

Spring 2014

Medical Laboratory Services 2014 HSC Self-Study & Documents

University of New Mexico - Health Sciences Center

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SELF-STUDY REPORT PAPER REVIEW

Clinical Laboratory Scientist/Medical Technologist

Name of Program: University of New Mexico Health Sciences Center

City, State: Albuquerque, NM

Program Director: Leslie A. Danielson

Sponsoring Institution Program Fact Sheet is complete. YES NO

If a consortium program, please list what participating entities are included in Self-Study: NA

Participating Entity	City/State	Consortium Education Coordinator

I. SPONSORSHIP

Academic Affiliates <input type="checkbox"/> None	City/State
New Mexico VA Health Care System	Albuquerque, NM
Quest Diagnostics	Albuquerque, NM
TriCore Reference Laboratories	Albuquerque, NM
USPHS Acoma-Canoncito-Laguna Hospital	San Fidel, NM
Christus St. Vincent Regional Medical Center	Santa Fe, NM
Espanola Hospital	Espanola, NM
Fort Defiance Indian Hospital	Fort Defiance, AZ
Gila Regional Medical Center	Silver City, NM
Holy Cross Hospital	Taos, NM
Lea Regional Medical Center	Hobbs, NM
Rehoboth McKinley Christian Health Care Services	Gallup, NM
San Juan Regional Medical Center	Farmington, NM
New Mexico Department of Health, Scientific Laboratory Division	Albuquerque, NM

COMMENTS: Make sure consistency is maintained when listing the clinical/academic facilities. Either list Reference laboratories as an entire entity or each laboratory individually. For example, in one area TriCore Reference Laboratories are combined as an entire unit and in another each facility is listed separately. Also, Espanola Hospital is listed as a clinical facility on the sponsoring institution program fact sheet and not listed for standard 1 on the clinical facility list document.

CLS/MT Paper Review

Clinical Affiliate(s) <input type="checkbox"/> None	Clinical Facility Fact Sheet is included		Signed, current affiliation agreement is included		A list of capital (major) equipment is included		A list of facility specific required textbooks is included			Access to periodicals is explained		Instructional resources are included		Objectives & evaluations utilized exclusively by the facility are included			Unique rules & policies governing student behavior are included			A list of safety features is included if site is not JCAHO and/or CAP, and/or COLA accredited		
	Y	N	Y	N	Y	N	Y	N	NA	Y	N	Y	N	Y	N	NA	Y	N	NA	Y	NO	N/A
Quest	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TriCore	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Gila Reg.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lea Reg	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Rehoboth	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Christus	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
USPHS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fort Defiance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
San Juan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
New Mexico	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Comments:

Be sure contracts are current. For example, the Quest contract is currently being re-negotiated and signatures are being obtained. Standard 1 documentation pertaining to textbooks, periodicals, instructional resources, objectives and evaluations is only listed under the QUEST clinical affiliate although it applies to all clinical affiliates. To eliminate confusion, attach that same document for all clinical affiliates. Also, no signed and current contracts are attached. Finally, NM Scientific is accredited by CLIA and safety features may need to be included.

**

CLS/MT Paper Review

Clinical Affiliate(s) <input type="checkbox"/> None	Clinical Facility Fact Sheet is included		Signed, current affiliation agreement is included		A list of capital (major) equipment is included		A list of facility specific required textbooks is included			Access to periodicals is explained		Instructional resources are included		Objectives & evaluations utilized exclusively by the facility are included			Unique rules & policies governing student behavior are included			A list of safety features is included if site is not JCAHO and/or CAP, and/or COLA accredited		
	Y	N	Y	N	Y	N	Y	N	NA	Y	N	Y	N	Y	N	NA	Y	N	NA	Y	NO	N/A
Holy Cr	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:																						

CLS/MT Paper Report

1. The sponsoring institution (or at least one participating entity in the case of a consortium or joint venture) is accredited by recognized regional and/or national agencies. YES NO
- The clinical and/or academic affiliates are accredited by recognized regional and/or national agencies. YES NO NA
- A clear description of the relationship between affiliates and the sponsor is provided. YES NO NA
- All provisions of the affiliation agreement(s) are active (current) with written documentation of the following items: NA
- A. General:
- 1. Reason for agreement YES NO
 - 2. Responsibilities of the academic facility YES NO
 - 3. Responsibilities of the clinical facility YES NO
 - 4. Joint responsibilities YES NO
- B. Specific:
- 1. Supervisory responsibilities for the students YES NO
 - 2. Student professional liability coverage YES NO
 - 3. Student health and safety policies YES NO
 - 4. Provision for renewal YES NO
 - 5. Termination clause providing for program completion of enrolled students YES NO

COMMENTS:

2. The education program is established in a:
- College or university
 - Hospital or medical center
 - Medical laboratory
 - Consortia or Joint Venture
 - Other institution that meets comparable standards for education in clinical laboratory sciences

COMMENTS:

3. The sponsor(and participating entities, in cases of consortia) assumes primary responsibility for:
- Planning curriculum YES NO
 - Selecting course content YES NO
 - Coordinating classroom teaching YES NO
 - Coordinating applied education YES NO
 - Appointing faculty to the program YES NO
 - Receiving and processing applications for admission YES NO
 - Granting the baccalaureate or higher degree or certificate YES NO

CLS/MT Paper Report

COMMENTS:

- 3A. The sponsor(and participating entities, in cases of consortia) is responsible for providing assurance that the activities assigned to students in the clinical setting are educational. YES NO NA

COMMENTS:

- 3B. Documented, ongoing communication between representatives of the sponsor(and participating entities, in cases of consortia) and an affiliate is included. YES NO NA

COMMENTS:

II. RESOURCES

4. Number of students admitted per year: **6-10 annually**
Admission date(s): **Jan, August**
Instructor/student ratio (lecture): **21:1**
Instructor/student ratio (student laboratory): **10.5:1** NA
Instructor/student ratio (clinical laboratory): **1:1** NA

COMMENTS:

5. Financial resources are adequate for the continued operation of the educational program. YES NO

An institutionally approved budget is submitted, **OR** there is a written statement of continued financial support for the educational program from an executive officer of the sponsor(and participating entities, in cases of consortia). YES NO

COMMENTS:

- 6A. Descriptions of the following are submitted:
- | | |
|--------------------------|---|
| Classrooms/lecture areas | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| Administrative offices | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| Clinical facilities | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA |
| Student laboratories | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA |

A description of laboratory safety features is included for:

- | | |
|--|---|
| Student laboratories | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA |
| Clinical facilities (Only required if the facility is <u>not</u> accredited by JCAHO, and/or CAP, and/or COLA) | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA |

CLS/MT Paper Report

COMMENTS:

- 6B. Capital (major) equipment and supplies are listed for student instruction YES NO

COMMENTS:

- 6C. Information resources contain current editions of books, periodicals and other reference materials related to all content areas of the curriculum. YES NO

Information resources are accessible to students. YES NO

COMMENTS:

- 6D. Instructional resources include:
Clinical materials YES NO
Reference materials YES NO
Demonstration materials YES NO

COMMENTS:

- 6E. A description of students' access to contemporary computer technology is provided. YES NO

COMMENTS:

III. STUDENTS

7. Applicants and/or students are provided with a clear description of the program and its content YES NO

Current publications include:

- A. Program mission statement YES NO
- B. Program goals and competencies YES NO
- C. Course objectives YES NO
- D. Applied education assignments YES NO NA
- E. Admission criteria, both academic and non-academic YES NO
- F. A list of course descriptions YES NO
- G. Names and academic rank or title of program director and faculty YES NO
- H. Tuition and fees with refund policy YES NO
- I. Causes for dismissal YES NO
- J. Rules and regulations, including appeal procedures YES NO
- K. A listing of clinical facilities YES NO NA
- L. Essential functions YES NO

CLS/MT Paper Report

M. Policies and procedures when applied
experience cannot be guaranteed

YES NO NA

COMMENTS:

8. Admission of students is in accordance with the clearly defined and published practices of the institution.

YES NO

Academic standards and essential functions required for admission to the program are:

Clearly defined

YES NO

Published

YES NO

Provided to prospective students

YES NO

Evidenced by signature page

YES NO

Made available to the public

YES NO

COMMENTS:

9. Documentation of published rules and regulations governing acceptable personal and academic conduct for all academic and clinical settings is included.

YES NO

COMMENTS:

10. Student records are maintained for:
Admissions
Evaluation
Counseling or advising sessions
The period of time designated by any federal and state regulations

YES NO

YES NO

YES NO

YES NO

Individual grades and credits for courses are recorded and permanently maintained by the sponsor (and participating entities, in cases of consortia).

YES NO

COMMENTS:

11. Students are informed of, and have access to, the usual student health care services of the sponsoring institution.

YES NO

The health and safety of students, faculty and patients associated with the educational activities are adequately safeguarded.

YES NO

Emergency medical care is available for students while they are in attendance.

YES NO

COMMENTS:

CLS/MT Paper Report

12. Guidance is available:
- To assist students in understanding and observing program policies and practices YES NO
 - For advising on professional and career issues YES NO
 - For providing counseling or referral for personal and financial problems that may interfere with progress in the program YES NO
- Confidentiality and impartiality are maintained in dealing with student problems. YES NO

COMMENTS:

13. Appeals procedures:
- Are distributed to students upon entering the program YES NO
 - Include provisions for academic types of grievances YES NO
 - Include provisions for non-academic types of grievances YES NO
 - Include a mechanism for neutral evaluation that ensures due process and fair disposition YES NO

COMMENTS:

IV. OPERATIONAL POLICIES

- 14A. Programmatic announcements accurately reflect the program offered. YES NO
- Programmatic announcements include NAACLS' name, address and telephone number. YES NO

COMMENTS:

- 14B. Student recruitment and admission policies are non-discriminatory. YES NO

COMMENTS:

- 14C. Faculty recruitment and employment practices are non-discriminatory. YES NO

COMMENTS:

- 14D. Academic credits and costs are accurately stated, published and made known to all applicants. YES NO

CLS/MT Paper Report

COMMENTS:

- 14E. Policies and procedures for student withdrawal are published and made known to all applicants.

YES NO

Policies and procedures for refunds of tuition and fees are published and made known to all applicants.

YES NO NA

COMMENTS:

- 14F. If more than one level of clinical laboratory science program is offered by the sponsor, the sponsor demonstrates that each program is being conducted to assure appropriate instruction for the students at different educational levels.

YES NO NA

COMMENTS:

- 14G. The program culminates in at least a baccalaureate degree or higher, or in a certificate for the student who otherwise completes the required degree.

YES NO

Granting of the degree/certificate **IS NOT** contingent upon the students passing any type of external certification or licensure examination.

YES NO

COMMENTS:

- 14H. A policy statement related to student complaints and resolution is included.

YES NO

COMMENTS:

- 14I. Program evaluation information is available.

YES NO

COMMENTS:

V. PROGRAM EVALUATION

15. The program has a documented, formal evaluation plan for continually and systematically reviewing the effectiveness of the program.

YES NO

CLS/MT Paper Report

Evaluation includes feedback from:	Frequency:
<input type="checkbox"/> Students	<u>1x/year</u>
<input type="checkbox"/> Employers of Graduates	<u>6 months</u>
<input type="checkbox"/> Faculty	<u>after each course/and 1x/year</u>
<input type="checkbox"/> Graduates	<u>1x/year</u>
<input type="checkbox"/> Exit or Final Exams	<u>1x/year</u>
<input type="checkbox"/> Advisory Committee	<u>2x/year</u>
<input type="checkbox"/> Other: <u>Pathology Department</u>	<u>1x/year</u>

COMMENTS:

16. Outcomes measures from the last three active years are considered in the program evaluation. YES NO NA

COMMENTS:

17. A review of graduation rates is: NA
- Documented YES NO
- Analyzed YES NO
- Used in the program evaluation YES NO

- A review of employment rates is: NA
- Documented YES NO
- Analyzed YES NO
- Used in the program evaluation YES NO

COMMENTS:

18. The results of program evaluations are: NA
- Documented YES NO
- Reflected in the ongoing curriculum development and program modification YES NO
- Followed by an analysis of the effectiveness of any changes implemented YES NO

COMMENTS:

19. **Administrative. No information needed.**

VI. Unique Standards

Resources

- 20A1. Program Director Faculty Fact Sheet is complete. YES NO

CLS/MT Paper Report

COMMENTS:

- 20A2. The Program Director is responsible for program:
- | | | |
|-----------------------|---|-----------------------------|
| Organization | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Administration | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Periodic review | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Planning | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Development | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Evaluation | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| General effectiveness | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |

The program director has input into budget preparation. YES NO

COMMENTS:

- 20A3. The program director's qualifications are:
- | | | |
|--|---|-----------------------------|
| Nationally certified clinical laboratory scientist/
medical technologist | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Master's or doctoral degree | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| At least three years of experience in clinical
laboratory science education | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Date approved by NAACLS: | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |

2001

- Experiences in clinical laboratory science education include:
- | | | |
|--|---|-----------------------------|
| Teaching courses | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Conducting and managing learning experiences | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Evaluating student achievement | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Providing input into curriculum development | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Formulating policies and procedures | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| Evaluating program effectiveness | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |

The program director has knowledge of education methods and administration. YES NO

The program director has knowledge of current accreditation/certification procedures. YES NO

COMMENTS:

- 20A4. Documentation that the program director has a faculty appointment at the sponsoring institution or at each affiliated academic institution is included. YES NO

COMMENTS:

- 20B1. The name(s) comprising the advisory committee are included. YES NO

CLS/MT Paper Report

The relationship of the advisory committee member(s) to the program is stated.

YES NO

COMMENTS:

20B2. A copy of the advisory committee meeting minutes is included indicating that the advisory committee has input into any aspect of the program/curriculum that relates to its current relevancy and effectiveness.

YES NO

COMMENTS:

21. Major clinical/didactic faculty for each laboratory discipline are listed.

YES NO

21A. Faculty responsibilities include participation in:

Teaching courses

YES NO

Supervising applied laboratory learning experiences

YES NO

Evaluating student achievement

YES NO

Developing curriculum

YES NO

Formulating policy and procedures

YES NO

Evaluating program effectiveness

YES NO

COMMENTS:

21B. Faculty Fact Sheets for major clinical/didactic faculty are complete.

YES NO

Faculty Fact Sheets document the qualifications to teach at the appropriate level.

YES NO

A description of how faculty are evaluated is included.

YES NO

COMMENTS:

21C. There is documentation of ongoing professional development to fulfill the instructional responsibilities of the:

Didactic faculty

YES NO

Clinical faculty

YES NO

COMMENTS:

21D1. If a participating entity of a consortium program, the consortium education coordinator is responsible for:

Coordinating classroom teaching and applied education

YES NO NA

Evaluating program effectiveness

YES NO NA

Appropriate communications with the Program Director

YES NO NA

CLS/MT Paper Report

21D2. If a participating entity of a consortium program, the consortium education coordinator's qualifications are:

- Nationally recognized certification equivalent to that required of program director
- Academic degree appropriate to program level
- At least one year of experience in clinical laboratory science education

YES NO NA
 YES NO NA
 YES NO NA

Curriculum

22A. Instruction:

- Follows a planned curriculum or sequence of courses that documents a structured curriculum
- Includes applied (clinical/laboratory) education
- Has clearly written program goals and competencies

YES NO
 YES NO
 YES NO

Title of sample unit: **On-Line Clinical Urinalysis MD Lab 350L-002**

Course syllabi for the sample unit include individual course goals and behavioral objectives.

YES NO

Sample unit includes:

- Cognitive objectives
- Psychomotor objectives (laboratory/clinical)

YES NO
 YES NO

Objectives include clinical significance and correlation

YES NO

Program has affective objectives.

YES NO

COMMENTS:

CLS/MT Paper Report

22B. Instructional Areas:	YES	NO	Unable to determine from the self-study. To be reviewed by the site visit team
The curriculum includes:			
1. Scientific content (either prerequisite or as an integral part of the curriculum)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Pre-analytical, analytical, and post-analytical components of laboratory services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Principles and practices of quality assurance/quality improvement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Application of safety and governmental regulations and standards	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Principles of interpersonal and interdisciplinary communication and team-building skills	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Principles and applications of ethics and professionalism	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Education techniques and terminology	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Knowledge of research design/practice	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Concepts and principles of laboratory operations include:			
a. critical pathways and clinical decision making	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. performance improvement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. dynamics of healthcare delivery systems as they affect laboratory service	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. human resource management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. financial management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS:

22C. Learning Experiences:

Experiences are educational and balanced so that entry level competencies can be achieved.

YES NO

Instruction provides properly sequenced learning experiences.

YES NO

Learning experiences include appropriate:

Instructional material

YES NO

Classroom presentations

YES NO

Discussions

YES NO

Demonstrations

YES NO

Laboratory sessions

YES NO

Supervised practice and experience

YES NO

Experiences at different clinical sites are comparable and appropriate to enable all students to achieve entry level competencies.

YES NO NA

Policies and processes by which students perform

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service work are:

Published

YES NO

Distributed to students

YES NO

Distributed to clinical affiliates

YES NO NA

After demonstrating proficiency, students may be permitted to perform procedures under qualified supervision.

YES NO

Objectives are present for learning experiences outside of normally scheduled hours.

YES NO NA

Any service work by students in clinical settings outside of academic hours is non-compulsory.

YES NO

COMMENTS:

22D. Evaluations:

Written criteria for passing, failing and progression in the program are:

Documented

YES NO

Given to each student at the time of entry into the program

YES NO

Sample unit evaluation systems are related to objectives.

YES NO

Frequency of student evaluation in:

Lectures:

after course completion

Student laboratories:

after course completion

Clinical laboratories:

upon checklist completion

COMMENTS: **Be specific with a time frame regarding the frequency of student evaluation. For example, "all lecture courses are evaluated annually upon course completion" .**

(Standards adopted: 2001)

(Changes Approved: April 2009)

(Released: June 2009)

Summary Page

Important Notice:

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

NOTE: This page is compiled on the basis of information supplied to the paper reviewer by the program director and other officials. **NAACLS makes no representation as to its accuracy. The responsibility for accuracy of the information provided to the paper reviewer rests solely with the program director and other officials.**

List of missing information/or documents (List and detail by the appropriate Standard):

Standard 1 Signed Clinical affiliate agreements

Standard 1 Documentation for textbooks, periodicals, resources, etc. is only listed for QUEST

Standard 1 Safety features for NM Scientific Laboratories

Standard 20A Letter stating date that NAACLS approved the program director

Concerns to be addressed by the site visit team: (List and detail by the appropriate Standards number)

Standard 1 Verify clinical affiliation agreements are signed and current.

Standard 1 for all clinical affiliates lists the required textbook, periodicals, and instructional resources documentaion only under the QUEST clinical affiliate. This documentation may need to be listed for all affiliates individually to eliminate confusion.

Standard 20 Letter stating date that NAACLS approved the Program Director. If letter is unavailable, clearly state the date in the exact lay terms.

Standard 22B Verify specific units of instruction

Additional comments:

Maintain consistency with clinical affiliate listings

SIGNATURE PAGE

Please complete and attach as the last page of the Paper Review

Name of Program: Univ. of New Mexico

City, State: Albuquerque, NM

Program Level: MLS/Clinical Lab Sciences

Date: 03/14/2014

Paper Reviewer:

Name/Title: **LaToya Richards Moore, Ph.D., MLS (ASCP)cm**

Institution: University of Mississippi Medical Center

Address: 2500 North State Street

City/State/Zip: Jackson MS 39216

Telephone: 601-984-6341

Email: lrichards@umc.edu

Signature: *LaToya Richards Moore, Ph.D., MLS (ASCP)cm*