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Committee on Accreditation
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A Look in the Mirror: Evaluating Program Strengths and Weaknesses *by Patricia L. Tritt, RN, MA*

The accreditation process is outcome based. In other words, the focus of the education program--and therefore the review of the program--is on the performance of the graduates rather than on the process of the education.

What does this mean for programs? For example, are you teaching to a text or are you teaching to develop a competent entry level Paramedic? Texts are teaching tools, not an education.

Are you teaching to have students pass a certifying exam--while admittedly important--or are you teaching to develop a competent entry level Paramedic?

Exams of any kind are merely snapshots in time. The laser focus must always be on producing a competent product--in this case Paramedic graduates.

Frequent assessment of the students and of the education program is essential to determine program strengths and weaknesses (opportunities).

Programs are typically familiar with--and comfortable with--student assessment, but have a much less structured approach to looking in the mirror for an adequate, and frank, assessment of the program.

Where to start?

1. Begin with a re-review of the Standards and Guidelines from a fresh perspective. Ask the tough questions: not only do we do this (the Standard), but what does the Standard really mean, how do we do it, how well do we do it, and what do we need to change?
2. Avoid answering what you can do and instead focus on what should you do.
3. Determine strengths and weaknesses using these practices and mechanisms:
 - Students evaluate faculty/instructors frequently. Incentives are provided for open, frank, constructive feedback. Feedback is acknowledged and information is relayed on what changes have been made or will be made based on their input.
 - Students evaluate program courses or components frequently with the same caveats as above.

- Students evaluate adjunct or skill instructors frequently.
- Faculty, Advisory Committee members, the Program Medical Director, and any other stakeholders complete the Program Personnel Resource Survey at least annually and responses are analyzed and recommendations are implemented.
- Students complete the Student Resource Survey at least annually.
- Graduate and Employer Surveys are completed six months following program completion and responses are analyzed and recommendations are implemented.
- Preceptors evaluate your program.
- Students evaluate their preceptors.
- Students evaluate the clinical sites and experiences.
- Faculty members observe and provide feedback to each other.

4. Complete a SWOT analysis (strengths, weaknesses, opportunities, threats). This process can include any and all stakeholders. Think broadly and use a brainstorming approach.

5. Evaluate the clinical and field resources and student experiences. Do students have difficulty meeting program minimum requirements for patient assessments and skills?

6. Determine the student pass rates on the state or National Registry (NREMT) certifying exams and the first-time pass rate.

7. Determine the attrition/retention rate and identify, categorize, and analyze the factors.

8. Determine the placement rate for graduates. Do graduates have difficulty finding Paramedic positions and if so why? Do employers report that your graduates require more orientation and precepting than graduates from other programs?

9. Write and track all of these assessments and documents, and document the resulting changes. Create an intuitional memory.

Finally, visit or speak with other programs and compare your experiences. We often become insular and find it difficult to think outside of our own 'box'. Educators are usually willing to share, so actively seek outside perspectives. Outcome-based education must assess and document entry level competence. Assessment requires multiple levels and techniques of evaluating our strengths and weaknesses and a willingness to look in the mirror.

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