At its November 13 Board meeting, the Commission on Accreditation for Respiratory Care (CoARC) revised its Accreditation Policies and Procedures and its Accreditation Standards for Entry into Respiratory Care Professional Practice to address the growing use of locations where some or all of the laboratory learning activities are conducted off-campus.

According to CoARC Accreditation Policy 9.09 (p. 47):

"An off-campus laboratory site (OCLS) is any location physically apart from the base program campus where the required laboratory instruction takes place. This does not include a satellite campus as defined in CoARC Policy 2.05."

A. A clinical affiliate site at which only clinical instruction is delivered is not an OCLS.
B. There is no minimum number of students or minimum distance from the base program campus necessary for a site to qualify as an OCLS. An OCLS typically does not have a full range of administrative and student services staffed by the facility’s personnel. Such services may be provided from the base program campus.
C. All OCLS offerings must be approved by the CoARC. A site visit (virtual or on-site) may be required prior to final approval.
D. All OCLS offerings must be listed in the Annual Report of Current Status (RCS).
E. Site names must be unique for an OCLS; the program sponsor cannot have multiple sites with identical names.
F. Site addresses must be unique for an OCLS; a program sponsor cannot have multiple sites with identical addresses.
G. A memorandum of Understanding (MOU) or agreement (separate from the clinical affiliate agreement) is required for each OCLS that describes who is responsible for laboratory instruction, equipment purchase maintenance, etc.

The Letter of Intent Application has been revised for prospective programs that wish to offer an OCLS. For existing programs, the CoARC has revised the Application for Substantive Change (Section 9.09), which now requires that programs using an OCLS to provide detailed responses to all related questions and to submit required supplemental documentation. In addition to the MOU described in (G) above, the following documentation is required with the Application:

- A laboratory equipment list for each proposed OCLS.
- Detailed laboratory schedules for each student at an OCLS specifying the skills to be learned at that site.
- A CoARC-approved Off-Campus Laboratory Site Affirmation Form for each OCLS.
- The Report of Current Status (RCS), due July 1, 2023, will be revised to allow for the submission of information related to an OCLS. The revisions are similar to what is currently required for Clinical Affiliates.
- New sections assessing the OCLS have been added to the RAM and the Self Study Survey, both of which should be completed by all programs that utilize an OCLS. These documents should be submitted annually, as required.
The Evidence of Compliance and Interpretive Guidelines of the Accreditation Standards for Entry into Respiratory Care Professional Practice were also modified to address OCLS offerings:

1.03 – For programs offering off-campus laboratory site(s), there must be an agreement, defining the policies governing student access to educational resources and laboratory experiences, for all the program’s off-campus laboratory sites. These agreements must include specific notations delineating the terms of participation and describe the relationship between the program and the laboratory site(s), and clearly define the roles of the program, its sponsor and the laboratory site(s).

2.13 – Laboratory instructional faculty (at the base program campus and each off-campus location) must have a faculty appointment (voluntary or paid) with the program sponsor. The program must document that laboratory instructional faculty have received appropriate orientation and training regarding their roles and responsibilities, programmatic policies and procedures, and the use of program evaluation instruments that assess student competencies. Off-campus lab instructor(s) must maintain adequate, ongoing communication with the Program Director and Director of Clinical Education.

4.08 – The program should document equivalency of both student evaluation methods and outcomes in all locations of instruction and when different delivery methods are provided for a portion of the students in the program. Under these circumstances, student access to learning materials should be similar at the various locations, and must be sufficient to meet program goals, but need not be identical. For laboratory and clinical experiences, the program must ensure that, for every class, the sum and quality of each student’s laboratory and clinical experiences are equivalent to that of the other students in that class, and sufficient to allow the achievement of all required competencies.

5.08 – The program must have policies and procedures that focus on the provision of a safe environment for students, patients, faculty and staff, regardless of location of instruction.

For programs undergoing an accreditation review, the self-study and site visit review documents have also been revised to allow for the proper evaluation of an OCLS. In addition to demonstrating compliance with Standards 1.03, 2.13, 4.08, and 5.08, as described above, when under accreditation review, programs that offer an OCLS will be required to complete Section 9.09 of the Application for Substantive Change to demonstrate compliance with Standard 1.07. Programs undergoing an accreditation review will be contacted by Bonnie Marrs. A virtual meeting involving Program Key Personnel, the Referee, and the Executive Office, will be scheduled for discussion of the implications of these Policies and Standards changes on the accreditation review process and timeline, if needed.

The CoARC encourages you to review the revised Accreditation Policies and Procedures and the Accreditation Standards for Entry into Respiratory Care Professional Practice for further details on these and other changes. Clean copies and marked-up copies are available on our website.

If you are unsure whether your program offers or plans to offer an OCLS, if you have questions about reporting requirements, or regarding this communication, please contact Tom Smalling, Chief Executive Officer, at 817-283-2835 ext. 101.