Accreditation Process Cycle and Updates

November 2024

The initial and continuing accreditation process includes several components. The following summary describes the activities and documents required in each phase.

Phase One

The program completes a self-analysis and submits program information to CoAEMSP, uploading it to a CoAEMSP ShareFile. The documentation includes an Initial or Continuing Self-Study Report (ISSR or CSSR). The SSR is an Excel-formatted workbook, and the program enters specified data. Few narrative responses are required, and the program should have the information readily available.

In addition to the Excel workbook, specific program operational documents are added to a 'document' folder that provides a more detailed overview of how the program operates and meets the requirements in the CAAHEP *Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions* (the *Standards*). Examples of documents or evidence include the program organizational chart, course syllabi, and affiliation agreements. The SSR identifies each document that must be included and the appropriate naming convention. Resource materials to assist the program in this phase include the Documents for the Self-Study Report and Step-By-Step Instructions for the Self-Study Report.

The CoAEMSP periodically reviews and updates the Excel SSR workbook and the document list. Programs are advised not to enter information into the SSR until the email is received from CoAEMSP to begin the process with a due date of six months following notification to ensure that the most current version of the SSR is used.

Phase Two

The CoAEMSP staff reviews the SSR materials submitted. An assigned subject matter expert, or reader, reviews all documents and prepares an Executive Analysis, which identifies which accreditation standards appear to have sufficient evidence, which areas may not meet the accreditation standard, and which areas the site visit team should explore further during the site visit.

The program prepares a Response to Executive Analysis (EA) Program Update to review with the site visit team captain before the visit. This is another opportunity for self-analysis.

Phase Three

The program is contacted regarding scheduling the site visit and works with the CoAEMSP staff to identify potential dates and review the visit's schedule and format. Ample time is allotted for the program and site visitors to prepare for the visit.

Phase Four

Once the site visit is scheduled, the program begins uploading additional program documents that **were not included** in the original submission. For example, due to the time involved in the various phases of the process, the program may have conducted an advisory committee meeting, compiled a more recent Resource Assessment Matrix, submitted an Annual Report, or completed other activities since CoAEMSP received the SSR. The format to organize these documents has recently been updated to streamline the process. The documents requested are detailed in the Organizing Documents for the Site Visit instructions. The primary purpose of this document upload is for new materials only, and there is no need to add materials already submitted. However, updated manuals, policies, and other changes should be included since the SSR was submitted. The document structure is now by type (i.e., minutes) and not by the accreditation standard. All programs upload these documents, and the submission due date is a minimum of two weeks before the site visit. Only minimal documentation, such as student files, will be reviewed during the site visit.

The categories of documents to upload include:

Response to the Executive Analysis (EA)

Minutes

- Advisory Committee meeting minutes since submitting the Self-Study Report
- Consortium meeting minutes (if applicable) since submitting the Self-Study Report
- Faculty meeting minutes since submitting the Self-Study Report

Manuals

- Student Handbook/Manual
- Clinical manual (hospital) if applicable
- Capstone field internship manual if applicable
- Preceptor manual if applicable

Summary Tracking

- Summary tracking documentation for all graduated cohorts since submitting the Self-Study Report. Tracking is the 'Summary Tracking' table/tab from the Student Minimum Competency document and is reported for the entire cohort and is not a report on individual students.

Schedule

- Program/cohort schedule for the current or most recent cohort

Reports

- CoAEMSP Annual Report for the most recent reporting year(s) if completed since submitting the Self-Study Report
- Resource Assessment Matrix (RAM) for previous year(s) if completed since submitting the Self-Study Report
- Screenshot of the most recently published outcomes on the program website that matches the data reported in the latest CoAEMSP Annual Report

Other planning documents

- Documentation of long-range planning for the program. A sample Long Range Planning form can be found at: https://coaemsp.org/resource-library#7.

Agreements

- Affiliation agreements for clinical and field internship sites, if renewed since submitting the Self-Study Report
- Articulation agreement, if renewed since submitting the Self-Study Report

Evaluation and feedback

- Documentation of student advising on academic progress (for three students)
- Documentation of student counseling for cognitive, psychomotor, or affective issues

Miscellaneous

- Record of faculty continuing education

During this phase, the site visit team will begin a conversation with the program director regarding the schedule, review of the EA, travel arrangements as needed, the additional documents needed, and answer questions.

Phase Five

Following the site visit, the program receives a request to confirm the factual accuracy of the Findings Letter and has an opportunity to respond. Once any issues have been resolved, the program receives the official Site Visit Findings Letter and the Site Visit Report. A specified date is provided if further responses and information are requested (Response to the Findings Letter). This will be reviewed by a team of the CoAEMSP Board of Director members and forwarded for full Board review. The resulting recommendation is then forwarded to CAAHEP for accreditation action.

Once awarded, accreditation does not expire, and the CoAEMSP notifies programs when the next accreditation renewal process will begin, which begins with completing the next SSR. Maintaining consistent and complete student, cohort, and other program records is key to navigating the accreditation process. All program electronic files and records should be maintained in a shared location accessible to all program personnel, which also aids in transition in the event of personnel changes.

Note: the documents referenced in *italics* can be located at: https://coaemsp.org/resource-library.