

NAACLS
Volunteer Manual for
Self-Study Report
Reviewers and Site
Visitors

Revised 1/2014, 1/2016, 11/2018, 08/2019

The logo for NAACLS features the acronym "NAACLS" in a large, bold, black sans-serif font. The letters are set against a light blue, semi-transparent circular background that has a subtle gradient and a slight glow effect. The letters themselves have a slight blue shadow or outline, making them stand out from the background.

**National Accrediting Agency
for Clinical Laboratory Sciences**

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NAACLS MISSION STATEMENT

The NAACLS is committed to being the premier international agency for accreditation and approval of educational programs in the clinical laboratory sciences and related health professions. NAACLS provides leadership in fostering innovative educational approaches and actively supports cooperative efforts with other agencies.

NAACLS, in collaboration with its professional organizations, provides comprehensive services including program accreditation, program approval, consultation, and continuing education. NAACLS provides these services for educational programs, students, employers and healthcare consumers.

NAACLS is dedicated to volunteer peer review as the foundation of accreditation and approval. The agency strives to prepare these volunteers and to assist them in providing exemplary program analysis, based upon principles of honesty, fairness, objectivity and integrity.

NAACLS demonstrates commitment to public service by setting standards for quality educational programs in clinical laboratory sciences and related health professions. NAACLS will continue to be responsive to the needs of the healthcare community.

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Dear Colleague:

Thank you for your willingness to serve higher education by participating in the accreditation process.

NAACLS is dedicated to peer review as the foundation of accreditation and approval. Volunteers are highly valued and the agency strives to prepare and assist you to provide exemplary program analysis. Such analysis must be based upon principles of honesty, fairness, objectivity and integrity. Although you do not have the authority to recommend or predict accreditation actions, the quality and thoroughness of your input will be very important to the NAACLS review committees and the Board of Directors as they formulate accreditation decisions.

The Council for Higher Education Accreditation (CHEA) recognizes NAACLS and affirms that the NAACLS standards and processes of accreditation are consistent with quality improvement, and accountability expectations that CHEA has established. NAACLS also holds membership in the Association of Specialized Professional Accreditors (ASPA) and endorses the ASPA Code of Good Practice. (Appendix, p. 14)

This manual has been designed to assist and guide you in fulfilling your responsibilities as a designated NAACLS volunteer. It is important that you take the necessary time to become familiar with it.

Should you have any questions, please don't hesitate to contact us. We thank you for your continuing support of specialized accreditation.

Sincerely,

NAACLS Staff

SECTION I: Self-Study Report Review

A. Purpose

The process of a self-study is required by NAACLS for all accredited and approved programs. Responses to NAACLS Standards with accompanying supporting documentation is sent to NAACLS from officials as part of the program's Self-Study Report. The Self-Study Report Review is completed by one or two qualified volunteers and provides a summary of information that is provided in the Self-Study Report identifying areas of missing information and/or concerns for areas where submitted documentation does not appear to meet the Standards or does not provided the required supporting documentation. The reviewer must indicate if certain narrative description and documentation is present and/or appropriate.

B. Self-Study Report Reviewer Appointment

NAACLS staff has identified qualified individuals within the field who provide volunteer services to review self-study documents. The NAACLS Support Services staff contacts volunteers annually to determine availability, and then contacts individuals directly to request their assistance with a Self-Study Report Review. Once a volunteer agrees to complete a review, the Self-Study Report will be sent. The NAACLS staff will indicate when the review must be completed and returned.

C. Policies and Procedures

1. Completion of the Self-Study Report Review

ALL information in the Self-Study Report is confidential. Information must not be disseminated nor used for personal gain.

The completed Self-Study Report Review is a critical step in the accreditation and approval process and must represent a concise, comprehensive, objective and professional summary of the program being reviewed. All elements of the report form must be completed. If a program has provided evidence of meeting the Standard, then the Report should have the YES box checked. If there is missing documentation, or if the information provided does not meet a Standard the NO box must be checked. In any situation in which a NO is indicated, there must be an accompanying comment describing the concern or missing information. It is important that any comments be written clearly and accurately so there is no confusion or interpretation left to the reader. It is equally important that the program is evaluated against the Standards and not compared to the program for which the volunteer is associated. If the Self-Study Report is being reviewed by two volunteers, there should be early and frequent communication to insure the review is comprehensive and meaningful.

Self-Study Report Review forms are currently available electronically and are be emailed to volunteers from the NAACLS office. They can also be found on the NAACLS website. The appendix of this manual contains tips on using the electronic form. The first page will contain the name of the program, its location (city, state), the name, title and credentials of the program director and the medical director (if applicable).

Completed Self-Study Report Reviews are forwarded by the NAACLS office staff to the site visitors and the program director of accredited/approved programs. The results of the Self-Study Report Review will be used by program directors to prepare a response and by site visitors by directing them toward the recovery of missing documents and evidence that resolves any identified concerns.

For accredited programs, the completed Self-Study Report Review, and Site Visit Report are forwarded to the appropriate review committee (Review Committee for Accredited Programs or the Doctoral Review Committee) for review and recommendations for accreditation actions.

For approved programs, the completed Self-Study Report Review is forwarded to the Program Approval Review Committee before any approval recommendation is made. In some cases multiple programs are reviewed at the same time, and an approved program may be reviewed with an accredited program. In these cases, a specific supplementary report from the site visit will also be forwarded to the Program Approval Review Committee.

2. Summary Page

The Summary Page of the Self-Study Report Review will contain a list of any missing documents or concerns identified by the volunteer(s) who have reviewed the Self-Study. The simplest way to complete this page, and the best way to be sure that nothing from the body of the review is missed, is to “copy and paste” the comments from the document into the tables on the summary page, adding the number of the Standard to which the comment is addressing.

There is also a place for additional comments on the summary page. This is a good place to note any strengths of the program or of the quality of the materials submitted for review. It is important to restate that ***any item marked NO in the body of the review MUST be described in the Comment section and included on the Summary Page.***

3. Signature Page

The last page of the Self-Study Report Review is the Signature Page. For accredited programs, there is usually only one volunteer reviewing the self-study document since this stage will be followed by a site visit. For approved programs, there will be two volunteers. The first reader is the individual responsible for finalizing the report and submitting it to NAACLS. They should take the initiative to contact the second reader in a timely way to share findings. If there is disagreement between the findings of the two readers, a separate minority report can be filed with NAACLS describing the disagreement.

A completed signature page must be on file with NAACLS before further action can be taken. The signature page can be signed, scanned and emailed or faxed directly to the NAACLS office. ***Please be sure the entire page is completed, including the program name, location, and level.***

4. Self-Study Report Review Evaluation

Volunteers who complete Self-Study Report Reviews for accredited programs will be evaluated by the program site visitors in terms of the usefulness of the review. The following criteria is used in this evaluation process:

Format

- Was the review of the self-study report concise, clear and well organized?
- Did the reviewer adequately address all standards?
- Were concerns identified and missing information or documentation noted with their respective Standards in the body of the report?
- Were all sections completed?

Content

- Was the required missing information and/or documentation clearly summarized in the “Missing information/or documentation” section of the Summary Page?
- Were all concerns listed by Standard and summarized in the “Other Concerns” section of the Summary Page?
- Were all statements or comments specific, objective and without opinions or recommendations?
- Was the reviewer objective in applying the Standards?

SECTION II: The Site Visit

A. Purpose

All programs being reviewed for accreditation, and approved programs being reviewed in conjunction with an accredited program, will undergo a two-day site visit as part of the process. The outcome of the site visit will be a completed Site Visit Report that summarizes the findings of site visitors who have read the Self-Study Report, the Self-Study Report Review, and the evidence provided during the visit. Like the Self-Study Review Report, the Site Visit Report will document the degree to which the program has met the NAACLS Standards, identifying areas of missing information and/or concerns that remain.

B. Types of Site Visit and Team Composition

1. Initial Accreditation Review

Initial program site visit teams will consist of three members:

- A Team Coordinator that has been on at least three previous NAACLS site visit teams
- A Team Member that provides extra support in reviewing documentation and practices
- An Educator Generalist that has been on a previous site visit as a Team Coordinator or Team Member and has had experience in an administrative role, such as being a Department Chair, Dean, etc.

2. Continuing Accreditation Review

The team for programs that have been previously accredited is composed of a Team Coordinator and Team Member only..

3. Coordinated Site Visit

NAACLS supports the concept of coordinated site visits. Institutions that sponsor more than one allied health program or institutions that are geographically proximate are encouraged to request such site visits. NAACLS policies and procedures and the integrity of the Standards must be preserved and maintaining confidentiality a priority. NAACLS will cooperate with specialized and regional accrediting agencies to conduct coordinated site visits.

4. Interim Review of Program

In the event that a concern is brought to NAACLS Board of Directors or a review committee that an accredited program is not meeting Standards, the Board of Directors may determine that a site visit is needed. The site visit team will be formed whose composition is at the discretion of the Board of Directors.

5. Joint Review of NAACLS Accredited and Approved Programs

Institutions that have both NAACLS-accredited program and NAACLS-approved programs, or have received permission to submit self-studies for these programs on the basis of satisfactory preliminary reports, may request to have both programs reviewed simultaneously.

C. Site Visitor Appointment

1. Initial, Continuing, Coordinated and Joint Accreditation Site Visits

Site visitors are appointed by NAACLS Accreditation/Approval Services staff. Once site visitors are selected, their names and information will be forwarded to the program director for final approval. Dates for the visit will be coordinated between the program director and the NAACLS Accreditation/Approval Services Staff who will confirm the site visitors' availability. NAACLS Accreditation/Approval Services Staff will finalize arrangements with the team members after approval by the program director. The Site Visit Team member(s) will be sent an email that will include pertinent program information and documents needed for the site visit.

2. Interim Review Site Visitors

Interim review site visitors are appointed at the discretion of NAALCS' Board of Directors. Upon identification of the site visit team, NAACLS staff will work with the program officials and the team to identify dates for the visit. The visit must occur within the timeline established by NAACLS.

D. Travel Arrangements

Travel arrangements must be made with an intent of cost containment to minimize unnecessary expenses to the program/institution. The site visit team is asked to use discretion when selecting meals, lodging, transportation, etc., in order to keep program costs down.

NAACLS uses the services of Uniglobe Preferred Travel in facilitating travel arrangements for site visits. Upon confirmation of the site visit team, members will be provided contact information for Uniglobe, and information is provided in the appendix of this document. If team members are able to secure travel arrangements at a lower cost, and they are able to assume the cost until reimbursed, they are encouraged to make arrangements themselves.

Team members using Uniglobe Preferred Travel will have coach airfare (for domestic travel) or business class airfare (for international travel) billed directly to NAACLS. When making arrangements, Uniglobe must be informed that the visitor is travelling for NAACLS. Any upgrades will be at the visitor's expense, and arrangements must be made to pay the difference.

If the site visit is postponed or canceled or you do not use a portion of the airline ticket, please contact the travel agency to cancel the airline reservation. If issued, return the airline ticket directly to the travel agency. If changes to your itinerary are necessary, contact the travel

agency immediately. **Please be advised that change fees or replacement tickets may increase the program's cost.**

It is the responsibility of the team coordinator to work with the program director to determine lodging near the institution. It may be more convenient to have the program director make reservations and send confirmation to the team member(s). In most cases the institution will make arrangements for the billing of lodging arrangements. If this does not occur, site visitors will pay and be reimbursed for lodging expenses.

1. Travel Insurance Coverage

NAACLS provides travel accident insurance coverage to all volunteers traveling on NAACLS business including traveling to, conduction and traveling home from a site visit. This policy will provide payment to the estate of the insured should a claim become necessary.

Travel Accident Insurance Coverage requires that:

- a) A Beneficiary Designation Request (BDR) form (Appendix p. 30) is completed and submitted to the NAACLS office prior to traveling on NAACLS business and is placed on file with the policy holder.
- b) Following completion of the Beneficiary Designation Request a MEDEX Insurance ID card (Appendix p. 31) be provided to individuals authorized to conduct NAACLS business. This card should be in the traveler's possession during travel.

The BDR form, MEDEX Insurance ID card, and a summary of benefits can be found in the appendix of this manual. (Appendix p. 29-32) The Business Travel Accident Insurance Contract, can be reviewed at the Volunteer Center on the NAACLS Website:

<http://www.naacls.org/volunteer-center/>.

Immediately following the site visit, volunteers must submit a completed expense report to NAACLS for reimbursement. More information regarding this report can be found in section F.3.

E. Role of the Site Visitors

Site Visitors are peers voluntarily performing a service to the program. Site visitors are should be professional, objective and friendly during the visit. They are guests of the institution being visited and as such they should communicate clearly, openly and respectfully with all program officials, students, staff and others being interviewed during the process.

Site visitors should have read and re-read the Self-Study Report and Self-Study Report Review, and be familiar with their contents prior to the visit. During the visit, site visitors will discuss areas of strength and areas of concern regarding the program, and may provide consultative services if requested. Site visitors should review the steps and responsibilities in the NAACLS accreditation process with program personnel during the welcome interview. It is important for site visitors to make clear to program officials that the team is serving in a fact-finding capacity for NAACLS with the intent to assist program personnel in a positive and constructive manner, but they are not able to make the final determination regarding the programs accreditation and/or approval process; that responsibility lies solely with the NAACLS Board of Directors. A table of responsibilities of the team coordinator, member, and program director can be found in the Appendix.

ALL information in the Self-Study Report and that which is collected during the site visit is confidential. Information must not be disseminated or used for personal gain.

1. Team Coordinator

One member of the Site Visit Team will be identified as the Team Coordinator. It is this person's job to be the primary contact for the program and the visiting team in making arrangements and planning the itinerary for the site visit. The team coordinator will take the lead during the site visit in leading the introductory and exit interviews, and following the visit in making sure the Site Visit Review Report is completed, reviewed by other team members, and sent to NAACLS within the established timeline.

2. Team Member

Every site visit team will have at least one team member to work with and support the Team Coordinator in the identification of evidence, investigating, interviewing and fact finding to determine if a program meets NAACLS Standards.

3. Educator Generalist

For programs that are being evaluated for initial accreditation (approval) an Educator Generalist will accompany the site visit team. This individual usually has experience in education administration (dean or higher) and experience in the accreditation process. The educator generalist provides an additional resource when evaluating the policies and procedures of the institution in meeting NAACLS Standards. Like the other Team Member, the Educator Generalist provides a supporting but active role in the identification of evidence, investigating, interviewing and fact finding to determine if a program meets NAACLS Standards.

F. Itinerary

Upon appointment of the visiting team, the Team Coordinator will contact the program director to jointly prepare the itinerary for the site visit. It is the responsibility of the program director to confirm appointments with those associated with the program who will be interviewed. In the Appendix of this manual are sample schedules for academic and clinical based programs. It should be remembered during this process to make arrangements for the visiting team to get to the hotel, and then back and forth from the hotel to the program institution.

1. Preliminary Interview

The process will formally begin for the program at the preliminary interview on the first day of the visit. This meeting will involve the program director, the site visit team and administrators and faculty who have been invited by program officials. In most academic institutions a department chair or dean will be available for this meeting. The team coordinator will conduct this preliminary interview beginning with a greeting and introductions. The team coordinator will explain the process of accreditation, that the visit is a fact finding event, confirming the findings of the self-study reviewer and addressing any concerns identified in that report. At this time they should identify those concerns of the paper reviewer that were not adequately addressed previously. Administrators, faculty, and the program director should be given an opportunity to make comments or raise concerns during this meeting.

2. Individual and Group Interviews

The following groups and/or individuals should be included in every site visit. In each case there should be an opportunity for conversations without the presence of program officials. **The program director should be excused during these interviews.** All meetings should be encouraged to be open and forthright. Site visitors should exercise discretion during and after these interviews. Sample questions that might be used during the interviews can be found in the appendix of this document.

- Faculty Interview(s)
- Student/Graduate Interview(s)
- Clinical Affiliate Interview(s)
- Administrator Interview(s)

3. Informal and Formal Discussions with the Program Director

Meetings with the program director are naturally an important part of the site visit and should be a part of the formal itinerary. The site visit team can also meet informally with the program director to discuss any areas of concern. These informal conversations may occur between other meeting or during travel to and from other institutions and/or the visiting teams' hotel. During these meetings, the team should include any additional materials or documentation and/or plans to meet with additional key individuals/parties. The team can also use these informal meetings as opportunities to key the program director into the process, and findings of the team. The team should also meet again formally with the Program Director just prior to the Exit Interview to review the final report that will be given presented.

4. Time to Complete the Site Visit Report

The itinerary should include time for the site visit team to meet privately to review materials and documents that have been provided, to be presented at the Exit Interview.

5. Exit Interview

All interested individuals, including administrators, faculty, and students should be invited and encouraged to attend the exit interview. During the exit interview, the Site Visit Team Coordinator will report the team's findings by reading a draft of the Summary Page of the Site Visit Report. The entire Site Visit Report should **not** be read at this meeting. It is important that program officials/personnel have been informed of the findings prior to this meeting and there are no surprises during this meeting. Any deficiencies noted in meeting the Standards must be stated clearly and objectively, including the rationale for the findings. **Any area where NO is checked in the report must be included in this exit interview.** It is important that the exit interview remain objective, constructive and collegial. In addition to providing a comprehensive summary of the Team's findings, the Team Coordinator must remind program officials of their responsibility **to submit a response to the Team's report.** In that response they may agree with, disagree with, or submit clarifications, corrections, or remedies for any concerns identified in the report. A prompt response should be encouraged.

Finally, the Team Coordinator must let the program officials know that they will be given an opportunity to submit an evaluation of the Site Visit Team and the Site Visit process.

G. Aborting a Site Visit

Officials of an institution undergoing a site visit or the site visitors themselves may elect to abort a visit if it is believed that an objective review is not possible. Individuals requesting that the visit be aborted must contact NAACLS prior to the exit interview or the visit will be considered complete and the review processes will continue.

The request and justification for aborting the visit must immediately be submitted in writing to the NAACLS office with a fax or email. Upon receipt of the request and with agreement of the NAACLS official, the program and visitors will be notified that the visit must be stopped. It is the responsibility of the institution's CEO to request a further visit in writing.

H. Following the Site Visit

1. Acknowledgement of Program Hospitality

After the site visit, team member(s) may wish to acknowledge with thanks any special courtesies or considerations extended by the program or the institution.

2. Instructions for Completing the Site Visit Report

It is the responsibility of the Site Visit Team Coordinator to submit a final site visit report to the NAACLS office within three weeks of the site visit. A late or incomplete report will delay processing and could jeopardize the program's review.

Site Visit Team members should read **all** instructions before completing the report. NAACLS Accreditation/Approval Services staff will provide with team members with an electronic form of the site visit report via email, or one can be found on the NAACLS website.

A draft of the report will be completed before team members leave the site visit. Following the visit, the team coordinator will finalize the document, checking for spelling, grammar, and formatting before sending to other team members for review.

If team members all agree with the report, each member must sign the signature page. If the site visit consists of more team members than are allowed for on the form, attach an addendum to the signature page for the additional signatures.

If a team member does not concur with the report, a dissenting report describing any disagreement must be submitted.

a) Body of the Report

- Ensure that **ALL** items (“YES”, “NO”, and “NA”) have been marked.
- If “YES” has been marked for any item, comments are not necessary, and **NO COMMENTS SHOULD BE INCLUDED IN THE AREAS OF CONCERN ON THE SUMMARY PAGE.**
- If “NO” has been marked, a description **MUST be included under COMMENTS** and under **Concerns Identified by the Site Visit Team** section on the Summary Page of the report form.
- **ALL** areas of concern identified by the paper reviewer must be addressed as either resolved or unresolved.
- All comments included within the body of the document or on the Summary Page should be clear, concise and understood by all potential readers. Comments should be framed in complete sentences.

b) Summary Page

- Comment on any **Areas of Strength** identified by the Team.
- If “NO” has been marked, a description **MUST be included under COMMENTS** and under **Concerns Identified by the Site Visit Team** section on the Summary Page of the report form.
- Comment on any special circumstances not previously mentioned in the body of the report.

c) Signature Page

- Ensure that team members have signed the report.

Site visitors do not have the authority to speak on behalf of nor bind NAACLS regarding a program’s compliance with the Standards, nor can they predict accreditation actions. These responsibilities rest solely with the NAACLS Board of Directors, which has the exclusive right to determine whether or not accreditation/approval is to be granted or continued.

3. Instructions for Completing a Dissenting Report

If a team member disagrees with the entire report or a section of it, a separate Dissenting Report for these areas must be filed and signed.

The dissenting team member(s) must:

- Check *Do Not Concur* and sign the original report signature page.
- Prepare a typewritten report identifying the program, city, and date(s) of the site visit and the specific areas of non-concurrence. This report should be as specific as possible in explaining the reasons for non-concurrence with the report.
- Sign the dissenting report and submit it to NAACLS within three weeks after the site visit.

4. Completing a NAACLS Expense Report Form

Any expenses incurred during the site visit should be submitted to NAACLS by the specified due date (**within 30 days of the site visit**) with a completed NAACLS Expense Report.

Late expense reports must be accompanied by a written explanation for late submission for reimbursement. An electronic Expense Report will be sent directly to site visitors, can be

found on the NAACLS webpage and a paper copy is in the appendix (p. 28) of this document. *Please note that a delay in the submission of the expense report will lead to a delay in reimbursement. **If you are not going to submit an expense report, please inform the NAACLS Business Office immediately.***

a) Transportation Expenses

Include **all** transportation costs on the Site Visit Expense Report (airline, bus, train, personal car mileage, rental cars, taxis, subways, etc). If transportation was master billed to NAACLS, please include this information as well. Please provide receipts with the expense report. First class and private aircraft use will be reimbursed at coach rates. First class tickets and private aircraft use are reimbursed at coach rates. Use of a personal car to travel to a site visit destination must be pre-approved by NAACLS*. All mileage applicable to the site visit must be included in the expense report. Mileage will be reimbursed at the current IRS rate.

b) Lodging and Lodging Related Expenses

Include all lodging expenses including hotel bills, meals, internet use, and tips. NAACLS business related phone calls will be reimbursed. Meals required during periods of travel will be reimbursed. Original receipts should be included for all expenses whenever possible. All expenses over \$50 require a receipt be submitted.

The only expenses that can be master billed to NAACLS are those through Uniglobe Preferred Travel. No one is authorized to have any other expenses billed directly to NAACLS

Reimbursement of authorized expenses associated with site visits will not be made until the **Site Visit Report**, signed by all site visitors, is received in the NAACLS office. Delayed, unsigned or incomplete reports will lead to a delay in reimbursement. **If you are not going to submit an expense report, please inform the NAACLS Business Office immediately.**

c) Non-Reimbursable Expenses

The following represent expenses that will not be reimbursed by NAACLS:

- Travel expenses for a spouse or guest of a site visitor.
- Expenses of a personal nature, such as long-distance personal telephone calls, laundry or valet service.
- Entertainment expenses
- *Unauthorized rental cars
- *Unauthorized use of personal car

5. Evaluation and Assessment of the Accreditation Site Visit Process

a) Site Visit Process Evaluation

Each team member is asked to complete the Site Visit Process Evaluation following the site visit. The evaluation is completed electronically by going to the link that is provided by NAACLS staff. Assessment is a critical aspect of the accreditation process and

provides NAACLS with important data to use in evaluating the process and effectiveness of its volunteers. Data gathered from evaluations is used as part of NAACLS' self-evaluation and helps to support and strengthen the accreditation process.

b) Self-Study Report Review Evaluation

In addition to evaluating the site visit process, the Team Coordinator is asked to complete an Evaluation of the Self-Study Report Review. This evaluation is also completed electronically by going to the link provided by the NAACLS staff. Results from this evaluation serve to provide constructive feedback to the reviewer regarding the effectiveness of the Self-Study Report Review.

c) Site Visit Report Evaluation

The Review Committee for Accredited Programs (RCAP) will evaluate the overall usefulness of the Site Visit Report in preparing their recommendation of accreditation.

d) Evaluation Parameters

Site Visitors and the Site Visit Report are evaluated using the following criteria:

Format

- Was the report concise, clear and organized?
- Were all Standards adequately addressed?
- Were all identified concerns noted by Standard in the body of the report and comments provided?
- Were all sections of the report complete?

Content

- Were concerns noted by the paper reviewer listed in detail by Standard in the "Concerns Noted by the Self-Study Report Reviewer" section of the report?
- Were actions taken based on the paper reviewer's concerns listed in detail by Standard in "Concerns noted by the Self-Study Report Reviewer" section of the report?
- Were concerns identified by the site visitors listed by Standard and clearly summarized in the "Concerns of the Site Visit Team" section of the report?
- Were statements or comments in the report specific, objective and without opinions or recommendations?

ASPA - Member Code of Good Practice

The ASPA-Member Code of Good Practice is oriented toward the work of accrediting organizations as a guide in establishing the principles on which relationships with programs and institutions should be based. ASPA Members endorse these principles.

An accrediting organization holding full membership in the Association of Specialized and Professional Accreditors:

1. Promotes the development of educational quality:

- a. Focuses accreditation reviews on the development of student knowledge and competence in light of specific institutional and programmatic missions, goals, objectives, and contexts.
- b. Conducts reviews in a spirit that recognizes that teaching and learning are the primary purposes of institutions/programs.
- c. Places educational quality in accreditation reviews above special interests, politics or educational delivery models.

2. Exhibits integrity and professionalism in the conduct of its operations:

- a. Maintains autonomy and integrity in governance and operations through appropriate relationships and practices.
- b. Creates, documents and implements scope of authority, policies, and procedures to ensure objective decision making under a rule of law framework that includes attention to due process, systems of checks and balances, conflict of interest, confidentiality, expedient response to appeals and complaints and consistent application of standards.
- c. Develops, reviews and revises standards and accreditation procedures with the participation of communities of interest.
- d. Maintains sufficient financial, personnel, and other resources to carry out its operations effectively, while ensuring efficient and cost-effective accreditation processes for institutions/programs.
- e. Cooperates with other accrediting organizations as appropriate to avoid conflicting standards and to minimize duplication of effort by the institution/program.
- f. Provides thoughtful analyses to assist institutions/programs to find their own approaches and solutions, making a clear distinction between requirements for accreditation and recommendations for improvement.
- g. Provides accurate, clear, and timely information in a professional manner to the higher education community, to the professions, and to the public about standards and procedures for accreditation and the accreditation status of institutions/programs.
- h. Maintains a thorough and effective orientation, training, and professional development program for all accreditation personnel.
- i. Ensures that site teams have the appropriate expertise and experience for each specific review.
- j. Conducts evaluations of the accreditation process with institutions/programs that have experienced the accreditation process.
- k. Encourages institutions/programs to provide public information that is appropriate to their specific communities of interest.

3. Respects and promotes institutional independence and freedom in academic decision making:

- a. Encourages institutional independence and freedom to make academic decisions in light of the commitment to mutual accountability implied by participation in accreditation.
- b. Applies standards and procedures that respect the rights and responsibilities of institutions/programs to identify, designate and control their respective: missions and goals; educational and philosophical principles and methodologies; content; agendas and areas of study pursued through scholarship, research, and policy developments; administrative structures and staffing configurations; and methodologies and timing of tests, evaluations and assessments.
- c. Has standards and review procedures that allow for experimentation, encourage innovation, and promote thoughtful change that meets the needs and conditions in the profession and the communities served.

Self-Study Report Reviewer Qualifications

QUALIFICATIONS:

- Current or experienced program director, faculty member, clinical laboratory professional, physician or dean with knowledge of the clinical laboratory sciences.
- Current or prior association with a NAACLS accredited program.
- Currently licensed and/or credentialed and in good standing with the licensing/accrediting body, as appropriate.
- Education plus experience in curriculum design and teaching techniques.
- Familiarity with NAACLS' Standards.
- Familiarity with current practices in:
 - A. Clinical laboratory procedures.
 - B. Staffing, space, equipment, budgeting for clinical services and educational purposes.
 - C. Health professions education.
- Familiarity with the purposes of accreditation.
- Capacity for making objective assessments.
- Ability to meet deadlines.
- Ability to respect and maintain confidentiality of privileged information.
- Comfortable reading electronic documents (most Self-Studies are submitted using the PDF Self-Study Template created by NAACLS)

RESPONSIBILITIES:

Self-Study Report Reviewers
Read the program's Self-Study Report in the context of the Standards, analyzing the quantitative information provided.
Complete the Self-Study Report Review Form according to standard protocol for content and format.
Submit the Self-Study Report Review according to established timelines.

ESTIMATED TIME REQUIRED:

Activity	Estimated Time
Reading Self-Study Reports	4-5 hours
Organizing material	3 hours
Drafting Review	3 hours
Typing Review	Varies

Site Visitor Qualifications

QUALIFICATIONS:

- Current or experienced program director, faculty member, clinical laboratory professional, physician or dean with knowledge of the clinical laboratory sciences.
- Current or prior association with a NAACLS accredited program.
- Currently licensed and/or credentialed and in good standing with the licensing/accrediting body, as appropriate.
- Familiarity with NAACLS' Standards.
- Familiarity with current practices in:
 - A. Clinical laboratory procedures.
 - B. Staffing, space, equipment, budgeting for clinical services and educational purposes.
 - C. Health professions education.
- Familiarity with the purposes of accreditation and the protocol for conducting a site visit and reporting the outcome.
- Ability to conduct interviews and perform observational functions with discretion.
- Capacity for making objective assessments based upon established criteria.
- Ability to respect and maintain confidentiality of privileged information.
- Experience as a site visit team member is necessary to qualify as team coordinator. Satisfactory completion of NAACLS' Accreditation Process Workshop or Site Visitor Training Workshop is helpful but not mandatory to qualify as a team member.

RESPONSIBILITIES:

Team Members & Team Coordinators	Team Coordinators Only
Read the program's Self-Study Report in the context of its Paper Review and the Standards.	Conduct all communications with the program director to arrange the site visit and with the team member(s) to finalize schedule.
Note questions to be asked and particular observations to be made during the site visit per the comments made in the Self-Study Report and Paper Review.	Communicate with the program director to set up interview schedules for program and affiliate(s) personnel, students, etc.
Assist the team coordinator in scheduling the site visit.	Prepare a draft of the Site Visit Report, and circulate the draft to team member(s) for review and signature.
Conduct the site visit according to NAACLS protocol and in a professional manner.	Assure that all site visitors review and sign the Site Visit Report.

Assist in preparing the Site Visit Report.
Submit a NAACLS Expense Form and Site Visit Evaluation Form (according to instructions).

Submit final Site Visit Report to the NAACLS office within the prescribed allotted time (usually three weeks after the site visit date).
Submit the Paper Review Evaluation Form.

TIME REQUIRED:

The times provided below represent estimates for completion of the tasks listed.

Activity	Estimated Time
Travel	Varies
Site visit: Hospital based program	1 day
Academic based program	2 days
Reading Self-Study Reports	4-5 hours
Identifying questions, observations, etc.	2 hours
Scheduling site visit	2 hours
Drafting the Site Visit Report	1-3 hours
Typing and proofreading the Site Visit Report	1-3 hours

Volunteer mentors for Initial Program directors (VIP)

QUALIFICATIONS:

- **Volunteer Activity** – Candidate must have conducted at least one accreditation site visit as a Team Coordinator, and must have reviewed at least one self-study as a Paper Reviewer
- **Experience as Program Director** – Candidate must have at least 3 years of experience as program director of a NAACLS Accredited Program, including having gone through at least one successful accreditation review in which the maximum award of seven (7) years accreditation was awarded

RESPONSIBILITIES:

New Program VIPs would act as mentors to new program directors of programs applying for initial accreditation and have the following responsibilities:

- Answer general questions submitted via email. The time window in which New Program VIP's and new program directors will communicate will take place from the time the letter of intent to apply for accreditation has been received until the program has been awarded initial accreditation.
- Provide an annual report to the Review Committee for Accredited Programs (RCAP) of all communication.

Continuing Program VIPs would act as mentors to new program directors of programs that are already accredited with NAACLS, and have the following responsibilities:

- Answer general questions submitted via email. The time window in which Continuing Program VIP's and new program directors will communicate will take place for six months, beginning with the date the program director was approved by NAACLS.
- In the case that the new Program Director is one of temporary status (Acting Program Director or Program Supervisor w/ Consultant), the Continuing Program VIP must review the *Guide to Accreditation* with the Program Director, placing special emphasis on the standards and assure that any questions are answered. *A checklist will be provided.*
- Provide an annual report to the Review Committee for Accredited Programs (RCAP) of all communication.

TIME REQUIRED: Varies

To apply to be a VIP, simply indicate so on your updated Volunteer Information Form!!

Individuals that are considering volunteering as a NAACLS review committee member are highly encouraged to apply!

Volunteer Information Form



Volunteer Information Form

Name and Credentials, Title

Institution, Mailing Address

City, State, Zip

Telephone, Fax

Email

Are you fluent in Spanish? Y N

If you will be driving a vehicle while conducting NAACLS business, do you hold primary insurance?

Y N

Do you agree to provide NAACLS with the name, contact information and policy number of your insurance in the event of an incident? Y N

Did you change your position in the last year? Y N

Your Program Information:

- | | |
|------------------------------|--------------------------------------|
| <input type="checkbox"/> MLS | <input type="checkbox"/> Path. Asst. |
| <input type="checkbox"/> MLT | <input type="checkbox"/> DMS |
| <input type="checkbox"/> HTL | <input type="checkbox"/> CG |
| <input type="checkbox"/> HT | <input type="checkbox"/> PHLEB |
| | <input type="checkbox"/> CA |

Type of Institution:

- 4 Yr. 2 Yr. Hospital
 Other

Any additional program levels you would like to volunteer for:

AVAILABILITY IN 20 /20

I am available to serve as a **SITE VISITOR** during the following month(s):

20__	JAN <input type="checkbox"/>	FEB <input type="checkbox"/>	MAR <input type="checkbox"/>	APR <input type="checkbox"/>	-----	-----	-----	AUG <input type="checkbox"/>	SEP <input type="checkbox"/>	OCT <input type="checkbox"/>	NOV <input type="checkbox"/>	DEC <input type="checkbox"/>
20__	JAN <input type="checkbox"/>	FEB <input type="checkbox"/>	MAR <input type="checkbox"/>	APR <input type="checkbox"/>	-----	-----	-----	AUG <input type="checkbox"/>	SEP <input type="checkbox"/>	OCT <input type="checkbox"/>	NOV <input type="checkbox"/>	DEC <input type="checkbox"/>

I am available to serve as a **SELF-STUDY REPORT REVIEWER** during the following month(s):

20__	JAN <input type="checkbox"/>	FEB <input type="checkbox"/>	MAR <input type="checkbox"/>	APR <input type="checkbox"/>	MAY <input type="checkbox"/>	JUN <input type="checkbox"/>	JUL <input type="checkbox"/>	AUG <input type="checkbox"/>	SEP <input type="checkbox"/>	OCT <input type="checkbox"/>	NOV <input type="checkbox"/>	DEC <input type="checkbox"/>
20__	JAN <input type="checkbox"/>	FEB <input type="checkbox"/>	MAR <input type="checkbox"/>	APR <input type="checkbox"/>	MAY <input type="checkbox"/>	JUN <input type="checkbox"/>	JUL <input type="checkbox"/>	AUG <input type="checkbox"/>	SEP <input type="checkbox"/>	OCT <input type="checkbox"/>	NOV <input type="checkbox"/>	DEC <input type="checkbox"/>

Maximum number of **SITE VISITS** I am willing to do each year:

Maximum number of **SELF-STUDY REPORT REVIEWS** I am willing to prepare each year:

YOUR NAACLS EXPERIENCE

NUMBER OF TIMES SERVED	ATTENDED A NAACLS WORKSHOP?	VIEWED THE SITE VISITOR VIDEO at www.naacls.org/volunteer-center/	PARTICIPATED IN A NAACLS TELECONFERENCE ORIENTATION FOR SITE VISITORS?
Team Coordinator	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES
Team Member	Year attended	<input type="checkbox"/> NO	Year attended
Self-Study Reviewer	<input type="checkbox"/> NO		<input type="checkbox"/> NO

CONFLICT OF INTEREST – please list programs with which you have been affiliated, and therefore would not be able to review

ADDITIONAL ADDRESSES

Address for UPS, FED EX or others (if applicable):	Home Address (Optional):
Name/Title:	Name:
Program Level:	Mailing Address:
Institution:	City/State/Zip:
Mailing Address:	Telephone:
City/State/Zip:	E-mail:

Volunteer mentor for Initial Programs (VIP) – To apply, please check “Yes” if you comply with the following criteria:

Volunteer Activity – VIP Candidate must have conducted at least one accreditation site visit as a Team Coordinator (accredited programs only), and must have reviewed at least one self-study as a Self-Study Reviewer

Experience as Program Director – VIP Candidate must have at least 3 years of experience as program director of a NAACLS Accredited/Approved Program, including having gone through at least one successful accreditation/approval review resulting in the maximum allowable award.

Yes, I would like to be a VIP If “Yes”, please check one of the following: Initial Program VIP Cont. program VIP No Pref.

If selected, NAACLS Staff will inform you of your VIP appointment. New VIP Terms last for two years, and expire in February of even-numbered years. (7/2013)

PLEASE RETURN TO:
NAACLS, 5600 N. River Road, Suite 720, Rosemont, IL 60018 Fax: 773-714-8886 E-mail: info@naacls.org

Summary of Responsibilities for the NAACLS Accreditation Site Visit

	Team Coordinator (and/or Members)	Program Director (or officials)
Appointment of Team Members	<p>Upon finalization of team members and dates of visit, and receipt of program materials, review:</p> <ul style="list-style-type: none"> -Volunteer Manual -Self-Study Report -Self-Study Report Review -Program Response to Self-Study Report Review -Appropriate Standards for program being reviewed. -Site Visit Report form 	<p>Approve team members and finalize dates of visit.</p> <p>As soon as they become available, mail copies of the following documents to team members: Self-Study Report, Response to Self-Study Report Review.</p> <p>Mail the Program Response to the Self-Study Report Review to NAACLS by the due date (in addition to the above copies sent to team members.)</p>
Initial Contact	<p>Discuss travel and lodging arrangements with program director and team members.</p> <p>Plan itinerary with program director.</p>	<p>Confirm the site visit team and dates with faculty, administration, students and NAACLS</p> <p>Provide recommendations to the site visitors regarding travel and lodging near the institution.</p> <p>Discuss the itinerary with the team coordinator and key constituents of the institution/program.</p>
After Initial Contact	<p>Confer with other team members and the notify program director regarding additional information that must be made available and when the information is required.</p> <p>Establish final itinerary with program director, including appointments with those who need to be interviewed (i.e. students, graduates, administrators, faculty and contact person(s) from clinical site(s), etc.)</p>	<p>Schedule appointments with those who need to be interviewed (i.e. students, graduates, administrators, faculty, contact person(s) from clinical site(s), etc.)</p>
One Week (at least) Before Visit	<p>Confirm itinerary with members and program director.</p> <p>Confirm travel, lodging and on-site transportation with program director and team members</p>	<p>Confirm itinerary with institution and people scheduled for interviews.</p> <p>Confirm travel, lodging and on-site transportation arrangements for team members.</p>
During Visit	<p>Conduct site visit, including preliminary and exit interviews (team coordinator)</p>	<p>Communicate openly with site visitors.</p> <p>Be available to team members and</p>

Summary of Responsibilities for the NAACLS Accreditation Site Visit

	Team Coordinator (and/or Members)	Program Director (or officials)
	<p>Communicate openly and effectively with program director, officials and team members.</p> <p>Work with team members to complete the Site Visit Report, including signature page.</p>	<p>provide any requested documentation and information.</p>
After Visit	<p>Email completed and signed Site Visit Report to NAACLS by due date. Completed signature page can be faxed if needed.</p> <p>Forward completed:</p> <ul style="list-style-type: none"> -Completed and signed NAACLS Expense Report -NAACLS Site Visit Process Evaluation Form NAACLS Evaluation of the Self-Study Review Form (team coordinator) 	<p>Mail the Program Response to the Site Visit Report to NAACLS by established due date.</p> <p>Return the completed Post Site Visit Evaluation Form once it is received with Thank You letter from NAACLS.</p>
<i>Failure to fulfill these responsibilities can jeopardize the programs accreditation.</i>		

Possible Site Visit Schedule for University and Hospital based programs

(to be developed jointly by the Program Director and Team Coordinator)

Evening Before: Team Meeting: Review course materials at hotel.

<u>DAY ONE</u>	
8:30 – 9:00	Welcome conference (Universities: Program director, faculty, advisory committee or medical advisor/medical director, department chair, dean, and other administrative persons) ; (Hospitals: Program director, Chair of Pathology, Administrative Director, Chief of Operations, Supervisors/Faculty)
9:00 – 10:00	Meet with program director and review files
10:00 – 11:00	Meet with faculty/supervisors
11:00 – 12:00	Tour facilities (lab, classroom, library, computer, etc).
12:00 – 1:00	Lunch
1:00 – 1:30	Meet with Dean (university-based programs); Meet with Hospital Administrators (hospital-based programs)
1:30 – 2:00	Meet with Advisory Committee or Medical Advisor/Medical Director
2:00 – 2:30	Meet with current students
2:30 – 3:00	Meet with recent graduates
3:00 – 4:00	Further review of files and course materials
<u>DAY TWO</u>	
9:00 – 10:30	Meet with contact person(s) from each clinical affiliate (if applicable)
10:30 – 12:00	Finalize report and prepare exit interview
12:00 – 1:00	Lunch
1:00 – 2:00	Summarize findings of the report with program director
2:00 – 3:00	Exit interview

Sample Questions for University-Based Site Visits

NOTE: There are many questions that can be asked in interviews, but this document provides examples that are directly related to the Standards.

President, Provost, Dean

1. What are some of the current campus/institution's initiatives that specifically include the program? What is/will be the role of the program?
2. How is the program integrated into proposed campus/institution's initiatives?
3. How is the program integrated into the campus/institution's long range plan?
4. How is the program integrated into the institution's communities of interest?
5. What is the process for funding support for the program? How does this impact long range/continued growth and development of the program?
6. How is faculty development fostered across the institution?
7. In what direction is the institution moving in the area of web-based, asynchronous education?

Advisory Committee

1. How often do you meet together?
2. To what extent is your input sought by program officials?
3. Describe the general topics of the meetings? Are there opportunities for your participation in course, program development and evaluation?

Medical Director

1. What is your perceived value of having the program?
2. What role do you play in the program and to what extent are you involved?
3. Are you available for student counseling?
4. Do you and the Program Director meet regularly to discuss the program?

Faculty

1. Do you have input into the program and curriculum development?
2. Do you have input and involvement in program and curriculum evaluation?
3. To what degree is program evaluation used in the modification of the program and courses?
4. Do you have professional development opportunities that support your role in the program?
5. Is the Program Director accessible for your questions, comments and suggestions?
6. Do you have the proper space and resources to teach?

Students

1. Were you provided the program policies including safety and expectations when you began the program? At what point were these given to you?
2. Are you aware of policies for when you can be allowed to perform service work? When were these policies provided to you?
3. Are students expected to perform service work in the clinical settings outside of the regular academic hours?
4. Has written criteria been provided to you that describes the criteria for passing, failing and progression in the program? Do you understand these parameters? Do you know how to access your grades?
5. Are you aware of the grade appeal and student grievance policies?
6. Were you provided a copy of the Essential Functions required for success in the program? Do you understand their purpose?
7. Are healthcare services provided for the students?
8. Is counseling available and confidentiality maintained?
9. Do you know what to do and where to go if you get hurt?
10. Do you have access to the program director and/or faculty? Do you feel as though he/she/they are available and are responsive to your needs and concerns.
11. Do you find that your experiences during the rotations in departments provide you with enough hands on experience? Are there excessive periods when you do not have direct, related educational opportunities?
12. Does the faculty teach effectively and at the appropriate level?
13. Did you feel that instruction is at the proper level?
14. What is it you really like about the program?
15. What would you like to see improved or changed?
16. Do you get attention when in rotations? Were you provided a checklist outlining those objectives you need to meet?
17. Would you stay and work here if you could?
18. Any comments or issues you would like to tell us? Any questions?

Recent Graduates:

1. What would you say were the strengths of the program? What would you have changed?
2. Were program officials and faculty available and responsive to your needs?

3. Would you attend this program again?
4. Did you feel prepared for your first job? Was the program and rotations the appropriate length?
5. Did you feel prepared for your certification exams?
6. Do you feel the program followed fair practices? Were grading practices fair? Did they follow published policies?
7. Were there any instances of appeals during your time in the program? Were they resolved as described in institutional policies?

Sample Questions for Hospital-based Site Visits

NOTE: There are many questions that can be asked in interviews, but this document provides examples that are directly related to the Standards.

Administrators

1. What is the general philosophy of this institution regarding teaching programs?
2. Describe the types of support given to the program?
3. What is the perceived value of having the program?
4. Do you anticipate continued fiscal and administrative support for the program?
5. What is the anticipated need for the program in this region? How does the institution intend to support those needs?
6. What is the education policy of the hospital? Is money available for the funding of professional development of key program officials and faculty?
7. How is the budget process implemented for the laboratory science program? To what degree is the program director involved?

Advisory Committee

1. How often do you meet together?
2. To what extent is your input sought by program officials?
3. Describe the general topics of the meetings? Are there opportunities for your participation in course, program development and evaluation?

Medical Director

1. What is your perceived value of having the program?
2. What role do you play in the program and to what extent are you involved?
3. Are you available for student counseling?
4. Do you and the Program Director meet regularly to discuss the program?

Faculty

1. Do you have input into the program and curriculum development?
2. Do you have input and involvement in program and curriculum evaluation?
3. To what degree is program evaluation used in the modification of the program and courses?
4. Do you have professional development opportunities that support your role in the program?
5. Is the Program Director accessible for your questions, comments and suggestions?

6. Do you have the proper space and resources to teach?

Current Students

1. Were you provided the program policies including safety and expectations when you began the program? At what point were these given to you?
2. Do you know what to do and where to go if you get hurt?
3. Do you have access to the program director and/or faculty? Do you feel as though he/she/they are available and are responsive to your needs and concerns.
4. Do you find that your experiences during the rotations in departments provide you with enough hands on experience? Are there excessive periods when you do not have direct, related educational opportunities?
5. Has written criteria been provided to you that describes the criteria for passing, failing and progression in the program? Do you understand these parameters? Do you know how to access your grades?
6. Did you feel that instruction was at the proper level?
7. What is it you really like about the program?
8. What would you like to see improved or changed?
9. Do you get attention when in rotations? Were you provided a checklist outlining those objectives you need to meet?
10. Would you stay and work here if you could?
11. Is confidentiality maintained when you talk with the Program Director?
12. Any comments or issues you would like to tell us? Any questions?

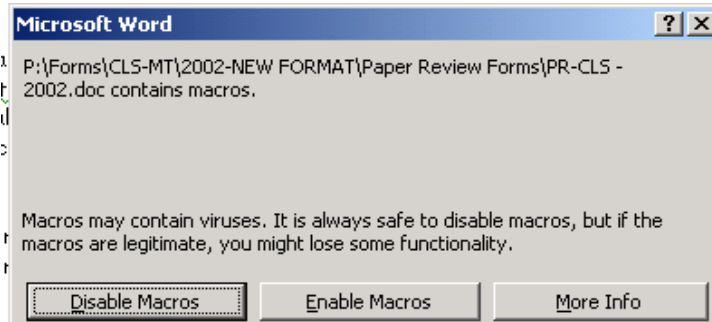
Recent Graduates:

1. What would you say were the strengths of the program? What would you have changed?
2. Were program officials and faculty available and responsive to your needs?
3. Would you attend this program again?
4. Did you feel prepared for your first job? Was the program, and rotations the appropriate length?
5. Did you feel prepared for your certification exams?
6. Do you feel the program followed fair practices? Do you believe that grading practices were fair? Did they follow published policies?
7. Were there any instances of appeals during your time in the program? Were they resolved as described in institutional policies?

Working With the Report Forms

(Paper Review and Site Visit)

1. If you receive the following dialog box when opening the report form, click "enable macros." The dialog box states that the file contains macros, and "macros may contain viruses. It is always safe to disable macros, but if the macros are legitimate, you might lose some functionality".



The report forms do contain macros, but they are not harmful. If the macros are disabled, you will not be able to use a lot of the functions that you normally would.

2. The form is document-protected (locked), but can be unprotected (unlocked) to run spell check, cut/copy and paste, italicize, print, etc.
3. The document **must** be protected (locked) in order to properly utilize the checkboxes and textboxes. To fill in the form, ensure that it is protected (locked). To determine whether the form is protected (locked), place the cursor over a checkbox and click. If an "x" does not appear in the checkbox, the form is un-protected (un-locked).

To protect (lock) the form:

<p><u>Word 2002</u></p> <p>>Click on the "tools" command at the top of the screen. Scroll down and select "protect document".</p>	<p><u>Word 2007</u></p> <p>>Click on the Review at the top of the screen</p> <p>>Click on Protect document, then Restrict Formatting and Editing</p> <p>> Under Item 2, Editing restrictions, select Filling in Forms, then Yes, Start Enforcing Protection. Keep the password area blank.</p>
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4. To unprotect (unlock) the document to run spell check, cut/copy and paste, italicize, print, etc., follow the directions below.

To unprotect the document:

<p><u>Word 2002</u></p> <p>>On the View menu, point to Toolbars.</p> <p>>Click "Forms". The forms toolbar appears.</p> <p>Click the padlock to un-protect (un-lock) the form.</p>	<p><u>Word 2007</u></p> <p>>Click on the Review at the top of the screen</p> <p>>Click on Protect document</p> <p>>Click on Stop Protection</p>
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Be sure to relock the document and save it to your hard drive.

5. When the report has been completed, click on "save as" and name the document.
6. To insert a scanned image of your signature on the signature page, the report form should be unprotected (unlocked).

FEDERAL INSURANCE COMPANY (the "company")

Beneficiary Designation Request

INSTRUCTIONS: Complete this form and retain a copy with your important papers.

Indicate: Original Designation
 Change of Beneficiary

Policyholder: NAACLS

Policy Number: 9905-00-16

Name of Insured _____

Address _____ City _____ State _____ Zip Code _____

Hereby revoking any and all previous designations, I designate the person(s) on this form as my Beneficiary(ies) to receive any payment from the policy or certificate number shown above. I fully understand that this designation of Beneficiary(ies) only applies to the full Accidental Loss of Life Benefit Amount that is in force.

Date: _____

Insured's Signature: _____

_____%
Name of Beneficiary _____ Relationship _____

Address _____ City _____ State _____ Zip Code _____

_____%
Name of Beneficiary _____ Relationship _____

Address _____ City _____ State _____ Zip Code _____

_____%
Name of Beneficiary _____ Relationship _____

Address _____ City _____ State _____ Zip Code _____

_____%
Name of Beneficiary _____ Relationship _____

Address _____ City _____ State _____ Zip Code _____

Chubb Identification Card

Important Information: Travel and Medical Assistance Provider

When traveling for business or pleasure, you can now feel confident that you are in safe hands if an emergency arises. Chubb partners with Europ Assistance, a leading global medical assistance provider, to give you 24/7 access to medical and travel assistance services around the world.

With medical assistance services from Europ Assistance, help is only a phone call away. Europ Assistance has a local presence in 200 countries and territories worldwide, including 35 assistance centers staffed with multilingual assistance coordinators, case managers, and medical staff.

If you are insured and need to locate medical care, Europ Assistance is available for timely help anywhere around the world. Europ Assistance provides the following services worldwide:

Medical Assistance Services:

- Medical provider search and referrals to help find hospitals and doctors in a given locale
- Medical monitoring of treatment
- Facilitation of medical payment
- Coordination of medication

Medical Evacuation and Repatriation Services:

- Emergency medical evacuations and medically necessary repatriation
- Coordinate transportation to join a hospitalized family member
- Dependent children/traveling companion assistance

Europ Assistance Contact Information

Toll free in the U.S. or Canada: 1.800.243.6124

From other international locations, call collect: 1.202.659.7803

Travel Risk Intelligence Portal

As part of your Chubb insurance solution, insureds can access Europ Assistance's website that features information and tools to support travelers before and during their travel excursions. The site contains real-time destination-based health, security and travel-related information including:

- Country and city risk ratings and profiles
- Health, medical, safety and security reports per locale
- Information on business conduct, transportation, holidays, currency exchange rates, etc.
- Mitigation tips and consulate contacts
- News and real-time security alerts
- General travel information

The Europ Assistance portal also includes useful tools to help minimize the inconvenience associated with international travel and support travelers in an emergency, such as translators for drugs and medical terms.

Access the portal:

Go to the URL listed below to access Europ Assistance's portal and click on the "Sign Up Now" link in the gray **Log In** box. Use your **Group ID** and **Activation Code** to fill out the registration information.

Once registered, an automated e-mail will be sent to confirm your registration. Follow the link in this email to complete your registration. You can now access the Europ Assistance portal site at any time using your new login and password.

URL: www.acetravelassistance.com

Group ID: aceah

Activation Code: security

For medical referrals, evacuation, repatriation or other services please call:

Chubb Travel Assistance Program
 1-800-243-6124 (Inside the USA)
 1-202-659-7803 (Outside the USA Call Collect)
 OPS@europassistance-usa.com

Visit **www.ACETTravelAssistance.com** for access to global threat assessments and location based intelligence.

Register to access the site using the Group ID and Activation Code below:

Group ID: aceah
 Activation Code: security

Travel Assistance Program

Plan Number: 01AH585
 Organization: NATIONAL ACCREDITING AGENCY FOR CLINICAL LABORATORY SCIENCES
 Policy Number: 9905-00-16
 Assistance Provider: Europ Assistance USA

Europ Assistance provides emergency medical and travel services and pre-trip information services. Please call when:

- You require a referral to a hospital or doctor
- You are hospitalized
- You need to be evacuated or repatriated
- You need to guarantee payment for medical expenses
- You experience local communication problems
- Your safety is threatened by the sudden occurrence of a political or military event

Expense Report

Identity Theft Protection Services

Identity Theft Protection

When you travel for business, we make it our business to protect your identity.

Identity Theft Protection for Business Travelers¹, provided through Chubb, protects your identity while you're away –



Your protection benefits are yours for as long as you remain insured under the Chubb Business Travel Accident policy.

¹Actual coverage provided through Alliance Group of Inter Group Inc. Insurance Services provider. Chubb does not have any ownership interest in Alliance Group. Chubb, Alliance and member companies of The United Group of Insurance Companies are not affiliated.

²Truly worldwide will exclude losses of all new acquisitions and voluntary transfers of assets, all fire, theft, or damage of all types that are not subject to the actual cash value payment of the insured, and all losses or expenses of any kind that are not subject to the actual cash value payment of the insured, and all losses or expenses of any kind that are not subject to the actual cash value payment of the insured.

³Some financial institutions may require that you provide a copy of your identification documents to the institution in order to receive a replacement card.

Please detach your personal Identity Theft Protection card before and bring it with you on your trip at all times. Also, keep a copy of the phone number in a safe place in case you lose this card.

Pack your bags and relax, you're covered with Identity Theft Protection.

Traveling is stressful enough as it is. The last thing you should have to worry about is becoming the victim of an identity thief. That's why as a covered person under Chubb's Business Travel Accident policy you are eligible for Identity Theft Protection for Business Travelers. With Identity Theft Protection for Business Travelers you're better protected from the often devastating consequences of identity theft. *Whether you're a few hours from home or across the globe, you're only one toll-free call away from the Identity Theft professionals, who are here to help you protect your personal assets and restore your peace of mind.*

If you believe you may be a victim of fraud, call 1-866-299-7277 (toll-free), 24/7.

If you've ever had the misfortune of losing your passport, boarding pass, or wallet while you were traveling, then you know how stressful and costly it can be. Plus, with the current threat of fraud and identity thieves looking to access your confidential information, a stressful situation just became ten times worse. And none of this accounts for the time you'll spend away from your important business.

Identity Theft Protection for Business Travelers will help you defend your identity and recover any lost or stolen documents. With your first phone call to 1-866-299-7277.

- You'll be assigned a dedicated caseworker who will work with you every step of the way, helping you to restore your identity should you become the victim of fraud.
- You'll also receive a Customized Identity Fraud Resolution Kit that provides you with valuable information, including forms you'll need to alert credit bureaus and authorities.
- And we'll help you place Fraud Alerts at the appropriate credit bureaus, establish Police Reports, and set up Credit Monitoring³ for you, helping you to mitigate any residual damage to your identity.

Return home stress-free without ever losing touch with your loved ones.

Lost or stolen financial and identification documents are a leading cause of identity theft. Now you can rest easy knowing that ID Theft Protection for Business Travelers provides assistance with:

- Helping you contact card issuers to cancel and replace lost or stolen cards.⁴
- Locating the local Embassy or Consulate to replace lost documents such as your passport or visa.
- Contacting your family or friends back home.

Identity Theft Protection for Business Travelers is here to help you travel with peace of mind and return home stress-free.

IDENTITY THEFT PROTECTION SERVICES		IDENTITY THEFT PROTECTION SERVICES	
		WORLDWIDE & TOLL FREE 24/7	
		For Round-the-Clock Fraud Support, call	
		1-866-299-7277 toll free, 24/7	
Group No: 99356680 Policy No: 9905-00-16 1/1		Please refer to local country sitting instructions and make sure to use a photocopy from the international section.	
Identity Theft Protection		Identity Theft Protection	

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Employment/Position Change Form Review

Eligibility confirmed. No further action is needed.

Ineligibility confirmed. Committee position must be vacated within one year.

REVIEW COMPLETED BY:

Chief Executive Officer:

Date:

NAACLS Board President:

Date:

Nominations Committee Chair:

Date: