Accreditation Guidelines for 1-year Ophthalmic Laboratory Technology Certificate Programs

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The Commission on Opticianry Accreditation (COA) accredits two-year opticianry degree programs and one-year ophthalmic laboratory technology certificate programs in the United States and its territories. This document applies to the 1-year laboratory certificate programs.

The foundations of accreditation for programs are based on the Essentials of an Accredited Educational Program for Ophthalmic Laboratory Technician (*Essentials*), which identifies the minimum standards, eligibility requirements, and continuing requirements used by the Commission on Opticianry Accreditation to determine and maintain accreditation status. The *Essentials* provide the framework for program self-evaluation, on-site review, and Commission decision-making, and should be consulted as the authoritative standards document throughout the accreditation process. The current document is available on the Commission on Opticianry Accreditation website at: https://coaccreditation.com/essentials-laboratory.pdf

Preface

The goal of the Commission on Opticianry Accreditation as an accrediting agency is to assist opticianry programs in producing well-trained, competent graduates to provide professional services to the public.

Accreditation should encourage programs to implement sound innovations and well-considered improvements because of the extensive self-analysis and self-evaluation, which is inherent in the accreditation process.

Our aim in this guide is to provide specific information to opticianry programs for completing the Self -Study Report and preparing for the on-site evaluation by a team selected by the Commission.

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Glossary

American Board of Opticianry (ABO): Through the Professional Examination Service for individuals who wish to establish their competency to dispense Rx eyeglasses. The ABO also administers the Master in Ophthalmic Optics Examination for more experienced dispensers.

Application for Accreditation: The application specifies factual information about the program to determine initial eligibility for accreditation. The application is to be completed and returned by the program in accordance with the instructions. The Commission reviews the application. If considered eligible, the program is invited to fulfill the next requirement in the process, the self-study report.

Checklist: The on-site team uses a checklist to evaluate the program. The checklist is based on the *Essentials*.

Compliance: To comply with the provisions of the Essentials to the greatest possible extent.

Course Description: A narrative describing course content in terms of major areas of instruction.

Course Outline: A topic outline listing the major subjects covered to show overall course content.

Curriculum: Refers to the course of studies suggested in the *Essentials* and leading to the degree or certificate.

Degree Program: A degree program culminates in a recognized degree, normally an associate degree, granted by a postsecondary educational institution which meets the eligibility requirements specified in the *Essentials*. The document conferring the degree may be a diploma, certificate, or other appropriate documentation attesting to the completion of the program.

Educational Foundation in Ophthalmic Optics: The Educational Foundation in Ophthalmic Optics (EFOO) solicits, manages, and administers donations. These are then disseminated in the form of grants or loans to opticianry organizations "seeking further the field of ophthalmic optics." A limited number of loans or grants are made to students in approved opticianry programs.

Essentials: The Essentials of an Accredited Educational Program for Ophthalmic Laboratory Technician - referred to as the *Essentials* - is published in its entirety on the COA website. The document specifies the minimum standards to be achieved by an educational program.

Guidelines: Guidelines are explanatory statements which clarify the *Essentials* and are enclosed in parentheses. Guidelines are used to give examples of how *Essentials* may be interpreted to allow for flexibility yet remain within the framework of the *Essentials*.

In the *Essentials* and Accreditation Guidelines, the following auxiliary verbs are used:

Shall — Indicates a mandatory requirement.

Must — Indicates an imperative need or indispensable requirement.

Should — Indicates an ethical obligation or recommended practice.

May — Indicates permission or the option to follow a suggested alternative.

Could — Suggests an alternative means of meeting the intended objective.

Housing Institution: The institution housing the program is the institution responsible for the effectiveness of the educational program. The institution will publish the credited courses in public documents, receive tuition for enrollment in the program, grant credit, and degrees, and in general, fulfill the responsibilities specified in the *Essentials.*

Lesson Plan: A document used by the instructor to manage instructional activity. The lesson plan contains a list of objectives and other instructions or information needed by the instructor for guiding the students in effective attainment of the lesson objectives.

Master Plan: An overall plan that outlines or specifies the objectives and into which the details of other specific plans are fitted; a plan that gives overall guidance.

Mission, Goals, and Learning Objectives: A program's mission should explain why the program exists and core purpose. Goals refer to those long-range purposes or aim which the institution or program must sustain year after year. Goals are broad statements of what the students will achieve. Goals focus on what knowledge, and skills graduates should possess. Learning Objectives refer to those short-term specific conditions to be achieved within a given period which are measurable evidence of progress toward achievement of the goals of the housing institution or program.

National Academy of Opticianry: The National Academy of Opticianry (NAO) is an independent, non-profit educational organization. Its sole objective is to improve the educational qualifications of ophthalmic professionals who serve the public, and it provides these dispensers and technicians with programs and services to meet the educational requirements needed for state licensure and/or certification by the American Board of Opticianry. NAO serves no political or commercial interests. It is an individual membership organization offering home study courses, review materials, review courses, and seminars.

National Contact Lens Examiners: The National Contact Lens Examiners (NCLE) is an independent corporation that offers a competency examination for contact lens technicians who wish to establish their credentials to serve the public. The NCLE administers the Contact Lens Registry Examination through the Professional Examination Services and is a non-member body governed by a Board of Directors.

National Federation of Opticianry Schools: The National Federation of Opticianry Schools (NFOS) represented formal opticianry education in the United States. Its goals were to upgrade the standards of opticianry education; facilitate the exchange of teaching methods; achieve uniformity of education in opticianry; and aid other national opticianry organizations in their efforts. The NFOS merged with the OAA to form the UOA in 2024.

Noncompliance: Failure to comply with the provisions of the *Essentials.*

Objective: A specification of precisely what behavior the student is to exhibit, the conditions under which the behavior will be accomplished, and the minimum standard of acceptable performance.

On-Site Evaluators: On-site evaluators are individuals appointed by the Commission to perform the on-site visit evaluation.

Opticians Association of America: The Opticians Association of America (OAA) was the national volunteer trade and political association of retail opticianry. It promoted the business interests of opticians and optical firms in the legislative and regulatory areas and fostered a better public understanding and acceptance of retail dispensing as part of the eyecare delivery system. Most state opticianry associations were affiliated with the OAA. In 2024, the NFOS and the OAA merged to form the UOA.

Opticianry: Opticianry is the professional practice of designing, fitting, and dispensing eyeglasses, contact lenses, and other vision-correcting devices based on prescriptions written by eye doctors. The term opticianry is used in the broad sense to include both ophthalmic dispensing and ophthalmic laboratory technology.

Potential Compliance: Deficiency(s) in meeting the provision(s) of the *Essentials* that the institution/program can correct within a reasonable period.

Professional Development: A process involving systematic growth in a particular field through increased knowledge, expertise, and ability. The goal of professional development is to improve proficiency through education, training, and experience. Professionalism is based on sound knowledge and requires an elevated level of training, both in the classroom and on the job. Development is the process of growth and evolution which is designed to increase a person's potential so that professionalism is achieved and improved through the vehicle of development.

Reliability: The degree of consistency and absence of error in the application of accreditation standards and procedures. In accreditation, reliability means consistency. It is the degree to which an evaluation, assessment tool, or reviewer produces stable, repeatable results under the same conditions. If different evaluators or separate reviews of the same program yield matching outcomes, the process has high reliability.

Self-Study Committee: It is expected that a program will form a self-study committee and appoint a highly qualified chairperson. The self-study committee must have representation from the administration, faculty, students, advisory committee, and other interested and affected groups.

Self-Study Report: The self-study report is prepared by a program applying for initial accreditation or for reaffirmation of accreditation. It is self-evaluation and, as a required part of the accreditation process, provides a unique opportunity for the administration, faculty, students, advisory committee, and all affected groups to work together as a cohesive group. They are expected to assess, reaffirm, and build upon existing strengths; identify and correct present weaknesses; and plan for future development. Data gathering is time-consuming but a necessary learning process in the development of a self-study. A well-organized program should have the necessary data routinely available.

Syllabus: A course control document used for course planning, organization, validation, and operation. For every block of instruction within a course, objectives, duration of instruction, support materials, and guidance factors should be listed. A syllabus is a document that outlines the topics, rules, readings, and due dates for a specific class. It acts as a contract between the teacher and the student, showing what will be taught and how grades will be decided.

United Opticians Association: In 2024, the Opticians Association of America and the National Federation of Opticianry Schools joined forces to create the United Opticians Association. Today the United Opticians Association (UOA) is the only national organization, representing 73,000 opticians and seventeen accredited college programs across the United States. Their work supports national policy efforts, expands access to accredited training, and strengthens the workforce behind quality vision care.

Validity: The degree of compliance with which inferences can be drawn about the quality of an accredited institution or program by virtue of its compliance with these standards. In accredited education, validity is the degree to which evidence and theory support the interpretation and use of student assessment scores. It means a test or evaluation accurately measures the specific knowledge, skills, or abilities it claims to measure, ensuring institutional decisions based on those results are meaningful and justified.

I. Introduction

Purpose of Accreditation

Specialized accrediting agencies, such as the Commission on Opticianry Accreditation, exist to assess and verify educational quality in various professions or occupations to ensure that individuals entering those disciplines will be qualified. The accrediting agency develops educational standards by which programs are evaluated based on the skills and knowledge necessary for that profession, conducts program evaluation, and publishes a list of accredited programs that meet the national accreditation standards.

Simply stated, accreditation is recognition by a body that a program has voluntarily undergone a comprehensive study which has demonstrated that the school has set appropriate educational objectives for students who enroll, that the school does in fact perform the functions that it claims, and that the school furnishes materials and services that enable students to meet those stated objectives.

Historically, accreditation serves to:

- Foster excellence in education is through the development of standards for assessing educational effectiveness.
- Encourage improvement through continuous evaluation and planning.
- Provide assurance to the educational community, the public, employers, and other organizations that an institution:
    - Has clearly defined and appropriate objectives and appears to be accomplishing them.
    - Maintains conditions under which achievement can be expected.
    - Offers promise that this will continue to be the case.

History

The Commission on Opticianry Accreditation (hereafter referred to as the Commission (COA) was formed in 1979 in Washington, DC, as a non-profit corporation without members. It was officially incorporated to serve as an independent agency for the sole purpose of accrediting ophthalmic dispensing and ophthalmic laboratory technician programs in the United States and its territories.

The Commission's predecessor, the National Academy of Opticianry, was recognized by the ophthalmic profession for 35 years as the accrediting agency for education programs. The National Academy of Opticianry had responsibility at that time for certifying individual opticians, as well as providing continuing education programs for practitioners.

In 1975, the Academy applied to the U.S. Office of Education for official recognition of its school accrediting function. The Office of Education recommended the formation of a separate agency whose sole purpose was accrediting ophthalmic dispensing and ophthalmic laboratory technician programs. Today's Commission was formed as an autonomous organization on this recommendation.

In 1985, the United States Department of Education (USDE) recognized the Commission as the

accrediting body for two-year ophthalmic dispensing and one-year ophthalmic laboratory technology programs. In 2006 the current recognition expired, and the USDE indicated to the Commission that it is no longer eligible for recognition because the programs are using institutional accreditation rather than programmatic accreditation for federal funding of students and programs. At its meeting on January 26, 2009, the Council for Higher Education Accreditation (CHEA) Board of Directors reviewed the recommendation of the CHEA Committee on Recognition regarding the eligibility application submitted by COA. The Board of Directors determined that the COA is considered eligible to undertake a recognition review. COA submitted a self-evaluation providing evidence that it meets the 2006 CHEA recognition standards. The CHEA Committee on Recognition reviewed the self-evaluation, the observation visit report, and oral presentation by the COA at its November 2009 meeting and made a recommendation to the CHEA Board of Directors.

On January 25, 2010, the Board of Directors of the Council for Higher Education Accreditation (CHEA) voted to recognize the Commission on Opticianry Accreditation. COA continues to develop and maintain education standards for ophthalmic education programs to ensure the flow of competent professionals into the industry.

Goals of the Commission

The Commission was established for the following purposes:

1. To accredit postsecondary educational programs in opticianry and assist educational institutions in developing programs of the highest quality.

2. To disseminate information identifying educational programs qualified to offer postsecondary education in opticianry.

3. To develop and maintain accreditation standards, including criteria and guidelines.

4. To prepare manuals and other materials required by institutions undertaking or planning opticianry educational programs.

5. To recognize changing needs within the profession and promote curriculum development that reflects advances in knowledge and practice to meet these needs.

6. To assure employers, practitioners, consumers, government agencies, and other interested parties that graduates of accredited programs have received the educational preparation necessary for competent practice.

Benefits of Accreditation

Key benefits of accreditation for opticianry programs include:

1. Recognition by counselors, employers, educators, government agencies, and professional associations as an indicator of program quality.

2. Increased confidence in the policies, procedures, and educational practices of the accredited

program.

3. Continuous program improvement through self-study and periodic external evaluation by an external agency.

4. Assurance that the program meets established standards for educational quality and effectiveness.

Commission Composition

The Commission, through its composition, has the responsibility to reflect the broad interest that exists in the profession, the business and educational communities, and the public. The Commission may consist of up to eleven (11) voting Commissioners, appointed as follows:

- **Four (4)** appointed by the **Board of Directors of the National Academy of Opticianry**. At least **one (1)** appointee must be actively serving, at the time of appointment, as a faculty member in a program accredited by the Commission on Opticianry Accreditation.
- **Four (4)** appointed by the **Board of Directors of the United Opticians Association**. At least **one (1)** appointee must be actively serving, at the time of appointment, as a faculty member in a program accredited by the Commission on Opticianry Accreditation.
- **One (1)** appointed by the **Contact Lens Society of America**.
- **At least one (1) public member**, appointed by the other members of the Commission to represent the public interest. No more than **two (2) public members** may serve at any one time.

Representation and Qualifications

The term of office for all commissioners is three years, and no longer than two terms may be served consecutively. To the extent practicable, the Commission should reflect the communities of interest served by the accreditation process, including educators, practitioners, and the public.

Voting Commissioners should, to the extent possible:
1. Demonstrate competence and knowledge relevant to the Commission's work.
2. Possess relevant experience and training related to the purposes of the organization.
3. Hold a minimum of an associate’s degree; and
4. Be selected through nondiscriminatory practices.

Public Member Requirements

Public members must not:
1. be employed by organizations accredited by the Commission.
2. have a material financial interest in organizations accredited by the Commission; or
3. serve as officers, directors, or employees of organizations that appoint Commissioners.

It is the policy of the Commission to solicit suggestions of the names of individuals who could serve constructively as public members of the Commission and who can represent adequately the general interest of the public. To ensure the public members' ability to serve in an objective and impartial manner in representing the public interest, nominees for this position may not be

educators in or members of the profession of opticianry, or in any way related to the eyecare profession. Although not a requirement, the Commission prefers to appoint public members who have an interest in consumer affairs.

Funding of the Commission

The Commission on Opticianry Accreditation is incorporated into a not-for-profit agency in the District of Columbia and is a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code. The American Board of Opticianry, United Opticians Association, National Academy of Opticianry, and Contact Lens Society of America each support the expenses of their appointees and contribute to the costs of the Commission. The annual fees paid by accredited programs also help defray the costs. The Commission on Opticianry Accreditation will not accept a donation from any source except those which can be applied impartially in furtherance of its tax-exempt objectives. It will not accept any contribution that is conditioned on uses contrary to its mission.

Consultants

An important goal of the Commission is to offer assistance and guidance to ensure quality in opticianry programs. To accomplish this goal, the Commission may form a body of consultants whose members, to avoid conflict of interest, will serve neither as on-site evaluators nor as commissioners. These consultants are selected in accordance with nondiscriminatory practices, representing the fields of ophthalmology, opticianry, optometry, and general education. They will be available upon request to consult with and advise on the programs. If a site visit is engaged in the consultation, expenses must be borne by the program requesting the visit.

Ethical Education Practices

The Commission expects opticianry programs and institutions to abide by the following ethical practices. Ethical practices are stated or implied in the *Essentials*. Institutional and program advertising and announcements must reflect accurately the opticianry program and must not misrepresent nor mislead. According to COA Policy and Procedures for public disclosure of accreditation status by program and/or institution:

> *If a program elects to make a public disclosure of its accreditation status granted by the Commission on Opticianry Accreditation, the program must disclose that status accurately and include the specific academic and/or instructional program(s) covered by that status. Additionally, the name, address, and telephone number of the commission must be accurate and included in the disclosure.*

II. Accreditation Information

Accreditation Process Steps

Programs must complete the application for accreditation to initiate the accreditation process or reaffirmation of accreditation process. The application form may be obtained on the website at coaccreditation.com or from contacting the COA office staff via email at director@coaccreditation.com. The application for accreditation must be prepared in accordance with published instructions, signed by the institution's chief executive officer and program director, and returned to the Commission. Once the application is evaluated, if the application indicates basic eligibility as defined in the *Essentials*, the program is asked to prepare a self-study report.

The sequence of key events from this point is as follows:

- Program prepares and submits the self-study report
- The self-study report is reviewed by commission representatives selected to form the on-site team.
- Dates for an on-site evaluation visit are established in conjunction with the institution, program, and Commission.
- The on-site visit is conducted.
- An evaluation report is prepared by the on-site team and sent to the institution’s chief executive officer and program director.
- The institution responds to the report and may file supplemental materials pertinent to the facts and conclusions in the report.
- The evaluation report and the response are evaluated by the Commissioners at the next scheduled board meeting.
- The Commission determines the appropriate accreditation classification and notifies the institution’s chief executive officer of the decision in writing.

Timetable

The accreditation self-study and on-site visit process should take approximately 18 months. The time taken to obtain accreditation may be longer if deadlines are not observed, or if the application or self-study report is not completed satisfactorily.

1. Application, signed by chief executive officer and program director, is returned to the Commission 6 months prior to the desired on-site visit dates.
2. Self-study report is prepared by the program and is submitted and received by the Commission a minimum of 30 days prior to on-site visit date. The application fee is also due 30 days prior to the on-site visit date.

3. The on-site evaluation visit is usually conducted within 30 days after the Commission's receipt of the self-study report submission.

4. An evaluation report describing the team's findings and recommendations is sent to the institution's chief executive officer and program director normally within 60 days of the completed on-site visit.

5. Institutions may submit a response to the report to permit correction of any factual errors and have the option of filing supplementary material pertinent to the report's facts and conclusions to the Commission within 30 days.

6. The Evaluation Report and the institution's response are reviewed by the Commission at the next spring or fall scheduled meeting, and a final decision is made concerning accreditation classification.

7. The Commission office notifies the chief executive officer of the institution and program director of the decision within 21 days of the meeting.

Re-affirmation of accreditation follows the same timetable and is repeated after an interval of no more than six years. Accredited institutions should be aware of their accreditation expiration date and plan to complete the re-affirmation process in the fall or spring term prior to the term their accreditation expires. Avoiding on-site visits in the summer is recommended as identifying on-site team evaluators and ensuring all required administrative institution personnel are in attendance may prove to be challenging. An example of the planning schedule a program should use is as follows:

> Ex: *A program accredited in March 2022 for a 6-year term will expire in March 2028. Therefore, the program should plan for the reaffirmation on-site visit to occur in the fall 2027 term and submit the application in the spring 2027 term (6 months prior).*

Fees

All fees must be paid to maintain accreditation status or to undergo evaluation. All invoices are sent to the program director unless otherwise specified. All payments are to be returned with a copy of the invoice and due as stated on invoice.

Application Fee

- Initial Accreditation: An application fee of $500 is charged, and payment must be submitted 30 days prior to the on-site visit by programs applying for initial accreditation to the Commission. This fee is applied to the first-year accreditation fee upon accreditation by the Commission.

- Reaffirmation of Accreditation: An application fee of $250 is charged, and payment must be submitted 30 days prior to the on-site visit by programs applying for reaffirmation of accreditation to the Commission.

Late Fee for Self-Study

A late fee of $500.00 is charged for self-studies that are not submitted to the COA office 30 days prior to the on-site visit. If the self-study is not received 21 days prior to the on-site visit, the on-site visit will be subject to cancelation at the college's expense. In addition, the program may be placed upon Administrative Probation.

Site Visit Expenses

Each program must reimburse the Commission for the costs of any on-site evaluation visit. An invoice for these expenses will be forwarded to the program director upon completion of the visit. The guidelines for fees, expenses, and preparation for the visit are as follows:

- Commercial travel reimbursement is limited to the mode and cost documented. Airfare is limited to round-trip coach fares. All team members are urged to take advantage of any cost-saving fares.

- Private auto travel is reimbursed in keeping with the federal government allowance published on the IRS website per mile, parking, and tolls. Total reimbursement for private auto travel will not exceed round-trip coach fares.

- Rented auto costs are to be reimbursed if:
  1. lower cost transportation is not available.
  2. two or more site members are traveling together to and/or from the site.
  3. commercial travel is not available to and from the site or such travel would result in further expenses, e.g., additional meals and lodging costs.
  4. use of the rental car in accordance with the preceding guidelines is documented in the expense voucher.

- Lodging and meal costs are to be reasonable and customary rates for locations convenient to the site being visited.

- Expenses which are not reimbursable include, but not limited to, alcoholic beverage costs and valet services (cleaning).

- Multiple programs visited on the same trip will be billed proportionately for the costs of the on-site evaluation visit according to the following guidelines:
  1. a percentage of the travel costs of the team
  2. the costs of meals and lodging associated with the day(s) on which a particular program is being visited.

Program officials are encouraged to cooperate in arranging suitable accommodation convenient to all parties concerned and at the most economical rate. The following are suggested arrangements for cost reduction:

- Accommodation at hotels or motels providing discounts to the institution. (Institutions are asked to make reservations at their choice of hotel)

- Local travel provided by the program director, i.e., travel between hotel and institution, and to and from the airport.

- On-site group luncheons as time permits.

Annual Accreditation Fee

An annual accreditation fee will be charged to each accredited program covering the academic year. This fee is published on the commission website and subject to change.

Invoices for annual accreditation fees are normally issued in May each year and are due by November 1 of that year for the following academic year (i.e., July 1 – June 30). A $500.00 late fee will be assessed for delinquent fees except in an instance of an extenuating circumstance, such as a governmental shutdown that impacts an institution's ability to process payments and is out of their control. Programs impacted by an extenuating circumstance must notify the COA office prior to the November 1st payment deadline.

Programs that have been granted initial accreditation will be billed on a prorated basis from the date of the on-site evaluation visit to the beginning of the next academic/fiscal year. The invoice for this prorated period will be issued in conjunction with the next regular billing that follows the Commission's accreditation decision on that program.

Programs completing a reaffirmation of accreditation self-study and on-site visit will be responsible for both the annual accreditation fee and any related fees associated with the reaffirmation process for that year.

If any accredited program fails to make payment within 60 days after notice that payment is due, its accreditation may be withdrawn.

Refunds

The administrative fee and annual accreditation fee are non-refundable.

Size of the Team and Visit Duration

The Commission pursues its public assurance of responsibility with primary reliance on the on-site evaluation. This visit to the site of the program must be conducted in a professional manner, including business attire. Team members' ability to evaluate and report must not be compromised by economic pressures. Thus, the number of team members, usually three, may vary depending on the size of the program and other circumstances involved.

The amount of time available for the site visit is as important as the size of the team to an effective evaluation. Thus, the length of the visit, usually 2-3 days, may vary in relation to the program involved.

Program officials are encouraged to discuss team size and visit length with the director of accreditation of the Commission during the planning of the visit. The Commission will consider suggestions made by the program officials.

The team chairperson, in conjunction with the Commission's staff and the program's officials, is responsible for the implementation of the guidelines for the efficiency of the on-site visit. Circumstances may exist or arise in programs to cause variation from the general guidelines used for planning purposes.

Team Selection, Qualifications and Responsibilities

All people who serve as on-site visit evaluators on a team are selected in accordance with nondiscriminatory practices based on relevant experience and training. In choosing a team, the Commission has a working pool of qualified ophthalmic professionals and ophthalmic general educators, and tailors the team to the needs of the program being evaluated. In addition, each team will include one evaluator who is (or has been within the last five years) full-time faculty at a COA accredited program. At least one member will be a commissioner, or a recently retired commissioner if a current commissioner is not available.

On-site visit evaluation teams will be composed of three members, including a chairperson. The list of proposed names is sent to the chief executive officer or dean and program director. Sufficient time, typically no greater than 10 business days, is allowed for review and comment on the proposed team's composition with respect to any perceived conflict of interest. If no objections are raised, the visit will proceed as scheduled.

All evaluators are responsible for studying the *Essentials* and the submitted self-study report beforehand to be prepared for the on-site visit. They are expected to conduct an impartial and objective evaluation. All information obtained while serving as an evaluator, including discussions during site visits or among the team, is considered privileged information and is regarded by the Commission as strictly confidential.

Protocol for Institutions and Program Officials

To promote open discussion, institution and program officials should not be present during conferences conducted by the on-site evaluation team with faculty, advisory committee members, and students.

To avoid actual or perceived conflicts of interest:

- invitations to social functions shall neither be extended to nor accepted by individual evaluators during the visit.

- the institution, program director, or faculty shall not provide gifts, tokens of appreciation, favors, or anything of monetary or non-monetary value to evaluation team members before, during, or after the accreditation evaluation process.

Observers

It is the policy of the Commission to participate whenever feasible in joint on-site evaluations with representatives of other accrediting organizations. With the permission of the institution, the Commission will invite said organizations to appoint a representative to accompany the on-site evaluation team during the entire course of the visit. Such representatives advise and consult with the Commission's evaluators and participate fully in the team's activities.

As part of the Commission's on-site evaluation training program, qualified observers may accompany the on-site team to learn about the on-site evaluation process. Such individuals are present only as observers of the process. Expenses incurred by observers will not be charged to the institution.

On-Site Visit Agenda and Required Meetings

The on-site evaluation visit enables the team to:

- Observe the program operating in its own setting.
- Confirm the accuracy of information provided in the self-study report
- Review supplementary materials and student resources.
- Promote communication among all levels of personnel involved.

The visiting team requires time to meet as a committee at the beginning and conclusion of the visit but otherwise has no rigid schedule for the balance of the visit. The team may either stay together as a unit during the visit or proceed individually to review various aspects of the program.

The following provides a general format of an Initial Accreditation 3-day on-site visit and a Reaffirmation of Accreditation 2-day on-site visit for programs to follow.

3-day schedule for Programs seeking Initial Accreditation:

- **Evening before Day 1** - Planning session for the team members to review the agenda and the self-study report. Typically, at the hotel.
- **Day 1**: The in-briefing will include the chief executive officer of the institution, dean of the division, and program director. The team will discuss the *Self-study report* with the program director and faculty members. Activities should include an administrative conference and a campus tour that includes supportive services such as the advising center, library, and admissions. The day may conclude with an on-site team conference.
- **Day 2**: Continuation of activities. Conferences with students, faculty, and advisory committee. Observations of lectures, laboratories, and clinical courses. Tour of all program related spaces. The day may conclude with an on-site team conference.
- **Day 3**: Completion of remaining activities. The COA evaluation team members will hold an executive session prior to the out-briefing. The out-briefing will include the dean, program director, faculty, advisory committee, and chief executive officer, if possible.

2-day schedule for Programs Reaffirming Accreditation:

- **Evening before Day 1** - Planning session for the team members to review the agenda and the *Self-study report.* Typically, at the hotel.
- **Day 1**: The in-briefing will include the dean of division, program director, and chief executive officer of the institution, if possible. The team will discuss the *Self-study report* with the program director and faculty members. Conferences and tours will be included. The day may conclude with an on-site team conference.

- **Day 2**: Continuation of activities. The activities will conclude with an on-site team executive session prior to the out-briefing. The out-briefing will include the dean, program director, faculty, advisory committee, and chief executive officer, if possible.

After consultation with the COA office staff and chairperson of the visiting team, the program director should ensure appropriate time is dedicated in the on-site visit schedule to include the following types of activities:

- Lecture classroom visitations and observation (one must be in session)
- Tour of learning resource centers and student support services
- Student conferences (both first year and second year – at least 75% of each representative class, both distance and campus students when applicable)
- Faculty conference to include adjunct faculty or wage instructors.
- Advisory committee conference
- Administrative conference to include representatives that can speak to institutional operations.
- Tour of program facilities (laboratories, clinics, lecture rooms, faculty workspaces, and department storage space)
- Observation of laboratories and/or clinics in session.

The program should have specific records and documents available for review by the evaluators to substantiate and supplement the self-study documentation that was submitted. These may include the following, but not limited to:

- Mission, goals, and learning objectives statement.
- Curriculum outlines
- Course outlines and course lesson plans
- Samples of examinations and tests
- Student work accomplishments: External and internal studies of students' performance (including graduates) to determine if the program is achieving the program's/institution's own stated educational goal.
- Admissions, attendance, achievement, and evaluation records
- Advisory Committee minutes
- Annual Report on the work of the department
- College Catalog

Program Director's Responsibilities

A highly coordinated effort among the program's staff, team members, and Commission staff is required in planning a successful site evaluation. The following is an outline of specific responsibilities of the program director.

Prior to the Site Visit

All materials required for accreditation submission **must be submitted according to the following instructions**. COA now uses electronic methods of communication for all accreditation materials. The program must upload one copy of all required and supplemental materials to a secure drive accessible only to the COA office, on-site team, and program director. The COA Director will supply the program director with a link to the secure drive folder to submit all documents related to the accreditation process approximately three (3) months prior to the on-site visit.

- A tentative schedule/agenda of events must be prepared and submitted electronically via the secure drive folder, to the Commission staff no later than six (6) weeks prior to the on-site visit.
- Submit to the Commission office via the secure drive folder, one electronic version of the self-study report and all supporting documents 30 days prior to the visit.
- Provide additional material electronically via the secure drive folder if requested by the team chairperson or Commission staff.
- Confirm a final on-site visit schedule/agenda based upon response from team chairperson or Commission staff, and in accordance with any deadline provided by the Commission and no later than 21 days prior to the visit.
- Arrange hotel reservations for team members, including transportation to and from airport as needed, and notify Commission staff through the secure drive using the Accommodations and Travel document as outlined in the instructions provided by the COA office staff.

During the Site Visit

- Arrange team transportation from airport, lodging, etc. to contain costs.
- Provide secure and private location for the team where materials can be left securely and confidential discussion may be held.
- Introduce team to institutional personnel.
- Facilitate tours of institutional and program facilities.
- Facilitate keeping schedule "on time" by verifying appointments scheduled with individuals involved, i.e., administrators, students, advisory committee.
- Obtain additional data and information as requested by the team during the visit.

- Arrange for midday meal accommodation using institutional facilities if available.

Following Site Visit

- Review of the on-site Evaluation Report for content accuracy.
- Complete critique of accreditation process by submitting On-Site Evaluation Questionnaire and return to Commission staff.
- Submit a Progress Report by deadline, if requested.
- Reimburse the Commission for the expenses and other direct visit expenses discussed in the section on "Fees."

Confidentiality

Any data or information, written or verbal, involved with the accreditation of a program is privileged and confidential information. Unauthorized disclosure of any information obtained through service on a site visitation, as a Commission or a staff member, is a breach of confidence.

Evaluation Reports

At the conclusion of the visit, the team will hold an executive meeting to prepare the first draft of its Evaluation Report. During the out-briefing, the team will share their overall findings based on the standards within the *Essentials*. The team's recommendation to the Commission about the level of accreditation is not discussed at the out-briefing.

Within 30 days after the site visit, the team chairperson shares the evaluation report draft with the other team members for comment and approval. The finalized Evaluation Report is then provided to the Commission office.

The Commission sends a copy of the Evaluation Report without recommendation as to accreditation classification to the institution normally within 60 days of the site visit. Sufficient time (no more than 30 days) will be allowed for the institution's chief executive officer to comment, correct any factual errors and file, if necessary, supplementary materials relating to the findings and conclusions.

The Commission will review the team's Evaluation Report and the chief executive officer's response at the next scheduled board meeting to make a final decision about the level of accreditation to be awarded. The Evaluation Report covers the following areas: administration of program, instructional facilities, curriculum, finances, faculty, and students. It includes strengths, recommendations for improvement, and, if appropriate, means for accomplishing the improvements, and any areas in which the program is in potential compliance or non-compliance with the Commission's standards set forth in the *Essentials*. The team is also asked to identify any creative and innovative aspects and their effects on the overall program, and the degree of success the program is achieving in meeting its own goals.

A team member, usually the chairperson, will be present when the Commission is reviewing the Evaluation Report submitted by the team.

At a regular or special meeting, the Commission makes a final decision on the level of accreditation to be awarded to the program. The chief executive officer of the institution is informed officially of the decision in writing with a copy to the director of the program.

Date of Accreditation

When a program is initially approved for accreditation by the Commission, the date of accreditation will be retroactive to the first day of the on-site visit.

Conflict of Interest

To preclude any conflict of interest, a Commissioner shall not participate nor be present whenever his/her program is under discussion or evaluation, nor shall a Commissioner cast a vote concerning his/her program. In addition, the Commission shall not appoint a person as a member of an on-site evaluation team to evaluate an opticianry program with which he/she is affiliated or from which he/she was graduated.

Innovations

Experimentation and innovation in new teaching techniques, curriculum design, or any other special programs contributing to the educational process are encouraged and expected. A reliable and valid evaluation of the data should be made whenever innovations in teaching techniques are conducted.

III. Application and Self-Study Process

Application for Accreditation

The application indicates the commitment of the institution and the opticianry program director to the accreditation process. The information on the application provides the Commission with data for initial evaluation of the program and enables the Commission to determine the eligibility of the program for the accreditation process. Applications for accreditation will be accepted at any time. There are a $500.00 initial application fee and a $250 reaffirmation application fee.

Ophthalmic Laboratory Technician programs which have been in operation for one academic year or the equivalent, have graduated their first class, and are interested in initial accreditation by the Commission on Opticianry Accreditation are encouraged to request information concerning the standards and criteria used in the evaluation process. When the commitment has been made to start the process, the application must be prepared in accordance with published instructions and timelines.

Programs due for reaffirmation of accreditation will receive the necessary documents at the appropriate time and have access to most resources on the commission website. The application for reaffirmation of accreditation must be completed in accordance with the published instructions. The Commission will request additional information from the program, if necessary, and establish a date for completion of the self-study report upon confirmation of the on-site visit dates.

Developing and Preparing a Self-Study Report

The self-study report, a requirement for accreditation, is a major undertaking which must involve an appropriate proportion of representation from the faculty, administration, student body, advisory committee, and other interested and affected groups. It is strongly advised that a program forms a self-study committee and appoints a competent chairperson.

A self-study should not be hurried nor done only to fulfill a requirement for accreditation. Learning and benefiting from the process itself, and thereby improving the program's quality, should be primary motivations.

The program has the option of modifying the self-study report format, although the Commission strongly advises using the Self-Study Report Format, which is provided as a separate document and published on the Commission website.

All self-study reports must address each section of the *Essentials* with explanations and appropriate exhibits. There is no prescribed length for the self-study report. However, it is recommended that the narrative does not exceed one hundred (100) pages, exclusive of substantiating data (exhibits). The report should be concise and contain samples (exhibits), rather than detailed accounts. The self-study and exhibits must be uploaded to the secure drive folder for submission. The on-site evaluators will examine actual documents during the visit. If the institution chooses to prepare physical copies of any exhibits for the on-site visit, they should be bound separately and indexed, with each section clearly of the *Essentials* that the exhibit is in reference to identified by tabs.

In addition to addressing the *Essentials*, the report must contain sections on analysis of the program's strengths and limitations (weaknesses) considering the *Essentials* and the program/housing institution's own educational goals and objectives. Innovations or unique aspects of the program, as well as their effects on the overall program, are to be described in detail.

The institution's chief executive officer and the program director must sign the report. Signatures of all participants in the preparation of the report are desired. The report will be submitted electronically to the secure drive folder provided and accessible only to the COA office, site team, and program director.

A program should submit an acceptable self-study report within two years from the date of application. If an acceptable report is not submitted within two years or an extension citing mitigating circumstances is not approved by the Commission, the program will need to reinitiate the application for accreditation process with the submission of a new application and applicable fee.

Required Content of the Self-study report

The self-study report must contain the following elements:

- Each section of the *Essentials* (see coaccreditation.com website for current version of the *Essentials*) must be addressed with explanations and appropriate exhibits.

- The report must contain a self-analysis assessing the program's strengths and limitations (weaknesses) considering the *Essentials*. This must include concrete plans to remedy any deficiencies.

- The report must contain a self-analysis in which the program states the program's and/or housing institution's own educational goals and objectives and analyzes the degree to which they have been achieved.

- The report must contain detailed comments on innovations or unique aspects of the program, if any, with an analysis of their effects on the overall program.

- The program must include the separate Safety and Environmental Management Checklist within the exhibits. The program will complete the checklist, indicating a "yes" if the standard is in place and a "no" if it is not. Any items checked "no" should be commented upon. In addition, any appropriate documentation indicating an exemption from the standard should be attached. Upon completion, the Program Director and the institution's designated Safety Officer must sign in the appropriate place. The document is submitted as an exhibit of Self-Study.

Self-Study Report Format

A format was designed as a separate document for use by individuals and/or a committee in preparing and submitting a self-study report and completing a self-evaluation. The self-study report is a major source of information about an educational program in relation to the *Essentials.* Administrative officials, faculty, students, advisory committee, and other interested parties must be involved in the preparation of the self-study report.

The self-study report format is designed for programs to address each individual standard within the *Essentials*. The narrative and exhibits serve in judging compliance with the *Essentials*.

Within a self-study report, each section should be labelled to mirror the *Essentials*:

1. First, restate the individual *Essential* (standard) that is being addressed.
2. Second, provide a narrative responding to how the program meets that standard.
3. Finally, the exhibit or documentation to support the response should be referenced.

IV. Accreditation Classifications

The Commission extends accreditation to opticianry programs for periods of time no longer than six (6) years. When the Commission acts with respect to the accreditation of a program, it will designate the length of time for which accreditation has been granted. The Commission will conduct the next self-study and on-site visit evaluation prior to the end of the period for which accreditation has been granted so that reaffirmation can be determined prior to the current term expiring.

When the Commission recommends a reduced duration of accreditation for a program with one or more areas of noncompliance that are believed to be readily correctable, it may require a Progress Report by a specific date. In such instances, the Commission may inform the chief executive officer of the institution that, based on the documented correction of the areas of noncompliance, the accreditation award may be extended to a maximum six-year duration without requiring a new self-study report and site visit.

The Commission on Opticianry Accreditation uses five classifications of accreditation:

- Full Accreditation
- Conditional Accreditation
- Provisional Accreditation
- Administrative Probation
- Accreditation Withdrawal or Denial

During a period of Conditional or Provisional Accreditation or Administrative Probation, programs are recognized as accredited. If an accredited program has its accreditation withdrawn or an initial application is denied, the program will be informed in writing by the Commission and be notified of the right to appeal. Conditional accreditation, provisional accreditation, and administrative probation are not subject to appeal. A program that receives conditional accreditation, provisional accreditation, and administrative probation may submit a Request for Reconsideration to the Commission if they believe it is warranted.

Classifications

Full Accreditation:
Full accreditation is a classification granted to an educational program indicating that the program is in substantial compliance with the *Essentials*.

Conditional Accreditation:
Conditional accreditation is a temporary status of accreditation for a program that is in substantial compliance with the *Essentials*, except for one or more specific areas of noncompliance that are readily correctable. The program is required to achieve compliance and submit written evidence of the action to correct these areas.

The institution will be provided with recommendations regarding the program's noncompliance and given a specific length of time (usually no more than one year) to provide evidence in a Progress Report of the action to correct these areas. A program may be recommended for Provisional Status if, in the judgment of the Commission, the Progress Report does not

satisfactorily document compliance was achieved, or implementation of the recommendations has occurred.

Provisional Accreditation:
Provisional accreditation may be granted to a program which is presently accredited. This classification is granted to a program which has one or more areas of noncompliance of such magnitude that appear to threaten the capability of the program to provide an acceptable educational experience for the student, and if not corrected, the withdrawal of the program's accreditation may result. Provisional accreditation normally will not extend beyond two years.

A $500 fee will be assessed, and the Commission will provide a letter of notification placing the program on provisional status to the chief executive officer of the institution with a statement identifying each program characteristics evaluated to be in noncompliance with the accreditation standard. Specific guidance regarding methods of fulfilling the requirements and a deadline for achieving compliance with the standard will be provided.

The Commission may require periodic Progress Reports. An on-site evaluation may be conducted before the removal of the provisional status is considered. Failure by the program to show evidence of compliance with the standards within the specified period will normally result in the withdrawal of accreditation.

Administrative Probation:
A program may be placed on administrative probation at the discretion of the Director of Accreditation (having consulted with COA Officers) for the following:

- Annual fee is more than 30 days late.
- Annual report more than 30 days late.
- Self-study more than 30 days late.
- Progress report more than 30 days late.
- Any additional fee is more than 60 days late.

A $500 fee will be assessed with Administrative Probation, which will be in addition to any late fee due because of the lateness of the administrative requirement (i.e.: submission or fee payment). Before the program is placed on Administrative Probation, the COA office will inform the program director of the relevant requirements, policies, and/or procedures that will be followed if the report or fee has not been received.

If a program is placed on Administrative Probation, the notification letter will state that the program is in non-compliance with requirements for maintaining accreditation and will list the requirements in question. A program’s failure to comply with requirements for maintaining accreditation will result in provisional accreditation status or the withdrawal of accreditation status.

The chief executive officer of the institution must notify students enrolled in the program seeking admission, and the applicable state licensing board, that the program’s accreditation is in probationary status. Administrative Probation will be removed upon correction of the deficiency.

Reaffirmation of Accreditation

Accreditation carries a predetermined time limitation, maximum of six (6) years. Once an accreditation status has been granted, it can be changed only after an appropriate due process. It is the duty of the Commission to schedule site visitation, conduct an appropriate evaluation of each program, and decide on an accreditation classification. As described in Section II, site visits for reaffirmation of accreditation are scheduled for two days, compared to a three-day on-site evaluation which is required for an initial accreditation.

Withdrawal or Denial of Accreditation

The Commission on Opticianry Accreditation withdraws accreditation under the following circumstances:

- A program fails to show evidence of substantial compliance with the *Essentials* within two years. This period may be extended if the program can demonstrate compelling cause for not bringing itself into substantial compliance with the *Essentials*.
- Provisional Accreditation or Administrative Probation status has not been rectified within the designated time permitted.
- There have been no students enrolled in the program for two consecutive years.
- The program does not permit re-evaluation after due notice.
- The institution's chief executive officer requests withdrawal of COA accreditation by submitting a written request to the Commission.

When accreditation is withdrawn, the chief executive officer of the institution is notified of this action and provided with a written statement of the program characteristics which are judged to be in noncompliance with the *Essentials* and the rationale for the withdrawal of accreditation. The institution may appeal in accordance with established procedures or may reapply for accreditation as a new applicant later.

When the institution offering the program is notified that accreditation has been withdrawn, any student enrolled in the program at that time and completes the program successfully within the scheduled period, will be considered a graduate of a COA accredited program.

The institution should inform all students enrolled in the opticianry program, and those seeking admission, that accreditation has been withdrawn. This notification is required after any appeals have been submitted to and reviewed by the Commission.

Reconsideration of Accreditation

In the case of an adverse accreditation decision, the Commission will provide the chief executive officer of the institution concerned with a specific statement in writing of reasons for the action taken.

The Commission may reconsider any adverse accreditation decision on its own motion or upon the request of the institution or program. An adverse accreditation decision is an official Commission

action, such as provisional status; withdrawal or denial of accreditation; continuation of an accreditation classification less than full accreditation; or the rejection of a self-study report, progress report, or annual report.

An institution or program desiring the Commission to reconsider an adverse decision must submit to the Commission in writing a "Request for Reconsideration" with substantiating documentation to show to the satisfaction of the Commission that the facts upon which the adverse decision was based no longer exist.

The Commission will consider the submitted documentation and any oral presentation which the institution or program may wish to make at the next scheduled board meeting. If the facts that precipitated the adverse action have been corrected, the Commission will take appropriate action. The Commission will reconsider an adverse decision only if the facts upon which it was based were found to be in error or have changed significantly.

Appeal of Accreditation Decisions

The Commission provides clearly delineated procedures for programs wishing to appeal against an action of non-accreditation (resulting from accreditation denied or withdrawn).

Procedures

1. ***Initiation of Appeal***

   The chief executive officer of an institution housing a program, which has had accreditation denied or withdrawn by the COA may appeal the decision. The appeal request in writing must be received by the executive director of the COA within 30 days after the program received the COA notice of its action to deny or withdraw accreditation. All correspondence referred to herein shall be sent by certified mail; return receipt requested.

   An appeal filed in accord with COA's appeal procedures shall automatically delay the decision to deny or withdraw accreditation until final disposition by the Commission of the appeal. There will be no change in accreditation classification until after completion of the appeal procedure.

   Appeals may be based only on the contention that the Commission's decision was arbitrary or capricious or not supported by documented evidence of noncompliance with the *Essentials.*

2. ***Appeals Panel***

   The institution has the right to a hearing before the appeals panel. Representatives of the institution/program may make oral and/or written presentations before the panel and may respond to questions from the panel. The institution/program has the right to retain counsel during this and subsequent presentations.

   The appeals panel shall be composed of three individuals who are familiar with the accreditation process and who have a working knowledge of the *Essentials*. No individual is eligible for the appeals panel who is presently or was previously involved with the

accreditation activity under consideration, or who is a current commissioner or currently acts as a Commission consultant.

A list of at least nine (9) individuals qualified to serve as members of an appeals panel shall be maintained under the direction of the COA from recommendations submitted by the National Academy of Opticianry, United Opticians Association, and Contact lens Society of America. This list will be sent to the institution within 21 days of the COA's receipt of the request for an appeal. Within 10 days of receipt of the list, the Commission and the institution shall mutually agree upon three individuals to constitute the appeals panel.

3. ***Appeals Date and Participants***

The appeals panel shall meet within 30 days after they have been selected to serve. The members of the panel shall choose one of their members to serve as chair. The chair shall establish the date, time, and place for the panel to convene in consultation with the chief executive officer of the institution appealing the accreditation decision.

At least 21 days prior to this established date, the institution shall be notified by the Commission's executive director of the date, time, and place that the appeals panel will meet, and shall be provided with the information on which the decision to deny or withdraw accreditation was based, including a specific statement of reasons for the decision. At a hearing conducted before the appeals panel, the institution may offer testimony and question any on-site team member who participated in the on-site evaluation of the program.

At least 10 days before such a hearing, the institution shall request in writing the presence of any individual whom it wishes to question. Such requests shall be directed to the COA Director of Accreditation. Commission representatives may be present during established meetings to provide information, as necessary.

4. ***Appeals Panel Recommendations and Commission Action***

The recommendation of the appeals panel shall be based on the evidence presented to the Commission regarding the conditions which existed in the program at the time of the latest site visit and on information about subsequent changes filed with the Commission prior to, or at the time of the Commission decision.

The findings and recommendations of the appeals panel shall be submitted by its chair in writing to the Commission within 10 days after the conclusion of the hearing. Decisive action shall be taken at a regular or special meeting of the Commission. The decision of the Commission shall be final. The Director of Accreditation shall be prompt in notifying the institution’s chief executive officer of the Commission's decision. This notification shall state specific reasons for the decision.

5. ***Cost***

The institution making the appeal shall bear the costs involved in the development and presentation of its appeal. Reasonable expenses directly associated with the hearing, such as those for the meeting room and for travel and per diem for members of the panel, shall

be divided equally between the Commission and the institution making the appeal. Expenses of witnesses directly associated with the hearing shall be borne by the party requesting their presence.

6. ***Extension of Time Limits***

   Under extraordinary circumstances, the time limits specified previously may be extended with the mutual consent of the institution and the Commission.

Review of Complaint

Although the Commission does not serve as mediator of disputes among ophthalmic laboratory technician programs, housing institutions, and other parties, the Commission will consider a complaint from any interested party about the educational quality of a program accredited by the Commission. The Commission strongly encourages the complainant, however, to exhaust other appropriate grievance and review mechanisms before bringing the matter to the Commission.

The following procedure will be used in the investigation of a complaint concerning Commission accredited programs.

A. Complaints must be submitted in writing to the Commission office. They must clearly specify reasons for the complaint, the areas in which the complaint relates to the Commission's *Essentials*, the person(s) or group(s) initiating the complaint, and their relationship with the program and institution. Available supporting documentation, including a statement of steps previously taken to resolve the complaint, must be included.

   All written complaints will be forwarded to the chairperson of the Commission for action. The Commission will not intervene in matters of admission, appointment, promotion, or dismissal of faculty or students. It will intervene only when it believes that the practices or conditions indicate that the program may not be in compliance with the *Essentials* or with established accreditation policies.

B. The chairperson of the Commission will determine whether the complaint is relevant to the program *Essentials* or established accreditation policies.

   1. If the chairperson of the Commission determines the complaint does not relate to the *Essentials* or established accreditation policies, the complainant will be notified promptly.

   2. If the chairperson determines the complaint does relate to the *Essentials* or established accreditation policies, a written acknowledgment of the complaint will be forwarded to the complainant, to the program director, and to the chief executive officer of the institution housing the program within 30 days after determination.

   3. Included in the notification to the chief executive officer will be a description of the complaint and, if appropriate, a request by the Commission chairperson that the institution conduct an investigation with a report to the chairperson within 30 days. The chairperson may also request additional information related to the complaint from the complainant, the institution, and other sources.

4. The information obtained from the chief executive officer will be reviewed and considered by the chairperson prior to further action. If the institution agrees with the complaint and proposes to institute remedial action satisfactory to the chairperson, no further action will be taken. The chairperson will notify the complainant. If the institution is not in substantial agreement with the complaint, the chairperson will appoint a review committee, consisting of three Commissioners, to consider the complaint along with all relevant information, and submit its findings and recommendations to the chairperson within 90 days. The chairperson of the review committee may call a committee meeting if he/she deems it appropriate.
5. If the review committee finds that the complaint is unsubstantiated or not related to the *Essentials* or established accreditation policies, the chairperson will notify the complainant and the chief executive officer of the institution involved.

6. If the review committee find the complaint is substantial and that the program may not be in substantial compliance with the *Essentials* or with established accreditation policies, the chairperson will call a special meeting via virtual conference of the Commission to consider the findings and recommendations of the review committee if a regular meeting is not scheduled within 90 days.

7. The Commission may take any of the following actions and any other action may consider appropriate:
    a. Dismiss the complaint.
    b. Postpone decisive action on the complaint if there is evidence that the institution and/or program are correcting the situation that warranted the complaint. If a postponement is made, the matter must come before the Commission for final resolution within one year of the postponement.
    c. Notify the chief executive officer of the institution in question that the Commission has determined that the institution is not complying with certain requirements of the *Essentials* or established accreditation policies and recommend changes to be made within a specified period. The Commission may request that the institution submit a report outlining plans for addressing the complaint as well as periodic progress reports.
    d. Schedule an on-site evaluation.
    e. Change accreditation classification of the program.

8. The Commission will notify both the chief executive officer of the institution and the complainant of the Commission's actions.

9. If the chairperson, in consultation with the Commission's vice chairperson and its treasurer, determines that legal counsel is needed in relation to the complaint, the Commission's executive director will contact the attorney.

Procedures for Complaints Against the Commission on Opticianry Accreditation

Any student, faculty or institutional staff member, optician, and/or any member of the public may lodge complaints against the Commission on Opticianry Accreditation. All complaints must be submitted in writing with legal signature to the physical mailing address published on the commission website at https://coaccreditation.com. All complaints should be addressed to the

Commission chairperson. Upon receipt of the complaint, the COA office staff will provide copies to the executive board of the commission for review.

Determination

Within thirty (30) days of receipt of a complaint, it will be acknowledged in writing, and the chairperson of the Commission will initiate an investigation as appropriate. The original letter of complaint will be filed with the Commission office. The chairperson determines whether the complaint relates to the accreditation process, decisions, or actions or activities of the Commission or one of the commissioners. If the chairperson makes the determination that the complaint does not meet the above criteria, the complaint will not be investigated further.

Investigation

If the chairperson makes the determination that the complaint does meet the above criteria, COA must investigate the complaint.

1. The chairperson of the COA informs the complainant that the Commission will proceed with an investigation and that it might become necessary to identify the complainant with the Commission, a review committee, or with other sources. The complainant is asked to keep the initiation of an investigation confidential and to provide all relevant information in support of the allegation.

2. The chairperson of the COA notifies the Commissioners that a complaint has been registered against the Commission and that the Commission will proceed with an investigation. Notification includes information about the nature of the complaint. The identity of the complainant is not revealed to the board of commissioners.

3. The chairperson of the COA shall appoint a Review Committee to review the complaint against the Commission. To ensure that the committee is thoroughly familiar with accreditation standards, the accreditation process, and the policies and procedures of COA, the committee shall consist of three past Commissioners who have served in the past five years.

   The Review Committee shall consider the complaint, including supporting documents, no later than sixty (60) days from the date the material related to the complaint is mailed or electronically provided (preferred method) to the Review Committee members from the Commission office. After thorough review, the Review Committee will recommend a course(s) of action. Such recommendations may include but are not limited to:

   - Dismissal of the complaint.
   - Recommended changes in Commission policies and procedures within a specified period.
   - Other recommendations.

4. Within thirty (30) days of the conclusion of the investigation, the Review Committee will forward its recommendations to the chairperson. Such recommendations will be distributed to each commissioner for their review. A full discussion of the recommendations of the Review Committee shall be placed on the agenda for the next regularly scheduled semi-

annual meeting for consideration of appropriate Commission action. If more immediate action is required, the chairperson may conduct a poll of the commissioners.

5. The Commission shall formally notify the complainant within thirty (30) days of the Commission's decision related to the complaint. Decisions of the Commission related to complaints may not be appealed.

In conclusion, the procedures and timelines to process a complaint against the Commission on Opticianry Accreditation have been developed to protect the interests of students, to benefit the public, and to improve the quality of the accreditation process.

V. Reports

Annual Reports

The Annual Report submitted by each program is used to monitor significant changes at the institution or program. It is a general overview informing the Commission of the state of affairs at the institution and of plans for the next year. The Annual Report should record the headway a program has made in implementing the Commission's recommendations for improvement, if any, made after the last on-site evaluation.

If there is a significant change or if there is evidence of serious non-compliance in the institution or program, the Commission may call for other periodic and/or special reports from an accredited program and may schedule an on-site evaluation before the end of the current period of accreditation.

The Annual Report must be signed by the program director and either the division chairperson, department head, or institution chief executive officer and submitted to the Commission by the specified date. **The program MUST use the Annual Report Template** found on the COA website. The institutions will be notified of the date at least three months in advance. Representatives of the institution may be invited to meet with the Commission at that time to discuss their reports. A $500 late fee will be assessed for delinquent reports. Subsequent late reports will be assessed $500 plus $250 for each late report during the accreditation period.

Annual Outcome Statistics

Annual outcome statistics are encouraged of certificate programs but are not required for 1-year ophthalmic laboratory technician programs. Programs must evaluate outcomes related to program completion and job placement.

Progress Reports

Annual Reporting

If the Commission determines that an institution's Annual Report is incomplete, insufficient, or does not demonstrate ongoing compliance with accreditation standards, the program will be required to submit a progress report. This is intended to ensure that the program maintains compliance between accreditation cycles and that all required data and outcomes are accurately and fully reported.

The progress report must address the specific deficiencies, omissions, or areas of concern identified by the Commission and provide documentation of corrective actions taken. The Commission will specify the appropriate content, format, and due date of the report. Failure to submit an adequate response may result in further Commission action, consistent with accreditation policies.

Self-Study/On-Site Reporting

Upon completion of the self-study and on-site evaluation, the Program Director is required

to submit documentation indicating the implementation of the recommendations contained in the Evaluation Report. If a Progress Report is required, the due date will be specified by the Commission. If the progress reported indicates satisfactory progress, a program with conditional or provisional accreditation may be raised to full accreditation. However, if the progress reported is unsatisfactory, the Commission may either require a representative from the institution to appear before it to explain the lack of progress or schedule a special reevaluation team to determine the basis for the lack of progress.

The Progress Report should specifically comment on each individual recommendation of the Evaluation Report. Following a statement of each recommendation, the institution/program must discuss in detail its accomplishments in implementing the specific recommendations. The Commission requires that the Progress Report include comments or observations from the institution's department chairperson or chief executive officer, as well as the program director.

Institutional Effectiveness

Certificate programs are encouraged to evaluate outcomes through a systematic plan for assessing program effectiveness, efficiency, and relevance by achieving specified requirements with respect to:

a. program completion.
b. job placement.
c. National Opticianry Competency Examination (ABO) pass rates.

For each outcome, if a program's rate falls below the minimum rate provided (or the state rate for licensure) the program must include a narrative with the institution's annual report offering explanation, including mitigating circumstances, and a plan for improvement.

It is the expectation that all accredited ophthalmic laboratory technician certificate programs strive to meet the Minimum Performance Standards for annual statistics established by COA.

VI. Regular Review of Standards, Policies, and Procedures

The Commission has a published document of policies and procedures. A standing review committee of the Commission is responsible for reviewing standards, policies, and procedures on an ongoing basis and reporting at the spring meeting of the Commission. The committee will also accept suggested revisions from any party concerned, which should be submitted in writing to the Commission office.

All accredited programs, as well as the National Academy of Opticianry, United Opticians Association, and the Contact Lens Society of America will be informed in writing of proposed changes and given an opportunity to comment.

In addition, the Commission will publicize and, at least every two years, conduct *Essentials* Hearings. Hearings are public discussion sessions concerning the standards and criteria by which the Commission evaluates optician programs.

The Commission will make final decision about changes in standards, policies, and procedures after receiving recommendations from various sources. If deemed appropriate, additional operating procedures may be established. At the Commission's discretion, these may include unannounced inspections.