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Committee on Accreditation
of Educational Programs for the EMS Professions

August 12, 2011

TO: Sponsoring Organizations

FROM: Doug York, NREMT-P, PS, Chair, Board of Directors

RE: Highlights from the CoAEMSP Quarterly Board Meeting – August 5-6, 2011

The Committee on Accreditation of Educational Programs for the EMS Professions (CoAEMSP) Board of Directors met August 5-6, 2011, in Washington, D.C. The highlights from the meeting:

1. **Program Actions.** Reviewed 53 programs for initial and continuing accreditation.
2. **Accreditation Workshops** continue to be offered and well received. Attendance increases at each workshop.
3. **Treasurer's Report.** Continue to monitor the challenges of income (program fees) and expenses and the unknown factor of anticipating applications from Paramedic programs. New programs are a significant budget hit for the first two years. At the five year point programs are at a break-even point or slightly negative point. Investigating ways to decrease meeting expenses.
4. **Marketing + Communications.** Produce monthly e-newsletters to Paramedic programs, State EMS Offices, and site visitors. Produce quarterly e-newsletters to site visitors. Exhibit at national conferences promoting EMS education and accreditation.
5. **NAEMSE.** Offering educational sessions during the National Association of EMS Educators (NAEMSE) annual symposium in September.
6. **IAFF.** International Association of Fire Fighters (IAFF) has requested to become a sponsor of the CoAEMSP. The current sponsors must provide a letter of support before the IAFF becomes a sponsor.
7. **Pediatric Study.** The Pediatric Subcommittee was formed to study pediatric patient encounters and make a recommendation to the Board what the minimum number of patient assessments a student should have prior to graduation in the various pediatric age subgroups.

8. **Interpretations of the CAAHEP Standards.** Approved more interpretations of the *Standards*, including:
- a. *Sponsorship*: Articulation agreement
 - b. *Program Goals*: Advisory Committee composition, specifically what is considered a key governmental official and a public member
 - c. *Resources*: Program minimums.
The program must set and require minimum numbers of patient contacts for each listed category. Those minimum numbers must be reviewed and approved by the Medical Director and the Advisory Committee with documented endorsement of those numbers. The tracking documentation must then show those minimums and that each student has met them. There must be periodic evaluation that the established minimums are adequate to achieve competency.
 - d. *Resources*: Airway Management. See next numbered item.

For the current CoAEMSP Interpretations of the CAAHEP *Standards*, visit <http://coaemsp.org/Standards.htm>

9. **Airway Competency.** In August 2010 a task force was appointed to study intubation, with the goal to make a recommendation to the Board on the number of recommended intubations a student to achieve before graduating from a CAAHEP-accredited program. What follows is the recommendation made by the Intubation Subcommittee, and subsequent unanimous approval by the Board.

The paramedic student should establish airway competency by mastering the following:

1. Adequately assess, establish, and maintain the airway
2. Perform competent basic life support (BLS) for airway management
3. Prepare and perform advanced airway management
4. Demonstrate psychomotor skill proficiency
5. Perform in various environments: hospitals, ambulatory centers, and the field
6. Verify correct placement of airway devices utilizing adjuncts: direct visualization, chest sounds, abdominal sounds, misting tube, end-tidal CO₂, O₂ saturation, changes in LOC, skin color, vital signs, etc.
7. Demonstrate critical thinking and clinical judgment about backup plans and decision making

The paramedic student should be successful in a combination of live intubations, high definition simulations, low fidelity simulations, and cadaver labs in all age brackets. High definition simulation, defined by SIM Man, Meti Man, etc., is highly recommended but optional. Low fidelity simulation is defined by traditional simulation heads, such as Laredal, etc. Paramedic students should have exposure to diverse environments, including but not limited to hospital units (e.g. operating rooms, emergency departments, intensive care units), ambulatory centers, and out of hospital settings (e.g. ambulance, field, home) and laboratories (floor, varied noise levels, varied lighting conditions). The paramedic student should have **no fewer than fifty (50) attempts at airway management across all age levels, with a 90% success rate utilizing endotracheal intubation models in their last ten (10) attempts.** The paramedic student needs to be **100% successful in the management of their last twenty (20) attempts at airway management.** The majority of airway attempts should be emphasized with live intubations, realistic simulation labs, or both. As with all other required skills, terminal competency needs to be validated by the program medical director's signature.

10. **Electronic Records Review.** More Paramedic education programs are moving toward electronic student records; however, there are no guidelines for the approach to review these records during an accreditation site visit. Guidelines to review electronic records was approved:

Purpose

To provide a framework for the review of student records when they are in electronic format for an accreditation site visits.

Problem

Electronic record systems, while encouraged, provide some challenges for site visitors as the visitors may not have access to the records, may not be proficient at reviewing electronic records, or may not understand the structure of the record system.

Responsibilities of the Program

In advance of the site visit, the program must supply the site visit team with a complete list of students who completed the last full program prior to the site visit. The program also sends a list of students who are incomplete or who are no longer in the program. CoAEMSP will select the names of three students successfully completing the program plus one or more of the students who did not complete the program. The program can choose one of the following four methods to allow the site visit team to review the electronic records.

Method 1 In advance of the site visit, the school can provide the site visit team with an ID and password that will allow access to the complete student record. The school must provide instructions to find each portion of the student record.

Method 2 The school can provide an electronic copy of the selected records by email, thumb drive, or CD. The school must provide instructions to find each portion of the student record.

Method 3 The school can allow the team to access the files at the time of the visit. If this option is used someone who understands the filing system must be present to assist the team in accessing various portions of the records.

Method 4 The school can print out the complete records on paper of the requested student files and either send them to the team in advance or have the paper records at the time of the site visit.

Accept electronic signature as long as program has a policy and password protected.

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| 11. Next Meetings: | November 4, 2011 | via GoToMeeting |
| | February 3-4, 2012 | San Antonio |
| | May 4, 2012 | via GoToMeeting |
| | August 3-4 | Washington, DC |