Fundamentals of Accreditation for the EMS Professions
hosted by the CoAEMSP

The Facilitators

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Topics we will cover...

- Overview of Accreditation
- Available Resources
- Transparency & Confidentiality
- Overview of Standards
- Self-Study Report
- Policies & Procedures
- Administrative Processes
- Site Visits
What is accreditation?

“Accreditation” is review of the quality of higher education institutions and programs. In the United States, accreditation is a major way that students, families, government officials, and the press know that an institution or program provides a quality education. – CHEA

The importance of programmatic accreditation
Accreditation is an everyday activity

www.chea.org

www.caahep.org

www.coaemsp.org
Commission on Accreditation of Allied Health Education Programs

established in 1994

largest programmatic/specialized accreditsor in the health sciences field in the U.S.

2200 entry-level educational programs

32 health science professions

25 Committees on Accreditation (CoA)
### CAAHEP CoA’s: To Name a Few

1. Advanced Cardiovascular Sonography  
2. Anesthesia Technology  
3. Anesthesiologist Assistant  
4. Art Therapy  
5. Assistive Technology  
6. Cardiovascular Technology  
7. Clinical Research Professional  
8. Cytotechnology  
9. Diagnostic Medical Sonography  
10. **Emergency Medical Services – Paramedic**  
11. Exercise Physiology  
12. Exercise Science  
13. Inclusive Rehabilitation Studies  
14. Intraoperative Neurophysiologic Monitoring  
15. Kinesiotherapy  
16. Lactation Consultant  
17. Medical Assisting  
18. Medical Illustration  
19. Neurodiagnostic Technology  
20. Orthoptics  
21. Orthotic and Prosthetic Assistant  
22. Orthotic and Prosthetic Technician  
23. Orthotist/Prosthetist  
24. Pedorthist  
25. Perfusion  
26. Personal Fitness Training  
27. Polysomnographic Technology  
28. Recreational Therapy  
29. Respiratory Care  
30. Specialist in Blood Bank Technology / Transfusion Medicine  
31. Surgical Assisting  
32. Surgical Technology  

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**established in 1978**

evaluate a program’s observance of accreditation standards

observe CAAHEP’s policies & procedures; adopt complementing practices

conduct site visitor training

focus on quality assurance in review of programs

observe due process in review of accreditation applications
# of Programs by Sponsor Type

- **Hospital Based, 75, 10%**
- **Military, 2, 0%**
- **Government, 49, 7%**
- **Consortium, 54, 7%**
- **Post Secondary, 553, 78%**

### Programs by Sponsor Type

- **Post Secondary**
  - Vocational
  - Community College
  - Junior College
  - Technical College
  - College / University

### Government
- Ambulance Services
- County/Municipality
- Fire Services

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- Ambulance Services
- County/Municipality
- Fire Services

### Consortium
- 54
- 7%

### Government
- Ambulance Services
- County/Municipality
- Fire Services

### Hospital Based
- 75
- 10%

### Military
- 2
- 0%

### Consortium
- 54
- 7%

### Government
- Ambulance Services
- County/Municipality
- Fire Services

### CoAEMSP Letter of Review Process and CAAHEP Accreditation Process for Paramedic Educational Programs

**Letter of Review Process**

1. Program submits Letter of Intent Application
2. Program Director selects CoAEMSP Accreditation Workshop
4. CoAEMSP Conducts Peer Review Site Visit
5. If all core elements are found, Program receives CoAEMSP Accreditation of Review Letter
6. Program submits 1st cohort under the CoAEMSP status
7. Program evaluates if 1st cohort meets accreditation standards
8. Program submits the SSR no later than 8 months after 1st cohort graduates
9. CoAEMSP reviews SSR and conducts Program site visit
10. Program responds to the SSR
11. Program submits the SSR to the accreditation process
12. Program makes final determination of accreditation status
13. Program submits SSR to CAAHEP
14. Program becomes accredited
15. Program submits annual report
16. Begin annual report
17. Progress reports to accreditation
18. Accreditation Process
19. CAAHEP approves Program's accreditation status
Letter of Review Process

1. PROGRAM submits LoR Application
2. PROGRAM DIRECTOR attends the Fundamentals of Accreditation Workshop
3. PROGRAM submits Letter of Review Self Study Report (LSSR)
4. CoAEMSP conducts preliminary site visit
5. If all core elements are met, CoAEMSP grants Letter of Review status
6. PROGRAM enrolls its 1st cohort under the LoR status
7. PROGRAM graduates its 1st cohort under the LoR status

begin Annual Reports

Accreditation Process

1. PROGRAM submits the CSR
2. PROGRAM responds to the Site Visit Findings Letter
3. CoAEMSP Board Review Team reviews Program's accreditation record
4. CoAEMSP Board makes final determination of accreditation status
5. CAAHEP makes final determination of accreditation status
6. CAAHEP sends accreditation record and sends recommendation to CoAEMSP
7. PROGRAM graduates its 1st cohort under the LoR status
8. PROGRAM submits the LSSR no later than 6 months after 1st cohort graduates
9. CoAEMSP reviews SSIR and conducts PROGRAM site visit

Progress Reports, or approval?
Available Resources

www.caahep.org
www.coaemsp.org
The four most important resources

- CAAHEP Standards
- CoAEMSP Interpretations of CAAHEP Standards
- CoAEMSP Policies & Procedures
- Resource Library

Transparency & Confidentiality
FERPA

While the Family Educational Rights and Privacy Act (FERPA) generally requires written permission from the parent or eligible student in order to release any information from a student's education record, FERPA allows disclosure without consent to accrediting organizations carrying out their accrediting function (34 CFR § 99.31).
Overview of CAAHEP Standards

Purpose of the Standards

I. Sponsorship – Who will sponsor the program?

II. Program Goals – What are the goals of the program?

III. Resources – What resources are needed to achieve those goals?

IV. Student and Graduate Evaluation/Assessment – When will we know if the program is achieving its goals?

V. Fair Practices – What are the rules the program must follow to protect itself, the students, and the public?
Sponsorship

at least one of the following
1. post-secondary academic institution
2. foreign post-secondary academic institution
3. hospital, clinic or medical center
4. governmental educational or governmental medical service
5. branch of the United States Armed Forces or other Federal agency

must award a minimum of a diploma/certificate

Consortium Sponsor

Entity consisting of 2 or more members that exists for the purpose of operating an educational program.

At least one member of consortium must meet the requirements of a sponsoring institution as described in I.A.

Responsibilities of each member are clearly documented in a formal affiliation agreement or MoU, including governance and lines of authority.
Pathway to Credit

A sponsoring institution must either **award credit** for the program or have an **articulation agreement** with an accredited post-secondary institution.

Articulation Agreement

- agreement between an educational institution and a training facility
- provides college credit to individuals completing the program
- allows students to receive college credit if they enroll at the educational institution
- composed as an MoU or transfer agreement
Standard I: Sponsorship

1. Evidence of institutional accreditation (letter, certificate, website screenshot)
2. State Office of EMS approval (official letter, email)
3. Sample certificate of completion or diploma
4. Articulation agreement
5. Organizational chart of the sponsor
6. Consortium agreement (if applicable)
7. Corporate organizational chart (if applicable)
8. Notification of national accrediting agency of consortium (if applicable)
9. Letter from CEO/President of sponsorship of consortium (if applicable)
10. Consortium governing body meeting minutes for past 3 years (if applicable)
Advisory Committee

- meet at least annually
- assist with formulating and revising goals and learning domains
- monitor needs and expectations
- ensure program responsiveness to change
- review and endorse the program required student minimum competency numbers

Communities of Interest

- students
- graduates
- faculty
- sponsor administration
- hospital/clinic representatives
- employers
- police and/or fire services with a role in EMS services
- key governmental officials
- physicians
- public
Advisory Committee

Advisory Committee Roster

Advisory Committee Meeting Minutes
- Recommend the CoAEMSP tool
- Review sample on CoAEMSP website

Minimum Expectation

The program must have the following goal defining minimum expectations
- Paramedic: “To prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains with or without exit points at the Advanced Emergency Medical Technician and/or Emergency Medical Technician, and/or Emergency Medical Responder levels.”
Clinical & Field Internship Affiliations

- access to adequate numbers of patients
- proportionally distributed by age-range, chief complaint and interventions
- !current & fully executed Affiliation Agreements / Contracts

Standard II: Program Goals

1. Advisory Committee meeting minutes (most recent three years)
2. Programmatic organizational chart (program personnel and faculty, credentials, position)
3. Published minimum goal expectation statement (screenshot)
Preceptor Orientation & Training

Orientation:
Hospital / Field Experience
• key individuals in the hospital and field experience
• documentation of key individual preceptor orientation
• evaluation of the experience and preceptors

Training:
Capstone Field Internship
• each capstone field internship preceptor
• documentation of individual preceptor training
• evaluation of each active field internship preceptor

Clinical & Field Experience
Orientation must include:
• purposes of the student rotation (minimum competencies, skills, behaviors)
• evaluation tools
• contact information for the program

Capstone Field Internship
Training must include:
• purposes of the student rotation (minimum competencies, skills, behaviors)
• evaluation tools
• contact information for the program
• definition of Team Lead
• required minimum number of Team Leads
• criteria of evaluation of students
• coaching & mentorship techniques
Preceptor Training

Best Practice

1. administration, organization, and supervision
2. quality review and improvement
3. long range planning
4. effectiveness of program
5. involvement with medical director

Program Director Responsibilities
Medical Director Responsibilities

- review and approve the
  - educational content
  - required minimum numbers
  - evaluation instruments
  - progress of each student throughout the program
  - assist with corrective action
- ensure the competence of each graduate
- involvement with the program director
- effectiveness of delegated activities to another qualified physician
Terminal Competency

- document competency achievement in each domain for each student
- joint responsibility of Program Director & Medical Director
- Medical Director must attest to terminal competence

Associate Medical Director
- delegated specified responsibilities by Medical Director

Assistant Medical Director
- Medical Director or Associate Medical Director cannot legally provide supervision for out-of-state location(s)

local  out-of-state
Medical Director Responsibilities

**Best Practice**

1. 
2. 
3. 

Lead Instructor

- minimum of an associate’s degree
- coordinates the course of study
- required for a satellite campus

*not a required position, but*

*if you have an individual fulfilling the role, they need to be identified*
Curriculum – Sequencing, Syllabi

• must ensure the achievement of program goals and learning domains

• instruction must be an appropriate sequence of classroom, laboratory, clinical/field experience, and field internship activities

• capstone occurs after all core clinical content

Syllabus

• course description
• course objectives
• methods of evaluation (e.g., test, quizzes, projects, research papers)
• topic outline
• competencies required for graduation
Establish Minimum Competencies

Table 1 – Ages
Table 2 – Conditions
Table 3 – Skills
Table 4 – Field Experience & Capstone Field Internship
Table 5 – EMT Skills Competency

Capstone Field Internship Team Leads must...

- allow for progression to team leader
- require minimum number of team leads
- reflect depth and breadth of Paramedic profession (BLS and ALS calls)
- occur after completion of all core didactic, laboratory, and clinical experience

student must
- function as Team Leader
- accompany transport team to higher level of care

CoAEMSP Student Minimum Competency (SMC)

<table>
<thead>
<tr>
<th>CoAEMSP</th>
<th>Formative Exposure in Clinical or Field Experience</th>
<th>Column 2 Exposure in Clinical or Field Experience and Capstone Field Internship</th>
<th>Total</th>
<th>Minimum Recommendations by Age*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Conducts patient assessment (primary and secondary assessment), performs patient-specific procedures, and ensures availability of equipment and supplies</td>
<td>Conducts a patient assessment and develops a management plan for evaluation of each patient with normal to no assistance for evaluation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Pediatric patients with pathologies or complaints

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>15</td>
<td>15</td>
<td>30</td>
</tr>
</tbody>
</table>

Adult

<table>
<thead>
<tr>
<th>Minimum Exposure</th>
<th>Age</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Neonate (birth to 30 days)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Infant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Toddler</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Pre-school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>School Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Adolescent</td>
<td>(13 to 18 years)</td>
<td></td>
</tr>
</tbody>
</table>

Geriatric

<table>
<thead>
<tr>
<th>Minimum Exposure</th>
<th>Age</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Geriatric</td>
<td>(60 to 65 years of age)</td>
</tr>
<tr>
<td>2</td>
<td>Older</td>
<td>(65 years of age)</td>
</tr>
</tbody>
</table>

Totals: 54 54 108
Resource Assessment

Surveys
Graduate
Employer
Student
Personnel

SurveyMonkey
- Have a PAID SurveyMonkey account?
- Email your USERNAME to kathryn@coaemsp.org

Google Forms
- Resource Library
  > Instruments & Forms
  > right column under Google Forms Links
Resource Assessment

Best Practice

1. Completed Resource Assessment Matrix (RAM) for the most recent three years
2. Student Minimum Competency (formerly known as Appendix G) (approved by Medical Director and endorsed by the Advisory Committee)
3. Syllabi for each Paramedic core professional course (does not include general education courses or courses that are prerequisite to the Paramedic core)
4. Personnel verification document from CoAEMSP
5. Job descriptions for: Program Director, Lead Instructor, Medical Director (include Associate and Assistant if applicable), any other faculty
6. CoAEMSP Program Director Responsibilities form
7. Medical Director CV/resume
8. CoAEMSP Medical Director Responsibilities form
9. CV/resume for each full-time faculty member
10. Clinical affiliate agreement for each affiliate
11. Clinical and field experience Preceptor orientation materials
12. Capstone field internship Preceptor training materials
Student Evaluation – Frequency and Purpose

• conducted on a recurrent basis
• provide students and program faculty with indications of students’ progress

Summative Comprehensive Final Evaluation

• must be a summative comprehensive final evaluation
• summative program evaluation is a capstone event that occurs when the capstone field internship is nearing completion
• must include cognitive, psychomotor and affective domains
Commercial Testing Product

- Program must demonstrate, through the program's own item analysis, that the test items used are valid and reliable for the program.
- Quoting the national validity and reliability information does not adequately establish that the test items are valid and reliable for curriculum of the program.

The CoAEMSP does not endorse, promote, or comment on any product or vendor.

Student Evaluation – Documentation

- document learning progress
- program required minimum competencies in all learning domains
  - didactic
  - laboratory
  - clinical and field experience/internship
  - capstone field internship
Tables and Summary Tracking Report

- The individual Tables 1-5 are implementation tools for program use
- Summary Tracking (Tab 7) is reported to CoAEMSP (only showing Tables 1 & 2 below)

Table 1

<table>
<thead>
<tr>
<th>Ages</th>
<th>[Only Report Successful Attempts]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pediatric (0-6 years)</td>
<td>Adult (18+ years)</td>
</tr>
<tr>
<td>10</td>
<td>50</td>
</tr>
</tbody>
</table>

Table 2

<table>
<thead>
<tr>
<th>Pathology or Complaint</th>
<th>[Only Report Successful Attempts]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tracheal aspiration</td>
<td>Pediatric (0-6 years)</td>
</tr>
<tr>
<td>0</td>
<td>6</td>
</tr>
</tbody>
</table>

Enter each student's name
Enter program's required minimums

Do you have any students who you authorize to test with the NREMT, who have not gone through the full, regular Paramedic program (i.e., received advanced placement)?
Fair Practices

- sponsor’s institutional & program’s accreditation status
- admissions policies
- technical standards
- policies on advanced placement, transfer of credits, and credits for experiential learning
- number of credits required for graduation
- tuition/fees and other costs

Statement for Programs with the CoAEMSP Letter of Review (LoR)

"The [name of sponsor] Paramedic program has been issued a Letter of Review by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP). This letter is NOT a CAAHEP accreditation status, it is a status signifying that a program seeking initial accreditation has demonstrated sufficient compliance with the accreditation Standards through the Letter of Review Self Study Report (LSSR) and other documentation. Letter of Review is recognized by the National Registry of Emergency Medical Technicians (NREMT) for eligibility to take the NREMT’s Paramedic credentialing examination(s). However, it is NOT a guarantee of eventual accreditation.

To contact CoAEMSP:
214-703-8445
www.coaemsp.org"
Statement for Programs with CAAHEP Accreditation

“The [name of program] is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

Commission on Accreditation of Allied Health Education Programs
727-210-2350
www.caahep.org

To contact CoAEMSP:
214.703.8445
www.coaemsp.org”

Fair Practices – Publications of Outcomes

- make public the program’s outcomes
- retention
- positive placement
- NREMT or State Exam
• health and safety of patients, students, faculty, and other participants
• educational
• **students must not be substituted for staff**

### Fair Practices – Safeguards

<table>
<thead>
<tr>
<th>Standard V: Fair Practices</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Program information screenshots for:</td>
</tr>
<tr>
<td>a. Sponsor Institutional Status</td>
</tr>
<tr>
<td>b. Program accreditation status statement (if applicable)</td>
</tr>
<tr>
<td>c. Admission policies</td>
</tr>
<tr>
<td>d. Technical standards</td>
</tr>
<tr>
<td>e. Advanced placement</td>
</tr>
<tr>
<td>f. Transfer of credits</td>
</tr>
<tr>
<td>g. Experiential learning</td>
</tr>
<tr>
<td>h. Credits required</td>
</tr>
<tr>
<td>i. Program costs</td>
</tr>
<tr>
<td>j. Withdrawal policy</td>
</tr>
<tr>
<td>k. Refund policy</td>
</tr>
<tr>
<td>l. Academic calendar</td>
</tr>
<tr>
<td>m. Student grievance</td>
</tr>
<tr>
<td>n. Completion certificate</td>
</tr>
<tr>
<td>o. Graduation criteria</td>
</tr>
<tr>
<td>p. Student work policy</td>
</tr>
<tr>
<td>q. Published outcomes</td>
</tr>
<tr>
<td>r. Faculty grievance</td>
</tr>
<tr>
<td>s. Faculty recruitment</td>
</tr>
<tr>
<td>t. Student admission</td>
</tr>
<tr>
<td>u. Faculty employment</td>
</tr>
<tr>
<td>v. Safeguard</td>
</tr>
<tr>
<td>w. Student responsibilities</td>
</tr>
<tr>
<td>x. Checkoff tool</td>
</tr>
<tr>
<td>y. Scope of responsibilities</td>
</tr>
<tr>
<td>z. Transcript location</td>
</tr>
</tbody>
</table>

2. Affiliation Agreements (fully executed)
3. Out of State approval for affiliations (if applicable)
Satellite

- off-campus location(s) that are made known to individuals outside the sponsor
- must offer all the professional didactic and laboratory content of the program.
- included in the CAAHEP accreditation of the sponsor
- function under the direction of the Key Personnel of the program
Satellite & Alternate Locations

<table>
<thead>
<tr>
<th>Resource</th>
<th>Satellite</th>
<th>Alternate Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Classroom</td>
<td>Yes</td>
<td>Not required</td>
</tr>
<tr>
<td>Skill lab space</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Office space</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>AV equipment</td>
<td>Yes</td>
<td>Not required</td>
</tr>
<tr>
<td>Medical equipment and supplies</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Office supplies</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Internet</td>
<td>Yes</td>
<td>Not required</td>
</tr>
<tr>
<td>Records storage (temporary)</td>
<td>Yes</td>
<td>Not required</td>
</tr>
<tr>
<td>Lead Instructor assigned to location</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Additional faculty based on the number of students</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Onsite coordinator</td>
<td>As needed</td>
<td>Yes</td>
</tr>
<tr>
<td>Additional clinical and field sites</td>
<td>If required by distance and availability</td>
<td>No</td>
</tr>
<tr>
<td>Didactic delivery*</td>
<td>Onsite or remote delivery</td>
<td>Students attend main campus or remote delivery</td>
</tr>
<tr>
<td>RAM required</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

*Remote delivery of didactic content may be provided via synchronous or asynchronous methods.

Satellite Campuses

regardless of location, the educational program delivered to the students must be the same
Alternate Locations

- separate from the main campus
- where a portion of the program is conducted
  - may include skill practice or testing, periodic lecture or other learning activity, or other student assessments

An alternate location is not a satellite

Educational Methods

- variety of education methods
- regardless of the methodology used, the program is evaluated based on the same standards
Simulation

- simulations can be integrated to help achieve competency
- at least 2 live patients in each of the pediatric age subgroups is required
- simulation cannot be used for capstone field internship team leads

www.coaemsp.org

> Resource Library
> Program Minimum Numbers
> CoAEMSP & NREMT Simulation Guidelines and Recommendations
Tips for completing the Self-Study Report

- answer the question
- follow tabs in order
- follow the instructions
- name the exhibits correctly

Getting Started:

an Action Plan for CAAHEP Accreditation

Self-Study Report Due Date: ________________

Often the hardest part of any project is organizing a plan to get started. The action plan that follows breaks the activities into phases and identifies the activity and associated resource, such as the location on the CoAEMSP website that will provide the necessary information.

1. Once notification is received from CoAEMSP that the accreditation process has begun, the Program typically has six (6) months to submit the self-study report and supporting documents.
2. The Program is encouraged to complete all materials and ready for final review by all appropriate parties within five (5) months of notification (one month before the date due to CoAEMSP).
3. It is the Program Director’s responsibility to obtain all necessary information for submission. If action items are delegated to other staff, the Program Director must monitor progress and ensure completion.
4. This template uses the convention of -6, -5, etcetera to designate the month the activity should be completed using the CoAEMSP due date as 0. All documents are to be completed by the beginning of month -1. The expected time frames should assist planning.
5. This plan/checklist is heavily weighted for months -6 and -5 which revolve around data gathering. Months -4 through -2 will be devoted to completing the documents required.

<table>
<thead>
<tr>
<th>Phase</th>
<th>To Do List</th>
<th>Month</th>
<th>Date</th>
<th>Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>I: Self-Assessment</td>
<td>1. Review the CAAHEP Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions: <a href="http://coaemsp.org/Standards.htm">http://coaemsp.org/Standards.htm</a></td>
<td>-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Review the CoAEMSP Interpretations of the CAAHEP Standards: <a href="http://coaemsp.org/Standards.htm">http://coaemsp.org/Standards.htm</a></td>
<td>-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Review the Site Visit Report form: <a href="http://coaemsp.org/Site_Visits_Visitors.htm">http://coaemsp.org/Site_Visits_Visitors.htm</a></td>
<td>-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Answer honestly the questions and evaluate Met or Not Met.</td>
<td>-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Pay attention to the items in the Evidence column and ensure you can provide the identified evidence.</td>
<td>-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. Make a list of anything that is not clear to you (for example: Sponsorship, Terminal Competencies).</td>
<td>-6</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Administrative Processes
Self-Study Report
- Every 5 years
- Program demographic data
- Evidence documents

Annual Report
- May 15 due date
- Enrollment
- Retention
- Credentialing
- Positive Placement
- Graduate & Employer Surveys

Resource Assessment
- Annual calendar year
- Program Resource Survey: Students
- Program Resources Assessment: Personnel
- Resource Assessment Matrix

Graduate Surveys
6-12 months after graduation

Employer Surveys
6-12 months after graduation

Analysis & Action Plan
Reported in Annual Report
Progress Reports

- Requested in response to citations
- Format and evidence specified
- Due date specified

Report of Substantive Changes

- Change in Sponsorship
- Change in Location
- Addition of a Satellite or Alternate Location
- Change in Administrative Personnel
- Change in Key Personnel
Forms

**Required**
- Resource Assessment Matrix (RAM)
- Program Resource Survey: Students
- Program Resource Survey: Personnel
- Graduate and Employer Surveys (can add questions)

**Strongly Advised**
- Terminal Competency
- Advisory Committee Meeting Minutes
- High Stakes Exam Analysis Form
- Long Range Planning
- Program Director Responsibilities Form
- Medical Director Responsibilities Form

**Useful**
- Affective Behavior Evaluation Form
- Course Evaluation Form
- Presentation Evaluation Form
- Program Summary Report Form
- Student Academic Progress Form
- Student Counseling Form
- Medical Director Student Update Form
Philosophy

- Transparency – no surprises
- Verify
- Confidentiality
  - communications
  - documents
  - FERPA
- Consultative, as appropriate
Conflict of Interest

- A real or perceived
- Site visitor is employed or lives in the same state as the Program
- Individuals have a close (positive or negative) personal, professional, academic or business relationship
- Acceptance of compensation or gifts related to the visitation

Who are they?

- Paramedic educator
- Physician
- Dean

How are they qualified?

- Meet Standards requirements
- Attend Site Visitor workshop
- Complete continuing education sessions
- QA reports good
Coordinating Site Visit

Jennifer Anderson Warwick  
Jennifer@coaemsp.org | 214-703-8445, x114

contacts Program after Executive Analysis (EA) is complete  
request possible dates, a date range is given  
ensure dates are mutually convenient  
coordinate with site visitors

Preliminary Site Visits

seeking the CoAEMSP Letter of Review

1 day site visit
1 site visitor
via Zoom with a CoAEMSP staffed tech host
4-6 weeks after the program’s Self-Study Report is accepted
Proposed Dates

- students available (entire group preferable)
- key people available
- after clinical phase preferable

Logistical Arrangements

- suggest hotels and closest airport
- provide transportation to/from airport and program
Organizing Documents

Expect someone from the State Office of EMS to observe the site visit.
Anticipate need for flexibility

Schedule

- recruit/confirm participants
- secure place to meet/work/print
- working lunch
- no dinner or entertainment
- Exit Summation in time for outgoing flights
## Agenda for Site Visit

### Helpful Hint
- Make files available in advance for site visitors via designated file share
- High stakes exam samples, etc.
- Student files available

### SITE VISIT AGENDA

<table>
<thead>
<tr>
<th>TIME</th>
<th>ACTIVITY</th>
<th>LOCATION</th>
<th>PRINCIPLES</th>
<th>WEB MEETING INFORMATION (if applicable)</th>
<th>PURPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:30 AM – 8:00 AM</td>
<td>Pick up SV Team &amp; Arrive Campus</td>
<td>HOTEL</td>
<td></td>
<td></td>
<td>Review the schedule of on-site activities planned by the program, adjusting as necessary</td>
</tr>
<tr>
<td>8:00 AM – 8:30 AM</td>
<td>Meet with the Program Director</td>
<td>Site Visit Team</td>
<td>Program Director</td>
<td></td>
<td>To provide the college administration an opportunity to formally welcome the site team. To provide the team an opportunity to explain the CAHEP accreditation process and functions of the review committee.</td>
</tr>
<tr>
<td>8:30 AM – 9:00 AM</td>
<td>Host Opening General Session</td>
<td>List participants here</td>
<td>Meeting ID: Passcode:</td>
<td></td>
<td>Interview the Medical Director to assess medical accountability in all phases of training</td>
</tr>
<tr>
<td>9:00 AM – 10:00 AM</td>
<td>Meet with the Medical Director</td>
<td>Site Visit Team</td>
<td>Medical Director</td>
<td>Meeting ID: Passcode:</td>
<td>Lab and Simulation Inspection</td>
</tr>
</tbody>
</table>

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[Image of a committee logo]
Self preparation: Review Accreditation Documents

- CoAEMSP Interpretations of the CAAHEP Standards and Guidelines
- Site Visit Report form
- have others review also
  - Medical Director
  - faculty
  - administrative personnel

Student Preparation

1st day of class: tell them your goals/objectives
reinforce requirements of accreditation
interview: tell them to be honest
Student Questionnaire
Site Visit Report is preliminary and subject to review and revision.

Official Site Visit Report & Findings Letter will come from the CoAEMSP.
Next Steps

- Make: make your “to do list”
- Discuss: discuss strategies
- Assign: assign tasks
- Meet & discuss: meet and discuss regularly
- Enlist: enlist help if needed!

Program’s Response using required templates

1. Confirmation of Factual Accuracy
   - due 14 days after receipt of Findings Letter
   - confirm accuracy – or – identify errors and submit supporting documentation (based on evidence provided at the time of the site visit)

2. Respond to Findings Letter
   - date set for program: March 1, June 1, September 1, December 1
   - working on plans
   - implementing plans
   - already done
The CoAEMSP Board Meeting

Information from site visit and Program’s response reviewed by 1 of 5 CoAEMSP Board Review Teams

Review team recommendation to full CoAEMSP Board

CoAEMSP Board reviews Program’s accreditation record

CoAEMSP Board makes a recommendation to CAAHEP

Possible Actions by CAAHEP

- Continuing Accreditation
- Probation
- Withdraw Accreditation (Continuing Only)
- Initial Accreditation
- Withhold Accreditation (Initial Only)
CAAHEP Meeting

reviews the recommendation from CoAEMSP

makes final decision

Site Visitor Quality Assurance

Your feedback is important to CoAEMSP and CAAHEP about your experience with the accreditation process
Accreditation is cyclical

Accreditation is an everyday activity
WHAT HAVE YOU LEARNED?

THANK YOU