

**AABB Committee on Accreditation - Specialist in Blood Bank Technology/Transfusion Medicine
Document C – On-Site Program Assessment Tool**

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| <p>Accreditation Requirements (2004 edition Standards & Guidelines for Specialists in Blood Bank Technology/Transfusion Medicine)</p> | <p>Sample Assessment Questions (Sample questions are intended as a guide. None are required. Questions used need not be asked directly. Responses may be obtained by other means such as observation or record review.)</p> |
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| <p>I A. Sponsoring Educational Institution A sponsoring institution must be at least one of the following:</p> <ol style="list-style-type: none"> 1. A post-secondary academic institution accredited by an institutional accrediting agency that is recognized by the U.S. Department of Education, and authorized under applicable law or other acceptable authority to provide a post-secondary program, which awards a minimum of a certificate at the completion of the program. 2. A hospital, medical center, transfusion service, blood donor center, or branch of the United States Armed Forces that is accredited by American Association of Blood Banks, which awards a minimum of a certificate at the completion of the program. <p>B. Consortium Sponsor</p> <ol style="list-style-type: none"> 1. A consortium sponsor is an entity consisting of two or more members that exists for the purpose of operating an educational program. In such instances, at least one of the members of the consortium must meet the requirements of a sponsoring institution as described in I,A. 2. The responsibilities of each member of the consortium must be clearly documented as a formal affiliation agreement or memorandum of understanding, which includes governance and lines of authority . | <p>Review:</p> <ul style="list-style-type: none"> • Institutional accreditation documents for the facility. • Formal affiliation agreement or memoranda of understanding for all affiliates or members of consortium • Determine lines of authority or review organizational chart |
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| <p>II. A. Program Goals and Outcomes There must be a written statement of the program’s goals and learning domains consistent with and responsive to the demonstrated needs and expectations of the various communities of interest served by the educational program. The communities of interest that are served by the program include, but are not limited to, students, graduates, faculty, sponsor administration, employers, physicians, the public, and nationally accepted standards of roles and functions.</p> <p>Program-specific statements of goals and learning domains provide the basis for program planning, implementation, and evaluation. Such goals and learning domains must be compatible with both the mission of the sponsoring institution(s) and the expectations of the communities of interest. Goals and learning domains are based upon the substantiated needs of health care providers and employers, and the educational needs of the students served by the educational program</p> | <p>Review:</p> <ul style="list-style-type: none"> • Documentation of program goals • A sample of the program’s cognitive, affective, and psychomotor objectives. • Examples of the use of affective or psychomotor domain of learning. • Lecture and rotation schedules. • Special activities in which the students participate (teaching activities, management activities, participation in journal club or attendance at professional meetings or other continuing education events). • For distance programs, determine how the program evaluates the student’s clinical practice. |
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| <p>II. B. Appropriateness of Goals and Learning Domains The program must regularly assess its goals and learning domains. Program personnel must identify and respond to changes in the needs and/or expectations of its communities of interest.</p> <p>An advisory committee, which is representative of these communities of interest, must be designated and charged with the responsibility of meeting at least annually, to assist program and sponsor personnel in formulating and periodically revising appropriate goals and learning domains, monitoring needs and expectations, and ensuring program responsiveness to change.</p> | <ul style="list-style-type: none"> • How often and in what way is the SBB curriculum evaluated? • Determine makeup of the Advisory Committee - look for the participation of the medical director, lecturers, past graduates. • Review Advisory Committee minutes. • How is curriculum is kept current or updated? • How are curriculum changes implemented? • Review any new material added to curriculum within the past 2 years. • How are the AABB Standards incorporated in the SBB program? |
| <p>III. Resources A. Type and Amount Program resources must be sufficient to ensure the achievement of the program's goals and outcomes. Resources include, but are not limited to: faculty, clerical/support staff, curriculum, finances, offices, classroom/laboratory facilities, ancillary student facilities, clinical affiliations, equipment/supplies, computer resources, instructional reference materials, and faculty/staff continuing education.</p> | <p>Tour facilities checking for:</p> <ul style="list-style-type: none"> • Resources such as student lab or a place that a student can perform student testing. • Supplies such as materials for special serological testing. • Classrooms • Library or reference materials • Computer access <p>For distance programs:</p> <ul style="list-style-type: none"> • Review online material. • Verify that computer personnel are available to assist students and faculty • Determine how students are orientated to the program. <p>Review Resource Assessment</p> <ul style="list-style-type: none"> • Review survey instruments used to collect data from students, program officials, faculty, advisory committee from the forms provide by the COA <p>NOTE: Supporting documentation for resource assessment must be available for the past five years if program has been in existence.</p> |
| <p>III. B. Personnel The sponsor must appoint sufficient faculty and staff with the necessary qualifications to perform the functions</p> | <p>Review job descriptions and continuing education for:</p> <ul style="list-style-type: none"> • Medical Director |

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| <p>identified in the documented job descriptions and to achieve the program’s stated goals and outcomes. .</p> | <ul style="list-style-type: none"> • Education Coordinator and/or Program director. • Review qualification and continuing education of faculty who lecture or supervise at the clinical sites. <p>If distance program:</p> <ul style="list-style-type: none"> • Review mentor qualifications. • Interview a mentor. (Use standardized questions as applicable in Appendix A). <p>(NOTE: Interviews may be done prior to or after on-site visit).</p> |
| <p>III. C. Curriculum The curriculum must ensure the achievement of program goals and learning domains. Instruction must be an appropriate sequence of classroom, laboratory and clinical activities. Instruction must be based on clearly written course syllabi describing learning goals, course objectives and competencies required for graduation.</p> | <ul style="list-style-type: none"> • Has the program compared the curriculum with the required curriculum listed in the Standards? (NOTE: Content areas 1 through 7 must be addressed. It is not required to cover every sub-topic under the content areas). • Is there evidence of periodic review? <p>Review:</p> <ul style="list-style-type: none"> • Learning goals. • Competencies required for graduation. • New topics. • Rotation and lecture schedules. • How are clinical rotations conducted? Are there checklists or study guides or how are competencies determined? |
| <p>III. D. Resource Assessment The program must, at least annually, assess the appropriateness and effectiveness of the resources described in these standards. The results of resource assessment must be the basis for ongoing planning and appropriate change. An action plan must be developed when deficiencies are identified in the program resources. Implementation of the action plan must be documented and results measured by ongoing resource assessment..</p> | <p>Review:</p> <ul style="list-style-type: none"> • change control documentation or effectiveness check documentation. • analysis of current resources, including review of surveys used to gather data for resource assessment. • Resource Assessment documentation. <p>NOTE: Supporting documentation for resource assessment must be available for the past five years if program has been in existence.</p> |

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| <p>IV. Student and Graduate Evaluation/Assessment A. Student evaluation 1. Frequency and Purpose Evaluation of students must be conducted on a recurrent basis and with sufficient frequency to provide both the students and program faculty with valid and timely indications of the students' progress toward and achievement of the competencies and learning domains stated in the curriculum.</p> | <ul style="list-style-type: none"> • Interview at least two current students using the standardized questions as applicable in Appendix A. • Interview at least two graduates within the past five years using the standardized questions as applicable in Appendix A. <p>(NOTE: Interviews may be done prior to or after on-site visit).</p> <ul style="list-style-type: none"> • Review student evaluation methods (exam, checklists, etc.) |
| <p>IV. B. Outcomes 1. Frequency and purpose The program must periodically assess its effectiveness in achieving its stated goals and learning domains. The results of the this evaluation must be reflected in the review and timely revision of the program</p> | <p>Review documentation of:</p> <ul style="list-style-type: none"> • Student retention. • Completed Employer and Graduate Surveys. • Graduate job placement. • Graduate certification scores on ASCP registry exam. • Determine where and who reviews these scores. Determine if there is any action taken concerning these scores. <p>NOTE: Programs seeking initial accreditation will not have this information but should have forms or plans in place for gathering and collating this information.</p> |
| <p>IV. B. 2. Outcomes Reporting The program must periodically submit its goals, learning domains, evaluation systems, outcomes, its analysis of the outcomes and an appropriate action plan based on the analysis.</p> | <p>Review:</p> <ul style="list-style-type: none"> • Program goals, summary of learning domains • Evaluations completed for lectures, rotations and any education activities. <p>NOTE: Standardized forms or comment-based evaluations may be used.</p> <ul style="list-style-type: none"> • Submission of Annual Reports and any supporting documentation, including evaluation of lecture and clinical rotation schedules. • Advisory committee meeting minutes. • Evaluations of student performance (exams, checklists) • Summary of changes made to the program in last two years. |

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| <p>V. Fair Practices</p> <p>A. Publications and Disclosure</p> <ol style="list-style-type: none"> Announcements, catalogs, publications, and advertising must accurately reflect the program offered. At least the following must be made known to all applicants and students: the sponsor’s institutional and programmatic accreditation status as well as the name, address and phone number of the accrediting agencies; admissions policies and practices; policies on advanced placement, transfer of credits, and credits for experiential learning; number of credits required for completion of the program; tuition/fees and other costs required to complete the program; policies and processes for withdrawal and for refunds of tuition/fees. At least the following must be made known to all students: academic calendar, student grievance procedure, criteria for successful completion of each segment of the curriculum and graduation, and policies and processes by which students may perform clinical work while enrolled in the program. | <ul style="list-style-type: none"> Review brochures/websites/catalogs or other methods of distributing information about this program. <p>Does the program announcement specify:</p> <ul style="list-style-type: none"> Institutional and program accreditation status. Name, address, phone and website of accrediting agency. Admissions policies and practices. Policies on advanced placement or transfer. Tuition, fees and other costs Policies for withdrawal. Policies for refund on tuitions and fees. <p>Does the student handbook include:</p> <ul style="list-style-type: none"> Academic calendar. Criteria for completion of each portion of program. Criteria for graduation. Policies for work during program. Grievance procedure. |
| <p>V. B. Lawful and Non-discriminatory Practices</p> <p>All activities associated with the program, including student and faculty recruitment, student admission, and faculty employment practices, must be non-discriminatory and in accord with federal and state statutes, rules, and regulations. There must be a faculty grievance procedure made known to all paid faculty.</p> | <p>Review the following:</p> <ul style="list-style-type: none"> Student recruitment and admission policies. Student and faculty grievance procedures. Faculty recruitment policies. Non-discriminatory practices. |

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| <p>V. C. Safeguards The health and safety of patients, students, and faculty associated with the educational activities of the students must be adequately safeguarded. All activities required in the program must be educational and students must not be substituted for staff.</p> | <p>Review:</p> <ul style="list-style-type: none"> • Student Health Verification or documentation of receipt of Hepatitis vaccine series. • Policy on student employment. |
| <p>V. D. Student Records Satisfactory records must be maintained for student admission, advisement, counseling, and evaluation. Grades and credits for courses must be recorded on the student transcript and permanently maintained by the sponsor in a safe and accessible location</p> | <ul style="list-style-type: none"> • How are student records maintained? • Review student files for a current student and at least one graduate within the past five years. • Review a transcript. |
| <p>V. E. Substantive change The sponsor must report substantive change(s) as described in Appendix A to CAAHEP/CoA-SBBT in a timely manner. Additional substantive changes to be reported to the CoA-SBBT within the time limits prescribed include</p> | <p>Review any changes in:</p> <ul style="list-style-type: none"> • Program officials. • Curriculum. • Mode of delivery. • Status of program (part-time, inactive, etc.) <p>Have changes been reported to CoA in a timely manner?</p> |
| <p>V. F. Agreements There must be a formal affiliation agreement or memorandum of understanding between the sponsor and all other entities that participate in the education of the students describing the relationship, role and responsibilities between the sponsor and that entity.</p> | <ul style="list-style-type: none"> • Review agreements with all institutions in which the student performs student activities. • For distance programs, review how agreements are made with facilities where the student is employed. |