NAACLS Guidelines for Rationale and Recommendations of Motions

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Using the Rats and Recs

1. Using the Table of Contents, click on the Standard for which there is a concern.

2. Insert the complete Standard language into the correct boxes in the Minutes and Motion for Standard. If the Standard has separate sections, you only need the portion of the Standard that applies to concerns noted in the accreditation process.

3. Find the Rationale that best describes the concern and insert it into the Rationale box in the Motion. Modify the statements as needed to best describe the concern found through the accreditation process.

4. Use the Recommendation for that citation and insert into the Recommendation box in the Motion. Modify the statements as needed to best describe the concern found through the accreditation process.

5. Information in italics represents instructions for the authors of the Minutes and Motions and should be removed from the final Minutes and Motions documents.

Standard I: Sponsorship

I.A: Sponsoring Institution

A. Sponsoring institution: educational sponsors must be one of the following:

1. A post-secondary academic institution accredited by an institutional accrediting agency that is recognized by the U.S. Department of Education and given the authority to provide post-secondary education, which awards a minimum of a certificate at the completion of the program.
2. A hospital, medical center, or laboratory accredited or licensed by an applicable recognized agency (see Standards Compliance Guide), which awards a minimum of a certificate at the completion of the program.
3. A secondary or post-secondary institution, recognized by the state in which it is located. (for phlebotomy and medical laboratory assistant programs only).
4. An institution recognized by the national government or a regional/national accrediting agency for higher education of the country in which it is located as a post-secondary academic institution with degree granting authority. (for programs outside of the United States).
5. A public health laboratory or an organization/corporation of member public health laboratories recognized by the state in which it is located and not affiliated with a hospital, medical center or accredited secondary or post-secondary institution.

Partial Compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, sponsoring institution is not accredited by an institutional accrediting agency recognized by the US Department of Education or recognized accrediting agency of hospitals, labs, medical centers, or recognized by the state or national government as described in Standard I.A.1-5.	Submit documentation that supports the correct type of sponsorship: ● A.1 - sponsoring institution has current accreditation by an institutional accrediting agency recognized by the US DoE ● A.2 - sponsoring institution has current accreditation by a recognized agency; see Standards Compliance Guide **(for hospital-based programs)** ● A.3 - sponsoring institution is recognized by the state in which the program is located **(for PBT and MLA programs only)** ● A.4 - sponsoring institution is currently recognized by a national, governmental, or regional accrediting agency for higher education of the country the program is located **(for programs outside of the US)** ● A.5 - sponsoring institution is recognized by the state in which the program is located as a public health laboratory.

I.B: Responsibilities of the Sponsor / Program Partner

1. The sponsor is responsible for:
    a. Ensuring that all provisions of the standards are met
    b. Curriculum development
    c. Maintaining student transcripts permanently
    d. Defining its administrative line of authority
2. The sponsor and/or program partner are responsible for:
    a. Course selection by program faculty and staff.
    b. Appointing faculty and staff.
    c. Granting the degree and/or certificate documenting satisfactory completion of the educational program.
    d. Ensuring that appropriate personal safety measures are addressed for student and faculty.
    e. Ensuring that graduates of the program have obtained or will obtain the minimum degree and/or certificate upon completion of the program:
        i. *Path A programs:* Master's degree or higher, or a certificate for students who hold or complete the required degree.
        ii. *BMS, CG, DMS, HTL, MLBBS, MLM, MLS, and PHM program*s: a bachelor's degree or higher, or a certificate for students who hold or complete the required degree.
        iii. *HT and MLT programs*: an associate degree or higher, or a certificate for students who hold or complete the required degree.
        iv. *MLA and PBT program*s: a certificate for the student
    f. Ensuring that the activities assigned to students in the clinical/applied learning settings are educational.
3. There must be documented ongoing communication between the sponsor and/or program partner and its active affiliates for exchange of information and coordination of the program.
4. The sponsor and/or program partner must provide eligible students with the opportunity to participate in clinical/applied learning.
5. The sponsor and/or program partner must have a formal affiliation agreement or memorandum of understanding (MOU) with affiliates who are involved in the education of the students, which describes:
    a. the relationship
    b. the roles
    c. the responsibilities of the sponsor and/or program partner and that entity

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, sponsoring institution is **missing up to two of the following responsibilities described in Standard I.B.1-5.** *[identify and list missing responsibilities from Standards I.B.1-5].*	Submit documentation that supports the sponsoring institution meets the following responsibilities described in Standard I.B.1-5. *[identify and list missing responsibilities from Standards I.B.1-5].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, sponsoring institution is **missing three or more of the following responsibilities described in Standard I.B.1-5** *[identify and list missing responsibilities from Standards I.B.1-5].*	Submit documentation that supports the sponsoring institution meets the following responsibilities described in Standard I.B.1-5 *[identify and list missing responsibilities from Standards I.B.1-5].*

Standard II: Assessment & Continuous Quality Improvement

II.A: Systematic Assessment

There must be a documented plan for continuous and systematic assessment of the effectiveness of the program.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program plan for assessment is incomplete and **missing one of the following:** ● Assessment of program effectiveness is incomplete ● Frequency of evaluation of assessment is infrequent or inconsistent to determine effectiveness of the program	Submit documentation of a formal plan to evaluate a program's systematic assessment for continuous quality improvement. The plan should demonstrate consistent frequency of evaluation and clear descriptions to assess program effectiveness.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program plan for continuous quality improvement and systematic evaluation of effectiveness does not exist or was not provided.	Submit a formal plan of continuous quality improvement and systematic evaluation of program effectiveness with consistent frequency and clear descriptions to assess effectiveness.

II.B: Outcome Measures

The following outcome measures must be documented and submitted to NAACLS annually for use in program assessment and continuous quality improvement.

1. External certification rates
2. Graduation rates
3. Job Placement rates / Continuing Education rates
4. Attrition rates
5. Other (optional)

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program outcome measures are **missing up to one of the following:** ● All required outcome measures have three years of data *[identify missing data].* ● Three years of data was collected but not analyzed. ● Three years of data was collected and analyzed but not used for program improvement. ● (IF APPLICABLE) Analysis and action plan were not submitted to show program progression towards meeting NAACLS benchmarks if the program is below NAACLS benchmark standard.	Submit evidence that program outcomes are measured, analyzed, and used in determining programmatic quality improvements and effectiveness of programs. *If Applicable:* Submit evidence that all program outcome measures have three years of data [*identify missing data].* Submit evidence and analysis of action plan for program progression towards meeting NAACLS benchmarks.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program outcome measures are **missing two or more of the following:** ● All required outcome measures have three years of data *[identify missing data].* ● Three years of data was collected but not analyzed. ● Three years of data was collected and analyzed but not used for program improvement. ● (IF APPLICABLE) Analysis and action plan were not submitted to show program progression towards meeting NAACLS benchmarks if program is below NAACLS benchmark standard.	Submit evidence that program outcomes are measured, analyzed, and used in determining programmatic quality improvements and effectiveness of programs. *If Applicable:* Submit evidence that all program outcome measures have three years of data [*identify missing data].* Submit evidence and analysis of action plan for program progression towards meeting NAACLS benchmarks.

II.C: Feedback

The following findings must be collected and used in the program assessment and continuous quality improvement.

1. findings from graduate feedback (≥ three months after program completion)
2. findings from employer feedback (≥ three months after program completion)

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing data for up to one of the following**: ○ Graduate Feedback ○ Employer Feedback ● Feedback is analyzed but not used in program assessment and continuous quality improvement. ● Graduate or employer feedback is collected less than three months after program completion. ● Feedback is prospective and unable to be analyzed at time of reaccreditation.	Submit documentation that demonstrates graduate and employer feedback is collected at the appropriate time, analyzed and used for making programmatic improvements.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing data for:** ○ graduate feedback ○ employer feedback ● Feedback is analyzed but not used in program assessment and continuous quality improvement. ● Graduate or employer feedback is collected less than three months after program completion. ● Feedback is prospective and unable to be analyzed at time of reaccreditation.	Submit documentation that demonstrates graduate, and employer feedback is collected at the appropriate time, analyzed and used for making programmatic improvements.

II.D: Program Assessment and Modification

All programs must make efforts to continually improve by:

1. Review of required feedback and last three active years of required outcome measures.
2. Analysis of curriculum development, resource acquisition/allocation.
3. Modifications made based on analysis of required feedback and/or outcome measures.
4. Assessment of effectiveness resulting from any changes implemented.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, the program is **missing up to two items listed in Standard II.D.1-4, specifically** *[insert missing items from Std. II.D.1-4].*	Submit documentation that supports continuous improvement efforts, analysis of adequate resource management, curriculum design/development, and effectiveness of any changes made over time as described in Standard II.D.1-4 *[insert missing items from Std. II.D.1-4].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, the program is **missing three or more items listed in Standard II.D.1-4, specifically** *[insert missing items from Std. II.D.1-4].*	Submit documentation that supports continuous improvement efforts, analysis of adequate resource management, curriculum design/development, and effectiveness of any changes made over time as described in Standard II.D.1-4 *[insert missing items from Std. II.D.1-4].*

Standard III: Resources

III.A: General Resources

1. The sponsor must provide sufficient financial resources for the continued operation of the educational program to meet documented goals.
2. Resource assessment of personnel and physical resources must be a part of continuous program evaluation.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, general resources are **missing one of the following:** ● Financial resources are insufficient to maintain program support, outcomes, or operations. ● Assessment of personnel and physical resources is infrequent so continuous evaluation of program needs cannot occur.	Submit documentation of evidence of financial support for general resources and program maintenance, **OR** assessment of personnel and physical resources as part of continuous programmatic evaluation.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, general resources are **missing both of the following:** ● Financial resources are insufficient to maintain program support, outcomes, or operations. ● Assessment of personnel and physical resources is infrequent so continuous evaluation of program needs cannot occur.	Submit documentation of evidence of financial support for general resources and program maintenance, **AND** assessment of personnel and physical resources as part of continuous programmatic evaluation.

III.B: Personnel Resources

1. The sponsor must appoint a sufficient number of personnel to achieve program outcomes.

Partial compliance:

Rationale	Recommendation
No partial compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, personnel resources are insufficient to achieve program outcomes (or supported by other findings during the review process) as described in Standard III.B.	Submit evidence that the program has sufficient numbers of qualified personnel to achieve program outcomes, such as documentation that a position(s) has been filled, that current staff have received training, and/or that current staff have appropriate credentials or have completed appropriate professional development activities.

III.C: Physical Resources

1. The sponsor must provide physical resources such as facilities, equipment and supplies, information resources, and instructional resources sufficient to achieve program outcomes.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, physical resources are **missing in up to two of the following:** ● Adequate *[insert classroom, lab space, admin space, clinical sites, etc.]* are not provided or sufficient to meet program outcomes. ● Students are not provided reasonable access to, or experience with, modern equipment and supplies in *[insert areas of curriculum].* ● Students are not provided access to information resources for *[insert areas of curriculum].* ● Instructional resources are inadequate to facilitate each student's attainment of entry-level competencies in *[insert areas of the curriculum].*	Submit documentation of evidence that physical resources are adequate to meet program outcomes and student needs for Standard III.C.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, physical resources are **missing in three or more of the following:** ● Adequate *[insert classroom, lab space, admin space, clinical sites, etc.]* are not provided or sufficient to meet program outcomes. ● Students are not provided reasonable access to, or experience with, modern equipment and supplies in *[insert areas of curriculum].* ● Students are not provided access to information resources for *[insert areas of curriculum].* ● Instructional resources are inadequate to facilitate each student's attainment of entry-level competencies in *[insert areas of the curriculum].*	Submit documentation of evidence that physical resources are adequate to meet program outcomes and student needs for Standard III.C.

Standard IV: Students

IV.A: Publications and Disclosures

1. The following must be defined, published, and readily available to **prospective and enrolled students**:
    a. Program mission statement.
    b. Program goals and graduate competencies.
    c. Programmatic accreditation status including the name, address and contact information for NAACLS.
    d. Results of external certification outcomes, graduation rates outcomes, placement rates outcomes of the last three active years.
    e. List of active partners, academic affiliates and clinical/applied learning facilities.
    f. Admission criteria, including essential functions, advance placement, transfer of credits and credits for experiential learning.
    g. List of course descriptions including the number of academic credit hours per course (if appropriate).
    h. Names and academic rank or title of the program director and faculty (and medical director for pathologists' assistant programs).
    i. Current tuition and fees including withdrawals and refund policies.
    j. Policies and processes by which students may perform direct patient and/or reportable work.
    k. Policies and procedures for:
        i. Advising and guiding students through the program while maintaining confidentiality and impartiality.
        ii. Obtaining clinical/applied learning assignments, specifically addressing if applied learning experiences are not provided through programmatic processes or cannot be immediately guaranteed.
        iii. Student grievance and appeals.
        iv. Program completion, probation, suspension, dismissal, and academic appeals.
    l. Academic calendar.
    m. Rules and regulations governing acceptable personal and academic conduct, including expectations for behavior while completing clinical/applied learning.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, **up to two items are missing** from Standard IV.A.1.a-m; specifically *[insert items].*	Submit documentation that demonstrates defined, published, and readily available items a-m of Standard IV.A.1 are available to prospective and current students.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, **three or more items are missing** from Standard IV.A.1.a-m; specifically *[insert items].*	Submit documentation that demonstrates defined, published, and readily available items a-m of Standard IV.A.1 are available to prospective and current students.

IV.B: Student Records

1. The program must maintain student records, conforming to any governmental or sponsor regulations.
2. The student transcript/student record must be retained permanently by the sponsor and contain at least:
    a. legal name
    b. grades and credits
    c. dates of admission and completion

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing one of the following items:** ● student records are maintained to conform with governmental or sponsor regulations. ● student transcripts/student records are missing legal name, grades and credits, dates of admission and completion. ● student transcripts/student records are permanently maintained at the sponsoring institution.	Submit documentation that demonstrates how student records conform with governmental or sponsor regulations/policy, how transcripts and records contain full legal name, grades/credits, and dates of admission/completion of program, and that student records are kept permanently at the sponsoring institution.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing two or more of the following items:** ● student records are maintained to conform with governmental or sponsor regulations. ● student transcripts/student records are missing legal name, grades and credits, dates of admission and completion. ● student transcripts/student records are permanently maintained at the sponsoring institution.	Submit documentation that demonstrates how student records conform with governmental or sponsor regulations/policy, how transcripts and records contain full legal name, grades/credits, and dates of admission/completion of program, and that student records are kept permanently at the sponsoring institution.

IV.C: Health and Safety

1. Health
    a. The program must provide evidence that the health and safety of students, faculty, patients, and program specific staff is safeguarded.
2. Safety
    a. The program must provide evidence that each enrolled student, all faculty members, and program specific staff have received biohazard and safety training.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing up to two of the following items:** ● documentation of policies and procedures to protect the health and safety of students. ● documentation of policies and procedures to protect the health and safety of program faculty and staff. ● documentation of policies and procedures to protect the health and safety of patients ● documentation of that students have received biohazard training. ● documentation that students have received safety training. ● documentation that faculty and staff have received biohazard training. ● documentation that faculty and staff have received safety training.	Submit documentation of policies and procedures that protect the health and safety of students, faculty, program staff [insert missing documents as appropriate by students, faculty, program staff, patients]. Submit documentation of completed health, safety, and biohazard training for students, program faculty, and staff.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing three or more of the following items:** ● documentation of policies and procedures to protect the health and safety of students. ● documentation of policies and procedures to protect the health and safety of program faculty and staff. ● documentation of policies and procedures to protect the health and safety of patients ● documentation of that students have received biohazard training. ● documentation that students have received safety training. ● documentation that faculty and staff have received biohazard training. ● documentation that faculty and staff have received safety training.	Submit documentation of policies and procedures that protect the health and safety of students, faculty, program staff [insert missing documents as appropriate by students, faculty, program staff, patients]. Submit documentation of completed health, safety, and biohazard training for students, program faculty, and staff.

Standard V: Operational Policies

V.A-V.G: Fair Practices

A. Student recruitment and admission must be non-discriminatory in accordance with existing governmental regulations and those of the sponsor.
B. Faculty recruitment and employment practices must be non-discriminatory in accordance with existing governmental regulations and those of the sponsor.
C. The granting of the degree or certificate must not be contingent upon any type of external certification or licensure examination.
D. A general plan must be provided, addressing temporary and permanent program closure. In the event of such closure, a detailed plan which includes provisions for current students to complete their course of study must be submitted to NAACLS within 30 days of the official announcement
E. Students must have an assigned preceptor, appropriate for the discipline, who directly oversees their clinical/applied learning.
F. Students may not be substituted for laboratory employees/personnel to perform direct patient and/or reportable work, during their clinical/applied learning.
G. Student employment at a clinical/applied learning site must be non-compulsory and must be outside of assigned applied learning /academic hours.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing up to two items** in Standard V.A-G, specifically *[insert missing item(s) from Std. V.A-G].*	Submit documentation that demonstrates program practices are fair and compliant with Standard V.A-G.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing three or more items** in Standard V.A-G, specifically *[insert missing item(s) from Std. V.A-G].*	Submit documentation that demonstrates program practices are fair and compliant with Standard V.A-G.

Standard VI: Administrative: Maintaining Accreditation

Partial compliance:

Rationale	Recommendation
N/A - NAACLS Staff Only	N/A - NAACLS Staff Only

Non-compliance:

Rationale	Recommendation
N/A - NAACLS Staff Only	N/A - NAACLS Staff Only

Standard VII: Professional Education Program Administration

Biomedical Scientist Program (BMS)

VII.A.1: BMS Program Director Qualifications

The program director must be a laboratory professional who:

1. Qualifications - the program director must have:
    a. an earned a Master's degree or Doctoral degree.
    b. a relevant certificate, licensure, or recognition appropriate for the field
    c. three years of teaching experience
    d. knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.
    e. (for international programs only) If the program director does not hold relevant certification, licensure, or recognition appropriate for the field, a qualified professional who does hold relevant certification, licensure, or recognition appropriate for the field must hold appointment as an accreditation liaison.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing one or more of the following:** ● Master's or doctorate degree. ● Relevant certification, licensure, or recognition appropriate for the field. ● Three years of teaching experience ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes. **International programs only**: Program director lacks relevant certificate, licensure or recognition for the field, and no accreditation liaison has been appointed.	Submit documentation that verifies the program director meets the following qualifications under Standard VII.A.1: ● Master's or doctorate degree. ● Relevant certification, licensure, or recognition appropriate for the field. ● Three years of teaching experience. ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes. **International programs only**: Submit documentation that an accreditation liaison has been appointed for the program.

VII.A.2: BMS Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, administration, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific missing items of **Std. VII.A.2.a***]. ● Input into budget and finance needs of program. ● At least 36 hours of CE every three years ● Documentation that maintaining NAACLS accreditation is a responsibility. ● Regular communication with students, faculty, administration, and program personnel.	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std.VII.A.2. a, specifically [*identify specific missing items of **Std. VII.A.2.a***]. ● Input into budget and finance needs of the program. ● At least 36 hours of CE every three years. ● Documentation that maintaining NAACLS accreditation is a responsibility. ● Regular communication with students, faculty, administration, and program personnel.	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2.: *[insert missing items from rationale].*

VII.A.3: BMS Program Director Appointments

The program director must have a faculty or clinical appointment at the sponsoring institution.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided that the program director has a faculty or clinical appointment at the sponsoring institution.	Submit documentation that demonstrates the program director has a faculty or clinical appointment at the sponsoring institution.

VII.B.1: BMS Site Program Administrator Qualifications

1. Qualifications – the site program administrator must:
    a. Have a degree appropriate with the program level
    b. Hold the same level certification required of a program director.
    c. Have at least one year of experience in laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● a bachelor's degree. ● the same certification level as the program director. ● at least one year of medical laboratory science education to include knowledge of educational methods, and program assessment/administration.	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing all of the following:** ● a bachelor's degree. ● the same certification level as the program director. ● at least one year of medical laboratory science education to include knowledge of educational methods, and program assessment/administration.	Submit documentation to demonstrate that site program administrator qualifications meet all items in Standard VII.B.1.

VII.B.2: BMS Site Program Administrator Responsibilities

2. Responsibilities - the site program administrator, when required, is responsible for:
    a. Coordinating teaching and clinical/applied learning education
    b. Evaluating program effectiveness
    c. Maintaining appropriate communications with the program director

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing three or more of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

VII.C.1: BMS Faculty/Instructor - Didactic Instructor Appointments

1. Didactic instructor appointments - the program must have qualified faculty/instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors.
    a. Qualifications - faculty/instructors designated by the program must:
        i. demonstrate adequate knowledge and proficiency in their content areas
        ii. demonstrate the ability to teach effectively at the appropriate level
    b. Responsibilities - responsibilities of faculty/instructors must include:
        i. participation in teaching courses
        ii. evaluation of student achievement
        iii. development of curriculum, policy, and procedures
        iv. assessment of program outcomes

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided **for up to two of the following items** to show that faculty/instructor: ● demonstrates adequate knowledge and content area proficiency ● demonstrates effective teaching at the appropriate level ● participates in teaching courses ● evaluates student achievement ● develops curriculum, policy, and procedures ● assesses program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided **for three or more of the following items** to show that faculty/instructor**:** ● demonstrates adequate knowledge and content area proficiency ● demonstrates effective teaching at the appropriate level ● participates in teaching courses ● evaluates student achievement ● develops curriculum, policy, and procedures ● assesses program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

VII.C.2: BMS Clinical/Applied Learning Liaison

2. Clinical/Applied Learning Liaison - at least one clinical or applied learning liaison, who is employed by the clinical or applied learning site, must be designated at each clinical/applied learning site affiliated with the program to coordinate clinical/applied learning for students.
    a. Qualifications - clinical/applied learning liaison must:
        i. be a laboratory professional staff member of the facility who demonstrates the ability to effectively coordinate clinical/applied learning of the students.
        ii. demonstrate knowledge of the program discipline.
        iii. have at least one year of experience as a healthcare professional.
    b. Responsibilities - clinical/applied learning liaison must be responsible for:
        i. coordinating clinical instruction at the site
        ii. maintaining effective communication with the program director or designee

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided **for up to two of the following** to show that the clinical liaison**:** ● is a laboratory professional staff member who demonstrates the ability to effectively coordinate student clinical experiences. ● demonstrates knowledge of program discipline. ● has at least one year of experience as a healthcare professional. ● coordinates clinical/applied instruction at the site. ● maintains effective communication with the program director or designee.	Submit evidence to support how the clinical/applied liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided **for three or more of the following** to show that the clinical liaison**:** ● is a laboratory professional staff member who demonstrates the ability to effectively coordinate student clinical experiences. ● demonstrates knowledge of program discipline. ● has at least one year of experience as a healthcare professional. ● coordinates clinical/applied instruction at the site. ● maintains effective communication with the program director or designee.	Submit evidence to support how clinical/applied liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

VII.D.1: BMS Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1.	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of laboratory science education.

VII.D.2: BMS Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: BMS Accreditation Liaison

(International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical laboratory professional who:
    a. Has knowledge of NAACLS accreditation.
    b. Has at least a master's degree and three years of experience in the program discipline.
    c. Holds relevant certification, licensure, or recognition appropriate for the field.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● relevant certification, licensure or appropriate recognition for the field	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● relevant certification, licensure or appropriate recognition for the field	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

VII.E.2: BMS Accreditation Liaison

(International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies and procedures.
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact, program director, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided **for up to two of the following** to show the accreditation liaison: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities described in Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided **for all of the following** to show the accreditation liaison: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities described in Standard VII.E.2.

Cytogenetics Program (CG)

VII.A.1: CG Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.

1. Qualifications - the program director must have:
    a. earned their master's or doctoral degree
    b. an ASCP BOC or ASCP[i] BOC certification in cytogenetics or ABMGG certification in clinical cytogenetics
    c. Three years of teaching experience
    d. Knowledge of education methods and administration as well as current NAACLS accreditation and certification procedures.
    e. (**for international programs only**) If the program director does not hold ASCP BOC or ASCP[i] BOC certification in cytogenetics or ABMGG certification in clinical cytogenetics, a qualified professional who does hold ASCP BOC or ASCP[i] BOC certification in cytogenetics or ABMGG certification in clinical cytogenetics must hold appointment as an accreditation liaison.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing at least one of the following**: ● Master's or doctorate degree ● Relevant certification, licensure, or recognition appropriate for the field ● Three years of teaching experience ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes ● **International programs only**: ASCP or ASCP[i] is not held or no valid appointment for cytogenetics or ABMGG	Please submit documentation that verifies the program director meets the qualifications as described in Standard VIII.A.1.

VII.A.2: CG Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Input into Budget and Finance needs of program ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Budget and Finance ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

VII.A.3: CG Program Director Appointments

The program director must have a faculty or clinical appointment at the sponsoring institution.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director does not have a faculty or clinical appointment at the sponsoring institution.	Submit documentation that demonstrates the program director has a faculty or clinical appointment at the sponsoring institution. program director has a faculty or clinical appointment at the sponsoring institution.

VII.B.1: CG Site Program Administrator Qualifications

1. Qualifications – the site program administrator must:
    a. Have a bachelor's degree.
    b. Hold the same level certification required of a program director.
    c. Have at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration
        iii. certification/licensure procedures

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing all of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

VII.B.2: CG Site Program Administrator Responsibilities

2. Responsibilities - the site program administrator must:
    a. coordinate teaching and clinical/applied learning education.
    b. evaluate program effectiveness.
    c. maintain appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing three or more of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rational].*

VII.C.1: CG Faculty/Instructor - Didactic Instructor

1. Didactic Instructor Appointments - the program must have qualified faculty/ instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors.
    a. Qualifications - Faculty / instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level.
    b. Responsibilities - the responsibilities of the faculty/instructors must include:
        i. Participation in teaching courses
        ii. Evaluation of student achievement
        iii. Development of curriculum, policy, and procedures
        iv. Assessment of program outcomes

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing up to two of the following**: ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing three or more of the following:** ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

VII.C.2: CG Clinical/Applied Learning Liaison

2. Clinical / Applied Learning Liaisons - at least one clinical liaison or applied learning liaison, who is employed by the learning site, must be designated at each clinical site affiliated with the program to coordinate clinical experiences for students.
    a. Qualifications - the clinical liaison must:
        i. Be a healthcare professional who demonstrates the ability to effectively coordinate clinical or applied learning of the students.
        ii. Demonstrate knowledge of program discipline.
        iii. Have at least one year of experience as a healthcare professional.
    b. Responsibilities - the clinical / applied learning liaison must be responsible for:
        i. Coordinating clinical / applied learning instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing up to two of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing three or more of the following:** ● laboratory professional staff member who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

VII.D.1: CG Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1.	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of clinical laboratory science education.

VII.D.2: CG Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: CG Accreditation Liaison Qualifications (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical laboratory professional who:
    a. has knowledge of NAACLS accreditation.
    b. has at least a master's degree and three years of experience in the program discipline.
    c. holds ASCP BOC or ASCP[i] BOC certification in cytogenetics or ABMGG certification in clinical cytogenetics.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● holds the ASCP BOC or ASCP[i] certification for cytogenetics or ABMGG in clinical cytogenetics.	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● holds the ASCP BOC or ASCP[i] certification for cytogenetics or ABMGG in clinical cytogenetics	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

VII.E.2: CG Accreditation Liaison (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies, and procedures.
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact with the program director, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing all of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Diagnostic Molecular Scientist (DMS)

VII.A.1: DMS Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.

1. Qualifications - the program director must have:
    a. An earned master's or doctoral degree.
    b. An ASCP BOC or ASCP^{i} BOC certification in Molecular Biology or ABMGG certification in Molecular Biology.
    c. Three years of teaching experience.
    d. Knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.
    e. **(for international programs only)** If the program director does not hold ASCP BOC or ASCP^{i} BOC certification in Molecular Biology or ABMGG certification in Molecular Biology, a qualified professional who does hold ASCP BOC or ASCP^{i} BOC certification in Molecular Biology or ABMGG certification in Molecular Biology must hold appointment as an accreditation liaison.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing at least one of the following**: ● Master's or doctorate degree ● ASCP BOC or ASCP^{i} BOC in Molecular Biology or ABMGG in Molecular Biology ● Three years of teaching experience ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes ● **International programs only**: ASCP or ASCP^{i} is not held or no valid appointment in Molecular Biology or ABMGG with Molecular Biology	Please submit documentation that verifies the program director meets the qualifications as described in Standard VIII.A.1.

VII.A.2: DMS Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Input into Budget and Finance needs of program ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Budget and Finance ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

VII.A.3: DMS Program Director Appointments

The program director must have faculty or clinical appointments at the sponsoring institution.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director does not have a faculty or clinical appointment at the sponsoring institution.	Submit documentation that demonstrates the program director has a faculty or clinical appointment at sponsoring institution.

VII.B: DMS Site Program Administrator Qualifications

1. Qualifications – the site program administrator must:
    a. Have a bachelor's degree.
    b. Hold the same level certification required of a program director.
    c. Have at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration
        iii. certification/licensure procedures

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing all of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

VII.B: DMS Site Program Administrator Responsibilities

2. Responsibilities - the site program administrator must:
    a. Coordinate teaching and clinical/applied learning education.
    b. Evaluate program effectiveness.
    c. Maintain appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing three or more of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

VII.C.1: DMS Faculty/Instructors

1. Didactic Instructor Appointments - the program must have qualified faculty/ instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors.
    a. Qualifications - Faculty / instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level.
    b. Responsibilities - the responsibilities of the faculty/instructors must include:
        i. Participation in teaching courses
        ii. Evaluation of student achievement
        iii. Development of curriculum, policy, and procedures
        iv. Assessment of program outcomes

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing up to two of the following**: ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing three or more of the following:** ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

VII.C.2: DMS Clinical/Applied Learning Liaison

2. Clinical/Applied Learning Liaisons - at least one clinical liaison or applied learning liaison, who is employed by the learning site, must be designated at each clinical site affiliated with the program to coordinate clinical experiences for students.
    a. Qualifications - the clinical liaison must:
        i. Be a healthcare professional who demonstrates the ability to effectively coordinate clinical or applied learning of the students.
        ii. Demonstrate knowledge of program discipline.
        iii. Have at least one year of experience as a healthcare professional.
    b. Responsibilities - the clinical / applied learning liaison must be responsible for:
        i. Coordinating clinical / applied learning instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing up to two of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing three or more of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

VII.D.1: DMS Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of clinical laboratory science education.

VII.D.2: DMS Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: DMS Accreditation Liaison (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a certified medical laboratory professional who:
    a. has knowledge of NAACLS accreditation
    b. Has at least a master's degree and three years of experience in the program discipline.
    c. Holds ASCP BOC or ASCP[i] BOC certification in Molecular Biology or ABMGG certification in Molecular Biology.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● holds the ASCP BOC or ASCP[i] certification for Molecular Biology or ABMGG in Molecular Biology	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● holds the ASCP BOC or ASCP[i] certification for Molecular Biology or ABMGG in Molecular Biology	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

VII.E.2: DMS Accreditation Liaison (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies, and procedures
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact with the program director, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing all of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Histotechnician (HT)

VII.A.1: HT Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as the program director who meets the following qualifications and executes all required responsibilities:

1. Qualifications - the program director must have:
    a. A bachelor's degree or higher.
    b. An ASCP BOC or ASCP[i] BOC certification as a histotechnologist or histotechnician.
        i. If the program director does not hold any of these certifications, an education coordinator is required.
    c. Three years teaching experience.
    d. Knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.
    e. **(for international programs only)** If the program director does not hold ASCP BOC or ASCP[i] BOC certification as a histotechnologist or histotechnician, a qualified professional who does hold ASCP BOC or ASCPi BOC certification as a histotechnologist or histotechnician must hold appointment as an accreditation liaison.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director **missing at least one of the following:** ● Bachelor's degree or higher ● ASCP BOC or ASCP[i] BOC in HT or HTL ○ **OR** Education coordinator with ASCP BOC or ASCP[i] HT or HTL ● Three years of teaching experience ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes ● **International programs only**: ASCP or ASCP[i] is not held or no valid appointment in HT or HTL	Please submit documentation that verifies the program director meets the qualifications as described in Standard VII.A.1.

VII.A.2: HT Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, and program personnel.

Partial compliance

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Input into Budget and Finance needs of program ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Budget and Finance ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

VII.A.3: HT Program Director Appointments

The program director must have faculty or clinical appointments at the sponsoring institution.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director does not have a faculty or clinical appointment at the sponsoring institution.	Submit documentation that demonstrates the program director has a faculty or clinical appointment at the sponsoring institution.

VII.B.1: HT Site Program Administrator Qualifications

1. Qualifications – the site program administrator must:
    a. Have a bachelor's degree.
    b. Hold the same level certification required of a program director.
    c. Have at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration
        iii. certification/licensure procedures

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing all of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

VII.B.2: HT Site Program Administrator Responsibilities

2. Responsibilities - the site program administrator must:
   a. coordinate teaching and clinical/applied learning education.
   b. evaluate program effectiveness.
   c. maintain appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing three or more of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

VII.C.1: HT Faculty/Instructors - Didactic

1. Didactic Instructor Appointments - the program must have qualified faculty/ instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors.
    a. Qualifications - Faculty / instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level.
    b. Responsibilities - the responsibilities of the faculty/instructors must include:
        i. Participation in teaching courses
        ii. Evaluation of student achievement
        iii. Development of curriculum, policy, and procedures
        iv. Assessment of program outcomes

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing up to two of the following**: ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing three or more of the following:** ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

VII.C.2: HT Clinical/Applied Learning Liaisons

2. Clinical / Applied Learning Liaisons - at least one clinical liaison or applied learning liaison, who is employed by the learning site, must be designated at each clinical site affiliated with the program to coordinate clinical experiences for students.
    a. Qualifications - the clinical liaison must:
        i. Be a healthcare professional who demonstrates the ability to effectively coordinate clinical or applied learning of the students.
        ii. Demonstrate knowledge of program discipline.
        iii. Have at least one year of experience as a healthcare professional.
    b. Responsibilities - the clinical / applied learning liaison must be responsible for:
        i. Coordinating clinical / applied learning instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing up to two of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing three or more of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

VII.D.1: HT Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of clinical laboratory science education.

VII.D.2: HT Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: HT Accreditation Liaison Qualifications (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical laboratory professional who:
    a. has knowledge of NAACLS accreditation
    b. has at least a master's degree and three years experience in the program discipline
    c. holds ASCP BOC or ASCP[i] BOC certification as a HT

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● holds the ASCP BOC or ASCP[i] certification in Histotechnology	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● holds the ASCP BOC or ASCP[i] certification in Histotechnology	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

VII.E.2: HT Accreditation Liaison (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. provide guidance and assistance in NAACLS accreditation requirements, policies, and procedures
    b. Provide input into the curriculum and continuous program assessment and improvement
    c. Have regular contact with the program director, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing all of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

VII.F.1: Educational Coordinator Qualifications

1. Qualifications - the education coordinator, when requested, must be a medical laboratory professional who:
    a. has a bachelor's degree and three years of experience in the program discipline
    b. holds ASCP BOC US certification in HT or HTL, or appropriate certification for program type
    c. has knowledge of NAACLS accreditation and current certification procedures.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, education coordinator is **missing up to two of the following**: ● a bachelor's degree ● three years of experience in program discipline ● holds ASCP BOC US certification as HT or HTL ● has knowledge of NAACLS accreditation and current certification procedures ●	Submit evidence to support how the education coordinator meets qualifications as described in Standard VII.F.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, education coordinator is **missing three or more of the following**: ● a bachelor's degree ● three years of experience in program discipline ● holds ASCP BOC US certification as HT or HTL ● has knowledge of NAACLS accreditation and current certification procedures ●	Submit evidence to support how the education coordinator meets qualifications as described in Standard VII.F.1.

VII.F.2: Educational Coordinator Responsibilities

2. Responsibilities - the education coordinator, when required, must provide supervision and coordination of the instructional faculty in the academic and clinical phases of the education program.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for education Coordinator to meet responsibilities as described in Standard VII.F.2	Submit documentation that demonstrates how the Education Coordinator meets the responsibilities described in Standard VII.F.2.

Histotechnologist (HTL)

VII.A.1: HTL Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.

1. Qualifications - the program director must have:
    a. An earned master's or doctoral degree
    b. An ASCP BOC or ASCP[i] BOC certification as a histotechnologist.
        i. If the program director does not hold ASCP BOC or ASCP[i] BOC certification as a histotechnologist, a qualified professional who does hold ASCP BOC or ASCP[i] BOC certification as a histotechnologist must hold an appointment as education coordinator.
    c. Three years of teaching experience.
    d. Knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.
    e. (for international programs only) If the program director does not hold ASCP BOC or ASCP[i] BOC certification as a histotechnologist, a qualified professional who does hold ASCP BOC or ASCP[i] BOC certification as a histotechnologist must hold appointment as an accreditation liaison.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing at least one of the following:** ● Bachelor's degree or higher ● ASCP BOC or ASCP[i] BOC in HT or HTL ○ **OR** Education coordinator with ASCP BOC or ASCP[i] HT or HTL ● Three years of teaching experience ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes ● **International programs only**: ASCP or ASCP[i] is not held or no valid appointment in HT or HTL	Please submit documentation that verifies the program director meets the qualifications as described in Standard VII.A.1.

VII.A.2: HTL Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, and program personnel.

Partial compliance

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Input into Budget and Finance needs of program ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Budget and Finance ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

VII.A.3: HTL Program Director Appointments

The program director must have a faculty or clinical appointment at the sponsoring institution.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director does not have a faculty or clinical appointment at the sponsoring institution.	Submit documentation that demonstrates the program director has a faculty or clinical appointment at the sponsoring institution.

VII.B.1: HTL Site Administrator Qualifications

1. Qualifications – the site program administrator must:
    a. Have a bachelor's degree.
    b. Hold the same level certification required of a program director.
    c. Have at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration
        iii. certification/licensure procedures

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is missing **all of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

VII.B.2: HTL Site Administrator Responsibilities

2. Responsibilities - the site program administrator must:
   a. coordinate teaching and clinical/applied learning education.
   b. evaluate program effectiveness.
   c. maintain appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing three or more of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

VII.C.1: HTL Faculty/Instructors - Didactic

1. Didactic Instructor Appointments - the program must have qualified faculty/ instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors.
    a. Qualifications - Faculty / instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level.
    b. Responsibilities - the responsibilities of the faculty/instructors must include:
        i. Participation in a teaching course.
        ii. Evaluation of student achievement
        i. Development of curriculum, policy, and procedures
        ii. Assessment of program outcomes

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing up to two of the following**: ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing three or more of the following:** ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

VII.C.2: HTL Clinical/Applied Learning Liaison

2. Clinical / Applied Learning Liaisons - at least one clinical liaison or applied learning liaison, who is employed by the learning site, must be designated at each clinical site affiliated with the program to coordinate clinical experiences for students.
    a. Qualifications - the clinical liaison must:
        i. Be a healthcare professional who demonstrates the ability to effectively coordinate clinical or applied learning of the students.
        ii. Demonstrate knowledge of program discipline.
        iii. Have at least one year of experience as a healthcare professional.
    b. Responsibilities - the clinical / applied learning liaison must be responsible for:
        i. Coordinating clinical / applied learning instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing up to two of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing three or more of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

VII.D.1: HTL Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1.	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of clinical laboratory science education.

VII.D.2: HTL Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: HTL Accreditation Liaison (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical professional who:
    a. Has knowledge of NAACLS accreditation.
    b. Has at least a master's degree and three years of experience in the program discipline.
    c. Holds ASCP BOC or ASCP[i] BOC certification as a histotechnologist.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● holds the ASCP BOC or ASCP[i] certification in Histotechnology	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● holds the ASCP BOC or ASCP[i] certification in Histotechnology	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

VII.E.1: HTL Accreditation Liaison (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies and procedures.
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact, program director, faculty and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing all of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

VII.F.1: HTL Education Coordinator Qualifications (when required)

1. Qualifications - the education coordinator, when requested, must be a medical laboratory professional who:
    a. has a bachelor's degree and three years of experience in the program discipline.
    b. holds ASCP BOC US certification in HT.
    c. has knowledge of NAACLS accreditation and current certification procedures.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, education coordinator is **missing up to two of the following**: ● a bachelor's degree ● three years of experience in program discipline ● holds ASCP BOC US certification as HT ● has knowledge of NAACLS accreditation and current certification procedures ●	Submit evidence to support how the education coordinator meets qualifications as described in Standard VII.F.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, education coordinator is **missing three or more of the following**: ● a bachelor's degree ● three years of experience in program discipline ● holds ASCP BOC US certification as HT ● has knowledge of NAACLS accreditation and current certification procedures ●	Submit evidence to support how the education coordinator meets qualifications as described in Standard VII.F.1.

VII.F.2: HTL Education Coordinator - Responsibilities (when required)

2. Responsibilities - the education coordinator, when required, must provide supervision and coordination of the instructional faculty in the academic and clinical phases of the education program.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for education Coordinator to meet responsibilities as described in Standard VII.F.2.	Submit documentation that demonstrates how the Education Coordinator meets the responsibilities described in Standard VII.F.2.

Medical Laboratory Assistant (MLA)

VII.A.1: MLA Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.

1. Qualifications - the program director must have:
    a. a bachelor's degree or higher
    b. an ASCP BOC or ASCP^{i} BOC certification as an MLS or MLT
    c. three years of experience in medical laboratory science education
    d. Knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.
    e. **(For International Programs Only)**: If the program director does not hold ASCP BOC or ASCP^{i} BOC certification as an MLS or MLT, a qualified professional who does hold ASCP BOC or ASCP^{i} BOC certification as an MLS or MLT must hold an appointment as an **accreditation liaison**.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing at least one of the following qualifications:** ● Bachelor's degree or higher ● ASCP BOC or ASCP^{i} BOC as MLS/MLT ● Three or more years of teaching experience ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes. ● **International programs only**: ASCP or ASCP^{i} is not held	Please submit documentation that verifies the program director meets the qualifications under Standard VII.A.1.

VII.A.2: MLA Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Input into Budget and Finance needs of program ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Budget and Finance ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

VII.B.1: MLA Site Program Administrator Qualifications

1. Qualifications - the site program administrator must have:
    a. a bachelor's degree.
    b. the same level of certification required of a program director.
    c. at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. Program assessment and administration
        iii. certification/licensure procedures

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator appears to be **missing up to two of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator appears to be **missing all of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

VII.B.2: MLA Site Program Administrator Responsibilities

2. Responsibilities - the site program administrator must:
    a. coordinate teaching and clinical/applied learning education.
    b. evaluate program effectiveness.
    c. maintain appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing three or more of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

VII.C.1: MLA Faculty/Instructor - Didactic Instructor

1. Didactic Instructor Appointments - the program must have qualified faculty/instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors
    a. Qualifications - Faculty/instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level.
    b. Responsibilities - responsibilities of the faculty/instructors must include:
        i. Participation in teaching courses.
        ii. Evaluation of student achievement.
        iii. Development of curriculum, policy and procedures.
        iv. Assessment of program outcomes

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing up to two of the following**: ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing three or more of the following:** ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

VII.C.2: MLA Faculty/Instructor - Clinical/Applied Learning Liaison

2. Clinical / Applied Learning Liaison - at least one clinical/applied learning liaison, who is employed by the clinical/applied learning site, must be designated at each clinical/applied learning site affiliated with the program to coordinate clinical/applied learning for students.
    a. Qualifications - the clinical/applied learning liaison must:
        i. Be a healthcare professional who demonstrates the ability to effectively coordinate clinical/applied learning of the students.
        ii. Demonstrate knowledge of the program discipline.
        iii. Have at least one year of experience as a healthcare professional
    b. Responsibilities - clinical/applied liaison must be responsible for:
        i. Coordinating clinical instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing up to two of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing three or more of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

VII.D.1: MLA Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of clinical laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1.	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of clinical laboratory science education.

VII.D.2: MLA Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: MLA Accreditation Liaison (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical laboratory professional who:
    a. Has knowledge of NAACLS accreditation.
    b. Has at least a master's degree and three years of experience in the program discipline.
    c. Holds ASCP BOC or ASCP[i] BOC certification as MLS or MLT.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● holds the ASCP BOC or ASCP[i] as a MLS or MLT	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● holds the ASCP BOC or ASCP[i] as a MLS or MLT	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

VII.E.2: MLA Accreditation Liaison (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies and procedures.
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact, program director, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing all of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Medical Laboratory Microbiologist (MLM)

VII.A.1: MLM Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.

1. Qualifications - the program director must have:
    a. An earned master's or doctoral degree.
    b. An ASCP BOC or ASCP^{i} BOC generalist certification as a medical laboratory scientist or categorical ASCP BOC certification in Microbiology.
        i. If the program director does not hold ASCP BOC or ASCP^{i} BOC certification as a generalist certification as a medical laboratory scientist or categorical ASCP BOC certification in Microbiology, a qualified professional who does hold ASCP BOC or ASCP^{i} BOC generalist certification as a medical laboratory scientist must hold appointment as education coordinator.
    c. Three years of teaching experience in medical microbiology or related area
    d. Knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.
    e. (for international programs only) If the program director does not hold ASCP BOC or ASCP^{i} BOC generalist certification as a medical laboratory scientist or categorical ASCP BOC certification in Microbiology, a qualified professional who does hold ASCP BOC or ASCP^{i} BOC generalist certification as a medical laboratory scientist or categorical ASCP BOC certification in Microbiology must hold appointment as an accreditation liaison.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing at least one of the following:** ● Master's degree or higher ● ASCP BOC or ASCP^{i} BOC as MLS OR categorical ASCP BOC Microbiology ● Three + years of teaching experience ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes. ● **International programs only**: ASCP or ASCP^{i} is not held with qualified professional	Please submit documentation that verifies the program director meets the qualifications under Standard VII.A.1.

VII.A.2: MLM Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Input into Budget and Finance needs of program ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Budget and Finance ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

VII.A.3: MLM Program Director Appointments

The program director must have a faculty or clinical appointment at the sponsoring institution.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director does not have a faculty or clinical appointment at the sponsoring institution.	Submit documentation that demonstrates the program director has a faculty or clinical appointment at the sponsoring institution.

VII.B.1: MLM Site Program Administrator - Qualifications

1. Qualifications - the site program administrator must have:
    a. a bachelor's degree.
    b. the same level of certification required of a program director.
    c. at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration
        iii. certification/licensure procedures

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing all of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

VII.B.2: MLM Site Program Administrator - Responsibilities

2. Responsibilities - the site program administrator must:
    a. coordinate teaching and clinical/applied learning education.
    b. evaluate program effectiveness.
    c. maintain appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing three or more of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

VII.C.1: MLM Faculty/Instructors - Didactic

1. Didactic Instructor Appointments - the program must have qualified faculty/instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors
    a. Qualifications - Faculty/instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level.
    b. Responsibilities - responsibilities of the faculty/instructors must include:
        i. Participation in teaching courses.
        ii. Evaluation of student achievement.
        iii. Development of curriculum, policy and procedures.
        iv. Assessment of program outcomes

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing up to two of the following**: ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing three or more of the following:** ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

VII.C.2: MLM Clinical/Applied Learning Liaison

2. Clinical / Applied Learning Liaison - at least one clinical/applied learning liaison, who is employed by the clinical/applied learning site, must be designated at each clinical/applied learning site affiliated with the program to coordinate clinical/applied learning for students.
    a. Qualifications - the clinical/applied learning liaison must:
        i. Be a healthcare professional who demonstrates the ability to effectively coordinate clinical/applied learning of the students.
        ii. Demonstrate knowledge of the program discipline.
        iii. Have at least one year of experience as a healthcare professional
    b. Responsibilities - clinical/applied liaison must be responsible for:
        i. Coordinating clinical instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing up to two of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing three or more of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

VII.D.1: MLM Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of clinical laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of clinical laboratory science education.

VII.D.2: MLM Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: MLM Accreditation Liaison (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical laboratory professional who:
    a. Has knowledge of NAACLS accreditation.
    b. Has at least a master's degree and three years of experience in the program discipline.
    c. Holds ASCP BOC or ASCP[i] BOC generalist certification as a medical laboratory scientist or categorical ASCP BOC certification in Microbiology.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● Holds ASCP BOC or ASCP[i] BOC generalist certification as a medical laboratory scientist or categorical ASCP BOC certification in Microbiology.	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● Holds ASCP BOC or ASCP[i] BOC generalist certification as a medical laboratory scientist or categorical ASCP BOC certification in Microbiology.	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

VII.E.2: MLM Accreditation Liaison (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies and procedures.
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact, program director, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing all of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

VII.F.1: MLM Education Coordinator - Qualifications (when required)

1. Qualifications - the education coordinator, when requested, must be a medical laboratory professional who:
    a. has a bachelor's degree and three years of experience in the program discipline
    b. Holds ASCP BOC or ASCP[i] BOC generalist certification as a medical laboratory scientist.
    c. has knowledge of NAACLS accreditation and current certification procedures.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, education coordinator is **missing up to two of the following**: ● a bachelor's degree ● three years of experience in program discipline ● Holds ASCP BOC or ASCP[i] BOC generalist certification as a medical laboratory scientist. ● has knowledge of NAACLS accreditation and current certification procedures ●	Submit evidence to support how the education coordinator meets qualifications as described in Standard VII.F.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, education coordinator is **missing three or more of the following**: ● a bachelor's degree ● three years of experience in program discipline ● Holds ASCP BOC or ASCP[i] BOC generalist certification as a medical laboratory scientist. ● has knowledge of NAACLS accreditation and current certification procedures ●	Submit evidence to support how the education coordinator meets qualifications as described in Standard VII.F.1.

VII.F.2: MLM Education Coordinator - Responsibilities (when required)

2. Responsibilities - the education coordinator, when required, must provide supervision and coordination of the instructional faculty in the academic and clinical phases of the education program

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for education Coordinator to meet responsibilities as described in Standard VII.F.2.	Submit documentation that demonstrates how the Education Coordinator meets the responsibilities described in Standard VII.F.2.

Medical Laboratory Scientist (MLS)

VII.A.1: MLS Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.

1. Qualifications - the program director must have:
    a. An earned Master's or Doctoral degree
    b. An ASCP BOC or ASCP^{i} BOC generalist certification as a medical laboratory scientist.
    c. Three years of teaching experience.
    d. Knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.
    e. (**for international programs only**) If the program director does not hold ASCP BOC or ASCP^{i} BOC certification as a medical laboratory scientist, a qualified professional who does hold ASCP BOC or ASCP^{i} BOC certification as a medical laboratory scientist must hold appointment as an accreditation liaison.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing at least one of the following:** ● Master's or doctorate degree ● ASCP BOC or ASCP^{i} BOC as MLS ● Three or more years of teaching experience ● Knowledge of educational methods and administration, NAACLS accreditation processes and certification procedures **International programs only**: Program Director lacks relevant certification, and no accreditation liaison has been appointed	Submit documentation that verifies the program director meets the qualifications under Standard VII.A.1. **International programs only**: Submit documentation that an accreditation liaison has been appointed for the program.

VII.A.2: MLS Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify missing items from* ***Std. VII.A.2.a***] ● Input into budget and finance needs of program ● At least 36 hours of CE every three years ● Documentation that maintaining NAACLS accreditation is a responsibility ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2.: *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify missing items from* ***Std. VII.A.2.a***] ● Input into budget and finance needs of the program ● At least 36 hours of CE every three years ● Documentation that maintaining NAACLS accreditation is a responsibility ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2.: *[insert missing items from rationale].*

VII.A.3: MLS Program Director Appointments

The program director must have a faculty or clinical appointment at the sponsoring institution.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided to show that, program director has a faculty or clinical appointment at the sponsoring institution.	Submit documentation that demonstrates the program director has a faculty or clinical appointment at the sponsoring institution.

VII.B.1: MLS Site Program Administrator Qualifications

1. Qualifications - the site program administrator must have:
    a. a bachelor's degree.
    b. the same level of certification required of a program director.
    c. at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration
        iii. certification/licensure procedures

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● a bachelor's degree ● the same certification level as the program director ● at least one year of medical laboratory science education to include knowledge of educational methods, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing all of the following:** ● a bachelor's degree ● the same certification level as the program director ● at least one year of medical laboratory science education to include knowledge of educational methods, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

VII.B.2: MLS Site Program Administrator - Responsibilities

2. Responsibilities - the site program administrator must:
    a. coordinate teaching and clinical/applied learning education.
    b. evaluate program effectiveness.
    c. maintain appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided **for up to two of the following** to show the site program administrator is responsible for**:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided **for three or more of the following** to show the site program administrator is **responsible for:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

VII.C.1: MLS Faculty/Instructors - Didactic

1. Didactic Instructor Appointments - the program must have qualified faculty/instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors
    a. Qualifications - Faculty/instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level.
    b. Responsibilities - responsibilities of the faculty/instructors must include:
        i. Participation in teaching courses.
        ii. Evaluation of student achievement.
        iii. Development of curriculum, policy and procedures.
        iv. Assessment of program outcomes

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided **for up to two of the following** to show the faculty/instructor: ● demonstrates adequate knowledge and content area proficiency ● demonstrates effective teaching at the appropriate level ● participates in teaching courses ● evaluates student achievement ● develops curriculum, policy, and procedures ● assesses program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided **for three or more of the following** to show the faculty/instructor**:** ● demonstrates adequate knowledge and content area proficiency ● demonstrates effective teaching at the appropriate level ● participates in teaching courses ● evaluates student achievement ● develops curriculum, policy, and procedures ● assesses program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

VII.C.2: MLS Clinical/Applied Learning Liaison

2. Clinical / Applied Learning Liaison - at least one clinical/applied learning liaison, who is employed by the clinical/applied learning site, must be designated at each clinical/applied learning site affiliated with the program to coordinate clinical/applied learning for students.
    a. Qualifications - the clinical/applied learning liaison must:
        i. Be a healthcare professional who demonstrates the ability to effectively coordinate clinical/applied learning of the students.
        ii. Demonstrate knowledge of the program discipline.
        iii. Have at least one year of experience as a healthcare professional
    b. Responsibilities - clinical/applied liaison must be responsible for:
        i. Coordinating clinical instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided **for up to two of the following** to show the clinical liaison**:** ● is a healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrates knowledge of program discipline ● has at least one year of experience as a healthcare professional ● coordinates clinical instruction at the site ● maintains effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided **for three or more of the following** to show the clinical liaison**:** ● is a healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrates knowledge of program discipline ● has at least one year of experience as a healthcare professional ● coordinates clinical instruction at the site ● maintains effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

VII.D.1: MLS Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of clinical laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1.	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of medical laboratory science education.

VII.D.2: MLS Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: MLS Accreditation Liaison (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical laboratory professional who:
    a. Has knowledge of NAACLS accreditation.
    b. Has at least a master's degree and three years of experience in the program discipline.
    c. Holds ASCP BOC or ASCP^{i} BOC generalist certification as a medical laboratory scientist.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● ASCP BOC or ASCP^{i} BOC certification as a medical laboratory scientist.	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● ASCP BOC or ASCP^{i} BOC certification as a medical laboratory scientist.	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

VII.E.2: MLS Accreditation Liaison (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies and procedures.
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact, program director, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided **for up to two of the following** to show the accreditation liaison: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities as described in Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided **for all of the following** to show the accreditation liaison: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities as described in Standard VII.E.2.

Medical Laboratory Technician (MLT)

VII.A.1: MLT Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.

1. Qualifications - the program director must have:
    a. An earned Master's or Doctoral degree
    b. An ASCP BOC or ASCP^{i} BOC generalist certification as a medical laboratory scientist.
    c. Three years of teaching experience.
    d. Knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.
    e. (**for international programs only**) If the program director does not hold ASCP BOC or ASCP^{i} BOC certification as a medical laboratory scientist, a qualified professional who does hold ASCP BOC or ASCP^{i} BOC certification as a medical laboratory scientist must hold appointment as an accreditation liaison.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing at least one of the following:** ● Master's or doctorate degree ● ASCP BOC or ASCP^{i} BOC as MLS ● Three or more years of teaching experience ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes ● **International programs only**: ASCP or ASCP^{i} is not held, or no appointment of accreditation liaison noted.	Please submit documentation that verifies the program director meets qualifications under Standard VII.A.1.

VII.A.2: MLT Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Input into Budget and Finance needs of program ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Budget and Finance ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

VII.A.3: MLT Program Director Appointments

The program director must have a faculty or clinical appointment at the sponsoring institution.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director does not have a faculty or clinical appointment at the sponsoring institution.	Submit documentation that demonstrates the program director has a faculty or clinical appointment at the sponsoring institution.

VII.B.1: MLT Site Program Administrator Qualifications

1. Qualifications - the site program administrator must have:
    a. a bachelor's degree.
    b. the same level of certification required of a program director.
    c. at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration
        iii. certification/licensure procedures

Partial Compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing all of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

VII.B.2: MLT Site Program Administrator - Responsibilities

2. Responsibilities - the site program administrator must:
    a. coordinate teaching and clinical/applied learning education.
    b. evaluate program effectiveness.
    c. maintain appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing three or more of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

VII.C.1: MLT Faculty/Instructors - Didactic

1. Didactic Instructor Appointments - the program must have qualified faculty/instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors
    a. Qualifications - Faculty/instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level.
    b. Responsibilities - responsibilities of the faculty/instructors must include:
        i. Participation in teaching courses.
        ii. Evaluation of student achievement.
        iii. Development of curriculum, policy and procedures.
        iv. Assessment of program outcomes

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing up to two of the following**: ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing three or more of the following:** ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

VII.C.2: MLT Clinical/Applied Learning Liaison

2. Clinical / Applied Learning Liaison - at least one clinical/applied learning liaison, who is employed by the clinical/applied learning site, must be designated at each clinical/applied learning site affiliated with the program to coordinate clinical/applied learning for students.
    a. Qualifications - the clinical/applied learning liaison must:
        i. Be a healthcare professional who demonstrates the ability to effectively coordinate clinical/applied learning of the students.
        ii. Demonstrate knowledge of the program discipline.
        iii. Have at least one year of experience as a healthcare professional
    b. Responsibilities - clinical/applied liaison must be responsible for:
        i. Coordinating clinical instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing up to two of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing three or more of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

VII.D.1: MLT Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of clinical laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of clinical laboratory science education.

VII.D.2: MLT Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: MLT Accreditation Liaison (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical laboratory professional who:
    a. Has knowledge of NAACLS accreditation.
    b. Has at least a master's degree and three years of experience in the program discipline.
    c. Holds ASCP BOC or ASCP^{i} BOC generalist certification as a medical laboratory scientist.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● Holds ASCP BOC or ASCP^{i} BOC generalist certification as a medical laboratory scientist.	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● Holds ASCP BOC or ASCP^{i} BOC generalist certification as a medical laboratory scientist.	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

VII.E.2: MLT Accreditation Liaison (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies and procedures.
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact, program director, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing all of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Pathologists' Assistant (Path A)

VII.A.1: Path A Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as program director who meets/executes all the following qualifications responsibilities.

1. Qualifications - the program director must:
    a. Be a graduate of a NAACLS accredited (AAPA approved prior to 1995) pathologists' assistant educational program with an advanced degree (master's or doctoral), currently hold ASCP BOC certification as a Pathologists' Assistant, or a board-certified pathologist.
        i. If the program director is a pathologist, there must be an ASCP certified, NAACLS Accredited program educated pathologists' assistant employed as the educational coordinator/clinical coordinator.
    b. Have a faculty appointment in the sponsoring institution and meet all requirements specified by the institution responsible for providing the didactic portion of the educational program and maintaining the overall operation of the program.
    c. Have practical knowledge of educational methods and administration as well as current NAACLS accreditation and professional certification procedures, demonstrates adequate knowledge and proficiency in their content areas, demonstrates the ability to teach effectively at the appropriate level.
    d. **(for international programs only)** If the program director does not hold ASCP BOC certification as a Pathologists' Assistant, or a board-certified pathologist, a qualified professional who does hold ASCP BOC certification as a Pathologists' Assistant, or a board-certified pathologist must hold appointment as an accreditation liaison.

VII.A.1: Path A Program Director Qualifications

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance: (see next page)

VII.A.1: Path A Program Director Qualifications

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing at least one of the following documents:** ● Be a graduate of a NAACLS accredited (AAPA approved prior to 1995) with an advanced degree (master's or doctorate) ● Active ASCP BOC certification or licensure as Pathologists' Assistant, or if board-certified pathologist (see below) ○ If the program director is a pathologist, there must be a certified NAACLS accredited / educated pathologists' assistant employed as educational coordinator of the program ● Have faculty appointment in the sponsoring institution ● Meet all requirements specified by the sponsoring institution for providing didactic instruction and maintaining operation of the program ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes ● **International programs only**: For program director's without ASCP BOC certification as a Pathologist's Assistant, the program must appoint an accreditation liaison who does hold ASCP BOC certification as a Path A or board certified pathologist.	Please submit documentation that verifies the program director meets the following qualifications under Standard VII.A.1:

VII.A.2: Path A Program Director Responsibilities

2. Responsibility - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 60 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, administration, and program personnel

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Input into Budget and Finance needs of program ● At least 60 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Budget and Finance ● At least 60 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

VII.A.3: Path A Program Director Appointments

3. Appointments - the program director must have a faculty or clinical appointment at the sponsoring institution.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director does not have a faculty or clinical appointment at the sponsoring institution.	Submit evidence that supports the program director has a faculty or clinical appointment status at the sponsoring institution.

VII.B.1: Path A Site Program Administrator Qualifications

1. Qualifications - the site program administrator must:
    a. Have a bachelor's degree.
    b. Hold the same level certification required of a program director.
    c. Have at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration
        iii. certification/licensure procedures

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **up to two of the following:** ● Has a bachelor's degree ● Hold the same level of certification required of the program director ● Has at least one year of medical laboratory science education to include educational methods, program assessment/administration, and certification/licensure procedures	Submit documentation that supports how the site program administrator meets Standard VII.B.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator **does not meet all of the following:** ● Has a bachelor's degree ● Hold the same level of certification required of the program director ● Has at least one year of medical laboratory science education to include educational methods, program assessment/administration, and certification/licensure procedures	Submit documentation that supports how the site program administrator meets Standard VII.B.1.

VII.B.2: Path A Site Program Administrator Responsibilities

2. Responsibilities - the site program administrator, when required, is responsible for:
    a. Coordinating teaching and clinical/applied learning education.
    b. Evaluating program effectiveness.
    c. Maintaining appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● Coordinating teaching ● Coordinating clinical/applied learning ● Evaluating program effectiveness ● Maintaining appropriate communications with the program director.	Submit evidence that supports how the site program administrator meets all of the following: ● Coordinating teaching ● Coordinating applied or experiential clinical learning ● Evaluating program effectiveness ● Maintaining appropriate communications with the program director.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing all of the following:** ● Coordinating teaching ● Coordinating clinical/applied learning ● Evaluating program effectiveness ● Maintaining appropriate communications with the program director.	Submit evidence that supports how the site program administrator meets all of the following: ● Coordinating teaching ● Coordinating applied or experiential clinical learning ● Evaluating program effectiveness ● Maintaining appropriate communications with the program director.

VII.C.1: Path A Faculty/Instructor - Didactics

1. Didactic Instructor Appointments - the program must have qualified faculty/instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors.
    b. Qualifications: Faculty/instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level.
    c. Responsibilities: The responsibilities of the faculty/instructors must include:
        i. Participation in teaching courses.
        ii. Evaluation of student achievement.
        iii. Development of curriculum, policy and procedures
        iv. Assessment of program outcomes.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty instructor is **missing up to two of the following:** ● Demonstrate adequate knowledge and content area proficiency ● Demonstrate effective teaching at the appropriate level ● Participate in teaching courses ● Evaluate student achievement / performance ● Develop curriculum, policy, and procedures ● Assess program outcomes	Submit evidence that supports how the faculty/instructor(s) meet all of the following: ● Demonstrate adequate knowledge and content area proficiency ● Demonstrate effective teaching at the appropriate level ● Participate in teaching courses ● Evaluate student achievement / performance ● Develop curriculum, policy, and procedures ● Assess program outcomes

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing three or more of the following:** ● Demonstrate adequate knowledge and content area proficiency ● Demonstrate effective teaching at the appropriate level ● Participate in teaching courses ● Evaluate student achievement / performance ● Develop curriculum, policy, and procedures ● Assess program outcomes	Submit evidence that supports how the faculty/instructor(s) meet all of the following: ● Demonstrate adequate knowledge and content area proficiency ● Demonstrate effective teaching at the appropriate level ● Participate in teaching courses ● Evaluate student achievement / performance ● Develop curriculum, policy, and procedures ● Assess program outcomes

VII.C.2: Path A Clinical Liaison (Applied or Experiential Learning)

2. Clinical/Applied Learning Liaison - at least one clinical/applied learning liaison, who is employed by the clinical/applied learning site, must be designated at each clinical/applied learning site affiliated with the program to coordinate clinical/applied learning for students.
    a. Qualifications The clinical/applied learning liaison must:
        i. Be a healthcare professional staff member of the facility who demonstrates the ability to effectively coordinate clinical/applied learning of the students.
        ii. Demonstrate knowledge of the program discipline.
        iii. Have at least one year of experience as a healthcare professional.
    b. Responsibilities - The clinical/applied learning liaison must be responsible for:
        i. Coordinating clinical/applied learning instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing up to two of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate clinical experiences for students ● Demonstrate knowledge of program discipline ● Have at least one year of experience as a healthcare professional ● Coordinate clinical instruction at the rotation site ● Maintain effective communication with the program director or program designee.	Submit evidence that supports how the clinical liaison meets Standard VII.C.2

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is missing **three or more of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate clinical experiences for students ● Demonstrate knowledge of program discipline ● Have at least one year of experience as a healthcare professional ● Coordinate clinical instruction at the rotation site ● Maintain effective communication with the program director or program designee.	● Submit evidence that supports how the clinical liaison meets Standard VII.C.2.

VII.D.1: Path A Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of medical laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1.	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of clinical laboratory science education.

VII.D.2: Path A Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: Path A Accreditation Liaison Qualifications (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical laboratory professional who:
    a. Has knowledge of NAACLS accreditation.
    b. Has at least a master's degree and three years of experience in the program discipline.
    c. Holds ASCP BOC certification as a Pathologists' Assistant or Board certified pathologists.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following**: ● Has knowledge of NAACLS accreditation. ● Has at least a master's degree ● Has three years of experience in the program discipline ● Holds ASCP BOC certification as a Pathologists' Assistant or Board certified pathologists	Submit documentation that verifies the accreditation liaison meets Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● Has knowledge of NAACLS accreditation. ● Has at least a master's degree ● Has three years of experience in the program discipline ● Holds ASCP BOC certification as a Pathologists' Assistant or board certified pathologists	Submit documentation that verifies the accreditation liaison meets Standard VII.E.1.

VII.E.2: Path A Accreditation Liaison Responsibilities (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies and procedures
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact, program director, faculty and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● Provides guidance and assistance in NAACLS accreditation requirements, policies, and procedures ● Provides input into the curriculum and continuous program assessment and improvement ● Has regular contact with program director, faculty, and program personnel	Submit documentation that verifies the accreditation liaison meets Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● Provides guidance and assistance in NAACLS accreditation requirements, policies, and procedures ● Provides input into the curriculum and continuous program assessment and improvement ● Has regular contact with program director, faculty, and program personnel	Submit documentation that verifies the accreditation liaison meets Standard VII.E.2.

VII.F.1: Path A Education Coordinator Qualifications

1. Qualifications - the education coordinator, when required, must be a medical laboratory professional who:
    a. has maintained 60 credit hours (completed within a three-year time period) of CME related to pathology.
    b. Holds ASCP BOC U.S. certification for Pathologist's Assistant.
    c. Has knowledge of NAACLS accreditation and current certification procedures.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, education coordinator is **missing up to two of the following:** ● has maintained 60 credit hours (completed within a three-year time period) of CME related to pathology. ● Holds ASCP BOC U.S. certification for Pathologist's Assistant. ● has knowledge of NAACLS accreditation and current certification procedures.	Submit documentation that verifies how the Education Coordinator meets Standard VII.F.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, education coordinator is **missing three or more of the following:** ● has maintained 60 credit hours (completed within a three-year time period) of CME related to pathology. ● Holds ASCP BOC U.S. certification for Pathologist's Assistant. ● Has knowledge of NAACLS accreditation and current certification procedures.	Submit documentation that verifies how the Education Coordinator meets Standard VII.F.1.

VII.F.2: Path A Education Coordinator Responsibilities

2. Responsibilities - the education coordinator, when required, must provide supervision and coordination of the instructional faculty in the academic and clinical phases of the education program.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
No evidence to support how Education Coordinator meets the responsibilities of Standard VII.F.2	Submit documentation that verifies how the Education Coordinator meets all of the responsibilities listed in Standard VII.F.2.

VII.G.1: Path A Medical Director Qualifications

The program must have a qualified medical director who does not also serve as the program director.

1. Qualifications - the medical director must:
    a. Have a faculty appointment in the sponsoring institution.
    b. Be a currently licensed or board-certified anatomic pathologist.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, medical director qualifications are **missing at least one of the following:** ● Faculty appointment at sponsoring institution. ● A currently licensed or board-certified anatomic pathologist.	Submit documentation that verifies the medical director meets the qualifications under Standard VII.G1.

VII.G.2: Path A Medical Director Responsibilities

2. Responsibilities:
    a. The medical director must provide continuous medical direction for clinical instruction.
    b. The medical director must actively elicit the understanding and support of practicing physicians and must participate in the clinical instruction of pathology within the program.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, medical director is **missing one of the following:** ● Actively elicit the understanding and support of practicing physicians ● Participate in the clinical instruction of pathology within the program	Submit documentation that verifies the medical director responsibilities to meet Standard VII.G.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, medical director qualifications are **missing for all** of the responsibilities described in Standard VII.G.2	Submit documentation that verifies the medical director to meet all responsibilities described in Standard VII.G.2.

Phlebotomist (PBT)

VII.A.1: PBT Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.

1. Qualifications - the program director must have:
    a. a Bachelor's degree or higher
    b. an ASCP BOC or ASCP^{i} BOC certification as an MLS or MLT, or holds certification in Phlebotomy from an applicable recognized certification agency.
    c. One year of teaching experience.
    d. Knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.
    e. **(For International Programs Only)**: If the program director does not hold ASCP BOC or ASCP^{i} BOC certification as an MLS or MLT, a qualified professional who does hold ASCP BOC or ASCP^{i} BOC certification as an MLS or MLT, or a holds a certification in phlebotomy from an applicable recognized certification agency must hold an appointment as an **accreditation liaison**.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing at least one of the following:** ● Bachelor's degree or higher ● ASCP BOC or ASCP^{i} BOC as MLS/MLT, or PBT cert from recognized agency. ● One year of teaching experience ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes. ● **International programs only**: ASCP or ASCP^{i} is not held	Please submit documentation that verifies the program director meets qualifications under Standard VIII.A.1.

VII.A.2: PBT Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Input into Budget and Finance needs of program ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Budget and Finance ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

VII.B.1: PBT Site Program Administrator Qualifications

1. Qualifications - the site program administrator must have:
    a. a bachelor's degree.
    b. the same level of certification required of a program director.
    c. at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration
        iii. certification/licensure procedures

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing all of the following:** ● a bachelor's degree ● hold the same certification level as the program director ● has at least one year of medical laboratory science education to include educational method, program assessment/administration, and certification/licensure procedures	Submit documentation to demonstrate that site program administrator qualifications meet Standard VII.B.1 by addressing *[insert items listed in rationale].*

VII.B.2: PBT Site Program Administrator - Responsibilities

2. Responsibilities - the site program administrator must:
    a. coordinate teaching and clinical/applied learning education.
    b. evaluate program effectiveness.
    c. maintain appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing three or more of the following:** ● coordinating teaching ● coordinating clinical/applied learning ● evaluating program effectiveness ● maintaining appropriate communications with the program director.	Submit documentation to support how the site program administrator meets Standard VII.B.2 responsibilities of *[insert missing items from rationale].*

VII.C.1: PBT Faculty/Instructors - Didactic

1. Didactic Instructor Appointments - the program must have qualified faculty/instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors
    a. Qualifications - Faculty/instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level.
    b. Responsibilities - responsibilities of the faculty/instructors must include:
        i. Participation in teaching courses.
        ii. Evaluation of student achievement.
        iii. Development of curriculum, policy and procedures.
        iv. Assessment of program outcomes

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing up to two of the following**: ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty/instructor is **missing three or more of the following:** ● demonstrate adequate knowledge and content area proficiency ● demonstrate effective teaching at the appropriate level ● participate in teaching courses ● evaluate student achievement ● develop curriculum, policy, and procedures ● assess program outcomes	Submit documentation that supports how faculty/instructor(s) meet qualifications and responsibilities as described in Standard VII.C.1.

VII.C.2: PBT Clinical/Applied Learning Liaison

2. Clinical / Applied Learning Liaison - at least one clinical/applied learning liaison, who is employed by the clinical/applied learning site, must be designated at each clinical/applied learning site affiliated with the program to coordinate clinical/applied learning for students.
    a. Qualifications - the clinical/applied learning liaison must:
        i. Be a healthcare professional who demonstrates the ability to effectively coordinate clinical/applied learning of the students.
        ii. Demonstrate knowledge of the program discipline.
        iii. Have at least one year of experience as a healthcare professional
    b. Responsibilities - clinical/applied liaison must be responsible for:
        i. Coordinating clinical instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing up to two of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing three or more of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate student clinical experiences ● demonstrate knowledge of program discipline ● have at least one year of experience as a healthcare professional ● coordinate clinical instruction at the site ● maintain effective communication with the program director or designee	Submit evidence to support how clinical liaison meets the qualifications and responsibilities as described in Standard VII.C.2.

VII.D.1: PBT Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of clinical laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.1.	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of clinical laboratory science education.

VII.D.2: PBT Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: PBT Accreditation Liaison (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical laboratory professional who:
    a. Has knowledge of NAACLS accreditation.
    b. Has at least a master's degree and three years of experience in the program discipline.
    c. Holds ASCP BOC or ASCP[i] BOC certification as a medical laboratory scientist, medical laboratory technician, or holds certification in phlebotomy from an applicable recognized certification agency.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● Holds ASCP BOC or ASCP[i] BOC certification as a medical laboratory scientist, medical laboratory technician, or holds certification in phlebotomy from an applicable recognized certification agency.	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● knowledge of NAACLS accreditation ● at least a master's degree or doctoral degree ● three years of experience in the program discipline ● Holds ASCP BOC or ASCP[i] BOC certification as a medical laboratory scientist, medical laboratory technician, or holds certification in phlebotomy from an applicable recognized certification agency.	Submit evidence to support how accreditation liaison meets the qualifications as described in Standard VII.E.1.

VII.E.2: PBT Accreditation Liaison (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies and procedures.
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact, program director, faculty, and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing all of the following**: ● provides guidance or assistance in NAACLS accreditation requirements, policies, and procedures ● provides input into the curriculum and continuous program assessment for improvements ● has regular contact with the program director, faculty, and program personnel	Submit evidence to support how accreditation liaison meets the responsibilities of accreditation liaison as described in Standard VII.E.2.

Public Health Microbiologists (PHM)

VII.A.1: PHM Program Director Qualifications

The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities

1. Qualifications - the program director must have:
    a. earned a Master's degree or Doctoral degree
    b. a relevant certificate, licensure, or recognition appropriate for the field
    c. Three years of teaching experience in public health microbiology or related area
    d. Knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.
    e. **(for international programs only)** If the program director does not hold ASCP BOC or ASCP^{i} BOC certification as a medical laboratory scientist, a qualified professional who does hold ASCP BOC or ASCP^{i} BOC certification as a medical laboratory scientist must hold appointment as an accreditation liaison.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing at least one of the following**: ● Master's or doctorate degree ● Relevant certification, licensure, or recognition appropriate for the field ● Three years of teaching experience ● Knowledge of educational methods, administrative duties, and NAACLS accreditation processes ● **International programs only**: ASCP or ASCP^{i} is not held or no valid appointment.	Please submit documentation that verifies the program director meets the qualifications under Standard VIII.A.1.

VII.A.2: PHM Program Director Responsibilities

2. Responsibilities - the program director must:
    a. Be responsible for the organization, administration, instruction, evaluation, continuous quality improvement, curriculum planning and development, directing other program faculty/staff, and general effectiveness of the program.
    b. Provide evidence that s/he participates in the budget preparation process.
    c. Engage in a minimum of 36 hours of documented continuing professional development every three years.
    d. Be responsible for maintaining NAACLS accreditation of the program.
    e. Have regular and consistent contact with students, faculty, administration, and program personnel.

Partial compliance

Rationale	Recommendation
Insufficient evidence provided, program director is **missing up to two of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Input into Budget and Finance needs of program ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program director is **missing three or more of the following**: ● Any of the eight items of responsibility listed under Std. VII.A.2.a, specifically [*identify specific area of **Std. VII.A.2.a** missing*] ● Budget and Finance ● At least 36 credits of CE every three years ● Maintaining NAACLS accreditation ● Regular communication with students, faculty, administration, and program personnel	Submit documentation that demonstrates program director compliance with missing responsibilities as identified for Standard VII.A.2: *[insert missing items from rationale]* for standard.

VII.A.3: PHM Program Director Appointments

The program director must have a faculty or clinical appointment at the sponsoring institution.

Partial compliance:

Rationale	Recommendation
No Partial Compliance	N/A

Non-compliance:

Rationale	Recommendation
No evidence provided to verify program director has a faculty or clinical appointment at the sponsoring institution.	Submit evidence that supports the program director has a faculty or clinical appointment at the sponsoring institution.

VII.B.1: PHM Site Program Administrator Qualifications

1. Qualifications - the site program administrator must:
    a. Have a bachelor's degree.
    b. Hold the same level certification required of a program director.
    c. Have at least one year of experience in medical laboratory science education to include knowledge of:
        i. education methods
        ii. program assessment and administration
        iii. certification/licensure procedures

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● Has a bachelor's degree ● Hold the same level of certification required of the program director ● Has at least one year of medical laboratory science education to include educational methods, program assessment/administration, and certification/licensure procedures	Submit evidence that supports how the site program administrator meets all of the following: ● Has a bachelor's degree ● Hold the same level of certification required of the program director ● Has at least one year of medical laboratory science education to include educational methods, program assessment/administration, and certification/licensure procedures

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator **does not meet all of the following:** ● Has a bachelor's degree ● Hold the same level of certification required of the program director ● Has at least one year of medical laboratory science education to include educational methods, program assessment/administration, and certification/licensure procedures	Submit evidence that supports how the site program administrator meets all of the following: ● Has a bachelor's degree ● Hold the same level of certification required of the program director ● Has at least one year of medical laboratory science education to include educational methods, program assessment/administration, and certification/licensure procedures

VII.B.2: PHM Site Program Administrator Responsibilities

2. Responsibilities - the site program administrator, when required, is responsible for:
    a. Coordinating teaching and clinical/applied learning education.
    b. Evaluating program effectiveness.
    c. Maintaining appropriate communications with the program director.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing up to two of the following:** ● Coordinating teaching ● Coordinating clinical/applied learning ● Evaluating program effectiveness ● Maintaining appropriate communications with the program director.	Submit evidence that supports how the site program administrator meets all of the following: ● Coordinating teaching ● Coordinating applied or experiential clinical learning ● Evaluating program effectiveness ● Maintaining appropriate communications with the program director.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, site program administrator is **missing all of the following:** ● Coordinating teaching ● Coordinating clinical/applied learning ● Evaluating program effectiveness ● Maintaining appropriate communications with the program director.	Submit evidence that supports how the site program administrator meets all of the following: ● Coordinating teaching ● Coordinating applied or experiential clinical learning ● Evaluating program effectiveness ● Maintaining appropriate communications with the program director.

VII.C.1: PHM Faculty/Instructor Didactic

1. The program must have qualified faculty/instructors who hold appointments within the educational program. The program must ensure and document ongoing professional development of the program faculty/instructors.
    a. Qualifications: Faculty/instructors designated by the program must:
        i. Demonstrate adequate knowledge and proficiency in their content areas.
        ii. Demonstrate the ability to teach effectively at the appropriate level
    b. Responsibilities: The responsibilities of the faculty/instructors must include:
        i. Participation in teaching courses.
        ii. Evaluation of student achievement.
        iii. Development of curriculum, policy and procedures.
        iv. Assessment of program outcomes.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty / instructor (s) are **missing up to two of the following:** ● Demonstrate adequate knowledge and content area proficiency ● Demonstrate effective teaching at the appropriate level ● Participate in teaching courses ● Evaluate student achievement / performance ● Develop curriculum, policy, and procedures ● Assess program outcomes	Submit evidence that supports how the faculty/instructor(s) meet all of the following: ● Demonstrate adequate knowledge and content area proficiency ● Demonstrate effective teaching at the appropriate level ● Participate in teaching courses ● Evaluate student achievement / performance ● Develop curriculum, policy, and procedures ● Assess program outcomes

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, faculty / instructor(s) are **missing three or more of the following:** ● Demonstrate adequate knowledge and content area proficiency ● Demonstrate effective teaching at the appropriate level ● Participate in teaching courses ● Evaluate student achievement / performance ● Develop curriculum, policy, and procedures ● Assess program outcomes	Submit evidence that supports how the faculty/instructor(s) meet all of the following: ● Demonstrate adequate knowledge and content area proficiency ● Demonstrate effective teaching at the appropriate level ● Participate in teaching courses ● Evaluate student achievement / performance ● Develop curriculum, policy, and procedures ● Assess program outcomes

VII.C.2: PHM Clinical/Applied Learning Liaison

2. Clinical/Applied Learning Liaison - at least one clinical/applied learning liaison, who is employed by the clinical/applied learning site, must be designated at each clinical/applied learning site affiliated with the program to coordinate clinical/applied learning for students.
    a. Qualifications The clinical/applied learning liaison must:
        i. Be a healthcare professional staff member of the facility who demonstrates the ability to effectively coordinate clinical/applied learning of the students.
        ii. Demonstrate knowledge of the program discipline.
        iii. Have at least one year of experience as a healthcare professional.
    b. Responsibilities The clinical/applied learning liaison must be responsible for:
        i. Coordinating clinical/applied learning instruction at the site.
        ii. Maintaining effective communication with the program director or designee.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is **missing up to two of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate clinical experiences for students ● Demonstrate knowledge of program discipline ● Have at least one year of experience as a healthcare professional ● Coordinate clinical instruction at the rotation site ● Maintain effective communication with the program director or program designee.	Submit evidence that supports how the clinical liaison meets all of the following: ● healthcare professional who demonstrates the ability to effectively coordinate clinical experiences for students ● Demonstrate knowledge of program discipline ● Have at least one year of experience as a healthcare professional ● Coordinate clinical instruction at the rotation site ● Maintain effective communication with the program director or program designee.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, clinical liaison is missing **three or more of the following:** ● healthcare professional who demonstrates the ability to effectively coordinate clinical experiences for students ● Demonstrate knowledge of program discipline ● Have at least one year of experience as a healthcare professional ● Coordinate clinical instruction at the rotation site ● Maintain effective communication with the program director or program designee.	Submit evidence that supports how the clinical liaison meets all of the following: ● healthcare professional who demonstrates the ability to effectively coordinate clinical experiences for students ● Demonstrate knowledge of program discipline ● Have at least one year of experience as a healthcare professional ● Coordinate clinical instruction at the rotation site ● Maintain effective communication with the program director or program designee.

VII.D.1: PHM Advisory Committee

1. There must be an advisory committee composed of individuals from the community of interest who have knowledge of medical laboratory science education.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
The advisory committee is **not** composed of individual(s) from the community of interest as outlined in VII.D.	Submit documentation that verifies there is an advisory committee composed of individuals from the community of interest (e.g., practicing professionals, academic professionals, scientific consultants, administrators, pathologists and other physicians, public members) who have knowledge of clinical laboratory science education.

VII.D.2: PHM Advisory Committee

2. The advisory committee of the program shall have input into the program and curriculum to maintain current relevance and effectiveness.

Partial compliance:

Rationale	Recommendation
N/A	N/A

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided for at **least one of the following:** ● the advisory committee does not provide input into the curriculum to maintain relevance and effectiveness ● program response to advisory input does not address or illustrate advisory committee involvement in maintaining current relevance and effectiveness of the program and curriculum	Submit documentation that verifies the advisory committee has effective input into the program/curriculum with regard to its current relevance and effectiveness.

VII.E.1: PHM Accreditation Liaison Qualifications (International Programs Only)

1. Qualifications - the accreditation liaison, when required, must be a medical laboratory professional who:
    a. Has knowledge of NAACLS accreditation.
    b. Has at least a master's degree and three years of experience in the program discipline.
    c. Holds ASCP BOC or ASCP[i] BOC certification as a medical laboratory scientist.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following**: ● Has knowledge of NAACLS accreditation. ● Has at least a master's degree ● Has three years of experience in the program discipline ● Holds the appropriate ASCP BOC or ASCP[i] certification	Submit documentation that verifies the accreditation liaison meets all of the following: ● Has knowledge of NAACLS accreditation. ● Has at least a master's degree ● Has three years of experience in the program discipline ● Holds the appropriate ASCP BOC or ASCP[i] certification

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● Has knowledge of NAACLS accreditation. ● Has at least a master's degree ● Has three years of experience in the program discipline ● Holds the appropriate ASCP BOC or ASCP[i] certification	Submit documentation that verifies the accreditation liaison meets all of the following: ● Has knowledge of NAACLS accreditation. ● Has at least a master's degree ● Has three years of experience in the program discipline ● Holds the appropriate ASCP BOC or ASCP[i] certification

VII.E.2: PHM Accreditation Liaison Responsibilities (International Programs Only)

2. Responsibilities - the accreditation liaison, when required, must:
    a. Provide guidance and assistance in NAACLS accreditation requirements, policies and procedures.
    b. Provide input into the curriculum and continuous program assessment and improvement.
    c. Have regular contact, program director, faculty and program personnel.

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing up to two of the following:** ● Provides guidance and assistance in NAACLS accreditation requirements, policies, and procedures ● Provides input into the curriculum and continuous program assessment and improvement ● Has regular contact with program director, faculty, and program personnel	Submit documentation that verifies the accreditation liaison meets all of the following: ● Provides guidance and assistance in NAACLS accreditation requirements, policies, and procedures ● Provides input into the curriculum and continuous program assessment and improvement ● Has regular contact with program director, faculty, and program personnel

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, accreditation liaison is **missing three or more of the following:** ● Provides guidance and assistance in NAACLS accreditation requirements, policies, and procedures ● Provides input into the curriculum and continuous program assessment and improvement ● Has regular contact with program director, faculty, and program personnel	Submit documentation that verifies the accreditation liaison meets all of the following: ● Provides guidance and assistance in NAACLS accreditation requirements, policies, and procedures ● Provides input into the curriculum and continuous program assessment and improvement ● Has regular contact with program director, faculty, and program personnel

Standard VIII: Curriculum Requirements

All NAACLS Accredited Programs

VIII.A: Instructional Areas

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, instructional areas are **missing up to two of the items in Standard VIII.A.** *[list items missing in Std. VIII.A].*	Submit evidence to support instruction and experiences of the program curriculum as described in Standard VIII.A.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, instructional areas are **missing three or more items in Standard VIII.A** *[list items missing in Std. VIII.A].*	Submit evidence to support instruction and experiences of the program curriculum as described in Standard VIII.A.

VIII.B: Learning Experiences

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing one of the following:** ● Course content and activities sequencing that provides a foundation for building from lower level learning to higher level learning. ● Learning experiences that include necessary content and activities *(identify and note specific areas of deficiency)* to enable students to achieve entry-level competencies in each major discipline as identified in Standard VIII.A.	Submit documentation demonstrating that learning experiences in (identify specific areas of deficiency) are appropriately sequenced and enable students to achieve entry-level competencies.
● Insufficient evidence provided, the program does not demonstrate that students, under qualified supervision, are permitted to perform procedures as defined in V.E after demonstrating competence.	Submit documentation demonstrating that students, under qualified supervision, are permitted to perform procedures as defined in V.E after demonstrating competence.

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing both of the following:** ● Course content and activities sequencing that provides a foundation for building from lower level learning to higher level learning. ● Learning experiences that include necessary content and activities *(identify and note specific areas of deficiency)* to enable students to achieve entry-level competencies in each major discipline as identified in Standard VIII.A.	Submit documentation demonstrating that learning experiences are appropriately sequenced and include necessary content and activities for students to achieve entry-level competencies in *(identify specific areas of deficiency).*
● Insufficient evidence provided, the program does not demonstrate that students, under qualified supervision, are permitted to perform procedures as defined in V.E after demonstrating competence.	Submit documentation demonstrating that students, under qualified supervision, are permitted to perform procedures as defined in V.E after demonstrating competence.

VIII.C. Evaluations

Partial compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing up to two items listed in Standard VIII.C:** ● Evaluation systems must relate to course content and support program competencies. ● Evaluations relate to objectives and competencies for didactic components. ● Evaluations relate to objectives and competencies for applied (clinical) component ● Evaluations are employed frequently enough to provide students and faculty with timeline indications of student performances and progress ● The overall evaluation system must serve as a reliable indicator of instructional and course design effectiveness.	Submit documentation demonstrating that evaluation systems relate to course content and support program competencies and the following areas are adequately addressed: *[insert specific areas of concerns for Standard VIII.C].*

Non-compliance:

Rationale	Recommendation
Insufficient evidence provided, program is **missing three or more items listed in Standard VIII.C.:** ● Evaluation systems must relate to course content and support program competencies. ● Evaluations relate to objectives and competencies for didactic components. ● Evaluations relate to objectives and competencies for applied (clinical) component ● Evaluations are employed frequently enough to provide students and faculty with timeline indications of student performances and progress ● The overall evaluation system must serve as a reliable indicator of instructional and course design effectiveness.	Submit documentation demonstrating that evaluation systems relate to course content and support program competencies and the following areas are adequately addressed: (insert specific areas of concerns for Standard VIII.C).