

Guidelines for the Review of the International Optometric Bridging Program

Consistent with the May 2010 GUIDELINES FOR REVIEWS OF ONGOING AND NEW ACADEMIC PROGRAMS AT THE UNIVERSITY OF WATERLOO (Guidelines), this review of the International Optometric Bridging Program (IOBP) is being conducted for a number of different reasons. Firstly, this review is expected to assist the IOBP to achieve and maintain the highest possible standards of academic excellence. This will be achieved by systematically reflecting on the current strengths and weaknesses, and by looking forward to determine what actions would further enhance the quality of the IOBP. A second purpose is to meet public and stakeholders accountability expectations through a credible, transparent, and action-oriented review process. A third purpose is to assess the quality of the IOBP relative to similar programs in Ontario, Canada and internationally. Finally, reviews of this type generally serve to foster an institutional culture that understands and values the benefits of program reviews.

While the Guidelines have been referred to in developing the following protocols, several amendments have been made to make this process more applicable to the IOBP. These changes are appropriate because the university's guidelines for reviews of academic programs are meant for degree-granting programs while IOBP is a certificate-granting program more in line with continuing professional education. Furthermore, the time-frame for this review has been significantly truncated.

It is expected that the review will consist of a self-appraisal process supplemented by stakeholder input and a site visit by reviewers external to the IOBP. Included in the review will be an analysis of the following factors:

- i. Mission, goals and objectives
- ii. Curriculum
- iii. Governance, administration and finances
- iv. Faculty
- v. Students
- vi. Facilities, equipment and resources
- vii. Clinic management and patient care policies

It is expected that the review will include:

- i. A description and explanation of the core features that determine academic excellence
- ii. An evaluation of the IOBP's ability to achieve academic excellence
- iii. An articulation of the relationship between the learning objectives and the goals of the IOBP
- iv. Information relating to the "success" of participants
- v. Initiatives to further enhance the quality of the IOBP.

To further assist in the conduct of this review, the STANDARDS OF ACCREDITATION FOR PROFESSIONAL OPTOMETRIC DEGREE PROGRAMS (Standards) published by THE ACCREDITATION COUNCIL ON OPTOMETRIC EDUCATION (ACOE) will be used with necessary modification again

recognizing that the IOBP is a bridging program and not a degree granting program. Specifically, the following amended ACOE standards will be included in this review.

Standard I – Mission, Goals and Objectives

1.1 The program must have a statement of its mission, and the goals and objectives by which it intends to fulfill its mission.

1.2 The mission, goals, and objectives must give emphasis to a program whose students will possess the attributes, knowledge, skills, and ethical values required for entry level practice of optometry in Canada.

1.3 The program must identify and use outcomes measures to evaluate its effectiveness by documenting the extent to which its goals and objectives have been met, and use such assessment to improve its performance. Such measures should include, but not be limited to, graduation rates, CSAO/CACO scores, licensing examination results and career placement.

1.4 The program must publish current and reliable information on its performance, including student achievement, as defined by the program.

1.5 As part of its ongoing process of planning and self-study, the school must review on a regular basis its program mission, goals, and objectives and revise them as necessary.

Standard II – Curriculum

2.1 The optometric curriculum must fulfill the intent of the mission statement of the program to prepare its students for entry level practice in Canada.

2.2 Each student's achievement of curricular outcomes must be assessed.

2.3 The program must engage in periodic and systematic curricular evaluations by students, faculty and administrators.

2.4 Basic science instruction must provide a review of knowledge in physical, biological and behavioral sciences essential for clinical optometric care.

2.5 Clinical instruction and practice must consist of didactic, laboratory, and supervised clinical experience in the examination, diagnosis, treatment, and management of patients.

2.6 The quantity, quality and variety of experiences in the supervised care of patients must be sufficient to assure clinical competency for entry level practice in Canada.

2.7 The program must establish a set of clinical competencies for entry level practice and evaluate student competencies such that students demonstrate the ability to:

2.7.1 identify, record and analyze pertinent history and problems presented by the patient.

2.7.2 demonstrate the necessary skills to examine and evaluate the patient to arrive at a rational diagnosis.

2.7.3 formulate a treatment and management plan and understand the implications of various treatment and management options.

2.7.4 provide preventive care, patient education and counseling.

2.7.5 recognize when it is necessary to obtain a consultation and to coordinate care provided by healthcare providers and/or other professionals.

2.7.6 demonstrate knowledge of professional, ethical, legal, practice management, and public health issues applicable to the delivery of optometric care.

2.7.7 effectively communicate orally and in writing with other professionals and patients.

2.7.8 demonstrate basic life support skills for emergencies encountered in optometric practice.

2.8 There must be written and signed affiliation agreements between the program and its clinical affiliates or externship sites that define, at a minimum, the responsibilities of each party related to the educational program for optometry students.

2.8.1 The program must establish criteria for the selection of clinical affiliates or externship sites.

2.8.2 The program must use a monitoring system to assure that clinical affiliates or externship sites are providing clinical experiences that meet the program's mission, goals, and objectives.

2.8.3 The program must provide educational direction to the externship and affiliated sites.

Standard III – Governance, Regional Accreditation, Administration, and Finances

3.1 The governance structure of the program must clearly assign authority and responsibility for the formulation and implementation of policies that enable the program to fulfill its mission.

3.1.1 There must be policies concerning governance issues including, but not limited to, conflict of interest, due process, disclosure, non-discrimination, confidentiality of records and fiscal accountability.

3.1.2 The program must be conducted and organized in such a way as to facilitate open communication among administrators, faculty, students, staff and other constituencies.

3.1.3 The institutional structure must clearly assign authority and responsibility for the hiring, evaluation, retention and discharge of the program's faculty and administrative staff.

3.2 The program's director must have a professional optometric degree, and must be qualified to provide leadership in optometric education and patient care.

3.3 The program's director must have input into the fiscal management of the program.

3.4 There must be clearly defined reporting relationships, performance expectations and assessment procedures for all IOBP administrators.

3.5 The program must possess the financial resources required to develop and sustain the program on a continuing basis.

3.5.1 The program must utilize sound and generally accepted financial management procedures to assure effective monitoring, control and accountability of its fiscal resources.

Standard IV – Faculty

4.1 The number and qualifications of faculty members must be sufficient to meet the stated mission and goals of the program.

4.1.1 Faculty members must hold an earned terminal degree or first professional degree from an institution accredited by a recognized agency or its foreign equivalent to be licenced or registered to practise in a province or territory in Canada.

4.2 A system must be in place to enable faculty participation in curriculum development for the program.

4.3 The program must use a faculty evaluation process that provides feedback on the performance of each faculty member.

4.4 Faculty recruitment and retention must be consistent with the needs of the program.

Standard V – Students

5.1 There must be a systematic process that results in the admission of a qualified student body.

5.2 The program must publish the criteria considered in selecting students who have the potential for success in the program and the profession.

5.2.1 Policies and procedures must be adhered to during the admissions process.

5.3 The program must provide information to incoming students regarding pre-matriculation health standards, access to health care, personal counseling, and standards for immunization against infectious disease.

5.4 There must be an institutional commitment to serving students, including an organizational element devoted to student affairs.

5.4.1 At a minimum, student services must include academic counseling, learning support services, career placement assistance, and access to information technology support.

5.5 The program must maintain an orderly, accurate, confidential, secure and permanent system of student records.

5.6. The program's publications, written policies, advertising, and student recruitment must present an accurate representation of the program.

5.6.1 The program must publish information on policies and procedures on academic and professional standards, grading, attendance, disciplinary conduct, retention, dismissal and reinstatement, non-discrimination policy, due process, academic calendar, tuition, fees, refund policy, honors, scholarship and awards, and other related matters.

5.6.2 The program must publish and adhere to policies and procedures regarding student grievances and must maintain records of receipt, investigation, adjudication and resolution of such complaints.

5.7 Students must be allowed access to faculty and administrators of the program.

Standard VI – Facilities, Equipment and Resources

6.1 The teaching and patient care facilities and equipment must be appropriate to fulfill the mission, goals and objectives of the program.

6.2 The program must provide access to well-maintained library and information facilities, sufficient in size, breadth of holdings, and information technology to support the program's education and other missions.

6.3 The library and information services staff must be supportive of the needs of the faculty, residents and students of the program.

Standard VII – Clinic Management and Patient Care Policies

7.1 The program must have, or be assured the use of, a clinical patient care program sufficient to fulfill the mission, goals and objectives.

7.2 A coordinated system of clinical governance, administration, management and evaluation must be in place for clinics managed by the program.

7.2.1 A clinic manual which includes all clinic policies and procedures must be published and accessible to student clinicians, faculty and staff.

7.2.2 The program must verify credentials of faculty members who serve in the clinic.

7.2.3 The program must define the scope and extent of clinical privileges for each faculty member who serves in the clinic.

7.2.4 The patient record must allow for efficient review of the patient's condition and any previous care that has been provided at the program's clinical facility.

7.2.5 The clinic must conduct an ongoing, planned quality assessment, improvement and compliance program, which evaluates the provision of health, eye and vision services and provides for remediation when deficiencies are identified.

7.2.6 The clinic must publish or post policies and procedures on the patient's rights and responsibilities.

7.2.7 The clinic must have written procedures for receiving and resolving patient complaints, grievances and appeals.

7.2.8 Clinic programs must have established procedures to address risk management such as liability, security and safety.

7.3 Eye and vision care services provided must be consistent with accepted and well-established health care standards such as clinical practice guidelines.

Self Study

Consistent with the Guidelines, the self-appraisal process should be reflective and searching. Attention should be given to (1) describing and (2) explaining core features that contribute to academic excellence, (3) evaluating the effectiveness of initiatives to achieve academic excellence, (4) assessing whether students are able to demonstrate optometric competencies at the entry-to-practice level, (5) articulating the relationship of the learning objectives/outcomes to entry-to-practice competencies and (6) prescribing additional initiatives to enhance quality of the IOBP.

Key characteristics of the self study should include identification of the core features of the IOBP; a balanced and critical review of strengths and weaknesses; systematic representation of different perspectives (faculty, staff, students, employers); intended learning objectives and outcomes; demonstrated achievement of entry-to-practice competencies by its students; and if information is available, where it sits relative to counterpart programs in Ontario, Canada and internationally.

Review Team

Following the Guidelines, the review team should include two external reviewers and one from the University of Waterloo. Ideally, members of the review team will have had experience with accreditation of professional programs and/or bridging programs, optometric education or with health policy analysis. The Guidelines require that review team members must be independent of the program. ACOE policies expect that reviewers will be free of any real or potential conflict of interest. It is recommended that the review team be made up of one person from another bridging program in Ontario, an optometrist from another ACOE –accredited school, and representative of the University of Waterloo.

Site Visit

Both the Guidelines and the ACOE accreditation process include a site visit. The primary function of the evaluation team is program analysis. It is anticipated that the site visit for the IOBP will be completed in one and a half to two days. The site visit will be expedited by providing the reviewers with a copy of the report generated from the self-assessment process prior to the site visit.

During the site visit in addition to a tour of the facility, meetings with the Directors of the School of Optometry and the IOBP, faculty, staff and current and former students in the program will be arranged.

Report

Following the site visit, a report will be prepared by the review team. Following the Guidelines, the review report for the IOBP should address the following points:

- consistency of the program with the general objectives of the institution's mission and development plan and with the standards, educational goals and learning objectives/ outcomes of the program, so that students may demonstrate the level of achievement expected.
- appropriateness of the admission requirements, e.g., achievement and preparation, for the educational objectives of the institution and the program.
- appropriateness of the program's structure and curriculum for its educational objectives.

- appropriateness of the mode of delivery and the methods used for the evaluation of student progress.
- appropriate utilization of the existing human/physical/financial resources.
- appropriateness of the program's self-assessment relative to other departments/schools, provincially, nationally and internationally.
- the effectiveness of the IOBP in meeting its goals.
- strengths and weaknesses of the IOBP, with special regard to its: (1) monitoring and judging effectiveness of teaching; (2) assuring quality in the educational experience offered to students; (3) demonstrating that graduates achieve the level of performance expected.
- quality of faculty (qualifications, research and scholarly record).
- students: applications and registrations, attrition rates, average time-to-completion, graduation rates, registration/licensure rates.
- graduates: post-graduation employment and alumni reports on program quality.
- recommendations for the future.

Consistent with the Guidelines, a report will be most useful to the University/School/IOBP if it is “constructively critical”, identifying strengths that should be protected and enhanced, weaknesses that deserve attention, and new opportunities. When weaknesses are identified, the reviewers may provide suggestions regarding how to address those weaknesses. Where appropriate, the report may also include suggestions for what the IOBP could do by itself or in collaboration with other agencies to use limited resources more effectively and efficiently, along with considering where new resources would represent a strategic investment to allow the IOBP to improve in quality.

The review team's report shall be submitted to the Associate Vice-President, Academic Programs, with copies sent to the Dean of Science, Director of the School and Director of the IOBP.

Endorsed by Geoff McBoyle
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