Evaluation Report of the April 10-13, 2011 Collaborative Visit

of the
Commission on Higher Education
Middle States Commission on Higher Education (MSCHE)

and the
Accreditation Council on Optometric Education (ACOE)

to the
State University of New York State College of Optometry
and its
Professional Optometric Degree Program

The members of the Team:

Representing the Middle States Commission on Higher Education	Representing the Accreditation Council on Optometric Education
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Working with the Team:
Representing the State University of New York—Elizabeth Bringsjord, Vice Provost and Vice Chancellor, State University of New York, Albany, NY

Joyce Urbeck, ACOE Administrative Director, St. Louis, MO attended to advise the team pertaining to ACOE policy and procedures.

Observers of the visit:
In accordance with ACOE policy and at the invitation of the SUNY State College of Optometry President, the following two representatives of the New York State Board of Optometry observed a portion of the visit:
Frank Pirozzolo, O.D., Chair, NYS Board of Optometry (observed on April 11, 2011)
Dolores Cottrell-Carson, DDS, MSHA, Executive Secretary NYS Board for Optometry (observed on April 12, 2011)

AT THE TIME OF THE VISIT

President/CEO of State University of New York, State College of Optometry:
David Heath, O.D., Ed.M.

Chief Academic Officer:
David Troilo, Ph.D.

Chair of the College Council:
Gretchen Stone

Introduction

History of the State University of New York, State College of Optometry/Institutional Overview

The State University of New York (SUNY) State 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 with approximately 300 degree-seeking (OD, MS, PhD) students. In addition, the College also offers post-graduate clinical education through 13 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 Accreditation Council on Optometric Education of the American Optometric Association (ACOE) accredited the professional doctorate of optometry 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 2003 through a collaborative review and site visit process.

President David A. Heath is the College's third President, appointed in March, 2007. In 2008, the College engaged in a community-wide strategic planning process. The strategic plan, "A Shared Vision", was approved by the College Council on September 24, 2008. Some key components are curricular renewal, administrative changes and increasing research and international programs. Comprehensive review and curricular revision of the OD and graduate degrees occurred immediately thereafter. In 2009, the College's faculty governance and committee structure was modified with the goal of increasing transparency and shared governance. In July 2010, the College opened the Office for International Programs with a focus on China. Conversely, the Chinese Government supports programs at the College (Confucius Institute).

The campus is currently contained in a 300,000 sq. ft., twenty-floor facility located at 33 West 42nd St. in midtown Manhattan. The building includes the University Eye Center, a patient care facility, and the College oversees on-campus clinical operations exceeding 75,000 visits per year. Funding has been provided for capital improvements, and construction of a new Campus Center for Student Life and Learning has been initiated and renovation of biomedical research space on floors 16 and 17 will commence shortly.

The College of Optometry had an FY 2009-10 all-funds annual operating budget of approximately $31.5 million, with approximately 39% coming directly in the form of State support, 16% from tuition and fees, 26% from patient care, 10% from grants and contracts (including $3.3 M in annual extramural, predominantly NIH support) and 9% from other sources.

Current Scope of the Institution:

 ⬧ degree level(s): Certificate/Diploma; Master's; Doctor's-Professional Practice; Doctor's – Research/Scholarship
 ⬧ branch campuses: None
 ⬧ additional locations: None
 ⬧ distance education: None
 ⬧ other: N/A

Self Study Process and Report

Collaborative/Comprehensive: This report represents collaboration between site visit team members from both the Accreditation Council on Optometric Education (ACOE) and the Middle States Commission on Higher Education (MSCHE). The self-study process and this report follow a comprehensive Middle States model based on all fourteen

Middle States accreditation standards. The fourteen standards are clustered into seven chapters that follow the ACOE standards.

Site Visit Interviews

During the visit, the team met with the following individuals in addition to holding open meetings with faculty and students including professional and graduate students:

- David Heath O.D., M.Ed. (President)
- David Troilo, Ph.D. (Vice President for Academic Affairs and Dean)
- Steven Schwartz, O.D., Ph.D. (Associate Professor, Vision Sciences; Director, Institutional Research & Planning)
- Diane Adamczyk, O.D. (Associate Professor and Director, Residency Programs)
- GuilhermeAlbieri, Ph.D. (Director, Admission and Marketing)
- Jose-Manuel Alonso, M.D., Ph.D. (Professor, Biological Sciences)
- Julia Appel, O.D. (Assistant Clinical Professor, Self-Study Steering Committee, Faculty Presiding Officer Elect)
- Benjamin Backus, Ph.D. (Chair, Committee on Graduate Program)
- Amelia Bartolone, O.D. (Chair, Admissions Committee)
- Ann Beaton, Ph.D. (Associate Professor, Biological Sciences)
- David Bowers, MBA (Vice President for Finance and Administration)
- Marcel Catafago, B.S. (Director, Business Affairs)
- HarrietteCanellos, O.D. (Associate Clinical Professor)
- Vito Cavallaro, B.A. (Director, Financial Aid and Self-Study Steering Committee)
- Ida Chung, M.S., O.D. (Associate Professor, Chief, Pediatric Services and Self-Study Steering Committee)
- Karen DeGazon, B.A. (Assistant to the President)
- David Dexter, O.D. (College Council)
- David Dozack, O.D.(College Council)
- Robert Duckman, M.A., O.D. (Chair and Professor, Vision Sciences, Chair, Faculty Development Committee)
- Mitchell Dul, M.S., O.D. (Associate Professor and Chair, Clinical Sciences, Self-Study Steering Committee)
- Paul Edelman, O.D., (College Council)
- Arthur Eisenberg, Ph.D. (Grant Administration)
- Jerome Feldman, Ph.D. (Associate Dean, Research & Graduate Studies)
- Charles Gold, O.D., (College Council)
- NeeraKapoor, MS, O.D. (Chief, Vision Therapy/Rehabilitative Services)
- Nikita Lattimore-Martin, BS (Chief Finance Director, UEC)
- Richard Madonna, MS, O.D. (Presiding Officer, Faculty Executive Committee, Director, Continuing Education)
- Jackie Martinez, MS (Registrar)
- Steven Larsen, O.D., PsyD (Assistant Clinical Professor)
- Barry Lee, Ph.D. (Research Professor, Biological Sciences)
- Patricia Modica, O.D. (Chair, Professional Curriculum Committee, Faculty Past Presiding Officer)
- Robert McPeek, Ph.D. (Graduate Program Faculty)
- Rochelle Mozlin, MPH, O.D. (Faculty Senator)
- Leon Nehmad, MSW, O.D. (Associate Clinical Professor, Self-Study Steering Committee)
- Catherine Pace-Watson, O.D. (Associate Clinical Professor, Chief of Staff/Director of Professional Services, UEC)
- Robert Pellot, BS (Chief Information Officer)
- Jeffrey Philpott, Ph.D. (Vice President Student Affairs)
- John Picarelli, Ph.D. (Professor & Chair, Biological Sciences)
- Frank Pirozzolo, O.D., (College Council)
- Joan Portello, MPH, O.D. (Associate Clinical Professor)
- James Ruhl, Ph.D., (College Council)

- DaniellaRutner, MS, O.D. (Compliance Officer)
- Douglas Schading, MS (Director, Personnel & Affirmative Action Officer)
- Pamela Schnell, O.D. (Alternate Faculty Senator)
- Susan Schuettenberg, O.D. (Associate Clinical Professor, Faculty Secretary)
- Paula Ulmer Schutz, O.D., (College Council)
- Harold Sedgwick, Ph.D. (Associate Professor, Vision Sciences)
- Richard Soden, O.D. (Vice President for Clinical Affairs)
- Mort Soroka, MPA, Ph.D. (Professor, Clinical Sciences)
- MiduturuSrinivas, PhD (Associate Professor, Biological Sciences)
- Ann Warwick, MA (Vice President for Institutional Advancement)
- Elaine Wells, MLS (Director, Library, Self-Study Steering Committee, Chair, Committee on Professional Qualifications)
- QasimZaidi, PhD (Professor, Vision Sciences)

Mission, Goals and Objectives

MISSION STATEMENT

The State University of New York, State College of Optometry excels, innovates, and leads in Optometry and Vision Science by:

- Developing outstanding optometrists and vision scientists;
- Making new discoveries that advance vision science and patient care;
- Improving patients' lives by providing exceptional general and specialized optometric care;
- Enhancing public health through education and service to a broad range of communities.

GOALS AND OBJECTIVES

1.0 Developing outstanding optometrists and vision scientists;

1.1 Goal: To provide innovative, exciting, and attractive educational programs that meet the evolving needs of our students and the public.

Objectives:

- Additional masters-level opportunities for students pursuing the O.D. degree will be developed.
- Flexibility in the professional curriculum will be introduced that would allow a degree of individual customization through the development of elective courses and clinical experiences.
- By 2013, on average, at least 50% of the SUNY graduating class will enter residency programs affiliated with colleges of optometry.

1.2 Goal: To deliver clinical education programs which are competency based.

Objectives:

- Measurable clinical competencies necessary for advancement at each level of the professional degree and residency programs will be defined.
- Students and residents will be required to demonstrate targeted clinical competencies as a part of their programs.

1.3 Goal: To provide an environment that develops critical thinking and life-long learning skills.

Objectives:

- A dynamic professional curriculum will be delivered that is centered on evidence based care and critical thinking.

- The use of varied, innovative and pedagogically sound instructional strategies in the professional program will be increased. This will facilitate critical thinking while being sensitive to the diverse learning styles of students.
- The use of primary research literature will be increased in all programs.

1.4 Goal: To develop future leaders in optometry.

Objectives:

- The College will develop a post-graduate assessment program to evaluate the effectiveness of its education programs as reflected in career path satisfaction, the assumption of leadership posts and impact on the communities in which our graduates serve.
- Each "value-added" educational program (PhD, masters, residencies, electives, etc.) will include a leadership development component within its curriculum.
- The College will develop programs to recognize and reward achievements of leadership among it students, staff, faculty and graduates.

1.5 Goal: To provide students, residents and alumni with the services to succeed in their careers.

Objectives:

- A Center for Career Development to provide professional career counseling services will be developed.
- Greater emphasis will be placed on career planning within the professional curriculum and residency programs.
- Additional programs will be developed that will increase professional program graduates' access to preferred career paths.

1.6 Goal: To provide residency education that will train individuals to develop advanced clinical competencies to meet current and future health care needs.

Objectives:

- Residency education will be expanded within five years to offer at least six additional residency positions to optometric graduates. These new opportunities will reflect the future health care needs of the public.
- An innovative and flexible didactic curriculum will be customized for each clinical residency program and reviewed annually.

1.7 Goal: To become a leader in continuing optometric education.

Objectives:

- The College will become the first choice for obtaining continuing education credits for the majority of New York State optometrists as determined by periodic surveys.
- The College will diversify the methods by which it delivers continuing education (e.g. data transfer, internet, webinars, and simulcasting of programs).
- Within five years, 20% of all continuing education will occur via distance learning.

1.8 Goal: To attract and enroll highly qualified students for the professional program.

Objectives:

- In any year, average scores for each entering class in the professional program, on all sections of the Optometry Admissions Test (OAT), will be in the first quartile of admitted optometry students for that year.
- Leadership potential and evidence of a strong commitment to community service will be specific criteria for admission to the professional degree program.
- The attrition rate for academic reasons, in the professional program, will not exceed 5% of students in any one class for the duration of the four-year program.

- The College will promote access and affordability through increased student scholarships and grants.
- The College will endeavor to keep the average total cost of education for students in the lowest quartile relative to similar programs nationally.
- Based on the results of the 2010-2011 Workforce Study, the entering first-year class will be increased to a maximum of 100 students (*revised 03.01.11*).

1.9 Goal: To attract and retain highly qualified, full-time faculty members.

Objectives:

- To compensate both existing and future faculty members at or near discipline-competitive levels adjusted for geographic location and faculty rank. (The compensation of faculty will be improved to a level equal to or above the average among comparable New York City-based institutions and among comparable institutions nationally. And, for clinical faculty, a level of compensation that is no less than 20% below other optometry compensation levels in the New York metropolitan area will also be used as an indicator.)
- A program of awards and recognition for achievements of faculty will be developed.
- Faculty members will be provided with appropriate development time including sabbatical leaves, opportunities to develop research, teaching and clinical skills.
- A mentoring system will be established that takes into account both faculty interests and institutional strategic imperatives.

1.10 Goal: To increase cultural sensitivity in all College operations.

Objectives:

- Participants from groups underrepresented in the profession will be sought in any recruitment programs sponsored by the College.
- Faculty search processes will be national in scope and will specifically encourage diversity within our community.
- Programs will be developed to increase cultural competencies in patient care.

1.11 Goal: To encourage, recognize and reward outstanding achievement.

Objective:

- The College will develop a recognition program to encourage achievement and outstanding service among its staff.

2.0 Making new discoveries that advance vision science and patient care

2.1 Goal: To develop and maintain the most productive basic and clinical research programs among schools and colleges of Optometry.

Objectives:

- Within five years, SUNY Optometry will reach $5 million per year in externally funded research grants including at least one center/training grant.
- By 2013, there will be at least ten faculty members holding major National Institute of Health research grants (R01 or equivalent grants) and at least three of them will be clinical in nature.
- By 2013, there will be three faculty or graduate students with National Institute of Health Clinician Development awards ("K" awards) of which at least one will be patient-based.
- Over the next five years, at least 100 research papers will be published in peer-reviewed journals and at least ten publications will appear in high impact journals.
- Over the next five years, at least 100 patient-based papers will be published in Index Medicus listed journals.

- Over the next five years, at least three basic science discoveries from SUNY Optometry will be recognized as seminal by the field.
- At least two significant applications of basic research to clinical problems will appear in publications authored by faculty or students.
- The College will produce at least three clinical contributions that alter or influence standards of clinical care in the practice of optometry.
- Groundbreaking research will be supported by fostering research collaborations.
- The application of basic research to clinical vision problems will be facilitated.

2.2 Goal: To establish a Center for Clinical Research

Objectives:

- Ground breaking clinical research will be promoted by recruiting faculty whose research is supported by National Institute of Health research grants (R01 or equivalent) in patient based areas.
- Opportunities for clinicians to participate in research will be enhanced by forming a research-based institutional career path and providing research mentoring and support in experimental design, statistics, technology infrastructure and access to the clinical population.
- Translational research will be developed through innovative means, such as; funding pilot projects for graduate program faculty, recruiting a researcher who is developing technology that translates existing basic research activity and/or supporting a nationally-competitive clinical fellowship in translational research methods.

2.3 Goal: To provide resources to attract and retain outstanding research faculty.

Objectives:

- Endowed chairs to support the recruitment and maintenance of outstanding research faculty will be developed.
- New faculty will be recruited in research areas that are transforming basic science and are likely to advance vision care (e.g. retinal and brain imaging, molecular genetics, extra-striate cortical studies, computational vision, visual-motor interactions, biophysics, cell signaling and development of eye growth and refractive state).
- In-house imaging facilities will be expanded for basic and clinical research, including retinal, single cell and cortical surface imaging.
- Access to fMRI facilities at neighboring institutions will be provided.
- The College will compete actively for New York State funds targeted towards recruiting scientists and graduate students.
- There will be increased collaboration with other colleges through the establishment of a visiting professor program.
- Projects which require funding between grant application cycles will be supported as is reasonable and appropriate.

2.4 Goal: To enhance the Ph.D program in Vision Science.

Objectives:

- PhD training and research activities will be arranged into interdisciplinary functional themes (e.g. image forming mechanisms of the eye, retinal mechanisms for acquisition and transmission of visual information, cortical mechanisms for extraction and interpretation of visual information, oculo-motor and visuo-motor interactions).
- Outstanding Ph.D. students and post-docs will be attracted by implementing a new research oriented curriculum.
- Stipends will be offered that are competitive with similar programs.

- The graduate programs will become an international nexus for vision research by hosting national and international vision conferences.
- The College will create an identity for the graduate program in vision science to increase its visibility.
- PhD applications will be coordinated with the admissions process used for the OD program for both recruitment and electronic processing of applications.
- Student and faculty interaction with each other and with other scientists within the New York City area will be improved.

2.5 To integrate the O.D/M.S. Program in Vision Science with clinical research and the development of clinical faculty

Objectives:

- By 2013, 25% of students graduating from the O.D./M.S. program will have join the faculty at a school or college of optometry, with another academic institution, or be otherwise engaged in research as a part of their professional responsibilities.
- All OD/MS students will be expected to publish their theses in peer-reviewed journals and to present at a national conference.
- Basic science and clinical faculty sharing mentorship of students will be encouraged.
- The College will develop and implement a contemporary clinical research oriented curriculum that provides a sound basis for the pursuit of clinical research and clinical teaching activities.
- O.D./M.S. students will be strategically linked to clinically-relevant projects and involve clinical faculty, that will address the future needs of optometric education and patient care.
- Coursework and research activities will be integrated with the Ph.D. program in order to foster research collaboration between the two programs and to allow for smooth transitions from the M.S. to the Ph.D. program.

3.0 Improving patients' lives by providing exceptional general and specialized optometric care

3.1 Goal: To provide clinical programs that attract a large, diverse patient population to support clinical education and enhance the visual welfare of the community

Objectives:

- Increased Public awareness of SUNY/UOC as a primary resource for eye/vision care needs will be increased.
- The UOC will expand its ability to support clinical activity at off-site locations in support of underserved communities.
- The UOC will expand its Homebound Program outside of Manhattan to reach an additional 1,000 patients per year.
- The UOC will increase its annual patient visits to 85,000 by 2013, reflecting an average annual growth of 5%.
- The UOC will increase visits via the Referral Service to 3,000 per year by 2013.
- The UOC will expand support groups and patient education programs in order for patients to be active participants in the care process.
- Students and faculty will be educated on options available to patients who are either uninsured or underinsured.
- Annual financial assistance for patients in need, will increase by 20% per year through 2013

3.2 Goal: To provide clinical care that is contemporary, efficient, ethical and of the highest quality.

Objectives:

- Expansion of clinical services will occur in the areas of rehabilitation, geriatrics and ocular disease, special testing and imaging.
- Clinical faculty, staff and students will demonstrate cultural competency and sensitivity.

- The UOC will provide in-house emergency eye care on a 24/7 basis.
- The UOC will develop and implement a comprehensive compliance program.
- The UOC's programs and clinical outcomes will achieve nationally recognized performance standards of excellence.

3.3 Goal: To train interns, residents, and faculty to function as members of an integrated health care team.

Objectives:

- Additional opportunities will be offered for students to provide care with other primary health care providers and relevant professionals.
- Students and residents will demonstrate clinical competency in the co-management of systemic diseases that are relevant to optometric practice.
- An affiliation will be established with a local comprehensive health care entity to facilitate integrated patient care.

4.0   Enhancing public health through education and service to a broad range of communities;

4.1 Goal: To increase SUNY Optometry's international presence.

Objectives:

- The College will establish a Center for International Studies dedicated to the advancement of vision care world-wide.
- Affiliations will be established with at least five educational entities in foreign countries.
- Within five years, at least 30% of fourth-year students will experience foreign clinical rotations each year.
- The College will host at least two foreign visiting faculty members for on-site programs each year.
- In collaboration with its foreign affiliates, SUNY faculty will present at least twenty-five days of educational programs abroad annually.
- Affiliations with foreign institutions will include opportunities for collaboration on basic science or clinical research projects.
- A feasibility study will be conducted to determine whether or not the College should develop a special OD program for foreign trained optometrists and/or PhD or MD faculty at affiliated foreign institutions.

4.2 Goal: To promote public health.

Objectives:

- The College will conduct at least 20 vision screenings per year.
- The UOC will develop a speakers network on a variety of topics relating to eye and vision care to be available on its website as a community resource.
- The College will become a member of local/regional healthcare and/or public health related associations.
- Public health awareness campaigns for faculty, staff and students will be established.
- The UOC will review its current clinical affiliation agreements every two years to determine whether or not its resources are being maximized to best serve the unmet eye and vision care needs in metropolitan New York City and throughout New York State.
- The UOC will meet with corporate/community neighbors to promote collaborative efforts to enhance the visual well-being of their constituents through public education and clinical care.
- The College will further develop collaborative relationships within its communities.

Chapter A: Mission, Goals, Objectives and Planning

This Chapter covers the following standards:

ACOE Standards:

Standard I. Mission, Goals and Objectives

Middle States Standards:
Standard 1: Mission and Goals
Standard 2: Planning, Resource Allocation and Institutional Renewal
Standard 7: Institutional Assessment

ACOE Standard I. Mission, Goals and Objectives

The College has engaged in an intensive strategic planning process involving broad input from the entire campus community in developing a five year strategic plan, "A Shared Vision", which was adopted in September, 2008. The process included a Strategic Planning Task Force with broad representation from academic, clinical, and administrative areas of the College, including faculty and staff. A large portion of the 2008 Faculty Retreat was dedicated to discussion of the strategic plan. (1.5) The resulting document articulates the College's mission and an extensive set of goals and measureable objectives by which it intends to achieve its mission. (1.1) The mission statement and goals are widely disseminated and the entire strategic plan is available on the College web site. (1.1.1) The goals and objectives include teaching and learning, research and scholarly activity, and community and public service. (1.1.2)

The mission, goals, and objectives give emphasis to a professional optometric degree program whose graduates possess the elements of entry level practice of optometry as defined by the program. This definition of entry level competency is based on the Attributes of Students Graduating from Schools and Colleges of Optometry document developed by the Association of Schools and Colleges of Optometry in 2000. The College adopted a modified version as its guiding document in April, 2003. (1.2)

The College has recently formed an Institutional Research and Planning Committee charged with overseeing the implementation of its strategic plan. Among issues to be addressed by the IRPC is alignment of the College's strategic plan with the SUNY's recently completed strategic plan, "The Power of SUNY".

Annually, the president requests the senior administrators of the College to develop a set of short term Institutional Goals, which relate directly to the strategic plan. Each year, these senior administrators report their progress toward these Institutional Goals to the president who ultimately makes this information available to the entire college community.

Initially, the College developed a Strategic Planning Grid with which to track the achievement of strategic objectives. However, this proved too cumbersome and in the summer of 2010, the IRPC, working with the vice presidents and president, developed a set of key indicators, which will be used to track performance longitudinally for functions related to the strategic plan. These are presented at the Annual Implementation Meetings (AIMs), after which they are made available to the entire community on the College's web site. Among the information tracked and published are National Board of Examiners in Optometry scores, clinic patient encounters, class profile and admission data, graduation rates, research productivity, and student plans following graduation. (1.3, 1.4)

Middle States Review:
The institution meets Standard 1, 2 and 7.

In addition to above stated detail, the Middle States members of the team report that the College's internal and external contexts and constituencies are integrally linked through its goals and objectives addressing teaching and learning, research, and community and public service. In addition, the College's planning process guidelines mandate an ongoing environmental scan of the external environment to assess potential external challenges and opportunities. The Institutional Research and Planning Committee also undertakes focused studies on issues of particular relevance to the College (e.g., the recently completed comprehensive workforce analysis of optometrists

and ophthalmologists in the state of New York).

The College has strategic goals that link to each component of the mission. For example, there are specific strategic goals within the teaching and learning mission that address how the institution will develop outstanding optometrists and vision scientists. Articulated goals also cover education (student learning), research, patient care, and public service. Each goal has key indicators, i.e., outcome and assessment measures, that document progress. Progress is actively tracked, and modifications to plans or actions are made as the result of their analyses.

The College has taken the initial steps to develop annual institutional goals that are clearly and closely tied to the strategic plan. We encourage the College to continue this effort, but there are so many goals, that we suggest they ensure that annual institutional priorities are well understood by the entire college community.

Strengths, significant accomplishments, significant progress, or exemplary/innovative practices

- The Mission Statement, Goals, and multiple Objectives are the result of a consultative and collaborative effort between the administration and constituencies of the College and provide a strategic plan to guide the College for the next several years.
- Institutional Goals for the coming year are developed by each major division of the College and the outcomes for them are reported annually to the College administration and community at large.

Non-binding Findings for Improvement ("Suggestions")

- Middle States Standard 7 Institutional Assessment
  We commend the College for its initial steps to develop annual institutional goals that are clearly and closely tied to the strategic plan. We encourage the College to continue this effort and to ensure that annual institutional <u>priorities</u> are well understood by the entire college community.

Chapter B. Curriculum and Student Learning

This Chapter covers the following standards:

ACOE Standards:
Standard II. Curriculum

Middle States Standards:
Standard 11.Educational Offerings,
Standard 13.Related Educational Activities,
Standard 14.Assessment of Student Learning

ACOE Standard II.Curriculum

The program has a curriculum, which prepares graduates for entry level practice as defined by the program's document, Expected Competencies and Attributes for Optometrists Graduating from the State College of Optometry, State University of New York. (2.1) The professional program is four academic years in length with summer sessions following the 2nd and 3rd years. (2.2)

As a free standing campus of State University of New York, the College has full authority and responsibility for all educational programs and does not share instruction with any other program. (2.5)

The program monitors its curriculum through student evaluations of all aspects of courses. Additionally, the dean

meets with each professional class approximately twice a semester to hear student concerns and answer questions. There are additional meetings between the dean, student officers, and department chairs. The College implemented a new curriculum in 2008 based on six content tracks running through the four year program and integrated throughout after a thorough curriculum review and planning process over the previous four years that was carried out by the Professional Curriculum Committee (which includes four students, one from each year) and faculty track coordinators with the assistance of the dean. (2.4)

The curriculum was redesigned to increase emphasis on small group discussions and integration of basic science material with its clinical application. These small group discussions, called integrative seminars, begin in the first year of the program and continue through to the externship rotations in the fourth year. In addition, the curriculum was changed from a quarter system for all four years to a semester system for the first three years.(2.4, 2.6) The College utilizes a plethora of assessments to measure student achievement throughout the four years of the program. Early on, written examinations and laboratory practical examinations are used to evaluate mastery of coursework. The students' clinical skills are evaluated at various points in the curriculum, with a comprehensive clinical practical examination at mid-semester of spring semester of the second year to assess fitness to practice as a student-clinician for the remainder of that semester. During their clinical experience in the University Eye Center (UEC) Primary Care Clinic, the students are evaluated utilizing the Table of Intern Clinical Competencies. The third year clinical experiences have been modified to include small group principles ("Pods") for third year students, which allow a group of six students to have continuity of preceptors and interact with two assigned faculty for an eight week period. The integrative seminar for the pod occurs in the clinic. All third and fourth year students have a clinical facilitator who tracks their performance in clinic. Should student performance not rise to an adequate level, the facilitator will design an individualized education plan (IPE) for that student to address areas of concern. For SUNY students graduating in 2010, 97.1% passed all three parts of the NBEO licensing examination by the time of graduation. (2.3)

The College has developed clearly written learning objectives for each didactic course and has developed a Table of Intern Clinical Competencies, which set standards for student performance in Primary Care Clinic during the third- and fourth-years. The components of Standard 2.9 are subsumed within the document which is designed to standardize clinical learning objectives and the grading process. (2.9.1-2.9.8)

Students' first-, second- and third-year and half of their fourth-year clinical experience occurs in the UEC, which has over 75,000 patient visits per year. The UEC is located in the heart of America's most densely populated metropolis and therefore has access to a widely diverse patient population. By the time of graduation, it is estimated that the average student will see approximately 1,500 patients. In addition to the on-campus visits, the students see approximately 53% of their patient visits in external clinical rotations. Students meet with their facilitator each semester to review their logs, progress and clinical experience to ensure that each student is receiving an appropriate mix of patients. (2.8)

The College currently has 41external sites for clinic education. There are 18 primary sites, 20 elective sites and three trial vision therapy, private practices. The trial sites were instituted this year to ascertain if private practices met the standards of the College to serve as training sites for fourth-year students. The College plans on continuing these three sites in future years based on the positive assessments that these externships received. The College has a signed memorandum of understanding, maintained by the Director of the Department of Clinical Science, which addresses respective responsibilities of all parties for every externship site. The student assessment of the clinical training program of the College was very positive. (2.10)

The selection criteria for externship sites include faculty qualifications, appropriateness of facilities and patient demographics. Each prospective site is required to complete a detailed application describing, among other information, the nature of the patient care services provided at the site, faculty qualifications and student resources. Individuals who supervise students at the site must complete an Initial Application for Adjunct Faculty Appointment and be granted adjunct faculty status by the vice president for academic affairs per established

guidelines, standards and policy. (2.10.1) These appointments are reviewed and renewed biannually.

Externship sites are monitored using a number of mechanisms. As mentioned above, there is an initial review process. Students are required to log each patient encounter, including demographic, diagnostic and treatment information, using a Meditrek system. The system provides summary data for each site and the adjunct faculty at the site that is reviewed by the director of externship programs. At the conclusion of a rotation, students complete a detailed evaluation of the site and the adjunct faculty that is reviewed by the director of externships and made available to third-year students to assist in their site selection. Additionally, site visits are conducted by the director. Decisions to modify retain or discontinue externships sites are made on an ongoing basis by the director of externships in consultation with the dean. The director compares student experiences and education both within and across sites for consistency and quality. (2.10.2)

The externship sites are provided with a detailed Externship Manual that includes a history of the program, goals and objectives, grading guidelines, instructions for the use of Meditrek, extern and clinical instructor responsibilities and assorted program policies and forms. (2.10.3)

Middle States Review:
The institution meets Standard 11, 13 and 14.

In addition to above stated detail, the Middle States members of the team report that while no undergraduate programs are provided, graduate and professional programs in clinical optometry (O.D. degree) and research in vision sciences (M.S./Ph.D. degrees [there are currently 11 Ph.D. students]) and residency and continuing education programs are offered. These are well-designed and fully meet the institution's mission. The optometry residency programs are accredited and the continuing education programs are approved through specialty review processes. Residency programs result in a Certificate of Completion. The institution follows good practices in the area of assessment and continuous quality improvement in all curricular matters. The curricula are competency based and include expected outcomes for graduating students in all areas including attributes, knowledge, skills and ethical values. The Ph.D. program has undergone some improvements but needs to better articulate expected outcomes with respect to skills and attributes and provide these expectations to students and faculty in a coordinated written fashion.

Transfer policies and credit are contained in Admissions Policies and Procedures and are published for students in the Student Handbook for OD students and in the Graduate Policy Document for graduate students.

International experiences are in place and plans for their expansion is underway. The oversight for all externship experiences is commendable, and this includes the international externships for which all local standards and oversight measures apply.

There are annual assessments of the impact of all of these activities on the ability of the College to sustain its commitment to the quality of its core mission. Indeed these activities enhance the College.

Strengths, significant accomplishments, significant progress, or exemplary/innovative practices

•   The College has implemented a curricular change, which is designed to increase clinical integration in the first years of the curriculum.
•   The College provides students with a large and diverse patient population.
•   In addition to the jointly identified strengths, the Middle States team would like to commend the College for its quality assurance at externship sites.
•   In addition to the jointly identified strengths, the Middle States team would like to commend the College for its well-established system of student evaluation that measures the achievement of learning objectives using multiple measures and provides feedback to the students.

Recommendations

- Middle States Standard 7 Institutional Assessment
  The goals and objectives of the PhD program need to be articulated.

Chapter C. Faculty, Research and Scholarly Activities

This Chapter covers the following standards:

ACOE Standards:
Standard III Research and Scholarly Activity,
Standard V Faculty

Middle States Standards:
Standard 10. Faculty

ACOE Standard III.Research and Scholarly Activity

The vibrant and growing nature of the College's research program can be summarized by examining the growth of extramural funding, which has increased from $622,000 in 1996-97 to just under $4M in 2010-11 (projected). In spite of difficult economic conditions, the College is making good progress toward its strategic goal of $5M in funding. Faculty members of the College hold a total of 33 extramural grants and the College holds a NEI T-35 training grant that supports the research activities of professional students working in selected laboratories. Other indicators of scholarly activity include faculty publications, invited talks and published abstracts presented at scientific and professional meetings. For 2008-2010, the faculty, post-docs and graduate students were authors of 98 publications and 136 published abstracts. (3.1)

ACOE Standard V. Faculty

The College employs 141 full- and part-time paid faculty members for a total full-time equivalent of 89.2. Faculty members may hold an appointment of either qualified (e.g., clinical and some research appointments) or non-qualified rank (tenure-track/tenured). Per SUNY Board of Trustees policies, qualified appointments are not eligible for tenure, but may be renewed indefinitely. Faculty members in the departments of Biological and Visual Sciences hold doctorates related to the field in which they teach. The majority of those faculty members have participated in post-doctoral research training. Optometrists with appointments in Clinical Sciences hold an OD degree, New York State optometric license and are credentialed by the University Eye Center. (5.1, 5.1.1)

To encourage faculty participation in College governance, the College encouraged the faculty to reorganize its committee structure so that certain key committees are elected from and by members of the faculty. The new elected Faculty Executive Committee (FEC), which consists of the presiding officer, presiding officer elect, secretary, faculty senator, faculty senator alternate, professional program representative and graduate program representative, is responsible for facilitating communication and coordination of activities among the President, Dean ,Vice-presidents, and the faculty. (5.2)

In October of 2009, a new program was introduced wherein a primary supervisor was assigned to each faculty member. The advisor's role is to facilitate faculty development to achieve professional goals, and to provide guidance and mentoring of individual faculty members, including career development and advancement. (5.3)Faculty members are to meet with their supervisor at least annually to review the past year, establish goals for

the future and identify ways to facilitate those goals, discuss teaching and clinic assignments for the year, and formulate requests for assignment change. (5.4)

The policies and procedures for faculty recruitment, promotion, tenure, academic assignments and responsibilities, sabbaticals, reporting relationships, grievances, and benefits are published on the College's website. In meetings with the faculty it was apparent that the policies and procedures were followed. (5.5)

Middle States Review:
The institution meets Standard 10.

In addition to above stated detail, the Middle States members of the team report that all faculty hold the appropriate credentials including those teaching graduate courses, and all faculty are reviewed annually. While faculty rights such as academic freedom and due process are protected as the result of the Statewide UUP collective bargaining arrangements, local faculty voice and governance is healthy and robust and is appreciated both by faculty and administration.

Chapter D. Governance, Regional Accreditation, Administration and Finance

This section covers the following standards:

ACOE Standards:
Standard IV. Governance, Regional Accreditation, Administration and Finance,
Standard 5.2 Faculty governance,

Middle States Standards
Standard 3. Institutional Resources,
Standard 4.Leadership and Governance,
Standard 5.Administration,
Standard 6.Integrity

ACOE Standard IV. Governance, Regional Accreditation, Administration and Finance
And Standard 5.2 Faculty governance

The State University of New York (SUNY) is comprised of 64 individual campuses, which are decentralized in location and administration and diversified in curricula. The overall direction of SUNY is set by the Board of Trustees who are appointed by the Governor. The Chancellor of the University functions under the Board of Trustees. Each campus of SUNY functions under the System Policy Administration staff. As a freestanding campus of SUNY, the President of the College of Optometry reports directly to the Chancellor. The Board of Trustees upon the recommendation of the Chancellor appoints the President. The evaluation, retention and dismissal of the President are governed by the Board of Trustees policies. The policy for review of presidents is currently under review. The President is assigned the responsibility and authority for the formulation and implementation of policies to enable the College's mission and which are in compliance with the policies of the System and the Board of Trustees. (4.1, 4.1.3)

The SUNY State College of Optometry is accredited by the Middle States Commission on Higher Education. (4.2) As part of the SUNY System, it has policies concerning conflict of interest, due process, disclosure, non-discrimination, confidentiality of records and fiscal accountability, which are set forth by the SUNY Board of Trustees. (4.1.1)

The President of the College, who is its chief executive officer, has a professional optometric degree and more than 25 years of experience in optometric education, including 13 years as Dean for Academic Affairs at another

optometric institution. The Vice President and Dean for Academic Affairs has a Ph.D. in biology and has been in optometric education for 17 years, with the last three years spent in his current position. (4.3)

The SUNY Board of Trustees clearly assigns the President with the fiscal management of the campus and its programs. (4.4)

When the President arrived in 2007, he set a high priority on open communication between the administration and faculty, staff and students. In conversations with the College constituents, these efforts have been successful. The faculty reorganized its committee structure so that faculty members elect members of certain key committees. The President and Dean meet periodically with the Faculty Executive Committee and the president holds three or four open meetings per year with faculty and staff. At the fall meeting, the president presents his State of the College Report. The College administration is organized into five functional areas: Academic Affairs, Student Affairs, Clinical Affairs, Institutional Advancement, and Administration and Finance. Each of these is responsible for formulation and implementation of policies appropriate to its area. Position descriptions for administrators are included in the Faculty Handbook. The area of Academic Affairs is currently undergoing a comprehensive assessment of its structure. (4.1.2)

The College has a systemthat enables faculty participation in the governance of the College. Faculty participation is discussed in further detail in Chapter C on page 16. (5.2)

At the beginning of each academic year, performance expectations are negotiated between the administrator and his/her supervisor. These expectations are linked to the College's Strategic Plan whenever possible. These management goals are then summarized by the President and shared with the College community.

Toward the end of the year, the employee prepares a performance document detailing his/her activities and progress on the expectations and meets with his/her supervisor to review them. The outcomes of these meetings serve as a basis for the following year's performance expectations. (4.5)

Support for the College comes directly from the State of New York through the budget of the State University of New York. In addition, tuition and fees, research grants, clinic income, and philanthropy contribute to the College's total operating revenue budget of approximately $41.7M (from 2009-10 IPEDS data). For the past three years, there have been significant reductions in state support, totaling $1,243,000 in direct state support. Tuition increases during this period reduced the actual impact to a decrease of $214,300. Clinic revenue, research, and philanthropy have made up for this shortfall and the College has been able to grow its financial reserves from $6M in 2005 to $14M in 2010. Tuition and fees provided revenue of approximately $5.3M in 2009-10 (IPEDS data), research grants provided $3.3M in 2009-10, and clinic revenue was $8.7M in 2009-10 (IPEDS data). The College is currently in a capital campaign to raise $10M, and is approximately half way to that goal.

Although direct state support has decreased, the College has identified short- and long-term facilities needs which have been well supported by the State University Construction Fund, which is separate from the direct state allocation. These funds will be used for a renovation of the lobby, second floor, third floor, third floor mezzanine, and part of the research space in the 16th and 17th floors. Part of the renovations will create a Campus Center for Student Life and Learning. (4.6)

As a state-operated entity, the College must abide by the rules, regulations, operating and audit procedures that govern all state agencies. The State University of New York has an Administrative Procedures Manual that details these policies. The SUNY Controller's Office receives information from each campus and produces a consolidated financial statement that is then audited by an independent auditor. (4.6.1)

Middle States Review:
The institution meets Standard 3, 4, 5, and 6.

In addition to above stated detail, the Middle States members of the team report that:

The human, financial, technical, physical facilities and other resources necessary to achieve the institution's mission and goals are available and accessible. In the context of the institution's mission, the effective and efficient uses of the institution's resources are analyzed as part of ongoing outcomes assessment.

It should be noted that the State's guidance on ethical behavior requires that each faculty member and all administrators earning a New York based salary above a certain threshold (as determined by the New York Ethics Commission) must sign an annual disclosure statement regarding their sources and amounts of income as well as a state mandated code of ethics affirmation.

A review of the organizational chart indicates clear lines of authority and responsibility.

The College's student grievance procedures and equitable treatment of students are clearly articulated in the student handbook.

Both the SUNY Board of Trustees Policy book and the Faculty Handbook provide detailed policies on discipline, faculty evaluations and promotions, tenure, retention and compensation. The handbooks also address the principles of academic and intellectual freedom.

The College as a public institution in the state of New York educational system provides public access to its mission, vision, goals, objectives, self-studies, and periodic reports. These documents and factual information regarding recruitment and admission criteria, graduation, retention and pass rates are all available on the institution's web site.

Strengths, significant accomplishments, significant progress, or exemplary/innovative practices

• The President's vision and leadership is a strength
• The College has a consultative, open administrative organization, which emphasizes transparency, communication and shared governance.
• Despite reductions in state support, the College has effectively managed its financial resources.
• The College has done an excellent job at identifying its short- and long-term facilities needs and has been well supported by the State of New York through the State University Construction Fund.

Recommendations

• Middle States Standard 3 Institutional Resources
The College utilizes an annual budgeting process to identify some of its equipment replacement needs. The College needs to develop a comprehensive and systematic equipment lifecycle process that proactively supports the leadership's identification of future budget requirements.

Chapter E. Student Admissions and Services

This section covers the following standards:

ACOE Standard:
Standard VI Students

Middle States Standards:
8. Student Admissions and Retention,
9. Student Support Services,
12. General Education

ACOE Standard VI Students

The College employs an organized and systematic process for recruitment and admission of a qualified student body as outlined in the "Admissions Policy and Procedure" document that is reviewed and revised periodically. The entire Department that reports to the Vice President for Student Affairs consisting of Director of Financial Aid, Registrar, Admissions Assistant, Minority Recruiter/C-STEP Coordinator and a newly established Director of Admission and Marketing, all participate in, and have knowledge of, the recruitment and admissions processes. The staff members conduct an off-campus college visitation program in addition to select faculty members, students and alumni. (6.1)

The entering class size has fluctuated between 69 to 74 matriculants each year over the past five years with a graduation rate above 95% each year. In the introduction to the self-study, the College included a late update indicating that as the self-study was going to press, the College's Center for Eye Care Policy had completed a comprehensive work force analysis for New York State. The analysis examined the current supply of eye care providers, the growing demand for eye care services, and the need for both optometrists and ophthalmologists over the next few decades. Based on the results of this study, the College has proposed increasing enrollment to 100 students per year by as early as 2017 or late as 2020. The program has indicated its intent to increase the entering 2011 class by 5 students with the future pace of increase dependent on having requisite programs, resources and facilities in place.

The College publishes the criteria and elements needed to initiate a successful application for admission through its website, catalog and brochures. Applicants are required to have completed a minimum of ninety semester hours and all required prerequisites, which are verified by staff upon admission and before matriculation. The Committee on Admissions is composed of appointed faculty members and students. Time is allotted in the faculty schedules for admissions-related work each week. The Committee establishes and follows policies and procedures as well as makes individual admissions decisions. (6.2, 6.2.1, 6.2.2)

The Vice President for Student Affairs is a dedicated and educated professional with extensive previous experience in student affairs. He supervises a team consisting of the following positions, which are staffed with qualified individuals: Director of Financial Aid, Registrar, Admissions Assistant, Minority Recruiter/C-STEP Coordinator and a newly established Director of Admission and Marketing. Financial aid and financial aid counseling are provided to students, and a low student default rate and graduate indebtedness are reflected in the College's statistics. Students seem pleased with these services. Students have tutoring and academic assistance available to them, primarily through faculty, though there is a system for such services via Student Affairs. Students learn of professional opportunities primarily via a required course in the third year, a website and various faculty and guest speakers. The College has targeted career services as a subject area for improvement and growth, and formal programmatic planning for an area dedicated to providing expanded practice management and career services is underway. (6.4, 6.4.1)

Both applicants and admitted students have access to a wealth of pre-matriculation information via the College's website including health requirements and access to care, counseling and required immunizations; the website contains the "Student Handbook". Personal counseling can be initiated with the Vice President for Student Affairs, and opportunities also exist with the University Eye Center's Department of Social Services. (6.3)
The College's Registrar is a professional and maintains an orderly, confidential and secure system for records management. The College follows the guidelines of the American Association of Collegiate Registrars and Admissions Officers with respect to retention and disposal of student records. The College also adheres to the

Family Educational Rights and Privacy Act (FERPA) regarding access to student records, and members of the student affairs staff have been trained regarding FERPA. (6.5)

The College website, catalog and brochures communicate an accurate representation of the College and program. The on-line Student Handbook and College Catalog publishes an abundance of helpful, organized and accessible information for students and prospective students, which contain policies and procedures on academic and professional standards, grading, attendance, disciplinary conduct, retention, dismissal and reinstatement, non-discrimination policy, due process, transfer credit, academic calendar, tuition, fees, refund policy, honors, scholarship and awards, and other related matters. No historical records of formal student complaints could be identified on-campus, and the administration indicates a policy for their retention was only recently established during the Self-Study process and is now in-place and published in the Student Handbook. (6.6, 6.6.1, 6.6.2)

Students have an established system of student governance, the College's Student Council, which includes representatives from each year of the professional program, the graduate program and other student organizations. The Student Council is active, and its rules and structure are included in its constitution. Students also participate in several other clubs and organizations. Students appreciated their opportunities for interactions with the program's faculty and the faculty's commitment to promoting student learning and success. The College administrators meet regularly with Student Council officers. (6.7)

Students have exposure to the advantages of residency education via exposure to current residents in clinic, faculty discussing residencies and graduate opportunities, and residency information sessions with the entire class provided by select faculty. Information about the College's graduate programs is published on its website. (6.8)

Middle States Review:
The institution meets Standards 8, 9, and 12.

In addition to above stated detail, the Middle States members of the team report that:

Admissions policies support and reflect the strategic plan Goal 1.8: "To attract and enroll highly qualified students for the professional program." The graduate programs office works with the College's admissions office to inform entering optometry students of the option to pursue a graduate (M.S. or Ph.D.) degree. Criteria for admission into the graduate program, as well as policies and procedures used in the admission process, are published in the Graduate Policy document, available online. The Associate Dean for Research & Graduate Studies communicates with professional program students, both pre-and post-admission and at the first-year orientation session, to raise awareness of the joint degree options.

The institution makes special efforts to attract and retain students from underrepresented minority groups, including participation in the New York State-funded College Science and Technology Entry Program (CSTEP) and through a summer academic program for interested students who do not initially meet the admissions standards. Certain of these efforts have only recently been put in place; however, data for the last year indicate that these efforts are producing improved results.

For the graduate program, academic counseling is provided by the Associate Dean for Research & Graduate Studies. Other student services are provided through the Office of Student Affairs.
Admission requirements for the professional and graduate programs ensure that students have the appropriate general education skills.

Strengths, significant accomplishments, significant progress, or exemplary/innovative practices

•   The College's on-line catalog and student handbook provide an abundance of helpful, organized, and assessable information to students and prospective students.

•   The office of student affairs has been successful in its articulation of data driven decision making which has resulted in widely acknowledged benefit for the optometry students.
•   The students' interaction with College administration and faculty is commendable.

Non-binding Findings for Improvement ("Suggestions")

As responsibilities for graduate program student support services are clarified, the College should assess the need for delivery of focused support services for graduate students.

Chapter F. Facilities, Equipment and Resources

This Chapter covers the following standards:

ACOE Standard:
Standard VII Facilities, Equipment and Resources

Middle States Standards
Standard 3. Institutional Resources

ACOE Standard VII Facilities, Equipment and Resources

The College is located at 33 West 42nd Street in New York in a building that provides adequate space to carry out the College's key activities for teaching, research and patient care. The single building includes 20 floors with a total of 297,000 square feet of which 135,531 is net assignable square feet. There are threeclassrooms with a capacity of 75 each, as well as an auditorium in the basement that was renovated in 2006, which has a capacity of 242. The lecture rooms and auditorium provide hard-wired network access from the podium; power and network capabilities for classroom seating; rear screen LCD projectors that can provide single and dual screen projection; podium PC, laptop connectivity and document camera; DVD, VHS and video conferencing capabilities; and wireless microphone, keyboard and mouse units for the podium. The building also includes laboratories (both basic science and clinical procedures) and clinic space that support the professional program in optometry, graduate programs, residency programs, continuing education, and research (14th – 17th floors, with an animal care facility on the 17th floor). The College has been successful in making capital improvements in recent years ($36.3 million in total projects between '08-'13) as evidenced by several recently completed and other on-going and currently launching projects. (7.1)

The latest project to be initiated consists of the development of a "Campus Center for Student Life and Learning". This $8.5 million project includes major alterations on the south sides of floors 2, 3, and a portion of the 3rd floor mezzanine. Once completed, the new Campus Center will create a hub of activity centering on the 2nd floor thatwill be developed as an integrated learning center consisting of a modification to the current lecture hall, a large high technology seminar room, small group study rooms, and a new pre-clinical teaching lab. In addition to providing expanded and additional space dedicated to "Student Life", the program expects the alterations to accommodate the College's plan to increase the entering class size to a target of 100 entering students by as early as 2017 or late as 2020. The program has indicated its intent to increase the seating capacity of the two classrooms on the ground floor to 100 each by fall of 2013. The second-floor classroom's capacity will ultimately be increased to 100, and the College is currently examining how to achieve this. When it was pointed out that oneof their classrooms maybe smaller than their entering classes once the plan was fully implemented, College representatives indicated the larger class size would be feasible with "creative scheduling". The next planned project is a major lobby renovation ($3.5 million), with particular emphasis on making the space more attractive, functional (including increasing seating capacity in two lecture halls), and secure.

Four entire floors composed of approximately 100 examination rooms provide for direct patient care. Examination rooms contain the necessary complement of optometric examination equipment as well as special testing rooms with specialized and advanced diagnostic equipment including retinal cameras, Goldmann perimeter, low vision equipment, autorefractors, head trauma testing equipment, vision therapy diagnostic and therapy equipment, OCT's, A and B scan ultrasound, pachymeter, UBM, IOL Master, Humphrey Visual Field Analyzers, FDT Analyzer, Octopus Analyzer, Matrix Analyzer, VEP/ERG, GDX, Nidek and Iridex lasers, B & L Lasix laser, Optomap, digital imaging system and corneal topographer. The College provided information on the three most recentyears' acquisition, replacement, repair and maintenance of equipment reflecting approximately one million dollars worth of expenditures each year. However, a replacement schedule for the on-going planned replacement of highly utilized and aging clinical and laboratory equipment could not be identified. It was reported to the team that such items are replaced upon failure and upon request by Vice Presidents. The College is fortunate to have, and relies heavily upon, the skills of a full-time and dedicated maintenance person who repairs the equipment. (7.1.1)

The Kohn Vision Science Library occupies the fourth floor of the building, with access to two quiet study rooms on the third floor mezzanine. The total area of the fourth floor is 13,500 square feet, including two restrooms. The public areas are: four major stack sections, four group study rooms, two computer labs, two audio-visual rooms, one multimedia room, study carrels, couch seating area, book and instrument display areas, and quiet study areas with tables. The Library collection is accessed via the EyeBrowze on-line public access catalog and supports the curriculum and research needs of the College, as well as providing specialized material via Interlibrary Loan to outside institutions and patrons. The Library holds subscriptions to a large collection of electronic journals, and it has additional access provided by SUNYConnect (a program of the State University of New York), and the New York State Library's NOVEL service (New York Online Virtual Electronic Library), as well as electronic databases including the National Library of Medicine's PubMed, Google Scholar and VisionCite Citation Index (citations to articles targeted to vision science, optometry and ophthalmology). Open URL linking technology allows connection from these databases to full-text electronic content owned by the Library. The College's Information Technology Department provides maintenance and support for computers and printers in the Library including; 41 computers, five online catalog and transfer stations, nineprinters, two copiers, two scanners, microfilm/microfiche reader, Fax machine and typewriter. (7.2)

Both the library and information services areas employ trained and degreed professionals and demonstrate a supportive environment for both scholarly and clinical activities. The IT department has a planned replacement schedule for technology and shows a commitment to maintaining current and secure access for all applications. (7.3)

Middle States Review:
The institution meets Standard 3.

In addition to above stated detail, the Middle States members of the team report that:

The College has had several years of ongoing support from the State of New York through the State University Construction Fund for the rejuvenation of its facility's infrastructure. It has a sound capital improvement plan in place and a review of the College's Critical Maintenance Capital Projects reflects successful achievements of several of its planned milestones.

A review of the College's Information Technology Action Plan and interviews with the IT leadership clearly indicate a well developed and proactive effort to address the growing needs for IT security, equipment upgrades, systems interoperability and the increasing demand for enhanced and expanded technology to support the College community.

The Kohn Vision Science Library is a "state of the art" facility with highly trained staff focused on addressing the needs of the customers it serves. A recent Library Patron Survey in the Fall of 2009 assessed user-satisfaction and

lead to increasing the hours of operation, redesigning and expanding the Library's web site and external web site accessibility, and expanding access to more online journals.

Strengths, significant accomplishments, significant progress, or exemplary/innovative practices

•   The institution has been successful in making capital improvements.
•   The availability of full time equipment repair personnel is a strength to the College.

Chapter G. Clinic Management and Patient Care Policies

This section covers the following standard:

ACOE Standard:
Standard VIII Clinic Management and Patient Care Policies

Middle States has no applicable standards.

ACOE Standard VIII Clinic Management and Patient Care Policies

The University Eye Clinic (UEC) is the primary facility for patient care and is found in the main campus building on floors five through seven. The UEC currently has seventeen additional external sites in the greater metropolitan NY area where patient care is available. Two of these UEC satellite clinics, the East New York Diagnostic and Treatment Center and Woodhull Medical Group, are locations where both student externs and residentsare located. There are currently forty-one additional external education sites for externships mostly scattered across the Eastern United States but also include sites in California, Arizona and internationally in Canada and China. These consist of Department of Veterans Affairs' facilities, community clinics, military hospitals, and referral centers. Externship sites are utilized for a portion of the fourth-year curriculum and were discussed in Chapter C.

The UEC is a busy facility. The central clinic at 33 West 42nd Street had 75,000 patient visits in 2010 and is on track to reach a Strategic Goal of 85,000 patients in 2013. The satellite clinics are also busy with nearly 59,000 additional patients seen in 2010. This patient volume coupled with a diverse urban patient population allows students and residents, under the supervision of clinical faculty, to have an excellent opportunity for clinical training and education. The UEC began a well received Referral Service in 2007 that provides secondary specialty testing and care to patients referred by outside practitioners. Referred patients may begin their patient experience on the 7th floor Primary Care Service. Those patients determined to require additional specialized care in the areas of ocular disease, vision therapy, advanced contact lenses, pediatrics, low vision, head trauma, adults with disabilities, infant vision, and children with special needs and/or learning disabilities, are seen in those specialized clinics. The educational design and oversight of patient care delivery services enable the College to meet its clinical training mission, goals, and objectives. (8.1)

A defined chain of command for clinic management exists in the areas of Professional Services, Clinical Operations, Clinical Service Areas, Patient Financial Services, Medical Records, Clinical Information Technology, and the University Eye Center Committees. These delineate the lines of authority for the principal and secondary administrators of the clinical care program. The College clearly defines the responsibilities of these individuals through position descriptions. The ongoing efforts of these individuals are supplemented with the biweekly meetings of Clinic Council that discusses issues with the purpose of balancing the clinical patient care quality with the educational needs of the students. The Clinic Council consists of UEC administrative staff, chiefs of clinical services, an educational facilitator and a Faculty Executive Committee representative. This broadly represented group of individuals maintains regular dialogue to develop recommendations for care delivery and clinical education improvements, and to consider all other operational issues. (8.2)

The College maintains a comprehensive UEC Policy and Procedure Manual that was last updated in March 2011. It addresses and/or references all policies and procedures related to the delivery of patient care in clinics utilized for training. Because it has grown to nearly 700 pages in length, use of an electronic version is encouraged. It is available electronically throughout the College and clinics via Firstclass Desktop. In the unlikely occurrence of network failure or computer access problems, a hard copy or CD of the manual is available on each floor of the clinic. All clinicians, faculty, and staff are informed of its purpose and instructions on how to access a copy. (8.2.1)

All clinical faculty proceed through initial credentialing when initially hired and undergo re-credentialing bi-annually. This process is clearly defined in the UEC Policy and Procedures Manual. These credentialing documents are kept in individual files along with their respective privileging documents and are located in the Credentialingdepartment. Several of these files were inspected and reviewed during the site visit, and the team found them to be thorough. (8.2.2)

A new improved system for credentialing and privileging was recently implemented to reduce paperwork for both staff and the clinical faculty. As a result, all faculty members were asked to complete a new credentialing form to bring the credentialing and privileging files up to date. Practitioners may request consideration for new privileges at any time during their two-year cycle as they wish to update their status. The Credentialing Committee reviews all requests and grants privileges and changes to status, when appropriate. (8.2.3)

The College implemented an electronic patient record system (Allscripts) since the last evaluation visit. The software was not specifically developed for use as an eye care system. The College has adapted the program to attempt to meet its needs, but a review of the system shows that it remains cumbersome and inefficient for even experienced users. The College has recognized the need for improvements and has plans to replace the system with $750,000 from existing funds earmarked for the project. Exact details were not shared as they were in process of reviewing bids, but plans are in place to have access to historical and current data or to incorporate this data into the new replacement system, which will allow more efficient view of the patient's condition and previous care. (8.2.4)

In addition to exam record software challenges, faculty expressed concerns with what appears to be inefficient appointment scheduling software that does not always optimize faculty resources or educational opportunities. Administration recognizes that a problem exists with the IDX scheduling system and has recently invested $300,000 for upgrades to the system.These upgrades will more allow flexibility for the schedulers to view additional time slots, but may not eliminate all the faculty's issues. The switch to the Pod system for the third year students and the schedule complexity is blamed for part of the ongoing problem. Because the fourth year students operate on different schedules, attempts to improve the scheduling for the Pod system results in difficulties for the fourth year. Administration believes that no system exists that can work perfectly for all involved in the clinic but pledges to continue to work on the problem in the future and understands the value that an improved system would offer.

The UEC's Quality Assurance and Improvement Plan is well documented in the Policy and Procedure Manual. The Quality Assessment and Improvement Committee review a minimum of 10 records from each faculty member annually during its weekly meetings. When an error, omission, or failure to comply with clinic management protocols is noted, a level of non-compliance is assigned and an accelerated system of remediation is followed depending on the severity of the issue. Examples of investigated cases were reviewed, and the system appears to be functioning well. In addition to individual faculty chart review, inspections of charts with specific diagnoses (diabetes, glaucoma, etc.) occur to evaluate if clinical care indicators are being met with a 95% compliance level. Most recently glaucoma patient charts have been reviewed, and the 95% level is being reached for nearly all indicators. Patient surveys can be filled out on paper or on-line. Anonymity is possible, and responses reviewed by the team indicate a high level of satisfaction. The students electronically evaluate the clinical faculty regularly. There are three annual In-service programs that faculty and student clinicians are required to take. The first is a

Business Integrity and HIPAA Program that focuses on proper billing and coding, and this on-line course is followed by a test. Additionally, there is an annual course on Domestic and Child/Dependent Adult Abuse. Lastly, a College Compliance Course featuring infection control is required annually for all student clinicians and faculty.(8.2.5)

The Patient's Bill of Rights is physically posted in patient reception areas and is availableto patients as a handout. Payment and insurance policies are available on clinical floors and on the College website. Informed consent documents for general care are signed by all patients and additional consent documents for secondary and tertiary care are utilized when appropriate. (8.2.6)

The UEC has specific procedures in place for responding to verbal complaints, patient satisfaction surveys, and written patient compliments and complaints. This policy is published in the Policy and Procedure Manual. Copies of these collected items and the College responses were reviewed on site. (8.2.7)

Clinical faculty and staff, as employees of the State of New York, are covered for their acts or omissions when their actions are within the scope of employment. Students are covered for liability with a separate certificate of insurance purchased by the University. The University police force is responsible for the safety and security of the campus. Periodic fire and building evacuation drills are conducted. Annual classes for Infection control must be taken by faculty and student clinicians. Faculty and students are required to maintain active CPR certification. (8.2.8)

Detailed Clinical Management Protocols are published in the UEC Policy and Procedure Manual. These incorporate clinical practice guidelines delineated by published AOA diagnosis specific guidelines and AMA guidelines for conditions not included in the AOA series. The UEC guidelines have been developed by consensus of the UEC optometric staff and are reviewed annually by the Clinic Council with updates as needed. (8.3)

Strengths, significant accomplishments, significant progress, or exemplary/innovative practices

• The College has a well developed and comprehensive Policies and Procedures Manual
• The College has an extensive and defined process of credentialing and privileging faculty members.
• The College has significant interest in developing and improving its Quality Assessment Program to monitor the status of patient care delivery.

MIDDLE STATES SUMMARY:

Affirmation of Continued Compliance with Requirements of Affiliation
➢ Based on a review of the self-study, interviews, the certification statement supplied by the institution and/or other institutional documents, the team affirms that the institution continues to meet the requirements of affiliation as stated in "Characteristics of Excellence".

Compliance with Federal Requirements; Issues Relative to State Regulatory or Other Accrediting Agency Requirements
➢ The team affirms that the institution's Title IV cohort default rate is within federal limits. (It has been less than 1% for the last 8 years). The team relied on institutional certification and other written documentation (federal website) to make its determination. The team also verified that the institution meets relevant requirements under the Higher Education Opportunity Act of 2008 such as those related to clear publication of transfer of credit policies and procedures. Distance education consideration is not applicable.

➢ The team is not aware of any issues relative to state regulatory requirements or the institution's status with other (e.g., programmatic) accrediting agencies that would have an adverse effect on the

institution.

Middle States Evaluation Overview
  ➢   In the opinion of the Middle States Site Visit Team Members, SUNY Optometry meets all 14 Middle States Standards.
  ➢   In addition, 16 strengths were cited by the collaborative team in the following areas:

•   The Mission Statement, Goals, and multiple Objectives are the result of a consultative and collaborative effort between the administration and constituencies of the College and provide a strategic plan to guide the College for the next several years.
•   Institutional Goals for the coming year are developed by each major division of the College and the outcomes for them are reported annually to the College administration and community at large.
•   The College has implemented a curricular change, which is designed to increase clinical integration in the first years of the curriculum.
•   The College provides students with a large and diverse patient population.
•   Commendations for the College for its quality assurance at externship sites.
•   Commendations for the College for its well-established system of student evaluation that measures the achievement of learning objectives using multiple measures and provides feedback to the students.
•   Commendationsfor the commitment to promoting student learning and success.
•   The President's vision and leadership is a strength
•   The College has a consultative, open administrative organization, which emphasizes transparency, communication and shared governance.
•   Despite reductions in state support, the College has effectively managed its financial resources.
•   The College has done an excellent job at identifying its short- and long-term facilities needs and has been well supported by the State of New York through the State University Construction Fund.
•   The institution has been successful in making capital improvements.
•   The availability of full time equipment repair personnel is a strength to the College.
•   The College's on-line catalog and student handbook provide an abundance of helpful, organized, and assessable information to students and prospective students.
•   The office of student affairs has been successful in its articulation of data driven decision making which has resulted in widely acknowledged benefit for the optometry students.
•   The students' interaction with College administration and faculty is commendable.

Summary of Recommendations for Continuing Compliance and Requirements

The following two recommendations and two suggestions are provided.

Standard 3: Institutional Resources: "The human, financial, technical, physical facilities, and other resources necessary to achieve an institution's mission and goals are available and accessible. In the context of the institution's mission, the effective and efficient uses of the institution's resources are analyzed as part of ongoing outcomes assessment."

Recommendation:
The College utilizes an annual budgeting process to identify some of its equipment replacement needs. The College needs to develop a comprehensive and systematic equipment lifecycle process that proactively supports the leadership's identification of future budget requirements.

Standard 7: Institutional Assessment: "The institution has developed and implemented an assessment process

that evaluates its overall effectiveness in achieving its mission and goals and its compliance with accreditation standards."

Suggestion:
We commend the College for their initial steps to develop annual institutional goals that are clearly and closely tied to the strategic plan. We encourage the College to continue this effort and to ensure that annual institutional priorities are well understood by the entire College community.

Standard 9: Student Support Services: "The institution provides student support services reasonably necessary to enable each student to achieve the institution's goals for students."

Suggestion:
As responsibilities for graduate program student support services are clarified, the College should assess the need for delivery of focused support services for graduate students.

Standard 11: Educational Offerings: "The institution's educational offerings display academic content, rigor, and coherence appropriate to its higher education mission. The institution identifies student learning goals and objectives, including knowledge and skills, for its educational offerings."

Recommendation:
The goals and objectives of the PhD program need to be articulated.

ACOE SUMMARY

The SUNY College of Optometry has an extensive set of mission, goals, and objectives which guide it in all its activities, including budgetary decisions, setting administrative agendas, and evaluating the effectiveness of the college. It has implemented a curricular change which increases clinical integration and has a clinical program which provides students with a rich and diverse patient population. Despite reductions in state support, the College is fiscally sound and has acquired resources to make capital improvements. The administrative team has set a tone of collaboration, openness, and shared governance. Student and faculty input is encouraged and carefully considered. The College would benefit from a formalized replacement schedule for clinical and laboratory equipment and should continue its efforts in seeking a replacement for its electronic medical records/appointment scheduler.

ACOE 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. A formalized replacement schedule for heavily utilized and aging clinical and laboratory equipment should be developed. (7.1.1)
2. The College should continue to explore replacement of the electronic medical record and appointment systems which do not function well in fulfilling the needs of the clinic. (8.2.4)

Summary of Compliance

Standard	Status	Reason for Met in Part or Not Met
I	Met	
II	Met	
III	Med	
IV	Met	
V	Met	
VI	Met	
VII	Met	
VIII	Met	