



Spring 2024 Changes

<u>Category</u>	<u>Type of Change</u>	<u>Summary of Key Changes</u>	<u>Implementation date/Status</u>
STANDARDS			
<u>Standard (ie Number)</u>	<u>Current Standard or New Standard</u>	<u>Revision and/Summary of Key Changes</u>	<u>Implementation date/Status</u>
MLS Standard VIII.A.2	<p>Current: VIII.A.2: The curriculum must address pre-analytical, analytical and post-analytical components of laboratory services. This includes principles and methodologies, performance of assays, problem-solving, troubleshooting techniques, interpretation and evaluation of clinical procedures and results, statistical approaches to data evaluation, principles and practices of quality assurance/quality improvement, and continuous assessment of laboratory services for all major areas practiced in the contemporary clinical laboratory.</p> <p>The program curriculum must include the following scientific content:</p> <ul style="list-style-type: none"> a) Clinical chemistry b) Hematology/Hemostasis c) Immunology d) Immunohematology/transfusion medicine e) Microbiology 	<p>Proposed: VIII.A.2: The curriculum must address pre-analytical, analytical and post-analytical components of laboratory services. This includes principles and methodologies, performance of assays, problem-solving, troubleshooting techniques, interpretation and evaluation of clinical procedures and results, statistical approaches to data evaluation, principles and practices of quality assurance/quality improvement, and continuous assessment of laboratory services for all major areas practiced in the contemporary clinical laboratory.</p> <p>The program curriculum must include the following scientific content:</p> <ul style="list-style-type: none"> a) Clinical chemistry b) Hematology/Hemostasis c) Immunology d) Immunohematology/transfusion medicine e) Microbiology f) Urine and body fluid analysis g) Laboratory Operations and Management 	Released for Public Comment, Board Review in September 2024

	f) Urine and body fluid analysis g) Laboratory Operations		
PBT Standard VIII. A.2	Current: VIII. PBT Curriculum Requirements A. Instructional Areas The program curriculum must include instruction and experiences in the following: 1. A variety of collection techniques including evacuated tube collection devices, syringe collection, and capillary/dermal puncture methods; 2. Contact with various patient types in a variety of settings such as health fairs, donor or pheresis centers, nursing homes, in addition to the typical inpatient and outpatient settings;	Approved: VIII. PBT Curriculum Requirements A. Instructional Areas The program curriculum must include instruction and experiences in the following: 1. A variety of collection techniques including evacuated tube collection devices, syringe collection, and capillary/dermal puncture methods; Contact with various patient types in a variety of settings such as health fairs, donor or pheresis centers, nursing homes, in addition to the typical inpatient and outpatient settings;	Board Approved in April 2024
DCLS Standards IV.A.1.k.5	Current: IV. Students A. Publications and Disclosures 1. The following must be defined, published, and readily available to prospective and enrolled students: k. policies and procedures for: 5. NA	Approved: IV. Students A. Publications and Disclosures 1. The following must be defined, published, and readily available to prospective and enrolled students: k. policies and procedures for: 5. passing, failing, and progression through program.	Board Approved in April 2024
DCLS Standards VIII.A.1	Current: VIII. Curriculum Requirements A. Instructional Areas 1. Graduate-level coursework that includes an appropriate mix of didactic, clinical practice and research must be assured.	VIII. Curriculum Requirements A. Instructional Areas 1. Graduate-level coursework that includes an appropriate mix of didactic, clinical practice and research at an advanced practice level must be assured.	Board Approved in April 2024
DCLS Standards VIII.A.2	Current: VIII. Curriculum Requirements A. Instructional Areas	Approved: VIII. Curriculum Requirements A. Instructional Areas	Board Approved in April 2024

	<p>2. The program curriculum must include advanced theory and clinical correlation at the graduate level. The curriculum must address pre-analytical, analytical, and post-analytical components of laboratory services.</p> <p>The program curriculum must contain the following advanced content:</p> <p>a. Clinical Chemistry</p>	<p>2. The program curriculum must include advanced theory and clinical correlation at the graduate level. The curriculum must address pre-analytical, analytical, and post-analytical components of laboratory services.</p> <p>The program curriculum must contain the following advanced content:</p> <p>a. Clinical Chemistry and Toxicology</p>	
DCLS Standards VIII. A.3	<p>Current:</p> <p>VIII. Curriculum Requirements</p> <p>A. Instructional Areas</p> <p>3. The program curriculum must include scientific and medical information sufficient to provide a foundation for graduate-level work including:</p>	<p>Approved:</p> <p>VIII. Curriculum Requirements</p> <p>A. Instructional Areas</p> <p>3. The program curriculum must include scientific and medical clinical information sufficient to provide a foundation for graduate-level work including:</p>	Board Approved in April 2024
DCLS Standards VIII.A.4.i	<p>Current:</p> <p>VIII. Curriculum Requirements</p> <p>A. Instructional Areas</p> <p>4. The program curriculum must include principles and practices of:</p> <p>i. grant proposal development</p>	<p>Approved:</p> <p>VIII. Curriculum Requirements</p> <p>A. Instructional Areas</p> <p>4. The program curriculum must include principles and practices of:</p> <p>i. external funding proposal development</p>	Board Approved in April 2024
DCLS Standards VIII.B.2	<p>Current:</p> <p>VIII. Curriculum Requirements</p> <p>A. Instructional Areas</p> <p>4. The program curriculum must include principles and practices of:</p> <p>i. external funding proposal development</p>	<p>Approved:</p> <p>VIII. Curriculum Requirements</p> <p>B. Experiential Areas</p> <p>2. Applying interpersonal and communication skills with inter-professional teams and a diverse community of providers and patients. inter professional teams and a diverse community of providers and patients.</p>	Board Approved in April 2024
DCLS Standards VIII.C	<p>Current:</p> <p>C. Evaluations</p> <p>1. Written criteria for passing, failing, and progression in the program must be provided to each student at the time of entry into the program.</p>	<p>Approved:</p> <p>VIII. Curriculum Requirements</p> <p>C. Evaluations</p> <p>1. Written criteria for passing, failing, and progression in the program must be provided to each student at the time of entry into the</p>	Board Approved in April 2024

	<p>2. Evaluations of student performance must be related to the objectives and competencies for both instructional and experiential components. They must be employed frequently enough to provide students and faculty with timely indications of the student's academic standing and progress.</p> <p>3. Students learning outcomes must be evaluated for the effectiveness of instruction and course design.</p>	<p>program- 2. Evaluations of student performance must be related to the objectives and competencies for both instructional and experiential components. They-1. Evaluations of student performance must be employed frequently enough to provide students and faculty with timely indications of the student's academic progress in courses. standing and progress. 3. 2. Students learning outcomes Evaluations of student performance must be a reliable indicator of effectiveness of instruction and course design.</p>	
PHM Standard VII.A.1.b	<p>Current:</p> <p>A. Program Director The program director must be a laboratory professional who:</p> <p>1. Qualifications</p> <ol style="list-style-type: none"> has an earned master's or doctoral degree; holds ASCP-BOC or ASCPi-BOC generalist certification as a Medical Laboratory Scientist/Medical Technologist. has three years of teaching experience in public health microbiology or related area has knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures. 	<p>Approved:</p> <p>A. Program Director The program director must be a laboratory professional who:</p> <p>1. Qualifications</p> <ol style="list-style-type: none"> has an earned master's or doctoral degree; holds relevant certification, licensure, or recognition appropriate for the field. has three years of teaching experience in public health microbiology or related area has knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures. 	Board Approved in April 2024
Elimination of Standard I.B and I.C	<p>Revision</p> <p>I. Sponsorship</p> <p>A. Sponsoring Institution The sponsor of an educational program must be one of the following:</p> <p>1. A post-secondary academic institution</p>	<p>Proposed:</p> <p>I. Sponsorship</p> <p>A. Sponsoring Institution The sponsor of an educational program must be one of the following:</p> <p>1. A post-secondary academic institution</p>	Released for Public Comment, Board Review in September 2024

	<p>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.</p> <p>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.</p> <p>3. A secondary or post-secondary institution recognized by the state in which it is located. (for Phlebotomy and Medical Laboratory Assistant programs only)</p> <p>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)</p> <p>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.</p> <p>B. Consortium Sponsor A separate and distinct entity consisting of two or more members that exists for the</p>	<p>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.</p> <p>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.</p> <p>3. A secondary or post- secondary institution recognized by the state in which it is located. (for Phlebotomy and Medical Laboratory Assistant programs only)</p> <p>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)</p> <p>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.</p> <p>B. Consortium Sponsor A separate and distinct entity consisting of two or more members that exists for the purpose of operating an educational program. Where a consortium exists, at least one member of the consortium must meet the requirements of a sponsoring institution specified in I.A.</p>	
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	<p>purpose of operating an educational program. Where a consortium exists, at least one member of the consortium must meet the requirements of a sponsoring institution specified in I.A. The creation of the consortium must be clearly documented as a formal memorandum of understanding and signed by all members. This document shall contain the following elements:</p> <ol style="list-style-type: none"> 1. governance of the consortium 2. lines of authority within the consortium for the educational program 3. responsibilities of each member in the delivery of the educational program <p>C. Multi-location Sponsor</p> <ol style="list-style-type: none"> 1. A specified campus location of an entity that controls a system of campuses, which is accredited by an institutional accrediting agency that is recognized by the U.S. Department of Education and given the authority to provide postsecondary education. The specified campus location delivers the educational program in its entirety and awards a minimum of a certificate at the completion of the program. 2. A specified location of an entity that controls a system of hospitals, medical centers, or laboratories that are 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. 	<p>The creation of the consortium must be clearly documented as a formal memorandum of understanding and signed by all members. This document shall contain the following elements:</p> <ol style="list-style-type: none"> 1. governance of the consortium 2. lines of authority within the consortium for the educational program 3. responsibilities of each member in the delivery of the educational program <p>C. Multi-location Sponsor</p> <ol style="list-style-type: none"> 1. A specified campus location of an entity that controls a system of campuses, which is accredited by an institutional accrediting agency that is recognized by the U.S. Department of Education and given the authority to provide postsecondary education. The specified campus location delivers the educational program in its entirety and awards a minimum of a certificate at the completion of the program. 2. A specified location of an entity that controls a system of hospitals, medical centers, or laboratories that are 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. 	
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Std. I.B.6	New Standard	<p>B. Responsibilities of the Sponsor</p> <ol style="list-style-type: none"> 1. The sponsor has primary responsibility for: <ol style="list-style-type: none"> a. supporting curriculum planning and course selection by program faculty and staff b. appointing faculty and staff c. maintaining student transcripts permanently d. granting the degree and/or certificate documenting satisfactory completion of the educational program e. ensuring that appropriate personal safety measures are addressed for students and faculty f. ensuring that all provisions of the Standards are met g. ensuring that graduates of the program have obtained or will obtain the minimum degree and/or certificate upon completion of the program <p>Pathologists' Assistant programs: a master' degree or higher, or a certificate for students who hold or complete the required degree.</p> <p>BMS, CG, DMS, HTL, MLM, MLS, and PHM programs: a baccalaureate degree or higher, or a certificate for students who hold or complete the required degree.</p> <p>HT and MLT programs: an associate degree or higher, or a certificate for students who hold or complete the required degree.</p> <p>MLA and PBT programs: a certificate for the student.</p> <ol style="list-style-type: none"> 2. The sponsor must ensure that the activities 	Released for Public Comment, Board Review in September 2024
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		<p>assigned to students in the applied learning experiences setting are educational.</p> <ol style="list-style-type: none"> 3. There must be documented ongoing communication between the sponsor and its active affiliates for exchange of information and coordination of the program. 4. The sponsor must provide eligible students the opportunity to participate in applied learning experiences. 5. The sponsor must have a formal affiliation agreement with all other entities that are involved in the education of the students, which describes: <ol style="list-style-type: none"> a. the relationship b. the roles c. the responsibilities of the sponsor and that entity 6. The sponsor must define its administrative line of authority. 	
Standard I.D.5	<p>Revision</p> <p>Standard I.D.5: The sponsor must have a formal Affiliation Agreement with all other entities that are involved in the education of the students, which describes:</p> <ol style="list-style-type: none"> a. the relationship b. the roles c. the responsibilities of the sponsor and that entity 	<p>Proposed:</p> <p>Standard I.D.5: The sponsor must have a formal Affiliation Agreement or Memorandum of Understanding (MOU) with all other entities that are involved in the education of the students, which describes:</p> <ol style="list-style-type: none"> a. the relationship b. the roles c. the responsibilities of the sponsor and that entity 	Released for Public Comment, Board Review in September 2024
Std. II	<p>Revision to New Standards</p> <p>II. Assessment and Continuous Quality Improvement</p> <p>A. Systematic Assessment</p> <p>There must be a documented plan for continuous and systematic assessment of</p>	<p>Approved for the New Standards</p> <p>II. Assessment and Continuous Quality Improvement</p> <p>A. Systematic Assessment</p> <p>There must be a documented plan for continuous and systematic assessment of the</p>	Board Approved in April 2024

	<p>the effectiveness of the program.</p> <p>B. Outcome Measures A review of the results of the following outcomes measures from the last three active years must be documented, analyzed and used in program assessment and continuous quality improvement of the program to include an annual submission to NAACLS. If the reported outcome measure(s) does/do not meet the stated NAACLS approved benchmarks (see Standards Compliance Guide), then an analysis and action plan must be submitted to address and correct any deficiencies.</p> <ol style="list-style-type: none"> 1. External certification results 2. Graduation rates 3. Placement rates (i.e., employment positions in the field of study or pursuit of further education) 4. Attrition rates 5. Other (optional): such as results of capstone projects, faculty feedback, exit or final examinations, exit interviews with graduates, student and graduate professional leadership, impact of the program on local and regional healthcare, etc. <p>C. Feedback A review of the results of the following outcomes measures from the last three active years must be documented, analyzed, and used in program assessment and continuous quality improvement of the program.</p> <ol style="list-style-type: none"> 1. Findings from graduate feedback 	<p>effectiveness of the program.</p> <p>B. Outcome Measures The following outcome measures must be documented and submitted to NAACLS annually for use in program assessment and continuous quality improvement.</p> <ol style="list-style-type: none"> 1. External certification results 2. Graduation rates 3. Placement rates (i.e., employment positions in the field of study or pursuit of further education) 4. Attrition rates 5. Other (optional) <p>C. Feedback The following findings must be collected and used in program assessment and continuous quality improvement.</p> <ol style="list-style-type: none"> 1. Findings from graduate feedback 2. Findings from employer feedback <p>D. Program Assessment and Modification All programs must make efforts to continually improve by:</p> <ol style="list-style-type: none"> 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. 	
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	<p>2. Findings from employer feedback</p> <p>D. Program Assessment and Modification The review of outcomes measures and feedback must be:</p> <ol style="list-style-type: none"> 1. Reflected in ongoing quality improvement, curriculum development, resource acquisition/allocation, and program modification. 2. Analyzed to demonstrate the effectiveness of any changes implemented. 		
Std. IV.A.1.n	New Standard	<p>IV. Students</p> <p>A. Publications and Disclosures 1.The following must be defined, published, and readily available to prospective and enrolled students:</p> <p>n. a line of authority for administrative personnel including:</p> <ol style="list-style-type: none"> 1. roles and responsibilities as they apply to enrolled students. 2. contact information 	Released for Public Comment, Board Review in September 2024
Std. V E & F	<p>Revision</p> <p>V. Operational Policies Fair Practices</p> <p>E. Student employment in the laboratory must be non-compulsory and must be outside of assigned applied learning experiences/academic hours.</p> <p>F. Students must be directly supervised during their applied learning experiences and may not be substituted for laboratory employees/personnel to perform direct patient and/or reportable work.</p>	<p>Proposed:</p> <p>V. Operational Policies Fair Practices</p> <p>E. Students must have an assigned preceptor, appropriate for the discipline, who directly oversees their applied learning experiences.</p> <p>F. Students may not be substituted for laboratory employees/personnel to perform direct patient and/or reportable work, during their applied learning experiences.</p> <p>G. Student employment at an applied learning</p>	Released for Public Comment, Board Review in September 2024

		site must be non-compulsory and must be outside of assigned applied learning experiences/academic hours.	
Standard VI	New Standard	VI. Administrative: Maintaining Accreditation Program/Sponsoring Institution Responsibilities Programs are required to comply with administrative requirements for maintaining accreditation including: G. Submitting all materials and conducting all NAACLS-accreditation related communication in English. 1. All materials translations be completed by an individual with experience in or knowledge of medical laboratory terminology	Released for Public Comment, Board Review in September 2024
Standard VII.C.2.a.i&iii	Revision to New Standards VII. Program Administration C. Faculty 2. Clinical/ Applied Learning Experience Liaison At least one clinical/ applied learning experience liaison, who is employed by the clinical/ applied 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 certified medical laboratory professional staff member of the facility who demonstrates the ability to effectively coordinate clinical/applied learning experiences of the students; ii. demonstrate knowledge of the program discipline; iii. have at least one year experience as a medical laboratory professional.	Proposed: VII. Program Administration C. Faculty 2. Clinical/ Applied Learning Experience Liaison At least one clinical/ applied learning experience liaison, who is employed by the clinical/ applied 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 health care professional staff member of the facility who demonstrates the ability to effectively coordinate clinical/applied learning experiences of the students; ii. demonstrate knowledge of the program discipline; iii. have at least one year experience as a health care professional. b. Responsibilities The clinical/applied learning experience liaison	Released for Public Comment, Board Review in September 2024

	<p>b. Responsibilities The clinical/applied learning experience liaison must be responsible for:</p> <ul style="list-style-type: none"> i. coordinating clinical/applied learning instruction at the site; ii. maintaining effective communication with the program director or designee. 	<p>must be responsible for:</p> <ul style="list-style-type: none"> i. coordinating clinical/applied learning instruction at the site; ii. maintaining effective communication with the program director or designee. 	
Std. VII. A. 1. d & e – All disciplines	<p>Revision A. Program Director</p> <p>The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.</p> <p>1. Qualifications</p> <ul style="list-style-type: none"> a. has an earned master's or doctoral degree; b. holds ASCP-BOC or ASCPⁱ-BOC certification in cytogenetics or ABMGG certification in clinical cytogenetics; c. has three years of teaching experience; d. has knowledge of education methods and administration as well as current NAACLS accreditation and certification procedures. 	<p>Proposed A. Program Director</p> <p>The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.</p> <p>1. Qualifications</p> <ul style="list-style-type: none"> a. has an earned master's or doctoral degree; b. holds ASCP-BOC or ASCPⁱ-BOC certification in cytogenetics or ABMGG certification in clinical cytogenetics; c. has three years of teaching experience; d. has knowledge of education methods and administration as well as current certification procedures; e. attends ten hours of NAACLS sponsored workshops every five years. 	Released for Public Comment, Board Review in September 2024
Standard VII – Accreditation Liaison (all disciplines; DCLS also below)	<p>Revision VII. MLS Program Administration A. Program Director</p> <p>The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.</p>	<p>Proposed: VII. MLS Program Administration A. Program Director</p> <p>The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required</p>	Released for Public Comment, Board Review in September 2024

	<p>1. Qualifications</p> <ul style="list-style-type: none"> a. has an earned master's or doctoral degree; b. holds ASCP-BOC or ASCPi-BOC generalist certification as a Medical Laboratory Scientist/Medical Technologist. c. has three years of teaching experience; d. has knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures. <p>2. Responsibilities</p> <p>The program director must:</p> <ul style="list-style-type: none"> 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 3 years; d. be responsible for maintaining NAACLS accreditation of the program; e. have regular and consistent contact with students, faculty and program personnel <p>VII.DCLS Program Administration</p> <p>A. Program Director</p> <p>1. Qualifications</p> <p>The program director must be a medical laboratory professional who has</p> <ul style="list-style-type: none"> a. a doctoral degree from an accredited 	<p>responsibilities.</p> <p>1. Qualifications</p> <p>The program director must have</p> <ul style="list-style-type: none"> a. earned master's or doctoral degree; b. holds ASCP-BOC or ASCPi-BOC generalist certification as a Medical Laboratory Scientist/Medical Technologist. c. has three years of teaching experience; d. has knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures. <p>e. (for international programs only) If the program director does not hold ASCP-BOC or ASCPi-BOC certification as a Medical Laboratory Scientist, a qualified professional who does hold ASCP-BOC or ASCPi-BOC certification as a Medical Laboratory Scientist must hold appointment as an accreditation liaison.</p> <p>1. Responsibilities</p> <p>The program director must:</p> <ul style="list-style-type: none"> 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 3 years; d. be responsible for maintaining NAACLS accreditation of the program; e. have regular and consistent contact with 	
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	<p>institution</p> <p>b. ASCP-BOC or ASCPi-BOC generalist certification as a Medical Laboratory Scientist/Medical Technologist</p> <p>c. three years of teaching experience</p> <p>d. appropriate graduate level teaching experience knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures</p> <p>2. Responsibilities</p> <p>The program director must:</p> <p>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</p> <p>b. provide evidence of participation in the budget preparation process</p> <p>c. engage in a minimum of 36 hours of documented continuing professional development every 3 years</p> <p>d. be responsible for maintaining NAACLS accreditation of the program</p> <p>e. have regular and consistent contact with students, faculty and program personnel</p>	<p>students, faculty and program personnel</p> <p>E. Accreditation Liaison (when required, for international programs only)</p> <p>1. Qualifications</p> <p>The accreditation liaison, when required, must be a medical laboratory professional who:</p> <p>a. has knowledge of NAACLS accreditation;</p> <p>b. has at least a master's degree and three years of experience in the program discipline;</p> <p>c. holds ASCP-BOC or ASCPi-BOC certification as a Medical Laboratory Scientist.</p> <p>2. Responsibilities</p> <p>The accreditation liaison, when required, must:</p> <p>a. provide guidance and assistance in NAACLS accreditation requirements, policies and procedures;</p> <p>b. provide input into the curriculum and continuous program assessment and improvement;</p> <p>c. have regular contact, program director, faculty and program personnel.</p> <p>DRC</p> <p>VII. DCLS Program Administration</p> <p>A. Program Director</p> <p>The program must have a NAACLS approved medical laboratory professional serving as program director who meets the following qualifications and executes all required responsibilities.</p> <p>1. Qualifications</p> <p>The program director must have</p> <p>a. earned doctoral degree;</p> <p>b. holds ASCP-BOC or ASCPi-BOC generalist certification as a Medical Laboratory Scientist/Medical Technologist.</p>	
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		<p>c. has three years of teaching experience; d. has knowledge of education methods and administration as well as current NAACLS accreditation procedures and certification procedures.</p> <p>e. (for international programs only) If the program director does not hold ASCP-BOC or ASCPi-BOC certification as a Medical Laboratory Scientist, a qualified professional who does hold ASCP-BOC or ASCPi-BOC certification as a Medical Laboratory Scientist must hold appointment as an accreditation liaison.</p> <p>2.Responsibilities The program director must:</p> <p>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;</p> <p>b. provide evidence that s/he participates in the budget preparation process;</p> <p>c. engage in a minimum of 36 hours of documented continuing professional development every 3 years;</p> <p>d. be responsible for maintaining NAACLS accreditation of the program;</p> <p>e. have regular and consistent contact with students, faculty and program personnel</p> <p>E. Accreditation Liaison (when required, for international programs only)</p> <p>1. Qualifications The accreditation liaison, when required, must be a medical laboratory professional who:</p> <p>a. has knowledge of NAACLS accreditation</p>	
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		<p>b. has at least a Clinical Research Doctorate degree (or US equivalent), or a professional doctorate in a related field.</p> <p>c. holds ASCP-BOC or ASCPi-BOC certification as a Medical Laboratory Scientist with at least three years of relevant experience.</p> <p>2. Responsibilities</p> <p>The accreditation liaison, when required, must:</p> <p>a. provide guidance and assistance in NAACLS accreditation</p> <p>b. provide input into the curriculum and continuous program assessment and improvement</p> <p>c. have regular contact, program director, faculty and program personnel</p>	
Std. VII.B Site Program Administrator – All Disciplines	<p>Revision</p> <p>VII. Professional Education Program Administration</p> <p>B. Site Program Coordinator (required for multi-location programs only; assigned to each participating site)</p> <p>1. Qualifications</p> <p>The site program coordinator must:</p> <p>a. have an academic degree appropriate to the program level;</p> <p>b. hold the same level certification required of a program director;</p> <p>c. have at least one year of experience in laboratory science education relevant to the program content area or field of practice.</p> <p>2. Responsibilities</p> <p>The site program coordinator, when required, is responsible for:</p> <p>a. coordinating teaching and clinical education;</p>	<p>Proposed:</p> <p>VII. Program Administration</p> <p>B. Site Program Administrator (required for programs with partnerships; assigned to each participating site)</p> <p>1. Qualifications</p> <p>The site program administrator must:</p> <p>a. have a bachelor's degree;</p> <p>b. hold the same level certification required of a program director;</p> <p>c. have at least one year of experience in medical laboratory science education to include knowledge of:</p> <p>i. education methods</p> <p>ii. program assessment and administration</p> <p>iii. certification/licensure procedures</p> <p>2. Responsibilities</p> <p>The site program administrator, when required, is responsible for:</p> <p>a. coordinating teaching and clinical/applied learning experiential education;</p>	Released for Public Comment, Board Review in September 2024

	b. evaluating program effectiveness; c. maintaining appropriate communications with the program director.	b. evaluating program effectiveness; c. maintaining appropriate communications with the program director.	
STANDARDS COMPLIANCE GUIDE			
<u>Standard (ie Number)</u>	<u>Revision or New</u>	<u>Revision and/Summary of Key Changes</u>	<u>Implementation date/Status</u>
New Standards I.D 4 & 5.	Revision	<p><u>Contents of Narrative for Self-Study:</u> Standard I.D.5: For each affiliate, explain the following. Please clearly indicate when multiple agencies are covered under one Affiliation Agreement, or policy. To ensure no errors when reviewing documents, please be consistent and complete when using names of affiliates on documents submitted.</p> <ol style="list-style-type: none"> The relationship between the sponsor and affiliate The roles of the sponsor and that entity The responsibilities of the sponsor and that entity <p>Appropriate signatures are required.</p> <p><u>Accompanying Documentation for Self-Study:</u> Standard I.D.4 and 5: For each affiliation, supply the following:</p> <ul style="list-style-type: none"> Completed Clinical Facility Fact Sheet <i>For hospital-based programs utilizing multiple clinical facilities, provide a completed Clinical Facility Fact Sheet for each hospital within the system where students are placed.</i> Signed, current Affiliation Agreement or Memorandum of Understanding (MOU) When applicable, Site Specific Objectives, Evaluations, Unique Rules, and Policies. 	Board Review in September 2024, Pending Public Comment.

		<u>Proof of Compliance for Accreditation Site Visits:</u> Standard I.D.4 and 5: Provide completed Clinical Facility Fact Sheets, and signed Affiliation Agreements or Memorandum of Understandings (MOUs) that cover all provisions in the document.	
BMS SCG	New	Found in the Standard Compliance Guide.	Effective after the April 2024 Board of Directors Meeting
DCLS Standards:	Revision	Found in the DCLS Standard Compliance Guide.	Effective after the April 2024 Board of Directors Meeting
POLICY			
<u>Policy</u>	<u>Revision or New</u>	<u>Summary of Key Changes</u>	<u>Implementation date/ Status</u>
Distinguished Service Award (DSA)	NEW	NAACLS has selected the 2 nd DSA Recipient and will be announced at our September BOD meeting.	
Initial International Acting Program Director	New for Initial International Programs Only	<p>Proposed Initial International Acting PD</p> <p>International Acting Program Director status may be considered by NAACLS for <u>initial international programs only</u> when no qualified program director or accreditation liaison candidate is available.</p> <p>The following are required qualifications of an Acting Program Director:</p> <ul style="list-style-type: none"> • Must meet program director education requirements in Standard VII • Must have at least two years of education experience • Must have knowledge of NAACLS accreditation 	Released for Public Comment, Board Review in September 2024

		<ul style="list-style-type: none"> • Be able to achieve all qualifications for Program Director status by submission of the program's Initial Accreditation Progress Report, two years after initial accreditation is awarded. <p>After two years, if the program director has not met the certification requirement, and they have not found a qualified accreditation liaison, they may request reconsideration to the Board of Directors. All appeals to the Board of Directors are taken on a case by case basis. For more information on the requirements of the appeal, please contact NAACLS Staff.</p> <p>Appeal kept in program file for materials to review</p> <ul style="list-style-type: none"> • Report from Mentor • <u>Self Study Review</u> • <u>Site Visit Report</u> • Program Outcomes 	
IDEA Statement	New to the NAACLS Organization	<p>Commitment to Inclusion, Diversity, Equity and Access</p> <p>NAACLS is committed to advancing Inclusion, Diversity, Equity, and Access (IDEA) within the laboratory science community. Fostering a culture of respect, equity, and belongingness, NAACLS celebrates differences in race, ethnicity, age, sex/gender identity, culture, ability, beliefs, and socioeconomic status. The dedication to equity ensures fair educational practices, promotes inclusivity in NAACLS accredited programs, and encourages access to educational resources for all.</p> <p>INCLUSION: promoting a culture of respect,</p>	Effective after the April 2024 Board of Directors Meeting

		<p>equity, and belongingness for all members of the NAACLS community, including students, faculty, professionals, and patients.</p> <p>DIVERSITY: recognizing and appreciating differences among people and their perspectives, including but not limited to dimensions of race, ethnicity, age, sex/gender identity, culture, ability, religious beliefs, political beliefs, familial status, educational background, occupation, and socioeconomic status.</p> <p>EQUITY: ensuring fair, equitable, and just educational practices and policies that impact the achievement of successful student outcomes.</p> <p>ACCESS: promoting access to NAACLS accredited program offerings and educational resources. This is characterized by behaviors and activities where all people feel welcome and able to participate, regardless of background or identity.</p>	
NAACLS Core Documents Updated	Revisions	All updated and found on the NAACLS Website under resources and/or documents.	Effective after the April 2024 Board of Directors Meeting
AI Policy	New	<p>Due to the nature of confidential information being shared, the use of AI Tools will not be permitted in any NAACLS Board of Directors meetings. Members of these committees will be asked to deactivate any such AI Tools they have enabled on their devices or meeting software prior to entering these meetings. In addition, and for clarity:</p> <ul style="list-style-type: none"> • Board of Director meetings have 	Effective after the April 2024 Board of Directors Meeting

		<p>attendance requirements and an AI Tool or Video Avatar is not a substitute for the active participation of the volunteer.</p> <ul style="list-style-type: none"> Board of Director meetings have official minutes recording the outcome of the meeting and there must only be one official record of the meeting, which may not be created via AI Tools. <p>At this time, NAACLS Staff may use approved AI Tools in any NAACLS meeting outside of the Board of Director meeting. These IT Tools must be approved by the CEO. Prior to the start of a NAACLS meeting, the Staff member must confirm the meeting may be recorded and if they will use an AI Tool. At this time, Zoom automatically captures this information. NAACLS confidential information or that of individuals must not be used for a commercial, machine-learning purpose in any AI system.</p>	
Executive Committee to approve non-US Site Visits.	New	<p>NAACLS strives to have review policies and procedures consistent with all programs; however, due to the additional variables of non-US site visits, NAACLS has additional processes for non-US programs.</p> <p>The NAACLS Executive Committee has the final decision on if a Site Visit will take place. The Executive Committee will base this decision on a review of a Non-US Accreditation Logistics Assessment. The purposes of this assessment are twofold:</p> <ol style="list-style-type: none"> 1. Ensure that all involved understand the critical information associated with the site visit. NAACLS logistics assessment will contain the following: 	Effective after the April 2024 Board of Directors Meeting

		<p>2. Provide the NAACLS Board of Directors Executive Committee with the necessary information on whether the site visit will commence.</p> <p>The Logistics Assessment consists of materials gathered by staff and policy acknowledgments of the program.</p> <ul style="list-style-type: none"> • State Department Travel Advisories • State Department “What to do in an emergency” information • Local Embassy Location and Contact info • Entry Requirements (visa, etc) • Vaccination Requirements and Necessary Documentation • Program Contact (Email, Phone Number, WhatsApp) • Site Visitors Contact Info • Full Trip Dates • Hotel Location • Travel plans from airport to hotel and hotel to program site • Meal and refreshment arrangements • Resource Acknowledgement (Private Work Room, Wifi, Passwords to Materials) • Cultural Sensitivity Education Requirements • Liability Waiver • Additional Details • Cancellation Policy <ul style="list-style-type: none"> ○ This will essentially say NAACLS may cancel the site visit at any time and for any reason. If the site visit is canceled, all costs would be covered by the program. <p>After the program submits its self-study, NAACLS staff will begin working with the Program Director to complete the Logistics</p>	
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Applied Learning Experience	NEW	Applied learning experiences is defined as any component of the curriculum that includes demonstrating cognitive, psychomotor, and affective activities of the discipline and/or demonstrating the ability to perform skills and techniques commonly required for entry level positions in the profession.	Effective after the April 2024 Board of Directors Meeting
Interim Reports	Current: A "Year Five Interim Report" will be required upon entering the fifth year of the accreditation award. Documentation	Approved: An "Interim Report" will be required upon entering the fifth year of the accreditation award. Documentation submitted for the "Interim	Effective after the April 2024 Board of Directors Meeting for the October

	<p>submitted for the “Year Five Interim Report” must be submitted electronically to the NAACLS office no later than the due date indicated in the accreditation award letter.</p> <p>The Interim Report must include the following:</p> <ol style="list-style-type: none"> 1. Summary of last five years of annual reporting 2. Provide a narrative summary of changes, if any, that occurred within the program since the previous award. These could include but are not limited to changes in resources, education delivery modes, relevant partnerships, and other. 3. Narrative on how outcomes measures are analyzed and used in program assessment and continuous quality improvement of the program (outcomes measures that cannot be quantitatively analyzed are to be included in this narrative). The results of program outcomes measures and assessment must include findings from graduate and employer feedback and be: <ol style="list-style-type: none"> a. Reflected in ongoing curriculum development, resource acquisition/allocation, and program modification. b. Analyzed to demonstrate the effectiveness of any changes implemented. 	<p>Report” must be submitted electronically to the NAACLS office no later than the due date indicated in the accreditation award letter. The Interim Report must include the following:</p> <ol style="list-style-type: none"> 1. Summary of last three years of outcome measures data 2. Provide a narrative summary of changes, if any, that occurred within the program since the previous award. These could include but are not limited to changes in resources, education delivery modes, relevant partnerships, and other. 3. Narrative on how outcomes measures are analyzed and used in program assessment and continuous quality improvement of the program (outcomes measures that cannot be quantitatively analyzed are to be included in this narrative). The results of program outcomes measures and assessment must include findings from graduate and employer feedback and be: <ol style="list-style-type: none"> a. Reflected in ongoing curriculum development, resource acquisition/allocation, and program modification. b. Analyzed to demonstrate the effectiveness of any changes implemented. 	2024 Interim Report Submissions.
Volunteer Expectations	Revision	<p>NAACLS Volunteer Expectations as a Representative of the Organization</p> <ul style="list-style-type: none"> • Approaches accreditation in a supportive 	Effective after the April 2024 Board of Directors Meeting

		<p>not punitive manner</p> <ul style="list-style-type: none"> • Follows the policies and procedures established by the NAACLS Board of Directors • Dependably engages in collaboration • Contributes to an inclusive and respectful environment • Receptive to differing interpretations of NAACLS Standards and standards compliance. <p>Expectations as a Content Expert</p> <ul style="list-style-type: none"> • Comprehension of the current NAACLS' Standards. • Competency in evaluating standards to align with materials provided during review • Understands the purposes of accreditation. • Familiar with current practices in: <ul style="list-style-type: none"> • Clinical laboratory procedures. • Evaluation of essential personnel and physical resources for clinical services and educational purposes. • Health professions education. • Demonstrates making objective assessments based upon established criteria • Adaptable to computer technology (Microsoft, Adobe, Web forms, file sharing sites, etc.) • Proficient in grammatically correct evidence based writing skills • Executes factual and non-biased reviews. • Relates all concerns in program reviews to current NAACLS Standards. • Consistently meets deadlines set by NAACLS Staff and peers. • Consistently completes review forms 	
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		<p>thoroughly.</p> <ul style="list-style-type: none"> • Performs reviews in a professional manner. • Consistently respects and maintains confidentiality of privileged information. • Responds to communication in a timely manner. <p>Site Visit Specific Expectations</p> <ul style="list-style-type: none"> • Conducts interviews and performs observational functions with discretion • Flexible to logistical changes 	
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