

Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions



Site Visit Report

Program Name: Accordance Community College Program Number: 600xxx

Program Location: Centerville, NE Site Visit Date:

Names of the Site Visit Team Members: Johnny Gage, NREMT-P, John McIntyre, M.D.

Instructions

- 1. Blue highlighted rows are section headings.
- 2. For each element of each Standard, based on evidence presented, indicate the degree to which that element meets the Standards as:
 - Met there is sufficient evidence to demonstrate that the program meets the minimum requirement of that element of the Standard.
 - **Not Met** the program has not demonstrated that it meets that element of the Standard and/or there is evidence to show that the program is in violation of that element of the Standard. The team must write a Rationale to document the basis for this finding.
 - Partially Met a portion of the element of the Standard is adequate, but a portion of the element does not meet the Standard. The team must write a Rationale to document the basis for determining the portion that does not meet the Standard.
- 3. Check-off the evidence that was presented. Note: not all evidence listed for a given Standard necessarily needs to be presented by the program for that Standard to be Met.
- 4. Provide a detailed rationale if a *Standard* is marked as Not Met or Partially Met. The team must state the reason(s) as to why that element of the Standard is not in compliance.
- 5. Examples listed in the evidence column are common ways that Standards may be demonstrated as Met. Other mechanisms may be acceptable, and if present, describe in the Rationale/Comments column.
- 6. In the section at the end of this report, respond to the questions/comments contained in the Executive Analysis of the self study report.

This is an **UNOFFICIAL** copy of the report, and should be left with the Program Director. The program will receive an **OFFICIAL** copy of the Site Visit Report and a Findings Letter within 30 days of the site visit. The Findings Letter will be the official document listing the strengths, citations, and recommendations that the program must respond to for factual accuracy.

	Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
I.	Sponsorship [refer to the Executive Analysis (EA)]		Х		
II.	Program Goals				
	A. Program Goals and Outcomes:		Х		
	B. Appropriateness of Goals and Learning Domains				
	Advisory Committee meets at least annually, assists in formulating and revising appropriate goals and learning domains, monitors needs and expectations, and ensures responsiveness to change		X	_X_Reviewed meeting minutes: activities and actions documented _X_Evidence that Advisory Committee reviews program goals and outcomes	
	Advisory Committee includes appropriate representatives: hospital, physicians, employers, other		X	_X_Reviewed membership	
	C. Minimum Expectations				
III.	Resources				
	A. Type and Amount				
	1. Program Resources				
	Faculty		X	_X_Adequate number	
	Clerical/support staff		X	_X_Adequate amount _X_Evidence that program functions are not performed due to lack of clerical support (list) _X_ Adequate student support(e.g. admissions, financial aid, academic advising, counseling)	
	Curriculum		Х	_X_Current national standard _X_Updated and local enhancements	

Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
Finances		Х	_X_Operating & capital budget adequate	
Classroom/laboratory facilities		Х	_X_Adequate size & number for enrolled students	
Ancillary student facilities		X	_X_Adequate facilities to support students (e.g. secure storage for coats/books, quiet study area, location for eating)	
Hospital/clinical affiliations		X	_X_Adequate number and variety to meet experience requirements	
Field internship affiliations		X	_X_Adequate number and variety to meet experience requirements	
Equipment/supplies		X	_X_Adequate quantity, quality, & type _X_ Inspection of labs	
Computer resources		X	_X_Adequate access to internet & LMS _X_ Adequate number of computers accessible to students	
Instructional reference materials		X	_X_Access to program library _X_Onsite resources _X_databases (may be on-line) _X_journals (may be on-line)	
Faculty and staff continuing education		X	_X_Minimum of CE annually for staff _X_Sponsor support for participation	

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Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
Hospital/Clinical Affiliations and Field/Internship Affiliations				
Students have access to adequate numbers of patients, proportionally distributed by illness, injury, gender, age, and common problems encountered for the level of care being trained		X	_X_Evidence of adequate number of patients through tracking system _X_Evidence of adequate distribution of patients through tracking system _X_Clinical sites demonstrate adequate volumeX_Interview with Medical Director _X_Interview with clinical preceptors _X_Interview with field internship preceptors _X_Interview with students	
Hospital /clinical experiences				
Operating Room			_16_ # of hours	
Intensive Care Unit / Coronary Care Unit			_16_ # of hours	
Labor and Delivery			_16_ # of hours	
Pediatrics			_16_ # of hours	
Emergency Department			_48_ # of hours	
Other [please specify in Rationale column]			_112_# of hours	
B. Personnel				
The sponsor must appoint sufficient faculty and staff with the necessary qualifications to perform the functions identified in documented job descriptions and to achieve the program's stated goals and		X		

Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
l			
	Х	_X_ Written Program Director	
	X	_X_ Written Medical Director	
	X	_X_ Written Faculty	
X		_X_Verified by job description _X_Confirmed average number of hours per week _X_Confirmed adequate time allotted to each aspect of program _X_Evidence that Program Director is responsible for: course scheduling, teaching assignments, evaluations, testing, curriculum review & revision, evaluation of faculty & instructors, budgeting, & student recordsEvidence of a preceptor training program,Dates of orientationsRoster of attendees _X_List of preceptors and their locationsEvidence of completion of orientation program by each preceptor	Although the program has contact with preceptors annually, not all preceptors get information on the program standards for student evaluation. The program has no written record of completion of the orientation by the individual preceptors.
	Х	_X_Evidence of resource assessment analysis and	
	Partially Met	Partially Met X X X X	Partially Met X

Standard	Not Met or Partially	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met"
program	Met		action plans _X_Evidence of outcomes analysis and action plans _X_Evidence of periodic assessment & review of evaluations of student, faculty, employer, preceptor, clinical & field internship sites	(additional comments optional)
Long range planning and ongoing development of the program		X	_X_Reviewed/discussed long range plans _X_Evidence of implementation of recommendations received _X_Evidence of curriculum updates	
4) Effectiveness of the program with systems in place to demonstrate program effectiveness		X	_X_Reviewed/discussed evaluation methods of program effectiveness	
5) Cooperative involvement with the Medical Director		X	_X_Communicates with Medical Director on a regular basis X_Evidence that Medical Director has adequate participation in program	
6) Adequate controls to assure the quality of delegated responsibilities		X	_X_Evidence of adequate communication among faculty & documentation of decisions, changes	
b. Qualifications				
Minimum of a Bachelor's degree		Х	_X_Verified by resume _X_Verified by employer	
Appropriate medical or allied health education, training, experience		Х	_X_Verified by resume	
3) Knowledgeable about methods		Х	_X_Verified by discussion	

Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
of instruction, testing, evaluation of students				
Field experience in delivery of out-of-hospital emergency care		Χ	_X_Verified by resume _X_Verified by discussion	
5) Academic training & preparation related to emergency medical services at least equivalent to program graduates		Х	_X_Verified by resume	
6) Knowledgeable concerning current: national curricula, accreditation, registration, and state certification or licensure		Х	_X_Verified by discussion with Program Director _X_Verified by discussion with faculty	
Medical Director				
Responsibilities: responsible for all medical aspects of the program				
Review & approval of educational content for appropriateness & medical content		X	_X_Verified by emails _X_Verified by signature on curriculum	
Review & approval of quality of medical instruction, supervision, & evaluation of students in all areas		X	X_Review program evaluation reviews X_Evidence that Medical Director reviews student, program, clinical, field, graduate, & employer surveys	
3) Review & approval of progress of each student throughout the program: assist in development of corrective measures		Х	_X_Evidence of process for Medical Director review and approval	
Assurance of competency of each graduate in cognitive, psychomotor, & affective domains	X		 Evidence that the Medical Director attests that students meet terminal competencies 	No Terminal Competency sign-offs occur from the medical director attesting to the competence of the graduates in the three learning domains.

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Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
5) Responsible for cooperative involvement with Program Director		Х	_X_Communicates with Program Director on a regular basis	
6) Adequate controls to assure quality of delegated responsibilities		X	_X_Regular communication with co- or Associate Medical Directors _X_Exercise of supervision of Co- or Associate Medical Directors fulfilling their responsibilities _X_Overall verification by Medical Director of duties 2, 3, and 4 for all program graduates, regardless of location	
b. Qualifications				
Currently licensed to practice medicine in the US, authorized in the local region with experience & current knowledge of emergency care		X	_X_Verified by resume _X_State license _X_Verified by interview with _Medical Director	
Adequate training or experience in delivery of out of hospital emergency care including proper care & transport, medical direction, QI in EMS systems	7	X	X_Verified by resume X_Verified by interview with Medical Director	
Active member of local medical community & participate in professional activities		Х	_X_Verified by resume _X_Verified by interview with Medical Director	
4) Knowledgeable about EMS education including professional, legislative, regulatory issues		Х	_X_Verified by interview with Medical Director _X_Verified by discussion with Program Director & Faculty	
3. Faculty				
a. Responsibilities				
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Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
Designated Faculty to coordinate supervision & provide frequent assessments on progress toward meeting requirements in each component of the program		X	_X_Evidence of adequate number of faculty for the number of enrolled students _X_Evidence of adequate faculty assigned to monitor students in clinical & field internship areas _X_Review of schedules for assignments/teaching load	
b. Qualifications				
Knowledgeable in course content & effective in teaching;		Х	_X_Verified by resume _X_Verified by discussion	
Capable through academic preparation, training & experience		X	_X_Verified by resume _X_Verified by clinical & educational credentials	
C. Curriculum				
Ensures achievement of program goals & teaching domains;		X	_X_Reviewed program goals	
Appropriate sequence of classroom, laboratory, clinical, & field internship activities;	2	X	_X_Reviewed schedule for didactic, lab, clinical, field component X_Verified scheduling of components in appropriate sequence _X_Evidence that the majority of the field internship occurs following the didactic & clinical phases	
Instruction based on clearly written course syllabi describing learning goals, course objectives, & competencies;		Х	_X_Reviewed course syllabus _X_Evidence of complete lesson plans for the curricula _X_Evidence of complete list terminal competencies	
Meets or exceeds content & competency of current national		Х	_X_Reviewed schedule _X_Reviewed a sample of	

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Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
standards documents			lesson plans _X_Verified by discussion with employers _X_Academic credit provided	
Tracks number of times each student successfully performs each of the competencies required according to patient age, pathology, complaint, gender, & interventions		X	_X_Reviewed tracking system to verify the system's capability to allow determination of the students meeting required elements _X_Tracking system defines the Minimum requirements for completion or method to determine competency and mechanism to insure that all students meet the standard _X_Tracking system documents the successful performance of the required competencies for each student.	
Field internship provides opportunity to serve as team leader in a variety of ALS situations		X	_X_Reviewed field internship documentation for verification of team leader performance for each student _X_Discussion with students & graduates of team leader performance _X_Discussion with field preceptors of team leader performance _X_Discussion with employers _X_Evidence of consistent preceptor assignments for effective team leader performance _X_Evidence of preceptor training for inter-rater reliability for consistent team	

Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
			leader performance	
D. Resource Assessment				
Annually assess appropriateness& effectiveness of required resources;		X	_X_Completed Resource Assessment Matrix _X_Raw surveys administered to all students at least annually	
Assessment results are the basis for planning & change;		X	_X_Evidence of documentation of implemented changes	
Action plan developed when deficiencies identified		X	_X_Evidence of action plans	
Documentation of action plan and measurement of results		Х	_X_Evidence of review of results of action plans	
IV. Student and Graduate Evaluation/Assessment				
A. Student Evaluation		l .		
1. Frequency & Purpose		l		
Evaluation conducted on a recurrent basis, sufficient frequency to provide students & faculty with valid & timely indications of progress toward achievement of competencies & learning domains		X	_X_Validity and reliability assessments of program exams _X_Feedback mechanisms by program to students indicating progress toward achievement of competencies _X_Evidence of demonstration of skill mastery prior to entering clinical areas _X_Reviewed a sample of exams for content validity, quality _X_Evidence of summative program evaluation at the end of the course of study (at a minimum cognitive &	

Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
			skill, scenario evaluation) _X_Documentation of summative competency assessment for cognitive, clinical, & field components _X_Evidence of adequate clinical & field internship supervision by faculty _X_Reviewed process for grading, remediation	
2. Documentation				
Records maintained in sufficient detail to document learning progress & achievements		Х	_X_Reviewed student records _X_Reviewed attendance policy/records _X_Reviewed grade book	
B. Outcomes				
Outcomes Assessment				
Periodically assesses effectiveness in achieving stated goals & learning domains;			DATA REQUIRED FOR CAAHEP ACCREDITED PROGRAMS ONLY	
Results reflected in the review & timely revision of program			_X_Retention meets threshold X_National or State licensing exam results meet threshold	
Assessments include: exit point completion, graduate satisfaction, employer satisfaction, job placement, state licensing or national registration results			_X_Positive placement meets threshold _X_Reviewed completed graduate and employer surveys _X_Graduate and employer surveys meet thresholds	
2. Outcomes Reporting				
Periodically submits goals, learning domains, evaluations systems, outcomes, analysis of outcomes & appropriate action plan		Х	_X_Evidence of implemented changes, if they were needed	

Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
W. Fata Broadface				
V. Fair Practices				
A. Publications & Disclosure				
Announcements, catalogs, advertising are accurate		X	_X_Reviewed course catalog & materials _X_Verified by discussion with students & graduates	
Make known to applicants and students: accreditation status		Х	_X_Reviewed school catalog _X_Reviewed student handbook, course syllabi for required content _X_Verified by discussion with students & graduates	
accrediting agency contact information	4	X	_X_Reviewed school catalog _X_Reviewed student handbook, course syllabi for required content _X_Verified by discussion with students & graduates	
admissions policies & practices	7	X	_X_Reviewed school catalog _X_Reviewed student handbook, course syllabi for required content _X_Verified by discussion with students & graduates	
technical standards of functional job analysis		X	_X_Reviewed school catalog _X_Reviewed student handbook, course syllabi for required content _X_Verified by discussion with students & graduates	
policies on advanced placement		Х	_X_Reviewed school catalog _X_Reviewed student handbook, course syllabi for required content _X_Verified by discussion with	

Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
			students & graduates	
transfer of credits		Х	_X_Reviewed school catalog _X_Reviewed student handbook, course syllabi for required content _X_Verified by discussion with students & graduates	
credits for experiential learning		Х	_X_Reviewed school catalog _X_Reviewed student handbook, course syllabi for required content _X_Verified by discussion with students & graduates	
number of credits for completion		X	_X_Reviewed school catalog _X_Reviewed student handbook, course syllabi for required content _X_Verified by discussion with students & graduates	
tuition/fees required		X	_X_Reviewed school catalog _X_Reviewed student handbook, course syllabi for required content _X_Verified by discussion with students & graduates	
policies & processes for withdrawal & refunds		X	_X_Reviewed school catalog _X_Reviewed student handbook, course syllabi for required content _X_Verified by discussion with students & graduates	
Make known to students: Academic calendar		Х	_X_Reviewed student handbook, college catalog _X_Reviewed course syllabi _X_Reviewed clinical orientation process _X_Verified by discussion with	

	Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
				students & graduates	
	Student grievance procedure		Х	_X_Reviewed student handbook, college catalog _X_Reviewed course syllabi _X_Reviewed clinical orientation process _X_Verified by discussion with students & graduates	
	Criteria for successful completion of each program segment & graduation		X	_X_Reviewed student handbook, college catalog _X_Reviewed course syllabi _X_Reviewed clinical orientation process _X_Verified by discussion with students & graduates	
	Policies regarding performing clinical work		X	_X_Reviewed student handbook, college catalog _X_Reviewed course syllabi _X_Reviewed clinical orientation process _X_Verified by discussion with students & graduates	
B. Lav	wful and Non-discriminatory Practices:				
adı pra acc	udent & Faculty recruitment, student mission, and Faculty employment actices are non-discriminatory & in cordance with Federal & state quirements;		X	_X_Reviewed student handbook, college catalog _X_Reviewed Faculty handbook	
	iculty grievance procedure known to all id faculty		Х	_X_Interview with paid Faculty _X_Written Faculty grievance policy	
C. Sa	rfeguards				
	ealth & safety of patients, students, & culty is safeguarded;		Х	_X_Evidence of preventative health screening, appropriate immunizations	

Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
			_X_Evidence of post exposure plan	
Students are not substituted for paid staff		X	_X_Evidence that students are always a <i>third rider</i>	
D. Student Records				
Satisfactory records must be maintained for				
Student admission		Х	_X_Review of the sponsoring	
Advisement		Х	institution's student records _X_Reviewed a sample of	
Counseling		Х	student records (e.g.	
Evaluation		X	enrolled, graduated, attrition) for: content, organization, completeness, transcript	
Grades & credits are recorded on a transcript & permanently maintained		X	_X_Reviewed grade book or other records _X_Interview regarding permanent storage	
E. Substantive Change				
Reports substantive changes in a timely manner: change in program status; sponsorship, or administrative personnel	7	X	_X_change in state approval status since submission of self study report _X_change in sponsorship since submission of self study report _X_change in President, Dean, Program Director, Medical Director and/or Clinical Coordinator since submission of self study report	
F. Agreements				
Formal affiliation agreements or MOU's exist between the sponsor and all entities that participate in education of students describing relationship, role, &		Х	_X_Reviewed all agreements for currency, appropriate content, & appropriate signatures	

Standard	Not Met or Partially Met	Met	Possible Evidence May Include	Rationale for "Not Met" or "Partially Met" (additional comments optional)
responsibilities of sponsor and entity				

Response to Questions and Comments in Executive Analysis (EA)

Please respond to ALL of the questions asked and the comments made in the Executive Analysis (EA), including what has changed in the program since the submission of the Self Study Report.

Standard	Executive Analysis Question/Comment	Site Visit Team Response
III.C.	Equipment described as outdated	Current equipment is "older" but still functional, and
		reasonable for use in today's EMS System. The college has
		committed to purchasing updated monitors and advanced
		patient simulators. A plan has been developed to budget for
		updates and replacement on a recurring schedule.
	CE for faculty is inadequate	Faculty must pay for EMS and Educational conferences at
		their own expense. The budget has never included travel for
		faculty development.
	Limited intubation opportunities	Hospital clinical experience is limited in this part of the state.
		The program has committed to increased manikin and
		simulation practice to develop hands on experience.
		Students, graduates, and employers state that this practice
	Wheel of the state	has worked well, with each student graduating with nearly
		100 manikin intubations.
	MD Member of Advisory Committee	Under college policy, faculty members (which include the
		MD) are to be unofficial members of the advisory committee.
		He does attend and participate in each meeting.
	MD with PHTLS / ITLS	MD is certified in ATLS.
	Simulation for Intubation Experience	Seems to be working well. Students, faculty, graduates, and
		employers state that the students advanced airway skills are
		strong.
	Limited Clinical Opportunities	Because of the primarily rural setting of this program, clinical
		opportunities are limed. The college understands that this
		places a burden on the number of students that can
		effectively achieve proper experiences. Weaknesses are
		made up through increased simulation and scenario
		practice.
		The clinical sites work well with students to assure the

	graduates make the most of the available opportunities.
Limited Funding for Faculty Development	Funding for faculty development has not been addressed by
	the college in some time.
No Clerical Support	Minimal clerical support is provided by the Allied Health
	Office. This is limited to general information and the
	dissemination of applications. Although the program faculty
	are doing an excellent job of keeping the program working,
	the addition of at least a part-time clerical assistant would be
	an extreme benefit.



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Summary

Site Visitors: please read the following disclaimer statement at the beginning of the Exit Summation:

"Site visitors do not make an accreditation recommendation nor do they imply what CoAEMSP's recommendation might be. The program will be required to respond to the accuracy of the findings of the site visit at a later date. The CoAEMSP Board may add, delete, modify or request clarification to the site visit summation in its Findings Letter, which is sent to the program following this site visit. CoAEMSP bases its recommendation to CAAHEP on the accreditation record of the program compiled during this review, which includes the Self Study Report, the Site Visit Report, the Findings Letter, and the program's response to the Findings Letter. The Commission on Accreditation of Allied Health Education Programs (CAAHEP) determines the final status of public recognition. These are our [site visitors'] impressions of the strengths and potential *Standards* violations of the program..."

List all strengths and potential *Standards* violations. Potential *Standards* violations include any areas listed as "Not Met". All potential *Standards* violations must be identified by the appropriate *Standard*. Include all potential *Standards* violations identified in the body of the report.

- 1. List the <u>strengths</u> of the program, starting with the *Standards* reference.
 - 1. The adjunct faculty and Program Director are well respected within the communities of interest.
 - 2. The preceptors are well qualified, experienced and excellent mentors for the students.
 - 3. The College has demonstrated consistent unwavering support for the Program.
 - 4. The classroom facilities are excellent.
 - 5. There is strong support from the clinical and field sites.
- 2. List all potential Standards violations noted in this report, starting with the Standards reference.
 - III. Resources
 - B. Personnel
 - 1. Program Director
 - a. Responsibilities

The program director must be responsible for all aspects of the program, including, but not limited to:

1) the administration, organization, and supervision of the educational program,

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Although the program has contact with preceptors annually, not all preceptors get information on the program standards for student evaluation. The program has no written record of completion of the orientation by the individual preceptors.

III. Resources

- B. Personnel
 - 2. Medical Director
 - a. Responsibilities

The medical director must be responsible for all medical aspects of the program, including but not limited to:

4) assurance of the competence of each graduate of the program in the cognitive, psychomotor, and affective domains,

No Terminal Competency sign-offs occur from the medical director, attesting to the competence of the graduates in the three learning domains.

3. List the names of those present at the summation conference.

Dr. Donald Stewart, President
Elizabeth Rogers, Dean, Allied Health Programs
Helen Anderson-Roberts, Clinical Coordinator
Daniel Thompson, Program Director
Dr. William Bell, Medical Director
Johnny Gage, Site Visitor
John McIntyre, Site Visitor

Additional Comments:

- 1. Further comments and suggestions not previously stated and referenced to a *Standard*. These are comments made by the Site Visitors and may not reflect *Standards* violations or recommendations by CoAEMSP. Comments must not reflect personal biases and must be based on objective observations of the program visited.
 - 1. Faculty would benefit from, and should be is encouraged to attend, state and regional EMS conferences. Suggest they also send PD and select faculty to NAEMSE conferences on a rotation basis. Grant funding should be sought to assist in the faculty development on regional and national levels.
 - 2. The program utilizes the PowerPoint slides as supplied by the publisher, with no adjustment or addition. The program is encouraged to update and modernize this material to cover area specific and updated material. For the most part, these PowerPoint presentations serve as the daily lesson plans. The program should consider <u>Succession Planning</u> by creating a more structured daily lesson format to assure the quality of the presentation in the even the principle lecturer is not available.

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3. Suggest that the program begin to use the *Terminal Competency Form* from the CoAEMSP website, either as is or as a guide for development of a terminal competency sign-off record.

SIGNA	ATURES
Site Visit Report prepared by:	
Signa	ture
Team Captain:	Team Member:
Signature Date Johnny Gage, BS, MEd, NREMT-P	Signature Date John McIntyre, MD
Print name (949) 555-2597	Print name (339) 555-6448
Phone number jonathan-gage@cscc.edu	Phone number jfmcintyre@bgh.com
Additional Team Member / Observer	Email
Signature	-
Print name	-
Phone number	
Email	

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Evaluated/Reviewed

Resources
X Library resources
X Resource texts (required and available)
X Classroom, lab, office areas
X Equipment at field internship agencies
Administrative materials
X Budget (current and next fiscal year)
X_ Student handbook (policies and procedures)
X_ Faculty handbook
X_ Medical Director agreement
X Signed, current affiliation agreements with all clinical and field internship sites
X Attendance records
X Course schedule for each component
X_ Clinical rotation schedules
X Tracking mechanism for patient contacts and skill events
X Evaluations of Faculty by students, peers, and administrators
X Advisory Committee meeting minutes
X Faculty meeting minutes
X Student name badges
X Method of evaluating student health
Curriculum materials
X Lesson plans
X Exams
X Course syllabi
Student records
X Sample of student academic transcripts (includes record of academic progress) and achievement of terminal competencies
X Sample of student clinical experience documentation
X Grade sheet
X Counseling records
Drogram accessment
Program assessment V Documentation of Olymprocesses
X Documentation of QI processes

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