Accreditation Council on Optometric Education (ACOE)

Policy & Procedure Manual
Contents

Introduction and General Information

- About this Manual ........................................................................................................... 3

- Role of Accreditation ....................................................................................................... 3

- History and Composition of the Accreditation Council on Optometric Education ........... 4

- ACOE Committee Structure .......................................................................................... 5

- Mission, Goals, and Objectives ...................................................................................... 6

- Recognition by USDE and CHEA .................................................................................. 7

General Policies and Procedures .......................................................................................... 8

- Policy on Policies ............................................................................................................... 8

- Ethics and Integrity .......................................................................................................... 9

- Conflicts of Interest ......................................................................................................... 10

- Non-Discrimination ......................................................................................................... 12

- Document Retention ....................................................................................................... 13

- Confidentiality of Accreditation Reports and Council/Committee Proceedings ............... 14

- Confidentiality of Protected Health Information (PHI) .................................................. 15

- Public Disclosure of Accreditation Information by the ACOE ....................................... 16

- Complaints Not Related to Accreditation Decisions ....................................................... 18

- Training ............................................................................................................................ 20

Policies Related to Accreditation of Programs ................................................................... 22

- Accreditation Standards ................................................................................................. 22

- Self-Studies ...................................................................................................................... 23

- Composition and Selection of the Evaluation Visit Team ............................................. 24

- The Role of the Liaison Associated with Review of Programs ....................................... 25

- Professional Optometric Degree Programs Seeking Accreditation ............................. 26

- Optometric Residency Programs Seeking Accreditation ............................................... 32

- Optometric Technician Programs Seeking Accreditation ............................................. 33

- Third-Party Comments .................................................................................................... 34

- Complaints Against Programs Related to ACOE Standards and/or Procedures .......... 35

- Site Evaluation Visit ....................................................................................................... 37

- Factual Accuracy Review ................................................................................................. 40

- Council Review of Evaluation Reports and Subsequent Decisions ............................... 41

- Accreditation Length ....................................................................................................... 42

NOTE – italicized words/acronyms are included in the Glossary
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 top of the document 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 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 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 assurance 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 thirteen members, eleven of whom are members of the AOA, and two public members. With respect to members of the Council who are members of the AOA:

- Four (4) 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 (2) 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;
- Four (4) are optometrists associated with optometric educational programs with an accreditation status from the ACOE, with two of the four having expertise in optometric residency education;
- One (1) 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 (2) 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 status or Preliminary Approval from the Council or has applied for accreditation;
- 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. Public member candidates attest to meeting the definition of a public member. 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; rather, it 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 Standards. The Committee serves a critical function in supporting consistency in interpretation of and assessments of compliance to the ACOE’s accreditation 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 United States Department of Education (USDE) and Council on Higher Education Accreditation (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

**Goal 3**

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

**Objectives**

*NOTE – italicized words/acronyms are included in the [Glossary](#)*
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 Research Enhancement Award Program (REAP) for Health Professional Schools and Graduate Schools, funded through the National Institutes of Health (NIH), 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 USDE recognized institutional 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) 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

POLICY
The ACOE maintains, reviews, and updates Policies and Procedures (P&Ps) associated with its functions.

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 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 calendar for validation of existing P&Ps (no/non-material changes).

SCOPE
☒ Professional Optometric Degree Programs
☒ Optometric Residency Programs
☒ Optometric Technician Programs

GUIDELINES
None

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 will consult 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 will perform research and propose 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.

The new or revised P&P will be considered by the Council and if accepted, will be distributed to the communities of interest in a call for comments. Non-material revisions will not require distribution to the communities of interest in a call for comments.

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

Annual Review Process
The Compliance Committee will review the full contents of the “ACOE Policy and Procedure Manual” and make recommendations associated with proposed revisions and/or revalidation of content.
Committee recommendations will be considered by Council in its next regularly scheduled meeting. For any proposed revisions of a material nature, if accepted by Council, revisions will be distributed to the communities of interest in a call for comments.

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

Upon assimilation of results from the call for comments, the ACOE will make 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); 02/25/2023 (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”).

<table>
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<th>FORMS/ATTACHMENTS</th>
<th>None</th>
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**DATES OF REVISION/VALIDATION**

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

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**Conflicts of Interest**

**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, Preliminary Approval*, and those associated with proposed programs prior to *Preliminary Approval*.

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 (2) years after completing service on ACOE.

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

**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

**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 (5) 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, then that member is no longer required to declare a conflict of interest.

**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

- 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.

NOTE – italicized words/acronyms are included in the Glossary
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 Visit 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 visit team.
- In addition, when the consultant’s signed disclosure/attestation form was completed two (2) 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 uncertainty exists 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 empowered to make the final determination to resolve any questions regarding real or perceived conflicts.

FORMS/ATTACHMENTS

Certification of Adherence to Conflict of Interest and Confidentiality Policies

DATES OF REVISION/VALIDATION

See Historical Revision History; 06/26/2021; 06/18/2022; 02/25/2023 (no/non-substantive changes)

Non-Discrimination

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.

**SCOPE**

☒ Professional Optometric Degree Programs  
☒ Optometric Residency Programs  
☒ Optometric Technician Programs

**GUIDELINES**

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

**PROCEDURE**

None

**FORMS/ATTACHMENTS**

None

**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

**Document Retention**

**POLICY**

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

- its last two (2) 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 self-studies associated with full accreditation or preaccreditation reviews;
- all decision letters issued by the ACOE regarding the accreditation and preaccreditation of any program and any substantive changes;
- records of any complaints filed in accordance with ACOE Policies and Procedures “Complaints Against Programs Related to ACOE Standards and/or Procedures” and “Complaints Not Related to Accreditation or Preaccreditation Decisions” as well as the resolution of the complaints; and
- minutes of ACOE meetings that contain records of all ACOE actions and related correspondence.

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.
NOTE – italicized words/acronyms are included in the Glossary
Scope
☒ Professional Optometric Degree Programs
☒ Optometric Residency Programs
☒ Optometric Technician Programs

Guidelines
None

Procedure
None

Forms/Attachments
None

Dates of Revision/Validation
See Historical Revision History; 06/26/2021; 06/18/2022

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 an accreditation status or Preliminary Approval.

When requested by a program that is a HIPAA Covered Entity, 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 an accreditation status or Preliminary Approval.

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

- 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 an accreditation status or Preliminary Approval.

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 Visit Team Members**
- At the time of assignment of evaluation visit 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 (2) 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); 02/25/2023 (no/non-substantive changes)

#### Public Disclosure of Accreditation Information by the ACOE

**Policy**
The ACOE publishes on its website (www.theACOE.org) written information providing transparency to its accreditation Standards, policies, procedures, information about programs' accreditation status or Preliminary Approval status and outcomes, as applicable, its decision-makers, and principal administrative staff.

The following sets of accreditation Standards are published on the ACOE's 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 website. P&Ps include records of review/revision history.
Directories of accredited programs are published on the ACOE’s website. For each program, the applicable accreditation status or Preliminary Approval status and the year the ACOE will next review it for an accreditation status or Preliminary Approval is listed. The list is updated following each ACOE meeting, and when major changes occur.

On its 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 publishes notice of programs with Accredited with Conditions status or withdrawal of accreditation on its website.

The ACOE publishes its accreditation decisions, including the basis for any final decisions, on its website 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;
- accreditation status, Preliminary Approval 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 curricula 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 published on the ACOE website.

The Council 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 inquiries to ACOE can be submitted via email to accredit@theacoe.org.

<table>
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<tr>
<th>SCOPE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ Professional Optometric Degree Programs</td>
<td></td>
</tr>
<tr>
<td>☒ Optometric Residency Programs</td>
<td></td>
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<tr>
<td>☒ Optometric Technician Programs</td>
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</tbody>
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<tr>
<th>GUIDELINES</th>
<th>None</th>
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<tr>
<th>PROCEDURE</th>
<th>None</th>
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<thead>
<tr>
<th>FORMS/ATTACHMENTS</th>
<th>None</th>
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</table>

Top of the Document
NOTE – italicized words/acronyms are included in the Glossary.
Complaints Not Related to Accreditation Decisions

POLICY

The ACOE ensures an unbiased, timely, and equitable review of any complaints against itself not related to decisions regarding accreditation status or Preliminary Approval status 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.

SCOPE

☒ Professional Optometric Degree Programs
☒ Optometric Residency Programs
☒ Optometric Technician Programs

GUIDELINES

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

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.”

PROCEDURE

A complaint may be initiated by filing a signed written complaint with the ACOE. The complaint must be submitted via email addressed to accredit@theacoe.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 Chair
of the ACOE, or in the case the complaint concerns the Chair, the Vice Chair will appoint an individual or a committee to conduct the inquiry into the allegation(s) of the complaint.

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.

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 regularly scheduled meeting shall make a determination of disposition 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 (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 had affiliation with the sponsoring 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 affirm, amend, or 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.

**FORMS/ATTACHMENTS**

Top of the Document

NOTE – italicized words/acronyms are included in the Glossary
Training

**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.

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

**GUIDELINES**
None

**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 following annual 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 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 Visit Team Members*

The Council seeks nominations of qualified individuals from administrators and faculty at the programs holding an accreditation status or Preliminary Approval, Council members, and other consultants. Nominated individuals are contacted and requested to submit their curricula 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 visit 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 regularly 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 visit team members.

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

**Evaluation Visit 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 an 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

**DATES OF REVISION/VALIDATION**
See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 06/18/2022; 02/25/2023 (no/non-substantive changes)
Policies Related to Accreditation of Programs

**Accreditation Standards**

**POLICY**
The ACOE relies upon clearug Standards that are sufficiently rigorous to ensure that an award of an accreditation status or Preliminary Approval by the ACOE is a reliable indicator of the quality of education provided by the programs it accredits. The ACOE bases its accreditation 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 “Standards for professional optometric degree programs seeking preliminary approval preaccreditation status” are appropriately related to the ACOE’s “Professional Optometric Degree Standards.”

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

**GUIDELINES**
None

**PROCEDURE**
As the ACOE considers additions to and/or revisions of its Standards, the review will include validation of continued compliance with this Policy (reference ACOE Policy and Procedure “Revision of Accreditation Standards”).

**FORMS/ATTACHMENTS**
ACOE Standards of Accreditation are posted on its website (www.theACOE.org)

**DATES OF REVISION/VALIDATION**
Self-Studies

**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 and document 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 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.

The self-study must ensure a focus on outcomes related to the program's efforts in pursuit of its mission and goals. 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 format of the self-study must be a report presented on a Standard-by-Standard basis. Through narrative and submission of exhibits/examples of evidence, the program must provide both a written description of how it complies with each Standard and supporting evidence.

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 must be submitted using the ACOE template.

Unless otherwise specified, the self-study is due two (2) months in advance of the scheduled evaluation visit. For Interim evaluation visits, the self-study is due at least one (1) month in advance of the scheduled evaluation visit.

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

**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
identify and celebrate the accomplishments and positive elements of the program relating to its mission, goals, and objectives. 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.

**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.

The self-study process should be initiated at least twelve (12) months before the scheduled evaluation visit.

A concise narrative should be drafted associated with each Standard that describes how the program complies with the Standard. Programs supplement the narrative with evidence – policies, procedures, and/or records – that demonstrate the veracity of the concise narrative. The ACOE Standards list examples of evidence to provide programs with guidance as to the types of evidence likely to show compliance with the Standards.

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.

Upon completion of the self-study and compilation of the supplemental evidence, programs are encouraged to review the information to ensure the absence of gaps and that the information is clearly presented and easy to navigate.

The self-study and related documents must be submitted to the ACOE staff by the due date.

**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

**GUIDELINES**
None

**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.

**FORMS/ATTACHMENTS**
ACOE Consultant Information Update Form

**DATES OF REVISION/VALIDATION**
See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

The Role of the Liaison Associated with Review of Programs

**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.
SCOPE
☐ Professional Optometric Degree Programs
☒ Optometric Residency Programs
☒ Optometric Technician Programs

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.

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); 02/25/2023 (no/non-substantive changes)

Professional Optometric Degree Programs Seeking Accreditation

POLICY
The ACOE provides a pathway for proposed programs to achieve accreditation.

The pathway requires proposed programs to meet specified requirements to be granted each of four classifications.

• Stage One designation;
• Stage Two designation;
• Preliminary Approval; and
• Accredited with Conditions or Accredited.

Council evaluation and approval is required for each proposed 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* classification.

The purpose of evaluating proposed programs via the *Stage One* and *Stage Two designations* is to ensure only proposed programs with a high likelihood of successfully attaining accreditation are granted *Preliminary Approval* and allowed to enroll students. This process ensures (a) proposed programs assess the feasibility and potential viability of a new program, (b) enables proposed programs to receive feedback and information from the Council regarding requirements for compliance with *Standards*, and (c) ensures proposed programs fully understand the *ACOE Standards* and are prepared to take steps necessary to comply.

In the event a proposed 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 proposed program’s application will expire when it does not achieve *Stage One designation* within two (2) years of submission of a complete application.

Proposed programs may remain in *Stage One designation* for up to (3) three years while working on the requirements for *Stage Two designation*.

Proposed programs may remain in *Stage Two designation* for up to (2) two years.

Proposed programs may voluntarily withdraw from *Stage One or Stage Two designation* at any time. If the proposed 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 *Preliminary Approval*, proposed programs must demonstrate a sufficiently robust *teach-out plan* 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.

Proposed programs must not recruit or enroll students until *Preliminary Approval* has been awarded. If a proposed program recruits students prior to achievement of *Preliminary Approval*, then the application may be terminated by the Council. If a proposed 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.

Programs holding the *Preliminary Approval* status must publish *ACOE*-specified disclosure language on the program’s public website and in any printed materials.

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 *Preliminary Approval* status, it may maintain the program’s *Preliminary Approval* 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”*).
GUIDELINES

Inquiries about the potential accreditation of a proposed professional optometric degree program should be directed to the ACOE staff at accredit@theacoe.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 institutions to advise on basic information regarding procedures and Standards.

Proposed programs which have not yet been granted Preliminary Approval status must avoid making any statements implying achievement of accreditation.

Proposed programs on the pathway to accreditation must avoid making any statements implying earning Preliminary Approval or an accreditation 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 proposed programs with input from the ACOE as the proposed program works toward the development of a new professional optometric degree program.

For a proposed professional optometric degree program to be considered for Stage One designation, the sponsoring institution must submit a complete application for Stage One designation. A complete application includes:

1. A formal letter of intent from the chief executive officer of the sponsoring institution. The letter of intent must
   a. demonstrate that the institution sponsoring the proposed program is devoted primarily to education; and
   b. include an affirmative statement of commitment to the access and availability of sufficient funding for the development of the proposed program.

2. A documented needs assessment. Information sources must be cited and the needs assessment must include but not be limited to:
   a. clear and concise articulation of current gaps and/or unmet needs related to the practice of optometry;
   b. anticipated mission and goals of a new program that tie back to the gaps and unmet needs;
   c. quantitative and qualitative justification of the existence of gaps and/or unmet needs, which should include but not be limited to:
      i. regional and national data on current workforce needs and workforce needs five (5) – seven (7) years out;
      ii. data on annual graduate numbers from other programs, both within the region and nationally;
      iii. current and projected demographics of local and regional area that impact optometric practice; and
      iv. current and projected legislative environment within the region.
d. demonstration of support from local and/or regional practitioners and state association(s).

3. A documented feasibility study of the proposed professional optometric degree program in terms of:
   a. students;
      i. Describe anticipated class size and total enrollment projections; discuss analyses performed, including key underlying assumptions made, to derive those values.
      ii. Discuss anticipated recruitment strategies and articulate aspects of the strategy that are uniquely compelling. Articulate the proposed program’s value proposition to prospective students.
      iii. Discuss anticipated actions to maximize the pool of qualified applicants.
   b. faculty; and
      i. Describe anticipated estimated faculty size and discuss analyses performed, including key underlying assumptions made, to derive those values.
         1. If the proposed program anticipates sharing faculty with other programs within the sponsoring institution or with another institution, describe how this factors into the anticipated estimated faculty size.
      ii. Discuss anticipated recruitment and retention strategies and articulate aspects of the strategy that are uniquely compelling. Articulate the proposed program’s value proposition to prospective faculty.
   c. resources
      i. Provide evidence supporting the existence of an appropriate patient base to facilitate sufficient supervised clinical experiences to meet the intent of its mission and goals.
      ii. Discuss plans to ensure the proposed program will have access to appropriate technological resources and physical facilities to meet the intent of its mission and goals.

4. A completed risk assessment associated with the feasibility study.
   a. For each of the areas within the feasibility study, students, faculty, and resources, assess and articulate risks associated with proposed program’s plans.
   b. For each risk, describe potential mitigation strategies.

5. Payment of 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 scheduled designated meeting that occurs at least 60 days following receipt of the above submissions, the ACOE will review the proposed program’s application for Stage One designation. The Council will evaluate whether the application for Stage One designation is complete and sufficiently developed.

If the application for Stage One designation is determined to be complete and sufficiently developed, then the proposed program will be granted Stage One designation.

If the application for Stage One designation is incomplete and/or insufficiently developed, then the ACOE will not grant the Stage One designation. Notification to the proposed program will include areas within the application considered incomplete and/or insufficiently developed and information on eligibility and requirements to submit to Council for reconsideration during a future meeting.

Process to Achieve Stage Two Designation
Following the granting of *Stage One designation*, the proposed program must be deemed eligible for *Stage Two designation* consideration prior to submission of a self-study. Documentation required to demonstrate eligibility includes evidence:

1. demonstrating the proposed program is part of an institution that possesses an accreditation or *preaccreditation* status from a USDE recognized *institutional accrediting agency*;
2. that the *institutional accreditor* has granted approval for the institution to offer a doctor of optometry program;
3. that the institution has employed both a chief executive officer and a separate chief academic officer of the proposed program for at least six months; and
4. 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.

Within 15 business days of submission of evidence of eligibility, ACOE staff, in consultation with the ACOE Chair, will assess whether eligibility criteria are met and notify the proposed program of the outcome of its review.

Upon notification it has met the eligibility requirements for *Stage Two designation* consideration, the proposed program may submit a self-study report and associated appendices according to the requirements outlined in ACOE’s “Self-Study” Policy and Procedure and the ACOE “*Standards* for professional optometric degree programs seeking *preliminary approval* *preaccreditation* status,” published on the ACOE’s website ([www.theACOE.org](http://www.theACOE.org)). The self-study submission *must* include pro forma financial statements associated with the development of the proposed professional optometric degree program.

The proposed program’s self-study and associated appendices will be reviewed by the ACOE at its next scheduled designated meeting that occurs at least 60 days following receipt of the program’s self-study 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 *Preliminary Approval*.

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 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**

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;

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 will conduct a formal on-site evaluation visit and complete 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 a 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 status of Preliminary Approval.

Upon the granting of Preliminary Approval, the following disclosure language must be published to a prominent location on the program’s public website and in any printed materials:

The Accreditation Council on Optometric Education (ACOE) has granted [Name of Program] the preaccreditation status of Preliminary Approval. Preliminary Approval status signifies satisfactory progress toward accreditation. Achieving Preliminary Approval status is not a guarantee that the ACOE will grant [Name of Program] an accreditation status. Participants who graduate from a program in Preliminary Approval status are not deemed to have completed an accredited program. For more information, see the ACOE’s website at www.theACOE.org.

Process to Achieve an Accreditation Status

Once a program has been granted 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 Preliminary Approval 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 Preliminary Approval status is withdrawn or expires, it must submit an updated teach-out plan (refer to ACOE Policy and Procedure “Teach-Out Process”).

**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).

**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022; 02/25/2023

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**Optometric Residency Programs Seeking Accreditation**

**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.

**SCOPE**

- [ ] Professional Optometric Degree Programs
- [x] Optometric Residency Programs
- [ ] Optometric Technician Programs

**GUIDELINES**

Inquiries about the potential accreditation of a proposed optometric residency program should be directed to a member of the ACOE staff at accredit@theacoe.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.

Programs which have not yet earned an accreditation status must avoid making any statements implying an accreditation status has been granted or is a certainty.

**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 terminated when payment is not
received within sixty (60) days of application submission. The current accreditation fees are published on the ACOE website or may be obtained by contacting the ACOE Director or Senior Manager.

The self-study report must be submitted by the specified due date (reference ACOE Policy and Procedure “Self-Studies”) and will be reviewed by the team chair, team member, ACOE liaison, and ACOE Senior Manager.

If the self-study report is deemed unacceptable or indicates significant deficiencies or weaknesses in the program, then the Chair of the ACOE (or his/her delegate) 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))

**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

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**Optometric Technician Programs Seeking Accreditation**

**POLICY**

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

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

**SCOPE**

☐ Professional Optometric Degree Programs
☐ Optometric Residency Programs
☒ Optometric Technician Programs

**GUIDELINES**

Inquiries about the potential accreditation of a proposed optometric technician program should be directed to the ACOE staff at accredit@theacoe.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.

Programs which have not yet earned an accreditation status must avoid making any statements implying an accreditation status has been granted or is a certainty.

**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 institutional accrediting agency; 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 in 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 Chair of the ACOE (or his/her delegate) 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.

**FORMS/ATTACHMENTS**

ACOE Standards for optometric technician programs are posted on its website (www.theACOE.org)

**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

**Third-Party Comments**

**POLICY**

The ACOE provides the opportunity for submission and consideration of third-party comments concerning a program’s qualifications for an accreditation status or Preliminary Approval.

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

Comments must be received no less than thirty (30) days prior to the program’s scheduled evaluation visit date to be considered. 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.

**SCOPE**

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

**GUIDELINES**
COMPLAINTS AGAINST PROGRAMS RELATED TO ACOE STANDARDS AND/OR PROCEDURES

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.

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.

SCOPE
☒ Professional Optometric Degree Programs
GUIDELINES
None

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 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.

FORMS/ATTACHMENTS
None

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

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.

Upon notification from ACOE staff regarding the scheduling of an evaluation visit, programs are expected to be responsive and cooperative in the establishment of evaluation visit dates.

The evaluation visit team conducts its own analysis of the self-study, supporting documentation, 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 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 notify faculty and students 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(s).

The output of the evaluation visit is the evaluation report. The evaluation report must present an accurate assessment of the program and provide the basis upon which to make an accreditation decision.

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

The Council welcomes interagency cooperation and supports conducting joint evaluation visits with institutional accrediting agencies 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 visit* or coordinate the date of the on-site *evaluation visit* with the visitation of the *institutional accrediting agency*, or another accrediting agency.

The ACOE also welcomes the participation in *evaluation visits* to professional optometric degree programs of 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.

A staff representative(s) of the USDE may also attend an *evaluation visit* to observe a Council *evaluation visit* team(s). The USDE representative(s) is present as an observer(s) of the process.

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

**GUIDELINES**
The length of an *evaluation visit* may vary depending on the complexity of the program. *Evaluation visits* to:
- professional optometric degree programs are usually scheduled for 2-1/2 to 3 days;
- optometric residency programs are usually scheduled for 1 day; and
- 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 relevant documents that could not be provided prior to the visit available and accessible for the team’s inspection.

Programs should not extend, 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 observations with administrators during the exit interview, team members must not express personal or team opinions regarding the Council’s determination.

**PROCEDURE**
The chair of the *evaluation visit* team and/or a member of the ACOE staff consults with the program to develop the *evaluation visit* schedule. Although there is no rigid schedule which the Council
requires to be followed during an *evaluation visit*, 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 visit.

- **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, 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, teaching facilities and external clinical sites;
  - For optometric residency programs, clinical sites, offices, library, and external clinical sites when feasible; and
  - For optometric technician programs, 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 externships, 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 team 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 visit* 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.

During the *evaluation visit*, team members will conduct interviews and facilitate open meetings with administrators, faculty, staff, and students/resident(s).

Team members will review materials including handbooks, websites, brochures, documents, and other records. The information gathered will be used to validate the material presented in the self-
study and to identify any inconsistencies. Where potential inconsistencies are uncovered, the team may request additional information and/or interviews to evaluate whether the inconsistency may reflect potential non-compliance with a Standard(s).

Following the evaluation visit, each evaluation visit team member will prepare a report on the area(s) assigned. Team members are encouraged to develop preliminary drafts either prior to the conclusion or immediately following the evaluation visit. Assigned sections of the report should be submitted to the team chair no later than two (2) weeks following the visit.

The evaluation visit team chair will ensure all sections of the report are assembled and will edit the document to support consistency. ACOE staff will assist the evaluation visit team chair in preparing the draft evaluation visit report and in distributing it to the team members for comment. Prompt response by team members to the draft of the evaluation visit report is essential to the timely preparation of the draft evaluation visit report for the Council.

The draft evaluation visit report will include commentary addressing each of the Standards including strengths and concerns, which may potentially be deemed noncompliant with one of more Standards.

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

FORMS/ATTACHMENTS
None

DATES OF REVISION/VALIDATION
See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

Factual Accuracy Review

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 draft evaluation visit report.

At least one member of Council is directly involved in reviewing the program’s response to the factual accuracy review and updating the draft evaluation visit report.

The draft evaluation visit report reflects conditions at the time of the evaluation visit; when the program reports that it has made or is in process of making changes since the evaluation visit, those changes will not be incorporated into the report draft.

SCOPE
☒ Professional Optometric Degree Programs
☒ Optometric Residency Programs
☒ Optometric Technician Programs

GUIDELINES
None

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

The ACOE staff, on behalf of the *evaluation visit* team chair, will transmit the draft *evaluation visit* report to the program for its review 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 *evaluation visit* report, the program will be directed to concentrate on issues of fact.

The program may challenge the factual accuracy of any aspect of the draft *evaluation visit* report by submitting additional written information and/or proposing mark-ups to the draft *evaluation visit* 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 *evaluation visit* report based on information or comments submitted by the program and/or sponsoring institution.

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**FORMS/ATTACHMENTS**

None

**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

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

**POLICY**

The Council conducts its own analysis of the draft *evaluation visit* report, which incorporates the program’s response to the draft *evaluation visit* 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 statuses to a program following adoption of the *evaluation visit* report. A description of these statuses is posted on ACOE’s website (www.theACOE.org).

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

**SCOPE**

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

PROCEDURE
Following receipt of the response to factual accuracy from the program and any applicable updates (reference ACOE Policy and Procedure “Factual Accuracy Review”), the draft evaluation visit report with draft recommendations and suggestions will be submitted to the Council for consideration at the Council’s next regularly scheduled meeting.

The draft evaluation visit report will be reviewed by all ACOE members prior to the Council’s consideration of the report.

If any unresolved conflicts exist with the program related to factual accuracy or other reason(s), then the Council may defer action on the draft evaluation visit report.

All draft evaluation visit reports will be 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 Council Chair.

At the Council meeting, the evaluation visit team chair or liaison Council member will present the draft evaluation visit report to the Council for its action. The Council will ensure 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 will further assure the draft evaluation visit report addresses the program’s performance with respect to student achievement.

The Council will consider the draft evaluation visit report of the team and take 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 will determine the level of compliance to each of the Standards—met, met in part, or not met.

For each Standard which is not met or met in part, the Council will specify 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 will then take action on granting, continuing, modifying, or withdrawing an accreditation status or Preliminary Approval.

Following action on accreditation, the final evaluation visit report will be forwarded to the sponsoring institution with a notification letter detailing the Council’s actions (reference ACOE Policy and Procedure “Required Notifications and Timing”).

 FORMS/ATTACHMENTS
None

DATES OF REVISION/VALIDATION
See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)
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., an optometric 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 Preliminary Approval 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.

The effective date of an accreditation status or Preliminary Approval 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 status or Preliminary Approval to the program;
- or
- any formal approval by the ACOE of the program for consideration in the ACOE’s accreditation process.

SCOPE

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

GUIDELINES

The following guideline is provided to aid in ensuring programs appropriately represent their accreditation status/Preliminary Approval status publicly.

1. A phrase such as "accreditation has been continued for an eight-year period" is not appropriate.

PROCEDURE

None

FORMS/ATTACHMENTS

None

DATES OF REVISION/VALIDATION

See Historical Revision History; 06/26/2021; 06/18/2022; 02/25/2023 (no/non-substantive changes)

Renewal of Accreditation and Reevaluation of Preliminary Approval

POLICY

Programs which hold an accreditation status or Preliminary Approval 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 status or Preliminary Approval.

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 the scheduling of its on-site evaluation visit.

SCOPE
GUIDELINES

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

Programs should provide ACOE staff with guidance as to dates the program cannot accommodate an on-site evaluation visit.

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 visit conducted on an accelerated basis rather than delaying the earlier-scheduled on-site evaluation visit.

PROCEDURE

Scheduling renewal of accreditation

The Council will communicate the date (month-year) of the program’s next scheduled on-site evaluation visit in its accreditation notification letter.

Generally, twelve (12) months in advance of the scheduled on-site evaluation visit, ACOE Staff will contact the program to remind it of the up-coming visit.

Generally, four (4) -seven (7) months in advance of the scheduled on-site evaluation visit, ACOE Staff will contact the program to begin the process of scheduling specific dates for the evaluation visit (reference ACOE Policy and Procedure “Site Evaluation Visit”).

Program-requested delays

The program must submit a written request in a reasonable amount of time prior to the scheduled evaluation 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, as applicable; and
3. other supporting documentation for the request.

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

“Professional Optometric Degree Standards”, “Standards for professional optometric degree programs seeking preliminary approval preaccreditation status”, “Optometric residency standards”, and “Optometric Technician Standards” are posted on its website (www.theACOE.org).

DATES OF REVISION/VALIDATION

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

Reinstatement of Accreditation

POLICY
A program which has voluntarily withdrawn from an accreditation status, allowed its accreditation status to expire, or which has had its accreditation status withdrawn by the ACOE, may reapply for accreditation.

The ACOE will not move a professional optometric degree program from an accreditation status to Preliminary Approval following the loss of accreditation status. When a professional optometric degree program loses its accreditation status, it must present its teach-out plan to the ACOE for approval (reference ACOE Policy and Procedure “Teach-Out Process”). In order to reinstate its accreditation status, it must follow the steps outlined in ACOE Policy and Procedure “Professional Optometric Degree Programs Seeking Accreditation.”

SCOPE
☒ Professional Optometric Degree Programs
☒ Optometric Residency Programs
☒ Optometric Technician Programs

GUIDELINES
None

PROCEDURE

FORMS/ATTACHMENTS
None

DATES OF REVISION/VALIDATION
See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

Revision of Accreditation 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
☒ Optometric Residency Programs

NOTE – italicized words/acronyms are included in the Glossary
Optometric Technician Programs

GUIDELINES
None

PROCEDURE
Formal comprehensive review process
The ACOE will issue a survey inviting all interested members of the communities of interest to provide input regarding the criticality and clarity of the current Standards, to identify gaps, and to provide comments.

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

The Council will consider results of the survey and any other input received and propose changes to the Standards, ensuring continued compliance with ACOE Policy and Procedure “Accreditation Standards.”

The Council will circulate the draft Standards to programs holding an accreditation status or Preliminary Approval, the state boards of optometry, the USDE, other stakeholders within the profession, and other interested parties inviting comments from the relevant constituencies. The public is also invited to comment via posting on the ACOE’s website. The comment period will be 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 will review the recommendations and develop proposed change(s), ensuring continued compliance with ACOE Policy and Procedure “Accreditation Standards.”

The Council will circulate the contemplated change(s) to programs holding an accreditation status or Preliminary Approval, the state boards of optometry, the USDE, other stakeholders within the profession, and other interested parties inviting comments from the relevant constituencies. The comment period will be 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 will take 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.
Ongoing Monitoring

The Annual Report

**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:
    - 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.

**SCOPE**

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

**GUIDELINES**

None

**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.

**FORMS/ATTACHMENTS**

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

**DATES OF REVISION/VALIDATION**

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

**Policy**

The ACOE requires progress reports of programs as a mechanism to monitor the program’s progress in addressing *recommendations* and other identified concerns. Progress reports may be required of programs holding any of the following ACOE statuses: *Accredited, Accredited with Conditions, Preliminary Approval, Stage Two designation,* or *Stage One designation.*

**Scope**

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

**Guidelines**

In preparing the progress report, the program *must* focus on the specific area(s) requested by the Council including progress made on each unmet *recommendation*. 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).*

**Procedure**

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

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

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

When the progress reported is satisfactory, the program will be notified that unmet *recommendation(s)* are considered met or that the concern that prompted the progress report has been sufficiently addressed. A program with the status of *Accredited with Conditions* may have its *accreditation status* raised to a status of *Accredited.*

When the progress reported is unsatisfactory or the report is not received by the due date, the Council may require another progress report, it may require a representative of the program to appear before it, or it may schedule an interim *evaluation visit.*

When a program is unable to demonstrate it has 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.*”

**Forms/Attachments**

None

**Dates of Revision/Validation**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

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The Annual Survey

**Policy**

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NOTE – *italicized* words/acronyms are included in the [Glossary](#).
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.

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

**GUIDELINES**
None

**PROCEDURE**
None

**FORMS/ATTACHMENTS**
None

**DATES OF REVISION/VALIDATION**
See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

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**Substantive Changes**

**POLICY**
Any program with an accreditation status which contemplates a substantive change must receive approval from the ACOE prior to formal adoption of the change.

The ACOE delegates authority for review and approval of substantive changes submitted by optometric residency programs to the Residency Review Committee.

When a substantive change that was not contemplated occurs, the program must report to the Council in writing within thirty (30) days of the change.

When a substantive change involves a change in program leadership (i.e., to the Chief Executive and/or Chief Academic Officer of a professional optometric degree program or to the program supervisor/coordinator of an optometric residency program) submitted documentation must demonstrate qualifications comply with the ACOE Standards and is not subject to advance approval.

When a substantive change involves the offering of alternate pathway(s) to achieve a common outcome (e.g., conferrence of a doctor of optometry degree by a professional optometric degree program) to a subset of a given cohort or to a separately defined cohort, both the alternate pathway(s) and the originally accredited pathway must comply with the ACOE Standards of accreditation for the program to maintain its accreditation status.

Substantive changes must be submitted to the Council in writing.

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.
SCOPE
☒ Professional Optometric Degree Programs
☒ Optometric Residency Programs
☒ Optometric Technician Programs

GUIDELINES
By "substantive change," the ACOE means new policies or practices that relate to the program holding an accreditation status 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, content, and/or mode of delivery of the program, including whether the change applies to all students in a cohort, a subset of students in a cohort, or to a new cohort being separately defined; and/or
- Resources available to the program needed to fulfill its mission, goals, and objectives.

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;

NOTE – italicized words/acronyms are included in the Glossary
**NOTE** – italicized words/acronyms are included in the **Glossary**

- New affiliations or mergers with other institutions;
- Substantial increases or decreases in enrollment;
- Substantial increases or decreases in faculty;
- Substantial change in financial resources; and
- Substantial change in **mission** of the program.

Programs **must** avoid making any statements implying Council approval of a substantive change request is a certainty.

**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 **must** 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 **USDE recognized institutional accrediting agency**.

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**. Documentation **must** include the factors precipitating the change and address how the program will continue to meet each applicable accreditation **Standard**.

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, 10/15/2022

**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;
Consideration of Actions of States and Other Accrediting Groups

POLICY
the ACOE will not grant initial or renewed accreditation status or Preliminary Approval if the parent institution of a program that has submitted an application or holds Stage One designation, Stage Two designation, an accreditation status, or Preliminary Approval 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.

Programs that have submitted an application or hold Stage One designation, Stage Two designation, an accreditation status, or Preliminary Approval are required to notify the ACOE in the event any of the above four actions occur.

If the ACOE learns that a program to which it has granted an accreditation status or Preliminary Approval 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 the ACOE should also take adverse action or lower the program’s 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 status or Preliminary Approval 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 an accreditation status or Preliminary Approval.

SCOPE
☒ Professional Optometric Degree Programs
☒ Optometric Residency Programs
☒ Optometric Technician Programs

GUIDELINES
None
**PROCEDURE**

In conjunction with *evaluation visit* reviews of professional optometric degree and optometric technician programs, the *ACOE* will ensure the program’s accreditation status from a *USDE* recognized *institutional accrediting agency* 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 other *USDE* recognized accrediting agencies to determine whether any of the actions described in this Policy have been taken associated with programs holding an *accreditation status or Preliminary Approval* 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 will assess the nature and gravity of the action taken and determine 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.

**FORMS/ATTACHMENTS**

None

**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 06/18/2022; 02/25/2023 (no/non-substantive changes)
Other Policies Related to Accreditation

Timeframe for Compliance with Standards

**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. Good cause extensions 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).

**SCOPE**

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

**GUIDELINES**

None

**PROCEDURE**

When the Council deems a program to be non-compliant with one or more ACOE Standards, the Council will prepare and distribute a written notification to the program apprising it of the Council’s 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 visit report associated with an interim evaluation visit.
Upon review of the program’s actions to remediate the noncompliant Standard(s), the Council will determine whether the response is acceptable and will develop and distribute 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.

**Adverse Actions and Program-Initiated Withdrawals**

**Policy**

An accreditation status or Preliminary Approval 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 status or Preliminary Approval 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 status or Preliminary Approval 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 status or Preliminary Approval, a failure by that program to extend an invitation for an evaluation visit may be interpreted as a lack of interest in continuing the program’s accreditation status or Preliminary Approval from the Council and may result in the Council taking adverse action against the program.

Programs which are denied an accreditation status or Preliminary Approval 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 accreditation status or Preliminary Approval 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”).

**Scope**

- Professional Optometric Degree Programs
- Optometric Residency Programs
- Optometric Technician Programs
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 status or Preliminary Approval 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 status or Preliminary Approval must submit its intention to withdraw including the effective date of the withdrawal in writing to the Director of the ACOE via email (accredit@theacoe.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 status or Preliminary Approval 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 accreditation status or Preliminary Approval will be removed from the listing upon its next update to the directory of accredited programs.

FORMS/ATTACHMENTS

None

DATES OF REVISION/VALIDATION

See Historical Revision History; 06/26/2021; 06/18/2022; 02/25/2023 (no/non-substantive changes)

Teach-Out Process

POLICY

When a program voluntarily withdraws from or loses its accreditation status or Preliminary Approval, or it has or is anticipated to cease operations, it either must remain open until all enrolled students have completed the program or it must reach agreement(s) with another ACOE-accredited program(s) to teach-out the remainder of the program.

As specified in ACOE Policy and Procedure “Adverse Actions,” the Council may maintain the program’s accreditation status or Preliminary Approval 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.

NOTE – italicized words/acronyms are included in the Glossary
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.

A program undergoing a teach-out process must comply with applicable requirements for teach-out agreements in effect for the sponsoring institution.

**Scope**

☒ Professional Optometric Degree Programs
☐ Optometric Residency Programs
☒ Optometric Technician Programs

**Guidelines**

None

**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 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.

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 its *accreditation status* or *Preliminary Approval*, 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.

**FORMS/ATTACHMENTS**

None

**DATES OF REVISION/VALIDATION**

06/18/2022 (initial version); 02/25/2023 (no/non-substantive changes)

**Required Notifications and Timing**

**POLICY**

**Accreditation-Related Decisions**

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

The letter will include whether and what specific *accreditation status* or *Preliminary Approval* status 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 (reference ACOE Policy and Procedure “Council Review of Evaluation Reports and Subsequent Decisions”).

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 timeframe for
coming into compliance with any unmet Standards (reference ACOE Policy and Procedure “Timeframe for Compliance with Standards”).

If applicable, the letter will also contain a statement regarding procedures for requesting reconsideration and/or appeal of the Council’s accreditation decision (reference ACOE’s Policies and Procedures “Reconsiderations” and “Appeals of Accreditation Decisions”). The letter will specify 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 status or Preliminary Approval 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 status or Preliminary Approval status of a program, no later than thirty (30) days after it makes the decision, the ACOE will notify:

- 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 will provide 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 will provide 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 status or Preliminary Approval status of a program, the program is required to disclose such action within seven (7) business days of receipt to all current and prospective students and/or residents. The notice from the ACOE 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 status or Preliminary Approval status of a program becomes final, the ACOE will provide 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 will provide 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 status or Preliminary Approval 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 will be made available to:

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

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

Accreditation-Related Actions Associated with Withdrawals and Expirations
In the case a program decides to withdraw voluntarily from an accreditation status or Preliminary Approval status, or lets its accreditation status or Preliminary Approval 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 status or Preliminary Approval 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 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.

SCOPE
☒ Professional Optometric Degree Programs
☒ Optometric Residency Programs
☒ Optometric Technician Programs
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.

PROCEDURE
Notifications and accompanying documents will be 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 will be sent via email.

Notifications to the public will be made via the ACOE’s website (www.theACOE.org). The website posting includes the date the notification is posted.

FORMS/ATTACHMENTS
None

DATES OF REVISION/VALIDATION
See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

Program Interruption

POLICY
The ACOE acknowledges that interruption of an educational program with an accreditation status or Preliminary Approval 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 program must notify the ACOE 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 good cause to extend the period of time.

The program’s 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.

SCOPE
☒ Professional Optometric Degree Programs

NOTE – italicized words/acronyms are included in the Glossary
GUIDELINES
None

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

The program will submit, 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/or 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.

FORMS/ATTACHMENTS
None

DATES OF REVISION/VALIDATION
See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)

Residency Program Inactivity or Deficiency

POLICY
In the course of reviewing an optometric residency program, the ACOE may withdraw the program’s accreditation status under the following circumstances:

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

SCOPE
☒ Professional Optometric Degree Programs
☒ Optometric Residency Programs

NOTE – italicized words/acronyms are included in the Glossary
Optometric Technician Programs

GUIDELINES
None

PROCEDURE
Initiated adverse actions associated with this policy are typically the result of recommendations of the Optometric Residency Committee.

In the Council’s next regular meeting, the Council will make its determination as to whether it formally approves 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 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; 02/25/2023 (no/non-substantive changes)

Evaluation of “On the Campus” Residencies

POLICY
When more than one optometric residency program 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” optometric residency program is an entity which the school or college identifies as a single optometric residency program, with more than one area of emphasis. Each of these emphasis areas must provide for at least one (1) residency position. An umbrella optometric 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 optometric residency program 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.

SCOPE
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.

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, then 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 applicable to all programs.

FORMS/ATTACHMENTS
None

DATES OF REVISION/VALIDATION
See Historical Revision History; 06/18/2022; 02/25/2023 (no/non-substantive changes)

Financing the Accreditation Process

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; and
  - administrative fees are charged annually to professional optometric degree programs in Stage One designation, Stage Two designation, or Preliminary Approval.
- 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 published on the ACOE website.

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

SCOPE
☒ Professional Optometric Degree Programs
☒ Optometric Residency Programs
☒ Optometric Technician Programs

NOTE – italicized words/acronyms are included in the Glossary
GUIDELINES
None

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 may 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 designation, Stage Two designation, accreditation status, or Preliminary Approval status of the program(s) at its next scheduled meeting if payment is not received.

FORMS/ATTACHMENTS
None

DATES OF REVISION/VALIDATION
See Historical Revision History; 06/26/2021; 06/18/2022; 02/25/2023 (no/non-substantive changes)

Reconsiderations

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 following the program’s receipt of notification of the adverse action or determination of Accredited with Conditions, 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 status or Preliminary Approval 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 will be 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 will consider 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 will notify the program in writing the result of its consideration of the program’s petition
for reconsideration. The notification will include the program’s right of appeal along with the
procedures associated with requesting an appeal, if applicable.

FORMS/ATTACHMENTS
None

DATES OF REVISION/VALIDATION
See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023
(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:
  o the Council’s decision-making was arbitrary, capricious, or not supported by evidence provided in the record, and/or
  o 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, then 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 affirm, amend, or to remand the matter to the Council for further consideration.

The ACOE will not change the program’s accreditation status or Preliminary Approval 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

**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.

**FORMS/ATTACHMENTS**

None

**DATES OF REVISION/VALIDATION**

See Historical Revision History; 06/26/2021; 02/27/2022 (no/non-substantive changes); 02/25/2023 (no/non-substantive changes)
Glossary

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

**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.

**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.

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

**administrative probation** -- A condition that may be placed on a program holding Stage One designation, Stage Two designation, Preliminary Approval, 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 terminated or its Preliminary Approval or accreditation status being withdrawn by Council.

**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.

**adverse action** -- An official Council action resulting in the denial or withdrawal of initial accreditation status, continued accreditation status, or Preliminary Approval status.

**Affiliated school or college of optometry** -- A school or college of optometry holding an accreditation status from the ACOE that has educational responsibility for an optometric residency program 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.

**AOA** -- American Optometric Association.

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

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

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

**BAA** -- Business Associate Agreement.

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

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

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

**didactic activity** -- The acquisition of advanced clinical knowledge, techniques or procedures via delivery methods such as lectures, journal clubs, courses or workshops.
**director of residencies (residency director)** -- The individual at the affiliated school or college of optometry who is administratively responsible (regardless of title) for the overall quality of the optometric residency program(s) of that school or college of optometry.

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

**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.

**EC** -- Executive Committee.

**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.

**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.

**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.

**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.

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

**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.

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

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

**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.

**institutional accrediting agency/body** -- Accrediting agency that is a member of the Council of Regional Accrediting Commissions and is accepted by the ACOE for purposes of meeting its
requirements related to institutional accreditation (may also be referred to as a regional accrediting body).

**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.

**liaison** -- a member of the Council designated to support an evaluation visit team when neither the chair nor members of the evaluation visit team are Council members. The liaison prepares as if he/she were a member of the team, serves as a resource to the evaluation visit team, approves the draft evaluation report, and presents the draft evaluation report for consideration to the Council.

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

**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.

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

**NBE0** -- National Board of Examiners in Optometry

**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.

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

**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.

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

**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.

**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.

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

**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).

**preaccreditation** -- a classification from a USDE-recognized accrediting agency (such as the ACOE) that indicates the program or institution is within the scope of the agency’s recognition from the USDE and subject to criteria specified in the Code of Federal Regulations Part 602; preaccreditation signals that an unaccredited program or institution is progressing toward accreditation within a reasonable period of time.
Preliminary Approval – An ACOE classification that is equivalent to the USDE’s preaccreditation classification. This classification indicates the professional optometric degree program 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.

**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.

**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.

**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.

**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.

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

**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.

**Recognized Accrediting Agency**-- an accrediting agency recognized by the USDE.

**Recommendations** -- Relate to areas where the program is not completely in compliance with Council accreditation Standards.

**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.

**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.

**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.

**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.

**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.

**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.
**Stage One designation** - A classification granted to a proposed professional optometric degree program indicating that the proposed program has demonstrated a complete and sufficiently developed needs assessment, feasibility study, and risk assessment. The Stage One designation classification does not provide any rights or privileges of accreditation and is not a formal preaccreditation status. The proposed program has approval to apply for Stage Two designation.

**Stage Two designation** - A classification granted to a proposed professional optometric degree program indicating that the proposed program’s planning and development are sufficient to warrant an on-site evaluation review in consideration of Preliminary Approval Status. The Stage Two designation classification does not provide any rights or privileges of accreditation and is not a formal preaccreditation status.

**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)

**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.

**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.

**substantive change** -- New policies or practices 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, content, and/or mode of delivery of the program, including whether the change applies to all students in a cohort, a subset of students in a cohort, or to a new cohort being separately defined; and/or (4) resources available to the program needed to fulfill its mission, goals, and objectives.

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

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

**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.

**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.

NOTE – italicized words/acronyms are included in the Glossary
**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.

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

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