



**Accreditation Council on Optometric Education  
(ACOE)**

# **Policy & Procedure Manual**

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## Introduction and General Information

### About this Manual

The purpose of this Manual is to provide clarity and transparency to the Policies and Procedures associated with the functioning of the Accreditation Council on Education (ACOE). This manual replaces previous versions of Accreditation Manuals specific to each program type within the scope of the ACOE. The version history of the prior Accreditation Manuals is retained within this Manual.

For purposes of this document, the Accreditation Council on Optometric Education will be the "ACOE" or "Council."

Words/Acronyms in *italics* are defined in the Glossary.

In the footer of each page, a hyperlink leading back to the Table of Contents is provided.

### Role of Accreditation

Accreditation is a system for recognizing that educational institutions and programs affiliated with those institutions have attained a level of educational effectiveness, integrity, and quality which entitles them to the confidence of the educational community and public they serve. In most countries, the establishment and maintenance of educational standards is the responsibility of a central government bureau. However, the American system of voluntary non-governmental evaluation, called accreditation, has evolved to promote both regional and national approaches to the determination of educational quality.

Although accreditation is a voluntary process, accrediting decisions are used as consideration in many formal actions -- by governmental funding agencies, state licensing boards, scholarship commissions, foundations, and potential students. Accreditation at the postsecondary and professional level performs several important functions, including the encouragement of efforts to increase educational effectiveness. The accrediting process requires an educational institution and/or program to conduct a self-study to determine whether its mission and goals are being achieved; to consider the expert *recommendations* and *suggestions* of an impartial *evaluation visit* team comprised of members with appropriate expertise which evaluates the entity based on its ability to meet predetermined *standards*; and to plan and execute internal actions to address the recommendations of the accrediting body. Those programs meeting the criteria are publicly designated. Since accreditation status is reviewed on a periodic basis, accredited institutions and professional programs are required to maintain continuous self-study and improvement mechanisms.

Two forms of accreditation are recognized in the U.S. -- **institutional** and **specialized** accreditation. Institutional accreditation is granted by the national and *regional accrediting* commissions of schools and colleges, which collectively serve most of the institutions chartered or licensed in the United States and its possessions. Institutional accrediting bodies recognize the entire institution rather than individual programs.

Specialized accreditation of professional and occupational programs is granted by councils or commissions on accreditation set up by national professional organizations in such fields as, dentistry, optometry, medicine, engineering, and law. Each specialized accreditation group defines its own

eligibility criteria for accreditation and operating procedures. A major rationale for specialized accreditation activities is to provide quality assurances concerning educational preparation of members of the profession or occupation.

### History and Composition of the Accreditation Council on Optometric Education

The Accreditation Council on Optometric Education (ACOE), formerly known as the Council on Optometric Education, was established in 1934 by the House of Delegates of the American Optometric Association (AOA). Currently, the Council is comprised of eleven members, nine of whom are members of the AOA, and two *public members*. With respect to members of the Council who are members of the AOA:

- Three are optometrists of outstanding professional experience, who are not affiliated with any school or college of optometry and who are not members of any state board of optometric examiners;
- Two are current members of an Active Member Board of the Association of Regulatory Boards of Optometry (ARBO) or served on the ARBO Board of Directors within the preceding twelve (12) months at the time of their initial appointment;
- Three are optometrists associated with optometric educational programs with an *accreditation status* from the ACOE, with one of the three having expertise in optometric residency education;
- One is an optometric technician and/or a person involved in optometric technician education.

Current members of the AOA Board of Trustees and Chief Executive Officers of professional optometric degree programs are prohibited from serving as members of the Council.

The two *public members* of the Council are individuals who are not educators in or members of the profession of optometry. A *public member* of the Council also is not:

- an employee, member of the governing board, owner, or shareholder of, or consultant to, a program that holds either an *accreditation* or *preaccreditation status* by the Council or has applied for accreditation or preaccreditation;
- a member of any trade association or membership organization related to, affiliated with, or associated with the Council; or
- a spouse, parent, child, or sibling of an individual identified in the above two parts of this definition.

In the fall of each year, the status of appointment needs for the upcoming year is evaluated by the ACOE Chair. When there is an anticipated need, the chair may organize an ad hoc committee responsible for screening potential candidates. Sources queried may include: the ACOE *consultant* pool, ACOE members, solicitation via the Association of Specialized and Professional Accreditors (ASPA) listserv, ad placement in the Chronicle of Higher Education, AOA members and staff, and solicitation of formal nominations from The Association of Schools and Colleges of Optometry (ASCO) and the ARBO.

Candidates are evaluated to validate qualifications by education and/or experience. Following the screening process, the ACOE compiles and submits its recommendations to the AOA Board of Trustees for consideration in its post-Congress meeting for presidential appointment with advice and consent of the AOA Board of Trustees.

In the event of a vacancy, the president with the consent of the AOA Board of Trustees shall appoint a successor to complete the unexpired portion of the term of office as specified in Article V of the AOA Bylaws.

### ACOE Committee Structure

The ACOE has established Committees to allow it to function efficiently and to obtain input from stakeholders from the broader educational and practice community. Committees serve in an advisory capacity to the ACOE. The Committees study various topics, conduct preliminary reviews, and develop recommendations for Council consideration.

The Chair of the ACOE is an ex officio member of all Committees.

- **ACOE Executive Committee (EC)**—This Committee is comprised of the ACOE Chair, Vice Chair and Director (non-voting.) The *EC* functions in the interim between ACOE meetings to assure the effective functioning of the Council. The *EC* communicates the Council’s priorities and needs to the AOA Board of Trustees, reviews the Council’s financial status periodically, and support other activities including, but not limited to reviews of submitted complaints.
- **Professional Optometric Degree (POD) Committee**—The *POD Committee* advises the Council on *standards*, policies, and procedures related to professional doctor of optometry programs. The *POD Committee* does not review specific programs, but rather reviews the ACOE’s policies, *Standards* and procedures pertaining to all programs, and makes recommendations for ACOE consideration.
- **Optometric Residency Committee**—The Optometric Residency Committee advises the Council on *standards*, policies, and procedures related to optometric residency programs. Unlike the *POD Committee*, the Residency Committee reviews annual reports and progress reports submitted by the individual programs and makes recommendations for Council consideration.
- **Optometric Technician Committee**— The Optometric Technician Committee advises the Council on *standards*, policies, and procedures related to optometric technician programs. Similar to the Optometric Residency Committee, the Optometric Technician Committee reviews annual reports and progress reports submitted by the individual programs and makes recommendations for Council consideration.
- **Leadership and Professional Development (LPD) Committee**—The *LPD Committee* supports the training curriculum for members and staff of the ACOE. The *LPD Committee* also develops and works with the staff on planning and implementing training programs for ACOE senior *consultants* (aka team chairs for residency *evaluation visits*) and ACOE *consultants (evaluation visitors* for all types of programs.)
- **Planning Committee**—The Planning Committee is focused on four key areas: (1) periodically review and recommend updates to the Council’s *mission, goals, and objectives*; (2) assess performance relative to the Council’s *mission, goals, and objectives*; (3) advise the Council regarding future operations and direction; and (4) evaluate and develop a multi-year financial plan. Examples of recommendations which would originate in the Planning Committee could include changes to ACOE fees, Council or staff size or changes to the composition of the ACOE, among others.
- **Quality Improvement (QI) Committee** -- The *QI Committee* is comprised of the chairs of the three program-specific committees of the Council. The Committee follows a plan adopted by

ACOE for the “Assessment and Enhancement of the Relevancy, Validity and Reliability of ACOE Functions.” The Committee reviews compiled results of visit evaluations conducted over the course of each year, evaluations of ACOE training programs, and a compiled report of the *recommendations* issued associated with the various accreditation and preaccreditation *Standards*. The Committee serves a critical function in supporting consistency in interpretation of and assessments of compliance to the ACOE’s accreditation and preaccreditation *Standards*. The Committee develops recommendations for Council consideration as to whether corrective actions or enhancements to Council *Standards*, policies, and/or procedures are needed.

- **Compliance Committee** -- The Compliance Committee works with ACOE staff to monitor policies and processes in support of ongoing compliance with *USDE* and *CHEA* requirements.
- **Residency Review Committee** – The Residency Review Committee is comprised of the Council Chair, the Chair of the Optometric Residency Committee, and another Council member with residency experience. The Vice Chair of the Council also participates in cases of a conflict of interest with a Committee member. The Residency Review Committee is charged with evaluating and acting on concerns related to residency programs, avoiding the need to wait for the Optometric Residency Committee and/or the full Council to convene.

### *Mission, Goals, and Objectives*

(adopted 06/26/2021)

#### ***Mission***

The Accreditation Council on Optometric Education serves the public and the profession of optometry by establishing, maintaining, and applying *standards* to ensure the academic quality and continuous improvement of optometric education that reflect the contemporary practice of optometry. The scope of the Accreditation Council on Optometric Education encompasses professional optometric degree, optometric residency, and optometric technician programs.

#### ***Goal 1***

To protect and inform the public, the optometric profession, and the other communities of interest by ensuring a robust and transparent accreditation program.

#### ***Objectives***

1. Ensure policies, processes, and expectations are fair, appropriate, and clearly communicated;
2. Ensure qualified and unbiased professional peers and public representatives conduct accreditation reviews and make accreditation decisions;
3. Provide for integrity and transparency with respect to Accreditation decisions including decision rationale; and
4. Effectively monitor programs between evaluation reviews to assure continued compliance.

#### ***Goal 2***

To serve as a role model within the optometric profession with respect to application of innovation, the importance of continuous improvement, and the value of external validation.

#### ***Objectives***

1. Continuously seek cost-effective ways to deliver the services of the Council;

2. Implement measures that reduce administrative burden associated with the accreditation process;
3. Employ a continuous process of self-assessment and self-improvement; and
4. Maintain recognition by the U.S. Department of Education and Council on Higher Education Accreditation.

### **Goal 3**

To recognize trends and evolve in alignment with the contemporary practice of optometry and higher education.

#### *Objectives*

1. Ensure open lines of communication between the Council and stakeholders within the profession;
2. Actively engage with the communities of interest to inform and implement accreditation *standards* that remain relevant and contemporary; and
3. Keep the optometric community informed of current trends and developments in specialized accreditation.

#### Recognition by *USDE* and *CHEA*

The ACOE is recognized by the United States Department of Education (*USDE*). The ACOE's scope of recognition by the *USDE* is as follows:

The accreditation in the United States of professional optometric degree programs and optometric residency programs, and for the preaccreditation category of *Preliminary Approval* for professional optometric degree programs.

ACOE accreditation enables higher education programs to establish eligibility for federal programs under the Title VII Public Health Service Act and to participate in the Department of Veterans Affairs, Veterans Health Administration education and training program for optometry residency programs. All the U.S. programs that the ACOE accredits are located within, or affiliated with, educational institutions which are accredited by a *regional accrediting agency* that serves as a gatekeeper for Title IV funds.

In connection with its statutory duty to determine programmatic eligibility for federal aid funds, the *USDE* conducts a program of evaluation, review, and recognition of accrediting bodies to ensure that their actions are valid and reliable indicators of the quality of the educational programs offered by the accredited institutions and/or programs. Educational programs that are accredited by *USDE* recognized accrediting agencies are eligible for federal funds, provided certain other requirements are met.

The ACOE also has been recognized by the Council on Higher Education Accreditation (*CHEA*), a private, nonprofit national organization that coordinates accreditation activity in the United States. *CHEA* recognition signifies that the ACOE and other recognized accrediting agencies have met *CHEA's* standards for recognition. The scope of ACOE's recognition by *CHEA* is as follows:

Professional optometric degree programs (doctoral level), optometric technician programs (certificate level), and optometric residency programs (postdoctoral level) in the United States and Canada.

The activities and policies of the ACOE are regularly reviewed by the *USDE* and *CHEA* to ascertain whether the ACOE conducts a valid and reliable accreditation process. These external reviews help to

ensure that the ACOE is conducting its accreditation activities in a reliable manner that is responsive to public concerns.

## General Policies and Procedures

### Policy on Policies

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#### **POLICY**

The ACOE maintains, reviews, and updates Policies and Procedures (*P&Ps*) associated with its functions of accreditation and preaccreditation.

The ACOE's *P&Ps* are the purview of the Compliance Committee and will be reviewed for update or validation at least annually.

The Compliance Committee will make recommendations to the Council based upon its review which may include a referral of the *P&P*:

- to another ACOE Committee for review and recommendation before bringing to Council for its consideration;
  - to the full Council for discussion and determination of next steps, which *must* include distribution to the communities of interest in a call for comments in the case of proposed material changes; or
  - to the Council for consideration as part of a consent agenda for validation of existing *P&Ps* (no/non-material changes).
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#### **SCOPE**

- Professional Optometric Degree Programs
  - Optometric Residency Programs
  - Optometric Technician Programs
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#### **GUIDELINES**

None

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#### **PROCEDURE**

##### New or Revised *P&P*

An issue or concern may arise that warrants consideration of a new or revised *P&P*. The ACOE Director consults with the ACOE Chair regarding urgency of consideration, e.g.,

- whether the issue or concern can be added to the agenda of the next regular Compliance Committee meeting; or
- whether the issue or concern warrants an ad hoc Compliance Committee meeting.

The ACOE staff performs research and proposes a draft version of the new or revised *P&P*.

The new or revised *P&P* is reviewed by the Compliance Committee, which makes a recommendation based on its review.

Ultimately the new or revised *P&P* is considered by the Council and if accepted, is distributed to the communities of interest in a call for comments.

Upon assimilation of the results of the call for comments, the ACOE makes a determination whether to adopt the *P&P*.

##### Annual Review Process

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The Compliance Committee reviews the full contents of the “ACOE Policy and Procedure Manual” and makes recommendations associated with proposed revisions and/or revalidation of content.

Committee recommendations are considered by Council in its next regularly scheduled meeting. For any proposed revisions of a material nature, if accepted by Council, revisions are distributed to the communities of interest in a call for comments.

For *P&Ps* recommended for validation (no changes/non-material changes), the Council makes its determination as to whether to accept the validated *P&Ps*.

Upon assimilation of results from the call for comments, the ACOE makes a determination whether to adopt the revised *P&P*.

#### **FORMS/ATTACHMENTS**

None

#### **DATES OF REVISION/VALIDATION**

06/26/2021 (initial approval); 02/27/2022 (no/non-substantive changes)

## Ethics and Integrity

### **POLICY**

The ACOE recognizes that the public has entrusted educational programs, as well as accrediting bodies, with the critical responsibilities of upholding the values of higher education and contributing to the public good. Ethics and integrity are central, indispensable, and defining hallmarks of effective optometric education programs. The basic covenants of ethics and integrity serve as the foundation of a relationship in which all parties agree to deal honestly, ethically, and openly with their constituencies and one another.

The ACOE expects programs to operate with integrity in all matters, and to provide accurate, unambiguous information to the Council and to stakeholders. Plagiarism and failure to report honestly by presenting false information or by omission of essential information, whether by intention or not, constitutes a breach of integrity. Violation of principles of integrity and other forms of ethical misconduct may negatively affect an educational program’s *accreditation, preaccreditation, or other application status*.

### **SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

### **GUIDELINES**

References ACOE Policies & Procedures “Reconsiderations” and “Appeals”

### **PROCEDURE**

Upon identification of a potential violation of this Policy, the ACOE documents its concerns in a letter to the applicable program and offers the program the opportunity to provide its response. The response will generally be due to be submitted no less than 60 days in advance of the Council’s next regularly scheduled meeting.

The program may request to appear in front of Council to provide its response verbally and address any questions Council may have.

The program may also be requested by Council to attend an upcoming meeting to respond to any questions that Council may have.

Following review of the program’s responses, both written and verbal (if applicable), Council will make its determination as to whether the program has violated this Policy and whether *adverse action* or the lowering of its accreditation status to *Accredited with Conditions* is warranted. For programs that have not yet attained a *preaccreditation or accreditation status*, the Council will determine whether and for how long the program’s application will be withdrawn.

The Council will provide notification to the program of its determination within 30 days of its meeting.

If a negative decision results from a violation of this Policy, the program will have the opportunity to petition for reconsideration or file an appeal (reference ACOE Policies and Procedures “Reconsiderations” and “Appeals”).

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

06/26/2021 (initial approval); 06/18/2022

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**Conflicts of Interest**

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**POLICY**

Each member or representative of the ACOE *must* be free to take actions and make decisions without undue pressure from any program that the Council recognizes or to any other entity within the optometric profession.

The ACOE’s Policy on Conflicts of Interest ensures the integrity of its accreditation-related decision-making processes, including but not limited to decisions regarding *accreditation status*, *preaccreditation status*, and those associated with newly developing programs prior to *preaccreditation status*.

No member or representative of the ACOE shall participate in accreditation-related decisions in which the member has a pecuniary, professional, or personal interest that may be impacted by the outcome of the decision.

No ACOE member shall act as a paid or unpaid external consultant on ACOE accreditation matters to any program accredited by or seeking accreditation from the ACOE. This prohibition of serving as a paid or unpaid external consultant will extend for a period of two years after completing service on ACOE.

The actions and decisions of individuals subject to this policy *must* be free from the appearance of impropriety.

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**SCOPE**

Applies to ACOE members, *consultants*, evaluation team members, volunteers participating on one or more of ACOE’s standing Committees, and members of the administrative staff.

- Professional Optometric Degree Programs
- Optometric Residency Programs

☒ Optometric Technician Programs

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**GUIDELINES**

The following are examples indicating the potential for a conflict of interest, but are not all-inclusive:

1. a close personal, professional or financial interest, or other special relationship (including those of a negative nature), in any program or sponsoring institution in question;
2. an employee or consultant to an entity, other than the sponsoring institution of the program under review or other consideration, which provides all or a significant portion of the institution's funding (e.g., a state department of education or a federal or private agency providing significant grants or research funding);
3. a current or former student or graduate, or parent, child, spouse, or sibling of a current or former student or graduate of the sponsoring institution in question;
4. a current or former candidate for a paid position within the past five years with the entity in question;
5. a position, whether paid or voluntary, current or former, with or relating to the sponsoring institution or program in question; this includes positions as a consultant, advisor, or faculty member (including clinical or adjunct) (the likelihood of conflict should be carefully examined in relation to the duration and nature of the relationship); and/or
6. a residence and/or place of employment in the same state or in close proximity to the sponsoring institution or program in question should be carefully examined for the likelihood of conflict.

The following additional guidance is applicable to optometric residency programs

1. If the program being discussed is one that is directly sponsored by or affiliated with the Committee/Council member's employer, that member must declare a conflict of interest and exit the meeting. (For example, the director of residencies at Acme College of Optometry should leave the room for discussion of any residency programs affiliated with Acme College of Optometry. However, the supervisor at Anytown VA would not have to leave the room for discussion of any VA program, just for discussion of the Anytown program and any other program with the same affiliate.)
2. If it has been three (3) or more years since the Committee/Council member was an adjunct faculty member, that member is no longer required to declare a conflict of interest.

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**PROCEDURE**

Prevention

Council members.

- On an annual basis, Council members disclose potential conflicts of interest and sign an attestation affirming their understanding of and willingness to comply with ACOE's Policy on Conflicts of Interest. For new Council members, this disclosure/attestation is completed prior to members' participation in accreditation-related decisions.
- By signing the attestation, Council members are committing to notify the Council should additional possible conflicts arise during their term of service.
- During each Council meeting, the Chair reminds members of ACOE's Policy on Conflicts of Interest and the policy statement is included on the agenda itself.
- Council members *must* recuse themselves from discussion and decision-making associated with accreditation-related decisions for which a potential conflict of interest exists.

Committee members

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- On an annual basis, Committee members serving on Committees that include the evaluation of individual programs in their scope disclose potential conflicts of interest and sign an attestation affirming their understanding of and willingness to comply with ACOE's Policy on Conflict of Interest. For new Committee members, this disclosure/attestation is completed prior to members' participation in review of individual programs.
- By signing the attestation, Committee members are committing to notify the Council should additional possible conflicts arise during their term of service.
- During each Committee meeting where individual programs are being discussed, the Chair reminds members of ACOE's Policy on Conflicts of Interest and the policy statement is included on the agenda itself.
- Committee members *must* recuse themselves from discussion and decision-making associated with accreditation-related decisions for which a potential conflict of interest exists.

#### Staff members

- On an annual basis, staff members disclose potential conflicts of interest and sign an attestation affirming their understanding of and willingness to comply with ACOE's Policy on Conflicts of Interest.
- By signing the attestation, staff members are committing to notify the Council should additional possible conflicts arise during their term of service.

#### Consultants

- Upon completion of ACOE's *Consultant Training Program*, *consultants* disclose potential conflicts of interest and sign an attestation affirming their understanding of and willingness to comply with ACOE's Policy on Conflicts of Interest.
- By signing the attestation, *consultants* are committing to notify the Council should additional possible conflicts arise during their term of service.

#### Evaluation Team members

- *As consultants* are being considered for assignment on an evaluation team, both the *consultant* and the program are asked whether a potential conflict of interest exists. Only upon confirmation of absence of conflict of interest is a *consultant* assigned to a given evaluation team.
- In addition, when the *consultant's* signed disclosure/attestation form was completed two or more years prior to the date of the planned *evaluation visit*, the *consultant* is asked to update and execute a new form.

#### Resolution

The ACOE Director *must* be notified when there is reason to believe a person representing the Council might not objectively evaluate the program or there is uncertainty as to whether a situation may represent a possible conflict of interest.

The Director will advise as to whether the situation legitimately constitutes real or perceived conflict of interest based on review of the Policy Guidelines.

In cases where interpretation of the Policy Guidelines is not sufficiently clear, the Director will engage the Chair of the Council (or Vice Chair if the potential conflict of interest involves the Chair) in the decision.

The Chair of the Council (or Vice Chair if the potential conflict of interest involves the Chair) may choose to engage other members of the Council in making a determination and is ultimately

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empowered to make the final determination to resolve any questions regarding real or perceived conflicts.

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**FORMS/ATTACHMENTS**

Certification of Adherence to Conflict of Interest and Confidentiality Policies

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022

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Non-Discrimination

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**POLICY**

The ACOE does not practice, condone, or perpetuate discrimination on the basis of age, gender identity, religion, race, creed, national origin, or disability.

The Council urges each program to pursue policies encouraging the inclusion of underrepresented and disadvantaged students/residents, faculty, staff, and administrators.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

References ACOE Policies and Procedures “Complaints Against Programs Related to ACOE Standards and/or Procedures” and “Complaints Not Related to Accreditation or Preaccreditation Decisions”

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**PROCEDURE**

None

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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Document Retention

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**POLICY**

The ACOE maintains complete and accurate records including, but not limited to the following:

- its last two full accreditation or preaccreditation reviews of each program, including on-site *evaluation visit* team reports, the program's responses to evaluation reports, progress reports, if any, reports of interim or focus reviews conducted by the ACOE between and since the last two full accreditation or preaccreditation reviews, and copies of the program's last two self-studies associated with full accreditation or preaccreditation reviews;
  - all decision letters issued by the ACOE regarding the *accreditation* and *preaccreditation status* of any program and any *substantive changes*;
  - records of any complaints received regarding the program filed in accordance with ACOE Policy and Procedures “Complaints Against Programs Related to ACOE *Standards* and/or
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Procedures” and “Complaints Not Related to Accreditation or Preaccreditation Decisions” as well as the resolution of the complaints;

- minutes of ACOE meetings that contain records of all ACOE actions; and
- correspondence from the ACOE regarding ACOE actions.

All electronic records are stored on a secured server protected by firewall and accessible only to the ACOE staff. The electronic records are backed up daily and with the back-ups stored in a secure off-site location.

All hardcopy records are stored in its access-controlled office under lock and key.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

None

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

Adopted June 9, 1997; Updated 2001, 2006, 2012; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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[Confidentiality of Accreditation Reports and Council/Committee Proceedings](#)

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**POLICY**

Evaluation reports are confidential and are not disclosed except to the program involved.

- Premature and/or unauthorized disclosure of information reflecting the evaluation team's or Council's conclusions and *recommendations* concerning *accreditation* or *preaccreditation status* of a program may seriously jeopardize the Council's position as an accrediting agency, and adversely affect the program.
- The Council expects the chief executive officers of optometric educational programs to make Council evaluation reports available to faculty members, members of the governing board, and others directly concerned.

Council members, Committee members, evaluation team members, and *consultants* are not authorized under any circumstances to disclose information obtained during *evaluation visits* or during Council or Committee meetings or activities.

- Records associated with Council/Committee meetings or activities, including meeting materials and results of deliberations, are considered confidential and may be shared only with Council members and staff.
  - The extent to which publicity is given to evaluation reports is determined by the chief executive officer of the educational program.
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- Following the Council's approval of the formal accreditation report, evaluation team members are expected to destroy their copy of the pre-evaluation materials and other documents relating to the evaluation visit.

However, when a program so conducts its affairs that they may become a matter of public concern, the Council may find it necessary to issue public comments to correct inaccurate or misleading information. Such inaccurate or misleading information may pertain to the *accreditation* or *preaccreditation status* of the program, the contents of reports of an evaluation review, and/or the ACOE's accrediting or preaccrediting actions with respect to the program. Moreover, when the Council is thus forced to make its actions public, it cannot avoid the necessity of explaining, to whatever extent it deems necessary and appropriate, the basis for its action. This may result in some departure from the usual confidential character of the Council's relations with a program.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

None

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022

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*Confidentiality of Protected Health Information (PHI)*
**POLICY**

*Protected Health Information (PHI)* may not be used by the Council or members of *evaluation visit* teams for any purpose other than for evaluation of the program for accreditation or preaccreditation.

If requested by a program that is a *HIPAA* Covered Entity undergoing the accreditation or preaccreditation process, then the Council shall enter into the ACOE form of Business Associate Agreement ("*BAA*") or its equivalent, permitting the Council to receive *PHI* from the program in the course of evaluating the program for accreditation.

Programs may not include any *PHI* in any correspondence or materials submitted to the ACOE, including but not limited to self-study materials.

- *PHI* that is included in any materials submitted to the Council will be destroyed.
- Programs may be required to resubmit materials when the originally submitted materials are destroyed because they contain *PHI*.
- The program is responsible for any resulting missed deadlines.

*Evaluation visitors* may be exposed to *PHI* during *evaluation visits* to programs, for example during a visit to a clinic where patients are receiving care.

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- *Evaluation visitors* may not take copies of any *PHI* with them from the *evaluation visit* and *must* maintain the confidentiality of all *PHI* to which they are exposed during the *evaluation visit*.
- *PHI* shall not be shared with any individuals other than Council members, *evaluation visitors*, and Council staff that have a need to know the information to fulfill their official duties in connection with evaluating the program for accreditation.

Individual *evaluation visitors* will not sign separate confidentiality forms associated with an *evaluation visit*.

- Confidentiality obligations exist between the Council and the program with *evaluation visitors* acting as agents for the limited purpose of conducting the *evaluation visit*.
- These obligations are covered by this Policy and the terms of the *BAA* or other confidentiality agreement entered into between the Council and the program, if any.

#### SCOPE

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

#### GUIDELINES

None

#### PROCEDURE

Council Members and Staff

- At least annually, all Council members and staff sign a form certifying adherence to the Council's policies on confidentiality of *PHI*.
- At least annually, all Council members and staff complete the ACOE *HIPAA* Compliance Training.

Evaluation Team Members

- At the time of assignment of evaluation team members, ACOE staff review records to assess whether *HIPAA* training and attestation certifying adherence to the Council's policies on confidentiality of *PHI* have been completed within two years in advance of the projected *evaluation visit* date.
  - If so, then no other action is taken.
  - If not, then the attestation and/or *HIPAA* training module is provided to and collected from the relevant team member(s).

#### FORMS/ATTACHMENTS

Certification of Adherence to Conflict of Interest and Confidentiality Policies

#### DATES OF REVISION/VALIDATION

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

Public Disclosure of Accreditation Information

#### POLICY

The ACOE *publishes* and posts on its public website ([www.theACOE.org](http://www.theACOE.org)) written information providing transparency to its accreditation *Standards*, policies, procedures, information about programs' *accreditation or preaccreditation status* and *outcomes*, as applicable, decision-makers, and principal administrative staff.

The following sets of accreditation *Standards* are posted on the ACOE's public website and include dates of most recent review/revision.

- Professional Optometric Degree *Standards*;
- *Standards* for professional optometric degree programs seeking *Preliminary Approval preaccreditation status*;
- Optometric Residency *Standards*; and
- Optometric Technician *Standards*.

The ACOE *publishes* a comprehensive Policy and Procedure (*P&P*) Manual on its public website. *P&Ps* include records of review/revision history.

*Directories of accredited programs* are posted on the ACOE's public website. For each program, the applicable *accreditation or preaccreditation status* and the year the ACOE will next review or reconsider it for accreditation or preaccreditation is listed. The list is updated following each ACOE meeting, and when major changes occur.

On its public website, the ACOE *publishes* a series of hyperlinks associated with professional optometric degree programs holding an *accreditation status*; these hyperlinks provide direct access to each program's *published* information regarding student achievement. The ACOE also provides hyperlinks to documents *published* by the ASCO for all professional optometric degree programs including the profiles of applicants, entering classes, prerequisites, and National Board passage rates.

The ACOE posts notice of programs with *Accredited with Conditions* status or withdrawal of accreditation on its public website.

The ACOE *publishes* its accreditation decisions, including the basis for any final decisions, on its web site within thirty (30) days of the decision. The information to be *published* includes:

- the type of program (professional optometric degree, optometric residency, or optometric technician);
- the program's *sponsor*, and in the case of an optometric residency not sponsored by a school or college of optometry, the name of the *affiliated optometric school or college*;
- *preaccreditation or accreditation status* or action;
- the year of the next currently scheduled *evaluation visit*; and
- the Council's summary of compliance with the *Standards*, which specifies the Council's basis for any final decision.
  - Updates to the summary of compliance are *published* when the ACOE determines that the program has come into compliance with the *Standards*.

A list of the names, academic credentials, member type, and current term expiration of each member of ACOE's policy and decision-making body is available on the ACOE website. ACOE staff and member resumes or curriculum vitae (CV) are on file with the ACOE Director and summaries of academic and professional qualifications, and relevant employment and organizational affiliations of its members may be obtained upon request. ACOE's principal administrative staff is listed on the ACOE website.

The Council also produces an annual report which it submits to the AOA House of Delegates listing its accreditation decisions, the names of the programs which are removed from the *directory of accredited programs*, and reasons for removal.

Any inquires to ACOE can be submitted via email to [accredit@aoa.org](mailto:accredit@aoa.org).

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

None

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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*Complaints Not Related to Accreditation or Preaccreditation Status Decisions*

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**POLICY**

The ACOE ensures an unbiased, timely, and equitable review of any complaints against itself not related to *accreditation* or *preaccreditation status* decisions and takes follow-up action, as appropriate, based on the results of its review.

Complaints must be submitted in writing. The event(s) being complained about must have occurred at least in part within one (1) year of the date the complaint is filed. An exception to the one (1) year limitation may be made, at the discretion of the designated Council members performing initial evaluation of the complaint.

The complaint must be identified as a complaint and submitted independent of any other documentation submitted to the ACOE.

During the period of the investigation, the ACOE will maintain the confidentiality of the information and documents submitted to it, except to the extent it deems necessary and appropriate to conduct a thorough inquiry.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

For disputes related to *accreditation* and/or *preaccreditation status* decisions, refer to ACOE Policies and Procedures “Reconsiderations” and “Appeals of Accreditation Decisions.”

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For complaints against a program related to ACOE *Standards* or procedures, refer to the ACOE policy “Complaints Against a Program Related to ACOE *Standards* or Procedures.”

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#### **PROCEDURE**

A complaint may be initiated by filing a signed written complaint with the ACOE. The complaint *must* be submitted as an attachment to an email addressed to [accredit@aoa.org](mailto:accredit@aoa.org).

The complaint *must* identify the specific matters complained of, set forth in detail the facts and reasons claimed to support the allegations and *must* include pertinent documents in possession of complainant relating to the complaint.

Upon receipt of a written complaint, the ACOE Chair and one public member who is not implicated in the complaint shall evaluate the validity of the complaint as well as its applicability to this Policy. When the complaint involves the Chair, the Vice Chair will replace the Chair in the evaluation. In the case of disagreement regarding the validity and/or applicability of the complaint, the ACOE Director will engage another member of Council in the evaluation process. This determination shall be made within thirty (30) days of receipt of the written complaint. In cases where it is determined that no investigation is warranted, the complainant(s) shall be so informed.

Once the written complaint is determined to be in scope of this Policy, the ACOE shall have forty-five (45) days to conduct an investigation of the allegation(s) in the complaint where warranted. The investigation may include, without limitation, interviews with person(s) having information regarding the allegation(s) and a review of materials relevant to the complaint. Any individual with information regarding the allegation(s) may also be asked to provide documents and comments relating to the complaint.

The Chair of the ACOE may appoint an individual or a committee to conduct the inquiry into the allegation(s) of the complaint. If the complaint concerns the Chair, the Vice Chair may appoint an individual or committee to conduct the investigation.

Following the investigation, the individual or committee shall prepare a written report to the ACOE stating the findings of the investigation. The person(s) filing the complaint will be provided with a copy of the written report and will be provided with an opportunity to submit written comments to the ACOE on the investigation report. Any written comments shall be submitted to the ACOE within thirty (30) days following receipt of the report.

Following review of the findings and additional written comments, if any, the Council at a duly scheduled meeting shall make a determination with respect to the allegations of the complaint.

Within fifteen (15) business days following the decision, a written report shall be prepared specifying factual findings of the ACOE and the actions, if any, that the ACOE will take with respect to the complaint, including but not limited to dismissing the complaint, making modifications to comply with its established accreditation policies and/or procedures, revising/developing policies and/or procedures appropriate to reflect accepted accreditation practice, or performing other remedial action. The complainant(s) will be provided with a copy of the ACOE’s decision.

The person(s) filing the original complaint may appeal the decision of the Council by filing the appeal, in writing and stating specific reason(s) for the appeal, with the Secretary-Treasurer of the Board of Trustees of the AOA, within thirty (30) days following notification of the decision of the Council.

Within fifteen (15) days of receipt of the Appeal, the President of the AOA shall name three (3) persons to an ad hoc Appeals Panel, and three alternates, not one of whom shall be a member of the ACOE or a member of the Board of Trustees of the AOA, or have had affiliation with the sponsoring

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institution, program, or person(s) filing the appeal or with the accreditation process relating to a program. No additional fact finding may be undertaken regarding the initial complaint, unless requested by the Appeals Panel.

Within sixty (60) days after appointment, the Appeals Panel shall schedule and convene a meeting to hear or receive presentations from the complainant and the Council or their respective representatives. The complainant(s) will have an opportunity to have one (1) representative appear before the Appeal Panel to make oral and/or written presentations and to respond to questions from the Panel. The ACOE will designate a representative to appear before the Panel to support the decision of the Council and to respond to questions of the Panel. Either party may be represented by counsel; however, the proceeding shall be conducted on an informal basis.

The Appeals Panel shall review the materials presented and shall reach a decision within fifteen (15) days of the meeting. The Appeals Panel decision may be to sustain, modify or reverse the decision of the Council or to remand the matter to the Council for reconsideration with recommendations.

The decision of the Appeals Panel shall be in writing, shall state the pertinent finding of facts and conclusions, and the actions approved by the Panel. The Appeals Panel shall forward its findings and conclusions to the Council for action and shall provide the complainant(s) with a copy of the Appeals Panel decision.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022

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[Training](#)

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**POLICY**

The Leadership and Professional Development (*LPD Committee*) is charged with ensuring current and relevant training materials are in place for ACOE members, staff, *consultants*, and appeals panel members and that training is delivered timely and as needed.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

Annual Orientation for ACOE Members and Staff

ACOE members and staff receive annual orientation training on the *Standards*, policies, and procedures of ACOE, hosted by the *LPD Committee*.

The orientation session is held in conjunction with ACOE member appointments/reappointments, and all ACOE members and staff participate in each session. Experienced ACOE members share insights with new members and review *Standards* and procedures. If a staff or Council member is unable to

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attend all or some of the annual orientation, review of a recorded version of the training is acceptable.

Feedback is solicited from training session participants and reviewed for continuous process improvement.

#### Evaluation Team Members

The Council seeks nominations of qualified individuals from administrators and faculty at the programs holding an *accreditation or preaccreditation status*, Council members, and other *consultants*. Nominated individuals are contacted and requested to submit their curriculum vitae (CV). Upon review, acceptable nominees are invited to undergo the training.

The ACOE conducts a formal training program to prepare its prospective *consultants* to serve as evaluation team members.

The *consultant* training program curriculum includes a seminar hosted by the *LPD Committee* and training materials provide links to documents on the ACOE website as well as other resources to assist *consultants* in learning the basics of accreditation and the *evaluation visit* process.

The Council continually recruits and trains *consultants* to allow for attrition and to keep the *consultant* pool current.

The ACOE maintains a list of non-optometric *consultants* from the higher education community who meet the definition of *public members* and who may be asked to participate with optometric educators and practitioners as evaluation team members. ACOE training resources are provided to non-optometric team members for professional optometric degree program *evaluation visits*. In addition, the team chair, an ACOE member, provides mentorship to not only non-optometric team members, but to all team members.

For *evaluation visits* where an ACOE member is assigned to serve as *liaison* to the *evaluation visit* team, this individual provides mentorship as needed to evaluation team members.

Feedback is solicited from training session participants and reviewed for continuous process improvement.

#### Evaluation Team Chairs

*Consultants* must undergo additional training before serving in the role of team chair for residency program *evaluation visits*. These individuals are recruited from the pool of trained *consultants* and are nominated by the Council and other team chairs.

The ACOE and its *LPD Committee* conduct a workshop to train *consultants* to serve as team chairs for residency program *evaluation visits*. Training materials for the team chair provide a more in-depth focus on the attributes needed to effectively chair a residency site visit, such as leading the visit, timelines for the site visit process, and analysis of the self-study.

Feedback is solicited from workshop participants and reviewed for continuous process improvement.

#### Appeals Panel Members

As Appeals Panel members and alternates are selected, their ACOE training status is evaluated. When needed, the *LPD Committee* ensures ad hoc and/or refresher training is provided prior to Appeals Panel decision-making.

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#### **FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 06/18/2022

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## Policies Related to Accreditation of Programs

### Accreditation and Preaccreditation *Standards*

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#### **POLICY**

The ACOE relies upon clear *standards* for accreditation and preaccreditation that are sufficiently rigorous to ensure that an award of an *accreditation* or *preaccreditation status* by the ACOE is a reliable indicator of the quality of education provided by the programs it accredits. The ACOE bases its accreditation and preaccreditation status decisions on compliance to its *Standards*.

The ACOE's *Standards* respect the stated *mission* of the program and its sponsoring institution, including *religious mission*, and ensure that the education or training offered by the program, including any offered through *distance education*, correspondence courses, or direct assessment education is of sufficient quality to achieve its stated objective for the duration of any accreditation or preaccreditation period.

The ACOE's *Standards* for accreditation and preaccreditation set forth clear expectations for the programs it accredits with respect to:

- Success with respect to student achievement in relation to the program's *mission*, including, as appropriate, consideration of State licensing examinations, course completion, and job placement rates;
- *Curricula*;
- Faculty;
- Facilities, equipment, and supplies;
- Fiscal and administrative capacity as appropriate to the specified scale of operations;
- Student support services;
- Recruiting and admissions practices, academic calendars, catalogs, publications, grading, and advertising; and
- Record of student complaints received by, or available to, the ACOE.

The ACOE's preaccreditation *Standards* are appropriately related to the ACOE's accreditation *Standards*.

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#### **SCOPE**

- Professional Optometric Degree Programs
  - Optometric Residency Programs
  - Optometric Technician Programs
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#### **GUIDELINES**

None

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#### **PROCEDURE**

As the ACOE considers additions to and/or revisions of accreditation and preaccreditation *Standards*, the review will include validation of continued compliance with this Policy (reference ACOE Policy and Procedure "Revision of Accreditation and Preaccreditation *Standards*").

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#### **FORMS/ATTACHMENTS**

ACOE *Standards* of Accreditation are posted on its website ([www.theACOE.org](http://www.theACOE.org))

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#### **DATES OF REVISION/VALIDATION**

06/26/2021 (initial approval) ; 02/27/2022 (no/non-substantive changes)

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## Self-Studies

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### **POLICY**

The self-study is a required component in the ACOE accreditation process.

The primary purpose of the self-study is for the program to assess the quality of its education and its success in meeting its *mission* and *objectives*, highlight opportunities for improvement, and delineate a plan for making those improvements.

The self-study *must* ensure a focus on *outcomes* related to the program's efforts in pursuit of its *mission* and *goals*. While *mission* and *goal* statements articulate the desired *outcomes*, statements of *objectives* should serve as specific means to accomplish its desired *outcomes* as well as criteria by which to assess the degree to which the *mission* has been achieved.

Finally, the self-study orients the *evaluation visit* team to the program. The self-study describes the entity that is being evaluated as to its resources, the constituencies whom it serves and who serve it, its *mission*, *goals*, *objectives*, and the degree to which they are being met, its physical plant, and other factors. The team member comes to the *evaluation visit* with substantial knowledge of the backgrounds of the involved faculty, administrators, and students, the financial integrity of the program being evaluated, and the intricacies of *governance*.

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### **SCOPE**

- Professional Optometric Degree Programs
  - Optometric Residency Programs
  - Optometric Technician Programs
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### **GUIDELINES**

The following guidelines are provided to help programs foster the constructive attitudes and participation essential for a productive self-study. Programs are encouraged to:

1. leverage the self-study process as a means to foster a culture of self-assessment and continuous improvement - the self-study process should be an ongoing activity;
  2. ensure adequate human, technical and financial resources are allocated to the self-study process - allow plenty of time for self-study completion;
  3. promote engagement in the self-study process such that all appropriate constituencies are involved - the quality of the self-study will be improved by focusing on the inter-relationships between various activities to the stated *goals* and *objectives*;
  4. undertake the self-study process with an openness and willingness to identify opportunities for improvement rather than a means to assign blame - where opportunities for improvement are identified, clearly articulate corrective and preventive actions; and
  5. identify and celebrate the accomplishments and positive elements of the program relating to its *mission*, *goals*, and *objectives*.
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### **PROCEDURE**

The program should adopt a timetable for the self-study that starts with the appointment of a self-study committee, includes each step in the process, and ends with the date the self-study is to be sent to the ACOE. In most cases, the self-study is due at least two (2) months in advance of the scheduled

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*evaluation visit*. For Interim visits, the self-study is due at least one (1) month in advance of the scheduled *evaluation visit*.

Programs should initiate the self-study process at least twelve (12) months before the scheduled *evaluation visit*.

The format of the self-study *must* be a report presented on a *Standard-by-Standard* basis. Through narrative, the program *must* provide both a written description of how it complies with each *Standard* and supplement the narrative with submission of exhibits/*examples of evidence*.

A program may choose to provide some, all, or none of the *examples of evidence* as long as it provides evidence to demonstrate compliance. Any required and/or supporting documentation listed after each of the *Standards* may be submitted within or as appendices to the self-study.

The self-study *must* also state areas of concern and areas of strength. The Council expects that a program has developed plans to address specific areas of concern or weakness.

Specific to optometric residency programs, the Council has created a template which provides programs a format for the self-study. The final self-study with appendices should be submitted using the ACOE template.

#### **FORMS/ATTACHMENTS**

ACOE Residency Self-Study Working DRAFT Template 2017 Standards

ACOE Residency FINAL Version Self-Study 2017 Standards

#### **DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

### Composition and Selection of the *Evaluation Visit* Team

#### **POLICY**

*Evaluation visit* team members are selected from a pool of trained *consultants* and Council members. ACOE *evaluation visit* teams include at least one *educator* and one *practitioner*.

- An *evaluation visit* team for a professional optometric degree program normally consists of four-five (4-5) team members, at least one (1) of whom is a Council member. A member of Council staff typically accompanies the team to serve as a resource and provide support to the team.
- An *evaluation visit* team which visits an optometric residency program normally consists of two (2) team members and is supported by a Council member *liaison*. Typically, both team members are *consultants*.
- An *evaluation visit* team which visits an optometric technician program normally consists of two-three (2-3) team members, at least one of whom is a Council member (a Council member *liaison* may be assigned when an appropriately qualified Council member is not available).

The presence of one (1) or more Council member(s) as either *evaluation visit* team member(s) or as a *liaison* assigned to an *evaluation visit* team serves as a control against inconsistent application of the ACOE's *Standards*.

#### **SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs

- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

In conjunction with the ACOE *Consultant* Training Program and at least once per year thereafter, *consultants* are requested to complete a *consultant* update form. Information/Updates requested include the *consultant's* classification of *educator* or *practitioner*, education, employment, areas of expertise, and contact information.

Information is entered/updated by ACOE staff into the ACOE database.

Using the *educator* or *practitioner* classification listed in the ACOE database, the ACOE staff ensures that each team meets *evaluation visit* team composition requirements.

When developing proposed *evaluation visit* teams, the ACOE staff may consult with program leadership to obtain advice concerning perceived needs.

ACOE staff also evaluates areas of expertise when recommending *consultants* and/or Council members for *evaluation visit* team participation.

Summary biographical information related to each of the proposed team members is forwarded to the program being evaluated. The program is requested to confirm whether it perceives any conflicts of interest with any members of the team. If any conflicts or concerns are identified, then the ACOE staff forwards alternate potential team member(s) ensuring compliance with *evaluation visit* team composition requirements. The process repeats until a slate of potential team members is identified.

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**FORMS/ATTACHMENTS**

ACOE *Consultant* Information Update Form

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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The Role of the *Liaison* Associated with Review of Programs

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**POLICY**

For each residency *evaluation visit* where a member of the Council is not on the team, a member of the Council is designated as a "*liaison*" to the team.

A *liaison* may be assigned in the case of an *evaluation visit* to an optometric technician program in cases where the ACOE member is unable to participate.

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**SCOPE**

- Professional Optometric Degree Programs  
 Optometric Residency Programs  
 Optometric Technician Programs

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**GUIDELINES**

The *liaison* Council member serves as an advisor to the team chair and communicates the team's findings and presents the team's evaluation report to the Council.

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**PROCEDURE**

Prior to the *evaluation visit*, the *liaison* Council member

- reads the self-study and associated attachments and consults with the team chair;
- responds to questions/emails from team, with support from the ACOE staff, as needed; and
- provides contact information for the team to ensure team access the day before and during the *evaluation visit*.

During the *evaluation visit*, the *liaison* Council member

- remains accessible to the team to address any concerns or questions.

Following the *evaluation visit*, the *liaison* Council member

- serves as the initial reviewer of the team's draft report; this includes additional review of the self-study, team report, and all pertinent correspondence;
- ensures the team sufficiently addresses all *Standards*;
- strives to ensure consistency in treatment across programs;
- following receipt of the response to factual accuracy from the program, consults with the team chair to make the appropriate changes to the report after discussing the suggested edits with ACOE staff; and
- presents the team's report to the Council.

#### **FORMS/ATTACHMENTS**

None

#### **DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

### Professional Optometric Degree Programs Seeking Accreditation

#### **POLICY**

The ACOE provides a pathway for developing programs to achieve accreditation.

The pathway requires developing programs to meet specified requirements to achieve each of four main milestones, culminating in an *accreditation status*.

- Stage One designation
- Stage Two designation
- *Preliminary Approval* (a formal *preaccreditation status*)
- Designation of an *accreditation status*

Council evaluation and approval is required for each program to be granted each of the designations on the pathway to accreditation.

Neither Stage One nor Stage Two designation provides any rights or privileges of accreditation, and neither is a formal *preaccreditation status*. The purpose of evaluating programs via the Stage One and Stage Two designations is to ensure only programs with a high likelihood of successfully attaining accreditation are granted *preaccreditation status* and allowed to enroll students. This process ensures developing programs assess the feasibility and potential viability of a new program, it enables developing programs to receive feedback and information from the Council regarding requirements for compliance with *Standards*, and it ensures programs fully understand the ACOE *Standards* and are prepared to take steps necessary to comply.

In the event a program's application for either Stage One or Stage Two designation is not granted by the Council, any subsequent application for either Stage One or Stage Two designation will not be considered by the Council until at least six (6) months have elapsed following the meeting at which the prior application was considered.

A program that does not achieve Stage One designation within two (2) years of submission of its application/feasibility study will have its application status rescinded. Programs may remain in Stage One designation for up to (3) three years while working on the requirements for Stage Two designation. Programs may remain in Stage Two designation for up to (2) two years. Programs may voluntarily withdraw from Stage One or Stage Two designation at any time. If the program withdraws or if its status expires, it may not reapply for Stage One designation for at least (2) two years from the date of the withdrawal or expiration.

Prior to being granted a *preaccreditation status*, programs *must* demonstrate a sufficiently robust *teach-out plan* is drafted which includes a list of academic programs offered by the institution and the names of other institutions that offer similar programs and that could potentially enter into a *teach-out agreement* with the institution on behalf of the program.

Programs *must* not recruit or enroll students until the *preaccreditation status* of *Preliminary Approval* has been awarded. If a program recruits students prior to achievement of *preaccreditation status*, application status may be rescinded. If a program enrolls students before being granted *Preliminary Approval* status, the Council will not accept the program's application for accreditation until after the first enrolled class is graduated, and the program will be evaluated using the ACOE's *Standards* for professional optometric degree programs.

The ACOE re-evaluates programs in *Preliminary Approval* status annually during the first three academic years of the program.

Programs may remain in *Preliminary Approval* status for no more than five (5) years before a final accrediting action is made.

When the ACOE denies accreditation to a program it has preaccredited or when it withdraws a program's *preaccreditation status* of *Preliminary Approval*, it may maintain the program's *preaccreditation status* for currently enrolled students until the program has had a reasonable time to complete the activities in its *teach-out plan* to assist students in transferring or completing their programs, but for no more than 120 days unless approved by the ACOE for good cause (refer to ACOE Policy and Procedure "*Teach-out Process*").

#### SCOPE

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

#### GUIDELINES

Inquiries about the potential accreditation of a proposed professional optometric degree program should be directed to the ACOE staff at [accredit@aoa.org](mailto:accredit@aoa.org).

In response to an inquiry, the ACOE Policies and Procedures Manual and applicable accreditation *Standards* will be provided to the inquiring institution. In addition, the ACOE staff is available to interested programs to advise on basic information regarding procedures and *Standards*.

Programs which have not yet earned the *preaccreditation status of Preliminary Approval* must avoid making any statements implying achievement of *preaccreditation status*.

Programs on the pathway to accreditation *must* avoid making any statements implying earning an *accreditation or preaccreditation status* is a certainty.

## PROCEDURE

### Process to Achieve Stage One Designation

The process to achieve Stage One designation is the first step toward potential accreditation. This initial phase is designed to provide programs with input from the ACOE as the program works toward the development of a new professional optometric degree program.

For a potential professional optometric degree program to be considered for Stage One designation, the sponsoring institution *must*:

1. Submit a formal letter of intent from the chief executive officer of the sponsoring institution and demonstrate that the institution that would be sponsoring the program is devoted primarily to education.
2. Complete and submit a feasibility study of the proposed professional optometric degree program in terms of:
  - a. Needs Assessment  
Documentation of the rationale for starting a new program and the public need for a new school or college of optometry;
  - b. Students  
Documentation of class size and total enrollment projections based upon resources available to the educational program, which takes into account information collected during the needs assessment;
  - c. Resources  
Evidence supporting the existence of an appropriate patient base, financial resources, available faculty, technological resources, and physical facilities; and
  - d. Career opportunities for graduates.
3. Submit the initial application fee, which is non-refundable. The current application fees are listed on the ACOE website or may be obtained by contacting the ACOE Director.

At its next duly scheduled meeting that occurs at least 60 days following receipt of the above submissions, the ACOE will review the program's application for Stage One designation.

If the feasibility study is determined to be complete and adequate, then the program will be granted Stage One designation.

If the feasibility study is incomplete or inadequate, then the ACOE may return it to the program for additional development.

### Process to Achieve Stage Two Designation

Following the granting of Stage One designation, the program develops a self-study and other documentation. To be considered for Stage Two designation, the program *must*:

1. Demonstrate that it is part of an institution that possesses or is actively seeking *regional institutional accreditation*;

2. Have employed a chief executive officer and chief academic officer of the program at least six months prior to submitting the self-study;
3. Provide evidence that it is authorized by applicable law to confer the doctor of optometry degree upon its graduates in recognition of their successful completion of a four academic year or equivalent professional program of study in optometry; and
4. Have completed and submitted a self-study report according to the requirements outlined in ACOE's "Self-Study" Policy and Procedure and the ACOE *Standards* for Initial Preaccreditation of a New Professional Optometric Degree Programs, published on the ACOE's website ([www.theACOE.org](http://www.theACOE.org))

The program *must* submit the above documentation, which will be reviewed by the ACOE at its next duly scheduled meeting that occurs at least 60 days following receipt of the program's information to determine whether basic planning and development have progressed to a degree that would warrant an on-site *evaluation visit* as required prior to the consideration of a *preaccreditation status*.

If the program's planning and development is determined to be complete and adequate, then the program will be granted Stage Two designation.

If the ACOE in its review of the self-study report discerns deficiencies or weaknesses in the program that make it clearly out of compliance with the *Standards* for new professional optometric degree programs, then the Council may postpone an on-site *evaluation visitation* until the self-study has been further developed, and the deficiencies have been corrected.

#### Process to Achieve Preliminary Approval (Preaccreditation Status)

Following the granting of Stage Two designation, the ACOE will schedule an on-site *evaluation visit* to the program. This visit will normally take place approximately six months after Stage Two designation is granted.

At least two (2) months prior to the scheduled *evaluation visit*, the program will need to submit an updated self-study along with its *teach-out plan*.

The program's *teach-out plan* must include:

1. plans to ensure that all students enrolled at the time the decision to close is made (either by the program or the ACOE) will be afforded the opportunity to complete an ACOE-accredited doctor of optometry program;
  2. a list of other institutions that offer similar programs accredited by the ACOE that could potentially enter into a teach-out agreement with the program, should the program be unable to ensure all enrolled students can complete the course of study by the time of closure;
  3. general description of the resources (faculty, advising, physical facilities, etc.) that will be available to enrolled students during the teach-out period;
  4. whether enrolled students will incur additional charges due to the teach-out plan and if so, how students will be notified as soon as practicable of these charges;
  5. how prospective and enrolled students will be informed as soon as practicable of the program's closing and any implications (including, but not limited to, those pertaining to students' prospects for employment or eligibility to sit for exams) of the closure. The program must make reasonable best efforts to ensure its students and prospective students receive and acknowledge receipt of this information;
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6. how program stakeholders, including faculty and affiliated clinical patient care programs, will be informed as soon as practicable of the program’s closure and its implications for stakeholders; and
7. plans to ensure retention of and former student access to student records.

An *evaluation visit* team conducts a formal on-site *evaluation visit* and completes its report. Report completion typically takes approximately two (2) or more months following the on-site visit and includes the opportunity for the program to perform its factual accuracy review (see Policy and Procedure “Factual Accuracy Review”). Upon completion, the team’s evaluation report is submitted to the Council for its review at its next regularly scheduled meeting.

If the Stage Two program is found to meet the Council’s *Standards*, then the Council will grant the *preaccreditation status of Preliminary Approval*.

Process to Achieve an Accreditation Status

Once a program has been granted the *preaccreditation status of Preliminary Approval*, the program has approval to begin student recruitment, selection and admissions, and to begin offering the program.

The Council shall review the *Preliminary Approval* classification annually during each academic year of the program through written reports and/or *evaluation visits* as deemed necessary by the Council.

The Council will conduct a final on-site *evaluation visit* to the program for the consideration of an *accreditation status* during the academic year in which the first class is expected to graduate.

When the Council awards *Preliminary Approval* to a program or at any time during the Council’s monitoring of a program holding *Preliminary Approval* status, the ACOE may issue *recommendations* or specify conditions for monitoring which *must* be attained to maintain the *preaccreditation status*.

After an *evaluation visit* team conducts a formal on-site *evaluation visitation*, the team’s evaluation report is submitted to the Council for its review.

If the program is found to meet the Council’s *Standards*, then the Council will grant an appropriate *accreditation status*.

If the program is denied an *accreditation status* or if its *preaccreditation status* is withdrawn or expires, it must submit an updated *teach-out plan* (refer to ACOE Policy and Procedure “*Teach-Out Process*”).

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**FORMS/ATTACHMENTS**

ACOE *Standards* for professional optometric degree programs and professional optometric degree programs seeking *Preliminary Approval preaccreditation status* are posted on its website ([www.theACOE.org](http://www.theACOE.org))

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022

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Optometric Residency Programs Seeking Accreditation

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**POLICY**

The ACOE provides a pathway for unaccredited programs to achieve accreditation.

Council evaluation and approval is required for each program to be granted an *accreditation status*.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

Inquiries about the potential accreditation of a proposed optometric residency program should be directed to a member of the ACOE staff at [accredit@aoa.org](mailto:accredit@aoa.org).

In response to an inquiry, the ACOE's "Policies and Procedures Manual" and applicable accreditation *Standards* will be provided to the inquiring program. In addition, the ACOE staff is available to interested programs to advise on basic information regarding procedures and *Standards*.

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**PROCEDURE**

For an optometric residency program to be eligible for review for initial accreditation by the ACOE, a program *must*:

1. Be *sponsored* by or *affiliated* with an accredited school or college of optometry.
2. Have appointed a program *supervisor*;
3. Have completed and submitted a self-study report according to the requirements outlined the ACOE Policy and Procedure "Self-Studies"; and
4. Submit a formal letter of application from the chief executive officer of the *affiliated school or college of optometry*.

The program must submit the formal letter of application and pay the accreditation application fee within thirty (30) days of application submission. Applications will be considered closed when payment is not received within sixty (60) days of application submission. The current accreditation fees are listed on the ACOE website or may be obtained by contacting the ACOE Director or Manager.

The self-study report *must* be submitted two (2) months prior to the scheduled on-site *evaluation visit* and will be reviewed by the team chair, team member, ACOE *liaison* and ACOE manager.

If the self-study report is deemed unacceptable or indicates significant deficiencies or weaknesses in the program, then the Council may postpone an on-site *evaluation visit* until the problems have been corrected.

After an *evaluation visit* team conducts a formal on-site *evaluation visit*, the team's evaluation report is submitted to the Council for its review.

If the program is found to meet the Council's *Standards*, then the Council will grant an appropriate *accreditation status*.

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**FORMS/ATTACHMENTS**

ACOE *Standards* for optometric residency programs are posted on its website ( [www.theACOE.org](http://www.theACOE.org) )

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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## Optometric Technician Programs Seeking Accreditation

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**POLICY**

The ACOE provides a pathway for unaccredited programs to achieve full accreditation.

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Council evaluation and approval is required for each program to be granted an *accreditation status*.

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#### SCOPE

- Professional Optometric Degree Programs
  - Optometric Residency Programs
  - Optometric Technician Programs
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#### GUIDELINES

Inquiries about the potential accreditation of a proposed optometric technician program should be directed to the ACOE staff at [accredit@aoa.org](mailto:accredit@aoa.org).

In response to an inquiry, the ACOE's "Policies and Procedures Manual" along with applicable *Standards* will be provided to the inquiring program. In addition, the ACOE staff is available to interested programs to advise on basic information regarding procedures and *Standards*.

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#### PROCEDURE

For an optometric technician program to be eligible for accreditation by the ACOE, the program *must* be part of an institution that is:

1. accredited by a *USDE* recognized *regional* or national institutional accrediting body; and
2. *legally authorized* to confer either the associate degree or a diploma/certificate of completion in recognition of the successful completion of the optometric technician program. (The optometric technician program *must* be a minimum of one academic year or its equivalent.)

In addition, the program *must*:

1. have employed a director or other chief administrative officer;
2. have completed and submitted a self-study report according to the requirements outlined ACOE's "Self-Study" Policy and Procedure; and
3. submit a formal letter of application from the chief executive officer of the sponsoring institution.

The program *must* submit the self-study and formal letter of application with the accreditation application fee. The current accreditation fees are listed on the ACOE website or may be obtained by contacting the ACOE Director.

The self-study report will be reviewed by the Chair of the ACOE (or the Chair may delegate to one or more Council members) to determine whether basic planning and development have progressed to a degree that would warrant an on-site *evaluation visit* as required prior to the consideration of an *accreditation status*.

If the self-study report is deemed unacceptable or indicates significant deficiencies or weaknesses in the program, then the Council may postpone an on-site *evaluation visit* until the problems have been corrected.

After an *evaluation visit* team conducts a formal on-site *evaluation visitation*, the team's evaluation report is submitted to the Council for its review.

If the program is found to meet the Council's *Standards*, then the Council will grant an appropriate *accreditation status*.

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#### FORMS/ATTACHMENTS

ACOE *Standards* for optometric technician programs are posted on its website ( [www.theACOE.org](http://www.theACOE.org) )

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#### DATES OF REVISION/VALIDATION

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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### Third-Party Comments

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#### **POLICY**

The ACOE provides the opportunity for submission and consideration of third-party comments concerning a program's qualifications for accreditation or preaccreditation.

Third party comments *must* address substantive matters relating to the ACOE *Standards* and policies.

Comments *must* be received thirty (30) days prior to the program's scheduled *evaluation visit* date. In cases where the exact date is not yet determined when the listing is published, the month and year of the visit will be listed, and the comments *must* be received by not later than the first day of the month preceding the *evaluation visit*.

All third-party comments *must* be signed.

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#### **SCOPE**

- Professional Optometric Degree Programs
  - Optometric Residency Programs
  - Optometric Technician Programs
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#### **GUIDELINES**

None

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#### **PROCEDURE**

The Council *publishes* the dates of upcoming *evaluation visits* on its public website ([www.theACOE.org](http://www.theACOE.org)).

Parties interested in submitting comments should address them to the Director of the Council at ACOE, via email to [accredit@aoa.org](mailto:accredit@aoa.org) or to 243 N. Lindbergh Blvd., St. Louis, MO 63141.

Comments are forwarded to the *evaluation visit* team and to the appropriate program director for response during the *evaluation visit* process.

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#### **FORMS/ATTACHMENTS**

None

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#### **DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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### Complaints Against Programs Related to ACOE *Standards* and/or Procedures

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#### **POLICY**

The ACOE accepts and reviews in a timely, fair, and equitable manner any complaint it receives against a program holding an *accreditation status* that is related to the ACOE's *Standards* and/or procedures.

Each program holding an ACOE *accreditation status* shall inform its students or residents of the Council's email address, mailing address, and/or telephone number, the procedures for filing complaints, and that only complaints relating directly to the alleged lack of compliance with *Standards* and procedures of accreditation will be considered by the Council.

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The Council will not intervene on behalf of individuals or act as a court of appeal for individuals in any matters.

The Council will only consider concerns related to matters that are allegations of noncompliance to the *Standards* of accreditation or to the ACOE procedures as complaints where the alleged event(s) must have occurred within no more than one (1) year prior to the date of submission of the complaint. Concerns received that do not relate to ACOE's *Standards* of accreditation or procedures, do not relate to event(s) within the past one (1) year, or that do not have sufficient documentation to warrant an investigation will be disposed of in an appropriate manner at the discretion of the ACOE Executive Committee. An exception to the one (1) year limitation may be made, at the discretion of the Executive Committee. When it is determined that no investigation is warranted, the complainant shall be so informed.

The ACOE provides the program sufficient opportunity to respond to the complaint prior to making a decision regarding a complaint.

The ACOE takes follow-up action, as necessary, including enforcement action, if necessary, based on the results of its review.

Pursuant to *USDE* requirements, *evaluation visit* teams will receive records of any complaints pertaining to a program being reviewed that have been received since the program's previous *evaluation visit*.

The costs related to the complaint process will be divided equally between the Council and the program.

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#### **SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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#### **GUIDELINES**

None

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#### **PROCEDURE**

An individual or group desiring to file a complaint with the ACOE shall submit the written complaint in signed by the complainant(s) via emailed attachment to the Director or the Chair of the Council.

The complaint *must* be specific in detail and include all information the complainant wishes considered. Upon request and if possible, the Council may withhold or protect the identity of the complainant(s).

The ACOE Executive Committee convenes to evaluate the submitted complaint and determines whether it is relevant to the ACOE *Standards* and/or procedures, in alignment with this Policy.

Upon receipt of a relevant complaint, the Council will forward within twenty (20) business-days a copy to the chief executive officer of the program for response. When the name of the complainant is being withheld/protected, the Director shall summarize the complaint or redact identifying information prior to forwarding to the program.

The program will have twenty (20) business-days to respond to the complaint and to provide all information it would like considered. The Chair of the Council may grant an extension of time to

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respond to the complaint if warranted. A request for delay *must* be submitted in writing within the twenty (20) business-day period referenced above.

If an *evaluation visit* is scheduled to begin within ninety (90) days of the receipt of the complaint, then the Council will also refer the complaint to the chair of the *evaluation visit* team visiting the program for investigation and action during the regular course of the *evaluation visit* process.

When the complaint is not referred to the chair of the next *evaluation visit* team, the chief executive officer of the program, or other appropriate person, will be asked to provide the Council with a written summary of actions that led to the complaint and any actions taken as a result of the complaint, including appropriate documentation available to support the summary.

If the response received from the program satisfactorily demonstrates that the program is in compliance with the ACOE *Standards*, then the ACOE Executive Committee may dispose of the complaint in a manner it deems appropriate or opt to refer the matter to the Council as a whole for further consideration.

If the complaint's allegations appear to be substantial and tend to suggest lack of compliance with one or more *Standards* and requirements of accreditation, then the Chair of the Council will appoint two (2) members of the Council who have no conflicting relationship with the program in question, including one *public member*, who will investigate the complaint. The *public member* will preside and direct the investigation.

The investigation may, but need not necessarily, include a visit to the program against which the complaint was filed and may involve such hearings as deemed appropriate. This two-member investigative team shall have access to any and all information relevant to its inquiry.

Upon completion of the investigation, the chair of the team shall report to the Council at its next regularly scheduled meeting.

The Council shall take appropriate action, including but not limited to dismissing the complaint, requiring an interim visit, scheduling a full *evaluation visit*, or other appropriate corrective action to bring the program into compliance with the accreditation *Standard(s)* in question.

The complainant and the program will be informed of the results of the investigation within thirty (30) business days of a decision.

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#### **FORMS/ATTACHMENTS**

None

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#### **DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022

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#### *Site Evaluation Visit*

##### **POLICY**

The ACOE conducts at least one (1) on-site review of the program during which it obtains sufficient information to determine whether the program complies with the ACOE's *Standards*.

The *evaluation visit* team conducts its own analysis of the self-study and supporting documentation furnished by the program, and any other information substantiated by the team from other sources to determine whether the program complies with the ACOE's *Standards*. In addition to the self-study and supporting documentation, team members are provided the previous evaluation report, the

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program’s most recent annual report and the Council’s response, and a record of any complaints or third-party comments received by the ACOE (refer to ACOE Policies and Procedures “Complaints Against Programs Related to ACOE *Standards* or Procedures” and “Third-Party Comments”) since the most recent *evaluation visit*, along with the resolution of the complaint(s). Team members are expected to familiarize themselves with these materials prior to the visit, and to request any additional needed materials as soon as the need is identified.

Programs are expected to cooperate with the team before and during the *evaluation visit* by providing them with information and additional background materials when requested.

The program is required to post a notice of the team’s open meetings with faculty and students so that those who are interested may attend, if applicable.

During the course of the visit, the program will be expected to provide the team with access to all applicable facilities which may include classrooms, laboratories, clinics and record room.

The output of the *evaluation visit* is the evaluation report. The evaluation report *must* serve not only the Council as an accurate basis upon which to make accreditation decisions, but also serve officials and administrators of educational institutions as an impartial guide to the qualitative aspects of their educational programs.

The ACOE welcomes the participation in *evaluation visits of regional accrediting agency* representatives, as applicable. At the request of the program being evaluated, the Council will invite the *regional accrediting body* to appoint a representative to accompany the team during the entire course of the visit. Representatives of *regional accrediting agencies* advise and consult with the *evaluation visit* team and participate fully in all team activities.

It is also the policy of the Council to welcome interagency cooperation by conducting joint *evaluation visits* with *regional* and other specialized accrediting groups.

At the request of the program being evaluated and when it is deemed advisable by the Council, the Council is willing to conduct a joint evaluation or coordinate the date of the on-site *evaluation visit* with the visitation of the *regional accrediting agency*, or another accrediting agency.

The ACOE also welcomes the participation in *evaluation visits* to professional optometric degree programs by a representative of the applicable state board of examiners in optometry. With the concurrence of the dean or president of the professional optometric degree program being evaluated, the Council may invite one state board of optometry to appoint a representative to serve as an observer with the right to participate in team activities, except closed team sessions.

Staff representatives of the *USDE* may also attend an *evaluation visit* to observe Council *evaluation visit* teams. The *USDE* representatives are present as observers of the process.

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#### **SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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#### **GUIDELINES**

The length of an *evaluation visit* may vary depending on the complexity of the program. *Evaluation visitations* to

- professional optometric degree programs are usually scheduled for 2-1/2 to 3 days.
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- optometric residency programs are usually scheduled for 1 day.
- optometric technician programs are usually scheduled for 1-1/2 to 2 days.

Program administrators are requested to provide the Council Director with suggestions for lodging of the team as well as for necessary ground transportation.

During an on-site *evaluation visit*, the program should provide the team with a secure conference room for team meetings and individual assignments. The team should be able to lock the room since it may contain confidential materials.

The program is asked to have any additional documents referenced but not included within the self-study and/or separately requested by the team available and accessible for the team's inspection.

The primary function of an *evaluation visit* team is program analysis. Social engagements may interfere with this function. It is expected that team members are available to interact with the team to share information and observations. Programs should not schedule, and team members should not accept, social invitations from host administrators or faculty.

Team members *must* participate throughout the duration of the visit. Late arrival or early departure is a significant breach of etiquette that adversely affects the rapport and competence of the team and reduces its efficiency and effectiveness.

Team members are expected to participate actively in conference discussions during the *evaluation visit*, but they are cautioned to refrain from expressing their own personal opinions regarding teaching methodology or practice technique. Comparisons to the team member's own or other programs should be avoided.

Although team members may discuss general findings and recommendations with program administrators during the exit interview, team members should not express personal or team opinions regarding the *accreditation status* of the program under evaluation.

#### **PROCEDURE**

The chair of the *evaluation visit* team and/or a member of the ACOE staff consults with the program to develop the visitation schedule. Although there is no rigid schedule which the Council requires to be followed during an *evaluation visitation*, the Council considers each of the following elements to be important and will expect all of them to be included at some point in the visitation.

- An *evaluation visit* team meeting to be held prior to the initiation of the visit. Items addressed in this session generally include:
  - Review of the agenda;
  - Review of protocols for *evaluation visit* team members;
  - Identification of areas needing clarification with the program; and
  - Discussion of the materials provided as they relate to the *Standards* of the ACOE.
- An entrance interview with the program leadership and university representatives (as applicable) and others who may be designated by the program:
- A tour of the physical plant which may include:
  - For professional optometric degree programs, extramural teaching facilities and external clinical sites, when feasible;
  - For optometric residency programs, clinical sites, offices, library, and external clinical sites when feasible; and
  - For optometric technician programs, extramural teaching facilities and external clinical sites, when feasible.

- Conferences with the following individuals:
  - For professional optometric degree programs, the president and/or the dean, chief academic officer (if other than the president or dean), admissions officer, student affairs officer, financial officer, department chairs, director of residencies, students, student representatives, faculty, alumni, librarian, selected standing committees, the chief administrative officer of the parent institution or appointed representative;
  - For optometric residency programs, the residency *supervisor* and *residency director* from the *affiliated school or college*, resident(s), program faculty, and additional program administrators or other individuals associated with the program per request of the team; and
  - For optometric technician programs, the president and/or the dean of the institution sponsoring the program, the program director, admissions and student affairs officer, department chairs, students, faculty, librarian, and selected standing committees.
- An open meeting with students/resident(s) (no faculty or administrators present)
  - to provide the team with input on student/resident perceptions regarding the effectiveness of the program.
- An open meeting with faculty (no administrators present)
  - to allow the faculty to participate in discussions with the *evaluation visit* team.
- An *evaluation visit* team meeting held near the end of the visit:
  - to allow the team to formulate its impressions and prepare a presentation of its findings for the exit briefing.
- At the discretion of the chair, meetings with individual faculty, students, residents, and administrators may be conducted.
- An exit interview will be held as the final session of the *evaluation visitation* which provides:
  - leaders of the program and others he or she may designate with insight into the findings of the team and
  - an opportunity for the program to respond or comment.

A primary purpose of the *evaluation visit* is to validate the material contained in the self-study. A valuable approach to obtain this validation is conducting interviews and open meetings with administrators, faculty, staff, and students.

In addition, *evaluation visit* team members review materials including handbooks, websites, brochures, and other publicly available resources to validate the material contained in the self-study and to discern any inconsistencies.

Following the *evaluation visit*, each *evaluation visit* team member prepares a report on the area(s) assigned.

- When possible, it is highly recommended for the team member to submit at least a preliminary draft report to the team chair prior to the conclusion of the *evaluation visit*.
- When there is insufficient time for drafting the report during the visit, the individual team members should prepare their sections of the report and submit no later than two (2) weeks following the visit to the *evaluation visit* team chair for use in preparing the evaluation report.

The *evaluation visit* team chair ensures all sections of the report are assembled and edits the document to support consistency. ACOE staff assists the *evaluation visit* team chair in preparing the report and recommendations and in distributing it to the team members for comment. Prompt response by team members to the draft of the evaluation report is essential to the timely preparation of the final report for the Council.

Although there is no rigid format for the development of an evaluation report, comments on each of the *Standards* should be included. The comments should address areas of strength, areas of weakness or concern, and findings believed to be noncompliant with the *Standards*.

Based on input from the team, the team chair prepares a summary which highlights the strengths and weaknesses of the program and proposes *suggestions* for program enhancement and *recommendations*.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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**Factual Accuracy Review**

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**POLICY**

The ACOE relies upon the factual accuracy review to support a reasonable basis for determining whether the information the ACOE relies upon for making accrediting decisions is accurate.

The factual accuracy review allows the program the opportunity to respond in writing to the report of the *evaluation visit* review.

The draft report reflects conditions at the time of the *evaluation visit*. Consequently, when the program has made changes since that time, these changes should be reported to the Council in the program's next annual report or in a petition for reconsideration of accreditation (reference ACOE Policy and Procedure "Reconsiderations").

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

The ACOE staff coordinates with the *evaluation visit* team chair and the *liaison* Council member, as applicable, to prepare the draft report for factual accuracy review.

The ACOE staff, on behalf of the *evaluation visit* team chair, transmits the draft report to the program for review of the report for factual accuracy. The draft report submitted to the program does not include the team's proposed *recommendations*, *suggestions*, or statements regarding *accreditation status*.

In reviewing the draft report, the program is directed to concentrate on issues of fact.

The program may challenge the factual accuracy of any aspect of the evaluation report by submitting additional written information and/or proposing mark-ups to the evaluation report to the *evaluation visit* team chair through the Director of the ACOE.

The *evaluation visit* team chair, in concert with the *liaison* Council member, if applicable, may modify the draft based on information or comments submitted by the program and/or sponsoring institution.

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**FORMS/ATTACHMENTS**None

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**DATES OF REVISION/VALIDATION**See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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**Council Review of Evaluation Reports and Subsequent Decisions**

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**POLICY**

The Council conducts its own analysis of the report of the on-site evaluation review, the program's response to the report, and any other information available to the Council from other sources to determine whether the program complies with the Council's *Standards*.

The Council evaluates whether the program:

- Maintains clearly specified educational *objectives* that are consistent with its *mission* and appropriate in light of the degrees or certificates awarded;
- Is successful in achieving its stated *objectives*; and
- Maintains requirements that at least conform to commonly accepted academic *standards*, or the equivalent.

The ACOE may decide to grant one of the following *accreditation or preaccreditation statuses* to a program following adoption of the *evaluation visit* team report and *recommendations*. A description of these statuses is posted on ACOE's public website ([www.theACOE.org](http://www.theACOE.org)).

- *Accredited*;
- *Accredited with Conditions*; and
- *Preliminary Approval*

*Accreditation status* may also be lowered or revoked when the Council determines that the program is not making sufficient progress on *recommendations* from the Council.

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**SCOPE** *Preaccreditation status* is only applicable to Professional Optometric Degree Programs.

- Professional Optometric Degree Programs
  - Optometric Residency Programs
  - Optometric Technician Programs
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**GUIDELINES**None

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**PROCEDURE**

Following receipt of the response to factual accuracy from the program, the evaluation report with draft *recommendations* and *suggestions* is submitted to the Council for consideration at its next regularly scheduled meeting.

The evaluation report is reviewed by all ACOE members prior to the Council's consideration of the report.

If there are any unresolved conflicts with the program on factual accuracy or for other stated reason, then the Council may defer action on the report.

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All evaluation reports are reviewed by the Council in sessions restricted to Council members, staff, and *consultants* who may be invited by the Council Chair. *Consultants* are not expected to attend Council meetings unless they are specifically invited by the Chair.

At the Council meeting, the *evaluation visit* team chair or *liaison* Council member presents the report to the Council for its action. The Council ensures the report includes commentary regarding the program's compliance with each of the *Standards* as well as discussion of the program's strengths and weaknesses. The Council further assures the evaluation reports address the program's performance with respect to student achievement.

The Council considers the report of the team and takes action on the acceptance of the body of the report, on adoption of *recommendations* that relate to the *Standards*, and on adoption of *suggestions* for program enhancement.

Following adoption of the *recommendations* and *suggestions*, the Council determines the level of compliance to each of the *Standards*—met, met in part, or not met.

For *Standards*, which are not met or met in part, the Council specifies the reason(s) the *Standard* is not considered fully met.

For all areas where a *Standard* is not fully met, a corresponding *recommendation* is provided that *must* be met by the program to address the concern and to come into compliance with the *Standard*.

The Council then takes action on granting, continuing, modifying, or revoking *preaccreditation* or *accreditation status*.

Following action on accreditation, the report is forwarded to the sponsoring institution with a notification letter detailing the Council's actions. (Refer to ACOE Policy and Procedure "Required Notifications and Timing.")

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#### **FORMS/ATTACHMENTS**

None

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#### **DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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### [Length of Accreditation/Preaccreditation](#)

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#### **POLICY**

The Council generally accredits programs for periods of time no longer than eight (8) years. The Council may deviate from the eight (8) year accreditation cycle under select circumstances (i.e., a residency program does not have an enrolled resident, a program has submitted notification of its withdrawal from accreditation, or availability of Council members to serve as *evaluation visit* team members prohibits timely reaccreditation). The Council strives to minimize these deviations.

The Council will not grant *preaccreditation status* to a program for longer than five (5) years.

ACOE *accreditation status* is subject to continual review. Depending on the *outcomes* of annual reports, progress reports, interim *evaluation visits*, *substantive changes*, and other significant events affecting a program, the Council may decide to schedule a full on-site *evaluation visit* before the original eight (8) year accreditation period is complete.

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The effective date of *accreditation* or *preaccreditation status* is measured from the date of the most recent on-site *evaluation visit*. When establishing the effective date of accreditation, the date will never precede:

- An earlier denial by the ACOE of *accreditation* or *preaccreditation status* to the program; or
- Any formal approval by the ACOE of the program for consideration in the ACOE's accreditation or preaccreditation process.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

Note – *Preaccreditation status* applies only to professional optometric degree programs

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**GUIDELINES**

The following guidelines are provided to aid in ensuring programs appropriately represent their *accreditation/preaccreditation status* publicly.

1. Phrases such as "accreditation has been continued for an eight-year period" are not appropriate.

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**PROCEDURE**

None

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022

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## Renewal of Accreditation and Reevaluation of Preaccreditation

**POLICY**

Programs which hold an *accreditation* or *preaccreditation status* will be reevaluated on regularly established intervals. Normally, the month and year of the next on-site *evaluation visit* is scheduled by the Council at the time it grants an *accreditation* or *preaccreditation status*.

In extenuating circumstances and upon request, the ACOE will consider granting a delay to the program in the submission of its self-study and/or in its regularly scheduled on-site *evaluation visit*.

Programs are responsible to continuously maintain and improve the components of their program, especially those that have been identified by the Council as areas of concern.

The ACOE may elect to request a new self-study and re-evaluate a program at any time with due notice to assess the effects of *substantive changes* in the program or to monitor developing situations.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

On-site *evaluation visits* will not be conducted during vacations and breaks since student and faculty input are valuable components of the accreditation process.

Programs should provide ACOE staff with a calendar for the academic year in which visits are scheduled.

If the program wishes the Council to conduct evaluation of more than one program during the same time frame, then the program should plan on having the later-scheduled program evaluation conducted on an accelerated basis rather than delaying the earlier-scheduled on-site *evaluation visit*.

#### **PROCEDURE**

##### Scheduling renewal of accreditation

The Council communicates the date (month-year) of the program's next scheduled on-site *evaluation visit* in its Accreditation Notification Letter.

##### Program-requested delays

The program *must* submit a written request in a reasonable amount of time prior to the scheduled visit. This request *must* include documentation of the following:

1. The reason for the requested delay;
2. A report of the program's progress to date on the *recommendations* of the last *evaluation visit* report of the Council; and
3. Other supporting documentation.

The Council Chair will consider program requests and may consult with the Director and Council Vice Chair when determining whether the requested extension will be granted.

#### **FORMS/ATTACHMENTS**

ACOE *Standards* for professional optometric degree programs, professional optometric degree programs seeking *Preliminary Approval preaccreditation status*, optometric residency programs, and optometric technician programs are posted on its website ([www.theACOE.org](http://www.theACOE.org)).

#### **DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

### Reinstatement of Accreditation

#### **POLICY**

A program which has voluntarily withdrawn from *accreditation status*, or which has had its *accreditation status* revoked by the ACOE, may reapply for accreditation.

The ACOE will not move a program from an *accreditation status* to a *preaccreditation status* following the loss of *accreditation status*; the program must apply for initial accreditation and if applicable, may be awarded *preaccreditation status* under the new application.

#### **SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

#### **GUIDELINES**

None

**PROCEDURE**

Reference ACOE Policies and Procedures “Professional Optometric Degree Program Seeking Accreditation”, “Optometric Residency Program Seeking Accreditation”, and “Optometric Technician Program Seeking Accreditation.”

**FORMS/ATTACHMENTS**

None

**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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### Revision of Accreditation and Preaccreditation *Standards*

**POLICY**

The ACOE maintains a comprehensive systematic program of review that involves all relevant constituencies and that demonstrates that its *Standards* are adequate to evaluate the quality of the education or training provided by the programs it accredits and relevant to the educational or training needs of students.

The formal comprehensive *Standards* review process is initiated no less frequently than five (5) years since the most recent effective date of the *Standards*.

The Council may review, revise, delete, or add individual *Standards* at any time it deems appropriate. If, through its system of review, the Council determines that it needs to change one or more individual *Standards*, or the *Standards* as a whole, then the ACOE shall initiate the revision process within twelve (12) months of determining that a change is necessary and complete that revision process in a reasonable period of time.

**SCOPE**

- Professional Optometric Degree Programs (including those seeking *preaccreditation status*)
- Optometric Residency Programs
- Optometric Technician Programs

**GUIDELINES**

None

**PROCEDURE**Formal comprehensive review process

Upon initiation of the formal comprehensive review process, programs or individuals who wish to suggest changes to any of the *Standards*, or the *Standards* as a whole, are invited to submit their suggestions in writing.

The Council considers comments and documents the contemplated changes to the *Standards*, ensuring continued compliance with ACOE Policy and Procedure “Accreditation and Preaccreditation *Standards*.”

The Council circulates the contemplated changes to programs holding an *accreditation* or *preaccreditation status*, state boards of optometry, the *USDE*, and other interested parties inviting

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comments from the relevant constituencies. The public is also invited to comment via posting on the ACOE’s public website. The comment period is a minimum of thirty (30) days.

Following review of comments on *Standards*, the Council may elect to recirculate a revised draft for additional comments.

When the comment solicitation and review process is complete, the Council takes action to adopt the *Standards* and establish the effective date.

The ACOE will publish the revised *Standards* in a timeframe that reasonably allows programs to come into compliance by the effective date.

Revision of *Standards* outside formal review process

The Council may receive a request or may become aware via other means of the need to change one or more *Standards*.

The Council may engage one or more of the ACOE Committees to evaluate and develop recommendation(s) to the Council related to the potential change(s).

The Council reviews the recommendations and develops proposed changes, ensuring continued compliance with ACOE Policy and Procedure “Accreditation and Preaccreditation *Standards*.”

The Council circulates the contemplated changes to programs holding an *accreditation or preaccreditation status*, state boards of optometry, the *USDE*, and other interested parties inviting comments from the relevant constituencies. The comment period is a minimum of thirty (30) days.

Following review of comments on *Standards*, the Council may elect to recirculate a revised draft for additional comments.

When the comment solicitation and review process is complete, the Council takes action to adopt the *Standards* and establish the effective date.

The ACOE will publish the revised *Standards* in a timeframe that reasonably allows programs to come into compliance by the effective date.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022

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## Ongoing Monitoring

### The Annual Report

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#### **POLICY**

The ACOE utilizes its annual report process as a mechanism to effectively monitor and evaluate each program's continued compliance with ACOE *Standards* and to identify problems that take into account the program's strengths and stability.

As part of the annual report, programs submit catalogs or bulletins (or include a Web link to on-line catalogs). The ACOE reviews these publications. If the program elects to publicly disclose its ACOE *accreditation or preaccreditation status* and that status is stated incorrectly and/or omits the name of the ACOE and its contact information, then the Council immediately contacts the program to request correction and will take appropriate action when a correction is not forthcoming.

The annual report provides the Council with the following information:

- Progress on efforts to address unmet *recommendations* (if any) to bring the program into compliance with ACOE *Standards*;
  - Major changes that have occurred over the previous year and notification of the nature and extent of *substantive changes* being considered;
  - Information regarding the program's continuing compliance with the ACOE *Standards* including the following:
    - Professional Optometric Degree Programs are required to report:
      - Changes in the program's *mission, goals* and *objectives*;
      - A summary of outcome assessments made during the previous year and National Board of Examiners in Optometry (NBEO) results including the ultimate passage rate by the time of graduation;
      - Report of significant financial challenges, and the program's plans to address the challenges;
      - Changes relating to facilities, equipment, and resources, including computer and technology infrastructure;
      - Faculty additions, separations, and openings;
      - Student matriculation, enrollment, and attrition data;
      - Steps taken to assess student achievement of *outcomes* of the *curriculum* including the clinical component;
      - Changes or challenges as to the quality, quantity, and variety of experiences in the supervised care of patients to develop clinical competency for *the* independent practice of contemporary optometry;
      - Description of *distance education* activities that the program is providing or planning;
      - Changes in the program's patient care delivery program;
      - Steps taken to implement the clinic's quality assessment and improvement program;
      - Changes in the program's support, encouragement, and maintenance of research activity in vision and related science; and
      - Description of the most significant problems and concerns currently facing the program and strategies planned to overcome the obstacles.
    - Optometric Residency Programs are required to report:
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- Significant developments at the program;
- An overview of the state of affairs at the program;
- The program’s annual review of its attainment of program *mission, goals, and objectives*;
- Plans for the coming year;
- A summary of *outcome* assessments made during the previous year;
- Number of residents for the present year and projections for resident positions for the future year;
- Number of applicants for present year;
- *Outcomes* data;
- Optometric Technician Programs are required to report:
  - Notification of significant developments at the program including change in the program director and/or key faculty;
  - An overview of the state of affairs at the program;
  - Plans for the coming year;
  - A summary of *outcome* assessments made during the previous year;
  - Enrollment figures for the present year and projections for enrollment for the future year;
  - Job placement information from most recent graduating classes; and
  - *Outcomes* data including student results on national certification examinations.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

Each program submits its annual report to the Council by its due date:

- by May 1 of each year for professional optometric degree programs
- by September 1 of each year for optometric residency programs
- by September 30 of each year for optometric technician programs

The Council reviews reports at its next scheduled meeting, and representatives of the program may request or may be requested to meet with the Council at its meeting to explain or elaborate on their report.

Each program is notified following the Council meeting whether its report is accepted, whether it satisfied a *recommendation* of the evaluation report (if applicable), and/ or whether additional/other action is required.

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**FORMS/ATTACHMENTS**

- Professional Optometric Degree Program Annual Report Template
- Optometric Residency Program Annual Report Template
- Optometric Technician Program Annual Report Template

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 06/18/2022

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## The Progress Report

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**POLICY**

The ACOE utilizes its progress report as a mechanism to effectively monitor and evaluate each program's continued compliance with ACOE *Standards* and to identify problems that take into account the program's strengths and stability.

The progress report is a mechanism which requires the designated program representative (chief executive of a professional optometric degree program or optometric technician program, *director of residencies* and program supervisor of an optometric residency program) to submit a document indicating the degree to which *recommendations* contained in the most recent formal Council evaluation report or other identified concerns have been addressed.

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**SCOPE**

- Professional Optometric Degree Programs
  - Optometric Residency Programs
  - Optometric Technician Programs
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**GUIDELINES**

In preparing the progress report, the program should focus on the specific area(s) requested by the Council and should also report on progress made on each *recommendation* of the most recent evaluation report. The program should describe in detail its accomplishments toward implementing the specific *recommendation* or addressing the area of concern. Other areas identified by the program may also be included in the report.

As applicable, the Council expects that progress reports will include the observations of department chairs and program directors who are directly responsible for the areas covered by the particular *recommendation(s)*.

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**PROCEDURE**

The Council may require a progress report from any program with an *accreditation* or *preaccreditation status*.

Determination of need for the progress report will be made by the Council when it reviews the program's evaluation report, annual report, or progress report.

The Council will specify a due date when the progress report is required.

Following receipt of the report from the program, the Council will review it at its next regularly scheduled meeting.

When the progress reported is satisfactory, a program with the status of *Accredited with Conditions* may be raised to a status of *Accredited*. On the other hand, when the progress reported is unsatisfactory or the report is not received by the due date, the Council may either require a representative of the program to appear before it to explain the lack of progress or schedule a special re-evaluation to determine the basis for the lack of progress.

When a program submits a progress report to detail action taken to address *recommendations* and to demonstrate compliance with the Council *Standards*, and the Council finds upon review of the

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progress report that the program has not come into compliance with the *Standards* by the deadline for compliance, the Council will take action in accordance with ACOE Policy and Procedure “Timeframe for Compliance with *Standards*.”

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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*The Annual Survey*
**POLICY**

The annual survey is a questionnaire conducted by the ASCO that is distributed to each optometric educational program at the beginning of each academic year. The survey requires programs to submit detailed information on enrollment, admissions, curriculum, faculty, library, and finances.

The ACOE monitors the results of the ASCO survey as part of its annual review of programs. When a school or college of optometry does not participate in the ASCO survey, it is required to submit information consistent with the ASCO questionnaire form to the Council.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

None

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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*Substantive Changes*
**POLICY**

Any program with an *accreditation* or *preaccreditation status* which contemplates a *substantive change* should receive concurrence from the ACOE prior to formal adoption of the change.

*Substantive changes* must be submitted to the Council in writing for its assessment and approval prior to implementation. When a *substantive change* that was not contemplated occurs, the program *must* report to the Council in writing within thirty (30) days.

Failure to comply with this policy may result in the scheduling of an interim *evaluation visit*, or in extreme cases, the lowering or withdrawal of the program's *accreditation* or *preaccreditation status* after due notice and an opportunity for a hearing.

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**SCOPE**

- Professional Optometric Degree Programs
  - Optometric Residency Programs
  - Optometric Technician Programs
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**GUIDELINES**

By "*substantive change*," the ACOE means new policies, practices, or programs that affect:

- The Program's *mission, goals, and objectives*;
- The organizational relationship of the program, school, or college with the parent institution;
- The scope, length, and/or content of the program; and/or
- Resources.

The following are examples of changes that the Council considers *substantive changes*. These lists are not all inclusive, and the Council reserves the right to exercise its judgment to determine whether a change is substantive.

- Examples associated with a professional optometric degree program
    - The establishment of a branch campus;
    - The institution of educational policies which allow for awarding transfer credit to significant numbers of students in the program for the purpose of providing them with advanced standing;
    - New affiliations or mergers with other institutions;
    - International professional optometric degree programs sponsored by accredited institutions;
    - Substantial increases or decreases in enrollment;
    - Substantial increases or decreases in faculty;
    - Substantial change in financial resources;
    - Substantial change in mission of the program; and
    - Use of *distance education* that represents a substantial portion of the curriculum (operationally defined as 25% or more of the credit hours of the accredited curriculum). When 50% or more of a course is delivered by *distance education*, credit hours associated with that course are considered to be *distance education*.
  - Examples associated with an optometric residency program
    - Changes in *mission*;
    - Organizational relationship within the *sponsor* or educational *affiliation* that affects the residency program;
    - Increase in number of residents;
    - Significant reduction or loss in program funding;
    - Changes in program *supervisor/coordinator*;
    - Reduction in the number of key residency faculty, other than *supervisor/coordinator*; and
    - Development of a new external rotation.
  - Examples associated with an optometric technician program
    - The institution of educational policies which allow for awarding transfer credit to significant numbers of students in the program for the purpose of providing them with advanced standing;
    - New affiliations or mergers with other institutions;
    - Substantial increases or decreases in enrollment;
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- Substantial increases or decreases in faculty;
- Substantial change in financial resources; and

Substantial change in *mission* of the program.

#### **PROCEDURE**

##### Contemplated *substantive changes*

Prior to implementation of a contemplated *substantive change*, the program *must* complete any necessary due diligence associated with potential regulatory or institutional accreditation implications and take necessary action, as appropriate.

Upon completion of any necessary actions resulting from the due diligence, the program submits the contemplated *substantive change* in writing to the ACOE. Documentation should include the rationale for the change along with an assessment against each applicable ACOE *Standard* evaluating impact and providing an explanation as to how the program will ensure it remains in compliance with each. If the *substantive change* request relates to *distance education* the program *must* provide to Council evidence of authorization from its *regional accreditor*.

Upon receipt of the contemplated *substantive change*, the ACOE staff informs the program of the date range of the ACOE meeting during which the contemplated *substantive change* will be reviewed.

The ACOE considers the change and provides notification to the program of the results of its assessment, including whether any follow-up steps are required.

##### *Substantive changes that were not contemplated*

When a change occurs, and the program is not certain whether the change is major or minor, the staff of the Council should be consulted immediately.

The *substantive change* is reported to the ACOE in writing. This report *must* document how the program will continue to meet the accreditation *Standards*. Simultaneous with notification to the ACOE, the program *must* perform due diligence associated with potential regulatory or institutional accreditation implications and take necessary action, as appropriate.

A member of the ACOE staff acknowledges receipt of the *substantive change* and informs the program of the date range of the ACOE meeting the *substantive change* will be reviewed.

The ACOE considers the change and provides notification to the program of the results of its assessment, including whether any follow-up steps are required.

#### **FORMS/ATTACHMENTS**

None

#### **DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021

### *Interim Evaluation Visits*

#### **POLICY**

The ACOE utilizes interim *evaluation visits* as a mechanism to effectively monitor and evaluate each program's continued compliance with ACOE *Standards* and to identify problems that take into account the program's strengths and stability.

The ACOE may elect to conduct an interim *evaluation visit* to a program between full on-site *evaluation visits*.

Interim *evaluation visits* typically address a specific and pre-defined area(s) of concern. However, an interim *evaluation visit* for the purpose of addressing issues broader in scope may be considered at the discretion of the Council.

The program *must* submit a self-study report on the area(s) being evaluated during the *evaluation visit*, at least one (1) month prior to the *evaluation visit*.

#### SCOPE

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

#### GUIDELINES

Interim *evaluation visits* are initiated by the Council or at the request of the program for several reasons:

1. as the result of concerns identified in an evaluation report or interim *evaluation visit* report;
2. lack of progress on concerns identified in an on-site *evaluation visit*, interim *evaluation visit* or progress report, or during the annual report review;
3. as the result of a *substantive change*;
4. change in leadership of the program; or
5. other concerns which come to the attention of the Council.

#### PROCEDURE

Interim *evaluation visit* teams are generally composed of two (2) to three (3) evaluators. For professional optometric degree and optometric technician programs, at least one (1) of the evaluators is a member of the ACOE.

The length of the interim *evaluation visit* varies depending on the scope of the visit. The ACOE Chair, interim *evaluation visit* chair, or the Council staff will consult with the program director to establish the length and agenda for the visit.

The *evaluation team* is directed to limit the focus of its review to the *Standards* defined in the scope of the visit. However, the team may forward proposed *recommendations* and/or associated with *Standards* that are not in the scope of the visit should they arise.

Following the interim *evaluation visit*, the team will prepare a report which will be sent to the program for review of factual accuracy (reference ACOE Policy and Procedure “Factual Accuracy Review”). It will then be submitted to the Council for consideration.

The following are examples of *outcomes* that might result from an interim *evaluation visit*:

- Acceptance of the report by the Council with a full on-site *evaluation visit* scheduled at the previously determined time;
- Additions and/or deletions to the current list of *recommendations* may be made;
- Acceptance of the report by the Council with a request by the Council for a full on-site *evaluation visit* to occur on an accelerated schedule based on continuing concerns resulting from the interim visit;
- A lowered *accreditation status*; and/or

- Loss of *accreditation status*.

If a negative decision results from an interim *evaluation visit*, the program will have the opportunity to petition for reconsideration or file an appeal (reference ACOE Policies and Procedures “Reconsiderations” and “Appeals.”).

#### FORMS/ATTACHMENTS

None

#### DATES OF REVISION/VALIDATION

See Historical Revision History; 06/26/2021; 06/18/2022

### Consideration of Actions of States and Other Accrediting Groups

#### POLICY

Programs that currently hold an *accreditation* or *preaccreditation status* by the ACOE as well as those seeking an *accreditation* or *preaccreditation status* are required to notify the ACOE, and the ACOE will not grant initial or renewed *accreditation* or *preaccreditation status* if its parent institution is the subject of—

1. a pending or final action brought by a State agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the State;
2. a decision by a *recognized agency* to deny accreditation or preaccreditation;
3. a pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation or preaccreditation; and/or
4. probation or an equivalent status imposed by a *recognized agency*.

If the ACOE learns that a program to which it has granted an *accreditation* or *preaccreditation status* is the subject of an *adverse action* by another *recognized accrediting agency*, has been placed on probation or an equivalent status by another *recognized accrediting agency*, or is the subject of pending or final action brought by a State agency regarding its legal authority, the ACOE will promptly review the program to determine whether it should also take *adverse action* or lower its *accreditation status* to *Accredited with Conditions*. The Council will provide the program with due notice of its intended review.

If the ACOE grants an *accreditation* or *preaccreditation status* to a program notwithstanding the actions described in this policy, the Council shall provide to the Secretary of the USDE within thirty (30) days of ACOE action, a thorough explanation, consistent with the ACOE's *Standards*, why the previous action by a *recognized accrediting agency* or the State does not preclude ACOE's grant of *accreditation* or *preaccreditation status*.

#### SCOPE

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

#### GUIDELINES

None

#### PROCEDURE

During accreditation and preaccreditation reviews, as applicable, of professional optometric degree and optometric technician programs, the ACOE will ensure the program's *institutional accreditation* status is verified via primary source verification and the status from the primary source aligns with that reported by the program.

ACOE staff routinely review the notifications of actions received from the *regional* and other accreditors to determine if any of the of the actions described in this Policy have been taken associated with programs holding an *accreditation* or *preaccreditation status* from the ACOE.

Upon becoming aware of an action taken in scope of this Policy, the ACOE Director convenes a meeting of the ACOE Executive Committee.

The ACOE Executive Committee assesses the nature and gravity of the action taken and determines how the Council will proceed with its review of the impacted program, which may include an interim *evaluation visit* or monitoring reports. The ACOE Executive Committee may convene the full Council if it deems the situation warrants.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022

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## Other Policies Related to Accreditation

### Timeframe for Compliance with *Standards*

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#### **POLICY**

In the event the Council determines that a program is not in compliance with any of the Council's *Standards*, the Council shall provide a written notice to the program requiring that such program take prompt action within a timeline measured from the date of the Council's decision that is reasonable based on the nature of the finding and the stated *mission, goals, and objectives* of the program. The timeline may include intermediate checkpoints and *must* not exceed the lesser of four (4) years or 150% of the length of the program.

The Council will evaluate and approve or disapprove monitoring or compliance reports it requires, provide ongoing monitoring, if warranted, and evaluate a program's progress in resolving the finding of noncompliance.

The Council may grant good cause extensions in cases it deems this action to be warranted. These are granted only in situations where the program has made substantial, but not complete, progress toward compliance with ACOE *Standard(s)*, where a limited amount of time is needed to reach full compliance, and where all reasonable alternatives for achieving compliance within an appropriate timeframe have been exhausted.

The ACOE may grant no more than one (1) extension to the deadline for compliance. Typically, the deadline for compliance will be extended for no more than six (6) months.

In cases where the *Standard* with which the program is out of compliance relates to *outcomes* of the program, the deadline for compliance may be extended to the end of the current program year to allow the program to complete documentation of *outcomes* (such as completion rate and Board scores).

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#### **SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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#### **GUIDELINES**

None

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#### **PROCEDURE**

When the Council deems a program to be non-compliant with one or more ACOE *Standards*, the Council prepares and distributes a written notification to the program apprising it of its finding(s). The written report includes:

- the *Standard(s)* to which noncompliance was deemed;
- the timeframe for remediation;
- the mechanism for reporting remediation to the Council; and
- the due date for submission.

Typical mechanisms for reporting include progress reports, updates as part of a program's annual report, and/or an evaluation report associated with an interim *evaluation visit*.

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Upon review of the program's actions to remediate the noncompliant *Standard(s)*, the Council determines whether the response is acceptable and develops and distributes a written notification to the program apprising it of the Council's determination. The written notification may include:

- a determination of compliance;
- a determination of continued noncompliance and consequences, which may include prompt *adverse action*;
- determination of need for continued ongoing monitoring; and/or
- a grant of a good cause extension.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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*Adverse Actions and Program-Initiated Withdrawals*

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**POLICY**

*Accreditation/Preaccreditation status* will be withheld from programs which the Council judges to be substantially not in compliance with the *Standards* of the ACOE.

In the event a program holding an *accreditation* or *preaccreditation status* does not bring itself into compliance with the applicable ACOE *Standard(s)* in alignment with the "Timeframe for Compliance with *Standards*" Policy and Procedure, the Council shall take *adverse action* against the program.

The Council reserves the right to take immediate *adverse action* against a program when the ACOE determines such action is necessary, pursuant to *USDE 602.20(b)*. The Council may maintain the program's *accreditation* or *preaccreditation status* until the program has had reasonable time to complete the activities in its *teach-out plan* or to fulfill the obligations of any *teach-out agreement* to assist students in transferring or completing their programs (refer to ACOE Policy and Procedure "Teach-out Process").

When the Council signifies its desire to visit and evaluate a program holding an *accreditation* or *preaccreditation status*, a failure by that program to extend an invitation for an *evaluation visit* may be interpreted as a lack of interest in continued *accreditation* or *preaccreditation status* by the Council and may result in the Council taking *adverse action* against the program.

Programs which are denied *accreditation* or *preaccreditation status* may request reconsideration and/or appeal the decision as outlined in ACOE's "Reconsiderations" and "Appeals of Accreditation Decisions" Policies and Procedures.

A program may withdraw from any status of accreditation or preaccreditation at any time prior to a decision by Council to take *adverse action* or to lower its accreditation status to *Accredited with Conditions* (refer to ACOE Policy and Procedure "Teach-out Process").

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE****ACOE-initiated *adverse actions***

Upon initiating an *adverse action*, the ACOE will provide notice to the program and other applicable constituencies in alignment with ACOE Policy and Procedure “Required Notifications and Timing.”

Upon an initiated *adverse action* becoming a *final adverse action*, the ACOE will provide notice to the program and other applicable constituencies in alignment with ACOE Policy and Procedure “Required Notifications and Timing.”

The program that no longer holds an *accreditation* or *preaccreditation status* will be removed from the listing upon the Council’s next update to its *directory of accredited programs*.

**Program-initiated withdrawals**

A program wishing to withdraw from *accreditation* or *preaccreditation status* must submit its intention to withdraw including the effective date of the withdrawal in writing to the Director of the ACOE via email ([accredit@aoa.org](mailto:accredit@aoa.org)).

Documentation submitted *must* include the program’s *teach-out plan*, if applicable (refer to ACOE Policy and Procedure “*Teach-out Process*”). Optometric residency programs that request voluntary withdrawal from *accreditation status* *must* confirm that no residents will be enrolled as of the effective date of the withdrawal; if this cannot be confirmed, programs *must* submit documentation addressing plans that assure no resident harm will result from the program withdrawal.

Any program that previously held an *accreditation* or *preaccreditation status* wishing to have its name removed from the Council’s *directory of accredited programs* should have the chief executive officer of the sponsoring institution notify the Director of the ACOE in writing.

The ACOE will provide notice to applicable constituencies in alignment with ACOE Policy and Procedure “Required Notifications and Timing.”

The program that has voluntarily withdrawn from the accreditation or preaccreditation process will be removed from the listing upon its next update to its *directory of accredited programs*.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**See Historical Revision History; 06/26/2021; 06/18/2022

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*Teach-Out Process***POLICY**

When a program voluntarily withdraws from or loses its *accreditation* or *preaccreditation status*, it either *must* remain open until all enrolled students have completed the program or it *must* reach agreement with another ACOE-accredited program to *teach-out* the remainder of the program.

The ACOE *must* approve the program’s *teach-out plan* and any associated *teach-out agreements*.

Programs under a *teach-out plan* must continue to comply with ACOE Standards, policies, and processes for the duration of the *teach-out* period unless afforded situation-specific exceptions.

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A program sponsored by a *regionally accredited* institution *must* meet the requirements for *teach-out agreements* in effect for the sponsoring institution.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

The program must make provisions to assure that all currently enrolled students are provided all the instruction promised by the program and submit this plan to the ACOE for approval. The *teach-out plan* must include the following:

1. date the program will close;
2. information on why the program is closing, as applicable;
3. general description of the resources (faculty, advising, physical facilities, etc.) that will be available to enrolled students during the teach-out period;
4. list of students currently enrolled in the program;
5. list of curricular requirements that each enrolled student must complete for graduation/program completion and date of expected completion;
6. whether enrolled students will incur additional charges due to the *teach-out plan* and if so, how students will be notified as soon as practicable of these charges;
7. plans to ensure that all students enrolled at the time the decision to close is made (either by the program or the ACOE) will be afforded the opportunity to complete an ACOE-accredited program;
8. how prospective and enrolled students will be informed as soon as practicable of the program's closing and any implications (including, but not limited to, those pertaining to students' prospects for employment or eligibility to sit for exams) of the closure. The program must make reasonable best efforts to ensure its students and prospective students receive and acknowledge receipt of this information;
9. how program stakeholders, including faculty and affiliated clinical patient care programs, will be informed as soon as practicable of the program's closure and its implications for stakeholders;
10. plans to ensure retention of and former student access to student records; and
11. a list of other institutions that offer similar programs accredited by the ACOE that could potentially enter into a teach-out agreement with the program, should the program be unable to ensure all enrolled students can complete the course of study by the time of closure.

The ACOE will evaluate the *teach-out plan* to ensure that it provides for the equitable treatment of students under the ACOE's criteria, specifies additional charges, if any, and provides for notification to the students/residents of any additional charges.

As soon as is reasonably practical, most likely at the Council's next regular meeting, the Council will review the program's *teach-out plan*. Representative(s) of the program may be requested to attend the meeting to address questions the Council may have.

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Following the Council's meeting, the program will be notified of the Council's assessment of the *teach-out plan* along with any additional requirements the Council may impose on the program during the *teach-out* period.

The ACOE may require the program to enter into one or more *teach-out agreements* as part of its plan.

The *teach-out agreement(s)* and copies of all notifications from the program to students related to the program's closure and the students' ability to complete their course of study *must* be submitted to the ACOE for review and approval.

As soon as is reasonably practical, most likely at the Council's next regular meeting, the Council will review the program's *teach-out agreement(s)*. Representative(s) of the program may be requested to attend the meeting to address questions the Council may have.

The program is required to maintain its regular review cycle during the *teach out* period. When a program's self-study for reaccreditation is due prior to the program's voluntary closing, the program may submit a Progress or Closure Report in lieu of a self-study report and site visit provided that the program closes within four (4) years of notifying the ACOE.

After the program submits its plan for closure, it must comply with requirements for maintaining accreditation/preaccreditation, i.e., payment of fees and submission of annual reports, until such time as it closes.

A program operating under a closure plan must provide an update at least annually, or more frequently at the discretion of the ACOE, regarding the status of the program's closure, including description of adequacy of resources and update on remaining students' progression through the program.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

06/18/2022 (initial version)

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[Required Notifications and Timing](#)

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**POLICY**

Accreditation and Preaccreditation-Related Decisions

Within thirty (30) days of the Council meeting at which the accreditation or preaccreditation decision was made, the ACOE will send a notification letter to the highest-ranking officer of the sponsoring institution regarding the program's *accreditation or preaccreditation status*.

The letter will include the classification of the program's *accreditation or preaccreditation status* that has been determined, the length of time until the next scheduled *evaluation visit*, a copy of the evaluation report that was the basis for the Council's decision, and *recommendations and suggestions* for program enhancement.

The notification letter will include a statement regarding the program's compliance with the *Standards*, including any findings of noncompliance, and the program's expected time frame for coming into compliance with any unmet *Standards*.

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If applicable, the letter will also contain a statement regarding procedures for requesting reconsideration and/or appeal of the Council's accreditation decision (Refer to the ACOE's Policies and Procedures "Reconsiderations" and "Appeals of Accreditation Decisions"). The letter specifies that any action subject to reconsideration and/or appeal rights will become final upon exhaustion or expiration of reconsideration and/or appeal rights. All *final adverse actions* taken are subject to the arbitration requirements in 20 U.S.C. 1099b(e).

The notification letter will delineate any change in and the reasons for the change in *accreditation or preaccreditation status* and, as applicable, the letter will specify the timelines for interim *evaluation visits* and/or progress reports (refer to ACOE Policies and Procedures "Interim Evaluation Visits" and "Progress Reports").

- (1) In the case the program is notified of the ACOE's decision to grant or continue the *accreditation or preaccreditation status* of a program, no later than thirty (30) days after it makes the decision, the ACOE notifies:
  - the Secretary of the *USDE*;
  - the appropriate State optometry licensing agency(ies), as applicable;
  - the appropriate accrediting agency(ies); and
  - the public.
- (2) In the case the program is notified of the ACOE's final decision of a probation or equivalent status or of an initiated *adverse action*, the program is required to disclose such an action within seven (7) business days of receipt to all current and prospective students and/or residents.

At the same time the program is notified of the ACOE's final decision of a probation or equivalent status or of an initiated *adverse action*, the ACOE provides notification of its decision to:

- the Secretary of the *USDE*;
- the appropriate State optometry licensing agency(ies), as applicable; and
- the appropriate accrediting agency(ies).

The *ACOE* provides written notice to the public of such decisions within one (1) business day of its notice to the program.

- (3) In the case the program is notified of the ACOE's final decision to deny, withdraw, suspend, revoke, or terminate the *accreditation or preaccreditation status* of a program, the program is required to disclose such an action within seven (7) business days of receipt to all current and prospective students and/or residents. The notice shall provide the program the option to submit any brief comments that would be made available to the public not later than a specified date that is within fifty (50) days after such final decision is made. The Council reserves the right to ensure that such comments are accurate and not defamatory.

At the same time the program is notified, but not later than thirty (30) days after the Council decision to deny, withdraw, suspend, revoke, or terminate the *accreditation or preaccreditation status* of a program becomes final, the ACOE provides notification of its decision to:

- the Secretary of the *USDE*;
- the appropriate State optometry licensing agency(ies); and

- the appropriate accrediting agency(ies).

The ACOE provides written notice to the public of such decisions within one (1) business day of its notice to the program.

No later than sixty (60) days after the date the decision to deny, withdraw, suspend, revoke, or terminate the *accreditation or preaccreditation status* of a program becomes final, a brief statement summarizing the reasons for the ACOE's decision and the official comments that the affected program may wish to make with regard to that decision, or evidence that the affected program has been offered the opportunity to provide official comment is made available to:

- the Secretary of the *USDE*;
- the appropriate State optometry licensing agency(ies), as applicable; and
- the public.

The ACOE, upon request, shares with other appropriate recognized accrediting agencies and recognized State approval agencies information about the *accreditation or preaccreditation status* of a program and any *adverse actions* it has taken against the program.

#### Accreditation and Preaccreditation-Related Actions Associated with Withdrawals and Expirations

In the case a program decides to withdraw voluntarily from *accreditation or preaccreditation status*, or lets its *accreditation or preaccreditation status* lapse, with no program-requested extension submitted and granted by the ACOE, within ten (10) business days of receipt of notification or the date *accreditation or preaccreditation status* lapses, the ACOE notifies:

- the Secretary of the *USDE*,
- the appropriate State optometry licensing agency(ies), as applicable,
- the appropriate accrediting agencies, and,
- the public (upon request).

#### Other Required Notifications to the *USDE*

The ACOE will submit the following information to the Secretary of the U.S. Department of Education, either as a matter of course or upon request:

1. A copy of the ACOE annual report;
2. A copy, updated at least annually, of each *directory of accredited programs*;
3. A summary of the ACOE's major accrediting activities during the previous year (an annual data summary), if requested by the Secretary to carry out the Secretary's responsibilities in specific federal legislation and regulation;
4. Any proposed change in the ACOE's policies, procedures, or accreditation or preaccreditation *Standards* that might alter the ACOE's scope of recognition by the Secretary of Education or compliance with the criteria for recognition;
5. Any change to the ACOE's geographic area of accrediting activities, along with public notification on the ACOE's website; and
6. While the ACOE is not responsible for enforcing *USDE* regulations relating to federal student financial aid programs, it will notify the Department if it identifies any instances of noncompliance with relevant requirements.

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#### **SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs

Optometric Technician Programs

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**GUIDELINES**

When a professional optometric degree program is part of a university system, the notification letter and accompanying documents will be addressed to the chancellor, provost, or the local campus president as appropriate. Concurrently, a copy of the notification letter and accompanying documents will be sent to the school's or college's dean or president.

For optometric residency programs, a copy of the notification letter and accompanying documents will be sent to the program *supervisor* and *director of residencies* at the *affiliated school or college*.

When an optometric technician program is part of a university or community college, the notification letter and accompanying documents will be addressed to the chancellor, provost, or the local campus president as appropriate. Concurrently, a copy of the notification letter and accompanying documents will be sent to the program director and the dean of the school or college where the program resides.

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**PROCEDURE**

Notifications and accompanying documents are sent to associated programs via email and/or U.S. Postal Service.

Notifications to the *USDE*, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies are sent via email.

Notifications to the public are made via the ACOE's public website ([www.theACOE.org](http://www.theACOE.org)). The website posting includes the date the notification is posted.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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Program Interruption

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**POLICY**

The ACOE acknowledges that interruption of an educational program with an *accreditation* or *preaccreditation status* due to unforeseen circumstances is a potentially serious problem. An interruption could be any natural or manmade incident beyond the program's control that impacts the program's ability to operate as planned or remain in compliance with the ACOE *Standards* and may compromise the quality and effectiveness of education. The Council *must* be notified in writing of any such disruption.

The ACOE may permit the program to be out of compliance for a period of time to be determined by the Council, not to exceed three (3) years, unless the Council determines there is good cause to extend the period of time.

The written notification of the disruption must demonstrate that the period of noncompliance will not:

- Contribute to the cost of the program to the student without the students' consent;
  - Create any unreasonable hardships on, or harm to, students/residents; or
  - Compromise the program's academic quality.
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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

The program identifies an interruption that may compromise the quality and effectiveness of education.

The program submits, in writing, a description of the nature of the disruption and anticipated duration. The notification *must* also include the program's comprehensive plan for how the loss of its clinical and *didactic* components will be addressed along with its affirmation the disruption meets the requirements specified in this Policy.

Programs accepting educational responsibility for displaced students and/or residents *must* submit their plans to deal with any *substantive change*.

The Council will evaluate the program's interruption notification and assess whether the plan put forth will reasonably enable the program to achieve compliance with the *Standard(s)*, policy(ies), and/or procedure(s) within the time allotted. Based on this assessment, the Council may grant a period of noncompliance.

The program will be notified within thirty (30) days of the Council's decision whether and for how long a period of noncompliance has been granted. The program will also be notified of the Council's requirements related to ongoing monitoring of the disruption and actions needed to demonstrate that the disruption has not:

- Contributed to the cost of the program to the student without the students' consent;
- Created any unreasonable hardships on, or harm to, students/residents; or
- Compromised the program's academic quality.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

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**Residency Program Inactivity or Deficiency****POLICY**

In the course of reviewing an optometric residency program, the ACOE may withdraw its accreditation, regardless of its current *accreditation status*, under the following circumstances:

- 1) The program has been without at least one resident for two or more consecutive years.
- 2) The program has incurred a major loss of resources, e.g., faculty, facilities or funding, without reasonable expectation of rapid replacement.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

**GUIDELINES**

None

**PROCEDURE**

Typically initiated *adverse actions* associated with the policy are the result of recommendations of the Optometric Residency Committee.

In the Council's next regular meeting, the Council makes its determination as to whether to formally approve an initiated *adverse action*.

The ACOE will provide notice to the program and other applicable constituencies in alignment with ACOE Policy and Procedure "Required Notifications and Timing."

Upon an initiated *adverse action* becoming a *final adverse action*, the ACOE will provide notice to the program and other applicable constituencies in alignment with ACOE Policy and Procedure "Required Notifications and Timing."

The program that no longer holds an *accreditation* or *preaccreditation status* will be removed from the listing upon the Council's next update to its *directory of accredited programs*.

**FORMS/ATTACHMENTS**

None

**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022

## Evaluation of "On the Campus" Residencies

**POLICY**

When more than one residency is on-site at a school or college of optometry, the school or college can structure the residencies as individual programs, or where appropriate, under an "umbrella" arrangement.

An "umbrella" residency is an entity which the school or college identifies as a single residency program, with more than one area of emphasis. Each of these emphasis areas must provide for at least one residency position. An umbrella residency program must meet all of the following conditions:

- a) education and training for all residents must occur on the school's or college's campus a majority of the time;
- b) the program will include a core didactic and clinical curriculum common to all emphasis areas;
- c) an identifiable portion of the didactic and clinical curriculum will be tailored to each area of emphasis;
- d) a resident's curriculum will have no more than two emphasis areas; and
- e) the self-study will have individualized sections as appropriate for each emphasis area.

The terms of accreditation of an umbrella residency will be determined by the least favorable status of any of its areas of emphasis/components, as determined by the ACOE. All the ACOE's policies and procedures relating to non-umbrella programs will apply to umbrella programs.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

In the umbrella program's annual report, the program should provide information on which of the emphasis areas are filled and which are unfilled.

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**PROCEDURE**

If a school or college desires to alter the composition of existing areas of emphasis or plans to add one or more areas of emphasis, a letter addressing the proposed change or addition must be submitted to the ACOE for its consideration.

The dean or president may request that the individual programs be visited as a group, with some economy of effort resulting from providing one set of materials that applies to all programs.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/18/2022

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## Financing the Accreditation Process

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**POLICY**

The ACOE maintains adequate administrative staff and financial resources to carry out its accrediting responsibilities.

Sources of funds are as follows:

- The ACOE is predominantly funded through application fees, annual accreditation fees, and annual administrative fees.
  - Application fees are charged to programs initiating the pathway to accreditation.
  - Accreditation fees are charged annually to programs in an *accreditation status*.
  - Administrative fees are charged annually to professional optometric degree programs in Stage One designation, Stage Two designation, or a *preaccreditation status*.
- Costs associated with *evaluation visits* are the responsibility of the program. Following the *evaluation visit*, programs are billed for the expenses of evaluators, *consultants*, and Council staff.
- The AOA provides access to financial support to the ACOE up to a pre-defined threshold in reserve funding.
- The ACOE may also receive financial support from the ARBO, if available.

Current fees are posted on the ACOE website.

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Periodically the Planning Committee assesses funding to assure the ongoing viability and effectiveness of the Council.

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**SCOPE**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

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**GUIDELINES**

None

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**PROCEDURE**

Invoices are sent in October, and payment is due to the ACOE by January 1 of each year associated with annual fees.

Programs will be invoiced following *evaluation visits*; programs are expected to pay *evaluation visit* fees for which they are billed within ninety (90) days of receiving an invoice.

Programs which do not pay their annual fees by February 15 or *evaluation visit* fees within ninety (90) days of receiving the invoice will be placed on *Administrative Probation* by the ACOE Director, in consultation with the ACOE Chair. The chief executive officer of the institution sponsoring the program and the program director will be notified of this status and informed that the ACOE intends to withdraw the Stage One or Stage Two designation or the *accreditation* or *preaccreditation status* of the program(s) at its next scheduled meeting if payment is not received.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022

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## Reconsiderations

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**POLICY**

A program desiring the Council to reconsider an *adverse action* or determination of the status of *Accredited with Conditions* must submit to the Council, in writing, a petition for reconsideration in compliance with this Policy within thirty (30) days following the program's receipt of notification of the *adverse action* or determination of *Accredited with Conditions*. If the written petition is not received within thirty (30) days, the *adverse action* or determination of *Accredited with Conditions* becomes final.

A petition for reconsideration *must* allege one or more of the following and be accompanied by documentation providing evidence in support of the program's allegation(s):

- the facts upon which the Council decision was based no longer exist or have changed significantly;
  - the Council's ruling is clearly erroneous based on its construction of the facts;
  - the Council's ruling is clearly erroneous based on its interpretation or application of the ACOE's "Policy and Procedure Manual" and/or accreditation *Standards*;
  - any combination of the above.
-

A program may seek in a petition for reconsideration a review of new financial information provided that:

- the financial information was unavailable to the sponsoring institution or program until after the adverse accreditation decision was made;
- the financial information is significant and bears materially on any financial deficiencies identified by the Council; and
- the only remaining deficiency cited by the Council in support of a final adverse accreditation decision is the sponsoring institution's or program's failure to meet Council *Standard(s)* pertaining to finances.

A program may seek the review of new financial information described above only once and any determination by the ACOE made with respect to that review does not provide a basis for an appeal.

The ACOE will not change the program's *accreditation or preaccreditation status* pending disposition of a petition for reconsideration.

#### SCOPE

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

#### GUIDELINES

None

#### PROCEDURE

The petition for reconsideration along with all supporting documentation is made available to Council members for review. The Council may request the program provide an oral presentation in support of its petition. If the program wishes to provide an oral presentation in support of its petition for reconsideration, it *must* request to do so prior to Council consideration of its petition.

At its next regularly scheduled meeting, generally not less sixty (60) days from receipt of the petition, the Council considers the program's petition and any oral presentation which the program may make.

If the problems or deficiencies that precipitated the *adverse action* or determination of *Accredited with Conditions* have been corrected, or if upon further consideration and evaluation the Council agrees that some error of construction, interpretation, or application has occurred, the Council will take appropriate action.

The ACOE notifies the program in writing the result of its consideration of the program's petition for reconsideration. The notification includes the program's right of appeal along with the procedures associated with requesting an appeal.

#### FORMS/ATTACHMENTS

None

#### DATES OF REVISION/VALIDATION

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

## Appeals of Accreditation Decisions

### POLICY

The program may elect to appeal an accreditation decision made by the Council to an ad hoc Appeals Panel in either of the two scenarios:

- if, following reconsideration, the Council affirms its prior *adverse action* or determination of *Accredited with Conditions*; or
- if, following an initiated *adverse action* or determination of *Accredited with Conditions*, the program may bypass submission of a petition for reconsideration and directly file an appeal if the program has evidence to assert one or more of the following:
  - the Council’s decision-making was arbitrary, capricious, or not supported by evidence provided in the record, and/or
  - the procedures used by the ACOE were contrary to the ACOE’s *Standards*, policies, and/or procedures, and that procedural error prejudiced ACOE’s consideration.

The appeal *must* be in writing and filed with the Secretary-Treasurer of the AOA within thirty (30) days of receipt of notice of the Council’s action upon reconsideration or the program’s receipt of notification of the *adverse action* or determination of *Accredited with Conditions*. If the written appeal is not received within thirty (30) days, the initiated *adverse action* or determination of *Accredited with Conditions* becomes final.

A request for appeal alleges one or more of the following and is accompanied by documentation providing evidence in support of the program’s allegation(s):

- the Council’s ruling is clearly erroneous based on its construction of the facts;
- the Council’s ruling is clearly erroneous based on its interpretation or application of the ACOE’s “Policy and Procedure Manual” and/or accreditation *Standards*;
- the Council’s decision was arbitrary, capricious, or not supported by substantial evidence in the record on which it took action;
- the procedures used by ACOE to reach its decision were contrary to ACOE’s *Standards* or other established policies and practices, and that procedural error prejudiced ACOE’s consideration; and/or
- More than one of the above occurred.

The Appeals Panel

- Does not include current members of the ACOE;
- Is subject to ACOE’s Policy and Procedure “Conflicts of Interest;” and
- Does not serve solely in an advisory or procedural role but has and uses its authority to sustain, modify, or reverse the decision of the Council or to remand the matter to the Council for further consideration.

The ACOE will not change the program’s *accreditation* or *preaccreditation status* pending disposition of an appeal.

The cost related to appeal procedures shall be underwritten by the program and the Council on a shared basis.

#### SCOPE

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs

#### GUIDELINES

None

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**PROCEDURE**

Within thirty (30) days of receipt of the appeal, the president of the AOA shall name three (3) persons to an ad hoc Appeals Panel, and three (3) alternates, not one of whom shall be a member of the ACOE or a member of the Board of Trustees of the AOA or have an affiliation with the program filing the appeal or with the accreditation process relating to that program.

The Appeals Panel will be composed of an *educator, practitioner*, and a non-optometric *public member*. Each member of an Appeals Panel shall comply with the ACOE Policy on Conflicts of Interest and shall have appropriate training on the ACOE *Standards*, policies, and procedures.

The Director of the ACOE will determine the willingness to serve of the designated principals and alternates and notify the program of the names of the three principals. If the program shows good cause why a named principal is unacceptable, an alternate will be selected who is acceptable to both parties.

The Appeals Panel shall meet within ninety (90) days of the date on which the program received the notification leading to its request for appeal, or on a date which is mutually acceptable to the program, the Appeals Panel, and the Council.

The program may have one (1) representative appear before the Panel to make oral and/or written presentation(s) and to respond to questions from the Panel. The ACOE recognizes the right of the program to employ counsel to represent the program during its appeal, including to make any presentation that the ACOE permits the program to make on its own during the appeal.

The Chair of the ACOE shall designate a representative to appear before the Appeals Panel to support the decision of the Council and to respond to questions of the Panel. The ACOE may choose to be represented by counsel during the appeal proceedings.

The purpose of the Appeals Panel is not to evaluate again the educational program; but rather, to evaluate the merit of the appeal.

The Appeals Panel shall forward its findings and conclusions to the Council for action, including to affirm or amend the Panel's decision.

In the event of a decision by the Appeals Panel to remand the *adverse action* or determination of *Accredited with Conditions* to the Council for further consideration, the Appeals Panel provides an explanation of the basis for a decision that differs from the Council's original decision.

The Council *must* act in a manner consistent with the Appeals Panel's decisions and/or instructions.

The program will receive written notification of the result of its appeal and the basis for that result.

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**FORMS/ATTACHMENTS**

None

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**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes)

## Glossary

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**accreditation status** - A program has been granted a status of either *Accredited* or *Accredited with Conditions*.

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**Accredited** -- A classification granted to an educational program indicating that the program generally meets the *Standards* for accreditation. This classification indicates that the program has no deficiencies or weaknesses that compromise the educational effectiveness of the total program. However, *recommendations* relating to marginal compliance with certain *Standards*, and *suggestions* relating to program enhancement may be included in evaluation reports.

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**Accredited with Conditions** -- A classification granted to an educational program with major deficiencies or weaknesses with reference to the *Standards* of accreditation that compromise the educational effectiveness of the program. This classification indicates that the accreditation of the program is in jeopardy. Programs with this classification will be required to submit progress reports and shall undergo a full evaluation visit within two (2) years for professional optometric degree programs, eighteen (18) months for optometric residencies, and one (1) year for optometric technician programs.

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**ACOE** -- Accreditation Council on Optometric Education.

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**Administrative Probation** – A status that may be placed on a program holding Stage One designation, Stage Two designation, *preaccreditation status*, or an *accreditation status* by the ACOE Director as a result of non-payment of fees which if unremedied may result in the program’s application status being rescinded or its *accreditation* or *preaccreditation status* being withdrawn by Council.

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**advanced competency** -- The ability to provide eye care at a level beyond that of the core competencies attained upon completion of a professional optometric degree program.

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**adverse action** -- An official Council action resulting in the denial or withdrawal of initial *accreditation status*, continuing *accreditation status*, or *preaccreditation status*.

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**affiliated school or college of optometry** -- A school or college of optometry holding an *accreditation status* from the ACOE that has educational responsibility for a residency that is *sponsored* by a non-ACOE accredited health care entity. Faculty appointment, curriculum development, and program assessment are examples of educational responsibilities of the affiliated school or college of optometry.

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**AOA** -- American Optometric Association.

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**ARBO** -- Association of Regulatory Boards of Optometry.

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**ASCO** -- The Association of Schools and Colleges of Optometry.

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**ASPA** -- Association of Specialized and Professional Accreditors.

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**BAA** -- Business Associate Agreement.

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**CHEA** -- Council for Higher Education Accreditation.

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**consultant** – A volunteer eligible to participate on an ACOE evaluation visit team.

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**curriculum** -- A structured, integrated educational plan developed to meet the *mission, goals* and *objectives* through patient care, *didactic* and *scholarly activities*.

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**didactic activity** -- The acquisition of advanced clinical knowledge, techniques or procedures via delivery methods such as lectures, journal clubs, courses or workshops.

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**director of residencies (residency director)** -- That individual at the *affiliated school or college of optometry* who is administratively responsible (regardless of title) for the overall quality of the residency program(s) of that institution.

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**directory of accredited programs** -- listing of programs that hold an *accreditation or preaccreditation status* from the ACOE.

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**distance education** -- Education that uses one or more of the technologies listed in (1) through (4) of this definition to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies may include -

- (1) The internet;
  - (2) One-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
  - (3) Audio conferencing; or
  - (4) Video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course in conjunction with any of the technologies listed in paragraphs (1) through (3) of this definition.
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**EC** -- Executive Committee.

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**educator**—For professional optometric degree programs and residencies, someone directly engaged in education at a school or college of optometry (e.g., professor, instructor, academic dean) (or who has retired within the last two (2) years from optometric education); for optometric technician education programs, someone engaged in education at an optometric technician program, or who has retired within the past two (2) years from an optometric technician program.

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**evaluation visit/visitors**-- Visit/Visitors to a program with the intent of reviewing and assessing the program's compliance to applicable ACOE *Standards*. An evaluation visit may be in-person or virtual, in compliance with *USDE* Guidelines.

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**evidence-based clinical decision making** -- The utilization of the best peer-reviewed current scientific information integrated with clinical expertise in making an individualized decision about the care of a patient.

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**examples of evidence** -- Documentation the program provides to the Council as evidence the program meets the *Standard*. The examples listed are not all inclusive, and the program may choose to use all, some, or none of the examples in its documentation. However, the Council does require the program to submit appropriate documentation as evidence of meeting the *Standard*.

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**final adverse action** -- An official Council action resulting in the denial or withdrawal of initial *accreditation status*, continuing *accreditation status*, or *preaccreditation status* after reconsideration and/or appeal rights have been exhausted or expired.

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**goal** -- Goals specify the end results necessary to achieve the mission; they should elaborate each of the major components of the mission. They provide clarification and specificity for components of the mission statement.

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**governance** – A method or system of government or management.

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**Health Care Delivery Entity** -- Any health care delivery organization or facility which provides primary, secondary or tertiary health care by appropriately licensed providers.

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**HIPAA** -- Acronym that stands for the Health Insurance Portability and Accountability Act, a US law designed to provide privacy standards to protect patients' medical records and other health information provided to health plans, doctors, hospitals and other health care providers.

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**legally authorized** -- The legal status granted to an institution through a charter, license, or other written document issued by the appropriate agency or official of the State in which the institution is physically located.

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**liaison** -- a member of the Council appointed by the Council Chair when neither the chair of the evaluation team nor *consultant* member(s) of the team are Council members. The liaison prepares as if he/she were a member of the team, serves as a resource to the team, approves reports of the team, and presents the team's findings for consideration to the Council.

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**LPD Committee** -- Leadership and Professional Development Committee.

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**mission** -- The mission statement should express the overall purposes, intent and uniqueness of the program or institution. It is a statement of the fundamental reasons for a program's existence.

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**must** -- Indicates an imperative need or a duty; an essential or indispensable item; denotes a mandatory requirement.

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**NBEO** -- National Board of Examiners in Optometry

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**objectives** -- As the goals were derived from components of the *mission*, specific objectives should flow from the *goals*. Objectives are the specifications as to how the particular goal is to be reached. They are statements which define *outcomes* attributable to the *mission* and *goals* of a program.

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**outcome** -- An assessable quantity or quality relative to the overall success of a program in the achievement of its *mission*, *goals* and *objectives*.

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**outcomes assessment** -- The process of collecting information about the attainment of a stated desired objective of an academic endeavor; analyzing that information by comparing and contrasting it with previously established statements of *mission*, *goals* and *objectives*; and using that information to validate existing effort or to make recommendations to guide improvement.

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**P&P** -- Policy and Procedure.

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**patient centered care** -- Health care that is characterized by a partnership between provider and patient (and appropriate patient's family or legally authorized caregiver), incorporating respect for patient's values and expressed needs; patient empowerment; health promotion; and coordination and integration of care.

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**patient satisfaction** -- The patient's summary of the overall satisfaction with his or her eye/vision care visit and the patient's perception of the quality of the care he or she received throughout the entire interaction with the doctor, the student clinician and the office staff.

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**POD Committee** -- Professional Optometric Degree Program Committee.

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**practitioner** -- Someone directly engaged in the practice of optometry in a setting that is primarily devoted to patient care (or who has retired within the last two (2) years from the practice of optometry).

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**preaccreditation status** -- A program has been granted a status of *Preliminary Approval*. Preaccreditation status is only granted to a professional optometric degree program.

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**Preaccredited** -- a status that a nationally recognized accrediting agency or association, recognized by the Secretary to grant that status, has accorded an unaccredited institution that is progressing toward accreditation within a reasonable period of time.

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**Preliminary Approval** -- A preaccreditation classification granted to a professional optometric degree program that has clearly demonstrated it is developing in accordance with Council *Standards*. The program has approval to begin student recruitment, selection and admissions, and to begin offering the program.

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**privileging** -- The process of granting the authority and responsibility to a practitioner based on review of credentials for making independent decisions to diagnose, initiate, alter or terminate a regimen of optometric, vision and health care.

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**Protected Health Information/PHI** -- Protected Health Information (PHI) is defined in the Standards for Privacy of Individually Identifiable Health Information issued by the U.S. Department of Health and Human Services to implement the requirement of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). PHI includes information that relates to all of the following: (1) An individual's past, present, or future physical or mental health or condition; (2) The provision of health care to an individual (3) The past, present, or future payment for the provision of health care to an individual.

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**public member** -- Members who are not educators in or members of the profession of optometry. A public member is also not: (1) An employee, member of the governing board, owner, or shareholder of, or consultant to, a program that holds either *accreditation* or *preaccreditation status* from the Council or has applied for accreditation or preaccreditation; (2) A member of any trade association or membership organization related to, affiliated with, or associated with the Council; or (3) A spouse, parent, child, or sibling of an individual identified in the prior two parts of this definition.

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**publish** -- To make available to the communities of interest (students and their families, counselors, education community, and the general public) by print or electronic means.

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**QI Committee** -- Quality Improvement Committee.

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**quality assurance** -- Planned process of evaluation and improvement of health care by a health care entity or practitioner to assure the quality of that care.

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**recognized accrediting agency** -- an accrediting agency recognized by the *USDE*.

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**recommendations** relate to areas where the program is not completely in compliance with Council accreditation *Standards*.

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**regional accreditor** (Regional Institutional Accreditor, Regional Accrediting Agency, Regional Accrediting Body) -- Institutional accreditor that is a member of the Council of Regional Accrediting Commissions.

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**religious mission** -- A published institutional mission that is approved by the governing body of an institution of postsecondary education and that includes, refers to, or is predicated upon religious tenets, beliefs, or teachings.

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**residency core competencies** -- The fundamental components common to all residency programs and expected achievements for all residents. The components result in the attainment of advanced proficiency in areas of clinical knowledge and patient care specific to the *mission* of the residency.

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**residency director (director of residencies)** -- That individual at the *affiliated school or college of optometry* who is administratively responsible (regardless of title) for the overall quality of the residency program(s) of that institution.

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**risk management** -- Clinical and administrative activities performed to identify, evaluate and reduce the risk of injury and loss to patients, personnel, visitors and the institution.

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**scholarly activity** -- The activities associated with the discovery, integration, application and teaching of advanced clinical knowledge as exemplified by conducting research, publishing, presenting posters or papers, and lecturing.

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**sponsor** -- That school or college of optometry, hospital, health center, clinic or other health care delivery entity that assumes the day-to-day responsibility for education of the resident.

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**standard** -- A measurable criterion of the quality of one or more components of a program required for a program to become and remain accredited (with or without conditions) or preaccredited (as applicable)

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**standard precautions** -- The minimum infection prevention measures that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where healthcare is delivered. These evidence-based practices are designed to both protect healthcare personnel and prevent the spread of infections among patients. Standard Precautions include: 1) hand hygiene, 2) use of personal protective equipment (e.g., gloves, gowns, facemasks), depending on the anticipated exposure, 3) respiratory hygiene and cough etiquette, 4) safe injection practices, and 5) safe handling of potentially contaminated equipment or surfaces in the patient environment.

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**student support services** -- Services provided to students that are designed to facilitate the student's matriculation and to enhance the experience on the campus, i.e., personal and academic counseling, financial aid services, information on career opportunities, housing information, etc. With the exception of academic counseling, these may be provided by either the University or the program.

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**substantive change** -- New policies, practices, or programs that affect: (1) the Program's *mission, goals, and objectives*; (2) the organizational relationship of the program, school, or college with the parent institution; (3) the scope, length, and/or content of the program; and/or (4) resources.

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**suggestions** (for program enhancement) -- represent improvements that would substantially enhance the potential for excellence.

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**supervisor/ coordinator** -- The clinician who is directly responsible for the residency program, especially the day-to-day clinical education of the resident.

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**teach-out** -- A process during which a program, institution, or institutional location that provides 100 percent of at least one program engages in an orderly closure or when, following the closure of an institution or campus, another institution provides an opportunity for the students of the closed school to complete their program, regardless of their academic progress at the time of closure.

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**teach-out agreement** -- A written agreement between institutions that provides for the equitable treatment of students and a reasonable opportunity for students to complete their program of study if an institution, or an institutional location that provides 100 percent of at least one program offered, ceases to operate or plans to cease operations before all enrolled students have completed their program of study

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**teach-out plan** -- A written plan developed by an institution that provides for the equitable treatment of students if an institution, or an institutional location that provides 100 percent of at least one program, ceases to operate or plans to cease operations before all enrolled students have completed their program of study.

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**terminal degree** -- The highest academic or professional degree in a given field of study.

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**USDE** -- United States Department of Education.

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## Historical Revision History

Accreditation Manual Revision History, prior to adoption of the consolidated ACOE Policy and Procedure Manual

### Accreditation Manual: Professional Optometric Degree Programs

Adopted October 1-3, 1993

Updated:

- October 23-25, 1998
- October 11-13, 2002
- June 20-27, 2007
- October 12-14, 2007
- October 22-24, 2010
- June 26-29, 2013
- February 7-9, 2014
- October 12-14, 2018

### Accreditation Manual: Optometric Residency Programs

Adopted April 1996

Updated:

- October 23-25, 1998
- June 27-30, 2001
- October 11-13, 2002
- February 3-5, 2006
- June 24-27, 2009
- October 22-24, 2010
- February 17-19, 2012
- June 24-26, 2015
- October 12-14, 2018

### Accreditation Manual: Optometric Technician Programs

Adopted June 1997

Updated:

- October 23-25, 1998
- June 27-30, 2001
- October 11-13, 2002
- February 3-5, 2006
- June 24-27, 2009
- October 22-24, 2010
- February 7-9, 2014
- October 12-14, 2018