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August 15, 2012

TO: Sponsoring Organizations

of Educational Programs for the EMS Professions

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

RE: Highlights from the CoAEMSP Quarterly Board Meeting – August 3-4, 2012

The Committee on Accreditation of Educational Programs for the EMS Professions (CoAEMSP) Board of Directors met in Washington, DC on August 3 and 4, 2012. The highlights from the meeting:

- 1. **Program Actions.** Reviewed 46 programs for initial accreditation, continuing accreditation, and progress reports.
- 2. **By the numbers.** Currently there are 322 CAAHEP accredited Paramedic programs and 66 programs hold the CoAEMSP Letter of Review. The LoR is the precursor to CAAHEP accreditation in order for programs to meet the NREMT mandate.
- 3. **Definition of Airway Competency.** For 18 months a task force consisting of CoAEMSP Board members and non-Board members obtained input from program directors, researched the literature, and vetted EMS focused organizations. The result of its due diligence and hard work is the CoAEMSP's **recommendation on intubation**:

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 50 attempts at airway management across all age levels, with a 90% success rate utilizing endotracheal intubation models in their last 10 attempts. The paramedic student needs to be 100% successful in the management of their last 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.



August 3-4, 2012

- 4. Accreditation Workshops. CoAEMSP will conduct an accreditation workshop in Orlando on August 6-7. This will be the last workshop prior to the NREMT's new requirement goes into effect January 1, 2013.
- 5. Elections. Officers were elected, which comprise of the Executive Committee. The officers for 2013-2014 are:

Chair	Doug York
Vice-Chair	Gordy Kokx
Secretary-Treasurer	James Atkins
At-Large EC Member	Tom Brazelton

- New Board Members Welcomed. At its annual meeting in April, the CAAHEP Commission voted into membership the International Association of FireFighters (IAFF). This meeting was their first official meeting as a sponsor of the CoAEMSP; Manny Chavez represented them. Dr. Bridgette Svancarek replaced Dr. Paul Sirbaugh for the National Association of EMS Physicians (NAEMSP).
- Standards Interpretations. Several interpretations to the CAAHEP Standards were drafted, resources, field internship, student evaluation & assessment, and student documentation. For a complete list, visit <u>http://www.coaemsp.org/Documents/Standards_Interpretations_CoAEMSP.pdf</u>.
- 8. Distance Education Task Force. Looked at what currently accredited programs are doing regarding distance learning, concerns and standards available; recommend DE interpretations are incorporated into CAAHEP Standards with next update; suggestion to announce via e-Newsletter the CoAEMSP is examining distance education and ask programs who believe they have a good distance education concept to send in their documentation for review and best practices.
- 9. **Approved Site Visitor Consulting Policy.** To maintain no conflict of interest, the Board approved a policy for site visitors doing consulting.

Consultation by non-board member site visitors - either paid or unpaid - is not specifically prohibited by the CoAEMSP. The practice of consulting is at the sole discretion of the individual doing the consultation and is considered outside of the CoAEMSP/CAAHEP accreditation process. Site Visitors cannot visit the program as CoAEMSP representatives of which they have consulted at any time. Consultation with programs that he or she has visited as a site visitor is also prohibited. Site visitors may not use their role as a CoAEMSP/CAAHEP site visitor to promote themselves.

10. Next Meetings:

via GoToMeeting
TBD
teleconference
TBD
teleconference

The CoAEMSP holds its quarterly Board meetings the first full weekend of the month Friday or Friday/Saturday in February, May, August, and November.

The mission of the CoAEMSP, under the auspices of CAAHEP, is to continuously improve the quality of EMS education through accreditation and recognition services for the full range of EMS professions.

CAAHEP = Commission on Accreditation of Allied Health Education Programs. CAAHEP accredits Paramedic programs, as well as 22 more professions. <u>www.caahep.org</u>. CoAEMSP operates under the auspices of CAAHEP.

For a complete list of the 14 sponsors of the CoAEMSP, visit http://www.coaemsp.org/Sponsors.htm.