



Accreditation and Approval Review Committee  
on Education in Human Lactation and Breastfeeding  
2501 Aerial Center Pkwy, Suite 103, Morrisville, North Carolina 27560 USA  
info@aarclactation.org • www.aarclactation.org

## Accreditation Procedures for Lactation Consultant Education Programs

The Accreditation and Approval Review Committee (AARC) on Education in Human Lactation and Breastfeeding

- cooperates with the Commission on Accreditation of Allied Health Education Programs (CAAHEP) in the accreditation of educational programs in lactation consultancy.
- evaluates educational programs in relation to their compliance with the published *Standards and Guidelines for Lactation Consultant Educational Programs*.
- formulates an appropriate accreditation recommendation following its evaluation of a Self-Study Report (SSR) and a site visit of the program.
- forwards the accreditation recommendation to CAAHEP for final consideration and action.

### SECTION A: CONDUCTING THE ACCREDITATION REVIEW

#### 1. THE SPONSORING INSTITUTION

The accreditation process begins when an institution indicates that it wishes to seek CAAHEP accreditation of its program. The institution must meet the established criteria for a sponsoring institution. CAAHEP requires institutions applying for the accreditation of health science educational programs to be institutionally accredited by a recognized accrediting body or by a body otherwise acceptable to CAAHEP. CAAHEP may accredit postsecondary programs sponsored by a consortium. The primary responsibility of the sponsoring institution or consortium is to: provide the academic, didactic and clinical education experiences of its students; appoint qualified faculty; ensure financial support necessary for meeting commitments to matriculating and accepted students; select students; and graduate students from the program.

#### 2. APPLYING FOR INITIAL OR CONTINUING ACCREDITATION

Accreditation by CAAHEP is a voluntary process, and evaluation of a Lactation Consultant Program is undertaken only with specific authorization from the Chief Executive Officer of its sponsoring institution. The first step in applying for accreditation is submission of the CAAHEP Request for Accreditation Services, signed by the Chief Executive Officer of the sponsoring institution and the Program Director, and application fee to the Accreditation and Approval Review Committee (AARC) on Education in Human Lactation and Breastfeeding. AARC will then send accreditation materials to the program to begin the program's self-study process.

### 3. CONDUCTING A SELF-STUDY

The institution conducts an internal review, analysis and assessment of the entire range of educational operations, including ancillary services that contribute to accomplishing objectives.

- a. The review is conducted by program faculty with input from administrators, students, employers of graduates, and others identifiable as representing the “broad community of interests.”
- b. In addition to providing insights to the institution for self-improvement, the Self-Study Report (SSR) forms the basis for an on-site review conducted by a team of AARC site visitor.

### 4. SUBMITTING THE SELF-STUDY REPORT (SSR)

A Self-Study Report is required of programs requesting accreditation by CAAHEP. The SSR and fee are submitted to AARC. Although a self-study is comprehensive, the Self-Study Report need contain only enough documentation to substantiate compliance with the Standards. The report must contain a qualitative self-analysis summary based on application of the Standards and conclude with changes anticipated to strengthen the program. Specific instructions for preparing the Self-Study Report are contained in the “Guide to the Self-Study Report” and the format follows the sequence of the *Standards and Guidelines for Lactation Consultant Educational Programs*. Some sections contain blanks to be filled in and boxes to check. Other sections will require narrative reports and supporting documents.

### 5. SCHEDULING AN ON-SITE REVIEW

The Self-Study Report is supplied to a team of site visitors well in advance of the on-site review to allow for a thorough understanding of the program. After the Self-Study Report has been evaluated, a site visit is scheduled for a mutually convenient time. Prospective site visitors receive orientation training and materials which stress objectivity, impartiality and confidentiality. The site visit team will include two to four visitors for any given on-site review.

### 6. CONDUCTING THE ON-SITE REVIEW

The site visitor team gathers data on which AARC can evaluate the program’s compliance with AARC Standards and renders their findings to AARC. Team members are involved in the following activities:

- a. Prepare for the on-site review by studying the Self-Study Report in conjunction with the Standards and AARC instructions.
- b. Meet on-site to review the facilities to be visited, the individuals to be interviewed, the reports and records to be seen and additional information to be collected.
- c. Interview individuals and groups, such as the Chief Executive Officer of the sponsoring institution, the administrator(s) of the educational program, instructors, students, graduates, support personnel, and employers.

- d. Meet to analyze the results of the on-site review and to conduct a summation conference with the institution to clarify findings and report on strengths and deficiencies of the program.
- e. Prepare and submit an On-Site Review Report (OSRR) to AARC.

#### 7. PROVIDING ON-SITE REVIEW REPORT(S) TO THE INSTITUTION

Subsequent to the site visit, AARC sends the On-Site Review Report (OSRR) to the institution and the program for the opportunity to comment on any possible factual inaccuracies. A response to AARC is required from the institution within 14 days of receipt either agreeing with the report or identifying inaccuracies with supporting documentation. The program's response to the report of findings shall be taken into consideration when determining an accreditation action recommendation.

#### 8. CONDUCTING JOINT SITE SURVEYS

CAAHEP-accredited institutions that sponsor more than one allied health program are encouraged to request coordinated or concurrent site visits. Committees on accreditation participate in joint surveys, unless such cooperation is deleterious to a program. CAAHEP cooperates with coordinated on-site visits between its committees on accreditation and other nationally recognized accrediting agencies. AARC may conduct coordinated or concurrent visits with regional agencies, provided that all applicable CAAHEP policies and procedures are observed, that the integrity of the Standards is preserved, and that the confidentiality of all information obtained is maintained. CAAHEP acknowledges that regional agencies have the prerogative of sending representatives to observe any site visit conducted within their jurisdiction. Official agreements by AARC with a regional accrediting agency for coordinated or concurrent visits will be reviewed by the CAAHEP Board of Directors.

#### 9. CONFIDENTIALITY IN THE ACCREDITATION PROCESS

Efforts are made by all accreditation personnel in the peer review process to maintain confidentiality in the processing of information collected during the entire accreditation review. Printed materials, such as the Request for Accreditation Services, Self-Study Report, and Site Visit Report, are to be read only by members of the visiting team, the review committee, CAAHEP, and other authorized persons. CAAHEP considers all supporting documentation and reports to be the property of the sponsoring institution.

#### 10. FEES FOR ACCREDITATION SERVICES

Accreditation fees underwrite a major portion of the expenses incurred by AARC for accreditation services. All checks for these fees should be made payable to AARC and sent to 2501 Aerial Center Parkway, Suite 103, Morrisville, North Carolina 27560 USA.

##### a. Fees associated with Initial Accreditation

##### 1) Registration Fee - \$400

A nonrefundable \$400 registration fee is due with submission of the CAAHEP Request for Accreditation Services (RAS) form. It covers establishing and updating the program record/file and AARC assistance with

accreditation questions and preparation of the SSR. Following AARC's receipt of the completed RAS form and the required information, the program will be notified about proceeding with the accreditation process.

2) Self-Study Report Fee - \$1000

A \$1000 fee must accompany submission of the Self-Study Report (SSR). The fee covers processing, reviewing, and commenting on the SSR as well as administrative costs of scheduling, reviewing and commenting on the site visit. The SSR and fee are sent to: 2501 Aerial Center Parkway, Suite 103, Morrisville, North Carolina 27560 USA.

3) Site Visit Fee - \$1800

Institutions are responsible for \$1800 toward costs incurred by the site visitors in conducting the on-site review. This fee is due 2 months prior to the scheduled site visit. If the actual costs for the site visit exceed \$1950, the additional amount over the initial \$1800 will be charged and an invoice for that amount will be sent to the institution.

b. Fees associated with Annual Accreditation

1) Annual Accreditation Services Fee - \$800

After accreditation has been obtained, an annual accreditation fee of \$800 is due each January 31<sup>st</sup>. The annual fee covers maintaining accreditation and processing the annual report, as well as processing other changes that may occur regarding the institution's accreditation.

Invoices for Annual Accreditation Services Fees will be distributed to programs by e-mail and postal mail by no later than December 1st of each year and will be due by January 31st of the following year. The invoices will be addressed to the Program Director and the Billing Contact as designated in the most recent Report of Current Status (RCS).

2) Annual Accreditation Services Late Fee – 10% of overdue fee

A late fee is assessed for Annual Accreditation Services fees received after the stated deadlines as described in the overdue notice.

First Overdue Notice: Programs that have not paid the fee by the due date will be sent an overdue notice requesting payment within 30 days. They are subject to a late processing fee of ten percent (10%) of the overdue accreditation fee amount.

Second Overdue Notice: Programs that have not responded by the due date and satisfied in full the amount designated in the first overdue notice will be sent a second notice by traceable shipping method requesting payment within 30 days. They are subject to an additional ten percent (10%) late processing fee and may be recommended to CAAHEP for Administrative Probation.

Third Overdue Notice: Programs that have not responded by the deadline and satisfied in full the amount designated in the second overdue notice will receive a third and final notice requesting immediate full payment with an additional ten percent (10%) late processing fee. The program may be subject to a recommendation of Withdrawal of Accreditation.

- c. Annual Sponsoring Institution Fee
  - 1) A separate Annual Sponsoring Institution Fee is invoiced by CAAHEP for payment by July 1.
  - 2) Based on the month in which CAAHEP awards Initial Accreditation, programs will be invoiced for accreditation services for the remainder of the calendar year prorated on a quarterly basis as follows:  
January=75%; March/May=50%; July=25%; after July=0%.

## **SECTION B: DETERMINING THE ACCREDITATION AWARD**

### **1. FORMULATING THE ACCREDITATION RECOMMENDATION**

AARC evaluates the degree of the program's compliance with the Standards by studying the application documents, the Self-Study Report, and the On-Site Review Report, accompanied by appropriate documentation. An accreditation recommendation is then formulated and forwarded to CAAHEP for final consideration and action.

### **2. RECONSIDERATION OF THE ACCREDITATION RECOMMENDATION**

Should AARC submit an adverse recommendation of *Withhold*, *Involuntary Withdrawal*, or *Probationary Accreditation*, the program is informed in writing, by traceable shipping method, of areas that are deficient and what modifications are required to bring the program into compliance with the Standards. The program is given an opportunity to request reconsideration of the pending recommendation. A decision by CAAHEP for *Withhold of Accreditation* or *Withdrawal of Accreditation* shall be final unless a written request to appeal the decision is received by CAAHEP within thirty (30) days following the mailing of CAAHEP's notice to the sponsoring institution of its action.

### **3. ANNUAL REPORT OF CURRENT STATUS**

Accredited programs are required to file an annual on-line Report of Current Status (RCS) with AARC. AARC reviews the report and engages in an accreditation dialogue commensurate with the performance of the program.

- a. Program information updated in the report includes: major changes in the program during the year, including adding or deleting clinical affiliates; outcomes assessment data; analysis and action plan to improve sub-threshold performance on outcome assessments.
- b. In the case of sub-threshold performance (number, magnitude, and duration), AARC may request Progress Report(s) and other documentation as part of the accreditation dialogue.

- c. Continued sub-threshold performance may result in an adverse accreditation recommendation to CAAHEP.
4. NOTIFICATION OF CHANGES IN KEY PERSONNEL

A change of Program Director must be reported to AARC within ten business days. A current curriculum vitae documenting the qualifications (see Standards III.B.) of the person assuming the position and a letter of acceptance of the position must be included. The sponsoring institution will be advised when the change in the official listing has been made.
5. PUBLICATION OF ACCREDITED PROGRAMS

CAAHEP lists all accredited programs on its web site ([www.caahep.org](http://www.caahep.org)). AARC provides a link to the CAAHEP site at its web site ([www.aarclactation.org](http://www.aarclactation.org)).

## **SECTION C: STATUS OF ACCREDITATION**

1. INITIAL ACCREDITATION

Initial Accreditation is the first status of accreditation granted to a program that has demonstrated substantial compliance with CAAHEP Standards. Initial accreditation is for a period of five years. At the end of Initial Accreditation, the program may be recommended for Continuing Accreditation or Probationary Accreditation. If no such recommendation is forthcoming, the Initial Accreditation will automatically expire. A program may request reconsideration of an AARC decision to allow Initial Accreditation to expire. However, the AARC's final decision is not appealable.
2. CONTINUING ACCREDITATION

Continuing Accreditation is granted when a program is in substantial compliance with the accreditation *Standards* and remains in effect until due process has demonstrated cause for its withdrawal.
3. PROBATIONARY ACCREDITATION

Probationary Accreditation is a temporary status of accreditation granted when a program does not continue to meet accreditation *Standards* but should be able to meet them within the specified time.
4. WITHHOLD OF ACCREDITATION

Withhold of Accreditation is conferred when a program seeking initial accreditation is not in compliance with the accreditation *Standards*.
5. WITHDRAWAL OF ACCREDITATION – INVOLUNTARY

Involuntary Withdrawal of Accreditation is conferred when a program is no longer in compliance with the accreditation *Standards*.
6. WITHDRAWAL OF ACCREDITATION – VOLUNTARY

Voluntary Withdrawal of Accreditation is granted when a sponsoring institution requests that its program(s) be removed from CAAHEP.

A sponsor may request voluntary withdrawal of accreditation from CAAHEP or of an application for accreditation at any time in writing by the Chief Executive Officer or an officially designated representative of the sponsor. The letter must include: last date of student enrollment, desired effective date of the voluntary withdrawal, and location where all records will be kept for students who have completed the program

## 7. INACTIVE STATUS

Inactive Status may be conferred if the sponsor requests inactive status for a program. The request must be submitted in writing by the Chief Executive Officer or an officially designated representative or the sponsor to CAAHEP indicating the desired date to become inactive.

- a. The program is not allowed to be advertised as CAAHEP-accredited during the time period in which the program is on inactive status. The sponsor must continue to pay all required fees to the AARC and CAAHEP to maintain its accreditation status.
- b. To reactivate the program the Chief Executive Officer or an officially designated representative of the sponsor must notify CAAHEP of its intent to do so in writing to both CAAHEP and AARC. The sponsor will be notified by AARC of additional requirements, if any, that must be met to restore active status.
- c. The maximum period for inactive status is two years. If the sponsor has not notified CAAHEP of its intent to re-activate a program by the end of the two-year period, CAAHEP will consider this a "Voluntary Withdrawal of Accreditation."

## 8. ADMINISTRATIVE PROBATION

Administrative Probation may be conferred when the program does not comply with one or more of the administrative requirements for maintaining accreditation (see Standards and Guidelines, Appendix A, Section A.3), which include:

- a. Informing AARC and CAAHEP within a reasonable period of time (as defined by AARC and CAAHEP policies) of changes in Chief Executive Officer, dean of health professions or equivalent position, and required program personnel such as program director and/or medical director.
- b. Informing CAAHEP and AARC of its intent to transfer program sponsorship. To begin the process for a Transfer of Sponsorship, the current sponsor must submit a letter (signed by the CEO or designated individual) to CAAHEP and AARC that it is relinquishing its sponsorship of the program. Additionally, the new sponsor must submit a "Request for Transfer of Sponsorship Services" form. AARC has the discretion of requesting a new Self Study Report with or without an on-site review. Applying for a transfer of sponsorship does not guarantee that the transfer of accreditation will be granted.

- c. Promptly informing CAAHEP and AARC of any adverse decision affecting its accreditation by recognized institutional accrediting agencies and/or state agencies (or their equivalent).
- d. Agreeing to comprehensive reviews as scheduled by AARC in accordance with its policies and procedures. The time between comprehensive reviews is determined by AARC and based on the program's on-going compliance with the Standards; however, all programs must undergo a comprehensive review at least once every ten years.
- e. Paying AARC and CAAHEP fees within a reasonable period of time, as determined by the AARC and CAAHEP.
- f. Filing all reports in a timely manner (e.g., Self-Study Report, progress reports, and annual reports) in accordance with AARC policy.
- g. Agreeing to a reasonable on-site review date that provides sufficient time for CAAHEP to act on an AARC accreditation recommendation prior to the next comprehensive review period as designated by CAAHEP, or a reasonable date otherwise designated by AARC.