

THE AFRICAN COUNCIL OF OPTOMETRY

GUIDELINES FOR THE ACCREDITATION OF LOW VISION TRAINING

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1. INTRODUCTION

The African Council of Optometry (AFCO) is a Non-Profit Organization registered as such in South Africa with a registration number 2014/070542/08. The AFCO is a representative body of the Optometric Association in the Sub-Saharan countries with a membership of about 95% of the formalized Associations. The AFCO is one amongst the six Regions of the World Council of Optometry (WCO) and has three representatives at the WCO Board.

The AFCO will partner with Brien Holden Vision Institute (BHVI) in training and upskilling qualified Optometrists in Low Vision. The overall aim of the training programme is to build capacity and create a pool of personnel for the creation of low vision centres.

The AFCO will be responsible for the Accreditation of the training institutions or sites in Africa. This document provides a guideline of how the accreditation will be carried out and the criteria to be used.

2. ACCREDITATION OBJECTIVES

- 1. To develop an Accreditation protocol of the highest standard meeting all the global standards for similar Accreditations.
- 2. To assess the training sites and set the minimum required standards for Low Vision training.
- 3. To agree with the institution to utilize their training sites to train qualifying persons.
- 4. In collaboration with the training institution and the BHVI award Certificates to all those who have complied and completed the training.

3. DURATION OF ACCREDITATION

The Accreditation will be valid for a period of three years and shall be reviewed thereafter. The AFCO may, based on other factors review the Accreditation before the three-year period, in which case the Institution will be informed six months in advance and be provided with the reasons. It is the responsibility of the Institution to notify the AFCO of any material changes which may impact on the Accreditation and/or protocol.

4. ACCREDITATION ROLES AND RESPONSIBILITIES

	AFCO TRAINING IN	NSTITUTION
PRE-EVALUATION	1. The AFCO shall schedule the 1. The i	nstitution shall write a self-review report
	accreditation and communicate the using	the provided template
	same in time to the training institution 2. The	institution shall prepare, label and
	Criteria to be used for accreditation must coher	rently organize a variety of quantitative and
	be made available to institution when the qualit	ative information and portfolio of evidence
	schedule is communicated. for the	e evaluation panel to review during the
	3. Evaluators must be appointed in Evalu	ation. The information and evidence must
	accordance with the approved be co	herent with and support the contents of the
	Guidelines for Accreditation Panel self-re	eview report.
	4. Evaluators must be provided with the 3. The	institution shall draft an evaluation plan
	following documents: detail	ing a schedule to visit clinical training sites
	a. Training Institution Self Review (if var	ious) and the documentation prepared
	Report	
	b. Guidelines for Clinical Training	
	Accreditation	
	c. Any other relevant	
	documentation	
	5. An evaluators meeting must be called	
	prior to the evaluation to discuss the	
	following:	

	a. The institution's Self Review	
	Report	
	b. Plot an Evaluation Plan detailing	
	how the evaluation will be	
	carried out and which member of	
	the panel is responsible for	
	which information and/or	
	criterion	
	c. The envisaged time required to	
	conduct the evaluation	
DURING EVALUATION	1. The panel shall meet and greet the	Meet, greet the Evaluation Panel and introduce
	Staff/Management of the training	the panel to the Staff and Management
	Institution	2. The staff of the Institution shall facilitate
	2. The panel shall confirm the evaluation	execution of the evaluation plan.
	plan	3. The institution shall ensure that all staff and
	3. The panel shall conduct the evaluation	students are available to conduct interviews with
	as per the plan by:	the panel should the panel so wish
	a. Reviewing all documentation	
	prepared	
	b. Requesting more information	
	and portfolio of evidence as	
	·	
	required	

	a Canduat aita visita where	
	c. Conduct site visits where	
	indicated	
	d. Conducting interviews where	
	necessary	
	4. The panel shall close the evaluation with	
	the management of the training	
	institution as follows:	
	a. Thanking the institution of its	
	cooperation and support	
	b. Explaining the processes going	
	forward (as indicated in the Post	
	Evaluation)	
	NB: The Panel must not provide feedback to the	
	Management of the Institution about the	
	outcomes of the evaluation process. Verbal	
	feedback may be misconstrued and interpreted	
	differently from the written feedback and may	
	create a false positive or negative impression.	
POST EVALUATION	1. The panel shall prepare a report and	The Institution shall receive a copy of the draft
	submit the same to the AFCO	accreditation report within a month of the
	2. The AFCO shall prepare a draft	accreditation visit.
	accreditation report and send the same	
	to the institution for factual correctness	

- 3. The AFCO shall determine the accreditation status of the training institution based on the report from the panel and the criteria for determining accreditation status
- 4. The AFCO shall communicate the outcome of the accreditation process and the status of accreditation within 2 weeks of the institution's response to the draft report.
- The AFCO shall monitor the training from time to time to ensure quality if accreditation is granted
- 6. If accreditation is declined or suspended- give the Institution an opportunity to submit and implement a plan of action to address areas of concern with clear timeliness
- 7. Schedule a follow-up evaluation after implementation of the plan.

- The Institution will have two weeks to respond, in writing, to the factual correctness of the draft report.
- The Institutions will be notified of the AFCO's decision within two weeks of responding to the draft report
- 4. If necessary -
 - an institution will submit a Plan of Action within a stipulated time frame;
 - the AFCO will approve the Plan of Action and notify the institution so that the plan can be implemented.

5. ACCREDITATION PANEL

The AFCO is responsible for the selection, appointment and training of accreditation panel members

5.1. Criteria for Appointment of Members of the Accreditation Panel

- 5.1.1. Qualification in the relevant profession.
- 5.1.2. Recognized professional clinical expertise and/or experience in Low Vision.
- 5.1.3. In good professional standing with the relevant Health Professions Council of the country in which they practice, including CPD.
- 5.1.4. Relevant and in-depth knowledge of educational processes.
- 5.1.5. Familiarity with the health and education issues related to national and international trends.

5.2. Nomination of Members of the Accreditation Panel

- 5.2.1. The AFCO may at its sole discretion request members of the profession to nominate eligible and willing candidates to the pool of potential evaluators
- 5.2.2. Nomination must be accompanied by a CV showing:
- 5.2.2.1. How the criteria has been met
- 5.2.2.2. All affiliations with other Higher Education Institutions e.g. previous and current employment; external examiner status; current and previous registration for study.
- 5.2.2.3. Any potential conflict of interest relating to participation in the accreditation process of any Institution.
- 5.2.3. The AFCO shall review all nominations and appoint individuals as evaluators

5.3. Appointment of Accreditation Panel

- 5.3.1. Individuals will be sent a letter notifying them of their appointment as an Evaluator.
- 5.3.2. The individual shall within 2 weeks from date of the appointment letter, indicate her/his acceptance of the appointment/ or decline, in writing.
- 5.3.3. Individuals who have accepted the appointment will constitute the pool of evaluators.

5.3.4. Evaluators will be notified at least two (2) months before the accreditation/evaluation site visit.

5.4. Code of Conduct

- 5.4.1. Evaluators are expected to conduct themselves in accordance with the highest standards of ethical, moral and professional behaviour during all phases of the process.
- 5.4.2. Each evaluator must review, sign the Code of Conduct and submit it together with the written acceptance of the appointment to an Evaluation Panel prior to receiving any documentation from the Institution.
- 5.4.3. Any conflict of interest must be declared in writing prior to finalization of appointment.

6. ACCREDITATION PROCESS WITH TIMELINESS

ACTION	TIMELINESS	RESPONSIBILITY
Develop an evaluation	Six months before site visit	AFCO
schedule		
Call for Evaluation Panel	Five months before site visit	AFCO
Members Nomination		
Appoint Evaluation Panel	Three months before site	AFCO
Members	visit	
Notify Evaluators	Two months before site visit	AFCO
Evaluators Accept or	2 weeks from appointment	Individual Evaluators
Decline Appointment	letter	
Notify Institution of	Three months before site	AFCO
evaluation	visit	
Provide Institution with	Three months before site	AFCO
Criteria	visit	
Send Self-Review Report	Three months before site	Training Institution
and Evaluation Plan	visit	
Review the Training	Two months before site visit	Panel
Institution's Self Review		
Report and Evaluation Plan		

Conduct Evaluation as per	As approved by the AFCO	Panel
the Evaluation Plan		
Draft evaluation report to	2 weeks from evaluation	Panel
AFCO	visit	
Draft accreditation report to	2 weeks from evaluation	AFCO
the Institution	report	
Factual correctness	2 weeks from date of draft	Institution
response to draft report	report	
Determination of	1-week from response of the	AFCO
accreditation status	draft report	
Communication of the	2 weeks from the response	AFCO
accreditation status	of the draft report	
Plan of Action	As required	Institution
Approve Plan of Action	1 week from receipt	AFCO

7. EVALUATION CRITERIA

This section outlines the criteria that will be used to evaluate the low vision training at each institution. Each criterion shall be evaluated in accordance with the items listed under it using the rating below.

The Programme does not meet the minimum	
standard for training of the intended Low Vision	1
Programme.	
The Programme partially meet the minimum	
standard for training of the intended Low Vision	2
Programme.	
The Programme meet the minimum standard for	
training of the intended Low Vision Programme.	3
The Programme exceeds the minimum standard	
for training of the intended Low Vision	4
Programme.	

Further to the rating, each item must have a comment detailing a description, analysis and/or critique.

7.1. Training Programme

ITE	ITEM		COMMENTS
A.	Is the rationale for the development of the Programme including the		
	situational, needs and gap analysis clearly outlined and communicated?		
B.	Are the vision, mission, goals and objectives (short, medium & long term)		
	clearly outlined and communicated?		
C.	Is the programme offered in a manner that is consonant with the vision,		
	mission, goals and objectives of the Programme?		
D.	Is the Programme offered in a manner that is consonant with the global,		
	national and provincial policies and legislation?		
E.	Is the Programme designed and offered in a manner that is consonant with		
	the guidelines, rules, regulations and standards set by the regulatory		
	authority?		
F.	Is the programme offered in a manner that will realise positive impact to		
	society?		
G.	Are there predetermined values of the programme which are socially		
	accountable and aligned with the needs of the society?		
Н.	Is the Programme offered in a manner that is consonant with the Programme		
	outline and outcomes?		
	OVERALL		

7.2. Governance and Management

ITEM		COMMENTS
A. There is a Management structure in place which is responsible for the		
implementation and day to day running of the programme in line with its set		
outline, mission and objectives.		
B. The administrative support structures are adequate for the efficient and		
effective running of the Programme		
C. There are clearly defined administration policies and procedures necessary		
for the effective management of the Programme		
D. There are clear and effective mechanisms for managing and allocating		
resources to the programme		
E. There are oversight structures in place with reporting lines that are clearly		
defined		
F. There are regular staff and management meetings conducted to ensure that		
the standard of the Programme is maintained and monitored at all times.		
G. There is a clearly defined budget as well as budget management mechanisms		
to ensure the sustainability of the programme and the training centre		
H. External Stakeholders engagements are conducted		
OVERALL		

7.3. Staffing

ITI	ITEM		COMMENTS
A.	There are clear, transparent and effective human resource recruitment		
	policies for the Programme.		
B.	There is adequate human resources capacity, both administrative and clinical,		
	for the efficient and effective running of the Programme		
C.	There is a mixture and balance of qualifications to offer the Programme taking		
	into consideration both administrative and teaching responsibilities?		
D.	There are clear and effective mechanisms for human resource allocation to		
	ensure equitable workload and working hours in line with legislation		
E.	The head of the programme and clinical staff have maintained their		
	registration with the HPCSA active and are suitably qualified, with relevant		
	experience in Low Vision		
F.	The clinical staff are competent to offer Programme with regards to teaching		
	and learning as well as assessments		
G.	There is a clear and effective performance management system to manage		
	all staff		
Н.	There are clear mechanisms and strategies in place to develop staff and		
	support them in performing their duties		
I.	There is a staff profile which outlines the names, gender, race, qualification,		
	registration number with the local regulatory body (e.g. Health Professions		

Council of South Africa), role/ duties and experience of each staff member (to	
be attached)	
OVERALL	

7.4. Targeted trainees

ITEM	RATING	COMMENTS
A. There is a recruitment, admission and selection policy available, indicating the		
aims and objectives of the Programme		
B. The intake capacity of the Programme is clearly defined and adhered to		
C. The minimum entry requirements into the Programme are clearly defined,		
communicated and adhered to		
D. Trainees are provided with the Programme Outline with clear outcomes		
OVERALL		

7.5. Training Material

ITEM	RATING	COMMENTS
A. The methods of delivery are clearly defined and adhered to		
B. Training materials are defined and prescribed to Trainees		
C. The Programme content in the materials is aligned with the intended purpose		
of the Programme (goals, objectives & outcomes)		

D. There is a system in place to avail production or procurement of adequate Low	
vision assessment materials and Low vision devices to facilitate student	
training	
OVERALL	

7.6. Training Facilities

ITEM		RATING	COMMENTS
A. The P	rogramme is offered in a suitably equipped and resourced facility with		
the fol	llowing items:		
i.	Chair and Stand		
ii.	Trial Case		
iii.	Trial Frame		
iv.	Low Vision Charts (Near and Distance)		
V.	Slit Lamp		
vi.	Retinoscope		
vii.	Ophthalmoscope		
viii.	Visual Field Analyser/ Tanget Screen		
ix.	70D or 90D lenses		
x.	Low Vision Devices (optical and non-optical)		
xi.	Colour vision test		
xii.	Clinical Consumables		

	xiii.	Computers, internet access and other technological equipment for	
		modern-day teaching and learning	
	xiv.	Adequate space to allow mobility	
B.	There	is adequate staff and student library support in terms of access to	
	curren	t prescribed and recommended literature as well as additional readings.	
C.	There	is adequate staff and student access to information and well-maintained	
	facilitie	es to support the effective delivery of the online elements of the	
	Progra	amme.	
	OVER	ALL	

7.7. Assessments

ITEM	RATING	COMMENTS
A. The criteria for theory and practical assessment is clearly defined, transparent,		
adhered to and readily available		
B. Assessments are consonant with the programme outline (outcomes)		
C. Assessment criteria are regularly reviewed		
OVERALL		

7.8. Quality Assurance

ITEM	RATING	COMMENTS

A.	Are there mechanisms in place to monitor and evaluate the overall impact,	
	relevance and effectiveness of the Programme?	
B.	Teaching and clinical records are well documented, filed and are available	
	when required	
C.	Low vision clinical guidelines, standard operating procedures and or protocols	
	are available and adhered to.	
D.	Documentation and Clinical audits are conducted and recommendations for	
	improvement are made.	
E.	Quality improvement plans based on the programme evaluation and audit	
	findings are developed, implemented and reviewed	
F.	An equipment maintenance plan is available and adhered to	
G.	Infection control protocol is available and adhered to	
	OVERALL	

8. REPORTS AND ACCREDITATION STATUS

8.1. Evaluation Report

- 8.1.1. In preparing the evaluation report, the panel may spend time at the institution consulting the relevant material/information or seeking clarity from staff and students.
- 8.1.2. Each evaluator shall evaluate and analyse the data for his/her allocated areas and contribute to the written report.
- 8.1.3. All statements/ conclusions in the report should be supported with evidence.
- 8.1.4. The panel should compile, consolidate and submit the Evaluation Report (a separate document from the Institution's Self-Review Report) within the specified timeframes

8.2. Accreditation Report

- 8.2.1. The AFCO shall on receipt of a draft evaluation report from the panel, use the same report to prepare an evaluation report without a decision and recommendation.
- 8.2.2. The AFCO shall then send the draft report to the institution for factual correctness.
- 8.2.3. On receipt of the Institution's response to the draft report, the AFCO shall decide in respect of the institution's accreditation using the guidelines below.

8.3. Determining the Accreditation Status

The accreditation status shall be determined using the following guidelines:

OVERALL OUTCOME	DECISION
The Programme meets and/or exceeds the minimum standard for	Full Accreditation
training of the intended Low Vision Programme.	
The Programme partially meet the minimum standard for training	Conditional
of the intended Low Vision Programme.	Accreditation
There are issues of concern within the Programme which can be	
addressed within specified time frames. The AFCO will revisit the	
Institution within those time frames and the Institution shall submit	
progress reports on the issues identified	
The Programme does not meet the minimum standard for training	Accreditation
of the intended Low Vision Programme.	Suspended or
	Declined

9. APPEAL

9.1. Appeal of a Decision by the AFCO

- 9.1.1. The AFCO shall ensure that a decision of deferral, denial, or withdrawal of accreditation is always accompanied by reasons for such a decision detailing the specific criterion the programme failed to meet.
- 9.1.2. The training institution may appeal any accreditation decision within 14 days of receipt of the written decision by notifying the AFCO, in writing, of its intention to appeal the decision.
- 9.1.3. Notice of Intent to Appeal shall be addressed to the Accreditation Administrator and sent via email to secretary@africaoptometry.org and a copy to info@africaoptometry.org
- 9.1.4. Notice of Intent to Appeal shall set out in concise fashion the following:
- 9.1.4.1. The specific grounds on which the appeal is being made
- 9.1.4.2. All the relevant supportive documentation that the program plans to present to the Appeal Panel, demonstrating why the appellant believes that the AFCO's decision is in error and should be reconsidered.
- 9.1.4.3. The specific grounds on which the appeal is being made.
- 9.1.5. Within 30 days of receipt of the written appeal, the AFCO shall forward the original decision, the appeal, and all supportive documentation to an ad hoc appeals panel, appointed by the AFCO's Directors.
- 9.1.6. The ad hoc appeals panel shall be constituted by three members having no affiliation with either the accreditation panel that conducted the accreditation process of the appellant, or the appellant.
- 9.1.7. The appeals panel will consider all evidence and make its recommendation to the AFCO's Directors, who will render a final decision on the appeal.
- 9.1.8. If a Notice of Intent to Appeal is not filed within the fourteen (14) day time period, the training institution will lose the right to appeal.

9.2. Grounds on Appeal

- 9.2.1. A training institution subject to a contested accreditation decision may appeal that decision if it has evidence supporting that:
- 9.2.1.1. the decision was in substantial disregard of the criteria or procedures set out in this document; or
- 9.2.1.2. that the decision was not supported by substantial evidence in the record upon which the decision was based on

- 9.2.2. The program has the burden of proof on appeal.
- 9.2.3. During an appeal, the Ad Hoc Appeals Panel will only consider the record (evidence, documents, and other information) that was before the AFCO when it took the contested accreditation decision.
- 9.2.4. The record on appeal shall include, as applicable, the training institution's appeal document and supporting materials, reports of onsite evaluation teams, decision letters, the training institution's responses to the AFCO's inquiries and actions and other correspondence between the AFCO and the training institution.
- 9.2.5. Accordingly, the appellant may not present to the Appeals Panel any data, information, documents, or other evidence that was not part of the record when the AFCO made the decision from which an appeal was taken, except any information that demonstrates a substantial deviation from the criteria set herein or procedures on the part of the AFCO in making its decision.
- 9.2.6. Accreditation Administrator shall transmit a complete copy of the record on appeal to the three-person Ad Hoc Appeals Panel as soon as the possible after the panel is selected.

9.3. The Ad Hoc Appeal Panel

- 9.3.1. The AFCO shall maintain a list of persons who are qualified to serve on the ad hoc appeals panel as needed. The list shall consist of persons who have a working knowledge about, and experience with the accreditation criteria and procedures used, and shall be subject to the AFCO's conflict of interest policies. The list shall not include any current members of the AFCO's Directors or any previous AFCO Directors or panel members who participated in any aspect of the contested decision.
- 9.3.2. The ad hoc appeals panel shall be constituted by three members, one of which must be the Chair of the panel, elected as such by AFCO Directors
- 9.3.3. Panel members shall meet the following criteria:
- 9.3.3.1. Must have qualification in the relevant profession.
- 9.3.3.2. Must have recognized professional clinical expertise and/or experience in Low Vision.
- 9.3.3.3. In good professional standing with the relevant Health Professions Council of the country in which they practice, including CPD.
- 9.3.3.4. Must be familiar with the health and education issues related to national and international trends is desirable.
- 9.3.4. The names of the proposed Ad Hoc Appeals Panel Chair, the two Appeal Panel Members, and their resumes, shall be forwarded to the named individual who initiated

- the Appeals process within twenty (20) days following receipt of Notice of Intent to Appeal.
- 9.3.5. If the training institution believes that anyone on the Ad Hoc Appeals Panel does not meet the criteria set out in 9.3.3. (above), or is aware of a conflict of interest, the program may declare that individual unqualified or in conflict of interest by notifying the Accreditation Administrator of the same within ten (10) days of receipt of the list of names.

9.4. Ad Hoc Appeals Panel Procedures

- 9.4.1. Once appointed, each member of the Ad Hoc Appeals Panel shall promptly receive, from the Accreditation Administrator, copies of the record on appeal.
- 9.4.2. A list of all materials that comprise the complete record on appeal shall be identified and be made available to the appellant program, and two (2) copies of this record on appeal shall be held in the AFCOs' offices as staff copies.
- 9.4.3. The Ad Hoc Appeals Panel Chair and identified representatives from the appellant program shall establish a mutually agreeable date, time, and location of the Appeal Hearing and shall so notify the Accreditation Administrator in writing thirty (30) days prior to the Hearing date.
- 9.4.4. The Appeal Hearing shall be held within sixty (60) days after the panel is appointed.
- 9.4.5. The Appeal Hearing can be either face-to-face or via teleconference or other electronic means, at the judgment of the appellant.
- 9.4.6. Prior to the Appeal Hearing, members of the Ad Hoc Appeal Panel will be trained by the AFCO's Staff.
- 9.4.7. Topics of training will include, but are not limited to, the appeals process, the relevant policies and procedures, the decision options available to the Appeal Panel, and information about the AFCO's current interpretation of the relevant evaluative criteria.

9.5. Appeal Hearing Procedures

- 9.5.1. The Appeal Hearing shall commence with an opening statement by the Chair of the Ad Hoc Appeals Panel which describes the issues raised on appeal, the applicable standard of review, and the procedures to be followed at the hearing.
- 9.5.2. The appellant program's representative(s), who may include legal counsel, shall then offer oral argument in support of the appeal. The argument shall refer to any facts in the record, or the lack thereof, which demonstrate that AFCO's decision was not supported by substantial evidence on the record but was otherwise arbitrary or the

- result of an abuse of discretion or directly attributable to a failure to follow published procedures.
- 9.5.3. The appellant may request witnesses (e.g. members of the accreditation panel) to attend the hearing. The appellant will pay the expenses of any witness who attends the hearing at its request.
- 9.5.4. The Chair of the AFCO Directors (or his/her designee) and other members of AFCO designated by the Chair shall appear at the Appeal Hearing and may present oral argument in support of the accreditation decision or decision on reconsideration. Copies of the record on appeal will be made available to the Chair of the AFCO Directors or his/her designee.
- 9.5.5. Any member of the Ad Hoc Appeals Panel may question the representative(s) of the training institution or AFCO at any time during the oral argument.
- 9.5.6. The Ad Hoc Appeals Panel may request other witnesses to attend the appeal hearing whom it may also question.
- 9.5.7. The AFCO will pay the expenses of any witnesses who attend the hearing at the request of the Ad Hoc Appeal Panel.
- 9.5.8. At the end of the oral argument and all witness testimony, the Appeal Hearing shall be adjourned.
- 9.5.9. Minutes of the Appeal Hearing shall be recorded and made available to the appellant and the AFCO Directors with the Ad Hoc Appeals Panel Decision.

9.6. Appeal Decisions

- 9.6.1. The Ad Hoc Appeals Panel may uphold the AFCO decision under appeal. In such case, this decision shall be submitted to the AFCO Accreditation Administrator within fifteen (15) days after the hearing. The AFCO Accreditation Administrator will in turn promptly notify the appellant in writing of this decision.
- 9.6.2. An Ad Hoc Appeals Panel decision upholding the decision of AFCO cannot be appealed further.
- 9.6.3. If the Ad Hoc Appeals Panel does not uphold the AFCO decision under appeal, it may amend or reverse the decision and then must remand the proceeding to the AFCO Directors with instructions to conduct further proceedings consistent with the Appeal Panel's decision. In remanding the proceeding to the AFCO Directors, the Ad Hoc Appeals Panel shall expressly state the basis for its conclusion that AFCO's decision was not predicated upon substantial evidence on the record, was otherwise arbitrary and capricious, was an abuse of its discretion, or was directly attributable to AFCO's failure to follow its published procedures. In such case, the AFCO Accreditation

- Administrator will be notified and will in turn notify the program that the decision has been remanded to the AFCO Directors.
- 9.6.4. The AFCO Directors, upon remand from the Ad Hoc Appeals Panel, must accept the Ad Hoc Appeals Panel decision and issue a decision consistent with the Ad Hoc Appeals Panel's decision at its next regularly scheduled meeting. This action shall constitute final action in the matter.

9.7. Expenses of Appeal

- 9.7.1. The expenses incurred in the development and presentation of its appeal shall be borne exclusively by the training institution filing the appeal.
- 9.7.2. The expenses involved in the selection of the Ad Hoc Appeals Panel and arrangements for the location of the hearing shall be borne by the AFCO.
- 9.7.3. All reasonable expenses of the Ad Hoc Appeals Panel members directly associated with the Appeal shall be borne by AFCO.

APPENDICES

APPENDIX A: SELF REVIEW TEMPLATE

The following is a template for the self-review report to be compiled by the Training Institution's following an in-depth self-review. This report should address all areas mentioned in this template. At a minimum, the description, analysis and critique must be included in the self-review report. Each criterion must be evaluated in accordance with the items listed under it using the rating below.

The Programme does not meet the minimum	
standard for training of the intended Low Vision	1
Programme.	
The Programme partially meet the minimum	
standard for training of the intended Low Vision	2
Programme.	
The Programme meet the minimum standard for	
training of the intended Low Vision Programme.	3
The Programme exceeds the minimum standard	
for training of the intended Low Vision	4
Programme.	

Further to the rating, each item must have a comment detailing a description, analysis and/or critique.

1. CURRENT STATUS OF THE PROGRAMME

2. A BRIEF OVERVIEW OF THE RECOMMENDATIONS OF THE PREVIOUS EVALUATION AND HOW THEY HAVE BEEN ADDRESSED.

3. TRAINING PROGRAMME

ITE	ITEM		COMMENTS
a)	Is the rationale for the development of the		
	Programme including the situational, needs		
	and gap analysis clearly outlined and		
	communicated?		
b)	Are the vision, mission, goals and objectives		
	(short, medium & long term) clearly outlined		
	and communicated?		
c)	Is the programme offered in a manner that is		
	consonant with the vision, mission, goals and		
	objectives of the Programme?		
d)	Is the Programme offered in a manner that is		
	consonant with the global, national and		
	provincial policies and legislation?		
e)	Is the Programme designed and offered in a		
	manner that is consonant with the guidelines,		
	rules, regulations and standards set by the		
	regulatory authority?		
f)	Is the programme offered in a manner that		
	will realise positive impact to society?		
g)	Are there predetermined values of the		
	programme which are socially accountable		
	and aligned with the needs of the society?		
h)	Is the Programme offered in a manner that is		
	consonant with the Programme outline and		
	outcomes?		
	OVERALL		

4. GOVERNANCE AND MANAGEMENT

ITE	ITEM		COMMENTS
a)	There is a Management structure in place		
	which is responsible for the implementation		
	and day to day running of the programme in		
	line with its set outline, mission and		
	objectives.		
b)	The administrative support structures are		
	adequate for the efficient and effective		
	running of the Programme		
c)	There are clearly defined administration		
	policies and procedures necessary for the		
	effective management of the Programme		
d)	There are clear and effective mechanisms		
	for managing and allocating resources to the		
	programme		
e)	There are oversight structures in place with		
	reporting lines that are clearly defined		
f)	There are regular staff and management		
	meetings conducted to ensure that the		
	standard of the Programme is maintained		
	and monitored at all times.		
g)	There is a clearly defined budget as well as		
	budget management mechanisms to ensure		
	the sustainability of the programme and the		
	training centre		
h)	External stakeholders engagements are		
	conducted		
	OVERALL		

5. STAFFING

ITEM		RATING	COMMENTS
a)	There are clear, transparent and effective		
	human resource recruitment policies for the		
	Programme.		
b)	There is adequate human resources		
	capacity, both administrative and clinical, for		
	the efficient and effective running of the		
	Programme		
c)	There is a mixture and balance of		
	qualifications to offer the Programme taking		
	into consideration both administrative and		
	teaching responsibilities?		
d)	There are clear and effective mechanisms for		
	human resource allocation to ensure		
	equitable workload and working hours in line		
	with legislation		
e)	The head of the programme and clinical staff		
	have maintained their registration with the		
	HPCSA active and are suitably qualified, with		
	relevant experience in Low Vision		
f)	The clinical staff are competent to offer		
	Programme with regards to teaching and		
	learning as well as assessments		
g)	There is a clear and effective performance		
	management system to manage all staff		
h)	There are clear mechanisms and strategies		
	in place to develop staff and support them in		
	performing their duties		
i)	There is a staff profile which outlines the		
	names, gender, race, qualification, HPCSA		
	registration number, role/ duties and		
	experience of each staff member (to be		
	attached)		
	OVERALL		

6. TARGETED TRAINEES

ITE	ITEM		COMMENTS
a)	There is a recruitment, admission and		
	selection policy available, indicating the aims		
	and objectives of the Programme		
b)	The intake capacity of the Programme is		
	clearly defined and adhered to		
c)	The minimum entry requirements into the		
	Programme are clearly defined,		
	communicated and adhered to		
d)	Trainees are provided with the Programme		
	Outline with clear outcomes		
	OVERALL		

7. TRAINING MATERIAL

ITE	ITEM		COMMENTS
a)	The methods of delivery are clearly defined		
	and adhered to		
b)	Training materials are defined and		
	prescribed to Trainees		
c)	The Programme content in the materials is		
	aligned with the intended purpose of the		
	Programme (goals, objectives & outcomes)		
d)	There is a system in place to avail		
	production or procurement of adequate Low		
	vision assessment materials and Low vision		
	devices to facilitate student training		
	OVERALL		

8. TRAINING FACILITIES

ITEM	RATING	COMMENTS
a) The Programme is offered in a suitably		
equipped and resourced facility with the		
following items:		

	a.	Chair and Stand	
	b.	Trial Case	
	C.	Trial Frame	
	d.	Low Vision Charts (Near and Distance)	
	e.	Slit Lamp	
	f.	Retinoscope	
	g.	Ophthalmoscope	
	h.	Visual Field Analyser/ Tanget Screen	
	i.	70D or 90D lenses	
	j.	Low Vision Devices (optical and non-	
		optical)	
	k.	Colour vision test	
	I.	Clinical Consumables	
	m.	Computers, internet access and other	
		technological equipment for modern-	
		day teaching and learning	
	n.	Adequate space to allow mobility	
b)	There	is adequate staff and student library	
	suppo	rt in terms of access to current	
	prescr	ibed and recommended literature as well	
	as add	litional readings.	
c)	There	is adequate staff and student access to	
	inform	ation and well-maintained facilities to	
	suppo	rt the effective delivery of the online	
	eleme	nts of the Programme.	
	OVER	ALL	

9. ASSESSMENTS

ITEM	RATING	COMMENTS
a) The criteria for theory and practical		
assessment is clearly defined, transparent,		
adhered to and readily available		
b) Assessments are consonant with the		
programme outline (outcomes)		
c) Assessment criteria are regularly reviewed		

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OVERALL	

10. QUALITY ASSURANCE

ITEM		RATING	COMMENTS
a)	Are there mechanisms in place to monitor		
	and evaluate the overall impact, relevance		
	and effectiveness of the Programme?		
b)	Teaching and clinical records are well		
	documented, filed and are available when		
	required		
c)	Low vision clinical guidelines, standard		
	operating procedures and or protocols are		
	available and adhered to.		
d)	Documentation and Clinical audits are		
	conducted and recommendations for		
	improvement are made.		
e)	Quality improvement plans based on the		
	programme evaluation and audit findings are		
	developed, implemented and reviewed		
f)	An equipment maintenance plan is available		
	and adhered to		
g)	Infection control protocol is available and		
	adhered to		
	OVERALL		

APPENDIX B: EVALUATION REPORT TEMPLATE

- 1. INTRODUCTION
- 2. ACCREDITATION PROCESS
- 3. CRITERIA
- 4. DOCUMENTS PRESENTED
- 5. INTERVIEWS CONDUCTED
- 6. RECOMMENDED ACCREDITATION STATUS
- 7. DETAILED FINDINGS
- 8. RECOMMENDATIONS

APPENDIX C: CODE OF CONDUCT FOR EVALUATORS

Code of Conduct for Evaluators

Signature

Evaluators are expected to conduct themselves in accordance with the highest standards of
ethical, moral and professional behaviour during all phases of the process. To that regard
each evaluator must agree to conduct him/herself in accordance with this Code of Conduct.

l _	(name) agree to be appointed as an Evaluator			
for	and further agree to conduct myself in accordance with terms			
sp	ecified herein.			
la	gree to:			
1.	uphold and conduct myself in accordance with the highest standards of ethical, moral and			
	professional behaviour always.			
2.	treat peers, staff and students at the institution, and the AFCO with courtesy and respect.			
3.	Exercise punctuality always.			
4.	Maintain strictest confidentiality.			
5.	Conduct the evaluation in an objective, fair and impartial manner.			
6.	Evaluate the programme on its merits and in accordance with the set criteria			
7.	Refrain from offering advice to the programme/institution.			
8.	Recuse myself in the event of a conflict of interest.			
9.	not discuss the report directly with the institution			
Się	gned at on the (day) of (month) 20			

NB: The signed code of conduct must be submitted to the AFCO together with the written acceptance of the appointment to an Evaluation Panel – prior to receiving any further documentation from the AFCO or Training Institution.

Date