on clinical training that results in the resident's attainment of advanced competencies in eye, vision, and health care.
Scholarly Activity	Those self-directed research and related activities of the resident and faculty which enable the resident to maintain an openness to new knowledge and its acquisition, development and/or communication.
Sponsor	That school or college of optometry, hospital, health center, clinic or other health care delivery entity that assumes the day-to-day responsibility for education of the resident in the residency program.
Standard	A measurable criterion of the quality of one or more components of a program of optometric residency education.
Support Staff	Those persons at a residency site who support the delivery of health care services of the residency including: receptionist, technicians and secretaries as examples.
Supervisor/Coordinator	The optometrist who is directly responsible for the residency program, especially the day to day clinical education of the resident.