

National Accrediting Agency for Clinical Laboratory Sciences

A NON-PROFIT ORGANIZATION

October 8, 2015

W. Hubert Keen, PhD
President
Farmingdale State University of New York
President's Office, Horton Hall 241
2350 Broadhollow Road
Farmingdale, NY 11735

Dear President Keen:

Enclosed is the NAACLS Board of Directors' official accreditation award for your Medical Laboratory Technician 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

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President, NAACLS Board of Directors

cc: Karen M. Escolas, EdD, MS, MT(ASCP), Program Director

Denny Ryman, Dean

NAACLS BOARD OF DIRECTORS' ACCREDITATION AWARD

The Medical Laboratory Technician Program of Farmingdale State University of New York in Farmingdale, NY is awarded Continuing Accreditation for ten (10) years.

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

- 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.
- 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.

Fallure to submit the required report by the due date may result in Administrative Probation.

Karen M. Escolas, EdD, MT(ASCP) is recognized as Program Director.

Fred Rodriguez, MD

Fred H Ros

President, NAACLS Board of Directors

Dianne M. Ceartock, PhD Chief Executive Officer

September 18, 2015



October 4, 2013

W. Hubert Keen, PhD, President Farmingdale State College 241 Horton Hall 2350 Broadhollow Road Farmingdale, NY 11735

Dear President Keen:

Enclosed is the NAACLS Board of Directors' official accreditation award for your Medical Laboratory Scientist program from the September 19-20, 2013 meeting.

This letter represents formal action by NAACLS.

Sincerely,

Gerald A. Phipps

President, NAACLS Board of Directors

cc: Karen M. Escolas, EdD, MS, MT(ASCP), Program Director

Marie Hayden-Miles, PhD, RN, CNE, Dean, School of Health Sciences

Enclosure: NAACLS Board of Directors' Accreditation Award

NAACLS BOARD OF DIRECTORS' ACCREDITATION AWARD

The Medical Laboratory Scientist Program of Farmingdale State College in Farmingdale, New York is awarded Initial Accreditation for two (2) years.

The program is in non-compliance with the following Standard:

Standard 1: Institutional Affiliation

The sponsoring institution (or at least one participating entity in the case of a consortium or joint venture) and affiliates, clinical and/or academic, if any, must be accredited by recognized regional and/or national agencies.

In programs in which the education is provided by two or more institutions, responsibilities of the sponsor and of each affiliate for program administration, instruction, and supervision must be described in writing and signed by both parties. All provisions of the agreement must be active with written documentation of the following items:

- A. General
- 1. Reason for the agreement
- 2. Responsibilities of the academic facility
- 3. Responsibilities of the clinical facility
- 4. Joint responsibilities
- B. Specific
- 1. Supervisory responsibilities for the students
- 2. Student professional liability coverage
- 3. Student health and safety policies
- 4. Provision for renewal
- 5. Termination clause providing for program completion of enrolled students

Rationale: There is no current signed agreement with ICON Labs.

Recommendation for Compliance:

Submit a copy of the signed and dated current agreement for:

ICON Labs

Farmingdale State College Farmingdale, New York

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The program is in marginal compliance with the following Standards:

Standard 14F: If the sponsor offers more than one clinical laboratory

science program the sponsor must demonstrate that each program is being conducted to assure appropriate instruction

for the students at the different educational levels.

Rationale: The levels of instruction for the MLS/MLT are not

differentiated.

Recommendation for

Compliance: Submit documentation that the instruction is at the

appropriate levels when students are at the same institution

and clinical site.

Standard 22A: Curricular Structure

Instruction must follow a plan which documents a structured curriculum composed of general education, basic sciences, and professional courses including applied (clinical) education. The curriculum must include clearly written program goals and competencies and course syllabi which must include individual course goals and objectives.

The curriculum must include all the major subject areas currently offered in the contemporary clinical laboratory. Behavioral objectives which address cognitive, psychomotor, and affective domains must be provided for didactic and applied (clinical practice) aspects of the program and must include clinical significance and correlation. Course objectives must show progression to the level consistent with

entry into the profession.

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Rationale:

Taxonomic levels of objectives do not provide advanced development for MLS level practice. Most objectives are Level 1 or 2 only. Minimal performance/psychomotor objectives are present.

- Cognitive objectives are not at appropriate taxonomic level in Chemistry, Microbiology (Bacteriology, Mycology, Parasitology, Virology) and Immunology / Serology.
- Psychomotor objectives are not at appropriate taxonomic levels in Chemistry, Microbiology, Urinalysis / Body Fluids, Microscopy, Molecular Diagnostics, and Immunology / Serology.
- Psychomotor objectives do not contain measurable action verbs and outcomes in Chemistry.
- Affective objectives are not present.

Recommendation for Compliance:

- Provide cognitive objectives at appropriate taxonomic levels in Chemistry, Microbiology (Bacteriology, Mycology, Parasitology, Virology) and Immunology / Serology.
- Provided psychomotor objectives at appropriate taxonomic levels in Chemistry, Microbiology, Urinalysis / Body Fluids, Microscopy, Molecular Diagnostics, and Immunology / Serology.
- Provide psychomotor objectives that contain measurable action verbs and outcomes in Chemistry.
- Provide affective objectives at appropriate taxonomic levels.

Standard 22C-2:

Student experiences at different clinical sites must be comparable to enable all students to achieve entry level competencies.

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Rationale: Learning experiences at different clinical sites are not

comparable to enable all students to achieve entry level

competencies.

Recommendation

for Compliance: Provide documentation that learning experiences at different

clinical sites are comparable to enable all students to

achieve entry level competencies.

Standard 22D: Evaluations

Written criteria for passing, failing, and progression in the program must be provided. These must be given to each student at the time of entry into the program. Evaluation systems must be related to the objectives and competencies described in the curriculum for both didactic and applied components. They must be employed frequently enough to provide students and faculty with timely indications of the students' academic standing and progress and to serve as a reliable indicator of the effectiveness of instruction and

course design.

Rationale: Affective objectives are not present.

Recommendation

for Compliance: Provide affective objectives at appropriate taxonomic levels.

A Progress Report documenting compliance with the above Standards must be submitted **in triplicate** to the NAACLS office no later than **October 1, 2014**.

This initial program must also submit a Progress Report documenting compliance with the following Standards in triplicate by <u>October 1, 2015</u>.

Standard 15 Systematic Review

There must be a mechanism for continually and

systematically reviewing the effectiveness of the program to include survey and evaluation instruments that incorporate

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feedback from a combination of students, employers, faculty, graduates, exit or final examinations, and accreditation review.

Standard 16 Outcome Measures

A review of outcomes measures (e.g. external certifying examination results, results from capstone projects) from the last three active years must be documented, analyzed and used in the program evaluation.

Standard 17 Graduation and Placement Rates

A review of graduation rates and placement rates must be documented, analyzed and used in the program evaluation.

Standard 18 Program Evaluation and Modification

The results of program evaluations must be documented and reflected in ongoing curriculum development and program modification, followed by an analysis of the effectiveness of any changes implemented.

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

Karen M. Escolas, EdD, MT(ASCP) is recognized as the Program Director.

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The following institutions are recognized as clinical affiliates of the program:

ICON Labs	Farmingdale, NY
North Shore – Long Island Jewish Health System	Lake Success, NY
Core Labs:	
 Forest Hills Hospital 	
Franklin Hospital	Forest Hills, NY
Glen Cove Hospital	Valley Stream, NY
Huntington Hospital	Glen Cove, NY
Manhasset Hospital	Huntington, NY
Plainview Hospital	Manhasset, NY
Southside Hospital	Plainview, NY
осыново поорны	Bayshore, NY
St. Catherine of Siena Hospital	Smithtown, NY
South Nassau Community Hospital	Oceanside, NY
Winthrop Hospital	Mineola. NY

President, NAACLS Board of Directors

Dianne M. Cearlock, PhD
Chief Executive Officer, NAACLS

September 20, 2013