



NAACLS Volunteer Manual

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Mission Statement

The National Accreditation Agency for Clinical Laboratory Sciences (NAACLS) is committed to being the premier accreditation agency for ensuring the advancement of education in clinical laboratory sciences and related health care disciplines provided by domestic and international programs.

Vision Statement

Medical laboratories preferentially seek graduates of NAACLS programs to assure quality, value, innovation, and safety for healthcare consumers.

Values

Quality
Education
Innovation
Collaboration
Peer Review
Global Accreditation

Commitment to Inclusion, Diversity, Equity and Access

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.

INCLUSION: promoting a culture of respect, equity, and belongingness for all members of the NAACLS community, including students, faculty, professionals, and patients.

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.

EQUITY: ensuring fair, equitable, and just educational practices and policies that impact the achievement of successful student outcomes.

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.

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Dear Volunteer,

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

This manual has been designed to assist and guide designated volunteers in fulfilling their responsibilities and expectations. It is important for you to take the necessary time to become familiar with it. For more accreditation process information for program directors, please review the Guide to Accreditation.

NAACLS is dedicated to peer review as the foundation of accreditation. Volunteers are highly valued, and the agency strives to prepare and assist you to provide exemplary program review. Such review must be based on principles of honesty, fairness, objectivity, and integrity.

The quality and thoroughness of your input will be essential to the NAACLS Review Committees and the Board of Directors as they formulate accreditation decisions.

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

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

Sincerely,

NAACLS Staff

Summary of Volunteer Opportunities

Types of Volunteer Opportunities

The following volunteer opportunities are discussed throughout this document and can also be found in the [NAACLS Policy and Procedure Manual](#)).

- 1. Mentor**
 - Program Director Mentor
 - Self-Study Report Review Mentor
 - Site Visit Mentor (Team Lead)
- 2. Self-Study Reviewer**
- 3. Site Visitor**
- 4. Review Committee**

Expectations of the NAACLS Volunteer

- I. Expectations as a representative of the organization:
 - a. Approaches accreditation in a supportive not prescriptive or punitive manner.
 - b. Follows the policies and procedures established by the NAACLS Board of Directors.
 - c. Collaborates dependably with assigned partner(s) regarding reports and reviews.
 - d. Contributes to an inclusive and respectful environment.
 - e. Is receptive to differing interpretations of NAACLS Standard and Standards Compliance Guide.
- II. Expectations for content expert knowledge:
 - a. Comprehension of the current NAACLS' Standards.
 - b. Competency in evaluating standards to align with materials provided during review.
 - c. Understands the purposes of accreditation.
 - d. Familiar with current practices in:
 - i. Clinical laboratory procedures.
 - ii. Evaluation of essential personnel and physical resources for clinical services and educational purposes.
 - iii. Health professions education.
- III. Expectations of performance as a content expert:
 - a. Demonstrates making objective assessments based upon established criteria.
 - b. Executes factual and non-biased reviews.
 - i. Follows established policies and procedures.
 - ii. Maintains objectivity and fairness.
 - c. Relates all concerns in program reviews to current NAACLS Standards.
 - d. Consistently respects and maintains confidentiality of privileged information.
 - e. Consistently completes review forms thoroughly.
 - f. Performs reviews in a professional manner.
 - i. Dresses professionally for the visit setting.
 - ii. Demonstrates calm, confident, and courteous behavior throughout the process.

- IV. Expectations of volunteer skills:
 - a. Is adaptable to computer technology (Microsoft, Adobe, Web forms, file sharing sites, etc.).
 - b. Is proficient in grammatically correct evidence-based writing skills.
 - c. Consistently meets deadlines set by NAACLS Staff and peers.
 - d. Responds to communication in a timely manner.

- V. Additional expectations of site visitor:
 - a. Gathers relevant information through observations, interviews, and document review while maintaining discretion and confidentiality.
 - b. Remains flexible to logistical changes.

Accreditation Process Mentors

NAACLS provides three accreditation process mentor opportunities: A new program director will be assigned a mentor for the first six months after approval. Those volunteers who are new to the self-study review and site visit processes will also receive a mentor to guide them.

Qualifications and Responsibilities

Mentorship Qualifications

Candidate must have:

- Participated in at least one accreditation site visit.
- Reviewed at least two self-studies as a self-study reviewer.
- At least three years of experience as an approved program director of a NAACLS Accredited program.
- Been the program director during at least one successful accreditation review. Either initial accreditation review or continuing accreditation review will qualify a candidate.

Mentorship Responsibilities

1. Program Director Mentors

The mentor assignment will begin on the date the new program director was approved by NAACLS and will last for six months. The mentor serves as a guide for new program directors and has the following responsibilities:

- Answer questions from the mentee.
- Review purpose of the core NAACLS documents (Standards, Guide to Accreditation and Standards Compliance Guide).
- Discuss the roles of board of directors, review committees, discipline lead persons, and NAACLS Staff.
- Review purpose and timelines for significant aspects of NAACLS documents (Accreditation Application Packet, Self-Study Report, site visit, Interim Report, Progress Report, and Annual Survey).
- After the six months of mentorship is complete, program directors should reach out to their discipline lead person (DLP) for future questions.

2. Self-Study Report Review Mentors

Mentor assignment is for the length of the Self-Study Review, from the time of the assignment from staff to submission of review. The mentor serves as a guide for new self-

study reviewers and has the following responsibilities:

- Answer general questions submitted via email (phone calls may be necessary) from the mentee. The assigned reviewer should make the final judgment on the review items.
- Ensure the Self-Study Report Review is rooted in NAACLS Standards, policies, and procedures and not individual best practice.
- Examine the Self-Study Report Review and make sure all boxes are checked, all comments related to concerns are on the Summary Page, and all comments are clear and grammatically correct.

3. Site Visit Mentors (Team Lead)

The mentor assignment encompasses the entire site visit process, from the time of the assignment from staff to submission of report. The mentor serves as a guide to new site visitors and has the following responsibilities:

- Communicate before the site visit to establish a schedule, review professional expectations, answer questions, and prepare for common site visit pitfalls.
- Ensure the Site Visit Report is rooted in NAACLS Standards, policies, and procedures and not individual best practice.
- Examine the Site Visit Report and make sure all boxes are checked, all comments related to concerns are on the Summary Page, and all comments are clear and grammatically correct.

Staff Communication Policy

All questions or clarification requests regarding the Self-Study Review, Site Visit Review, Interim or Progress Reports, or responses from the program should be directed to the appropriate NAACLS Program Accreditation Coordinator. The coordinator will then email the appropriate parties.

Accreditation Process

To provide an understanding of where volunteers participate in the process, a reminder of the accreditation process is below:

Step/Phase	Responsible Person(s)	Documents Completed/Required	Timeline	Review Process Notes
1. Self-Study Notification	NAACLS Staff	Notification of Renewal (NOR) sent to PD	One year before self-study due	-
2. Self-Study Report	Program Director	Self-Study Report Includes: all documentation per the Standards Compliance Guide	By due date in NOR	Report provides narrative and documentation to show how a program meets current NAACLS Standards
3. Self-Study Review	Volunteer Peer Reviewers	Self-Study Report Review Includes: any possible concerns	Two to three months	Peer review of Self-Study Report
4. Program Response to Self-Study Report Review	Program Director	Response to SS Review Includes: responses to SS review concerns	Within one month	PD reviews and responds to concerns listed in Self-Study Report Review
5. Site Visit Report	Two-to-three-member Site Visit Team (peer reviewers)	Site Visit Report Includes: on-site verification process, interviews, document review Findings summary	Two weeks following the site visit	On-site review of Self-Study Report, Review and Response, noting potential concerns of program on-site
6. Program Response to Site Visit Report	Program Director	Response to Site Visit Report	Within 1 month	PD reviews and responds to concerns listed in the SV Report
7. Review Committee Evaluation	Accreditation Review Committee	All documentation reviewed Motion/recommendation preparation	Next scheduled meeting (Feb or July)	Peer review of SS review and program response, and the SV report and program response, by discipline experts
8. Quality Assurance Review	Quality Assurance Committee	-	-	Consistency and policy compliance check
9. Board of Directors Review & Decision	Board of Directors	Award letter	Next board meeting	Final Review: Accreditation decision

Self-Study Report Review

For more accreditation process information for program directors regarding self-studies, please review the Guide to Accreditation.

Purpose

The self-study process is required by NAACLS for all currently accredited programs as well as for new programs seeking initial accreditation. Two qualified volunteers are necessary to complete the Self-Study Report Review for Programs in the Review Committee for Accredited Programs (RCAP) and Program Accreditation Review Committee (PARC). For disciplines in the Doctoral Review Committee (DRC), the Self-Study Report Review is completed by one qualified volunteer.

Volunteer reviewers provide a summary of information that is included in the Self-Study Report identifying areas of missing information and/or concerns for areas where submitted documentation does not appear to meet the Standards or does not provide the required supporting documentation. The reviewers must indicate if certain narrative descriptions and documentation are present and/or addresses the standard. Self-study report reviews and their associated responses from programs are forwarded to the appropriate Review Committee for evaluation and determination of accreditation award recommendation.

Review Committee for Accredited Programs (RCAP)

The Review Committee for Accredited Programs reviews BMS, CG, DMS, MLBBS, MLM, MLS, Path A and PHM programs for accreditation. The committee is composed of representatives from the disciplines elected by the board of directors. The RCAP forwards its accreditation recommendations to the board of directors.

Programs Accreditation Review Committee (PARC)

The Programs Accreditation Review Committee (PARC) reviews HT, HTL, MLA, MLT and PBT programs for accreditation. The committee is composed of representatives from the disciplines elected by the board of directors. The PARC forwards its accreditation recommendations to the board of directors.

Doctoral Review Committee (DRC)

The Doctoral Review Committee (DRC) reviews clinical doctoral programs for accreditation. The committee is composed of doctoral education practitioner representatives and a member at large elected by the board. The DRC forwards its accreditation recommendations to the board of directors.

Self-Study Report Reviewer Appointment

RCAP and PARC Programs:

NAACLS Program Services Staff have identified qualified individuals within the field who provide volunteer services to review self-study documents. NAACLS Staff contacts

volunteers to determine availability and then contacts individuals directly to request their assistance with a Self-Study Report Review. Once a volunteer agrees to complete a review, the Self-Study Report will be sent. NAACLS staff will indicate when the review must be completed and returned.

DRC Programs:

DCLS self-studies will have one reviewer who must be a DRC member initially, for the first three to five years. If DRC members are unable to review all the self-studies, reviewers with graduate level and/or advanced practice experience will be used. These outside reviewers' qualifications will be evaluated by NAACLS Staff and the DRC chair.

Self-Study Report Reviewer Qualifications and Responsibilities

Self-Study Reviewer Qualifications

- Must be a current or experienced program director, faculty member, clinical laboratory professional, physician or a member of higher administration (dean, department chair, etc.) with knowledge of the clinical laboratory sciences.
- Must have a current or prior professional association with a NAACLS-accredited program.
- Must be currently licensed or credentialed and in good standing with the licensing/credentialing body, as appropriate.

Self-Study Reviewer Responsibilities

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

Estimated Time Required for Self-Study Reviews

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

Activity	Estimate Time
Reading Self-Study Reports	4-5 hours
Organizing material	3 hours
Expected time to coordinate with mentor/mentee (where applicable)	Varies
Drafting Self-Study Review	3 hours
Typing Self-Study Review	Varies

Policies and Procedures

Completion of the Self-Study Report Review

All the information and documentation in the Self-Study Report is proprietary and confidential. Information must not be disseminated nor used in the reviewer's educational programs without the permissions of the reviewed program. Self-Studies and Self-Study Reviews should be destroyed after completion of the review.

The completed Self-Study Report Review is a critical step in the accreditation process and must represent a concise, comprehensive, objective and professional summary of the program being reviewed. All elements of the report form must be completed.

Self-Study Report Reviewers should read all the instructions before completing the report. NAACLS Program Services Staff will provide team members with an electronic form of the Self Study Report via email, or it may be found on the NAACLS website.

If, when completing the report, there is uncertainty about how to respond to an item, individuals should contact a NAACLS Staff member, the appropriate discipline lead person, or committee chair.

Reviewers should utilize checklists and the specified Self-Study requirement as indicated in the Standards Compliance Guide. All areas marked with a NO must have a comment that includes a clear and detailed explanation of what is missing or unclear.

Completed Self-Study Report Reviews are forwarded by NAACLS Staff to the site visitors and the program director of the program.

The results of the Self-Study Report Review will be used by program directors to prepare a response and by site visitors by directing them toward the recovery of missing documents and evidence that resolves any identified concerns. The completed Self-Study Report Review, Self-Study Report Review Response, and Site Visit Report are forwarded to the appropriate review committees for review and recommendations for accreditation actions.

Reviewers who concur with the findings of the report are required to complete the Affirmation Page.

If a reviewer does not concur with the report, a Dissenting Report describing any disagreement must be submitted. Instructions for completing the Dissenting Report can be found in the NAACLS Policy and Procedure Manual.

Self-Study Report Review Sections

The Self-Study Report Review contains two main areas to review:

- Narrative Review
- Documentation Review

Items to consider and follow:

- All comments in the Self-Study Review sections should be factual and reflect a concern that the program does not meet a Standard. Opinions and suggestions are not acceptable in the Self-Study Review.

- Use complete sentences with acceptable English grammar and spelling.
- Capital letters should not be used as emphasis in the comments.
- Comments should be complete. Statements should be written to reflect a **lack of evidence/compliance**. Refer to examples found in the Appendix section of this document titled “Examples of Language for Self-Study and Site Visit Review”.
- If “**YES**” is checked, no comments should be typed. If “**NO**” is checked, you are required to type comments.
- Programs under Initial Accreditation will require review of more extensive documentation to verify compliance with some Standards.

Program Information

- Verify that all information is recorded, including name of sponsor, city, state and type of program.

Missing Documents/Concerns Area within the Report Body

- To ensure consistency and a comprehensive summary, the NAACLS PDF review documents will auto-populate text from the body of the review directly into the Summary Pages.

Summary Page

- Ensure that auto-population of comments from the body of the report to the Summary Page is working correctly. Contact staff if it is not functioning properly.

Affirmation Page

The last page of the Self-Study Report Review is the Affirmation Page. The first reviewer is the individual responsible for finalizing the report and submitting it to NAACLS. They should take the initiative to contact the second reviewer in a timely manner to share findings.

If a team member does not concur with the report, a Dissenting Report describing any disagreement must be submitted. Instructions for completing the Dissenting Report can be found in the NAACLS Policy and Procedure Manual.

Spelling and Grammar Check

Take time to check the following commonly missed items before submitting the Self-Study Review to NAACLS Staff:

- unchecked boxes
- the absence of explanatory comments
- narrative misspellings

It is important to emphasize these reports are official NAACLS documents that are distributed to the program’s corporate leaders, administrative teams, and other key decision-makers.

In order to showcase the high level of professionalism our reviewers possess, please ensure you submit the Self-Study Report Review only after a thorough examination of the document, confirming it is complete and free of spelling and grammar errors.

Following the Self-Study Report Review

Self-Study Report Reviewer Evaluation

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

Format

- Was the review of the Self-Study Report concise, clear and well organized?
- Did the review adequately address all Standards?
- Were all identified concerns noted?
- Were all sections completed?

Content

- Was the required missing information and/or documentation clearly summarized?
- Were all statements or comments in the review specific, objective and without opinions or recommendations?
- Was the review objective in applying the Standards?

Program's Response to the Self-Study Review

Programs respond to the Self-Study Review in the following manner:

- NAACLS Program Accreditation Coordinator will provide the Self-Study Review to the program director.
- The program director should respond to the concerns addressed on the Summary Page of the Self-Study Review to the best of their abilities. The program director should also be prepared to provide additional evidence with the response or at the site visit.
- If there are no concerns identified by standard listed on the Summary Page, a response of concurrence is required.
- If a response is not received within 30 days, NAACLS staff will attempt to communicate with the appropriate program official(s) by telephone and/or email.
- If a program director fails to submit a thorough Self-Study Response, a site visit will not be scheduled. The program is at risk of being placed on Administrative Probation.

Innovation within the Program

If reviewers see interesting or innovative methods during the review process, NAACLS asks that they complete the survey provided by staff. Sharing an aspect of the program they found interesting or innovative may potentially be featured in the NAACLS News or other methods. This is not required by reviewers.

The Site Visit

For more accreditation process information for program directors regarding site visits, please review the [Guide to Accreditation](#).

Purpose

All programs being reviewed for Continuing or Initial Accreditation will undergo a site visit (usually two days) as part of the process. It is important to note a site visit will only take place if one of the following conditions is met:

- Students are in the professional phase of the program.
- At least one cohort has successfully graduated for initial programs.
- Students are currently in session for programs.

The site visit team leader should communicate with the program director to ensure that during the site visit the following groups and/or individuals affiliated with the program are available for interviews:

- faculty
- current students
- graduates
- clinical affiliate(s) (liaison/preceptors)
- advisory committee/board
- administrators

The outcome of the site visit will be provided to the program director from the NAACLS Office via a completed Site Visit Report that summarizes the findings from the site visitors who have read the program's Self-Study Report, the Self-Study Report Review, the program's response to the Self-Study Report Review and the evidence provided during the visit. Like the Self-Study Report Review, the Site Visit Report will document the degree to which the program has met the NAACLS Standards, identifying areas of missing information and/or concerns that remain, if any.

Site Visitor Appointment

Initial, Continuing, and Joint Accreditation Site Visits

Site visitors are appointed by NAACLS Program Services Staff. Once site visitors are selected, their names and information will be forwarded to the program director for final approval. Dates for the visit will be coordinated between the program director and NAACLS Program Services Staff. NAACLS Program Services Staff will confirm the site visitors' availability and finalize arrangements with the team members after approval by the program director. The site visit team members(s) will be sent an email that will include pertinent program information and documents needed for the site visit. Additional site visitors can be added as deemed necessary by the NAACLS CEO.

Off-cycle Site Visitors

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

established by NAACLS.

Site Visitor Qualifications and Responsibilities

Site Visitor Team Leader and Team Member Qualifications

- Must be a current or experienced program director, faculty member, clinical laboratory professional, physician or a member of higher administration (dean, department chair, etc.) with knowledge of the clinical laboratory sciences.
- Must have a current or prior professional association with a NAACLS-accredited program.
- Must be currently licensed or credentialed and in good standing with the licensing/credentialing body, as appropriate.
- Within the last three years, must have completed a Self-Study Review or attended a NAACLS reviewer education session.
- Must complete a minimum of three site visits as a team member to qualify as a team leader.

Educator Generalist Team Member Qualifications (for Initial Accreditation Site Visits)

- Current service in an educational administrative position with a NAACLS accredited program.
- Experienced as a site visitor and/or self-study reviewer.
- Knowledge of the principles and processes of accreditation.
- Knowledge of the principles and practices of management in education.

Responsibilities of a Site Visitor

Team Leader Only

- Conduct all communications with the program director to arrange the site visit and with the team member(s) to finalize the site visit schedule.
- Communicate with the program director to set up site visit schedule of interviews for program and affiliate(s) personnel, students, etc.
- Prepare a draft of the Site Visit Report, and circulate the draft to team members(s) for review and completion of the Affirmation Page.
- Ensure that all site visitors review and complete the Affirmation Page of the Site Visit Report.
- Submit final Site Visit Report to the NAACLS Office within the prescribed allotted time (usually three weeks after the site visit date).
- Submit the Self-Study Report Reviewer Evaluation Form.

All Team Members

- Read the program's Self-Study Report in the context of its Review and the Standards.
- Note questions to be asked and particular observations to be made during the site visit per the comments made in the Self-Study Report and Review.
- Assist the team leader in scheduling the site visit.
- Conduct the site visit according to NAACLS protocol and in a professional manner.

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

Estimated Time Required for a Site Visit

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

Activity	Estimated Time	Time Period
Reading Self-Study Report, Review and Response	4-5 hours	Prior to SV
Organizing materials	3 hours	Prior to SV
Scheduling site visit	2 hours	Prior to SV
Identifying questions, observations, etc.	2 hours	Prior to or During SV
Travel	Varies	Prior/During/Following SV
Length of site visit	1-2 days	During SV
Drafting the Site Visit Report	1-3 hours	During SV
Typing and proofreading the Site Visit Report	1-3 hours	Following SV

Role of the Site Visitors

Site visitors are peers voluntarily performing a service to the accreditation of the program. Site visitors are NAACLS ambassadors and should maintain professionalism, objectivity and friendliness during the visit. They are guests of the institution being visited and as such, they should communicate clearly, openly and respectfully with all program officials, students, staff and others being interviewed during the process.

Site visitors should be familiar with the program prior to the site visit by reading and thoroughly reviewing the Self-Study Report, Self-Study Report Review, and Self-Study Report Review Response. During the visit, site visitors will discuss areas of strength and areas of concern regarding the program and may provide guidance if requested. Site visitors should review the steps and responsibilities in the NAACLS accreditation process with program personnel during the welcome interview. It is important for site visitors to make clear to program officials that the team is serving in a fact-finding capacity for NAACLS with the intent to assist program personnel in a positive and constructive manner, but they are not able to make the final determination regarding the program's accreditation; that responsibility lies solely with the NAACLS Board of Directors.

The Site Visit Team:

- Verifies that information and documents contained in the Self-Study Report are accurate.
- Reviews any information missing from the Self-Study Report.
- Addresses the concerns raised by the reviewers.

- Addresses aspects of the program that can only be determined on site.
- Completes the Site Visit Report.

Site visitors should be professional, objective and friendly peers, voluntarily performing a service to the program. With program personnel, they discuss areas of strength and areas of concern regarding the program. The site visitors should stress that the team is serving in a fact-finding capacity with the intent to assist program personnel in a positive and constructive manner. Site visitors should review the steps and responsibilities in the NAACLS accreditation process with program personnel.

Team Leader

One member of the site visit team will be assigned by NAACLS Staff as the team leader. The team leader is required to have been on at least three previous NAACLS site visit teams. It is this person's responsibility to be the primary contact for the program and the visiting team arranging and planning the itinerary for the site visit. The team leader is recommended to take the initiative prior to the site visit in contacting the program director to jointly prepare the itinerary and during the site visit in leading the introductory and exit interviews, ensuring the Site Visit Review Report is completed and reviewed by other team member(s), and sent to NAACLS within the established timeline.

Team Member

Every site visit team will be assigned at least one team member to work with and support the team leader in the identification of evidence, investigating, interviewing, and fact-finding to determine if a program meets NAACLS Standards. The team member provides support in reviewing documentation and practices.

Educator Generalist (for all programs excluding DCLS)

For programs that are being evaluated for Initial Accreditation, an educator generalist will accompany the site visit team. The educator generalist is required to have been on a previous site visit as a team leader or team member. This individual usually has experience in educational administration (department chair, dean or higher) and experience in the accreditation process. The educator generalist provides an additional resource when evaluating the policies and procedures of the institution in meeting NAACLS Standards. Like the team member, the educator generalist provides a supporting but active role in the identification of evidence, investigating, interviewing and fact-finding to determine if a program meets NAACLS Standards.

Types of Site Visits and Team Composition

Initial Accreditation Review (for all programs excluding DCLS)

The team for initial program site visits is composed of a team leader, team member and an educator generalist. Additional site visitors can be added as deemed necessary by the NAACLS CEO.

Initial Accreditation Review (for DCLS programs)

The team for initial program site visits is composed of a team leader and team member. Additional site visitors can be added as deemed necessary by the NAACLS CEO.

Continuing Accreditation Review

The team for programs that have been previously accredited is composed of a team leader and team member. Additional site visitors can be added as deemed necessary by the NAACLS CEO.

Off-cycle Site Visit

In the event a concern is brought to the NAACLS Board of Directors or a review committee that an accredited program is not meeting Standards; the board of directors may determine an off-cycle site visit is needed. The board of directors will form the site visit team at its discretion.

Joint Review of NAACLS Accredited and/or Initial Programs

Institutions that have more than one NAACLS-accredited program or have received permission to submit self-studies for these programs on the basis of satisfactory preliminary reports, may request to have both programs reviewed simultaneously. All members of the site visit team are expected to be present for all meetings, interviews and reviews for each discipline. A completed Site Visit Report needs to be submitted for each discipline reviewed.

Travel Arrangements

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

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

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

If the site visit has been postponed, canceled, or any portion of the airline ticket remains unused, please contact the travel agency to have the reservation canceled. If issued, the airline ticket should be returned directly to the travel agency. If any changes to your itinerary are required, contact the travel agency immediately. Please be advised that change fees or replacement tickets may have increased the program's cost.

If there is a travel complication out of your control (e.g., flight cancellation, weather delays, etc.), use discretion when balancing change fees and additional flight/hotel arrangements getting to your destination in a reasonable time. NAACLS understands that current travel can be challenging and that extreme circumstances may occur. Isolated incidents are understandable, however, should a pattern develop, NAACLS will handle accordingly.

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

Travel to Accommodations and Site During the Visit

The program director and team leader must coordinate the transportation of site visitors:

- Between the airport and the site visitor's hotel.
- Between the site hosting the visit and the site visitor's hotel.

Travel Assistance Coverage

NAACLS provides travel assistance coverage to all volunteers traveling on NAACLS business including traveling to and from a site visit. This policy will provide payment to the estate of the insured should a claim become necessary. Travel assistance coverage requires that a copy of the travel identification card is provided to individuals authorized to conduct NAACLS business. This card should be in the traveler's possession during travel.

To download the travel identification card, please click [here](#).

Immediately following the site visit, volunteers must submit a completed expense report to the NAACLS accounting department for reimbursement within two weeks. All receipts must be provided as well to receive reimbursement.

A program is expected to pay the actual cost, (costs incurred plus associated fees) of the site visit, which may include items such as travel, lodging, and meals for two to three site visitors for the duration of the site visit.

A program can expect to receive a final invoice after the visit is completed and all visitors have submitted their expense reports. If the site visit team is paying for the lodging, food and transportation, the program will still be responsible for the travel costs. If the program pays for all expenses (lodging, food and transportation) ahead of time, the program will only be invoiced for the preparation fee and any remaining travel fees submitted from the site visit team. Questions regarding invoicing and fees should be directed to the accounting department at accounting@naaccls.org.

Itinerary and Pre-Site Visit Preparation

Upon the appointment of the visiting team, the team leader will contact the program director to jointly prepare the itinerary for the site visit. A video call is recommended for the site visit team and the program director to prepare and review any logistical or administrative concerns.

Examples of logistical concerns may include, but are not limited to:

- Transportation to and from the hotel/meeting sites.
- Dedicated space for the team to work.
- IT accessibility (LMS system/WIFI network).
- Video conferencing capabilities.

Examples of administrative concerns may include, but are not limited to:

- Access to files.
 - File review can occur prior to arriving on site to aid with preparation and allow for focus on interviews.
 - Access to LMS is an option that programs can choose; if this isn't available, documents can be reviewed on site, but programs are not required to print items if available electronically.
- Discuss Self-Study Review and Response concerns.

It is the responsibility of the program director to confirm appointments with those associated with the program who will be interviewed. Toward the end of this manual is a sample schedule. The team must communicate with the Program Director about arrangements for the visiting team to get to the hotel and discuss transportation options between the hotel and the program institution. In addition to the welcome conference at the start of the Site Visit, an optional meet and greet dinner for the program director and/or Site Visit team can be scheduled the evening before.

It is important when developing the itinerary to ensure ample time on both days to accommodate all the interviews and reviews of documentation to provide a completed Site Visit Report.

The itinerary should include:

- Time for the preliminary interview.
- Individuals to be interviewed.
- Time and place that each interview will occur.

Site Visit Days

Welcome Conference

The site visit process will formally begin with the program's welcome conference on the first day of the visit. This meeting will include the program director, the site visit team, administrators, and faculty affiliated with the program and others who have been invited by program officials. In most academic institutions, a department chair or dean will also be present. An equivalent representation is recommended to be present at hospital institutions, such as, but not limited to, medical directors, lab directors, vice president, etc.

The team leader will open the NAACLS Welcome Conference with a greeting and introductions, followed by an overview of the accreditation process. The team leader will explain that after the site visit, the program is evaluated by a review committee who will then make accreditation recommendations to the board of directors for final approval. The meeting dates for both the review committees and board of directors are located on the NAACLS Website.

The site visit team should emphasize to program officials that the site visit is a fact-finding event, focused on confirming the findings from the self-study reviewers and addressing any concerns identified in their report. Administrators, faculty, and the program director should be given an opportunity to make comments or raise concerns during this meeting.

Set a Positive Tone from the Start

- Approach each interaction with openness, respect, and professionalism.

Serve as a NAACLS Ambassador

- Represent the organization with integrity in all interactions.
- Communicate clearly, courteously, and consistently.
- Contribute to an inclusive and respectful environment.

Individual and Group Interviews

Be sure to communicate with the program director that classes must be in session during the site visit to ensure the following groups and/or individuals affiliated with the program are available for interviews:

- faculty
- current students
- graduates
- clinical/applied learning affiliates
- administrators

It is important to emphasize that these individuals need to attend the interviews to ensure proper representation of the program and each program, if a joint site visit, should have separately scheduled meetings.

In each case, there should be an opportunity for conversations without the presence of program officials. **The program director should be excused during these interviews.** All meetings should be encouraged to be open and forthright. Site visitors should exercise discretion during and after these interviews. Sample questions that might be used during the interviews can be found in the Appendix of this document.

Keep in mind that the welcome conference and interview process is flexible and dependent on administration schedules. The site visit team can opt to interview all administrators at this conference or designate a separate time for specific administrators such as deans and hospital administrators.

Meeting Etiquette and Reminders

- Although in person meetings are preferable, video conferencing is allowed, however, a back up plan should be in place if technical issues occur.
- For privacy reasons, program directors or officials cannot be present for these meetings and should provide a space that allows for confidentiality.
- In order for the site visit team to assess various standards with the stakeholders, there needs to be an active and fair number for representation.
- When interviewing graduates, the preference is to include multiple graduating

- classes.
- If the program offers multiple modalities (online and in person), students and graduates from each should be represented.
 - Ask clear and relevant questions.
 - Listen actively without inserting personal opinions.
 - Adhere to the agreed upon schedule by keeping interviews on track.
 - Maintain a respectful tone.

Video Conference Etiquette

- A list of attendees prior to the meeting should be provided.
- Request attendee cameras to be on.
- Request attendee names to appear onscreen.
- Ensure privacy just as in-person meetings/interviews.

Managing Interview No-shows

It is the responsibility of the program to ensure that each scheduled interview group has ample representation. If an insufficient number of representatives attend a specific group interview, consider the Standards that are involved in meeting with that group. If you cannot address the standard without the interview or feedback from that group the standard is missing and should be indicated as such.

For example: In determining if the advisory board contributes to the program’s relevancy and effectiveness can only be answered by interviewing the advisory board and they do not appear, the Standard would be marked as “No” with the explanation that without interviewing any members of the advisory board the site visit team were unable to determine if they contributes to the program’s relevancy and effectiveness.

Informal and Formal Discussions with the Program Director

Meetings with the program director are naturally an important part of the site visit and should be a part of the formal itinerary. The site visit team can also meet informally with the program director to discuss any areas of concern. These informal conversations may occur between other meetings and/or at the visiting team’s hotel. During these meetings, the team should include any additional materials or documentation and/or plans to meet with additional key individuals/parties. The team can also use these informal meetings as opportunities to key the program director into the process, and findings of the team. The team should also meet again formally with the program director prior to the exit interview to review the final report that will be presented.

Time to Complete the Site Visit Report

The itinerary should include time for the site visit team to meet privately to review materials and documents that will be presented at the exit interview. It is important to schedule a time to inform the program director of the findings prior to the exit interview so there are no surprises.

Completion of the Site Visit Report

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

Site visit team members should read all the instructions before completing the report. NAACLS Program Services Staff will provide team members with an electronic form of the Site Visit Report via email, or found on the NAACLS Website.

When drafting the report, it is important to note that reviewers are to avoid personal interpretations or opinions when citing concerns. A draft of the report will be completed before team members leave the site visit. Following the visit, the team leader will finalize the document, checking spelling, grammar, and formatting before sending it to other team members for review.

Reviewers should utilize checklists and the specified site visit requirement as indicated in the Standards Compliance Guide. All areas marked with a NO must have a comment that includes a clear and detailed explanation of what is missing.

It is the responsibility of the site visit team leader to submit a final Site Visit Report to NAACLS staff within two weeks of the site visit. A late or incomplete report will delay processing and could jeopardize the program's review.

Site Visit Report Sections

The Site Visit Report contains three main areas to review for each Standard:

- Concerns from Self-Study Review
 - Explain how Self-Study Review concerns were resolved by the review response and/or verified on site
 - Unresolved concerns from Self-Study Report
- Additional Site Visit Questions
- Remaining Concerns

Items to consider and follow:

- Copy and paste the exact wording of any missing documents/concerns stated in the Summary Page to the corresponding Standard section of the Site Visit Report.
- After reviewing the Self-Study Review Response and/or during the site visit, explain how any concerns were resolved. If there are remaining unresolved concerns, note that in the appropriate section.
- All comments in the Site Visit Report sections should be factual and reflect a concern that the program does not meet a Standard. Opinions and suggestions are not acceptable in the Site Visit Report.
- Use complete sentences with acceptable English grammar and spelling.
- Capital letters should not be used as emphasis in the comments.
- Comments should be complete. Statements should be written to reflect a **lack of evidence/compliance**. Refer to examples found in the Appendix section of this document titled "Examples of Language for Self-Study and Site Visit Report".
- If "**YES**" is checked, no comments should be typed. If "**NO**" is checked, you are

- required to type comments.
- Programs under Initial Accreditation will require review of more extensive documentation to verify compliance with some Standards.

Program Information

- Verify that all information is recorded, including name of sponsor, city, state and type of program.

Unresolved Concerns from the Self-Study Report and Remaining Concerns Areas within the Report Body

- To ensure consistency and a comprehensive summary, the NAACLS PDF review documents will auto-populate text from the body of the review directly into the Summary Pages.

Summary Page

- Ensure that auto-population of comments from the body of the report to the Summary Page is working correctly. Contact staff if it is not functioning properly.
- The Summary Page should include any areas of strength of the program.

Affirmation Page

If all team members agree with the report, each member must complete the Affirmation Page. If a team member does not concur with the report, a Dissenting Report describing any disagreement must be submitted. Instructions for completing the Dissenting Report can be found in the Policy and Procedure Manual.

Spelling and Grammar Check

Take time to check the following commonly missed items before submitting the Site Visit Report to NAACLS Staff:

- unchecked boxes
- the absence of explanatory comments
- narrative misspellings

It is important to emphasize these reports are official NAACLS documents that are distributed to the program's corporate leaders, administrative teams, and other key decision-makers.

To showcase the high level of professionalism our reviewers possess, please ensure you submit the Site Visit Report only after a thorough examination of the document, confirming it is complete and free of spelling and grammar errors.

Informal Exit Interview with Program Director

Prior to the formal exit interview, the site visit team should meet with the program director to review the report that will be presented. This presentation will be a thorough discussion of the report, allowing for discussion and questions by the program director. At this time, the team may also provide any commentary they wish to share with the program director in their capacity as peer reviewers; however, this information will not be included in the final official report.

Maintain Transparency Leading Up to the Exit Interview

- Share concerns with the program throughout the visit.
- Verify information as it arises.
- Ensure the Exit Interview reflects previously communicated observations only.

Formal Exit Interview

The exit interview must be attended by the site visit team. All interested individuals, including administrators, faculty, advisory committee members and students are invited and encouraged to attend the exit interview. During the exit interview, the site visit team leader will report the team's findings by reading a draft of the Summary Page of the Site Visit Report. The entire Site Visit Report should not be read at this meeting. One approach for this meeting is to tie together the findings from the Self-Study Review and the site visit. The team leader can start by stating any concerns from the Self-Study Report found for each Standard and how they were resolved or not. For example, in Standard I, the affiliation agreement was missing from the Self-Study Response for <insert> hospital, but was available for the site visit team to review on site. This concern was resolved, and we have no additional concerns. The team leader will move to the next Standard and continue through all eight Standards.

Any deficiencies noted in meeting the Standards must be stated clearly and objectively, including the rationale for the findings. Any area where NO is checked in the Site Visit Report must be included in this exit interview. Please do not make any comments in the report section unless NO is checked. Additional comments may be made on the last page in the 'Areas of Strength' section.

Please do not give any portion of the Site Visit Report to the program. This report represents NAACLS and should be checked for accuracy, grammar, and spelling prior to being submitted to the NAACLS Program Accreditation Coordinator. NAACLS will also review the report before sending the official document to the program. As a matter of professional courtesy, the site visit team will communicate any identified concerns to the program so the program has sufficient opportunity to resolve the concern prior to receipt of the official site visit report from NAACLS.

It is important that the exit interview remains objective, constructive, and collegial. This meeting is also where you, as a site visit team, can communicate any strengths or special recognitions identified from the visit. In addition to providing a comprehensive summary of the team's findings, the team leader must remind program officials of their responsibility to submit a response to the team's report, even if no citations were issued. In their response, they may agree or disagree with the findings and provide clarifications, corrections, or remedies for any concerns identified in the report. A prompt response

should be encouraged.

Finally, the team leader must let the program officials know they will be given an opportunity to submit an evaluation of the site visit team and the site visit process.

After the site visit, the program and/or team member(s) may wish to acknowledge and thank the appropriate parties for any special courtesies or considerations extended.

Aborting a Site Visit

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

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

Following the Site Visit

Evaluation and Assessment of the Accreditation Site Visit Process

Site Visit Process Evaluation

Each team member is asked to complete the Site Visit Process Evaluation following the site visit. The evaluation is provided by NAACLS staff and is completed electronically. Assessment is a critical aspect of the accreditation process and provides NAACLS with important data to use in evaluating the process and effectiveness of its volunteers. Data gathered from evaluations is used as part of NAACLS' self-evaluation and helps to support and strengthen the accreditation process.

Self-Study Report Review Evaluation

In addition to evaluating the site visit process, the team leader is asked to complete an Evaluation of the Self-Study Report Review. The evaluation is provided by NAACLS Staff and is completed electronically. Results from this evaluation serve to provide constructive feedback to the reviewers regarding the effectiveness of the Self-Study Report Review.

Site Visitors and Site Visit Report Evaluations

The discipline specific review committee will evaluate the overall usefulness of the Site Visit Report in preparing their recommendation of accreditation. The following criteria are used in this evaluation process:

Format

- Was the Site Visit Report concise, clear and well organized?
- Did the report adequately address all the Standards?
- Were all identified concerns noted?
- Were all sections completed?

Content

- Were concerns noted by the self-study reviewer listed in detail?
- Were actions taken based on the self-study reviewer's concerns listed?
- Were statements or comments in the report specific, objective and without opinions or recommendations?
- Was the report objective in applying the Standards?

Program's Response to the Site Visit Report

Programs respond to the Site Visit Report in the following manner:

- The site visit team leader should inform the program at the exit interview of the programs' responsibility to respond to the Site Visit Report.
- NAACLS Program Accreditation Coordinator will provide the official Site Visit Report to the program director.
- The program director should respond to the concerns addressed on the Remaining Concerns Identified by the Site Visit Team pages of the Site Visit Report to the best of their abilities. The program director should also be prepared to provide additional evidence with the response.
- If there are no remaining concerns listed, a response of concurrence is required.
- If a response is not received within 30 days, NAACLS staff will attempt to communicate with the appropriate program official(s) by telephone and/or email.
- If this action does not result in a program's response, the discipline specific review committee will review the program for accreditation without this part of the program's input. The program is at risk of being placed on Administrative Probation.

Innovation within the Program

If reviewers see interesting or innovative methods during the review process, NAACLS asks that they complete the question included on the NAACLS Site Visit Process Evaluation Form. Sharing an aspect of the program they found interesting or innovative may potentially be featured in the NAACLS News or other methods. This is not required by reviewers.

Completing a NAACLS Expense Report Form

Expenses incurred during the site visit should be submitted to NAACLS by the specified due date (**within 15 days of the site visit**) with a completed NAACLS Expense Report.

An electronic expense report will be sent directly to site visitors. Please note that a delay in the submission of the expense report will lead to a delay in reimbursement. **If you are not submitting an expense report, please inform the NAACLS Accounting Office immediately.**

Transportation Expenses

Include all transportation costs on the Site Visit Expense Report (airline, bus, train, personal car mileage, rental cars, taxis, rideshares, subways, etc.). If you book the flight through Uniglobe, enter that total in the designated cell on the expense report. Please provide receipts with the expense report. First class tickets and private aircraft use are reimbursed at coach rates.

Use of a personal car or rental car to travel to a site visit destination must be pre-approved by NAACLS. All mileage applicable and tolls to the site visit must be included in the expense report. Mileage will be reimbursed at the current IRS rate.

Lodging and Lodging Related Expenses

Include all lodging expenses including hotel bills, meals, internet use, and tips. Meals required during periods of travel will be reimbursed. Original receipts should be included for all expenses whenever possible. All expenses require a receipt to be submitted.

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

Non-Reimbursable Expenses

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

- Travel expenses for a spouse or guest of a site visitor.
- Expenses of a personal nature, such as long-distance personal telephone calls, laundry or valet service.
- Entertainment expenses.
- Use of personal car without prior approval.
- Gas on personal cars that have prior approval, submit mileage only.
- Car rental without prior approval.
- Mileage on car rental that has prior approval, submit rental/gas cost only.
- Seats upgrades beyond economy and Priority Boarding
- Alcoholic Beverages.
- Meals and extra hotel nights on extended personal stays.
- Hotels booked by the program.
- Transportation to and from personal activities.
- Medicine or toiletries.

NAACLS is directly billed for Uniglobe fares.

Reimbursable Out of Pocket Expenses:

- Flights at economy rate if not billed through Uniglobe
- Mileage on personal car with prior approval
- Car rental and gas with prior approval
- Tolls
- Meals, snacks, and beverages on meeting and travel days
- Baggage fees
- Lodging
- Parking

- Taxis, rideshares, shuttles (including tips) to and from home/airport, airport/hotel, hotel/program site, and meals

Frequently Asked Questions for Site Visit Expenses

Q: Who is responsible for booking my flight and lodging?

A: The volunteer is responsible for booking their own flight and lodging to be submitted for reimbursement. NAACLS offers the option of using our travel agent, Uniglobe, to book flights.

Q: Can I use my personal vehicle?

A: Driving your personal vehicle to the site visit must have prior approval from NAACLS to be reimbursed and the cost of mileage must be equal to or less than the cost of a flight.

When using your vehicle to drive to the airport, the mileage for one roundtrip is covered along with your parking and tolls.

Q: Can I rent a car?

A: Car rentals must have prior approval from NAACLS to be reimbursed and the cost must be equal to or less than the cost of a flight.

Q: What is needed for reimbursement?

A: All itemized receipts are required for reimbursement. When leaving tips for meals, please include a picture of your itemized receipt along with the signed merchant copy containing the tip amount.

Q: I lost a receipt. What should I do?

A: If you have lost a receipt, you may provide your bank statement as backup for the expense. Unfortunately, if you used cash and lost the receipt, your expense cannot be reimbursed.

It is recommended that you take a picture of your receipts upon receiving them to ensure full reimbursement.

Q: If I'm volunteering on a joint site visit do I need to submit separate expense reports?

A: If you are visiting two programs belonging to one institution, you may submit a single report and indicate both program types.

Role of the Review Committee Following the Site Visit

The NAACLS Board of Directors appoints volunteers to serve on peer review committees. After a site visit, these review committee members analyze the Site Visit Report Response, summarizing key findings and identifying any missing information or concerns where documentation does not meet NAACLS Standards or lacks sufficient support.

The Self-Study Report, Site Visit Report, and the program’s responses are then forwarded to the appropriate Review Committee. Using this full set of materials, the committee conducts a comprehensive evaluation and formulates a recommendation for an accreditation award.

Individuals interested in serving on a review committee can visit the [Volunteers Page](#) or consult the [NAACLS Policy and Procedure Manual](#) for details on the nomination process and committee responsibilities.

Summary of Responsibilities for the NAACLS Accreditation Site Visit

Action or Timing	Team Leader (and/or Members)	Program Director (or Officials)
Appointment of Team Members	<p>Upon finalization of team members and dates of visit, and receipt of program materials, review:</p> <ul style="list-style-type: none"> - Volunteer Manual - Self-Study Report - Self-Study Report Review - Program Response to Self-Study Report Review - Appropriate Standards for program under review - Site Visit Report 	<p>Approve team members and finalize dates of visit.</p> <p>As soon as they become available, NAACLS Staff will provide the team members with copies of the Self-Study Report and the Response to the Self-Study Report Review.</p>
Initial Contact	<p>Discuss travel and lodging arrangements with the program director and team members.</p> <p>Plan an itinerary with the program director.</p>	<p>Confirm the site visit team and dates with faculty, administration, students and NAACLS.</p> <p>Provide recommendations for the site visitors regarding travel and lodging near the institution.</p> <p>Discuss the itinerary with the team leader and key constituents of the institution/program.</p>

<p>After Initial Contact</p>	<p>Confer with other team members and notify the program director regarding additional information that must be made available and when the information is required.</p> <p>Establish a final itinerary with the program director, including appointments with those who need to be interviewed such as students, graduates, administrators, faculty and contact person(s) from clinical site(s), etc..</p>	<p>Schedule appointments with those who need to be interviewed such as students, graduates, administrators, faculty, contact person(s) from clinical site(s), etc..</p>
<p>One Week (at least) Before Visit</p>	<p>Confirm itinerary with members and program director.</p> <p>Confirm travel, lodging and on-site transportation with program director and team members.</p>	<p>Confirm itinerary with institution and people scheduled for interviews.</p> <p>Confirm travel, lodging and on-site transportation arrangements for team members.</p>
<p>During Visit</p>	<p>Conduct site visits, including preliminary and exit interviews (team leader).</p> <p>Communicate openly and effectively with the program director, officials and team members.</p> <p>Work with team members to complete the Site Visit Report, including Affirmation Page.</p>	<p>Communicate openly with site visitors.</p> <p>Be available to team members and provide any requested documentation and information.</p>
<p>After Visit</p>	<p>Email the completed Site Visit Report to NAACLS by due date.</p> <p>Forward completed:</p> <ul style="list-style-type: none"> - Signed NAACLS Expense Report with all receipts. - NAACLS Site Visit Process Evaluation Form. - NAACLS Evaluation of the Self-Study Review Form (team leader). 	<p>Provide the Site Visit Report Response to NAACLS by established due date.</p> <p>Complete the Post Site Visit Evaluation.</p>

Failure to fulfill these responsibilities can jeopardize the program's accreditation.

Sample Schedule and Questions for the Site Visit

Sample Site Visit Schedule for Programs

The site visit schedule should be developed jointly by the program director and team leader. Adjust as needed and consider breaks and time to transport between meetings, however, once set, **adhere to the agreed upon schedule**.

It is important when developing the itinerary to ensure ample time on both days to accommodate all the interviews and reviews of documentation to provide a completed Site Visit Report.

EVENING BEFORE Team meeting at hotel to review course materials or an informal dinner for introductions.

Day One	Activity
8:30 – 9:00	Welcome conference <ul style="list-style-type: none"> - Universities: program director, faculty, advisory committee or medical advisor/medical director, department chair, dean, and other administrative persons - Hospitals: program director, chair of pathology, administrative director, chief of operations, supervisors/faculty
9:00 – 9:30	Meet with dean (university-based programs) or Meet with hospital administrators (hospital-based programs)
9:30 – 10:30	Meet with program director and review files
10:30-12:00	Tour facilities (tour including items related to the program such as, but not limited to: laboratories, classrooms, library, computer testing rooms, and office/faculty space, etc.)
12:00 - 1:30	Lunch (consider using this time to meet with a stakeholder group such as the faculty/supervisors, advisory committee, current students, graduates, etc.). This will allow for adjustment of time after lunch with the other stakeholders that you haven't met.
1:30 – 2:00	Meet with faculty/supervisors
2:00 – 2:30	Meet with advisory committee or medical advisor/medical director
2:30 – 3:00	Meet with clinical liaisons/preceptors (if applicable)
3:00 – 3:30	Meet with current students (expand to 60 minutes, if needed)
3:30 – 4:00	Meet with recent graduates
4:00 – 4:30	Further review of files and summary with program director

Day Two	Activity
9:00 – 10:30	Further review of files and course materials
10:30 – 12:00	Finalize report and prepare for the exit interview
12:00 – 1:00	Lunch
1:00 – 2:00	Summarize findings of the report with program director
2:00 – 3:00	Exit interview

Sample Questions for Site Visits (for all programs excluding DCLS)

Note: Although there are many questions that can be asked during interviews, this document provides examples that are directly related to the Standards. Assure the participants that their answers are confidential and will be collated as opposed to identifying a particular person.

President, Provost, Dean (Administrators)

1. What are some of the current campus/institution's initiatives that specifically include the program? What is/will be the role of the program?
2. How is the program integrated into proposed campus/institution's initiatives?
3. How is the program integrated into the institution's communities of interest?
4. How is the program integrated into the campus/institution's long-range plan?
5. What is the anticipated need for the program in this region? How does the institution intend to support those needs?
6. What is the process for funding support for the program? How does this impact long- range/continued growth and development of the program?
7. How is the budget process implemented for the laboratory science program? To what degree is the Program Director involved?
8. Describe the types of support given to the program.
9. Do you anticipate continued fiscal and administrative support for the program?
10. How is faculty development fostered across the institution?
11. What is the continuing education policy in your institution? Is funding/support available for professional development of program faculty?

Advisory Committee

1. How often do you meet together?
2. To what extent is your input sought by program officials?
3. Describe the general topics of the meetings.
4. Are there opportunities for your participation in courses, program development and evaluation?
5. Describe how the committee assists the program in maintaining the relevancy or effectiveness. Can you provide an example?

6. Do you feel comfortable raising concerns with the program director?
7. What changes has the program made to address any concerns you have raised?

Medical Director

1. What role do you play in the program and to what extent are you involved?
2. Do you provide student feedback? If so, how?
3. Do you and the program director meet regularly to discuss the program?

Faculty

1. Is the program director accessible for your questions, comments and suggestions?
2. Do you feel comfortable raising concerns with the program director?
3. Do you have input into the program and curriculum development?
4. Do you have input and involvement in program and curriculum evaluation?
5. To what degree is program evaluation used in the modification of the program and courses?
6. Do you have the proper space and resources to teach?
7. Do you know what to do and where to go if the student gets hurt?
8. How does the program design and implement IPE experiences for students?
9. How do you assess students' interprofessional collaboration competencies?
10. In what ways does the program reinforce the importance of team-based healthcare?
11. Do you have professional development opportunities that support your role in the program?

Current Students

1. Were you provided a copy of the essential functions required for success in the program? Do you understand their purpose?
2. Were you provided the program policies including safety and expectations when you began the program? At what point were these given to you?
3. Do you know what to do and where to go if you get hurt?

4. Are you aware of policies for when you can be allowed to perform direct patient and/or reportable work, during your clinical/applied learning? When were these policies provided to you?
5. Are students expected to perform direct patient and/or reportable work in clinical settings outside of the regular academic hours?
6. Has written criteria been provided to you that describes the criteria for passing, failing and progression in the program? Do you understand these parameters? Do you know how to access your grades?
7. Is counseling available and confidentiality maintained?
8. Are you aware of the grade appeal and student grievance policies?
9. Do you have access to the program director and/or faculty? Do you feel as though he/she/they are available and are responsive to your needs and concerns?
10. Is confidentiality maintained when you talk with the program director?
11. Do you feel comfortable raising concerns with the program director?
12. Do you have the proper space and resources?
13. Do you find that your experiences during clinical/applied learning in departments provide you with enough hands-on experience? Are there excessive periods when you do not have direct, related educational opportunities?
14. Do you get attention during clinical/applied learning? Were you provided a checklist outlining those objectives you need to meet?
15. Do you feel prepared for your clinical/applied learning?
16. Can you describe an interprofessional learning experience you participated in during the program?
17. How did the experience help you understand the roles of other healthcare professionals?
18. What skills did you gain in working with non-laboratory professionals?
19. Would you stay and work here if you could?
20. Do you feel prepared for your certification exams?
21. What is it you really like about the program?
22. As a student, have you been asked or provided any feedback on your view/thoughts on the program?

23. What would you like to see improved or changed?

24. Any comments or issues you would like to tell us? Any questions?

Recent Graduates:

1. Were program officials and faculty available and responsive to your needs?
2. Did you have the proper space and resources?
3. As a graduate, have you been asked or provided any feedback on your view/thoughts on the program?
4. Do you feel the program followed fair practices? Were grading practices fair? Did they follow published policies?
5. Were there any instances of appeals during your time in the program? Were they resolved as described in institutional policies?
6. Did you feel prepared for your first job? Was the program and clinical/applied learning the appropriate length?
7. Can you describe an interprofessional learning experience you participated in during the program?
8. How did the experience help you understand the roles of other healthcare professionals?
9. What skills did you gain in working with non-laboratory professionals?
10. Did you feel prepared for your certification exams?
11. What would you say were the strengths of the program? What would you have changed?
12. Would you attend this program again?

Clinical Liaisons/Preceptors

1. Describe your role as a clinical liaison/preceptor.
2. How often do you communicate with your program director?
3. How were you prepared to take on the role as a clinical liaison/preceptor with the program director?
4. Does the program provide checklists to use in evaluating student competency and is the level of expected competency clearly stated (discuss, observe, perform with maximum supervision, perform with minimal supervision)?

Sample Questions for DCLS Site Visits

Note: Although there are many questions that can be asked during interviews, this document provides examples that are directly related to the DCLS Standards. Assure the participants that their answers are confidential and will be collated as opposed to identifying a particular person.

President, Provost, Dean

1. What are some of the current campus/institution's initiatives that specifically include the program? What is/will be the role of the program?
2. Tell us how the program aligns with the strategic vision of the institution.
3. How is the program integrated into the campus/institution's long-range plan?
4. How is the program integrated into the institution's communities of interest?
5. What is the process for funding support for the program? How does this impact long - range/continued growth and development of the program?
6. How is faculty development fostered and resourced across the institution?
7. How have you provided support for finding clinical placements?
8. Do you have a policy for faculty workload?

Advisory Committee

1. How often do you meet together?
2. To what extent is your input sought by program officials?
3. Describe the general topics of the meetings.
4. Are there opportunities for your participation in courses, program development and evaluation?
5. Do you feel comfortable raising concerns with the program director?
6. What changes has the program made to address any concerns you have raised?

Faculty

1. Do you have input into the program and curriculum development?
2. Describe how you balance your faculty responsibilities. (teaching, scholarship and service)

3. Do you have input and involvement in program and curriculum evaluation?
4. To what degree is program evaluation used in the modification of the program and courses?
5. Explain the professional development opportunities provided to you as a faculty member.
6. Is the program director accessible for your questions, comments and suggestions?
7. Do you feel comfortable raising concerns with the program director?
8. How do you guide students through clinical experience?
9. Explain the resources you have to carry out the mission of the program. (online and in person)

Clinical Liaison

1. Describe your role as a clinical liaison.
2. How were you prepared to take on the role as clinical liaison with the program director?
3. How often do you communicate with your program director?
4. Does the program provide checklists to use in evaluating student competency and is the level of expected competency clearly stated (discuss, observe, perform with maximum supervision, perform with minimal supervision)?

Current Students

1. Describe how your program director and faculty make themselves available to you.
2. Tell us about how you receive feedback on coursework.
3. How did the educational activities of the program prepare you for your work?
4. Do you feel the coursework was at the DCLS level?
5. Describe the resources and guidance in the development in your final thesis/capstone/etc..
6. What do you perceive the strengths and weaknesses of the program are?
7. Are the expectations of progression through the program clear?
8. Tell us how you feel about the process for selection and assignment of the clinical site.
9. How is extracurricular work assigned?

10. Tell us how your roles as a student and employee were separated. (if applicable)
11. Is extracurricular work required?
12. How is this clinical experience different from your clinical experience as an MLS student?
13. Do you know who your clinical liaison was? Tell us about your experience with the liaison.
14. Are you aware of the grade appeal and student grievance policies?
15. Is counseling available and confidentiality maintained?
16. How were you guided during your clinical experience?
17. Would you recommend this program to others?
18. Any comments or additional feedback you would like to tell us? Any questions?
19. Do you feel comfortable raising concerns with the program director?

Recent Graduates:

1. What would you say were the strengths of the program? What would you have changed?
2. Were program officials and faculty available and responsive to your needs?
3. Would you attend this program again?
4. Did you feel prepared to enter the profession as an advanced level practitioner?
5. Would you recommend the program to others?
6. Any comments or additional feedback you would like to tell us? Any questions?

Appendix

Examples of Language for the Self-Study Review and Site Visit Report

Standard	Unclear Examples	Better Examples
I.	Several sites were missing affiliation agreements/MOUs and Clinical/Applied Facility Fact Sheet.	Clinical/Applied Facility Fact Sheets were missing for the following institutions: St. Mary's Hospital in Ideal, OH and General Medical Center in East Podunk, NY. The affiliation agreement/MOU for Metropolis Medical Center in Dearworth, TX was missing signatures for both institutions.
I.	Clinical/Applied Facility Fact Sheet missing liaison name.	The Clinical/Applied Facility Fact Sheet for Massive Medical Center in Peoria, OR is missing the name of the clinical liaison.
II.	Program assessment was not reflected in ongoing curriculum development.	Evidence was not submitted to verify that the results of program assessment are used in ongoing curriculum development.
III.	The budget is not adequate to support the program supply and equipment needs.	Results of student, graduate and clinical sites surveys indicate that student laboratory supplies and equipment are not sufficient to support the number of students assigned to laboratory sessions.
IV.	Documentation was not available to prospective students for many of the areas this Standard addresses.	Documentation that the following are available to prospective students was not provided: e. list of clinical facilities f. ... essential functions...
VII.	Didactic faculty/instructors are not qualified.	No Didactic Faculty/Instructor Fact Sheet was provided for Jane Doe, therefore qualifications could not be evaluated.
VIII.	A minimum of three questions of higher learning should be on the final exam.	NA – there is no Standard that requires a specific number of a type of questions.

Comments	I feel that the program director should become a NAACLS volunteer. Best wishes to the program director.	"I feel" statements are not appropriate. Reviews are fact based. These are not appropriate statements for either the Self-Study Review or Site Visit Report. If a volunteer would like to recommend a PD to NAACLS for consideration, they should do so formally, not as part of the accreditation process. If the reviewer wants to wish the PD "best wishes" they can do that outside of the official process.
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