

National Accrediting Agency for Clinical Laboratory Sciences

A NON-PROFIT ORGANIZATION

October 8, 2015

Anna Solley, EdD President Phoenix College 1202 W. Thomas Road Phoenix, AZ 85013-

Dear President Solley:

Enclosed is the NAACLS Board of Directors' official accreditation award for your Histotechnician program's accreditation as decided at its September 18, 2015 meeting.

The Board of Directors' award is based on the continuing accreditation review process that included a site visit of your program in Spring 2015.

Accreditation for your program will continue until October 31, 2025. As a result, your program will commence the continuing accreditation process with submission of the Self-Study Report on October 1, 2024 and the scheduling of a site visit during Spring 2025. We provide this information to assist you in your program's administrative and financial planning.

This letter and the accompanying award represent formal accreditation by NAACLS. The NAACLS Certificate of Accreditation will be forwarded to the Program Director.

Sincerely,

Fred Rodriguez, MD

President, NAACLS Board of Directors

Fred H Rodos

cc: Rochelle Helminski, MS, MLS(ASCP)CM, Program Director

Sharon Halford, PhD, Dean

NAACLS BOARD OF DIRECTORS' ACCREDITATION AWARD

The Histotechnician Program of **Phoenix College** in **Phoenix, Arizona** is awarded Continuing Accreditation for **ten (10) years.**

This program must submit an Annual Report Action Plan by <u>April 1, 2016</u> due to outcomes measures that fell below NAACLS' approved benchmarks detailed in the Standards Compliance Guide. The Annual Report Action Plan narrative must detail the program's plan to manage the following concern:

- NAACLS Benchmark for ASCP Certification Rates (Program's three year rolling average pass rate of 58%; NAACLS Benchmark is 75%.)
 - 1. Program's statistics are: 2011 50%; 2012 71%; 2013 50%

The Annual Report Action Plan must also submit the following materials for <u>one course</u> in the curriculum:

- Syllabus
- Course goals
- Measureable objectives in the cognitive, psychomotor, and affective domains
- Evaluation systems that correlate with objectives

The Annual Report Action Plan will be reviewed by the review committee, and the program will be provided feedback. Results from the program's Annual Report Action Plan must be provided and analyzed in the "Year 5 Interim Report".

The program director has submitted the following action plan thus far:

Phoenix College HT Program Action Plan

Goal: Increase certification pass rate to greater than 75% annually

Tasks with Target Date:

- 1) Effective summer 2015, clinical practicums will include final exams, which students must pass with at least an 80%.
- By September 2015, all of the program course examinations will undergo curriculum mapping, to ensure the evaluation tools have appropriate taxonomic levels for entry level competencies.
- 3) Annually, the ASCP BOC exams scores will be evaluated for areas of improvement. Any subject area category with more than 50% failure rate will undergo curriculum revisions, including but not limited to, additional lectures, assignments, quizzes, exam questions, and laboratory practice.

4) Annually, program curriculum will be evaluated for improvement. Quiz questions and assignments will be evaluated for improvement based on statistical analysis of percentage correct answers. Quiz questions and assignments with less than 50% of the students answering correctly will be evaluated for revision.

A Year 5 Interim Report must also be submitted to the NAACLS office no later than **October 1, 2019**. The Interim Report must include the following:

- 1. Summary of last five years of annual reporting.
- 2. Narrative on how outcomes measures are analyzed and used in program assessment and continuous quality improvement of the program (outcomes measures that cannot be quantitatively analyzed are to be included in this narrative). The results of program outcomes measures and assessment must include findings from graduate and employer feedback and be:
 - Reflected in ongoing curriculum development, resource acquisition/allocation, and program modification.
 - Analyzed to demonstrate the effectiveness of any changes implemented.
- 3. Narrative describing how significant changes in annual reporting are handled, and how any actions taken as a result of the changes are used in program assessment and continuous quality improvement of the program.

Programs that are required to provide an Annual Report Action Plan as part of NAACLS' Annual Reporting process (refer to the *NAACLS Guide to Accreditation and Approval*) must submit additional required materials as part of the "Year 5 Interim Report".

An unsatisfactory "Year 5 Interim Report" will result in a requested Progress Report within six to twelve months, possible probationary accreditation, and possible elimination of a ten year accreditation award after the next review.

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Failure to submit the required reports by the due date may result in Administrative Probation.

Rochelle Helminski, MS, MLS(ASCP)CM is recognized as Program Director.

Fred H Rodon & Vianne M. Cearlock

Fred Rodriguez, MD President, NAACLS Board of Directors

Dianne M. Cearlock, PhD Chief Executive Officer