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ON THE COVER





MISSION

The mission of the CoAEMSP is to advance the quality of EMS education through CAAHEP accreditation.

VISION

CoAEMSP is recognized as the leader in evidence-based standards for accreditation.

STRATEGIC GOALS

Goal #1

Developing a high level process for the collection and analysis of data for the purpose of improving EMS Education.

Goal #2

Restructure Board/staff to meet the needs of the growing organization and EMS profession. Improve Board engagement and effectiveness.

Goal #3

Position CoAEMSP to effectively respond to and manage trends in EMS Education including developing competent evaluative processes especially for Distance Education.









CORE VALUES | CLARITY

Commitment

Dedication of time, talent and resources toward the achievement of CoAEMSP's mission.

Leadership

Inspiring others to advance the vision and goals of the CoAEMSP.

Action-oriented

Advancing the goals and projects of the CoAEMSP through timely, deliberate and thoughtful decision-making and effective implementation.

Respect

Honoring the perspective of any individual or organization.

Integrity

Carrying out the work of the CoAEMSP with honesty, professionalism and high ethical standards.

QualiTY

Consistently meeting or exceeding established standards and expectations in all CoAEMSP activities.

THE CRITICAL CONNECTION **BETWEEN THE COAEMSP & CAAHEP**

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) is the largest programmatic accreditor in the health sciences field. CAAHEP reviews and accredits over 2100 educational programs in twenty-eight (28) health science occupations.

CAAHEP is comprised of the Commission and its Board of Directors. The Commission is representatives of CAAHEP's community of interest member organizations, including 23 Committees on Accreditation (CoA), of which CoAEMSP is one. The CAAHEP Board of Directors takes action on Paramedic programs upon the recommendation of CoAEMSP.

CHAIR'S REPORT

As we look back on the achievements of 2015-2016, we are proud of those accomplishments but must continue to focus on the application of scientific evidence to support our Standards and on maintaining the high level of customer service to our educational programs.

Following our strategic plan of 2013 and based on data gleaned from our colleagues at the Prehospital Care Research Forum, National Registry of EMTs, FISDAP® and Platinum Educational Group, which represented almost 11,000 Paramedic students' encounters with over 2,200,000 patient encounters, we were able to link those to outcomes and develop suggested program minimums for patient encounters, both live and simulated, and lab and field, to better meet the requirements of the new Portfolio process. This landmark achievement goes way beyond the historic "best guess" applied by experts in the field and begins to establish new methods, set new expectations and establish new relationships between the certifying, accrediting, licensing and data acquisition agencies. We commit to continuing to work with our programs and EMS educational community to research and promote scientifically-based, research-proven educational practices.

Our staff continues to set the bar in customer service and the addition of expert consultants to help replace the loss of our dear friend and accreditation guru, Bill Goding, allows us to continue to respond to the increased requirements facing programs seeking and renewing accreditation. Our volunteer site visitors and Board of Directors continue to log days, even weeks, per year of effort to insure the accreditation process has reliability, validity and keeps the programs' needs paramount.

Finally, we must express our gratitude to all of you EMS educators–especially those who continue to tell us how important the CAAHEP accreditation process has been in helping you review, renew and refine your educational processes. Since the self-studies are opportunities to look in the proverbial mirror, we appreciate all the program directors, preceptors and educators who put their students first and continue to embrace the journey of improvement.

7 Box

Thomas B. Brazelton III, MD, MPH, FAAP (AAP)



Thomas B. Brazelton

"...we appreciate all the program directors, preceptors and educators who put their students first and continue to embrace the journey of improvement."



Bill Goding, MEd, RRT

EXECUTIVE DIRECTOR'S REPORT

Fiscal year 2015-2016 was a banner year for the CoAEMSP. In the middle of it we had an unexpected and untimely loss of one of our colleagues: Bill Goding. To say his death was a shock would be an understatement and we miss him dearly. Bill was an irreplaceable member of our staff. We moved forward collectively and with solidarity to accomplish our mission and to honor his memory. The staff did an amazing job and I could not be more proud of their work during difficult and trying times. It's taken us a little longer to complete some things due to the loss; however, we are working hard to get back on track. We all miss Bill very much.

Continued Growth

The total number of CAAHEP accredited programs has continued to grow. We began the fiscal year with 477 programs with CAAHEP accreditation and finished with 494 - a net increase of 17 programs. Although that may not seem significant, when coupled with the 160 site visits for new and existing programs, added to the review and approval of programs by our Board and that of CAAHEP, the larger picture is evident. With over 200 programs holding the CoAEMSP Letter of Review (LoR) that will need to be site visited in the future, the scope of the work by our staff, Board and site visit volunteers is epic. What's more, the CoAEMSP is now the largest Committee on Accreditation in the CAAHEP system. Whether or not all of the LoR programs subsequently gain accreditation by CAAHEP, the CoAEMSP will be on target to conduct over 150 site visits annually from this point into the future.

Site Visitor Class of 2015

Welcome to the 25 new site visitors who were selected for the Site Visitor Class of 2015. The individuals applied following our announcement regarding the process and were selected by the Site Visit Subcommittee and staff. The application required support from the program administration, letters of support, financial commitment to travel to the meeting (the CoAEMSP paid for lodging and meals) and agreement to actively participate in three site visits every two years. The selection process was competitive and participants selected came from CAAHEP accredited programs across the nation. The class spent two days together with staff and members of the Site Visit Subcommittee in an interactive and student-centered environment that allowed plenty of discussion and real case studies about the process. No stone was left unturned and these individuals went home with a clear picture of the expectations and challenges of our process.

Board Engagement

The CoAEMSP remains actively engaged in the review of Paramedic educational programs which is vital to the success of the CAAHEP accreditation process. Twenty eight members from 14 sponsoring organizations essential to the profession – review and recommend accreditation actions to CAAHEP. Their work is done in teams to distribute the voluminous program responses that typically involve 60-80 programs reviewed quarterly and require understanding of all aspects of the CAAHEP Standards. If program responses are well constructed, the reviews are streamlined. When that is not the case, however, the reviews can be cumbersome and then require further progress reports from programs. All of the Board members spend hours reviewing these materials in advance of attending a team call which may also require several hours to accomplish. The process is intense and grueling but

"Fiscal year 2015-2016 was a banner year for the CoAEMSP."

necessary to ensure that every program reviewed meets the CAAHEP Standards. To further ensure all the teams are in agreement with one another, the CoAEMSP conducts its own inter-rater reliability check by providing an anonymous program that is the same for all teams as part of the quarterly review. I'm happy to report that this additional quality check continues to provide outstanding reliability to an already robust review process.

The members of the Board all volunteer their time to the improvement of EMS as a profession. Without their participation, the accreditation of Paramedic educational programs would not be a reality. Thanks to each of them for their work and dedicated efforts in support of CAAHEP accreditation.

Turnover in Program Directors Continue

I am uncertain why, but there were 160 changes in programs directors. The number of program directors leaving the classroom concerns all of us. The reasons are likely multi-factorial and probably include long hours, low pay, heavy teaching and administrative responsibilities, lack of administrative support, as well as being an aging workforce. I'm certain there are others and by no means is this a scientific assessment; merely it is a sentinel warning to all of us in the profession of EMS education. We need to take better care of ourselves and not only figure out how to grow professionally but how to grow the next generation of program directors.

What's Ahead?

Finally, we are moving toward more change. We are approaching the 40th anniversary of accreditation work of Paramedic educational programs in 2018. The EMS Agenda 2050 will be underway looking at where we hope to be as a profession in the next 30 years. The CoAEMSP continues to work toward an "evidence- based" approach in development of the next revision of the CAAHEP Standards. The goal is to improve educational outcomes. We look forward to the journey ahead.



George W. Hatch Jr., EdD, LP, EMT-P



George W. Hatch Jr. Executive Director

BOARD CULTURE: THE COAEMSP DIFFERENCE



"Exceptional' and 'excellence' are words that come to mind when I see the work we accomplish because of the gift the Board provides to us: their expertise, energy, dedication and commitment to a cause much greater than themselves...."

Board members are the backbone of the CoAEMSP, ensuring accountability of EMS educational programs through accreditation.

Distinct in their professional and personal experiences, they share the single responsibility of upholding the credibility, integrity and accountability of the CoAEMSP.

But how does the Board accomplish this task? What do they do in particular to carry out the mission of the CoAEMSP? What sets them apart in their work to ensure that students obtain a quality education so that the American public receives the competent care they deserve?

Foremost, Board members are expected to be stewards, ambassadors and models of professional excellence. They know they will be part of a working Board, serving in a highly active role. They know the commitment will be challenging and time-consuming. The preparation for a Board meeting begins months ahead. Subcommittees meet outside of Board meetings to carry out specific projects, agendas, or research. In addition, they must serve as site visitors, further interrupting their professional and personal lives for three or four days at a time at least once a year. They also serve on review teams that analyze in microscopic detail programs seeking or maintaining accreditation

Bridgette Svancarek, MD, FAEMS represents the NAEMSP on the CoAEMSP Board. She says she loved teaching EMS providers prior to becoming a physician. Thus, she chose EMS education as her focus when she entered her EMS fellowship in 2009. "That is when I read the EMS Education Agenda for the Future and realized EMS education was far from where it needed to be. Since then, there have definitely been some remarkable achievements, but it is still a ways from where it needs to be."

"The future of excellence in EMS care starts with great quality initial education of our EMS providers."

Bridgette says it takes "a lot of

hard work and a vast amount of knowledge" to be involved in the accreditation process. "I've gained a lot of respect for the process of accreditation and those involved in it every day." When a program commits to acquiring or maintaining accreditation, Bridgette

"Diversity of our Board is an important attribute to consider. Coming from different healthcare backgrounds with a common interest, the Board is unified in its mission and goals. There is a healthy culture of respect and open communicationand this promotes efficiency and equity."

explains, they are receiving "guidance on how to make their program high quality and provide excellent education." While that might sound simple, Bridgette points out, "the amount of work that goes into counseling each of these programs is huge. The future of excellence in EMS care starts with great quality initial education of our EMS providers."

David Becker, MA, NRP, represents the IAFC on the CoAEMSP Board. Back in 2008, Dave was a Paramedic Program Director and Vice Chair of the IAFC EMS Section. At an EMS meeting he attended that year, he was encouraged to represent the fire chiefs (who at the time were not involved in this capacity). This allowed Dave to become instrumental in conveying the message of Paramedic education accreditation to the fire service and ultimately bringing them in as an important sponsor.

During the past eight years in which Dave has been involved on the CoAEMSP Board, he has witnessed the extent to which Board members are committed. "This is a working Board that spends many hours each year both on the phone and in person at meetings discussing and working on improving the accreditation process for Paramedic educational program," Dave explains. "While all Board members represent some area of EMS or medicine, we all work closely together to improve the standard for Paramedic education. We help serve as a student advocate in making sure they are receiving the best education through the accreditation process."

Dave's expertise includes 42 years of experience in EMS, in which he has been a part of the progression of EMS education. "I worked in the field 13 years before being promoted and was Chief Medical Officer for two fire agencies for 15 years. I spent almost nine years as an EMS Program Director. I can relate to those programs beginning the process or the ones who have been around for a long time. I believe I can help bridge those fire agencies that are interested in becoming a CAAHEP-accredited program and be able to explain the importance of accreditation." In addition, his dedication to the IAFC EMS Section for the past 20 years has included serving as Treasurer for 10 years, Vice-Chair for six years and Chair as four years. This national perspective on EMS issues and how they impact education programs brings critical value to the CoAEMSP Board.

Dave says Paramedic educational programs seeking CAAHEP accreditation receive a "great deal of resources to help them in their education of Paramedic students." Meeting a national standard is more than just getting reviewed every five years," Dave explains. "The CoAEMSP provides a consistent look at each program, feedback and in some cases a road map to best practices."

Deb Cason, MS, RN, EMT-P, represents the NREMT on the CoAEMSP

Board and has been involved in EMS education accreditation since the late 1970's when the EMS educational standards were first

being developed. She became a Board member when the CoAEMSP was known as the Joint Review Committee on Educational Programs for the EMT-Paramedic (JRC-EMTP) and the accrediting body was the Committee on Allied Health Education and Accreditation (CAHEA,) an organization administered by the

American Medical Association (AMA).

She has been conducting site visits since 1985 and brings a highly coveted perspective, as well as an understanding of the history of EMS education accreditation to the Board.





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"The educational program I was affiliated with at UT Southwestern in Dallas, Texas, had gone through the accreditation process and I felt that it was very helpful to improve what we were doing," Deb explains. "EMS instructors were learning by the seat of our pants and soaking up the few educational resources that were available at conferences. The JRC seemed like a way to promote the process and learn more about what we were trying to do. Little did I dare to dream that accreditation would be required in my lifetime!"

Through her years of involvement in the maturing of EMS education, Deb confirms that Board members are united in their goal of better education for students and better outcomes for patients. "We may go about it in different manners and have different perspectives but we are sincere in our efforts," Deb says, stressing that EMS educators and physicians are "incredibly dedicated to the CoAEMSP. They all have many personal and professional responsibilities; however, they give so much time and energy to reviewing programs and doing site visits and taking care of CoA business. This is a working, engaged Board and what each member gives is amazing."

While the accreditation process takes time and effort, the resources the CoAEMSP provides are extensive and designed to assist educational programs. "Programs receive a system of improvement and a wealth of resources to improve their program," Deb emphasizes. "There is a wealth of program improvement components on

the CoAEMSP website, as well as staff assistance and Board member consultation."

In the end, Deb says, "programs receive a quality assurance stamp" that not only protects the student, but the American public in their greatest time of need.

Pat Tritt, MA, RN, represents the NAEMSE on the CoAEMSP Board. has been a site visitor since 1983 and became a Board member seven years ago. She brings a unique set of leadership skills including that of a

director/vice president, along with an organizational perspective on business processes in small and large organizations. Her world-wide travels have provided the opportunity for her to observe and learn from other countries, cultures and individuals.

"Joining the Board gave me an opportunity to contribute and help with the development and refinement of the program review and approval process," Pat says. "I believe strongly in the CAAHEP accreditation process as a way to help bring standardization to the education of Paramedics." During her time on the Board, Pat has witnessed "healthy debate and the views of a variety of stakeholders. She says it's imperative that everyone on the Board be familiar with the accreditation process and complexities of the programs being regulated. Compared to other accrediting bodies and process in which Pat has been involved, she says CoAEMSP fees are "extremely reasonable and far less than other bodies."

"As a sponsoring organization, NASEMSO recognizes that the nationwide progress in implementing the EMS Education Agenda for the Future: A Systems Approach is directly related to a shared common goal and collaboration by many organizational partners. By assisting paramedic education programs achieve accreditation through the development of standards and resources combined with its outreach efforts, the CoAEMSP remains a vital component to strengthening a system of EMS education that more closely parallels that of other health care professions."

CoAEMSP Board members are some of the profession's top leaders. They are driven, conscientious and some of the most talented people in their respective professions. They understand the decisions they make are not for their own self interest, but for the CoAEMSP and its mission of ensuring the safety of the American public through the continuous

improvement of EMS education. Thus, the CoAEMSP attracts only the most passionate, ambitious and dedicated leaders in the EMS profession.

Dr. George Hatch: Executive Director Perspective

CoAEMSP Board members possess expertise, energy, dedication and commitment to improving EMS. Each of these members comes from a different and distinct perspective and they offer their intellect and expertise each time the Board of Directors is engaged in discussion of CAAHEP accreditation. The Board spends long hours in advance of each meeting reviewing numerous documents submitted by programs in

> evidence of their response to a citation. Board members must evaluate the evidence and determine whether or not the program has answered the citation by the evidence provided.

I am certain that most folks in EMS have no idea the amount of work they do, the time they volunteer in support of our efforts and how dedicated they are. Many not only read and participate at the board level, but are active on subcommittees and also participate as site visit members visiting programs. All of the work they do has a positive impact on the CAAHEP accreditation process.

"NAEMSP is proud to serve as a sponsor for the CoAEMSP. Our participation highlights the importance of medical director involvement in initial paramedic education. Training EMS professionals as part of the health care system is a key component of the specialty. Strong and involved medical direction models the EMS system as a whole for the EMS student and improves overall educational quality."

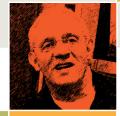
In my view, the fact that all of these individuals would agree to spend long hours, for no compensation or recognition outside of their love

for improving our profession is the greatest gift of all. They work hard studying issues, making thoughtful and informed decisions about programs and are always seeking to learn more about how we can improve what we do through an evidence based approach to our mission. They are the heart and soul of the

organization who, through their work. makes EMS a true profession.

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"As the industry leader supporting fire department-based EMS, the IAFF places a high value on EMS education. The standards to which CoAEMSP holds EMS educational institutions accountable, support our member's mission of providing exceptional patient care. We recognize that CoAEMSP works to assure that our members receive quality and standardized training throughout the country. We further recognize that CoAEMSP holds educational institutions accountable to the student and community by assuring they provide qualified managers, medical directors and instructors to deliver training objectives based on performance measures and industry best practices. These efforts help ensure students meet the required objectives and become proficient in the skills necessary to provide quality patient care."

Thomas Breyer, Director, IAFF Fire and EMS Operations Department

Their level of inquiry, scrutiny and dedication is tempered by their humanity and willingness to understand that programs have a litany of ways it can meet the CAAHEP *Standards*. As practitioners in their

respective fields that intersect with EMS, they have a belief that an accreditor has an obligation to protect the public served by the work that programs, graduates, employers, the CoAEMSP Board and staff collectively do for the greater good in EMS. These efforts allow them to temper decisions based on evidence with the knowledge that programs and their institutions are working hard to improve their educational outcomes.

The Board of Directors' commitment is just that: a commitment. It is probably one of the hardest working and active boards they will ever participate on and they do this as part of a multi-year commitment to begin to learn about what accreditation is and how they can better evaluate educational programs in their role. Board members work hard and their efforts are worthy of their commitment

to the cause of improving outcomes. 'Exceptional' and 'excellence' are words that come to mind when I see the work we accomplish because of the gift they provide to us: their expertise, energy, dedication and commitment to a cause much greater than themselves.....

George W. Hatch Jr., EdD, LP, EMT-P, CoAEMSP Executive Director

Dr. Tom Brazelton: Board Chair Perspective

Almost every one of our Directors has been told at one time or another that they are their sponsoring organization's hardest working liaison—something I've been told by my colleagues at the American Academy of Pediatrics. I don't think many of our Board members realize how highly regarded they are and how much their contributions are valued by their sponsoring organizations.

I too would emphasize the word 'commitment'. The top priority of Board members is to protect the public by ensuring standards for schools and students to achieve in order to produce the best possible entry-level Paramedic. The second priority is to protect the students by ensuring the educational programs have what they need to provide a solid educational foundation. The next priority is to protect the educators within the schools by having standards that ensure the schools give the educators what they need to help the students. And finally, we are there to help the programs be successful by ensuring they are responsive to their students, faculty and communities of interest. Everyone on the Board understands that we are committed to staying true to these priorities.

Diversity of our Board is also an important attribute to consider. Coming from different healthcare backgrounds with a common interest, the CoAEMSP Board is unified in its mission and goals. There is a healthy culture of respect and open communication and this promotes efficiency and equity.

This is a highly talented, extremely dedicated group of professionals who volunteer for the public's health to improve EMS education.

Thomas B. Brazelton III, MD, MPH, FAAP (AAP), CoAEMSP Chair

"EMS providers serve their communities by providing both emergent and non-emergent care for ill and injured patients. Before these EMS providers can serve their communities, they must be fully trained and prove their competency and capabilities. The CoAEMSP is a critical link in the training and education process for EMS providers by ensuring that their EMS education comes from accredited programs that meet the high standards for education. The IAFC is pleased to continue its long-standing support for the CoAEMSP and its goal of advancing high-quality EMS education for all EMS providers. The fire and emergency service as a whole is deeply benefited by having educated, skilled and qualified EMS providers within its ranks."

Fire Chief John D. Sinclair, IAFC President and Chairman of the Board

"The overriding value is to ensure pediatric issues are 'at the table' when discussions of educational objectives occur."

American Academy of Pediatrics





SUMMARY OF ACCREDITATION REVIEW



Site Visits 148 **Total Programs Reviewed** 299 **Volunteers (Site Visitors & Board Members)** 103 **Volunteer Hours** 35,983 2/100 **Workshops/Attendees States Visited by Staff**

External Organization Meetings / Conferences Attended

NASEMSO Annual and Mid-Year

NAEMSE Annual Symposium

CAAHEP Leadership, Annual and Summer Meetings

NAEMSP Annual Meeting

Eagles Conference

EMS Today

EMS Expo

Texas Educators Summit

ASPA Spring & Fall Meetings

Tennessee EMS Educators

NREMT Scenario Workshop

Prehospital Evidence Based Guidelines Meetings



FINANCIAL REPORT

ASSETS

Financial summary - statement of activities for the fiscal year ended June 30, 2016

| Cash and cash equivalents Temporary investments Accounts receivable, net Prepaid expenses Property and equipment, net | \$ | 841,091 554,660 53,316 154,584 7,426 |
|---|------|---|
| Total assets | \$_ | 1,611,077 |
| LIABILITIES Accounts payable and accrued expenses Deferred annual fees Prepaid site visit fees | \$ | 75,579 561,217 378,000 |
| Total liabilities | \$ | 1,014,796 |
| NET ASSETS Unrestricted | | 596,281 |
| Total net assets | | 596,281 |
| Total liabilities and net assets | \$ | 1,611,077 |
| REVENUES AND OTHER SUPPORT | | |
| Annual fees Program fees Miscellaneous income Site visit fees and reimbursements Investments income | \$ | 1,002,550 261,314 9,654 402,862 1,497 |
| Total revenues and other support | _\$_ | 1,677,877 |
| EXPENSES Program Management and General | \$ | 1,418,854 300,477 |
| Total expenses | \$ | 1,719,331 |
| CHANGE IN NET ASSETS | | (41,454) |
| NET ASSETS, BEGINNING OF YEAR | | 637,735 |
| NET ASSETS, END OF YEAR | \$ | 596,281 |











SITE VISITORS

Azeemuddin Ahmed, MD, MBA Dennis Allin, MD, FACEP Eric Allmon, BS, NRP, NCEE Linda V. Anderson, BSN, RN Paul Arens, MEd, NRP Leaugeay Barnes, MS, NRP, CCEMPT David S. Becker, MA, EMTP, EFO Daniel Benard, EMT-P, I/C, BS D. Eric Bentley, MD, FACS Danny Bercher, PhD, NRP Paul Berlin, MS, NRP Gary Bonewald, MEd, LP Marjorie Bowers, EdD, RN, EMT-P Mark Branon, MA, NRP Tom Brazelton, MD Rebecca Brock, BAAS, LP John Brown, MD, FACEP Lori Burns, MSN, RN Debra Cason, MS, RN, EMT-P Chris Caulkins, MPH, MA, NRP David Cauthen, PsyD, EMT-P, IC John C. Cook, MBA, NRP Megan Corry, EdD, NRP Bradley E. Dean, BBA, NRP James DiClemente, BS, NRP, NCEE Bill Drees, EdD, NRP Bryan Ericson, MEd, RN, NRP Ronald Feller, MBA, NRP Carol Ferguson, RN, MS, EMT-P Charles Foat, PhD, NRP

Rick Foehr, BA, MICP Gregory Frailey, DO, FACOEP Marie S. Gospodareck, MA, NRP Jeff Grunow, MSN, NRP, NCEE David Gurchiek, PhD, EMT-P Rod Hackwith, MSEd, NRP Chris Hainsworth, MS, NRP Sandra Hartley, MS, EMT-P Jason Hemler, MS, EMT-P Brian Hendrickson, MS, EMT-P Sharon Hollingsworth, BS, NRP Lindi Holt, PhD, NCEE, NRP Arthur Hsieh, MA, NRP David Hunt, MPA, NRP Seth Izenberg, MD, FACS Don Jones, BS, NREMT-P Scott Jones, MBA, EMT-P John Karduck, MD Steven Kolar, MBA, RN, LP Gregg Lander, BS, NRP Ron Lawler, BUS, NRP Edward Lee, EdS, NRP, CCEMT-P Glen Mayhew, DHSc, NRP Jeff McDonald, MEd, NRP Rodney McGinnes, MPH, BS, EMT-P Kim McKenna, PhD, RN, EMT-P Michael McLaughlin, PhD, NRP Christopher Metsgar, MS, NRP, CCEMT-P Michael Miller, EdD, NRP Frank Mineo, PhD, EMT-P

Charles H. Morton, BS, EMT-P Steven Moyers, MA, NRP Greg Mullen, MS, NRP Chris Nollette, EdD, NRP, LP Dave Page, MS, NREMT-P Douglas Paris, MEd, NRP Dennis Parker, MA, EMT-P, I/C Karen Pickard, MS, RN, LP Thomas Platt, EdD, NRP Devin Price, MS, MICP Patricia Rand, MA, NRP William Raynovich, EdD, MPH, NRP Richard Robinson, BS, EMT-P Tammy Samarripa, MPH, EMT-P Suzann Schmidt, BA, NRP Mark Simpson, MSN, NRP, CCEMT-P Randolph Spies, BA, NRP Kent Spitler, MSEd, RN, NRP, CPP Andrew Stern, MPA, MA, NRP Joshua Stilley, MD Walt Stoy, PhD, EMT-P Donna G. Tidwell, MS, RN, EMT-P Patricia Tritt, RN, MA Mark Trueman, BS, NRP Denise Wilfong, PhD, NRP Jackilyn E. Williams, RN, MSN Kenneth Williams, MDiv, BS, NRP Scott Williams, BS Douglas K. York, NRP, PS Bill Young, EdD, NRP

"I can't say enough good things about the CoAEMSP. The fact that they are now the largest Committee on Accreditation in the CAAHEP system speaks for itself. They are committed, as is CAAHEP, to using an "evidence-based' approach in developing CAAHEP Standards for the ultimate purpose of improving educational outcomes. In the end, this means more qualified professionals and better care for the American public in their greatest time of need."

Kathleen Megivern, JD, Executive Director, Commission on Accreditation of Allied Health Education Programs (CAAHEP)

SPONSORING ORGANIZATIONS

American Academy of Pediatrics (AAP)

American Ambulance Association (AAA)

American College of Cardiology (ACC)

American College of Emergency Physicians (ACEP)

American College of Osteopathic Emergency Physicians (ACOEP)

American College of Surgeons (ACS)

American Society of Anesthesiologists (ASA)

International Association of Fire Chiefs (IAFC)

International Association of FireFighters (IAFF)

National Association of Emergency Medical Services Physicians (NAEMSP)

National Association of Emergency Medical Technicians (NAEMT)

National Association of EMS Educators (NAEMSE)

National Association of State Emergency Medical Services Officials (NASEMSO)

National Registry of Emergency Medical Technicians (NREMT)

www.aap.org www.the-aaa.org

www.acc.org

www.acep.org

www.acoep.org

www.facs.org

www.asahq.org www.iafc.org

www.iaff.org

www.naemsp.org

www.naemse.org

www.nasemso.org



BOARD OF DIRECTORS



Executive Committee

CHAIR

Thomas B. Brazelton III, MD, MPH, FAAP (AAP)

VICE-CHAIR

Paul A. Berlin, MS, NRP (IAFC)

SECRETARY/TREASURER

James M. Atkins, MD, FACC (ACC)

AT-LARGE MEMBER

Joseph Mistovich, MEd, NRP (NREMT)

IMMEDIATE PAST CHAIR

Douglas K. York, NRP, PS (NAEMT)

Directors

David S. Becker, MA, EMTP, EFO (IAFC) Jeff Beeson DO, LP (ACEP) D. Eric Bentley, MD, FACS (ACS) Lori Burns, MSN, RN (AAA) Deb Cason, MS, RN, EMT-P (NREMT) Richard Ellis, MSEDM, NRP (NAEMT) Gregory Frailey, DO, FACOEP (ACOEP) Drew Harrell, MD, FAEMS (ACEP) Seth Izenberg, MD, FACS (ACS) Murray A. Kalish, MD, MBA (ASA) Bill Mergendahl, JD, EMT-P (AAA) Michael Miller, EdD, NRP (NAEMSE)

Sarah Nafziger, MD, FACEP (NAEMSP) Joe A. Nelson, DO (ACOEP) Jeff Sadtler, BS, EMT-P (IAFF) Barbara Sellers, AS, EMT-P (IAFF) Michael A. Solomon, MD, FACC (ACC) Michael J. Souter, MB, ChB, FRCA, FNCS (ASA) Bridgette Svancarek, MD, FAEMS (NAEMSP) Donna Tidwell, BS, RN, EMT-P (NASEMSO) Patricia Tritt, RN, MA (NAEMSE)

Vacant (AAP) Vacant (NASEMSO)

Susan Fuchs, MD (CAAHEP Liaison)

SUBCOMMITTEE ASSIGNMENTS

Executive

Tom Brazelton, Chair Paul Berlin, Vice Chair James Atkins, Treasurer/Secretary Joe Mistovich, At-Large Member Doug York, Immediate Past Chair

Audit - Finance

James Atkins, Chair David Becker Jeff Beeson Paul Berlin Murray Kalish Michael Solomon Jeff Sadtler

Distance Education

Bill Mergendahl, Chair Paul Berlin Lori Burns Rick Ellis Drew Harrell Michael Miller Sarah Nafziger Murray Kalish Donna Tidwell

Governance

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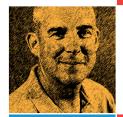
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