



A Perspective on Citations

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September 2013

EMS personnel tend to be a competitive lot and everyone wants a perfect score on any evaluation. A common refrain is “What do you mean I didn’t get it right?” Paramedic programs proceeding through the accreditation process exhibit some of the same characteristics. At the exit interview on the second day of a site visit everyone wants to hear ‘no potential citations’. Sometimes we get our wish, but most frequently programs find a few areas that must be addressed: either by providing more data, more documentation, altering a process, adding an additional resource or resources, or providing more depth to the evaluation process.

The accreditation process is an ‘open book test’ and the study guides are the:

- *Site Visit Report* (www.coaemsp.org/Site_Visits_Visitors.htm);
- *CAAHEP Standards and Guidelines* (www.coaemsp.org/Documents/Standards.pdf);
- CoAEMSP Interpretations of the *Standards* (www.coaemsp.org/Standards.htm). Plus the
- ISSR and CSSR documents (www.coaemsp.org/Self_Study_Reports.htm).

Of course, all these resources are filtered by one’s internal perceptions and local experiences any may not reconcile with the accreditation requirements as viewed by the site visit team and the CoAEMSP Board.

To complicate matters further, the *Standards* are revised periodically (a draft revision is currently in progress) and the CoAEMSP Standards Interpretations Committee continually reviews potentially murky areas and updates the *Interpretations* document and posts on the CoAEMSP website (www.coaemsp.org/Standards.htm). The result is that, for programs completing continuing accreditation, what was previously deemed acceptable may no longer meet the *Standard*. The take-home message here is to remain current on changes: read the periodic *eUpdates* sent to Program Directors and all interested parties, review the *Interpretations* posted on the CoAEMSP website, and take advantage of CoAEMSP webinars. In addition, the CoAEMSP offers Accreditation Update workshops and participates with NAEMSE in an Evaluating Student Competency workshop.

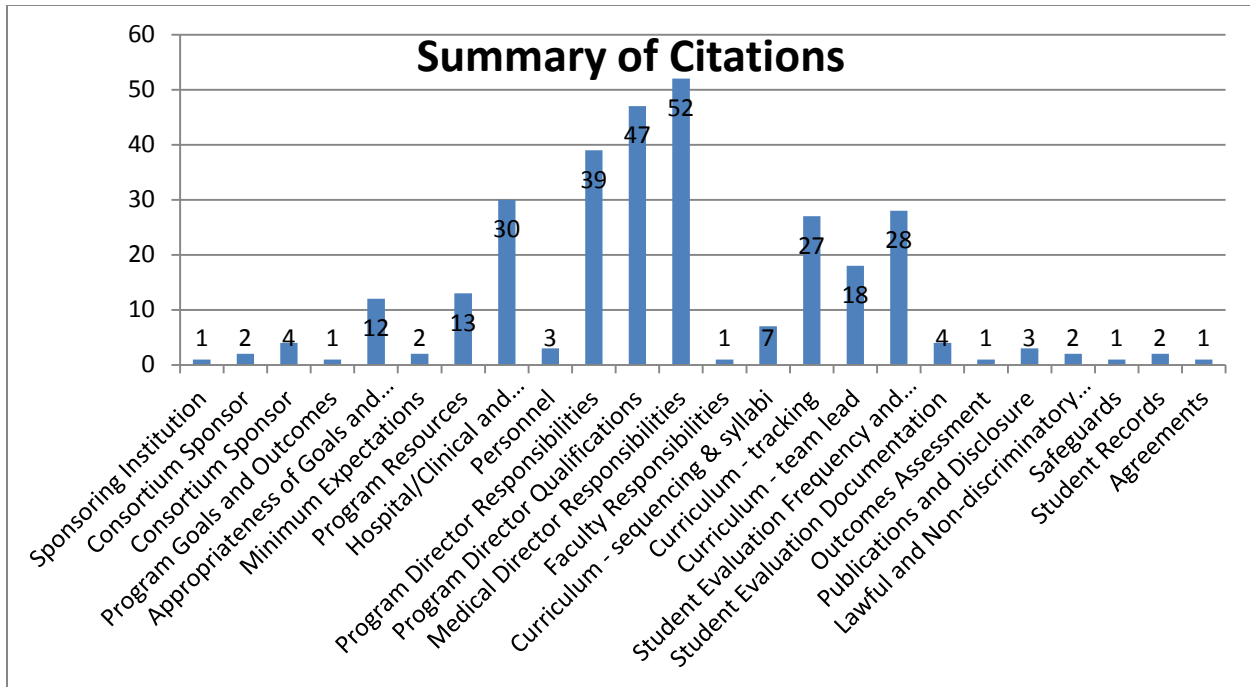
Program Directors, Medical Directors, faculty, Deans and other administrative officials, and Advisory Committees may wonder: just how do we compare to other programs? Fortunately the accrediting body (the Commission on Accreditation of Allied Health Education Programs - CAAHEP) provides periodic summaries of the *Standards* citations. For 2012 and January - July 2013, the average number of citations was three. For the same time periods, 88% of initial accreditation actions included citations and 63% of continuing accreditation actions included citations.

Obviously, each of the *Standards* identified in the graphs below encompasses a multitude of *Standards* requirements and so the graphs do not provide detailed specificity. However, the data does provide a snapshot of the most common citations.

2012

In 2012, CAAHEP acted on 113 Paramedic Programs, of which the most frequently cited Standards were:

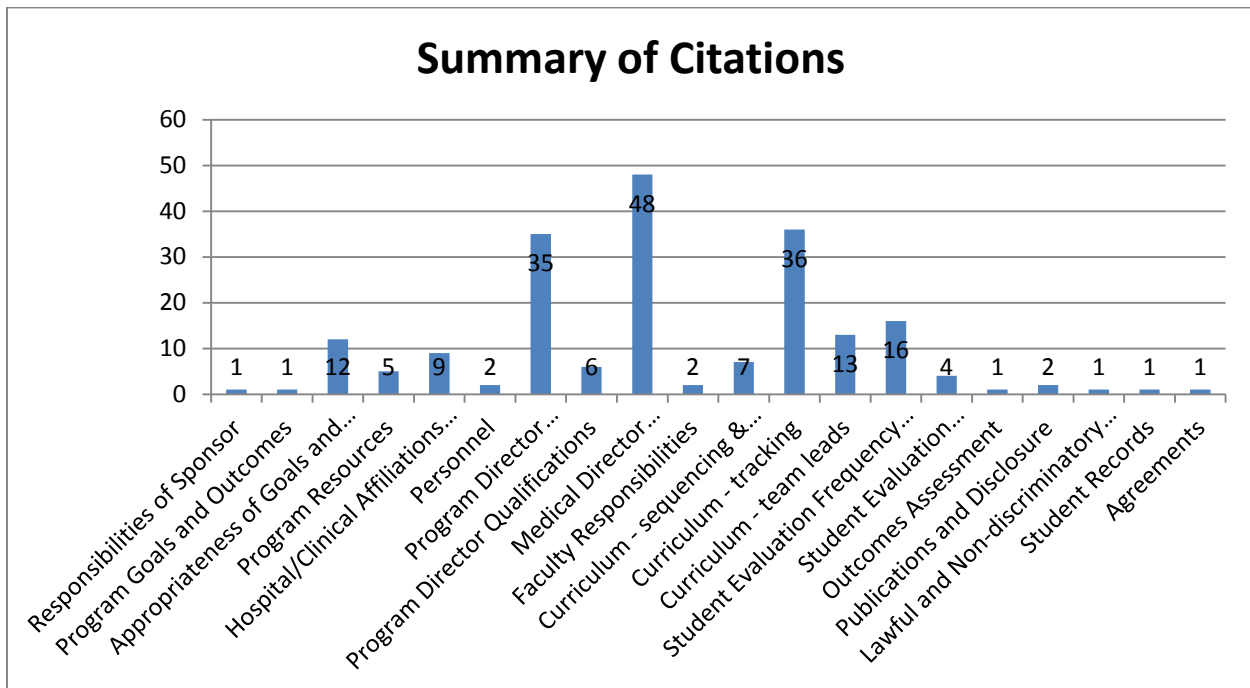
1. Medical Director Responsibilities (52)
2. Program Director Qualifications (47)
3. Program Director Responsibilities (39)
4. Program Resources (30)
5. Student Evaluation and Frequency (28)
6. Curriculum – Tracking Patient Encounters (27)



January – July 2013

In the first half of 2013, CAAHEP acted on 66 Paramedic Programs, of which the most frequently cited Standards were:

1. Medical Director Responsibilities (48)
2. Curriculum – Tracking Patient Encounters (36)
3. Program Director Responsibilities (35)



Citations typically fall into three broad categories: foundational (for example, not having a qualified sponsor), process (lack of an adequate tracking system) or detail (omission of published fair practice specifics). Obviously, the 'details' are the easiest to address, 'process' issues may take time to fully implement and report, and foundational issues may become a barrier to successful accreditation and require the commitment of all program and administrative personnel.

While the terminology of 'violation' is common, the better mindset is citation. Sometimes citations result from lack of information, variations in interpretations or a lack of resources or support. But there is always an opportunity to improve your program and the student experience.

The accreditation process is an opportunity for a variety of activities: program self reflection and analysis; initiate program and process changes, and validation of good/best practices. In the end, the periodic review and analysis should promote program growth and should ultimately benefit the student and, most importantly, the patient.

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