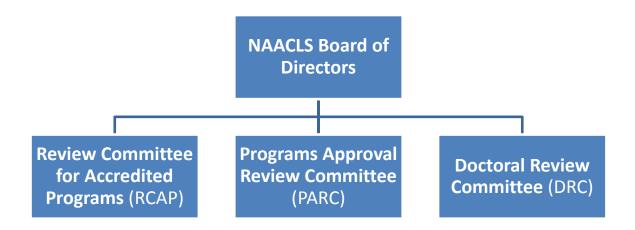
# NAACLS Information for potential Board and Committee Candidates



#### **Board of Directors**

The Board of Directors functions as the governing unit of NAACLS and grants the final accreditation and approval awards. The Board of Directors also formulates NAACLS policy.

#### **Review Committee for Accredited Programs (RCAP)**

The Review Committee for Accredited Programs reviews MLS, MLT, CG, DMS, HTL, HT, and Pathologists' Assistant programs for accreditation. The committee is comprised of representatives from the disciplines of MLS, MLT, CG, DMS, HTL, HT, and Pathologists' Assistant elected by the Board. The RCAP forwards its accreditation recommendations to the Board of Directors.

#### **Programs Approval Review Committee (PARC)**

The Programs Approval Review Committee (PARC) reviews PHLEB and CA programs for approval and is comprised of representatives from the disciplines of phlebotomy and clinical assisting. The PARC forwards its approval recommendations to the Board of Directors.

#### **Doctoral Review Committee (DRC)**

The Doctoral Review Committee (DRC) reviews clinical doctoral MLS programs for accreditation. The committee is comprised 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.

## **Membership**

The membership of each Programs Review Committee relates to the particular constituency it serves and includes practitioners, pathologists and appropriate educators. Elections to the Programs Review Committees are made by the Board of Directors. Elections are for four-year terms, beginning immediately following the annual Board meeting and concluding immediately following the Board meeting in the year completing the four-year term. If a vacancy occurs before a term concludes, the Board appoints a replacement, as required, to complete the term. Each Committee elects its Chair and Vice Chair annually at its summer meeting. NAACLS solicits nominations for elections on the Review Committees according to the Nominations Committee's policies. Recommendations for election are solicited from the sponsoring and participating organizations of NAACLS for Board representatives and from the *NAACLS News* and other media for other positions, as deemed appropriate. **Persons associated with NAACLS accredited programs are asked to send their curriculum vitae to NAACLS if they are willing to serve in the capacity for which they have been nominated.** The Board's Nominations Committee reviews the information provided in the curriculum vitae and recommends a slate of nominees to the Board for action.

# **Qualifications for NAACLS Board/Committee Membership**

#### Educator

- Service as a program director from a NAACLS accredited or approved program of the same type as the review
  committee is preferred. A program's accreditation/approval history will be considered. If program directors are not
  available to serve on committees, then faculty of programs that are the same type as the review committee are
  acceptable if they are knowledgeable in the accreditation and program approval processes and management in
  education.
- Experience as a site visitor and/or self-study report reviewer for NAACLS is required for accreditation review
  committee membership. Attendance at NAACLS accreditation workshops, instead of experience, may be
  acceptable for membership on the Review Committee.
- 3. Knowledge of the principles and process of accreditation and program approval.
- 4. Knowledge of the principles and practices of management in education.

#### **Pathologist**

- 1. Prefer a current medical advisor/medical director for a NAACLS accredited or approved program or a physician with pathology certification or board admissibility whose interest relates to a NAACLS accredited or approved program. The physician's associated program should correspond to the review committee.
- 2. Experience as a site visitor and/or self-study report reviewer for NAACLS is preferred, but not required for membership on the Review Committee.
- 3. Acquaintance with the principles and processes of accreditation and program approval.
- 4. Acquaintance with the principles and practices of management in education.

#### **Educator Generalist**

- 1. Current service in an educational administrative position with a NAACLS that has a accredited or approved program.
- 2. Experienced as a site visitor and/or self-study report reviewer.
- 3. Knowledge of the principles and processes of accreditation and program approval.
- 4. Knowledge of the principles and practices of management in education.

#### **Practitioner**

- 1. Currently in a position practicing at the level of the profession represented by the review committee.
- 2. Acquaintance with the principles and processes of accreditation and program approval.
- 3. Acquaintance with the principles and practices of management in education.

# **Requirements for NAACLS Board/Committee Membership**

For each six-month period, the primary time required is for:

- Traveling to and from NAACLS meeting(s)
- · Meeting in winter and summer annually
- · Reading agenda materials
- Participating in subcommittee duties

There will be additional time required for elected officers and subcommittee members. Mailings of informational items may also be sent between meetings. The time required for members' review and action on these materials varies.

### **Responsibilities of NAACLS Committee Members**

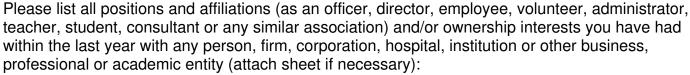
Programs Review Committee members are responsible for participating in the duties of the Review Committee and are accountable for their actions. The Programs Review Committees' responsibilities are as follows:

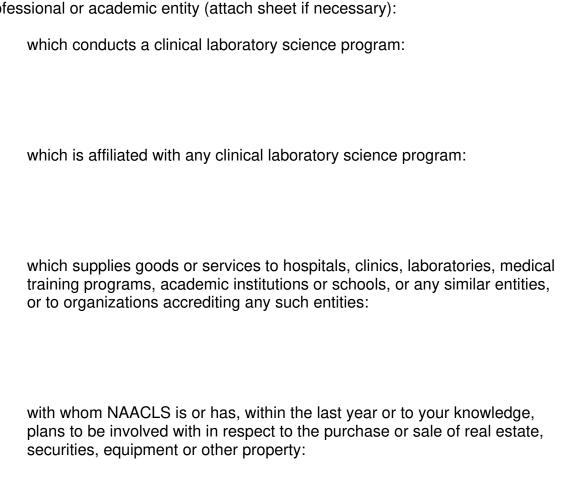
- 1. Participate in the development, review, revisions, justification and validation of Standards, as assigned by the Board of Directors and in accordance with recognized needs, making available the opportunity for public comment and review by sponsoring and participating organizations.
- 2. Prepare Guidelines to explain the Standards, realizing these are subject to approval by the Board of Directors.
- 3. Submit recommendations regarding a program's accreditation and approval status to the Board for approval.
- 4. Review problems or complaints related to a program's administration or implementation and students.
- 5. Conduct meetings twice a year.
- 6. Review, in detail, documents for assigned programs prior to formulating accreditation and approval recommendations to be forwarded to the Board for action.
- 7. Participate in site visits and review Self-Study Reports.
- 8. Maintain knowledge of current trends in education, accreditation, approval and needs of the constituency served by the Committee.
- 9. Formulate recommendations for changes in policies and procedures and for revising the Standards and associated documents; recommendations are sent to the Quality Assurance Committee for initial review and any issues forwarded to the Board of Directors for approval.
- Provide consultative services regarding the accreditation and approval processes to program officials, upon request.
- 11. Perform other duties, as assigned.

# **NAACLS Candidate Fact Sheet**

(Please complete and submit to NAACLS by February 15, 2015)

# Nominated for which position: RCAP, PARC, DRC or Board of Directors: Position: **Contact Information:** Name/Credentials: Address: Work: \_\_\_\_\_ Home: \_\_\_\_\_ Phone: Fax: Work: \_\_\_\_ Home: \_\_\_\_\_ Email: Work: Home: **Experience:** Current work position: Number of years at position: Program type (check if applicable): ☐ MLS ☐ MLT ☐ HT/HTL ☐ DMS ☐ CA ☐Phleb ☐Path A ☐ CG Educational Setting (check if applicable): University/College Community/ Hospital Junior College Other: \_\_\_\_\_





Please list relatives (defined for these purposes as persons related by blood or marriage) whom, to your knowledge, have or have had within the last year any of the interests of relationships described above:

# Candidate Fact Sheet Page 3

Totals of involvement with allied health education	ion programs (if applicable):
Program Director	Number of years
Medical Advisor/Medical Director	Number of years
Faculty: Academic	Number of years
Clinical	
Academic Administrator	Number of years
Practitioner	Number of years
Clinical Supervisor	Number of years
Experience in the accreditation and/or appr	oval process:
Site Visitor	Number of visits:
Site Visit Team Coordinator	Number of visits
Self-Study Report Paper Review	Number of reviews
Attended Accreditation Workshop	Date(s):
Non-NAACLS accreditation experience:	
Education:	
Academic Background (please indicate degree	es/credentials, institutions and their locations):
Certification:	
ASCP certification category:	
Board certified clinical pathologist	
Other:	

Candidate	Fact Sheet
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# **Conflict and Dualities of Interest**

Please list all leadership positions in profe have held within the last year including sp	essional or other business organization	s which you hold or
NAACLS:		
To the best of my knowledge, the above in	nformation is true. I am interested in s	erving on NAACLS'
Board/Committee		
Signature	Date	<del></del>