



Commission for
International Simulation Accreditation
(CISA)

**International Accrediting Organizations
Commissioning Companion Document**

2025 CISA Commissioning
Guidelines Draft

This Companion Document is designed to help you understand the Society for Simulation in Healthcare's (SSH's) Commissioning of International Accrediting Organization (IAO) standards and processes. Primarily, it serves these purposes:

1. Provide insight and information for International Accrediting Organization (IAO) Applicants.
2. Explain and describe the types of evidence expected to meet each Commissioning Guideline.
3. Ensure clarity for what should be provided before the site visit as part of the accreditation packet.

IMPORTANT: The SSH Commission for International Simulation Accreditation (CISA) Commissioning Standards are designed to allow IAOs to commission individual simulation programs.

Should you have any questions about any of the Standards or criteria or feel that they do not fit your IAO for any reason (e.g., cultural), please contact SSH Accreditation at accreditation@ssih.org to discuss your organization's unique resources and needs. -

DOCUMENT ELEMENTS

The standards for each area are broken into different elements:

<ul style="list-style-type: none"> ▪ Commissioning Area Description (in the dark green area) - High-level description of the overall content in the area of Commissioning 	
<p>1. Section header (boldfaced type with a number in the light green area)</p> <ul style="list-style-type: none"> - The title for the section that groups items. 	
<p><i>a. Standard statement (italicized with a lower-case letter in the light green area)</i></p> <ul style="list-style-type: none"> - This is the Standard. Evidence should be provided based on the criteria in the subsections below it. 	
<p>i. Criterion (items listed in the white area in the left column of the table)</p> <ul style="list-style-type: none"> - These items must be provided to demonstrate that the applicant meets the commission guideline. 	<ul style="list-style-type: none"> ▪ The column (in the white area) to the right side of the criterion is where the IAO can find information about the intent of specific criteria and examples, clarifications, and descriptive information that will help the IAO respond to each commission guideline.

TERMINOLOGY

- **DEMONSTRATE:** This term is consistently used for overall Commissioning Guidelines. "Demonstrate" means the IAO must show how the Standard is met (through the criterion). There are often many ways to demonstrate meeting individual criteria.
- **DESCRIBE:** This term indicates that a narrative is sufficient evidence to meet a particular criterion. If documentation is requested in addition to the description, the criterion will specify the following phrase: "*Describe and provide supporting documentation.*"
- **DOCUMENT:** This term indicates that some documentation must be provided as evidence to meet a particular criterion. Examples could include a list of items such as equipment, a policy, a procedure, a floor plan, simulation design forms, etc. If a description is required in addition to the requested documentation, the criterion will specify the following phrase: "*Describe and provide supporting documentation.*"
- **INTERNATIONAL ACCREDITING ORGANIZATION (IAO):** Entity or organization accredited by the SSH to provide accreditation services in countries or international regions agreed to through a memorandum of understanding between SSH and the organization.
- **PROGRAM:** The term "Program" refers to the individual simulation centers or organizations applying for Accreditation through an accrediting body (either an IAO or directly through SSH). The Program could refer to a stand-alone facility or a collaborative simulation consortium, or the Program could be part of an overarching organization.
- **IAO DIRECTOR:** The person with primary authority and responsibility for managing and coordinating the mission, vision, and activities of an International Accrediting Organization. More than one person might fill this role.
- **DIRECTOR:** All SSH Commissioning Guidelines use the term "Director" to describe the person with primary authority for the IAO. However, the person in this role does not need to have the official title of "Director."
- **PROGRAM REVIEWER:** A person who has been given the responsibility of reviewing the application and conducting a site review (either in person or virtually) for an individual simulation Program.
- **INDIVIDUAL SIMULATION PROGRAM (ISP):** Any simulation program that wishes to seek Accreditation through the IAO process and SSH Accreditation Standards.
- **IAO STAFF:** A person employed by the IAO to support the organization's continuing operations.
- **VOLUNTEER:** This term may apply to anyone who supports the IAO who is not a paid staff member, including Accreditation Council members, Board of Review members, and Site Reviewers.

COMMISSION FOR INTERNATIONAL SIMULATION ACCREDITATION COMMISSIONING GUIDELINES

CISA Commissioning Guidelines are the fundamental structural and operational standards that all IAOs must meet.

The five sections of CISA Standards are:

(1) Mission and Governance, (2) IAO Management, (3) Human Resources, (4) ISP Application Process, and (5) Quality Improvement

1. MISSION AND GOVERNANCE

a. The IAO has a clearly stated mission and vision statement that specifically addresses the intent and functions of the IAO.

1.a.i. Document: Provide the mission and vision statement(s) for the IAO.

- Provide the IAO's mission and vision, which may differ from the associated society.
- The IAO and the overarching simulation society will have similar missions and visions; however, the IAO's function within the simulation society will differ from the larger simulation society's reach. Therefore, the IAO's mission and vision must focus on the accreditation process for Individual Simulation Programs within their designated region.
- SSH example:
 - The Society for Simulation in Healthcare serves our members by fostering education, professional development, and the advancement of research and innovation. Promotes the profession of healthcare simulation through standards and ethics. Champions healthcare simulation through advocating, sharing, facilitating, and collaborating.
- SSH Accreditation example:
 - Our vision is "To lead in facilitating global excellence in modeling and simulation through accrediting healthcare simulation Programs that support patient safety and quality improvement."
 - To achieve this, the mission is "To perform systematic reviews of Program compliance with established Core Standards, and Standards in the areas of Assessment, Research, Teaching/Education, Systems Integration, and Fellowship Program (ARTSF)."
- A mission statement is a present-based statement of purpose for the IAO, the IAO's reason for existing. The reason usually includes a description of their reason for existing, impact, and methods used to make the change (simulation, research, assessment, etc.). The mission statement should guide the actions of the IAO and related decision-making.
- A vision statement is a future-based statement that declares the IAO's long-term goals.

1.a.ii. Provide supporting documentation that the IAO's mission and vision statement are publicly displayed.	<ul style="list-style-type: none"> ▪ Reviewers will seek evidence that the IAO's mission and vision are publicly available on the associated society's webpage, including a link to the SSH Accreditation page.
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1.b. The IAO has an identified relationship with its affiliated/sponsoring simulation society.

1.b.i. Describe the governance structure, including names and roles of individuals from the simulation society who will provide oversight and advisory functions to the IAO.	<ul style="list-style-type: none"> ▪ This purpose of this criterion is to provide a narrative description of the individual or governing body's purpose, responsibilities, membership, and frequency of meetings. The IAO should provide enough detail to ensure reviewers clearly understand how the organization works. ▪
1.b.ii. Describe the process by which the governance structure provides oversight and reviews/approves the activities of the IAO.	<ul style="list-style-type: none"> ▪ The IAO should describe how it reports to an individual and group above the level of the Director. The narrative should include how the governance structure's process provides high-level leadership and guidance for activities. This governing or oversight body should link directly to the associated simulation society. ▪ The response to the criterion may include (but is not limited to): <ul style="list-style-type: none"> – How does the governance structure operate, and what is its relationship to the IAO? – How are decisions made regarding activities and resource allocation? – Who has what authority? (Does the group make a budget, strategic planning, and priority decisions?)

1.c. The IAO has a written strategic plan to accomplish its mission and vision.

1.c.i. Describe the process for strategic planning.	<ul style="list-style-type: none"> ▪ Describe how the strategic plan is drafted, reviewed, and approved. ▪ Include the primary person(s) responsible for strategic planning and plan development.
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<p>1.c.ii. Document: Provide the current written strategic plan, including the goals for the next three to five years and how they will be achieved.</p>	<ul style="list-style-type: none"> ▪ This criterion can be met by submitting an official business plan, strategic plan, or operational plan that includes future goals for the IAO. ▪ The goals should be specific to the IAO but should reflect how the IAO goals align with those of the society. ▪ The Strategic/Business Plan should include a discussion of the anticipated trends (short-term and long-term) over the three to five (3-5) years. Items that may be considered include (but are not limited to): <ul style="list-style-type: none"> – Types of Programs the IAO expects to accredit. – Geographical locations of Programs – The number of Programs the IAO expects to accredit (Is the volume increasing or decreasing?) – Need for administrative staff, reviewers, volunteers, trainers, and oversight. – Equipment or specific technologies needed to operationalize the accreditation process (e.g., computers, software, systems) – The adaptability of the IAO towards organizational priorities – Anticipated revenue and expenditures associated with IAO
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<p>2. IAO MANAGEMENT <i>a. The IAO has an organizational structure that provides competent oversight of accreditation activities.</i></p>	
<p>2.a.i. Describe and provide supporting documentation for the IAO's organizational structure.</p>	<ul style="list-style-type: none"> ▪ This criterion intends to demonstrate the structure of the IAO. ▪ A narrative description should describe how the IAO is structured, including its link to the associated society. ▪ The IAO's organizational should include all personnel/staff/volunteers with dedicated time provided to the operations. ▪ Examples could include (but are not limited to): <ul style="list-style-type: none"> – Administrators/Staff – Leadership Council members – Board of Review members ▪ The narrative should include information on how the IAO is linked to the sponsoring Society.

2.a.ii. Describe the process for internal oversight and coordination of accreditation activities within the IAO.	<ul style="list-style-type: none"> ▪ Describe the internal oversight and coordination of the IAO's operations. <ul style="list-style-type: none"> – Who is making decisions regarding IAO activity? – How are decisions made regarding IAO activity and resources?
2.a.iii. Describe and provide supporting documents for the methods used to update the staff on accreditation activities and IAO operations.	<ul style="list-style-type: none"> ▪ Describe the specific methods of communication used. These may include in-person or virtual meetings, in-person or virtual huddles, emails, etc. ▪ Describe and provide examples of how IAO staff are made aware of activities and operations at a frequency that supports the needs. This may include regular staff meetings, ad hoc meetings, special training sessions, email communications, newsletters, Society website updates, etc.

2.b. The IAO has a management structure to support and govern its accreditation operations.

2.b.i. Describe how the IAO Accreditation Council supports and provides oversight for the strategic direction.	<ul style="list-style-type: none"> ▪ Provide a detailed description of the Accreditation Council ▪ Specifically address: <ul style="list-style-type: none"> ○ How it provides oversight of the accreditation process. ○ How decisions are made.
2.b.ii. Describe and document the composition of the IAO's Accreditation Council.	<ul style="list-style-type: none"> ▪ Council membership should include at least three (3) members and maintain an odd number for voting purposes. ▪ Describe the eligibility criteria for council members to include a variety of health professionals. ▪ Describe the process for how council members are selected and identify term limits (including a reselection process) to demonstrate the balance of integrating new members and the sustainability of members over time. ▪ Provide a list of current council members to include their start and end date of service. ▪ Provide a biosketch for each council member, including their qualifications, backgrounds, and any declarations of conflicts of interest. ▪ Identify the process to disclose conflicts that could compromise objectivity and influence the decision-making of council members.
2.b.iii. Document the policies and procedures to ensure transparency, accountability, and impartial decision-making within the accreditation council.	<ul style="list-style-type: none"> ▪ Provide documentation of the policies and procedures in place to ensure transparency, accountability, and impartial decision-making. ▪ Include the following policies and procedures: <ul style="list-style-type: none"> – Standing Rules for Accreditation Council Meetings – Confidentiality Policy for Council Members – Management of Accreditation Program Data

2.c. The IAO has a Board of Review to support and determine applicant accreditation status.

<p>2.c.i. Describe and document the function of the IAO Board of Review.</p>	<ul style="list-style-type: none"> ▪ Describe the role and responsibility of the Board of Review in making decisions on the accreditation status of individual simulation program applicants. ▪ Describe the process to ensure consistent review criteria with the approved Accreditation standards. ▪ Describe the transparent and fair procedures the Board of Review established for conducting reviews and appeals of decisions.
<p>2.c.ii. Describe and document the composition of the IAO Board of Review.</p>	<ul style="list-style-type: none"> ▪ Describe the eligibility requirements for Board of Review members. ▪ Describe the process for selecting Board of Review members. ▪ Identify term limits and reselection process for Board of Review members to demonstrate the balance of integrating new members and the sustainability of members over time. ▪ Provide a list and biosketch for each Board of Review member, including their qualifications, backgrounds, start and end date of service, and any declarations of conflicts of interest.
<p>2.c.iii. Document the policies and procedures to ensure transparency, accountability, and impartial decision-making within the IAO Board of Review.</p>	<ul style="list-style-type: none"> – Provide documentation of the policies and procedures in place to ensure transparency, accountability, and impartial decision-making. – Include the following policies and procedures: – Standing Rules for Board of Review Meetings <ul style="list-style-type: none"> ○ <i>The Board of Review should include a minimum of 3 members and should maintain an odd number for voting purposes.</i> ○ <i>An IAO staff member is required for all Board of Review activities and should be an ex officio (non-voting) member of the Board of Review.</i> – Confidentiality Policy for Board of Review Members – Review and appeals of decisions

2.d. The IAO has adequate financial resources to support its mission and vision.

2.d.i. Describe and provide supporting documentation for the IAO's operational budget process.	<ul style="list-style-type: none"> ▪ Describe the processes for creating, distributing, reviewing, and approving the IAO's funding. ▪ Provide documentation of the current and projected budget for the IAO. ▪ Expenses should include salaries, capital items, and operational costs for a projected 2-year period.
2.d.ii. Provide the IAO's fee schedule	<ul style="list-style-type: none"> ▪ The fee schedule should be listed publicly. ▪ The fee schedule should include fees for application, initial and annual Accreditation, and any other fees related to the process of Accreditation (i.e., honorariums to site review teams, etc.).
2.d.iii. Describe the IAO's financial sustainability	<ul style="list-style-type: none"> ▪ Describe any current and future challenges for financial sustainability. ▪ Describe how the IAO will address anticipated shifts in operating and capital funds sources over the next three to five years.

2.e. The IAO has specific policies and procedures to ensure the organization provides quality services and meets its obligations and commitments.

2.e.i. Provide policies and procedures utilized by the IAO. These should include, at minimum, the policies and procedures listed in the CISA Policy Appendix	<ul style="list-style-type: none"> ▪ This criterion ensures the IAO has essential policies and procedures. ▪ The IAO's Policy and Procedure Manual should be: <ul style="list-style-type: none"> – Organized – Indexed – Complete – Coherent – Approved and finalized – Reviewed regularly to ensure alignment with evolving standards and best practices. ▪ Each policy and procedure should address the following: <ul style="list-style-type: none"> – Summary & Purpose – Definitions – Policy/procedure – Scope – Compliance – Related policies/supporting documentation
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3. HUMAN RESOURCES

a. The IAO is directed by a qualified individual with appropriate authority and time to achieve the IAO's mission.

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3.a.i. Provide the IAO Director's job description and supporting documentation.

- The job description should include roles and responsibilities.
- An internal list of roles and responsibilities is appropriate if a formal human resources (HR) job description does not exist.

3.a.ii. Provide documentation identifying the credentials of the IAO Director.

- Please provide at least one of the following documents:
 - SSH Biosketch
 - Curriculum vitae
 - Resume

3.a.iii. Describe how the IAO Director has the authority for the operations of the IAO.

- Provide a narrative description of how the Director has the authority over the daily operations of the IAO and impacts the strategic direction of the IAO.

3.a.iv. Describe and provide supporting documentation that demonstrates that the Director is assigned sufficient time in this role to support the mission and vision of the IAO.

- Provide a narrative that describes how the Director has been assigned sufficient time in this role to support the mission/vision of the IAO.
- This may be demonstrated by the job description that shows the percent effort by areas of responsibility and highlights simulation activities or by a letter from their associated society.

3.b. The IAO has adequate staff to support the mission and vision of the IAO.

3.b.i. Provide job descriptions for all IAO Staff.

- For all IAO staff, submit a job description that includes roles and responsibilities.
- An internal list of roles and responsibilities is appropriate if a formal human resources (HR) job description does not exist.
- *Staff supporting the IAO may include (but is not limited to):*
 - *Administrative staff: including office administrators, receptionists, and data analysts.*
 - *Technology staff: including IT support, programmers, and audiovisual specialists.*

3.b.ii. Provide documentation identifying the credentials of all IAO staff.	<ul style="list-style-type: none"> ▪ Please provide at least one of the following documents for each staff member: <ul style="list-style-type: none"> – SSH Biosketch – Curriculum vitae – Resume
3.b.iii. Describe how IAO Staff is sufficient to support the mission/vision of the IAO.	<ul style="list-style-type: none"> ▪ Provide a narrative describing how the IAO staff identified above are adequate to support the administration and coordination of all accreditation applications received.

3.c. The IAO has a plan and a process to orient, support, and evaluate IAO staff.

3.c.i. Describe and provide supporting documentation regarding how IAO Staff are oriented to their roles.	<ul style="list-style-type: none"> ▪ For this criterion, "IAO Staff" includes anyone employed or with time dedicated to the IAO. This will include individuals in the organizational chart. ▪ An orientation plan should be submitted for each staff role in the IAO organizational chart. ▪ Examples of orientation documentation that may be submitted include but are not limited to: <ul style="list-style-type: none"> – Orientation training agenda – Orientation pathway – Orientation checklist
3.c.ii. Describe and provide supporting documentation regarding how ongoing professional development opportunities are provided and supported for IAO staff.	<ul style="list-style-type: none"> ▪ This criterion aims to demonstrate that IAO Staff are regularly provided with professional development opportunities. ▪ Ongoing professional development examples include evidence of <ul style="list-style-type: none"> – IAO Staff attending organizational, regional, national, or other conferences or educational events relevant to simulation or Accreditation. – Documented professional development training with CISA Leadership

3.d. The IAO has access to accreditation reviewers to support the application review process.

3.d.i. Describe the process of seeking volunteers to apply as an IAO accreditation reviewer.	<ul style="list-style-type: none"> ▪ The IAO should describe its relationship with the accreditation reviewers. For example, the IAO may recruit from its associated society membership base.
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	<ul style="list-style-type: none"> ▪ Information provided here should address how the IAO has access to qualified individuals who demonstrate expertise in healthcare simulation. ▪ The IAO should describe the basic qualifications for accreditation reviewers.
3.d.ii. Document how the accreditation reviewers are oriented and trained for their roles.	<ul style="list-style-type: none"> ▪ Provide written documentation stating how the IAO supports new volunteers and prepares them for the application review. ▪ The orientation program should be specific to the role of accreditation reviewer for IAO. ▪ Examples of orientation documentation include but are not limited to: <ul style="list-style-type: none"> – Orientation training agenda – Orientation pathway – Orientation checklist
3.d.iii. Describe how the accreditation reviewers maintain their role.	<ul style="list-style-type: none"> ▪ This criterion ensures accreditation reviewers are provided opportunities to develop professionally and remain consistent with accreditation requirements. ▪ Examples include but are not limited to: <ul style="list-style-type: none"> – Minimum number of reviews per year – Mentorship with CISA Leadership – SSH Accreditation shadowing – Program Reviewer Training with SSH Accreditation
3.d.iv. Describe the evaluation process for accreditation reviewers.	<ul style="list-style-type: none"> ▪ Provide a narrative describing the ongoing evaluation and feedback process used for all accreditation reviewers. ▪ Describe the process for identifying areas of improvement and outline the process for implementing an improvement plan. ▪ This should include the survey utilized for annual evaluations/feedback, development of reviewers, and mentorship of new members.
3.d.v. Describe the process by which Team Leaders are identified and trained	<ul style="list-style-type: none"> ▪ Describe the basic qualifications for Team Leaders. ▪ Describe the orientation program provided for the role of Team Leader. ▪ Examples of Team Leader orientation documentation include but are not limited to the following: <ul style="list-style-type: none"> – Orientation training agenda – Orientation pathway – Orientation checklist

4. ISP APPLICATION PROCESS

a. The IAO has a process to support accreditation application submissions.

4.a.i. Provide a copy of the Society for Simulation in Healthcare (SSH) Standards that have been adapted into the language of the IAO.	<ul style="list-style-type: none">▪ Submit a translated copy of both the SSH Standards and the Companion Document with any additions/deletions/changes the IAO made based on local/cultural considerations.
4.a.ii. Describe how applicants have access to the IAO Accreditation Standards.	<ul style="list-style-type: none">▪ Describe the methods for simulation programs to access IAO Accreditation Standards▪ Examples:<ul style="list-style-type: none">– Posted on an accessible website– Ability to email the standards document to Programs.
4.a.iii. Describe the IAO application submission process.	<ul style="list-style-type: none">▪ The submission criterion should be described in the following manner:<ul style="list-style-type: none">– Dates for submission– How to apply– Cost of application– Cost of Accreditation.
4.a.iv. Describe the platform used to manage the submissions for Individual Simulation Program (ISP) applications.	<ul style="list-style-type: none">▪ The description should include where Programs will submit applications.▪ There is no specific platform requirement; however, the IAO must provide a narrative description of how it will operationalize processing application submissions,▪ Considerations should be made for the following:<ul style="list-style-type: none">– A platform for a Program to submit documented responses to IAO Accreditation Standards– Digital space for videos/images.– Separation of submission materials and Program Reviewer materials for privacy/integrity of the review.

4.b. The IAO has a standardized method of reviewing accreditation applications.

4.b.i. Describe the IAO's process to determine if accreditation applications received should be assigned to accreditation reviewers for review.	<ul style="list-style-type: none">▪ The IAO should describe the criteria, tools, and processes used to determine if programs applying for Accreditation are qualified for a review by accreditation reviewers.▪ These tools should be such that IAO staff receiving the application can quickly and easily determine if the criterion for a review has been met.
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<p>4.b.ii. Describe the process used to establish a Program review.</p>	<ul style="list-style-type: none"> ▪ Describe the criteria IAO utilizes to determine if a Program qualifies for an onsite or virtual visit. ▪ Describe how the IAO staff will: <ul style="list-style-type: none"> – Communicate with the Program and the review team. – Include dates and deadlines that will be communicated with the Program. – Assist in travel logistics, scheduling logistics, and reimbursements/invoicing between the Program and review team. ▪ In the case of a virtual event, describe how communication, moderation and selecting an appropriate platform will be addressed.
<p>4.b.iii. Provide the system for the management of invoicing and reimbursement</p>	<ul style="list-style-type: none"> ▪ Describe how the invoicing of Programs and the reimbursement of volunteer reviewers will occur.
<p>4.b.iv. Describe how accreditation reviewers are assigned to an application.</p>	<ul style="list-style-type: none"> ▪ Describe the process to determine the number of accreditation reviewers required based on the application. ▪ Describe the process for selecting accreditation reviewers to review an application based on the following examples: <ul style="list-style-type: none"> – Area of expertise – Geographic location – Experience as a reviewer – Conflict of Interest
<p>4.b.v. Describe the process used by accreditation reviewers to review applications thoroughly.</p>	<ul style="list-style-type: none"> ▪ Describe the process developed for the accreditation reviewers to prepare and systematically review the application, including accessibility. ▪ This process should include the frequency of meetings before the review and how the IAO staff supports the accreditation reviewer team. ▪ Include any tools utilized or created, documentation requirements, and how they are disseminated to the Program and IAO.

4.c. The IAO has a process to perform an onsite or virtual review of the applicant to verify the application submission.

<p>4.c.i. Provide an example agenda utilized by the Program applicant and accreditation review team for the onsite or virtual review.</p>	<ul style="list-style-type: none"> ▪ Provide a sample agenda with potential variations that would be utilized by IAO reviewers and available to programs undergoing a review. ▪ The allocation of timing on the agenda will reflect all areas of Accreditation the applicant is seeking (for example, Assessment would require time for the accreditation review team to meet with the Program's assessors)
<p>4.c.ii. Describe the process used by the accreditation review team to review the application and provide the applicant with findings and recommendations from the review process.</p>	<ul style="list-style-type: none"> ▪ Describe a system for sharing and storing reviewer comments to the ISP application. ▪ Provide a process flow for documentation of feedback to the programs and Board of Review.
<p>4.c.iii. Describe the process used to share feedback with the Program.</p>	<ul style="list-style-type: none"> ▪ Describe the process for providing documentation as a follow-up to visits to Programs seeking Accreditation. ▪ This process should include parameters for disseminating the Tentative Feedback Report and timeframes for the program to respond to the findings.

4.d. The IAO has access to a Board of Review to decide on applicants' accreditation status.

<p>4.d.i. Describe and document the process by which the accreditation reviewers report to the voting Board of Review.</p>	<ul style="list-style-type: none"> ▪ The IAO should describe a process that requires and enables accreditation reviewers to report their findings and recommendations to the Board of Review. ▪ This should include a description of how the site review report is shared, the timeframes and expectations of the review team when presenting findings, the decision-making process of the Board of Review, and the dissemination of the final feedback report. ▪ This section should include the Board of Review report document submitted by the review team.
<p>4.d.ii. Describe how the IAO staff supports the entire voting process.</p>	<ul style="list-style-type: none"> ▪ The IAO staff function in a support role for the Board of Review Process. This includes: <ul style="list-style-type: none"> – Scheduling Board of Review slate – Provide Board of Review members access to the Tentative Feedback Report and Executive Summary. – Take minutes on the Board of Review decision – Create Final Feedback Report – Submit a report and final decision to the Program

<p>4.d.iii. Describe the process available to applicants if they wish to appeal the final accreditation decision.</p>	<ul style="list-style-type: none"> ▪ The IAO should describe the process for Program applicants to appeal findings and accreditation decisions made by the review team and Board of Review. ▪ This process should also include how to reach a final verdict and disseminate that to the Program. ▪ Please reference the Appeals Policy in the response.
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<p>5. QUALITY IMPROVEMENT</p> <p>a. The IAO continually improves its operations using a systematic and routine quality management review process.</p>	
<p>5.a.i. Describe and provide supporting documentation for the review of the organization's accreditation process.</p>	<ul style="list-style-type: none"> ▪ The IAO should describe its approach toward quality management for process improvement of the organization. ▪ The IAO should provide its process of action when quality improvement opportunities arise.
<p>5.a.ii. Describe the process for providing feedback on quality improvement between the IAO and CISA</p>	<ul style="list-style-type: none"> ▪ This section should outline the process for providing feedback on quality initiatives implemented by the IAO. ▪ This is part of the continued partnership with CISA.