Accreditation Council on Optometric Education

Evaluation Report
for the
Professional Optometric Degree Program
at the
State University of New York College of Optometry

New York, New York
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Evaluation Team Members
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Introduction

The Accreditation Council on Optometric Education (ACOE) conducted an evaluation visit to the professional optometric degree program at the State University of New York State College of Optometry at 33 West 42nd St. in New York, New York.

The evaluation team consisted of the following Council members: Stephanie Messner, O.D., ACOE educator member and Vice President for Academic Affairs and Dean of Illinois College of Optometry, served as team chair, with Timothy Hug, O.D., ACOE practitioner member and optometrist at Children's Mercy Hospital in Kansas City, Missouri, and Karen Kershenstein, Ph.D., ACOE public member. The following educators who are ACOE consultants also participated in the site visit: Katie Connolly, O.D., Assistant Clinical Professor at Indiana University School of Optometry and William Miller, O.D., Ph.D., Associate Dean of Academic Affairs at University of Incarnate Word Rosenberg School of Optometry. Joyce Urbeck, ACOE director, also accompanied the team to assist with administrative details and to advise on Council policy and process.

During the evaluation visit, the team interviewed the following individuals:

David Heath, O.D., Ed.M.	President, SUNY College of Optometry
David Troilo, PhD	Vice President and Dean of Academic Affairs
Liduvina Martinez-Gonzalez, MS	Vice President for Clinical Administration Executive Director of the University Eye Center
Guilherme Albieri, PhD	Vice President for Student Affairs; Chief Diversity Officer; Director of International Programs; Director of the Confucius Institute for Healthcare
David Bowers, MBA	Vice President for Administration & Finance
Dawn Rigney, MPH	Vice President for Institutional Advancement; Executive Director of the Optometric Center of New York
Steven Schwartz, OD, PhD	Professor, Department of Biological and Vision Sciences Director of Institutional Research and Planning
Focrun Nahar, MSEd	Institutional Research and Academic Programs Coordinator
Richard Madonna, OD	Professor, Department of Clinical Education; Chair, Department of Clinical Education; Director, Department of Continuing Education
Julie Appel, OD	Associate Clinical Professor, Department of Clinical Education; Third Year Clinical Instructor of Record; Member, Institutional Research and Planning Committee
Ann Beaton, PhD	Associate Professor, Department of Biological and Vision Sciences; Member, Institutional Research and Planning Committee; Chair, Committee on Course and Standing
Thomas Wong, OD	Associate Clinical Professor, University Eye Clinic; Director of Externships; Chair of the Faculty Executive Committee
Diane Adamczyk, OD	Professor, Department of Biological and Vision Sciences;

	Director of Residency Programs; Member, Committee on Professional Qualifications
Suresh Viswanathan, OD, PhD	Associate Professor, Department of Biological and Vision Sciences; Chair, Department of Biological and Vision Sciences
Marcel Catafago	Associate Vice President of Administration and Finance
Michael McGovern, OD	Chief Medical Officer
Sudeep Lamicchane, MPA	Associate Director of Capital Projects
Harriette Canellos, OD	Associate Clinical Professor, University Eye Clinic Fourth Year Clinical Instructor of Record Director of Referral Service
Diane Calderon-Villanueva, OD	Assistant Clinical Professor, University Eye Clinic Chief of Adult Primary Care
Jennifer Gould, OD	Assistant Clinical Professor, Department of Clinical Education; Chief of Advanced Care
Daniella Rutner, OD, MS	Associate Clinical Professor, University Eye Clinic Chief of Vision Rehabilitation
Stewart Bloomfield, PhD	Associate Dean for Graduate Studies and Research Director, Graduate Center for Vision Research Professor, Department of Biological and Vision Sciences
Kristen Fry, OD, MS	Director of Clinical Vision Research Center
Alexandra Benavente, BSOptom, PhD, MS	Associate Clinical Professor, Department of Clinical Education
Quy Nguyen, OD	Director of Career Services
Vito Cavallaro	Assistant Vice President for Student Affairs Director of Financial Aid
Jacqueline Martinez, MSEd	College Registrar
Elaine Wells, MA, MLS	Library Director
Jill Locascio, MLS	Associate Librarian
Robert Pellot, MBA	Chief Information Officer
Fiona Dhrimaj	Director of Educational Technology Services
Douglas Schading, MSEd	Assistant Vice President of Human Resources
Amber Hopkins-Tingle, MA	Director of Communications
Richard Soden, OD	Director of Health Care Development
Tracy Nguyen, OD, PhD	Associate Clinical Professor, Department of Clinical Education Member, Curriculum Committee
James Ruhl, PhD	Member, College Council

The team held an open meeting with students and also had an opportunity to meet with student leaders. In addition, the team held an open meeting with faculty of the College. The team wishes to extend its appreciation for the cooperation and hospitality shown by College administrators, faculty, students and staff.

For the purpose of this report, the Accreditation Council on Optometric Education will be referred to as the "ACOE" or "Council"; the site visit team as the "team"; the State University of New York as "SUNY system"; the State University of New York College of Optometry as "SUNY." or the "College"; and the professional optometric degree program as the "program."

In the body of this report, numbers in parentheses indicate the standard or sub-standard that is being discussed.

History

The State University of New York (SUNY) College of Optometry is one of the 64 SUNY campuses, which constitute the state's comprehensive public university system, and one of five health sciences schools in the SUNY System. The College is a doctoral degree granting, research institution. The College admits 100 students per year in the professional optometric degree program. In addition the College offers M.S. and Ph.D. degrees. The College also offers post-graduate clinical education through 18 optometric residency programs and an array of continuing professional education (CPE) programs.

The New York State Board of Regents chartered the College of Optometry in 1971. Five years later, the College received initial accreditation from the Commission of Higher Education of the Middle States Association of Colleges and Secondary Schools. The Council on Optometric Education (the predecessor of ACOE) accredited the professional doctor of optometry degree program initially in 1976. In 1978 the College was authorized by the NYSDOE to confer the Ph.D. degree. Re-accreditation by Middle States and ACOE were most recently granted in 2011 through a collaborative review and site visit process.

The ACOE made no recommendations as a result of the 2011 evaluation visit and found the program to be in compliance with the ACOE's standards. The ACOE's process calls for the next evaluation visit to be held in eight years, and Middle States length of accreditation is for ten years, so the College elected not to request a joint visit of the two accreditors in 2019.

Since the 2011 evaluation visit, the ACOE received one complaint regarding the professional optometric degree program at SUNY. In 2013, a complainant alleged that a reduction in clinical faculty, mostly part-time, had substantively changed the clinical education process. The program provided a response indicating they had previously informed the ACOE of the situation and provided documentation on the current student/faculty ratios and the patient census and schedules. Pursuant to ACOE complaint procedures, the complaint and response were reviewed by the ACOE Executive Committee, which saw no evidence that any of the standards of accreditation were being violated.

Standard I – Mission, Goals and Objectives

The mission of the State University of New York ("SUNY") College of Optometry ("College") is as follows:

> The State University of New York College of Optometry advances visual health and patient care through leadership in education, research and service.

The College's 2018-2023 strategic plan, entitled *Care, Lead, Advance*, defines nine goals and associated objectives that support the following five themes:

- Student-Centered Experience
- Academic Excellence
- Service to Our Patients and Community
- Community and People
- Effective Foundational Support

The nine goals and associated objectives are as follows (1.1):

Student-Centered Experience

Goal 1. Enhance the student experience through programs that promote student and alumni success.

- Deliver a curriculum that reflects contemporary optometric practice and subspecialties, anticipates future changes and is flexible enough to respond to changes in the health care delivery system.
- Provide students with a strong foundation for clinical care of basic and advanced optometric conditions while supporting them to develop the communication and cognitive skills needed for evidence-based patient care.
- Provide micro-credentials in clinical concentrations beyond the core educational experience.
- Provide students with facilities, support and resources for deep, integrated and active learning throughout the curriculum.
- Enhance the student experience through customized opportunities for individual development and success.
- Develop viable international rotation opportunities for fourth-year interns to increase opportunities for fourth-year rotations abroad.
- Develop meaningful connections between students and alumni that support career development, placement, networking and continuing education.

Academic Excellence

Goal 2. Deliver a dynamic curriculum that engages students and advances contemporary optometry.

- Define and implement a core curriculum that teaches the foundation needed for entry-level contemporary optometric practice efficiently and effectively.
- Identify and develop several concentrations in advanced optometric practice aligned with residency and AAO Diplomate advanced competency training tracks.
- Pilot and implement, if successful, a series of content progress examinations for the formative assessment of student learning and teaching effectiveness.
- Support faculty development and implementation of innovative teaching strategies that improve student engagement and learning.
- Create or refine training experiences at the University Eye Center (UES) and externship sites that emphasize evidence-based practice in primary care optometry and provide experience in areas of advanced care/competencies (subspecialties).

Goal 3. Grow the graduate and research programs to increase the institutional impact on the advancement of knowledge and to produce leaders in vision research (basic, translational and clinical)

- Expand funded basic, translational and clinical research to increase opportunities for graduate students (OD-MS, Residency-Graduate program, and PhD) to carry out mentored research in active laboratories.
- Continue to expand clinical research activity and clinical faculty involvement opportunities through the Clinical Vision Research Center.
- Reorganize the OD-PhD program to include elements of the Advanced Standing OD and Residency-Graduate programs so as to develop a track for clinician scientists and increase clinical research productivity.
- Establish consortium agreements with universities in the metropolitan area, including SUNY and CUNY campuses, to expand collaborative research opportunities and allow graduate students to take courses seamlessly at participating schools.

Service to Our Patients and Community

Goal 4. Deliver unparalleled care to our University Eye Center patients

- Increase access to current UEC services and expand services as appropriate to better meet the needs of our patients and educational programs.
- Improve the quality of care
  - o Continued integration of new and emerging technologies into patient care
  - o Increased emphasis on best practices and evidence-based medicine
  - o Expanded use of interdisciplinary, team-based care (collaborative practice) strategies
  - o Improved care coordination and patient advocacy programs

- o Expanded patient access to educational information about their eye care, health and health-related behaviors
- Develop strategies to enhance the patient experience and increase patient satisfaction
  - o Develop additional methods for patients to provide feedback about the services we provide and the care they receive
  - o Implement training programs to improve efficiency and the patient experience
  - o Streamline the patient flow within the clinical services
  - o Facilitate the exchange of patient information between providers and with patients via patient portals and health information exchanges
- Communications
  - o Increase awareness in the medical community about the services we provide and how we can complement the care of other professionals
  - o Develop a communications strategy to create a more positive narrative for the UEC on social media
  - o Communicate the successes and value of the College and clinic to the community
  - o Develop communications strategies to enhance visibility of the UEC and the services offered which improve access to care for the uninsured and underinsured.
- Improve operations to enhance the quality of care and patient outcomes
  - o Ensure operational consistency with reporting and reimbursement models under health care reform
  - o Explore and expand as indicated the use of ancillary personnel to improve efficiency and patient satisfaction.

Goal 5. Provide service to our greater community

- Expand outreach programs for underserved populations.
- Expand relationships with key health care organizations and continue efforts to increase the College's footprint in the New York metropolitan area.
- Further develop our role with Medicaid Redesign (DSRIP) landscape.
- Support and facilitate student involvement in service learning projects locally, nationally, and internationally.

Community and People

Goal 6. Cultivate an institutional culture that encourages a sense of community, inclusion, institutional pride, collective purpose and shared responsibility

- Develop mechanisms for enhanced internal and external communication that expand awareness of our mission, program and achievements while informing the community through dissemination of accurate and transparent information.
- Integrate into the hiring and performance review processes an increased recognition of institutional commitment and demonstration of shared responsibility.

- Develop engaging clinical, research and public service programs for faculty, staff and students that emphasize collective purpose and institutional mission.
- Build a diverse and inclusive community by implementing the recommendations of the 2017 Diversity and Inclusion Master Plan.
- Provide leadership opportunities and develop succession plans for major areas of the College.

Goal 7. Promote the growth and development of all members of our community

- Increase professional development opportunities for faculty and staff.
- Continue to recruit and retain talented individuals that enhance the College's ethnic, cultural and experiential diversity.

<u>Effective Foundational Support</u>

Goal 8. Attract the brightest and most motivated students with demonstrated leadership potential

- Enroll a highly qualified, diverse and engaged student body that will contribute to a vibrant community.
  - o Increase awareness of the optometry profession among health care advisors and prospective students through continued development of pipeline programs
  - o Continue to improve the quality of all application/admissions stage experiences
  - o Continue to make leadership potential, civic engagement and reflective thinking explicit criteria for admission to the professional program
- Insure the affordability of the Doctor of Optometry degree program.
  - o Maintain competitive tuition and fees while keeping graduate debt below the national average for schools and colleges of optometry
  - o Identify and increase scholarship opportunities for incoming and enrolled students
- Further develop recruitment strategies to better attract and enroll underrepresented minority (URM) and economically disadvantaged students to bring the College's URM enrollment profile in line with that of medical schools nationally.
- Develop effective communications strategies for attracting and engaging prospective students.
  - o Capitalize on digital media to attract and enroll prospective students
  - o Allocate resources toward high yield and strategically important markets and reach to secondary and tertiary markets through a mix of traditional, digital and armchair recruitment initiatives
  - o Highlight alumni success stories in recruitment programs
  - o Recruit and retain alumni to serve as admissions ambassadors to reach out to prospective students

- Expand data driven decision making in the admission process through the ongoing evaluation of the pre- and post-admissions factors that predict academic and clinical success.
- Further develop advanced standing OD programs for internationally trained scientists, physicians and optometrists.

Goal 9. Provide the financial foundation, administrative support and environment to achieve the College's mission

- Ensure a healthy mix of revenue and funding sources.
- Invest in infrastructure, including the following priorities to be completed by 2023:
  o Complete the renovation of two of the four floors devoted to UEC patient care
  o Buildout of the facilities needed for the College's new translational research center
- Produce, analyze and act on performance data.
- Encourage strategic and data-driven decision making, as well as transparency and accountability.
- Expand philanthropic and development efforts to increase support for the institution with an initial focus on:
  o Student scholarships
  o Clinic renovation
  o Faculty chairs and faculty development programs
  o Development of a translational research center
  o Care for underserved populations in our community
- Identify new and advance existing relationships with industry leaders through meaningful volunteer opportunities, partnerships, marketing and financial support.
- Increase positive visibility and media recognition in tri-state marketplace.

The College's mission, goals, and objectives are posted on its website. (1.1.1) Goals 1 and 2, together with their associated objectives, address teaching and learning, Goal 3 addresses research/scholarly activity, and Goals 4 and 5 address patient care and service. (1.1.2)

The College has adopted program learning objectives that are based on the Attributes of Students Graduating from Schools and Colleges of Optometry as published by the Association of Schools and Colleges of Optometry. These objectives serve as the basis for curriculum development and are periodically reviewed by the Dean's Council to ensure they adequately support the independent practice of contemporary optometry. (1.2)

The College uses the following performance indicators:

- Performance on Parts I, II, and III of the NBEO
- Graduation rates
- Percentage of graduates who intend to enter a residency program
- Quantity and quality of each student's patient care experiences.

- Annual exit surveys of graduating classes
- Annual alumni surveys of the class that graduated six years earlier

According to data provided by the NBEO, from 2011-2018, approximately 97 percent of the College's graduating students passed all three parts of the NBEO by the time they graduated. In addition, in 27 out of the last 30 administrations of Parts I, II, and III, first-time test takers at the College performed at or above the national average.

The percentage of the College's students who entered from 2005-2014 and graduated in four years averaged slightly more than 90 percent. When the students who graduated in five or more years are added in, the percentage averages close to 95 percent.

The percentage of graduates who plan to enter a residency program has averaged about 40 percent in the last three years.

The College has a robust institutional assessment plan by means of which it routinely analyzes the data collected from all its performance indicators and uses it to improve the curriculum. As an example, a few years ago the College noted some shortcomings in its low vision program and modified the curriculum to consolidate low vision didactic instruction into a single instructional unit that consists of both lectures and laboratories in the spring semester of the third year. The first students to take the new course in the spring of 2018 performed above the national average on the low vision components of Part I, for the first time in five years. (1.3)

For the classes that entered in 2010, 2011, and 2012, the percentage of entering students who graduated and passed all three parts of the NBEO within six years of initial matriculation was 87 percent, 91 percent, and 94 percent. For the classes that entered in 2013 and 2014, 93 percent and 94 percent, respectively, graduated and passed all three parts within four years of matriculation. (1.3.1)

The College publishes a Factbook on its website, which it describes as a "compendium of key indicators employed by the College to monitor the effectiveness of its programs." The data provided in the Factbook includes graduation and attrition rates, pass rates for first-time test takers on Parts I, II, and III of the NBEO, and the ultimate pass rate. It also includes other information such as the percentage of graduates who plan to enter a residency program. (1.4)

On a five-year cycle, the entire College community participates in a comprehensive, year-long strategic planning process that reviews and updates the College's mission, goals, and objectives, as necessary, and culminates in the publishing of a new five-year strategic plan. The current strategic plan, *Care, Lead, Advance*, was developed during the 2017-2018 academic year and covers the years 2018-2023. The mission, goals, and objectives contained in the plan clearly drive organizational priorities and resource allocation for the duration of the plan. Throughout the five years that a given strategic plan is in effect, the College engages in an extensive annual institutional assessment process through what it calls "annual implementation meetings." If any shortcomings in attaining institutional goals are revealed as part of this

exercise, corrective actions are initiated by the appropriate administrative unit. This continual assessment process has resulted in numerous improvements that cover all areas of College operations including academic affairs, student affairs, facilities, library, research, the University Eye Center, and clinical faculty salaries. (1.5)

Standard II – Curriculum

The SUNY College of Optometry curriculum fulfills the intent of the mission statement of the program to prepare graduates for the future of optometric practice by teaching students to think critically and prepare for life-long learning. Three of the nine goals in the current strategic plan (2018-2023), directly influence the curriculum. The College has placed an emphasis on a student-centered experience and academic excellence. The curriculum is divided into seven tracks that continue through three years of the curriculum with one track continuing into the fourth year when students are in their in-house rotation. The College has a coordinated process to evaluate the curriculum that includes instructors of record, department chairs and a faculty-elected curriculum committee, which serves in an advisory role to the Vice President and Dean of Academic Affairs. The College strives to create curricular activities that are flexible and enhance the effectiveness of the program's outcomes. These include the recent addition of an optional flex schedule that enables students to take certain first or second-year courses during the summer, and the institution of comprehensive progress examinations that are given in the 2nd and 3rd year to assess retention of core material. Although outcomes of these recent changes are unknown, as indicated at the site visit, the modifications demonstrate that the College is proactive in its approach to student learning and curricular management. (2.1)

The program is four years in length with provisions available for those rare occasions when a student on probation requires five years to complete the program. The program also has an advanced standing program, which based on an individual's prior training and with permission of the instructor of record, department chair and Vice President and Dean of Academic Affairs, is tailored to an abbreviated length of time with transfer credit gained from prior educational experiences and training. Depending on credit granted, the advanced standings students spend between 2.5 to 3.25 years at SUNY. Checkpoints are in place to monitor these students' success in the program. (2.2)

A complete set of assessments for curricular outcomes are in place that consists of class participation, quizzes, midterms, final exams, practical pre-clinical exams and clinical instructor evaluations. Any student with a GPA below 2.0 is automatically placed on probation. As an additional outcome measure for achievement, since 2014 SUNY College of Optometry students scored on average 86%, 94.8%, and 82.3% on the NBEO exam on Parts I, II and III respectively. Part I and II scores were higher than the national average while Part III was nearly equal to the average of the last 4 iterations. The NBEO performance indicates a solid foundation in the basic and clinical sciences. (2.3)

A systematic process of curriculum management is in place and includes evaluation of all

courses as they relate to program objectives. The process is responsive to outcome measures generated from the faculty, students and alumni. Outcomes are reviewed by the Institutional Research and Planning Committee, Curriculum Committee (elected faculty), Dean's Council, and the President's Council prior to the initiation of any proposed curricular changes. For example, as part of a major curriculum revision in 2008, the delivery method for content related to low vision was changed. Subsequent outcomes data from both graduate exit surveys and NBEO performance indicated that this new approach had a detrimental effect on student learning and as a result the Curriculum Committee proposed changes that were approved and implemented by the Office of Academic Affairs. Monitoring of exit survey data and NBEO performance relative to low vision has continued and demonstrated improvement in outcomes. Additional curricular changes that occurred in response to student outcomes data include changes in structuring of Clinical Medicine course content, revision of the Clinical Optometry sequence, the addition of electives, and the restructuring of the 4th year clinical experience, moving to a quarter system to allow each student three instead of two externship site exposures. Monitoring of outcomes related to each of these changes is ongoing through regular meetings (approximately once a month) of the Curriculum Committee. (2.4)

SUNY College of Optometry does not share instruction with any other program or institution. Primary responsibility for the professional optometry curriculum is held by SUNY College of Optometry. (2.5)

Students receive a solid foundation of knowledge in physical, biomedical and behavioral sciences that prepares them for clinical optometric care. Basic science is taught by faculty from the Department of Biological and Vision Sciences who have an OD, PhD or both. The instruction consists of classic lecture style as well as small group and flipped classroom modes of teaching. Clinical correlates are employed to aid students with retention of material. Basic science concepts are also highlighted in the Integrative Seminar courses. This course sequence serves as a bridge between clinical and basic science, both at a departmental and curricular level, throughout all four years of the curriculum. Outcome measures show that students have performed above the national pass rate on the NBEO Part I Applied Basic Science Examination since the last accreditation visit. (2.6)

The self-study indicates a logical progression of instruction and practice in the areas of the clinical examination, diagnosis, and management of patients, and was confirmed through interviews of students, faculty and administrators. Preclinic instruction consists of a four-course sequence, Clinical Optometry, that provides both didactic and laboratory training. In addition, courses in the areas of ocular and systemic disease, contact lenses, visual rehabilitation vision therapy, pediatrics, advanced procedures and pharmacology prepare students for clinical care. Patient care begins in the first year of the program and increases as students progress through the didactic curriculum. During the site visit, the program clarified the self-study's explanation of patient interaction, which starts with shadowing upper class students and progresses to performing vision screenings, operating as a technician, and in the 3rd year, to providing direct patient care. The fourth year is predominantly clinical, with one quarter on rotation at the UEC and the other three at affiliated externship sites. (2.7)

Students receive foundational clinical experience at the University Eye Center in their third year as well as through one fourth year on-campus assignment. Students rotate through all three UEC services including Primary Care, Advanced Care, and Vision Rehabilitation. Students in the Class of 2018 experienced, on average 426 patient encounters at the UEC. (2.7.1)

The quantity, quality and variety of patient care experiences provided by the program is sufficient to develop clinical competency to independently practice contemporary optometry. Students typically have over 1600 total clinical counters, the majority of which are direct patient care. Approximately 75% of these take place during external rotations. Through review of patient logs, the team found that students encounter a wide variety of diagnoses within a diverse and challenging patient population. (2.8)

Student patient encounters are tracked using the Meditrek system and specify if the nature of each encounter was a vision screening, direct care, shared care, or observation. Students log a general diagnosis, for example "cornea," "glaucoma," "retinal detachment," "other retina/retinopathy," and various refractive and physical conditions. The program might benefit from including a more specific diagnosis ("microbial keratitis" or "exudative macular degeneration.") for each log entry. (2.8.1)

The College has developed a set of learning objectives and clinical core experiences that start in the pre-clinical courses and carry forward to the student's patient care experience and are reflected in the clinic grading form. The core competency general areas include refractive error evaluation and management, motor sensory and perceptual dysfunction, ocular disease and trauma, and interdisciplinary/interprofessional patient care.   (2.9)

A set of clinical core competencies and change in pre-clinic sequencing for entry-level practice was implemented for laboratory and clinical didactic courses starting in the fall of 2016. The College, through a curricular revision since the last site visit, has implemented a single, integrated clinical optometry track that covers eleven major topical areas. The competencies in ACOE standards 2.9.1-2.9.6 and 2.9.8 are included in the curriculum and the grading form for the clinical courses. Problem-based learning assignments, integrative seminars and clinical grading on students' ability to use empirically-based clinical care standards when managing patients address the competency to demonstrate understanding of research principles and assessment of publications specified in standard 2.9.7. Regarding standard 2.9.9, students are encouraged to take *Basic Life Support for Health Care Providers* and are required to attain CPR certification. Regarding standard 2.9.10, students develop a basic understanding of the principles of optometric practice management by completing a 2.5 credit course entitled *Optometric Practice in a Changing Health Care Environment.* (2.9.1-2.9.10)

The team reviewed written and signed affiliation agreements between the program and its externship sites. The agreements define the responsibilities of each party related to the education of optometry students. The College has established and adheres to a set of criteria for choosing extern sites that includes requirements for space and equipment, qualifications

and clinical privileging of supervising faculty, clinical practice guidelines, and site visit evaluations. Sites include private practices, military bases, community-based health centers, and VA hospitals. Externship mentors go through the same hiring review process as University Eye Center clinic faculty. Each externship site is evaluated annually through patient logs and student evaluations of the site and of faculty. All sites have had or will have an on-site evaluation by a program representative within one year of placement of the first extern and periodically thereafter. The team reviewed a sample of completed evaluation forms for sites that have been visited as well as a schedule of completed and planned visits for all sites. (2.10, 2.10.1, 2.10.2, 2.10.2.1)

The program has developed learning objectives for all externship sites as well as site-specific competencies based upon clinical emphasis. Students are evaluated quarterly using a grading form designed to reflect program learning objectives, as demonstrated by completed evaluations that were available on site for the team's review. (2.10.2.2)

The program provides educational direction to externship sites in a variety of ways. Sites are provided with an Externship Manual which details information regarding program history, learning objectives, grading guidelines, Meditrek instructions, extern and preceptor responsibilities, and program policies. The program provides each site with feedback from completed student evaluations and patient logs. An externship newsletter is published twice yearly, providing information and updates to each site, with plans to expand this to a quarterly publication. Externship mentors are invited to an annual Externship Expo showcase event to update site supervisors on program requirements, expectations for clinical teaching and guidance on assessment and grading. It also enables them to meet prospective extern students and allows the students to interact with them. Topics of discussion at the annual meeting in 2017 included administrative updates and clinical remediation for the struggling student. At the 2018 Expo, four interactive clinical workshops were offered to enhance the providers' clinical skills in a variety of areas. (2.10.3)

Standard III – Research and Scholarship

The SUNY College of Optometry has a robust and longstanding tradition of research and scholarly activity. The ongoing commitment to support, encourage and maintain research and scholarly activity is included in the program's mission statement and evidenced in the self-study and site visit. (3.1)

Research encompasses the broader discipline of vision science, with the recent additional focus areas targeting translational and clinical research. A recent hire as well as the Clinical Vision Research Center (CVRC), which makes up nearly a third of the total research dollars into the institution, have provided opportunities for post-graduate, graduate students and professional students.   Faculty from the College of Optometry have significant interaction with faculty from other colleges and universities in the New York City area. The College participates in VisioNYC, a collaborative initiative that hosts meetings with researchers from Columbia, Rockefeller,

Cornell, NYU, and SUNY working in the area of vision science. This provides a means for collaboration and sharing of scholarly ideas. Evidence of the achievements of the College's research program includes the following:

- Over the last 5 years, researchers from SUNY College of Optometry have published 186 peer-reviewed manuscripts and provided 62 invited lectures globally. Manuscripts have included notable journals such as Nature, Investigative Ophthalmology and Vision Science, and Optometry and Vision Science.
- The current cohort for PhD and MS students is 16 and 18 respectively. Half of those graduating with a PhD are currently working in a college or university setting with the other half in either industry or clinical practice.
- Between 2012 and 2018, the institution was awarded an average of 3.37 million dollars, most of which were federal and private industry grants. The number of grants ranges from 31 to 44 over the same period. Indirect costs (IDC) from the University, currently set at 62%, are directed back to the College's research program.
- The Schnurmacher Institute for Vision Research (SIVR) provides a yearly endowment for the support of pilot studies and vision science research.

The College provides a minimum release of 0.2 FTE for research endeavors and provides a financial bridge for researchers who have a lapse in grant funding.

The College has a combined OD/MS and OD/PhD program that allows professional students, under a modified schedule, to pursue a graduate degree. Additional students interested in research are also supported by an NIH T35 Training Grant. A combined residency/MS or PhD is also offered by the program but has not yet had many participants. (3.2)

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

The SUNY College of Optometry is an autonomous campus of the State University of New York system, which is comprised of 64 individual campuses. Responsibility for the overall direction of the State University system lies with its 16-member Board of Trustees, which is also responsible for the appointment of the State University Chancellor, who serves as the chief executive officer of the University. Each campus in the system is headed by its own chief administrative officer, called the campus President, who reports to the Chancellor. Article IX of the Policies of the Board of Trustees defines the authority and responsibilities of each campus President, including the authority and responsibility for administering the professional program offered by the campus consistent with established Board policies and procedures, as well as New York State and Federal regulations.   (4.1)

System-wide policies and procedures covering a wide range of topics including conflict of interest, personal privacy protection, non-discrimination, complaint procedures, equal opportunity, academic freedom, sexual harassment, and confidentiality of student records are available on the SUNY website. University policies on non-discrimination, grievance

procedures, discipline, and due process are also found in various collective bargaining agreements, including the agreement between the State of New York and United University Professions. The New York State Guide to Financial Operations details the financial procedures all campuses in the SUNY system must follow. The College's Faculty Handbook and Student Handbook repeat some University policies, but contain other policies and procedures specific to optometry. (4.1.1)

The College is organized around five functional areas: Academic Affairs, Student Affairs, Clinical Administration, Institutional Advancement, and Administration and Finance. Its organizational structure is designed to facilitate open communication among constituencies.

The President's Council consists of the senior management of the College (and anyone else the President chooses to appoint) and is the President's senior advisory group; The Council engages in wide-ranging discussions of issues important to both the short- and long-term future of the College, and generally meets twice a month. Currently, the President's Council consists of the President, the Vice President and Dean for Academic Affairs, the Vice President for Clinical Administration and Executive Director of the University Eye Center, the Vice President for Student Affairs, the Vice President for Administration and Finance, the Vice President for Institutional Advancement, the Director of Health Care Development, the Director of Institutional Research and Planning, the Director of Communications, the Assistant Vice President for Human Resources and the Assistant to the President.

There are several other entities internal to the College that not only support and advise the senior administration of the College but also facilitate communications within the College. These include the Dean's Council, the Clinic Council, the Research Council, the Information Technology Council, and the Institutional Research and Planning Committee. All of these entities generally meet at least monthly, with some of them meeting twice a month. As mandated by the policies of the SUNY Board of Trustees, there is also a College Council that consists of ten members, nine of whom are appointed by the governor and one who is a student elected by and from among the students of the College. This Council is charged with advising the President on the operations and affairs of the College and typically meets four times a year.

In addition to its formal organizational structure, the College utilizes numerous other means to facilitate communication, including the following: (1) the College publishes a monthly electronic newsletter, FY EYE, which highlights the College's strategic priorities and progress with respect to those priorities; it also informs the community of institutional, faculty, staff, and student accomplishments, thus building a sense of community; (2) the President holds all-College meetings three or four times a year, with the winter meeting reserved for him to provide his annual State of the College Report to the community; (3) there are quarterly faculty meetings at which senior administrators provide updates on developments in their areas; (4) the College's committee structure provides for faculty and staff on all appointed committees, with students included on several of those committees; (5) the President and Dean meet periodically with the Faculty Executive Committee; (6) both the Vice President and Dean for Academic

Affairs and the Vice President Student Affairs meet regularly with the Student Council and also with individual classes and class representatives; (7) the College holds annual faculty retreats; and (8) the President convenes a monthly "college round table" that provides a forum for administrators and invited attendees to discuss a variety of issues.

Effective communication between the College and the SUNY system is achieved through a series of quarterly meetings of all campus Presidents, regular meetings of all campus Vice Presidents for specific areas (Academic Affairs, Student Affairs, etc.), and occasional visits of the SUNY Chancellor and other system administrators to the College campus.

There is open and effective communication among all of the College's constituencies. (4.1.2)

Article IX of the Policies of the Board of Trustees states that the President of the College is appointed by the Board upon the recommendation of the College Council and the Chancellor, and serves at the pleasure of the Board. An evaluation of the President is conducted by the Chancellor at least every three years in accordance with Board policy. The most recent evaluation of the College President was conducted the day before the site visit. (4.1.3)

The College is accredited by the Middle States Commission on Higher Education, a regional accrediting body recognized by the U.S. Department of Education. The College's accreditation was last reaffirmed in November 2016 via the Commission's review of the College's Periodic Review Report. The College's next evaluation visit is scheduled for 2020-2021. (4.2)

The College President received his O.D. degree from the New England College of Optometry and completed a residency there after obtaining his degree. He also earned a Master's degree in education with a concentration in administration, planning, and social policy from Harvard University. Prior to becoming the President, he served as Vice President and Dean for Academic Affairs at the New England College of Optometry and was on the faculty there for several years.

The College's Vice President and Dean for Academic Affairs received his Ph.D. in biology from City College of New York and completed postdoctoral work in physiology at the University of Oxford and in biopsychology at Cornell University. Prior to coming to the College, he was a faculty member in the Department of Biomedical Science and Disease at the New England College of Optometry and also served as Director of Graduate Studies at that institution. (4.3)

Article IX of the Policies of the Board of Trustees clearly defines the authority and responsibilities of the College President, including responsibility for the fiscal management of the optometry program. (4.4, 4.4.1)

The organizational chart for the College delineates reporting relationships within the College. Senior management within the College consists of the President, the Vice President and Dean for Academic Affairs, the Vice President for Clinical Administration and Executive Director of the

University Eye Center, the Vice President for Student Affairs, the Vice President for Administration and Finance, the Vice President for Institutional Advancement, the Director of Health Care Development, the Director of Institutional Research and Planning, the Director of Communications, and the Assistant to the President. Job descriptions clearly define the major job responsibilities for each of these positions.

The SUNY system employs a standardized process for the evaluation of all campus Presidents. As previously mentioned, the most recent evaluation of the campus President occurred the day before the site visit.

At the beginning of each academic year, each member of senior management negotiates performance expectations for the year with the College President. These expectations are linked to the goals in the College's strategic plan. At the beginning of the next academic year, each administrator prepares a performance document detailing progress in meeting those performance expectations, using a standardized evaluation form, then meets with the President to review the progress and establish performance expectations for the following year. (4.5)

As part of the SUNY system, the College receives a direct appropriation from the State of New York. Other sources of income include tuition and fees, research grants, clinic income, and philanthropy, the latter through the College's affiliated foundation, the Optometric Center of New York. The appropriation from the state has been level over the past three years and may not increase significantly in the near future. Thus, the College has had to generate additional revenue itself, which it has done primarily through increased clinic income and increased philanthropy. To its credit, it has been able to grow its fund balances to over $18M at the end of FY 2018. As the President reported to the SUNY Chancellor in his recent evaluation, "the College has been disciplined in its use of ongoing planning and assessment and strategic management programs to be well positioned for the next five years" and "use[s] a five-year all-funds projection model to establish budget limits and ensure resources are in place for anticipated events and to support innovation and growth initiatives."

The College's budget for the current fiscal year is approximately $35.5M, up from about $31.5M two years ago. It is projected to be about $37.9M the same for the next fiscal year. (4.6)

The State of New York publishes a Guide to Financial Operations, which details the requirements of all State agencies with respect to procurement, accounting, revenue, appropriations, internal control, and general financial management. In addition, the New York State Governmental Accountability, Audit and Internal Control Act institutes a formal internal control program all State agencies must follow. The College follows these financial management procedures to ensure effective monitoring, control, and accountability of its fiscal resources. (4.6.1)

Standard V – Faculty

The number, qualifications, expertise and experience of the faculty members is sufficient to meet the program's stated mission and goals. The College employs 70 full-time and 39 part-time faculty members providing a total FTE of 80.4. Two thirds of the faculty have their primary teaching assignment in the University Eye Center with the primary assignment of the remaining third split nearly equally between the Department of Biological and Vision Science and the Department of Clinical Education. Based on a review of the program's work load formulas, there is a sufficient number of faculty to enable all teaching, service, and scholarly activities to be fulfilled. Through a review of the provided curriculum vitae, the team found that there is a broad range of faculty qualifications, expertise, and experience. Of the 109 faculty members, 80 hold an OD degree, 8 have both an OD and PhD, 8 hold both the OD and MS and 10 have a PhD. Two additional faculty members have the MLS as their terminal degree. Basic science courses are typically taught by faculty members who hold PhDs in related areas, and clinical courses are taught by those with an OD. Approximately 22% of the faculty hold the rank of professor, 29% are associate professors, 47% are assistant professors and 2% hold no rank (librarians.) About 70% of the faculty hold qualified positions (non-tenure track) while the remaining 30% are in the tenure track or are tenured. (5.1)

All faculty hold an earned terminal degree or first professional degree from an accredited institution or its foreign equivalent as evidenced in their curriculum vitae. Primary source verification of credentials is completed for all clinicians and documented through the credentialing and privileging process. Primary source verification of credentials is not completed for non-clinical faculty, but rather is inferred from their record of research, publications, and participation in post-doctoral training programs. (5.1.1)

The team found that faculty members are fully engaged in decision-making processes related to the optometric educational program. Faculty governance processes are overseen by the Faculty Executive Committee, which is made up of seven representatives who are elected by their peers. The Faculty Executive Committee reports to and consults with the Dean and Vice President for Academic Affairs but also has direct access to the President as needed. The governance structure includes another seven elected faculty committees related to the OD program, including the Committee on Educational Policy, Curriculum Committee, Course and Standing Committee, Committee on Professional Qualifications, Learning Resources Committee, and Judicial Committee. There are an additional 21 appointed committees that serve a wide variety of roles including various aspects of research, patient care administration, clinical education, institutional planning, admissions, scholarships and awards, cultural diversity among others. The team confirmed through a review of committee minutes as well as during the open meeting with faculty that committees meet on a regular basis, and faculty members are fully engaged in institutional governance regarding the educational program. (5.2)

The program has developed a template that is used to determine allocation of faculty time. Each faculty activity (lecture, laboratory teaching, laboratory organization, research, administration, and patient care) is assigned a percent effort. Ten percent effort is equivalent

to one session, or approximately one-half day of assignment. Full-time faculty are assigned activities to total 100 percent effort, essentially a five-day work week. During the open meeting with faculty, the team confirmed that all full-time faculty are scheduled one half-day each week (10% effort) for faculty development. Individuals may apply for additional time for scholarly activity or approved special projects as well. Graduate faculty negotiate the level of assigned effort for research activity on an annual basis. A review of completed effort assignment samples confirmed that the program adheres to its effort allocation formulas. Research and scholarly activity are further supported through startup funding for new tenure track faculty, supplemental discretionary funds for externally funded research, and bridge funding for up to two years for productive research programs.

Faculty are provided with the basic resources needed to meet their various obligations, including office space, telephone, computer, and desktop support. They have access to and support of educational technology appropriate to higher education. The Faculty Development Committee organizes periodic development programs related to current issues in education and other topics. A quarterly Journal Club has been recently instituted for clinical faculty, and an annual Faculty Retreat provides further faculty development opportunities. Faculty members are encouraged to attend the Schnurmacher Institute for Vision Research colloquia where SUNY graduate students and nationally recognized scientists present their research. In addition, faculty may attend SUNY sponsored continuing education programs at reduced cost.

Each full-time faculty member is provided with annual development funding, which recently was increased from $1000 to $1500. These funds can be used for any purpose that supports faculty development, with the exception of membership dues in professional organizations. Most faculty use the funds for travel to professional meetings to present research and to further develop their knowledge and skills. Faculty members may have access to additional travel funding through a program supported by the employee union. In addition, tuition reimbursement is available for those who are enrolled in a formal course of study related to their role at the College. The program also supports participation in professional service through the Association of Schools and Colleges of Optometry, the American Optometric Association, the American Academy of Optometry, the Accreditation Council on Optometric Education, and other organizations. The College provides educational leave to enable faculty to participate in scientific and professional service meetings.

Mentoring of faculty is provided through the College's administrative structure. During the open faculty meeting the team learned that early career faculty are encouraged to engage in professional development activity, but mid-career faculty feel as though similar opportunities for their group are somewhat limited. This was further supported by results of the Collaborative on Academic Careers in Higher Education (COACHE) survey that was administered to faculty in 2017.

Six month or one-year sabbaticals are available to tenured faculty following six years of continuous service for the purpose of informal study, research, scholarly-related travel, formal education or other professional purposes. Non-tenured faculty are not eligible to participate

regardless of academic rank. The Committee for Professional Qualifications reviews sabbatical applications and forwards recommendations to the President who makes the final decision whether or not to grant the request. (5.3)

The College has in place a process of regular faculty evaluation. Each faculty member meets with their primary supervisor on an annual basis to review activities, establish goals, and identify ways to achieve those goals in the upcoming year. For those faculty with assignments in multiple areas, the primary supervisor will seek input from other supervisors so that the review is comprehensive. As part of the review process, the faculty member must prepare a Faculty Annual Report on a template specific to their area of primary assignment. The information in the template, along with the curriculum vitae and list of faculty publications and other accomplishments, is used by the primary supervisor to make recommendations regarding merit pay increases. The team confirmed through review of completed Faculty Annual Report templates and discussions with faculty and faculty supervisors that the program adheres to the annual faculty evaluation process. (5.4)

The College has well-established policies and procedures for faculty recruitment and retention, promotion, tenure, academic assignments and responsibilities, sabbaticals, reporting relationships, grievance and benefits. Policies on recruitment and appointment of faculty, grievance, and benefits are subject to policies of the SUNY Board of Trustees with provisions and agreements between the State of New York and the Union of University Professions (UUP.) Policies are published in the SUNY Policies of the Board of Trustees and in the Agreement between the state and the UUP. Policies regarding reporting relationships, promotion and tenure, academic assignments and responsibilities, and sabbaticals are published in the Faculty Handbook and the University Eye Center by-laws. The team confirmed during the open meeting with faculty and meetings with program administrators that faculty are familiar with the policies and that all policies are routinely adhered to. (5.5)

The College developed a Five-year Diversity and Inclusion Master Plan starting in 2016 that addresses diversity and inclusion throughout the institution. Part of this plan looks at diversity of the faculty with emphasis on recruitment of underrepresented minorities. The Diversity and Inclusion Master Plan acknowledges the challenges in faculty recruitment due to a limited pool of potential URM faculty nationwide. Accordingly, the College has developed three strategies with associated outcome measures to achieve its goal of increasing the number of minority faculty members at the institution. (5.6)

Standard VI – Students

The program has a fair and impartial process that results in the admission of students who possess the intelligence, integrity, and maturity necessary for them to become competent doctors of optometry. The process is documented in the "Admissions Policy and Procedures" and is followed closely as evidenced during the site visit. (6.1)

The program publishes criteria for the selection of students on the College's website. This consists of required and recommended prerequisite courses. In addition to prerequisite courses, students must complete a minimum of 90 credit hours of undergraduate work. The Admissions Committee also evaluates GPA, OAT, the quality of the candidate's undergraduate institution, the type of program pursued, progression of grades, extracurricular activities, leadership, and community involvement. Applications are screened by admissions staff then assigned to reviewers after meeting prescreening requirements. Subsequently, each application is reviewed by three individual reviewers and scored to determine an applicant's status as held, rejected, or interviewed. Candidates recommended for an interview are interviewed with an open file by three faculty members at SUNY. Faculty members score each candidate using a rubric that evaluates interpersonal skills, communication skills, maturity, potential for academic success, leadership and reflective thinking skills. These nine faculty members are appointed to the Admission Committee and spend time each week reviewing applications, interviewing candidates and are responsible for making recommendations to the Vice President of Student Affairs (VPSA) regarding admission status. The committee and staff follow documented policies and procedures, which are fair and impartial. (6.2, 6.2.1, 6.2.2)

Students are provided with a handbook that is published online. This handbook contains policies regarding health standards, access to health care, personal counseling, and standards for immunization against infectious disease. Once matriculated, each student is reviewed yearly to ensure compliance with immunization standards, and students not in compliance are notified in writing. Non-compliant students will not be registered for subsequent semesters if they do not meet these standards. The College also provides personalized guidance regarding health insurance and has a plan to require that each student has health insurance. Students may receive free academic counselling by the Office of Student Affairs, and if warranted, are referred to an offsite clinic for up to three complimentary professional counselling sessions. Workshops and seminars are available on a regular basis to address topics that are of value to the student body and have included effective study habits, stress, sleep and mindfulness. (6.3)

The Office of Student Affairs is under the leadership of the VPSA. As noted in the department's organizational chart, the office further consists of an Assistant to VPSA, Assistant Vice President for Student Life and Director of Financial Aid, Associate Director of Admissions, Registrar, Director of Career Development and College Science and Technology Entry Program (CSTEP), and an International Program Coordinator. All department members report to the Vice President for Student Affairs. Each member of the team is highly qualified and has clearly defined roles and responsibilities that are aimed at serving the students' needs. The admissions committee and the committee on scholarships also report to the VPSA. The VPSA is also an advisor to the Student Council. (6.4)

Student services provided by the Office of Student Affairs include financial aid assistance, debt counselling, academic counselling, learning support services, career placement assistance, and information technology support. Financial aid assistance starts on the day of their interview at SUNY. Each applicant is provided information on housing and financial aid programs and is counseled on debt and budgeting. Canadian and foreign students are provided with

information about programs that are applicable to them. Once students matriculate into the program, students are sent letters with financial aid and budget information. Matriculating students can meet with the Assistant Vice President for Student Life at any time for financial aid and budgeting assistance with approximately half of the students taking advantage of the opportunity. Prior to graduation each student receives a thorough exit interview. Overall, financial aid and debt counselling support provided to students is effective, and the institution has demonstrated a 0% student loan default rate over the last five years.

The College offers a wide range of services to students. Academic counseling and learning support services are available through the Office of Student Affairs. The first touch point for academic counselling is typically given by the faculty member responsible for the course. Counseling is also given by the VPSA, registrar, and other Student Affairs staff members. Learning support services are automatically triggered at midterm for any student struggling in a course. Peer tutoring is available to students at no cost and is readily accessible. The Academic Advising Program and Clinical Remediation Program provide further assistance to struggling students in the didactic and clinical sections of the program respectively. The Director of Career Development provides many opportunities to students to access career placement assistance. Examples include the Family of Mentors Program, the Annual SUNY Optometry Career Symposium, and the use of Graduway, an online platform connecting current students and alumni. Students also take a course in their third year that prepares them to enter optometric practice and may request one-on-one career counseling with the Director of Career Development, including mock interviews, resume writing, and contract review. Students have access to IT support and during the site visit the students reported that they have easy access to comprehensive support that is quick to respond to all needs. (6.4.1)

Student records are managed by the Registrar's Office and follow the guidelines of the American Association of Collegiate Registrars and Admissions Officers. All paper records are kept in a fire proof locked cabinet in the Registrar's Office and access is limited to necessary parties which include the director of information technology, VPSA, and registrar. Apart from the transcript, all student records are securely disposed of five years post-graduation. All members of the Office of Student Affairs including all staff have been trained in Family Educational Rights and Privacy Act (FERPA). (6.5)

The College website, student handbook and brochures present an accurate representation of the program. The student handbook is comprehensive and contains policies and procedures of relevance to students. It is reviewed on an annual basis by the VPSA. (6.6)

The student handbook is available on the College website and contains policies and procedures on academic and professional standards, grading, attendance, disciplinary actions, retention, dismissal and reinstatement, non-discrimination policy, due process, academic calendar, tuition, fees, refund policy, honors, scholarship and awards. In meeting with the students and student administration during the site visit, the team determined that the program adheres to published policies. (6.6.1)

A formal complaint procedure is published in the College's student handbook and is followed. A log of formal complaints is kept electronically by the VPSA and maintained a minimum of five years. A sample was provided during the site visit for inspection. (6.6.2)

All faculty, administrators and members of the Office of Student Affairs have an open door policy that students feel is effective. Faculty office hours are posted in course syllabi and students have the ability to schedule specific times to meet with administrators as needed. Students also hold positions on nine faculty committees. (6.7)

The students have a well-organized student governance that is led by the Student Council. The Council includes representatives from each professional class and each student organization/club. The council meets regularly with the Dean and other college administrators. The Council president meets once weekly with the VPSA. The College also has 20 individual clubs that offer both leadership and membership roles for students. Students feel they have strong support from administration and upperclassmen to allow them to develop as leaders. Each club has overlap between leadership position holders and elect positions to foster development. In addition, the College offers an elective course in leadership development in the third year of the curriculum. (6.8)

Students are exposed to postgraduate educational programs through a variety of mechanisms. The residency director meets with all students in their first year and again in their third year prior to starting their fourth-year externships to discuss residency opportunities. Current residents interact with students in laboratory courses and precept students in the spring of their third year. Several opportunities to learn about graduate programs exist through work-study positions in research labs, a T35 training grant, and the Advanced Graduate Certificate in Optometry Business Management. (6.9)

Standard VII – Facilities, Equipment and Resources

The College is housed in a freestanding building of 18 floors with approximately 298,000 gross square feet and 189,000 usable assignable square feet. Various floors are designated to provide space for classrooms, research, patient care, and faculty/student areas. The space available for each area is adequate for the College's total student enrollment and level of clinical activity. The clinical, research, and classroom equipment is appropriate to meet the needs of the program's mission, goals and objectives. Currently, the program is undergoing a planned renovation of space and facilities to include new pediatric and primary care clinic areas. These renovations are not impacting patient care as the program is able to utilize rotating swing space for ongoing operations during renovations. (7.1)

The College has an effective system in place for identifying needed upgrades to facilities and equipment, including ophthalmic equipment, computers and other technology, and funds those needs consistent with priorities established in the College's strategic plan. The system includes dedicated budget lines for equipment replacement or new equipment acquisition, as well as

separate budget lines for repair and maintenance. The College routinely utilizes its annual budget process and biannual inventory process to identify equipment needs and develop replacement schedules. It also utilizes a four-category system for equipment acquisition and replacement (routine, extraordinary, comprehensive, and capital projects) as well as funding sources, to ensure present and future needs are met. (7.1.1)

The Information Technology Department includes a full-time staff of 13 and is led by the Chief Information Officer and the Director of Educational Technology. There are dedicated personnel and resources for the students and faculty throughout the day and remotely on evenings and weekends. There have been numerous upgrades to the IT infrastructure recently, and more improvements are planned to support the ongoing clinic renovations. Overall, there is strong IT support for all aspects of the College's operations, including upgrades as needed and expansion of services to both internal constituencies and external partners. The College's recent expansion into areas of tele-health through such initiatives as Eye Care Live is an example of the latter.

The program maintains an extensive library within the College. The library has recently undergone major renovations, in response to student satisfaction surveys, and this has greatly enhanced the student experience. For example, the new library configuration includes significantly increased space dedicated to study and small group activities. Additional renovations, including technology enhancements and the addition of a café, are planned for later in 2019. The library has extensive hard copy and digital resources available to faculty and students and is administered by qualified personnel, including a full-time Library Director and an Associate Librarian. (7.2)

During discussions with students and faculty, the team found that the library and IT services not only meet the needs of the institution, but also are proactive in planning and anticipating future needs. (7.3)

The College has a comprehensive and up-to-date emergency preparedness plan that includes annual training for all employees. The plan is available on the College's website and is provided at new student and faculty orientations. A recently installed app called Safe In Sight provides an avenue for anyone to report unsafe conditions (and also any equipment or other malfunctions) anywhere on campus and for the appropriate campus office to respond in a timely manner. (7.4)

Standard VIII – Clinic Management and Patient Care Policies

The clinical care program utilizes the University Eye Center (UEC) which provides an average of 71,000 annual patient encounters. This on-site program offers adult and pediatric primary eye care services as well as contact lens services and ophthalmic dispensing. Additionally, the program provides more specialized care in the areas of ocular disease, advanced contact lenses, low vision, head trauma, vision therapy, and visual rehabilitation. The clinical care program is

also enhanced through utilization of additional patient care sites throughout the community. A high patient volume and the diverse urban setting assure a robust patient care program that allows the College to meet its mission, goals and objectives. (8.1)

The University Eye Center is staffed by optometric clinical faculty, opticians (employed by the University) and contracted ophthalmologists, who support the patient care program with teaching and mentoring of the program's students and residents. (8.1.1)

The duties of clinical governance, administration, management, and evaluation are under the direction of the Vice President for Clinical Administration and the Director for Health Care Development. Under their direction, other clinical management duties and day to day operations of the clinic are clearly defined. In addition, there is a Clinic Council, which reviews policy and procedural matters related to the University Eye Center. The Council has monthly meetings, chaired by the Chief Medical Officer. Additional members of the Council include the UEC senior administrative staff and chiefs of clinical services. (8.2)

The *UEC Policy and Procedures Manual*, a comprehensive document containing all clinic policies and procedures, is available in electronic format to students, faculty, administrators and employees. New faculty and staff, as well as students entering clinical care, are given information about how to access this document. (8.2.1)

The program has a policy for initial and ongoing credentialing and privileging of clinical faculty. Primary source verification of original degrees and licensure are part of the process. All those with clinical privileges are required to complete the credentialing process at the time of initial appointment and every two years thereafter. (8.2.2)

Providers must apply for and receive clinical privileges to participate in patient care and must meet certain criteria to maintain their privileges over time. New privileges may be requested at any time during the credentialing and privileging cycle. Privileges are reviewed by service chiefs and the Credentialing Committee with final approval granted through the Chief Medical Officer. The team's review of privileging documents found that the scope and extent of each faculty member's privileges was well-documented. (8.2.3)

The UEC patient record system is electronic in nature and is supported by an electronic system for e-prescribing and patient portal access. The team found that this electronic system provides easy access to the patient's current conditions and past medical histories. The program's chiefs of services have customized their clinic's templates to increase the efficiency of patient information access. (8.2.4)

The program has a Quality Assessment and Improvement Committee, which reviews records of all faculty providing care at the UEC on an annual basis. The committee has defined courses of action for errors or concerns that include notification of the provider, notification of the Chief Medical Officer and modification of charting or patient care practices that are found to be of concern. (8.2.5)

The UEC's patient bill of rights is given to every new patient as part of their check in process and is also posted in the clinical care areas. The patient bill of rights is also available to the students and faculty in the clinic's electronically accessible policy and procedures manual. Patients are asked to review and sign a consent for treatment document, with additional consents available as needed for more advanced procedures.
 (8.2.6)

The UEC has written policy, contained in its Policy and Procedures Manual, regarding receiving and responding to patient complaints. The clinic has developed a categorization profile that includes verbal complaints, patient satisfaction surveys, and written complaints. These documents are retained in the Office of Clinical Administration upon resolution of the complaint or grievance. (8.2.7)

The UEC's policies and procedures manual contains guidelines used by the program to address liability, safety and security issues. The UEC has a culture of planning that serves to optimize the patient's healthcare experience (8.2.8)

The program provides eyecare consistent with established clinical practice guidelines, including those contained in the AOA clinical practice guidelines. These guidelines are electronically available to all care providers on computers in each exam room and referenced in the UEC Policy and Procedure Manual. These guidelines are also utilized by the Quality Assessment and Improvement Committee during their reviews. (8.3)

Council Summary

The professional optometric degree program at the SUNY College of Optometry has a robust institutional assessment plan that enables the program's mission to drive organizational priorities. An ongoing systematic curriculum review and revision process, coupled with a solid foundational clinical experience at the University Eye Center, results in a program that prepares its graduates for the successful practice of contemporary optometry. Research is an institutional priority, and the program generates a substantial body of scholarly work. The College has maintained a solid financial position through careful planning, despite stagnant state funding, which has enabled many recent upgrades to the campus's physical resources. Effective communication among the program's constituents is a priority and ensures a collaborative culture within the College. The faculty is fully engaged in governance of the institution and provides a broad range of knowledge, skill, and expertise to the campus community. Faculty members play an active role in the professional development, as well as the academic advancement, of the program's students. There is a commitment to enhancing diversity among the faculty as well as within the overall institution. The College is successful in recruiting and retaining highly qualified students which is reflected in the many positive program outcome measures, including performance on the NBEO series. The University Eye Center has a sophisticated operations structure and robust patient base which effectively supports the program's patient care mission.

Although the program provides significant opportunities for the professional development of junior faculty members, such opportunities appear to be limited for mid-career faculty. While student patient encounter logs include global descriptors of diagnostic categories they do not include specific diagnoses.

RECOMMENDATIONS: (Items in this section are recommended for corrective action since they have the potential to jeopardize the program's accreditation status if no corrective action is taken.)

None

SUGGESTIONS FOR PROGRAM ENHANCEMENT: (Items in this section are recommended as improvements that would substantially enhance the potential for excellence in the program.)

1. Student patient encounter logs should include specific diagnoses. (2.8.1)

2. The program should provide additional professional development opportunities for mid-career faculty members. (5.3)

SUMMARY OF COMPLIANCE WITH 2017 ACOE STANDARDS

Standard	Level of Compliance	Reason for Met in Part or Not Met
I Mission, Goals and Objectives	Met	
II Curriculum	Met	
III Research and Scholarly Activity	Met	
IV Governance, Regional Accreditation, Administration and Finances	Met	
V Faculty	Met	
VI Students	Met	
VII Facilities, Equipment and Resources	Met	
VIII Clinic Management and Patient Care Policies	Met	