

National Association of Canadian Optician Regulators



EDUCATIONAL AGENCY MANUAL

For

ACCREDITATION

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Introduction

The National Association of Canadian Optician Regulators [NACOR] is an organization of nine provincial regulatory bodies, and two of their stated goals are “to develop quality benchmarks for accreditation standards and processes for opticianry” and “monitor and investigate common issues related to accreditation and mobility of opticians nationally and internationally.”

As one of its primary projects, NACOR is charged with developing, coordinating and managing a national accreditation process for opticianry programs.

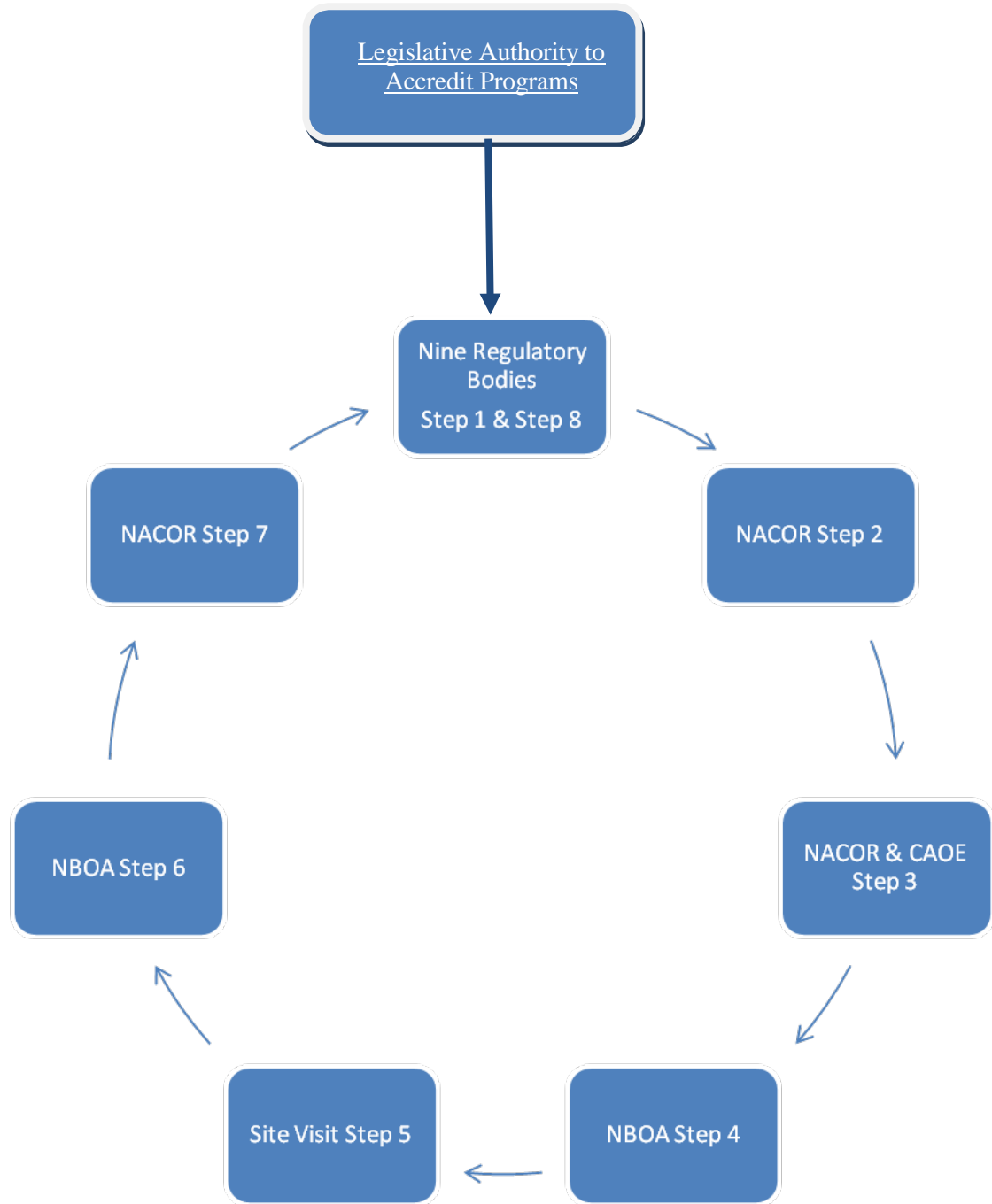
The primary objective of this initiative is the identification of those opticianry educational programs meeting NACOR academic requirements and criteria for accreditation.

Further, it aims to:

- provide an auditing mechanism independent of the educational system
- assure the educational community and the general public that a program has clearly defined and appropriate objectives and is meeting them
- ensure that a program reflects current technical practices and educational methodologies
- promote portability of qualifications through the provision of nationally accredited educational programs
- maintain a national registry of accredited programs
- stimulate curriculum improvement.

The purpose of this manual is to assist those Educational Agency (EA) personnel who will be preparing their school’s documentation for national accreditation evaluation by NACOR. It is also intended to ensure that a standard, consistent, national procedure is followed by every EA. To facilitate use, a list of definitions and acronyms has been provided in Appendix F.

The diagram on the following page and the text that follows will provide the reader with a clear sense of the chain of authority for the accreditation process.



Legislative Authority – Provincial legislation awards authority to accredit educational programs to the provincial regulatory bodies. The nine member regulatory bodies of the National Association of Canadian Optician Regulators (NACOR) determined it was useful to use a single accreditation method and together they undertook to develop an equitable and transparent system.

Step 1. The legislation in each province sets out the requirements for the registration of opticians, one of which is to have completed a course of studies in opticianry recognized or accredited by the provincial regulatory board.

Step 2. The provincial regulatory bodies, and signatories to the Mutual Recognition Agreement among Optician Regulators (MRA), established that:

The National Association of Canadian Optician Regulators (NACOR) is an organization of Canadian optician regulatory agencies whose constituent delegates are committed to an accreditation process through the assessment and recognition of educational processes and assessment tools. The goal of NACOR is to assist the regulatory agencies in the evaluation and recognition of optician programs and assessment processes in Canada in order to register well-trained, competent applicants who provide services to the public.

The provincial and territorial regulatory bodies will determine their own educational processes and the assessment tools they will use for licensure.

NACOR will determine with full respect of the right and authority of the provincial and territorial regulatory bodies and of government legislation, which educational processes have a high degree of commonality and which assessment tools may be recognized as equivalent.

To that end, The National Association of Canadian Optician Regulators (NACOR), in consultation with the members of the Canadian Association of Optician Educators (CAOE), and with accreditation experts brought in by both groups, developed an accreditation process for opticianry programs.

Step 3. A National Board of Opticianry Accreditation (NBOA) is established. Both NACOR and CAOER appoint members to the National Board of Opticianry Accreditation (NBOA). The NBOA makes the final decision related to a specific program's accreditation.

Appendix D – Profile and Roles and Responsibilities of the National Board of Opticianry Regulators

Step 4. NBOA appoints a three member Survey Team for each program accreditation.

Appendix E – Profile and Roles and Responsibilities of the Survey Team

Step 5. The EA's Phase 2 program submission is circulated to the Survey Team. The Survey Team reviews and assesses the submission and conducts a site visit of the EA. The Survey Team drafts a preliminary assessment report and forwards it to the EA for their input. The EA has the opportunity to respond to the Survey Team with their feedback. All feedback is integrated into the final report the final Survey Team report is sent to the National Board of Opticianry Accreditation.

Step 6. The National Board of Opticianry Accreditation receives the final Survey Team report, and determines the accreditation status of the Educational Agency. A decision is reported to NACOR.

Step 7. NACOR informs the EA of the results of the accreditation.

Step 8. Each NACOR Board member takes the decision to their Provincial Regulatory Board, where a formal resolution to accept or not accept the decision on accreditation is made.

The Accreditation Process

The Accreditation process exists to:

- Determine the degree to which optician programs meet the competencies defined in the National Accreditation Standards Framework (Appendix A), based upon the National Competencies for Canadian Opticians (Appendix B)
- Provide criteria for the evaluation of new and established optician programs.
- Facilitate labour mobility through the maintenance of national standards.
- Ensure that the education of opticians focuses on and prioritizes the well - being of the public.

The Accreditation process is supported and defined by four requirements and seven major criterions:

Requirements:

REQUIREMENT ONE: The program outcomes and delivery ensure that graduates achieve the entry-level competencies for the individual disciplines of dispensing eyeglasses, dispensing of contact lenses, dispensing of sub-normal vision devices, and the measurement of refractive error as defined in the National Accreditation Standards Framework document.

REQUIREMENT TWO: Students are supported in their learning with the resources required to achieve competencies specified in the National Accreditation Standards Framework.

REQUIREMENT THREE: Processes for program evaluation are in place to ensure on-going quality control and improvement.

REQUIREMENT FOUR: The administration of the program supports academic success in a responsive and collaborative environment.

These requirements are applied to defined areas of program delivery taking into account the National Accreditation Standards Framework, which has been accepted by all signatories of the Mutual Recognition Agreement (MRA). The desired outcome is to provide a process which is effective in protecting the public.

Major Criterions

1.1 The program's goals and the competencies achieved through the curriculum are consistent with the National Accreditation Standards Framework.

1.3 Student achievement of the competencies is measured/evaluated throughout all delivery modalities used in the program including in the practice environment.

1.4 Graduate statistics illustrate that students have achieved the competencies in the National Accreditation Standards Framework.

2.1 The post-secondary institution, through its opticianry Program, ensures that each student is prepared and provided with access to the appropriate academic information, learning tools, opportunities and resources necessary to successfully complete the program.

3.1 Processes for program evaluation result in continuous quality improvement.

3.2 The program implements recommendations from a NACOR accreditation review to ensure compliance with the NACOR process and requirements.

4.2 The program provider maintains enrolment, attrition and graduation data for the program and uses such data to make program adjustments as required.

Operating Principles

The Accreditation Process:

1. Consists of a national approach that takes into account jurisdictional and disciplinary differences
2. Validates, complements and does not substitute for individual program protocols and evaluations
3. Recognizes the role and utility of the process and does not diminish either the autonomy of educational institutions or that of regulatory bodies
4. Adheres strictly to the confidentiality of program and student information and complies with privacy legislation in each provincial jurisdiction
5. Strives to be a cost-effective process that is widely accepted
6. Promotes education which endorses safe and ethical client/patient care
7. Ensures that participants in the process declare a conflict of interest as applicable

The NACOR Accreditation Process

This is a step-by-step overview of the three phases of the NACOR accreditation process from application to conclusion.

Phase 1

Educational Agency (EA) obtains a Phase I application form from NACOR.

1. EA submits a complete Phase 1 package to the NACOR office containing:
 - a. a completed copy of the application form
 - b. a copy of the EA calendar containing a summary of course details and other EA information (if course details are not included in the general calendar, other documentation covering course details must be provided)
 - c. a copy of each promotional brochure and any other literature describing the opticianry program offerings to the public.
2. NACOR administration determines eligibility of the program for accreditation.
3. NACOR notifies the EA as to whether the application has been approved, and, if so, at that time will provide instruction on how to proceed with Phase 2.

Phase 2

Phase 2 documentation should be submitted to the NACOR office in *MS Word format* (on CD or a data key or by a Dropbox link), with the exception of major competency portfolios, which may be submitted in hard copy, if necessary. One paper copy submission **including portfolios from three (3) students** should also be submitted .

Each set of student portfolios must include three samples (highest, average, and lowest grade) of **student work**, such as:

- a. graded assignments
- b. graded laboratory or shop reports
- c. graded mid-terms (if used) and final exams.

Phase 2 Requirements

REQUIREMENT ONE: the program outcomes and delivery ensure that graduates achieve the entry-level competencies for the individual disciplines of dispensing eyeglasses, dispensing of contact lenses, dispensing of sub-normal vision devices, and the measurement of refractive error as defined in the National Accreditation Standards Framework document.

1.1 The program's goals and the competencies achieved through the curriculum are consistent with the National Accreditation Standards Framework. (Major Criterion)

Documentation Required:

- a) Provide a statement of program goals.
- b) Provide a description in point format that illustrates how program goals are consistent with the National Accreditation Standards Framework.
- c) Attach, as an appendix, all course outlines in the program. These outlines must identify the learning components and outcomes covered within the program.
- d) Attach, as an appendix, **cross-referencing** of the National Accreditation Standards Framework against the courses, which reflect those competencies.

1.2 The program is responsive to all relevant stakeholders.

Documentation Required

- a) Attach, as an appendix, minutes or reports of past meetings (within the past three years) involving employer groups, association representatives, or other advisory groups and the relevant recommendations and actions that are resulting from those consultations.
- b) Provide documentary evidence, attached as an appendix, of consultation with stakeholders such as advisory committees, alumni, and employers

1.3 Student achievement of the competencies is measured/evaluated throughout all delivery modalities used in the program including in the practice environment. (Major Criterion)

Documentation Required

- a) Describe the mechanisms used to evaluate student achievement of the competencies.
- b) Describe the mechanisms in place to ensure communication between the didactic and clinical training courses, sites or presentations.
- c) Attach, as an appendix, samples of evaluation instruments used to assess student achievement of both theoretical and application-oriented competencies including those used in placements or clinical settings.
- d) Attach, as an appendix, four typical student evaluations/examinations (names deleted) that demonstrate the assessment of student competency. Two of these samples must be practice-oriented.
- e) Attach, as an appendix, samples of both formative and summative evaluations used in the program that appropriately illustrate the measurement of knowledge and skills in the program.

1.4 Graduate statistics illustrate that students have achieved the competencies in the National Accreditation Standards Framework. (Major Criterion)

Documentation Required

- a) Attach, as an appendix, samples of student feedback evaluations, alumni feedback, as well as employer satisfaction surveys.
- b) Attach, as an appendix, documentary evidence of results of registration/licensing examinations for the most recent three-year period where available.
- c) Attach, as an appendix, graduation statistics for a three-year period.
- d) Attach, as an appendix, documentary evidence indicating the employment level of graduates for the past three years.

REQUIREMENT TWO: Students are supported in their learning with the resources required to achieve competencies specified in the National Accreditation Standards Framework.

2.1 The post-secondary institution, through its Opticianry Program, ensures that each student is prepared and provided with access to the appropriate academic information, learning tools, opportunities and resources necessary to successfully complete the program. ((Major Criterion)

Documentation Required

- a) Attach, as an appendix, examples of program and post-secondary institution policies and protocols that exist to provide students with accurate information about the Opticianry Program and the profession.
- b) Attach, as an appendix, examples that the program/post-secondary institution ensures compliance with provincial and federal regulations, and ensures student exposure to safe working practices.
- c) Attach, as an appendix, a copy of all applicable academic policies.
- d) Describe resources and services provided to students such as student advisement, counseling, financial aid, scholarship and bursary programs.
- e) Describe how students' rights are protected through policies and practice (e.g. confidentiality, freedom from discrimination, privacy). Attach relevant policies as an appendix.
- f) Attach, as an appendix, samples of student handbooks and calendars that are used to provide students with accurate information about the program and the profession.

2.2 The program provides adequate staffing to meet program needs and to ensure the achievement of program outcomes.

Documentation required

- a) Describe the mechanism for the selection process-- the appointment, review and reappointment of program faculty teaching vocationally oriented subjects (both full and part-time) and staff (both full and part-time).
- b) Describe the process used to evaluate and to follow up on instructor performance. If the process varies for full and part-time faculty, please describe the differences.

- c) Identify relevant policies/protocols and professional development opportunities available for faculty including clinical updating, skill enhancement in educational techniques, and advances in the profession.
- d) Describe the faculty-student ratios in each of the following areas: teaching, laboratory and clinic.
- e) Outline the process in place for faculty and departmental meetings and provide, attached as an appendix, copies of minutes for the past three academic years.

2.3 The program provides sufficient and suitable learning resources, facilities and equipment appropriate for program and course outcomes.

Documentation Required

- a) Describe the variety and quantity of learning resources (inventory) available to students in the program including classroom and library facilities, laboratories, print and audio-visual material/equipment as well as access to electronic and profession relevant resources (e.g., labs).
- b) Demonstrate that the materials and equipment are current and meet industry standards in the profession (e.g., provide examples of current equipment being used).
- c) Provide documentary evidence, attached, as an appendix, that instructors and students have provided feedback on instructional materials and equipment, and that the instructional materials and equipment used are adequate and appropriate to the program and course objectives.

REQUIREMENT THREE: Processes for program evaluation are in place to ensure on-going quality control and improvement.

3.1 Processes for program evaluation result in continuous quality improvement. (Major Criterion)

Documentation Required:

- a) Describe the cyclical mechanisms in place to evaluate the program and implement improvements.
- b) Provide and attach, as an appendix, documentary evidence of the existence of a program and curriculum review committee or body which is either institutional or specifically constituted for the program.
- c) Provide and attach, as an appendix, documentary evidence that employers, instructors and students/alumni contribute to program review.
- d) Provide and attach, as an appendix, documentary evidence that the recommendations of the program and curriculum review have been implemented.

3.2 The program implements recommendations from a NACOR accreditation review to ensure compliance with the NACOR process and requirements. (Major Criterion)

Documentation required (once programs have been through the accreditation process)

- a) Describe the program's process to monitor compliance with a NACOR accreditation review.
- b) Provide and attach, as an appendix, documentary evidence that program changes that have been made are consistent with NACOR accreditation recommendations.
- c) Provide and attach, as an appendix, documentary evidence of ongoing communication with NACOR regarding accreditation requirements and any changes that the program has undergone.

REQUIREMENT FOUR: The administration of the program supports academic success in a responsive and collaborative environment.

4.1 The program has a clearly communicated structure and lines of authority to support its human and administrative requirements.

Documentation Required:

- a) Attach, as an appendix, an organization chart and job descriptions specifically related to the coordination of the program.
- b) Provide and attach, as an appendix, documentary evidence that persons who administer/supervise each aspect of the program are qualified to ensure fulfillment of the program's goals and outcomes. This is a list of all staff and their credentials and experience.
- c) Provide and attach, as an appendix, documentary evidence that persons who instruct each aspect of the program are qualified to ensure fulfillment of the program's goals and outcomes. This is a list of all instructors and their credentials and experience.
- d) Provide documentary evidence of the communication strategies and coordination that exist with clinical/placement settings (e.g. attach, as an appendix, clinical/placement agreements; describe the coordination of clinical instruction, nature and frequency of communication with clinical settings).

4.2 The program provider maintains enrolment, attrition and graduation data for the program and uses such data to make program adjustments as required. (Major Criterion)

Documentation Required:

- a) Describe the process used to collect and monitor application, enrolment, attrition, and graduation, data.
- b) Provide and attach, as an appendix, documentary evidence that the data collected has been applied to modify the program as applicable.

4.3 The program has standards related to admission, promotion and graduation that are applied consistently.

Documentation Required:

- a) Identify admissions/promotion/graduation policies and requirements and describe how they are applied.
- b) Describe all intake-screening procedures including interviews and assessments utilized in the admission process.

4.4 Student records are kept according to defined standards related to content, timelines, and confidentiality.

Documentation Required:

- a) Describe policies related to the maintenance of records of student learning and the awarding of course credits.
- b) Attach, as an appendix, examples of records (**names removed**) of student learning and the awarding of course credits where applicable, that are based on clearly defined criteria.
- c) Attach, as an appendix, a sample of the permanent record of the student's achievement/transcript (name removed) within the program.

Phase 2 - Process

1. Survey Team selection – upon receipt of the Phase 2 documentation, NBOA appoints a team chair and two team members to conduct the NACOR Survey Team evaluation. All stakeholders (NACOR and EA) must approve Survey Team members.
2. Documentation audit – the Survey Team members review the program submission.
3. Survey Team leader makes contact with the EA to establish a suitable visit date.
4. Team meeting – the Survey Team will meet prior to the site visit to examine their preliminary outcomes, identify potential deficiencies, and prepare for the site visit, which is generally of two day's duration.
5. Site visit – the purpose of the site visit is to verify the results of the documentation review, and to give the Survey Team an opportunity to seek out any information that could not be located in the Phase 2 documentation. At the site visit the EA must provide a working space for the NACOR team. A copy of the Phase 2 documentation, all student work and supporting documentation and relevant textbooks should be laid out in that space.
6. The Survey Team leader will be responsible for conducting all meetings. There are several components to the site visit, and the visit will follow an agenda prepared by the team leader in conjunction with the EA contact. A typical agenda would include:
 - Opening meeting – team will meet with EA staff to confirm the day's activities.
 - Examination of program facilities – team will tour the facilities, including student services and administration.
 - Interviews – team will interview students, instructors, advisory board members and graduates of the program.
 - Examination of program materials to confirm outcomes.
 - Summary meeting – team will meet to prepare the draft Preliminary Survey Team Report (PSTR).
 - Exit Interview – team will share with EA officials their initial impressions as a result of the evaluation, and reiterate the next steps in the national accreditation process as they relate to the PSTR and the Final Survey Team Report (FSTR.) No accreditation recommendation is given at this time.

Following the site visit, the following activities will occur according to an agreed upon timeline:

7. Preliminary team report to NACOR– the Survey Team leader, with the approval of the team members, submits the draft report to the NACOR office for checking and formatting.
8. NACOR review – NACOR office may forward the draft report to a NACOR Program Report Reviewer to verify the report complies with the accreditation guidelines. If information is missing this is returned to the Survey Team for adjustment before sending on to the EA.
9. Review of draft report – NACOR forwards the reviewed report to the EA who will provide response/feedback, including supplementary information if required. NACOR provides the feedback to the Survey Team.
10. Submission of final report to the National Board of Opticianry Accreditation – NACOR incorporates recommended changes following consultation with the Survey Team, and distributes the final report to the National Board of Opticianry Accreditation for discussion and accreditation decision.
11. Accreditation decision – a decision from the National Board of Opticianry Accreditation will result in a recommendation to NACOR which allows a formal presentation of national accreditation status to the program.
12. NACOR will inform the EA of the results of the accreditation and will present a national accreditation certificate to the EA.
13. Each NACOR Board member takes the accreditation decision to their Provincial Regulatory Board, where a formal resolution to accept or not accept the decision on accreditation is made.
14. If the decision is ‘not to accredit’, the EA has the right to appeal the decision. The appeal procedure information will be provided to the EA at that time.

Phase 3 –Annual Review Process

Accreditation Maintenance – it is expected that the program would continue to evolve technically through a process of ‘continuous quality improvement’. However, the EA must keep NACOR informed of any significant program changes that could jeopardize its national accreditation status.

Annual Review Process – allows the EA to maintain accreditation on an ongoing basis by reporting to NACOR every year after the initial accreditation. NACOR will notify the EA when the annual review documentation is due. The annual review submission contains: details of actions taken to address the requirements of the previous accreditation report; a major competency profile table; course outlines for new courses; portfolios for new major competencies and program advisory committee information. A full description of requirements will be supplied at the time of notification.

New Program Accreditation Process

If an Educational Agency (EA) develops and implements a new program the process is as follows:

- 1) The EA must notify NACOR in writing of such intentions a minimum of five (5) months prior to the proposed start date of the new program.
- 2) The EA must provide evidence to support all criteria listed in Category 1, a minimum of three (3) months prior to the proposed start date of the new program.
- 3) The EA must provide evidence to support Category 2 criteria (6) months after the start date of the program.
- 4) NACOR will review the evidence after each submission by the EA and assess compliance with the requirements and provide the EA with a written report within 60 days following receipt of the submission.
- 5) Once the EA receives the report from NACOR, the EA will have 30 days to respond to any deficiencies that were outlined in the report from NACOR.
- 6) The site visit will be scheduled between Category two (2) and three (3) submissions.
- 7) If NACOR determines that the new program is compliant with category 1 and 2 evidence, and fulfills the requirements of their site visit the EA will be granted conditional accreditation. Graduates from a program granted conditional accreditation will be eligible to sit the National Optical Sciences examination(s).
- 8) Full accreditation is granted pending the outcome of the assessment of category 3 and category 4 evidence.
- 9) Failure to submit either category 3 or 4 evidence will result in the EA's conditional accreditation being immediately revoked.
- 10) EAs granted conditional accreditation will be expected to submit an annual review between their category 3 and 4 submissions. NACOR and the EA will establish the start date for the EA's first annual review submission.
- 11) When the program receives full accreditation, the program will follow the six year accreditation and annual reporting cycle.

Criteria	Category 1 Evidence to be submitted a minimum of 3 months prior to the proposed start date of the program.	Category 2 Evidence to be submitted 6 months after the start date of the program.	Category 3 Evidence to be submitted 6 months following graduation date of the first intake.	Category 4 Evidence to be submitted 3 years following graduation date of the first intake.
1.1	a, b, c, d			
1.2	a, b	a,b	a,b	a,b
1.3	a, b	c, d,e	c, d, e	c, d, e
1.4			a,b	a,b,c,d
2.1	a, b, c, d, e, f			
2.2	a, b, c, d, e:process for meetings	d, e: meeting minutes	e: meeting minutes	e: meeting minutes
2.3	a, b	c	c	c
3.1	a, b		c	d
3.2	N/A for a new program	N/A for a new program	N/A for a new program	a,b,c
4.1	a	b, c,d		
4.2	a			b
4.3	a, b			
4.4	a		b, c	

Accreditation Decisions and Status

1. Full accreditation is six (6) years. It is granted when the program meets all four (4) requirements and all seven (7) major criterions.

The decision may be to:

- a. Grant full accreditation with no findings or opportunities for improvement;
 - b. Grant full accreditation with findings and opportunities for improvement; or
 - c. Grant full accreditation with findings and opportunities for improvement and an interim report.
2. Partial accreditation is two (2) years with an option to extend to six (6) years when all outstanding requirements and criterions are met. It is granted when a program meets three (3) of the four (4) requirements and four (4) of the seven (7) major criterions:

The decision may be to:

- a. Grant partial accreditation with findings and opportunities for improvement; or
 - b. Grant partial accreditation with findings and opportunities for improvement and an interim report.
3. Conditional accreditation is three (3) years with an option to extend to six (6) years when all outstanding requirements and criterions are met. Conditional accreditation is for a new program. It is granted when the program meets all requirements and criterions of Category 1 and 2 and the site visit and the following four (4) of the seven (7) major criteria: 1.1, 1.3 a,b,c,d, 2.1 and 3.1 a, b.

The decision may be to:

- a. Grant conditional accreditation with no findings or opportunities for improvement;
 - b. Grant conditional accreditation with findings and opportunities for improvement; or
 - c. Grant conditional accreditation with findings and opportunities for improvement and an interim report
4. Accreditation denied. The program has failed to meet several of the seven (7) major criterions and four (4) requirements. The recommendations, findings and opportunities for improvement are extensive.

The decision may be to:

- a. Deny accreditation. A full survey and revisit are required.

NACOR-Defined Findings and Opportunities for Improvement

The National Association of Canadian Optician Regulators Board of Accreditation has endorsed the following definitions and usage of the terms “findings” and “opportunity for improvement”.

Finding

A "finding" is a statement of evidence of a non-conformance to NACOR requirements for national accreditation. This evidence should be **clear** and confirmed as having been acknowledged by the EA. Lack of evidence of conformance may also generate a finding. The Survey Team report will specify, for each finding, the expected date by which it should be corrected. The EA will indicate how and when it will correct the non-conformance and, if applicable, what preventative action it will put in place.

The dictated time must not be punitive in nature, but allow a reasonable time for the EA to achieve correction within the two- to- three- year cycle that produces a graduate. The allotted time could be very short if the finding involves a serious problem, such as safety. If the non-conformance is of a minor nature, it would be reviewed for compliance at the next accreditation review or any time in between as stated in the finding.

Opportunity for Improvement

An “opportunity for improvement” is a statement outlining a potential problem or weakness that is noted but is not a direct non-conformance with any NACOR requirement. By its nature or magnitude it is **not** national accreditation threatening. The opportunity for improvement must be based upon evidence.

Lack of evidence of conformance may also generate an opportunity for improvement.

The EA is expected to respond to each opportunity for improvement, indicating what it intends to do to improve the program. However, all parties must understand that while failure to respond to an opportunity for improvement does not automatically elevate it to a finding, at a later date it may escalate to one. The NACOR reviewing team will investigate whether it has been adequately addressed or has escalated to a finding in the period since the last review.

Application and Accreditation Fees *(see Appendix C)*

1. Fees are charged for accreditation. NACOR approves the accreditation fees. The optician program/school is responsible for paying the accreditation fees.
2. A non-refundable administration fee of \$250.00 must be remitted with the application for accreditation.
3. Accreditation fees are \$3000.00. The first half is due at the start of the accreditation and the second half is payable following completion of the accreditation. For new program accreditations the second half is payable following the site visit.
4. The Educational Agency (EA) is responsible for the costs of the site visit Including:
 - a. travel, and three (3) days accommodation and meal expenses for two (2) assessors
 - b. per diem for two (2) assessors paid at \$200.00 per day including travel days
5. The annual renewal fee is \$500.00 per year for each program beginning one year after accreditation.

These fees are subject to change, and EA's will be notified of current fees prior to commencing the accreditation process.

Goods and Services Tax:

Revenue Canada has stated that accreditation is a service applicable under the Goods and Services Tax Act or Harmonized Sales Tax.

Maintenance of Accreditation

1. A program change is any alteration in the curriculum and learning outcomes of an opticianry program from that which was accredited. Major changes are reviewed by the National Board of Opticianry Accreditation to determine if the magnitude of the changes requires an interim report, or a full accreditation.
2. A major change occurs when the philosophical underpinnings of the curriculum change or more than one third of the program learning outcomes are changed.
3. A minor program change occurs when the flow of learning or revisions to the course learning outcomes alter without impacting the underpinnings of the curriculum and less than one third of the intent/outcomes are changed.
4. The National Board of Opticianry Accreditation reserves the right to review the accreditation status during the accredited period upon:
 - a. Request from the Program or its parent institution indicating that major changes affecting their ability to meet the standards have occurred;
 - b. A written complaint is addressed to the National Board of Opticianry Accreditation based on actual violations of one or several accreditation standard;
 - c. The annual review. Should a major change go unreported at the annual review the program status may be placed in jeopardy.

Revoking Accreditation Status

1. The National Board of Opticianry Accreditation may revoke the accreditation status of an opticianry program in the event that there is documented evidence that the requirements are not currently being met.
2. The National Board of Opticianry Accreditation may revoke the accreditation status of an opticianry program that fails to comply with requirements for reviews and reports identified at the time of accreditation.
3. If the accreditation status has been revoked, a program (EA) has the right to appeal the decision to the Executive Committee of NACOR within 30 business days of receipt of their decision.

Extension of Accreditation

The National Board of Opticianry Accreditation may consider the application of an opticianry program requesting an extension of the accreditation status under the following circumstances:

1. An EA is undertaking a major revision of its program curriculum, which will not be completed when the current accreditation ends.
2. An EA is in a new partnership with one or more institutions to deliver its program, and the other schools will not be ready for their accreditation review when the accredited opticianry program's accreditation ends.

Accreditation Appeal Process

1. The appeal process will provide for the fair and equitable adjudication of the entire accreditation process.
2. The primary goal of the appeal process is to ensure the maintenance of educational requirements.

Appeals

An EA may appeal the following decisions within 30 calendar days of receiving written notification of the results related to accreditation from NACOR or its representatives. The following are the major reasons that could warrant an appeal:

1. The EA disagrees with either the recommendations or the accreditation status that has been accorded after completing the entire NACOR process.
2. The program has been denied accreditation, or its accreditation status has changed as a result of the completed accreditation process.

The appeal must be submitted to the NACOR Executive Committee in writing explaining the reason for the appeal. If the NACOR Executive Committee determines that a formal appeal is required (that the situation cannot be resolved informally), they must convene an **Appeal Committee** consisting of members who were not on the accreditation Survey Team. This committee will consist of 3 members appointed by the NACOR Board of Directors and two others appointed by the CAO. The EA is responsible for covering the costs of the appeal if the appeal is denied. Costs may include travel, communication, personnel and a possible site visit/revisit. There is no cost to a program for an appeal that is granted.

Appeal of Accreditation Status

The appeal must clearly state the reason(s) the assessment is considered unjustified and must be accompanied by supporting evidence in writing.

During the period in which the appeal is being considered, the previous accreditation status (if any) prior to the appeal remains in effect.

The Appeal Committee will provide a final decision on the appeal, with justification, in writing, within 40 calendar days of receipt of the appeal.

NACOR Committee Decision on Appeal

The Appeal Committee informs the program of its decision, within 40 calendar days. The Appeal Committee takes one of the following actions:

- Grants the appeal and accords an accreditation decision based on the program's assessment and/or new evidence submitted.
- Denies the appeal and maintains the program's accreditation decision with no further action.
- Requests additional information if the program's response has provided insufficient evidence of compliance with the accreditation requirements.

The decision of the appeal is final, once the appeal process has been completed and a decision rendered.

Appendix A

National Accreditation Standards Framework

The Standards Framework contains the competencies that opticians are expected to possess as an outcome of their education in opticianry in order to provide the public with safe and ethical care. When reviewing the document, the reader will observe eleven broad competency statements that encompass the primary areas of responsibility undertaken by the optician while engaged in the practice of opticianry. Within each of the broad competency statements are sub competencies that define the minimum level of knowledge and skill required to meet each competency statement. It should be noted that the function of dispensing eyeglasses, contact lenses and subnormal vision devices and of refracting share many common competencies that have been grouped together to avoid duplication.

National Accreditation Standards Framework
A. Practice according to the codes of conduct and professional standards
A1) Explain the function of the regulatory body, professional associations and provincial regulatory legislation.
A2) Adhere to the Standards of Practice, legislation and code of ethics related to the Dispensing of eyeglasses, contact lenses, sub-normal vision services and refracting.
A2.1 Demonstrate knowledge of the Code of Ethics of the provincial regulatory board and provincial association.
A2.2 Adhere to the scope of practice, role and responsibilities as outlined in the provincial optician's legislation, optician's Regulations, By-laws and guidelines.
A2.3 Securely maintain in accordance with the Freedom of Information and Privacy Act personal information in accordance with relevant provincial legislation and Requirements
A2.4 Demonstrate through field practicum experience ability as a role model of the profession.
A2.5 Demonstrate in theory and through field practicum experience, understanding of perception barriers in interpersonal communication
A2.6 Demonstrate in theory and through field practicum experience understanding of nonverbal communication
A2.7 Demonstrate understanding of legal and ethical responsibilities of an employer to the patient and the Optician, and of the Optician to the patient and to the profession.
A2.8 Demonstrate in theory and through field practicum experience ability to use appropriate
A2.9 Demonstrate in theory and through field practicum experience the ability to manage patient misconceptions about vision health and vision care.
A2.10 Demonstrate in theory and through field practicum experience the ability to provide patients with information about vision health.
B. Promote and ensure appropriate vision care for the patient.
Demonstrate in theory and through field practicum experience the ability to:
B1) Gather and analyze meaningful information.
B1.1 Question patient about previous experience with ophthalmic appliances.
B1.2 Ability to take a complete client history and record data as required and in compliance with the requirements of practice for opticians.
B1.3 Ability to use an established assessment format to contribute to the identification of a patient's healthcare needs.
B1.4 Ability to resolve conflict in a dispensing setting.
B1.5 Ability to perform critical thinking and problem solving

B1.6 Ability to identify symptoms described by patient that may necessitate further referral
B1.7 Ability to identify low vision and other specialty issues and demonstrate ability to recommend resources to address these issues.
B2) Record information accurately.
B2.1 Document and communicate patient information to legitimate recipients of personal vision care information to provide continuity of care.
B2.2 Create and maintain in a secure environment patient files, keeping full and accurate records.
B3) Prepare recommendations based on defined needs.
B3.1 Make recommendations to the patient and/or a caregiver about appropriate ophthalmic appliances for the patient's identified visual, vocational and avocational needs.
B3.2 Address patient concerns about vision and/or ophthalmic appliances.
B4) Teach patients about good vision care.
B4.1 Develop and implement an individualized patient teaching plan in order to promote, maintain and restore ocular health.
B4.2 Adjust teaching plan and delivery to meet requirements of patients with special needs including those who have language barrier.
B4.3 Evaluate the effectiveness of patient teaching and learning through appropriate feedback resources, demonstration of skill or change in behavior.
B4.4 Document in the patient file the teaching plan, its delivery and outcomes of the teaching and learning process.
B5) Evaluate whether dispensed ophthalmic appliance meets the patient's needs.
B6) Plan and deliver follow-up care.
B6.1 Conduct a thorough follow up examination consistent with professional requirements of practice.
B6.2 Design, record and communicate a plan of follow up care for the patient.
B6.3 Identify and make adjustments and/or repairs to patients' ophthalmic appliances.
B7) Be prepared to manage and refer unexpected health emergencies that occur in a dispensary
C. Conduct business in a professional manner.
C1) Demonstrate in theory and through field practicum experience the ability to manage time and organize patient care effectively and efficiently.
C2) Demonstrate an understanding of the management of human resources in an optical dispensary.
C3) Ensure compliance with applicable laws and regulations while using current business practices.
C3.1 Understand and implement applicable tax regulations and government programs.
C3.2 Assist the patient in completing any forms required by public or private vision care plans.
C4) Control inventory.
C4.1 Organize and maintain control over inventory.
C4.2 Determine and maintain an appropriate level of inventory.
C5) Comply with applicable business laws and regulations.
C6) Apply problem-solving skills to business situations.
C6.1 Solve a business problem using an organized approach to define the problem, identify alternative actions and possible outcomes and recommend, with rationale, the preferred course of action.
C7) Perform administrative tasks.
C7.1 Assist the patient in completing any forms required by public or private vision care plans.
D. Assess patient vision and visual needs within the scope of practice.
D1) Understand and explain the structures and functions of the eye.

D2) Understand and explain the external anatomical structures.
D3) Understand and explain the visual pathway.
D4) Understand and explain the photochemistry of vision.
D5) Understand and explain visual fields.
D6) Understand and explain binocular function.
D7) Understand and explain refractive conditions of the eye.
D7.1 Understand and explain optics of the eye, ametropia and its correction.
D7.2 Understand and explain aphakia related to accommodation.
D7.3 Understand and explain stereopsis in astigmatic corrections.
D7.4 Understand and explain spherical ametropia including myopia and hyper-metropia.
D7.5 Understand and explain presbyopia.
D8) Understand and explain ocular motility testing.
D9) Understand and explain the correction of visual error and apply principles of refraction.
D9.1 Use and be able to explain standard distance and reading charts.
D9.2 Explain visual acuity.
D9.3 Use the schematic eye to demonstrate visual function to patients.
D9.4 Demonstrate an understanding of and be able to perform retinoscopy.
D9.5 Demonstrate a knowledge of the role of laser surgery in correcting retinal problems in visual therapy addressing ocular emergencies and photorefractive surgery.
D9.6 Understand and explain the function of vision screening tests including visual acuity, colour discrimination, depth perception, peripheral field and ocular motility.
D10) Analyze data to design ophthalmic appliances.
D10.1 Refer patients with abnormal ocular conditions for medical advice.
D11) Understand the use of ophthalmic drugs.
D11.1 Have knowledge of ophthalmic pharmacology.
D11.2 Identify ocular side effects of specific drug types
D11.3 Identify effects of systemic medications on contact lens.
D12) Integrate concepts of anatomy, physiology and pathology in order to provide optimum care.
D12.1 Recognize abnormal ocular conditions.
D12.2 Understand the signs, symptoms and treatment of various conditions or disorders.
D12.3 Refer patients with abnormal ocular conditions for medical advice.
D12.4 Explain surgical alternatives to eyeglasses and contact lenses.
D13) Describe major ocular diseases including Age-related Macular Degeneration, Cataracts, Diabetic Retinopathy, and Glaucoma.
D13.1 Describe causes, signs and symptoms, and treatments of major ocular diseases.
D13.2 Recognize the when ocular conditions require emergency or non-emergency referral.
D13.3 Describe the characteristics of blood, blood vessels and lymphatics.
D13.4 Describe the organization and function of the central and peripheral nervous systems.
E. Fit, prepare and dispense appropriate devices using current practices and technology.
Demonstrate in theory and through field practicum experience the ability to:
E1) Understand and be able to apply physical optics.
E1.1) Have working knowledge of vergences

E1.2) Have working knowledge of and be able to apply formula for effective and compensated lens powers
E1.3) Have working knowledge of front and back vertex powers
E1.3a Measure vertex, to calculate for changes in vertex.
E1.4) Determine the sum of two optical prescriptions
E1.5) Understand and calculate the result of a change in pantoscopic tilt to the effective power of a lens
E1.5.a Measure pantoscopic tilt and to alter as required in completed eyeglasses
E1.6) Perform calculations relative to compounding and resolving prism
E1.7) Perform calculations relative to the Near Vision Point prismatic effect
E1.8) Perform calculations relative to vertical imbalance
E2) Interpret the prescription and be able to explain to the patient what the prescription means relative to the patient's refractive condition and what the impact of the prescription will be on choice of product.
E3) Understand and apply knowledge of lens theory for the correction of ametropia.
E3.1 Understand and be able to calibrate and maintain optical instruments.
E3.1a Demonstrate use of optical instruments given a specific task
E3.2 Solve problems related to the optics of the eye.
E3.3 Perform calculations to apply the principles of visual and applied optics.
E4) Apply knowledge of binocular vision.
E4.1 Discuss and explain monocular and binocular vision.
E4.2 Conduct ocular motility and binocular vision testing with a cover test using unilateral and alternating methods, a Broad H motility test, Pupillary assessment using direct and consensual responses and (optional) conduct colour vision testing using pseudoisochromatic plates.
E4.3 Have understanding of problems of anisometropia and strabismus.
E4.3a Ability to resolve challenges of anisometropia and strabismus with eyeglasses.
E5) Troubleshoot.
E5.1 Conduct visual acuity testing
F. Fit, prepare and dispense appropriate eyeglasses using current practices and technology.
F1) Apply knowledge of lens theory and perform ocular measurements.
F2) Demonstrate an understanding of aberrations.
F3) Use ophthalmic instruments and aids for eyeglass fitting.
F3.1 Demonstrate ability to calibrate and maintain a lensometer
F3.2 Demonstrate ability to neutralize unknown lens
F3.3 Demonstrate ability to verify lenses to order and to standard tolerances
F4) Advise and assist with frame and lens choice.
F4.1 Make lens and frame recommendations given a patient and an optical prescription.
F4.2 Demonstrate knowledge of segmented multifocal lenses, progressive multifocal lenses, high-powered minus lenses and high-powered plus lenses.
F4.3 Determine frame measurements and calculate the GCD of any frame
F4.4 Measure the distance and near Pupil Distance (PD) of any patient
F4.4a Demonstrate ability to measure pupillary distance using both light reflex and automated methods.
F5) Design, prepare and order eyeglasses.

F5.1 Demonstrate knowledge of lens aberrations, tints and coatings, safety lenses, lens forms & transposition and power crosses.
F6) Fabricate eyeglasses and perform needed repairs.
F7) Evaluate completed eyeglass product.
F7.1 Demonstrate knowledge of the lensometer and measuring the power of ophthalmic lenses
F7.2 Demonstrate knowledge of measuring the front and back surface of any lens, calculate the power of the lens and determine the compensated power for a lens material with a different index of refraction.
F7.2a Demonstrate ability to use a lens clock by taking base curves and determining nominal power
F7.3 Demonstrate knowledge of lens thickness.
F7.3a Demonstrate ability to measure lens thickness using a caliper.
F7.4 Demonstrate knowledge of the prismatic effect of a lens
F7.5 Demonstrate knowledge of ophthalmic dispensing standard tolerances
F7.6 Demonstrate knowledge of standard frame alignment
F7.7 Demonstrate knowledge of frame alignment for patients
F7.8 Demonstrate knowledge of lens finishing including:
· Lens spotting
· Box measurement system
· Pattern theory for edging
· Centering of single vision lenses
· Centering for segmented multifocal lenses
· Centering for progressive multifocal lenses
· Lens blocking
· Patternless and patterned edging methods
· Lens modification through hand edging
· Tempering of glass both heat and chemical methods
· Fabricating drilled, notched, grooved and/or tinted lens
· Installing a lens into a frame
· Inspecting finished eyeglasses
F8) Delivery of eyeglasses.
F8.1 Demonstrate ability to perform problem solving techniques
F8.2 Demonstrate knowledge of frame repair
F8.3 Demonstrate knowledge of customizing frames
F8.4 Demonstrate knowledge of specialized frames
G. Fit, prepare and dispense appropriate contact lenses using current practices and technology.
Demonstrate in theory and through field practicum experience the ability to:
G1) Interpret the prescription.
G2) Develop patient's visual profile.
G2.1 Identify information required for pre-fit history forms
G2.2 Complete pre-fit history forms for different patients identified by a supervisor

G3) Use ophthalmic instruments and devices to perform ocular measurements and assessments for contact lens fitting.
G3.1 Perform procedures for a basic biomicroscope/slit lamp examination
G3.2 Perform a tear break up time test (TBUT)
G3.3 Demonstrate ability to use appropriate procedures to identify and assess other ocular anomalies
G3.4 Identify components and functions of the biomicroscope/slit lamp including the illumination and observation systems as well as the controls of the instrument and their functions
G3.5 Explain uses of filters and dyes with the biomicroscope/slit lamp and perform biomicroscopy using both tools.
G3.6 Perform over-refraction
G3.7 Perform keratometry readings
G4) Evaluate existing contact lens fit.
G4.1 Identify eyelid conditions
G4.2 Assess corneal suitability for contact lens wear
G5) Review range of lens choices.
G6) Use diagnostic lenses and calculate contact lens specifications.
G6.1 Conduct and assess soft lens fittings from each of the four FDA classifications and a silicon hydrogel lens on an average diameter cornea with a normal lid structure
G6.2 Fit spherical soft contact lenses from each of the four FDA classifications and a silicon hydrogel lens on a small diameter cornea with tight lid tension and a small palpebral fissure
G6.3 Fit spherical soft contact lenses from each of the four FDA classifications and a silicon hydrogel lens on a large diameter cornea, a steep corneal curvature with a normal lid structure
G6.4 Fit a spherical and aspherical back surface RGP lens on an astigmatic corneas
G6.5 Fit a back surface toric RGP lens on astigmatic
G6.6 (Optional) Fit a front surface toric RGP lens
G6.7 Fit a bitoric RGP lens on a cornea
G6.8 Ensure appropriate RGP lens modifications are completed as required.
G7) Design, prepare, order and modify optically correct contact lenses.
G7.1 Conduct and assess methods for correcting presbyopia using monovision principles for soft and RGP contact lenses
G7.2 Conduct and assess methods for correcting presbyopia using soft multifocal lenses
G7.3 Conduct therapeutic/bandage soft contact fitting
G7.4 (Optional) conduct and assess correction of presbyopia using RGP multifocal lenses
G8) Demonstrate and instruct patient in insertion, removal, care for lenses and identify lens care product composition to soft lens patients
G9) Evaluate and correct performance of contact lenses.
G9.1 conduct and assess soft toric contact lens fittings including back surface toric and front surface toric designs using both prism ballasting and dynamic stabilization designs
G10) Provide follow-up care and evaluate anomalies affecting contact lens wear.
G10.1 Determine anomalies and their possible source.
G10.2 Implement appropriate follow-up care.
G10.3 Assess need for and demonstrate methods of corneal rehabilitation
G10.3a Identify signs and symptoms of corneas in need of rehabilitation
G10.3b Develop a strategy for rehabilitation
G11) Use proper aseptic techniques for contact lenses.

G11.1 Adhere to procedures for disinfecting and storing soft contact lenses.
H. Fit, prepare and dispense appropriate sub normal vision devices using current practices and technology.
Demonstrate in theory and through field practicum experience the ability to:
H1) Recognize symptoms specific to the low vision patient.
H2) Interpret the prescription and evaluate the patient needs.
H2.1 Evaluate the patients' needs.
H3) Advise patient on purchase, use and maintenance of sub-normal vision appliances.
H3.1 Assist the patient in purchasing the device.
H3.2 Train the patient on the use and care of the vision aid.
I. Implement and maintain infection control and safe practices.
Demonstrate in theory and through field practicum experience the ability to:
I1) Demonstrate proper aseptic techniques.
I2) Teach patients proper hygiene protocols.
I3) Recognize and control infection hazards.
I4) Use safe procedures related to tools, equipment and products.
I4.1 Apply safety procedures
I4.2 Demonstrate proper personal hygiene.
J. Communicate effectively.
Demonstrate in theory and through field practicum experience the ability to:
J1) Use a wide range of verbal and non-verbal communication strategies.
J1.1 Use empathy and active listening skills.
J1.2 Present ideas clearly and effectively.
J1.3 Use an interview process to determine needs.
J1.4 Use effective techniques with various ages and behaviors.
J2) Communicate effectively with health care professionals and patients.
J2.1 Use appropriate terminology.
J3) Prepare documents and patient records.
J3.1 Use writing that is consistent with the rules of English grammar.
J4) Use effective interpersonal skills to resolve conflicts and complaints.
J4.1 Apply conflict resolution skills to resolve concerns and/or complaints.
K. Perform as a member of a health care team.
Demonstrate in theory and through field practicum experience the ability to:
K1) Collaborate as both a team member and team leader in the workplace.
K1.1 Function in independent, interdependent and collaborative roles with other members on the health care team to provide total vision care.
K1.2 Teach, guide, instruct, mentor and supervise the student/intern in all areas of the profession.
K2) Liaise, refer and interact with all eye care professionals.
K2.1 Seek guidance when applicable.
K2.2 Confer with appropriate health professionals and refer patients as required.
K2.3 Recommend routine eye health screening.

L. Perform A Refraction Routine.
Demonstrate in theory and through field practicum experience the ability to:
L1) Apply knowledge of anatomy and physiology of the visual system to assess refractive status.
L2) Demonstrate skill using instruments and procedures used in visual assessment.
L.2.1 Explain principle and procedures for use of the topographer, keratometer, retinoscope, slit lamp, phoropter, autorefractor, wave front devices and trial lens sets.
L3) Assess refractive status.
L3.1 Perform clinical procedures to assess refractive status.
L3.2 Perform objective measurement of refractive error.
L3.3 Perform subjective measurement of refractive error.
L4) Analyze meaningful data related to ocular status.
L5) Determine the corrective lens power.

Appendix B

National Competencies for Canadian Opticians, 3rd Edition

Unit 1: Assumes Professional Responsibilities		
Competency	Performance Indicator	Practice Illustration
1.1 Demonstrate a commitment to patient/client, the public and the profession.	1.1.1 Adhere to privacy and confidentiality legislation, regulatory requirements and employer policies.	<ul style="list-style-type: none"> • Respects privacy of patient/client when communicating personal health information. • Maintains confidentiality, privacy and security when sharing, transmitting, (storing) and disclosing information (for example, applying password protection on computer systems, obtaining consent to share and disclose information).
	1.1.2 Integrate the Code of Ethics into professional practice as a basis for all decisions and actions.	<ul style="list-style-type: none"> • Demonstrates integrity, accountability, respect and ethical values. • Practices within professional standards of practice. • Provides care in a non-discriminatory manner. • Demonstrates sensitivity to diversity. • Accepts responsibilities for actions and decisions.
	1.1.3 Communicate title and credentials accurately.	<ul style="list-style-type: none"> • Communicates appropriately to the public, in writing and verbally, the professional designation of Licensed /Registered Optician.
	1.1.4 Recognize and manage professional boundaries.	<ul style="list-style-type: none"> • Adheres to provincial regulations, standards of practice, guidelines and Code of Ethics related to maintaining professional boundaries. • Seeks guidance in managing professional boundaries.
	1.1.5 Refer any incompetent, illegal or unethical conduct by colleagues (regulated and non-regulated) or other health personnel to the appropriate authority.	<ul style="list-style-type: none"> • Reports incidence of unauthorized practice or use of the title to the appropriate regulatory body. • Reports incidence of unprofessional, unsafe, unethical behaviours to appropriate person(s) (i.e. manager, supervisor, regulatory body).
	1.1.6 Recognize and manage ethical situations.	<ul style="list-style-type: none"> • Applies critical-thinking to manage ethical situations. • Seeks guidance in identifying and managing ethical situations. • Recognizes and manages potential, perceived or actual conflicts of interest.
1.2 Work within personal and professional limits and seek assistance when required.	1.2.1 Manage professional responsibilities by recognizing personal and professional limits.	<ul style="list-style-type: none"> • Reflects on and evaluates own practice. • Obtains external feedback to support self-reflection. • Assesses quality of services provided and identifies opportunities for improvement. • Demonstrates knowledge of professional scope of practice as defined by legislation and jurisdiction. • Ensures the appropriate knowledge, skill and judgment before performing activities or procedures. • Ensures the appropriate legislative authority is in place before performing restricted activities.

Unit 1: Assumes Professional Responsibilities		
Competency	Performance Indicator	Practice Illustration
1.2 Cont'd	1.2.2 Seek assistance or refer to an appropriate professional when the condition or situation is beyond personal competence and/or professional scope of practice.	<ul style="list-style-type: none"> Refers patients /clients for consultation when conditions or issues are beyond knowledge, skill and/or judgment. Seeks assistance to clarify professional scope of practice.
1.3 Prepare documents and records in accordance with provincial legislation, standards and guidelines.	1.3.1 Document client care using either of Canada's official languages.	<ul style="list-style-type: none"> English or French
	1.3.2 Ensure consistency with organizational policies and record keeping legislation, standards and guidelines.	<ul style="list-style-type: none"> Identifies inconsistency with organizational policies and jurisdictional requirements. Advocates for consistency with legislation and professional standards and organizational policies.
	1.3.3 Maintain records consistent with provincial regulations, standards and guidelines.	<ul style="list-style-type: none"> Maintains records in accordance to professional standards of practice. Retains records for the period of time stipulated by the jurisdiction.
	1.3.4 Release records in accordance with legislation, regulations and standards of practice.	<ul style="list-style-type: none"> Facilitates the timely transfer of records and prescriptions to others as defined in legislation, regulations and standards of practice. Provides access to records according to legislative and regulatory requirements. Limits access of records according to legislative and regulatory requirements.
1.4 Ensure informed consent prior to and throughout service provision.	1.4.1 Adhere to regulatory, legislative and standard requirements regarding informed consent.	<ul style="list-style-type: none"> Demonstrates an understanding of the principles of obtaining consent when providing treatment, engaging in financial arrangements, collecting, disclosing, storing and releasing personal information. Refers to legislation and regulatory standards and guidelines.
	1.4.2 Exercise the process of obtaining informed consent.	<ul style="list-style-type: none"> Identifies situations where informed consent may be problematic and takes appropriate steps (for example, when a client is incapable of providing consent, optician seeks consent from substitute decision-maker). Demonstrates knowledge of the substitute decision-makers hierarchy. Engages the patient/client in an informed consent process.

Unit 2: Communication and Collaboration Effectively		
Competencies	Performance Indicators	Practice Illustration
2.1 Demonstrate appropriate, clear and effective communication with patients/clients, their stakeholders, their support system, and interprofessional team members.	2.1.1 Use a wide range of verbal and non-verbal communication strategies.	<ul style="list-style-type: none"> • Uses empathic and active listening skills. • Itemizes and rephrases choices to clarify needs. • Clarifies statements and uses clear appropriate language. • Uses appropriate terminology when speaking with professionals. • Uses patient/client-centred language.
	2.1.2 Communicate in a manner that is respectful to the individual needs and beliefs of the patient/client.	<ul style="list-style-type: none"> • Takes into consideration the age, cultural diversity and capacity of patient/client. • Presents eyewear and eye care options clearly and effectively. • Delivers information in an open, honest, respectful and thoughtful manner.
	2.1.3 Use an effective dialogue, which employs an appropriate mix of questions to elicit information.	<ul style="list-style-type: none"> • Uses open-ended and close-ended questions. • Poses questions to clarify understanding.
	2.1.4 Provide appropriate literature based on the patient/ client's specific needs	<ul style="list-style-type: none"> • Provides handouts, directives to a website, instructions and/or follow-up care. • Provides materials that are appropriate to the audience (for example, the correct literacy level, readability, font size, confirm literacy and computer skills).
	2.1.5 Consult the established protocols and policies to manage and report abusive and aggressive behaviour from patients/clients.	<ul style="list-style-type: none"> • Follows customer service organization's policies. • Report abusive behaviours to the appropriate personnel (for example, supervisor, manager)
2.2 Works effectively within the team.	2.2.1 Contribute to team decision-making	<ul style="list-style-type: none"> • Actively participates in team meetings. • Participates in the development of organizational policies. • Works collaboratively with team members.
	2.2.2 Consider and apply knowledge of team members' strengths and capabilities	<ul style="list-style-type: none"> • Seeks guidance when required. • Takes into consideration and respects the opinions of others.
	2.2.3 Use effective interpersonal skills to resolve conflicts and complaints.	<ul style="list-style-type: none"> • Uses appropriate communication skills when resolving conflicts, such as active listening and reflection. • Demonstrates sensitivity to differences of opinions. • Seeks guidance when needed. • Develops viable options to resolve conflicts and/or complaints.
	2.2.4 Assume responsibility for completion of your assigned tasks.	<ul style="list-style-type: none"> • Ensures integrity and accountability in completing tasks. • Demonstrates transparency if unable to complete a task.

Unit 3: Educates and Advocates Effectively		
Competencies	Performance Indicators	Practice Illustration
3.1 Advocate for the profession.	3.1.1 Demonstrate awareness and understanding of self-regulation and the role of professional associations.	<ul style="list-style-type: none"> Engages in regulatory body and professional association activities. Keeps abreast of applicable legislation, regulations, standards of practice and guidelines. Regularly seeks and reviews information from the regulatory body and professional association.
	3.1.2 Recognize and promote the interprofessional care of the eye-care team.	<ul style="list-style-type: none"> Summarizes the role of the Optician and explains the differences between the members of the eye care team.
	3.1.3 Educate the employer and the public on the role of the Optician and benefits in receiving care from a Registered/Licensed Optician.	<ul style="list-style-type: none"> Explains the similarities and differences of Optician, Ophthalmologist, and Optometrist and explains this information in a meaningful way. Communicates the scope of practice. Advocates for organizational policies that support public protection. Promote use of title.
3.2 Advocate for the patient/client.	3.2.1. Serve as a patient/client advocate with other members of the eye care team.	<ul style="list-style-type: none"> Refers the patient / client to the appropriate member of the team. Encourages routine ocular health assessment.
	3.2.2 Engage in active discussion with other members of the eye care team to best meet and serve the patient/ client needs.	<ul style="list-style-type: none"> Liaises with patient/client’s medical practitioners as required. Seeks consultation and recommendations from different members of the team.
3.3 Teach, guide, instruct, mentor, and supervise the student/intern in all areas of the profession.	3.3.1. Communicate industry standards and provincial requirements.	<ul style="list-style-type: none"> Actively mentors students/interns in the performance of the practical and theoretical expectations of the profession. Directs students/interns to appropriate resources.
	3.3.2 Monitor and evaluate the performance of the student/intern.	<ul style="list-style-type: none"> Conducts regular assessments of personal learning needs to ensure ongoing competence of the student/intern. Takes accountability for the actions of the student/ intern. Manages assignments of services.
	3.3.3 Promote a culture of organizational learning.	<ul style="list-style-type: none"> Encourages and implements a plan for continual professional improvement and learning. Supports and encourages student/intern to manage learning in order to maximize their potential and develop their skills. Provides formative, constructive feedback to support professional growth. Provides mentoring, preceptorship, teaching and coaching.

Unit 3: Educates and Advocates Effectively		
Competencies	Performance Indicators	Practice Illustration
3.3 Cont'd		<ul style="list-style-type: none"> • Embrace advancements and changes in techniques • Support a positive environment for the exchange of information between team members regardless of status
3.4 Teach, guide, instruct and supervise non-regulated support staff (for example, reception, optometric assistance, fashion consultants, frame consultant, laboratory techs, administrative staff)	3.4.1 Communicate expectations and assignments to non-regulated staff.	<ul style="list-style-type: none"> • Ensures appropriate legislation, regulations and industry standards are maintained in all aspects of patient/client care. • Assigns tasks and activities, taking into consideration competency and restrictive activities.
	3.4.2 Support direct authority of non-regulated staff.	<ul style="list-style-type: none"> • Implements plans for continual professional improvement and learning. • Supports the development and implementation of job descriptions for non-regulated support staff. • Provides formal and informal performance reviews. • Demonstrates knowledge and applies relevant human resource legislation and collective agreements. • Adheres to regulatory requirements and/or guidelines relating to the assigning of tasks.
3.5 Teach, guide and instruct patients/clients.	3.5.1 Demonstrate an understanding of patient/client's expectations and aspirations and manage situations where these cannot be met.	<ul style="list-style-type: none"> • Conducts an assessment to determine patient/client wants and needs. • Clarifies patient/client expectation. • Provides patient/client education applicable to the patient/client's wants and the limitations of the product. • Identifies and manages escalating emotions.
	3.5.2 Communicate the advantages and limitations of the product to the patient/client in a meaningful and clear manner.	<ul style="list-style-type: none"> • Explains the limitations of spectacle and contact lens designs to maximize patient/client success. • Explains the adjustment process for specific ophthalmic appliances (for example, progressive addition lenses) to promote successful adaptation.
	3.5.3 Apply knowledge of learning principles and teaching techniques.	<ul style="list-style-type: none"> • Uses appropriate teaching methods to meet patients/clients' needs. • Assesses current knowledge of patient/client. • Adjusts teaching plan and delivery to meet special needs.

Unit 3: Educates and Advocates Effectively		
Competencies	Performance Indicators	Practice Illustration
3.5 Cont'd	3.5.4 Implement an individualized teaching plan in order to promote, maintain and restore ocular health.	<ul style="list-style-type: none"> • Recommends regular ocular health assessment. • Explains the uses and limitations of the ophthalmic appliance. • Uses a variety of demonstration techniques, including repeat demonstration. • Discusses misuse and unnecessary abuse of eyewear. • Collaborates with patient/client and caregivers to develop a patient/client-centred teaching plan.
	3.5.5 Discuss with the patient/client the systemic disease and its ocular impact.	<ul style="list-style-type: none"> • Provides a layman's explanation of the ocular impact of a particular disease.
3.6 Adjust teaching plan and delivery to meet needs of all patients/clients.	3.6.1 Recognize factors influencing learning and adjust teaching/training.	<ul style="list-style-type: none"> • Adjusts teaching/training based on demographics and physical factors, for example, age groups, vision and hearing impaired, literacy level, language, cognitively impaired.
	3.6.2 Use appropriate supporting materials.	<ul style="list-style-type: none"> • Presents diagrams, leaflets and a range of different explanations.
3.7 Perform in a leadership role in the eye care team.	3.7.1 Provide information within the scope of the profession and refer to the appropriate professional as necessary.	<ul style="list-style-type: none"> • Provides the patient/client with the necessary information to access the appropriate member of the eye care team if required.
	3.7.2 Advocate for, and adapt to, change to support competent, ethical and patient/client -centred care.	<ul style="list-style-type: none"> • Advocates for consistency between organizational policies and regulatory and legislative requirements. • Identifies safety issues and takes appropriate action. • Adapts to changes in practice using evidence, practice standards and informed practice.

Unit 4: Applies Organizational Management Principles		
Competencies	Performance Indicators	Practice Illustration
4.1 Apply principles of managing inventory.	4.1.1 Coordinate the purchasing, receiving and storage of appropriate inventory.	<ul style="list-style-type: none"> • Reviews vendor's product availability. • Verifies orders. • Stocks rotation.
4.2 Utilize financial management practices that ensure the appropriate provisions of care to patients/clients.	4.2.1 Ensure that accounting and/or bookkeeping systems are in place and adhere to legislation and regulations.	<ul style="list-style-type: none"> • Keeps accurate and current records of sales and expenses. • Reviews and records payment at the point of transaction as per company policy. • Communicates payment and refund policies to the patient/client. • Communicates and implements refund and warranty policies.
	4.2.2. Ensure proper procedures as in place for third party billing.	<ul style="list-style-type: none"> • Maintains appropriate records associated with third party billing (for example, invoices, billing forms, record of payment). • Makes payments in a timely manner. • Ensures accuracy in billing.
4.3 Apply principles of ethical marketing and advertising practices.	4.3.1 Ensure that marketing information provided is truthful and professional.	<ul style="list-style-type: none"> • Develops advertising claims based on professional evidence-based literature and research. • Ensures and/or advocates for advertising claims that are compliant with regulations and standards. • Uses social media platforms in a professional, ethical and appropriate manner.
	4.3.2 Extend professional courtesy to competitors and collaborate as required to facilitate management of the overall eye health needs.	<ul style="list-style-type: none"> • Employs proper telephone etiquette. • Responds in a timely manner. • Speaks respectfully and professionally of optical competition.
4.4 Demonstrate sound knowledge of the current and emerging technologies used in practice.	4.4.1 Demonstrate willingness to embrace change and advancements in the industry.	<ul style="list-style-type: none"> • Investigates and engages in regular training of new products and technologies (for example, software updates, new equipment, and tools). • Advocates for resources which support advancement in technology. • Demonstrates knowledge of the retail optical business environment.
	4.4.2 Demonstrate use of computer-based systems, software and applications.	<ul style="list-style-type: none"> • Ensures proficiency with the use of computers, relevant software and applications (for example, managing the files and directory structure, using internal electronic mail). • Engages in training and professional development to enhance knowledge and proficiency.

Unit 4: Applies Organizational Management Principles		
Competencies	Performance Indicators	Practice Illustration
4.5 Manage activities related to human resource management.	4.5.1 Comply with labour legislation, collective agreements and organizational policies in the management of the performance of others (for example, employees, interns, students, volunteers, team members).	<ul style="list-style-type: none"> • Regularly engages staff in performance reviews. • Maintain appropriate human resource records. • Engages in ethical recruiting and hiring practices (for example, ensuring transparency with the hiring process). • Recognizes and manages conflict of interest. • Familiarizes self with and applies applicable legislation and agreements.
	4.5.2 Develop protocols and implement and conduct employee performance reviews and/or evaluations.	<ul style="list-style-type: none"> • Implements processes to support staff, students and interns in meeting their performance goals. • Demonstrates knowledge of mandatory reporting of regulated professionals according the jurisdiction. • In collaboration with staff, develops and supports remediation plans. • Ensures termination procedure is consistent with organizational policies and applicable legislation.
	4.5.3 Analyze and implement strategies for efficient workflow.	<ul style="list-style-type: none"> • Determines competence of staff and assigns task appropriately. • Reviews various resources and options to increase efficiency in workflow. • Follows applicable organizational policies to recommend and implement strategies.
4.6 Prioritize professional duties including when faced with multiple patients/clients and competing issues.	4.6.1 Assess, synthesize and analyze the competing issues and need of the patients/clients.	<ul style="list-style-type: none"> • Conducts an assessment of patient's/client's needs and itemizes competing demands to support prioritization. • Takes into consideration all available options to manage the situation. • Ensures patient/client safety and strives for efficient services. • Demonstrates open communication with patients/clients and others involved.
	4.6.2 Seek guidance and assistance as required.	<ul style="list-style-type: none"> • Refers patients/clients to appropriate professional. • Informs supervisor/manager/owner of situation and/or document event to obtain support and future guidance.
	4.6.3 Demonstrate flexibility, creativity and adaptability in meeting unexpected demands.	<ul style="list-style-type: none"> • Advocates for resources. • Applies critical thinking and reasoning when prioritizing competing issues. • Takes into consideration patient/client safety and well-being.

Unit 5: Ensures Patient / Client and Practice Safety		
Competency	Performance Indicators	Practice Illustrations
5.1 Recognize and implement infection control and prevention measures.	5.1.1 Implement and maintain a daily infection prevention control procedure.	<ul style="list-style-type: none"> • Ensures posting of appropriate signage is visible. • Re-enforces hand washing by staff. • Demonstrates proper hygiene elements when providing services to patient/client. • Adheres to infection prevention and control measures established by jurisdiction and national regulatory bodies (Optical Laboratory Association, Health Protection Branch of Canada, and Canadian Safety Association).
	5.1.2 Recognize the current landscape of infectious diseases and required preventative measures for public safety.	<ul style="list-style-type: none"> • Implements procedures to react to an acute infection disease outbreak. • Keeps abreast of public safety and infectious outbreaks. • Monitors changes in established regulations and standards.
	5.1.3 Demonstrate proper aseptic techniques.	<ul style="list-style-type: none"> • Disinfects lenses, tools and instruments. • Uses storage techniques for trial lenses commensurate with solution chemistry, pharmacology and microbiology issues. • Maintains sample frames on display in a hygienic fashion.
	5.1.4 Demonstrate proper aseptic techniques for contact lenses.	<ul style="list-style-type: none"> • Cleans the lens surface. • Disinfects the lens using Oxidization (Hydrogen Peroxide) Cold chemical regime. • Uses thermal disinfection (heat) neutralization, rinsing or storing. • Follows procedures for using protein removers.
5.2 Demonstrate a commitment to patient/client and workplace safety.	5.2.1 Adhere to polices, standards and procedures as it relates to patient/client and workplace safety.	<ul style="list-style-type: none"> • Engages in work safety training session, for example, WHMIS, fire-drills. • Demonstrates knowledge of legislation in terms of scope, material data safety sheets and labeling requirements for controlled substances. • Integrates safety practices into daily activities. • Monitors and responds to all vendor recalls and Health Canada alerts.

Unit 5: Ensures Patient / Client and Practice Safety		
Competency	Performance Indicators	Practice Illustrations
5.2 Cont'd	5.2.2 Manage risk in the workplace to prevent and mitigate safety issues.	<ul style="list-style-type: none"> • Demonstrates situation awareness by observing the environment, anticipating potential risks and seeking assistance when needed. • Integrates infection and prevention measures. • Takes appropriate actions to align consistency with practice environment and established policies, legislation and standards (for example, labour laws, safety legislation, industry standards). • Advocates for changes when risks are identified by recommending interventions. • Documents and tracks incidences. • Participates in quality improvement initiatives. • Ensures the premises do not represent a physical safety hazard.
	5.2.3 Manage risk to prevent and mitigate safety issues to patients/client.	<ul style="list-style-type: none"> • Integrates infection and prevention measures. • Takes action on identified risk to patients/clients and others. • Advocates for change when risks are identified by recommending interventions. • Documents and tracks incidences. • Applies knowledge of basic first aid and CPR. • Monitors and take action on expired substances, solutions and contact lenses. • Ensures patient/client education is provided on the proper use of the ophthalmic appliance. • Educates the patient/client as to the visual limitations of their glasses. • Understands the limitation a patient/client has after dilation. • Recognizes and prevents potential safety hazard (for example, remove unsteady chairs, trip hazards and child proof environment).

Unit 6: Demonstrates Clinical Knowledge		
Competency	Performance Indicators	Practice Illustrations
6.1 Demonstrate an understanding of the functionality of the instruments used in the examination of the eye and the implications of the results.	6.1.1 Recognize and name the equipment used in your practice.	<ul style="list-style-type: none"> • Converses with colleagues using profession-specific terminology. • Documents equipment names accurately in records.
	6.1.2 Demonstrate your knowledge of operating the equipment appropriate to practice.	<ul style="list-style-type: none"> • Ensures relevant knowledge of operating equipment when dispensing contact lens, eyeglass and/or refracting.
	6.1.3 Choose the appropriate equipment required for the situation.	<ul style="list-style-type: none"> • Performs appropriate measurements. • Recognizes the destructive nature of cutting corners.
	6.1.4 Interpret the readings and apply your knowledge to inform decisions and actions.	<ul style="list-style-type: none"> • Uses all available information to develop a plan.
6.2 Demonstrate the appropriate depth and breadth of anatomy and physiology.	6.2.1 Demonstrate an understanding of the visual pathway.	<ul style="list-style-type: none"> • Recognizes disruptions in vision caused by disease or accident.
	6.2.2 Demonstrate an understanding of the anatomy of the eye.	<ul style="list-style-type: none"> • Recognizes disruptions in vision caused by cataracts.
	6.2.3 Demonstrate an understanding of visual fields.	<ul style="list-style-type: none"> • Recognizes disruptions in vision caused by macular degeneration and glaucoma
	6.2.4 Demonstrate an understanding of the photochemistry of vision.	<ul style="list-style-type: none"> • Recognizes disruptions in vision caused by photophobia.
	6.2.5 Demonstrate an understanding of the pathology of the ocular system.	<ul style="list-style-type: none"> • Recognizes disruptions in vision caused by glaucoma.
	6.2.6 Understand the implications and relevance of systemic diseases to ocular health.	<ul style="list-style-type: none"> • Recognizes disruptions in vision caused by diabetes.
6.3 Demonstrate an understanding of physical optics.	6.3.1 Apply current and relevant ophthalmic theories using mathematical calculations to select appropriate eyewear.	<ul style="list-style-type: none"> • Demonstrates an understanding of concave, convex, prism.

Unit 7: Applies Critical Thinking and Professional Judgment		
Competency	Performance Indicators	Practice Illustrations
7.1 Demonstrate sound professional judgment and clinical reasoning.	7.1.1 Apply relevant and current knowledge of physiology, lens theory and solutions and understanding of fabrication of ophthalmic appliances.	<ul style="list-style-type: none"> • Determines visual or physiological symptoms that may require immediate attention. • Makes decisions based on sound professional knowledge.
	7.1.2 Solve problems by applying an organized approach.	<ul style="list-style-type: none"> • Defines the problem, identifies alternative explanation for the problem and possible outcomes and recommendations. • Rationalizes the preferred course of action. • Takes into consideration relevant standards, guidelines, legislation and organizational policies.
	7.1.3 Demonstrate problem-solving skills to correct any deficiencies related to the ophthalmic appliance.	<ul style="list-style-type: none"> • Examines ophthalmic appliance and notes adjustments or repairs required. • Applies knowledge of various frame materials and the impact to the adjustment or repair. • Collects objective data from the patient/client and others to support determination of root cause. • Collects subjective data from the patient/client to determine root cause • Seeks consultation with others when needed (for example, colleagues, peers, supervisor, physicians, and laboratory). • Integrates relevant information with previous learning, experience and professional knowledge. • Calculates and communicates the cost of repairs. • Teaches the patient/client proper care and maintenance of the ophthalmic appliance to prevent future problems.
	7.1.4 Establish mutual understanding with the patient/client.	<ul style="list-style-type: none"> • Explains to patient/client normal adaptation to realign expectations (for example, lens materials, prescription changes, size of frame, optical situations). • Clarifies expectations that impact the services (for example, warranties, follow-up care). • Collaborates with patient/client and others to encourage resolution.
	7.1.5 Manage time and organize patient/client care effectively.	<ul style="list-style-type: none"> • Prioritizes patient/client care needs according to urgency. • Manages competing demands in an ethical, safe and efficient manner.

Unit 7: Applies Critical Thinking and Professional Judgment		
Competency	Performance Indicators	Practice Illustrations
7.1 Cont'd		<ul style="list-style-type: none"> • Seeks assistance and reports needs as required. • Demonstrates flexibility, creativity and adaptability in meeting unexpected demands. • Applies project management skills to organize tasks or projects (for example, assigns tasks, develops staffing schedule, determine resources, monitors progress and revises plan when needed). • Takes into consideration others' skills and opinions. • Takes into consideration organization policies and procedures
7.2 Engage in reflection and evaluation and integrate finding into practice.	7.2.1 Evaluate the effectiveness of the resolution.	<ul style="list-style-type: none"> • Determine if patient's/client's visual, vocational, and a vocational needs and requirements are met. • Takes into consideration feedback obtain from others, through consultation. • Reflects on outcome and options considered.
	7.2.2 Acquire and apply knowledge from everyday experiences.	<ul style="list-style-type: none"> • Demonstrates an insight into personal experience and limitations. • Reflects on professional behaviours and communication skills used. • Integrates new knowledge, skills and attitudes into practice.
	7.2.3 Demonstrate an understanding of the importance of continuous learning.	<ul style="list-style-type: none"> • Identifies resources and methods for keeping up-to-date on professional responsibilities (for example, regulatory and association websites, peer review journals, conferences, experts). • Engages in continuing education/life-long learning and professional development. • Reflects on learning and how the new knowledge will impact practice • Complies with provincial requirements to demonstrate ongoing competence.

Unit 8: Utilizes Practice Process		
Competency	Performance Indicators	Practice Illustrations
8.1 Conduct an assessment to determine patient/client needs and appropriate ophthalmic appliances.	8.1.1 Obtain relevant optical and health history.	<ul style="list-style-type: none"> Asks questions specific to life style including vocation / avocation needs. Obtains previous prescription and optical history. Obtains information specific to current medication use Obtains information specific to health history and family history. Obtains information about previous experience with ophthalmic appliances.
	8.1.2 Collect both objective and subjective information.	<ul style="list-style-type: none"> Identifies patient's/client's concerns and self-described symptoms. Determines patient's/client's wants and preferences. Observes physical factors (for example, head tilt, head position when walking, height of the person). Observes condition of current ophthalmic appliance.
	8.1.3 Determine environmental influences on vision including lighting and physical set up of workstation.	<ul style="list-style-type: none"> Identifies ergonomics factor (for example, computer distance, lighting, computer position, telephone/head-set).
	8.1.4 Apply knowledge of binocular vision to the dispensing of an appropriate ophthalmic appliance.	<ul style="list-style-type: none"> Demonstrates knowledge of specific eye anomalies requiring the use of contact lenses in order to maximize binocular vision. Determines the presents of Anisometropia or Antimetropia resulting in Aniseikonia. Demonstrates knowledge in producing aniseikonic eyeglasses to balance retinal image sizes to maximize binocular design.
8.2 Prepare recommendations based on defined needs.	8.2.1 Consider assessment data to support decisions.	<ul style="list-style-type: none"> Analyses and synthesizes assessment data to determine options. Recommendations appropriate ophthalmic appliances based on identified visual, vocational and avocational needs. Addresses patient/client concerns about vision and/or ophthalmic appliances.
8.3 Apply industry standard before dispensing eyewear to ensure quality and safety.	8.3.1 Ensure measurements are performed accurately using approved devises and tools.	<ul style="list-style-type: none"> Calibrates equipment to ensure accuracy and validate good working orders Ensures appropriate measurement techniques are followed.
	8.3.2 Ensure all ophthalmic appliances meet minimum recommended tolerances.	<ul style="list-style-type: none"> Applies standard tolerance chart.

Unit 8: Utilizes Practice Process		
Competency	Performance Indicators	Practice Illustrations
8.3 Cont'd	8.3.3 Ensure manufacturer's recommendations are considered.	<ul style="list-style-type: none"> • Takes into consideration limitations of the wearing schedules prior to dispensing. • Takes into consideration the manufacture's recommendation when dispensing. • Takes into consideration the power limitations for the specific brands.

Unit 9: Focus Area: Eyeglass		
Competency	Performance Indicators	Practice Illustrations
9.1 Apply knowledge to determine the appropriate lenses and frames to meet the needs of the patient.	9.1.1 Understand the relationship between the prescription requirements and the lens characteristics.	<ul style="list-style-type: none"> Identifies limiting factors of the prescription and physiology. Considers appropriate lens modalities. Selects appropriate lens material for the prescription.
	9.1.2 Understand the relationship between the prescription requirements and the frame characteristics.	<ul style="list-style-type: none"> Selects appropriate frames for the prescription. Understands limitation of lens design.
	9.1.3 Identify anomalies in a prescription.	<ul style="list-style-type: none"> Defines and lists anomalies of the eye that require ophthalmic appliances. Evaluates the values in the optical prescription (i.e. Sphere, Cylinder, Axis, Prism, Add power). Demonstrates the knowledge of dominant and non-dominant eye and the role in obtaining binocular vision.
	9.1.4 Recommend appropriate ophthalmic appliances, taking into consideration visual, vocational and avocational needs.	<ul style="list-style-type: none"> Takes into consideration environmental factors that influence vocational needs (for example, computer distance, lighting, outside work). Takes into consideration avocational needs. Takes into consideration safety products (for example, electrician need for non-conductive frames). Applies CSA & ANSI Standards.
	9.1.5 Advise patient/client on the limitations resulting from the lenses and frame combination.	<ul style="list-style-type: none"> Makes recommendations to alternative care where required (for example, low vision and contact lenses). Determines suitability of four point rimless frames and suitability of high index lenses. Advise patients/clients regarding the benefits and disadvantages of each lens modality.
	9.1.6 Apply knowledge of available manufacturing specifications.	<ul style="list-style-type: none"> Reviews with the patient/client the benefits and limitations of lens materials, coatings and frame designs to support decision-making (for example, high index lenses, polycarbonate, trivex, CR 39).
	9.1.7 Identify frame materials and consider material properties.	<ul style="list-style-type: none"> Demonstrates an understanding of limitation of frame materials. Applies professional judgment to determine whether the frames can be repaired. Selects the appropriate repair method.

Unit 9: Focus Area: Eyeglass		
Competency	Performance Indicators	Practice Illustrations
9.2 Take accurate measurements with the appropriate tools.	9.2.1 Demonstrate the skills required to ensure accurate measurements.	<ul style="list-style-type: none"> • Accurately performs optical and frame measurements (for example, segment height (all types of multifocal lenses), optical centre height, pantoscopic angle, vertex distance, monocular pupillary distance (distance and near) and frame wrap. • Determines the working focal length and measure accordingly.
9.3 Demonstrate the ability to convey the necessary information and measurements to the lab/frame supplier for the creation and manufacture of eyeglasses.	9.3.1 Demonstrate an understanding of the manufacturing process.	<ul style="list-style-type: none"> • Demonstrates an understanding of whether the lenses are surfaced or stock and the effect this will have on the final product. • Demonstrates an understanding of the effect of altering the base curve and the effect it will have on the eyeglasses and their effectiveness.
	9.3.2 Order frames and lenses from the appropriate suppliers to complete the eyeglasses.	<ul style="list-style-type: none"> • Conveys information accurately to the manufacturer/laboratory. • Specifies the optical measurements to ensure maximum visual acuity (for example, pupillary distance (pd), seg height, optical centre (oc) height, base curve, vertex distance, pantoscopic tilt, frame wrap, frame dimensions and center thickness (CT)). • Specifies lens type, materials, coatings and finishing. • Provides frame specification (for example, model number, size and colour).
	9.3.3 Ensure timely delivery of the eyewear.	<ul style="list-style-type: none"> • Coordinates timely delivery of ophthalmic appliance with the laboratory and frame supplier. • Monitors a reasonable delivery time. • Communicates expectation with patient/client and suppliers.
9.4 Demonstrate steps required to ensure accuracy of the lens with prescription.	9.4.1 Perform final inspection of ophthalmic appliance upon receipt from the lab and before delivery to the patient/client.	<ul style="list-style-type: none"> • Uses bench to align the frame. • Verifies the frame order (for example, size, colour, model). • Inspects for damage and that lens are installed properly.
	9.4.2 Take appropriate measurements to validate lens to the prescription and confirm lens are within regulatory standards.	<ul style="list-style-type: none"> • Verifies the accuracy of the ophthalmic appliance (for example, power, measurements). • Measures and verifies the lenses are correctly positioned in the eyeglass frame, within regulatory standards.

Unit 9: Focus Area: Eyeglass		
Competency	Performance Indicators	Practice Illustrations
9.5 Demonstrate ability to fit the eyeglasses to the patient/client.	9.5.1 Perform appropriate adjustments to ensure a correct fit.	<ul style="list-style-type: none"> • Confirms the fit and effectiveness of the eyeglasses on the patient/client. • Select the appropriate instruments and tools to adjust the eyeglass to maximize the effectiveness for the patient/client. • Adjusts temple bend, nose pads, pantoscopic tilt and frame wrap to fit the eyeglasses to the patient/client to maximize effectiveness.
	9.5.2 Determine the frames and lens are properly position on the patient/client.	<ul style="list-style-type: none"> • Performs an assessment to collect subjective and objective information to ensure maximum visual acuity and comfort. • Matches the form, type and positioning of lenses to meet all the patient's/client's needs.
9.6 Demonstrate the ability to appropriately use the tools necessary for the duplication of the eyeglasses.	9.6.1 Demonstrate the ability to use and interpret the results found using optical tools.	<ul style="list-style-type: none"> • Demonstrates proper and accurate use of a lensometer to neutralize a lens and interpret the findings. • Demonstrates proper and accurate use appropriate tools (for example, pupilometer, lens clock, thickness calipers) and interprets the findings accurately.

Unit 10: Focus Area: Contact Lenses		
Competency	Performance Indicators	Practice Illustrations
10.1 Conduct a comprehensive assessment specific to fitting and dispensing of contact lenses.	10.1.1 Conduct a comprehensive medical and optical health history assessment specific to fitting and dispensing of contact lenses.	<ul style="list-style-type: none"> • Determines patient's/client's previous contact lens and solutions use, including prior history of allergic reactions, sensitivity or problems with lenses or solutions. • Identifies current medication use . • Obtains a medical history including systemic diseases and any issues with dry eyes. • Confirms with the patient/client the date of the last refraction.
	10.1.2 Identify anomalies in a prescription.	<ul style="list-style-type: none"> • Defines and lists anomalies of the eye that require ophthalmic appliances. • Evaluates the values in the optical prescription (i.e. sphere, Cylinder Axis, , Prism, Add power) • Applies knowledge of dominate and non-dominate eye and the role in obtaining binocular vision.
	10.1.3 Conduct a comprehensive assessment to obtain corneal readings including ocular health and visual acuity.	<ul style="list-style-type: none"> • Conducts an assessment using the appropriate tools (for example, keratometer, slit-lamp/ biomicroscope using and all forms of illumination). • Performs appropriate evaluations (for example, tarsal plate and tear film evaluation). • Determines when not to proceed with a contact lens fitting.
	10.1.4 Use ophthalmic instruments and devices to perform ocular measurements for contact lens fitting.	<ul style="list-style-type: none"> • Evaluates the tear film for quality and quantity (for example, tear break-up time and Schirmer's testing). • Performs keratometry, slit lamp biomicroscopy and other adnexa measurements. • Measures patient's/client's visual acuity, distance and near. • Records and analyzes data to determine best lens selection
10.2 Select the appropriate trial lens, taking into consideration patient/client specific needs and compiled data.	10.2.1 Apply product knowledge to select the appropriate lens design, material, modality and compatible solution.	<ul style="list-style-type: none"> • Takes into consideration the prescription to determine the lens is not finalized in the initial process (for example consider the material selection, lens type rigid or soft lens). • Applies knowledge of various lens materials and modalities. • Applies understanding of sensitivities to lens materials and solutions. • Demonstrates knowledge of solution compatibility to materials. • Determine patient's/client's wants and need. • Takes into consideration the age and maturity of the patient/client. • Takes into consideration environmental factors that influence vocational needs (for example, computer distance, lighting, outside work). • Takes into consideration avocational needs.

Unit 10: Focus Area: Contact Lenses		
Competency	Performance Indicators	Practice Illustrations
10.2 Cont'd	10.2.2 Assess patient/client visual acuity, including the use of manifest over refraction if necessary, after a suitable adaptation time.	<ul style="list-style-type: none"> Evaluates visual acuity while lens is in situ.
	10.2.3 Verify lens fitting subjectively and objectively and make any adjustments to the fitting of the lens deemed appropriate.	<ul style="list-style-type: none"> Determines good centration, movement, visual acuity, comfort and good corneal integrity, for soft lens. Determines fluorescein pattern, movement, centration around the visual axis and good visual acuity, for rigid lens Ensures appropriate fit and comfort of patient/client.
10.3 Provide patient/client education that is patient/client-centred to ensure compliance in inserting, removing and caring for contact lenses.	10.3.1 Engage patient/client in the training of insertion and removal of contact lenses.	<ul style="list-style-type: none"> Engages patient/client in a repeat demonstration. Uses appropriate education materials (for example, video, handouts, and verbal instruction) taking into consideration the age and limitation of patient/client.
	10.3.2 Educate patients/clients on contact lens, solution, biocompatibility, storage and wear.	<ul style="list-style-type: none"> Demonstrates proper techniques of disinfection, cleaning, rinsing and storage of a contact lens including the replacement and cleaning of the case. Explains the need to respect the modality of wear. Explains the importance of following the wearing schedule recommended by the practitioner. Relays signs of solution sensitivity.
10.4 Promote maintenance of ocular health and corneal integrity.	10.4.1 Provide a follow-up care appointment with patient/client to assess post wear.	<ul style="list-style-type: none"> Confirms and documents follow-up appointments with patient/client. Tests visual acuity using appropriate tools (for example, slit lamp biomicroscopy and overkeratometry). Measures the corneal surface with the keratometer to determine little to no change. Clarifies understanding of post care and engage patient/client in further education if needed.

Unit 10: Focus Area: Contact Lenses		
Competency	Performance Indicators	Practice Illustrations
10.5 Demonstrate an understanding of medication use and the implications on ocular health.	10.5.1 Demonstrate an understanding of the use of prescribed and/or non-prescribed drugs/substances.	<ul style="list-style-type: none"> • Applies pharmacology knowledge when conducting an assessment. • Takes into consideration adverse effects of medication when selecting types of lens and educating on wearing schedule.

Unit 11 Focus Area: Refraction		
Competency	Performance indicators	Practice Illustration
11.1 Demonstrate an understanding of binocular function and ocular motility.	11.1.1 Measure and assess binocular function and ocular motility using standard industry practices.	<ul style="list-style-type: none"> • Describes ocular motility and binocular function.
11.2 Demonstrate an ability to use subjective and objective techniques to identify and quantify ametropia.	11.2.1 Demonstrate techniques to identify and quantify ametropia.	<ul style="list-style-type: none"> • Applies SOAP (subjective, objective, assessment and plan) technique when conducts an evaluation to determine final values and accuracy of testing .
11.3 Recognize significant signs and symptoms in relation to the patient's/client's eye and general health found incidental to the refraction.	11.3.1 Use equipment to determine visual impairment incidental of the refraction in relation to the patients/clients eye and general health.	<ul style="list-style-type: none"> • Interprets results from instruments and procedures used in refraction. • Demonstrates an understanding of how disease can affect vision. • Recognizes significance of migraine headaches. • Recognizes possible significance associated with photophobia.
11.4 Demonstrate the ability to assess the visual function in patients/clients with visual impairment.	11.4.1 Enable the referral system as a tool for a resolution to a visual impairment.	<ul style="list-style-type: none"> • Recognizes limitations in visual correction. • Recognizes personal limits and refers appropriately.
11.5 Demonstrate an understanding of medication use and the implications on ocular health.	11.5.1 Demonstrate an understanding of the use of prescribed and/or non-prescribed drugs/substances.	<ul style="list-style-type: none"> • Applies pharmacology knowledge when conducting an assessment and taking medical history. • Understands that certain medications have an implication on ocular health (for example, drug induced desiccation, induced dryness resulting in visual fluctuations). • Demonstrates knowledge of contraindications to refraction and apply standards of when not to refract based on information gathered (for example age of patients/clients, specific medication use). • Recognizes significance of unstable refractions.

Unit 12 Focus Area: Low vision		
Competency	Performance Indicators	Practice Illustrations
12.1 Recognize symptoms specific to low vision patients/clients.	12.1.1 Recognize functional implications, hereditary factors and prognoses of common causes of visual impairment.	<ul style="list-style-type: none"> • Collects relevant medical health information. • Identifies hereditary prominent diseases (for example, macular degeneration, retinitis pigmentosa). • Demonstrates knowledge of the progresses and prognoses of common visual diseases. • Understands the classification of legal blindness.
12.2. Demonstrate an understanding of the social, emotional and physical impact of low vision.	12.2.1 Conduct an assessment to determine emotional and physical needs of the patient/client within professional scope of practice.	<ul style="list-style-type: none"> • Evaluates the patient's/client's needs with respect to lifestyle. • Assesses the patient's/client's physical dexterity in using the ophthalmic appliance on an independent basis. • Assesses the patient's/client's preparedness to accept a low vision device. • Determines the patient's/client's support services.
	12.2.2 Address social, physical and emotional issues associated with low vision, within profession scope of practice.	<ul style="list-style-type: none"> • Provides resources (for example, community support groups, social worker) to address social and emotional needs. • Provides education to address physical limitation. • Refers to appropriate provider when emotional and social needs of the patient/client are outside the scope of the profession.
	12.2.3 Provide care in a patient/client-centred manner.	<ul style="list-style-type: none"> • Determines the patient's/client's visual goals. • Respects the sensitivity and emotional impact of low vision on the patient/client. • Adapts patient/client education to meet the needs of low vision patients/client. • Understands varying uses of low vision aides. • Remains current with new technology.
12.3 Recommend appropriate low vision device(s) and implement a continuing care plan.	12.3.1 Use the latest technology to dispense basic optical and non-optical low vision devices to achieve optimal vision.	<ul style="list-style-type: none"> • Predicts optimal magnification power by establishing required working distances based upon vocational and avocational needs. • Converts calculation from dioptric values to magnification power.
	12.3.2 Implement a patient/client-centred, continuing care plan.	<ul style="list-style-type: none"> • Collaborates with the patient/client and caregiver to establish a continuing care plan. • Establishes realistic goals and sets appropriate time frame for follow-up appointments.

Appendix C

NACOR Accreditation Fee Schedule

Accreditation Fees

Application Fee	\$250.00
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This is a fee established to cover the initial NACOR administrative costs associated with setting up an accreditation. When making application, the educational agency (EA) must submit an application fee of \$250.00

Accreditation Fees

Initial program accreditation	\$3000.00
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National accreditation fees are established to cover the costs associated with ensuring the presence of an accreditation expert for the document review and site visit, and any administrative costs incurred during the accreditation evaluation process, and communication of accreditation status. The first half is due at the start of the accreditation and the second half is payable following completion of the accreditation process. For new program accreditations the second half is due following the site visit.

Interim Accreditation Visit Fees	\$2000.00
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These fees have been established to cover the administrative, travel and accommodation costs associated with sending a team to re-visit the EA where deemed necessary by NACOR. This may occur after a specified term recommended in an accreditation decision, or where concerns expressed with the conditions of the program warrant such a visit.

Annual Renewal Fee	\$500.00
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National Accreditation Payment Schedule

Following an accreditation visit, EAs will be issued an invoice for the full amount of accreditation fees owing immediately (within 60 days) following the accreditation visit.

On notification of annual review reports due, EAs will be issued an invoice for the annual review fees. Payment will be due within 90 days of the date of the invoice. Fees are subject to change.

Goods and Services Tax:

Revenue Canada has stated that accreditation is a service applicable under the Goods and Services Tax Act or Harmonized Sales Tax.

Appendix D

Profile of the Membership of the National Board of Opticianry Accreditation

The Board of Accreditation consists of seven members:

- Three of the representatives are to be chosen by NACOR Board of Directors.
- Three of the representatives are to be chosen by the Canadian Association of Optician Educators (CAOE)
- One member will be chosen by NACOR from industry or opticianry at large.

Role and Responsibilities of the National Board of Opticianry Accreditation

- The Board establishes and revises accreditation requirements and processes as needed.
- The Board establishes, administers and abides by protocols such as conflict of interest, confidentiality and privacy.
- The Board establishes, administers and abides by policies and/or procedures related to accreditation (e.g. disclosure, appeals).
- The Board directs administration staff to determine the eligibility of a program for accreditation after careful review of the preliminary submission of documentation.
- The Board selects a 3 person Survey Team for a specific program accreditation.
- The Board makes final decisions related to a specific program's accreditation based on recommendations from the Survey Team.
- The Board directs the administration staff to communicate the decision results of the accreditation review to the program.
- Board refers appeals regarding process or the decision to NACOR
- The Board directs administration staff to communicate with programs regarding compliance, through written notification and electronic communication.
- The Board monitors compliance with accreditation requirements through regular communication with the educational programs.
- The Board reports to NACOR on an annual basis.

Appendix E

Profile of the Membership of the Survey Team

- The Survey Team leader must be an individual with previous experience in accreditation.
- Each province will provide names of possible team members. These names will be screened and must be acceptable to both NACOR and the CAOÉ.
- In preparation for the Survey Team members to become competent site evaluators and future team leaders each member must complete the Site Evaluation Course through the Association of Accrediting Agencies of Canada.

Role and Responsibilities of the Survey Team

- The Survey Team receives, reviews and assesses the Phase 2 documentation submission.
- The Survey Team conducts the site visit.
- The Survey Team drafts a preliminary assessment report for comment and forwards it to the EA.
- The Survey Team submits a Final Survey Team Report to the National Board of Opticianry Accreditation.

Appendix F

GLOSSARY

Glossary of Terms Used for Accreditation Purposes

Accreditation: Process of granting accredited status to an institution of higher learning and/or vocational training, a program of study. According to the definition of the term given by Human Resources Canada in its report Occupational Standards and Certification, the "focus of accreditation may include the contents of the education or training program the time devoted to various topics, the methods used, the qualifications of faculty, and the facilities available. Both government agencies and nongovernmental agencies may be involved in accreditation." **Accreditation is a "voluntary, self-regulatory process of evaluation, the purpose of which is to establish the fact that an institution, program or service has met certain standards. Although the process is voluntary, programs that fail to meet the standards of the national accreditation bodies suffer a significant penalty in some cases.** The implications of the term are that degrees, diplomas or certificates issued by non-accredited institutions or emanating from non-accredited programs of study do not have the same status as those issued by accredited institutions, or may not be recognized at all. Accreditation status may be subject to periodic review, and may be withdrawn. Accreditation procedures (including criteria of evaluation and minimum standards) are carried out in different ways in different jurisdictions.

Accrediting Body: The Accrediting body is the authority that is acknowledged as having the exclusive right to grant accreditation to an institution of higher learning and/or vocational training, program of study or service. Accrediting bodies can be (but are not necessarily) mandated by government legislation, or by the body regulating the profession in question, and can consist of government representatives, stakeholder representatives, appropriate external academic experts, professional regulatory bodies, etc. The accrediting body can and does vary from one jurisdiction to another and from one field or discipline to another.

Acronyms

EA - Educational Agency: Private and public colleges, or educational institutes offering Opticianry programs in Canada.

NACOR - National Association of Canadian Optician Regulators is an organization of nine provincial regulatory bodies, and two of their stated goals are "to develop quality benchmarks for accreditation standards and processes for Opticianry" and "Monitor and investigate common issues related to accreditation and mobility of Opticians nationally and internationally." As one of its primary projects, NACOR is charged with developing, coordinating and managing a national accreditation process for Opticianry programs. The primary objective of this initiative is the identification of those Opticianry educational programs meeting NACOR academic standards and criteria for accreditation.

CAOE - Canadian Association of Optician Educators is composed of representatives of the Optical Programs of Canadian Colleges. The CAO E represents Colleges offering opticianry programs in Canada. The CAO E was created to address commonalities of optician programs and to discuss additions to the curriculum of the programs.

PSTR - Preliminary Survey Team Report: The visiting team will meet to prepare a Preliminary Visiting Team Report (PVTR). The report, detailing the results of their comparison of the program to the appropriate criteria, and any Findings or Opportunities for improvement, is provided to the Educational Agency for their review and comments.

FSTR - Final Survey Team Report: Comments from the Educational Agency are incorporated into the report, and the Final Visiting Team Report is submitted to the National Board of Opticianry Accreditation discussion and accreditation decision.

Alternative Delivery Systems (ADS): Training programs using instructional technology and providing different ways of organizing and delivering instruction (education and training) from the conventional lecture format in which information is transmitted to learners. Alternative Delivery Systems have three major components, Presentation, Interaction and Communication. Alternative Delivery Training programs range from traditional correspondence courses to on-line provision and interactive CD ROMs to open learning centers and face-to-face provision where a significant element of flexibility, self-study, and learning support is integral to the provision.

Annual Review: allows the EA to maintain accreditation on an ongoing basis by reporting to NACOR every year after the initial accreditation.

Assessment Report: The document prepared following a team site visit. The report generally focuses on institutional quality, academic standards, learning infrastructure including the clinical phase of a program, and staffing.

Audit: the process by which the content and methodology of the EA program are examined to measure its conformance to accreditation requirements.

Clinical Practice Component: A section of the learning requirement that includes hands on application of information and skills learned while working under the supervision of a regulated practitioner.

Competency: A measurable set of skills, level of knowledge, and behavior practices obtained through formal or non-formal education, work experience, or other means: ability to perform occupation-specific tasks and duties.

Competency-based Modules: Discrete sets of associated task-based skills and knowledge that, in combination, make up the performance requirements of an occupation, profession, or trade. These are used for training and evaluation purposes.

Course: A single instructional subject commonly described by title, number, and credits in the post-secondary institution catalogue or bulletin.

Criterion: An objective and measurable indicator relating to skill level, knowledge, and/or competency. Most often 'standards' refer to a set of criteria and required levels that the program has to meet.

Curriculum: List of subjects composing a structured training and/or education program "organized into a course, courses, or work experiences which develop the knowledge, skills, and abilities of learners." The curriculum has an implicit or explicit set of goals and objectives with respect to learning outcomes.

Formative Evaluation: This is the evaluation that occurs after discrete segments or components of the program have been completed in order to measure progress and readiness to continue in the curriculum. Remediation should follow formative evaluation.

Institutional Review: A process of review of an institution or program to determine if its curriculum, staff, and infrastructure meet its stated aims and objectives. An audit focuses on accountability of institutions and programs.

Interim Accreditation: the temporary accreditation granted to an EA's program for a specified limited period.

Interim Report: the report the EA must submit to NACOR within that specified period to ensure continuation of accreditation. The report must address the areas of concern identified at the time of the accreditation visit.

Learning Outcome: A measured level of performance that demonstrates the degree to which a given competency has been attained

Licensing Body: The authority charged with and having exclusive right to determine eligibility for and to issue licenses. The licensing body sets the minimum standards required to be met by applicants for the purpose of practicing a profession or trade.

Mobility: The characteristic of being able to move freely from one jurisdiction to another and to gain entry into an academic institution or trade or profession without undue obstacles or hindrances. "The eligibility of a practitioner certified in one jurisdiction to practice in another without undergoing further training or assessment."

National Accreditation: National Accreditation is an evaluation service of opticianry programs offered at educational agencies (private and public colleges, educational institutes) in Canada.

Performance indicator: A measurement tool or tools used by a program to monitor, evaluate and improve its performance, usually consisting of input, process and outcome indicators

Portability: The condition of transferability and recognition of a credential between one jurisdiction or institution and another.

Portfolio: all samples of student work used by the accreditation team to assess the conformance to accreditation requirements.

Provider: The organization that is responsible for providing the educational program under consideration.

Program: A systematic, usually sequential, grouping of courses, forming a considerable part, or all, of the requirements for a degree or a credential. This includes full-time training and distance learning programs.

Regulation: Governance of a trade or profession with regard to entry requirements, occupational standards, credentials, licensure, discipline, compliance with legislative provisions, portability etc.

Skill: Ability to perform a task or set of tasks, as acquired through formal or informal education and/or training, work and life experience, or other means; identifiable in an occupation-specific context, and measurable through a variety of instruments.

Self-Study: A self-study is a process that normally produces comprehensive written analysis of the educational effectiveness of a program in relation to its educational objectives.

Site-Visit: Consists of a visit to a program by a team of evaluators. The on-site review follows the completion of the self-study and the submission of the self-study report to the accrediting body and evaluators. The visit enables the evaluation team to determine the accuracy and completeness of the self-study and to provide additional information and/or confirmation of existing information to the accrediting body.

Standards: Benchmark achievements upheld as a measure of skills and knowledge required to perform tasks, enter an educational institution, gain admission to a professional association etc. The term can also refer to codes of professional conduct.

Summative Evaluation: This is the assessment of learning outcomes at the end of a single component or all of the components of a program in order to assess readiness to finish the course/program and consequently to proceed to the next component or to graduate.

Appendix G

Bibliography:

Association of Accrediting Agencies of Canada

www.aaac.ca

Canadian Association of Schools of Nursing

www.casn.ca

Commission on Dental Accreditation

<http://www.cda-adc.ca>

Accreditation Council for Canadian Physiotherapy Academic Programs

www.accpap.ca

Canadian Information Centre for International Credentials

Guide to Terminology Usage in the Field of Credentials Recognition & Mobility

<http://www.cicic.ca/410/guide-to-terminology-usage-in-the-field-of-credentials-recognition-in-canada.canada>

Canadian Technology Accreditation Board Educational Agency Manual

www.cctt.ca

Council for Higher Education Accreditation

International Quality Review: Glossary of Terms in Quality Assurance & Accreditation

www.chea.org/international/inter_glossary01.html

Commission on Colleges & Universities of the Northwest Association of Schools & Colleges

www.cocnasc.org/glossary.html

Accrediting Commission for Community and Junior Colleges Western Association of Schools and Colleges

www.accjc.org

Ontario College of Teachers

<http://www.oct.ca>