



3



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EST 1978
CoAEMSP

Credible Education
through Accreditation

Topics we will cover

Overview of Accreditation	Available Resources	Transparency + Confidentiality	Overview of CAAHEP Standards
Self-Study Report	Policies & Procedures	Administrative Processes	Site Visits

5

Ground Rules



EST 1978
CoAEMSP
Committee on Accreditation of Educational Programs
for the Emergency Medical Services Professions

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Accreditation Overview



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Credible Education
through 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.

Council for Higher Education Accreditation (CHEA)



8

Accreditation is
~~an everyday activity~~
 maintenance



9



www.chea.org



www.caahep.org





10

Credible Education
through Accreditation

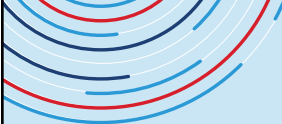

CHEA

Like accredited programs, CAAHEP must go through a recognition process by the Council for Higher Education Accreditation to assure that we meet the recognition requirements for a programmatic accrediting body.

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Credible Education
through Accreditation


Commission on Accreditation of Allied Health Education Programs

established in 1994

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



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Credible Education
through Accreditation

OUR GLOBAL IMPACT

2682	1408	31
Programs accredited worldwide	Institutions with accredited programs	Accredited health science professions

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Credible Education
through Accreditation

Professions

- Advanced Cardiovascular Sonography
- Anesthesia Technology
- Anesthesiologist Assistant
- Art Therapy
- Assistive Technology
- Cardiovascular Technology
- Clinical Ethicist
- Clinical Research Professional
- Cytotechnology
- Diagnostic Medical Sonography
- Emergency Medical Services**
- Exercise Physiology
- Exercise Science
- Inclusive Rehabilitation Studies
- Intraoperative Neurophysiologic Monitoring
- Kinesiotherapy
- Lactation Consultant
- Medical Assisting
- Medical Illustration
- Neurodiagnostic Technology
- Orthotic and Prosthetic Assistant
- Orthotic and Prosthetic Technician
- Orthotist/Prosthetist
- Perfusion
- Personal Fitness Training
- Polysomnographic Technology
- Recreational Therapy
- Respiratory Care
- Specialist in Blood Bank Technology / Transfusion Medicine
- Surgical Assisting
- Surgical Technology

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Credible Education
through Accreditation

established in 1978

evaluate a program's observance of accreditation standards

aligned with CAAHEP's policies & procedures; adopt complementing practices

focus on quality assurance in review of programs

ensure due process in review of accreditation applications



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through Accreditation

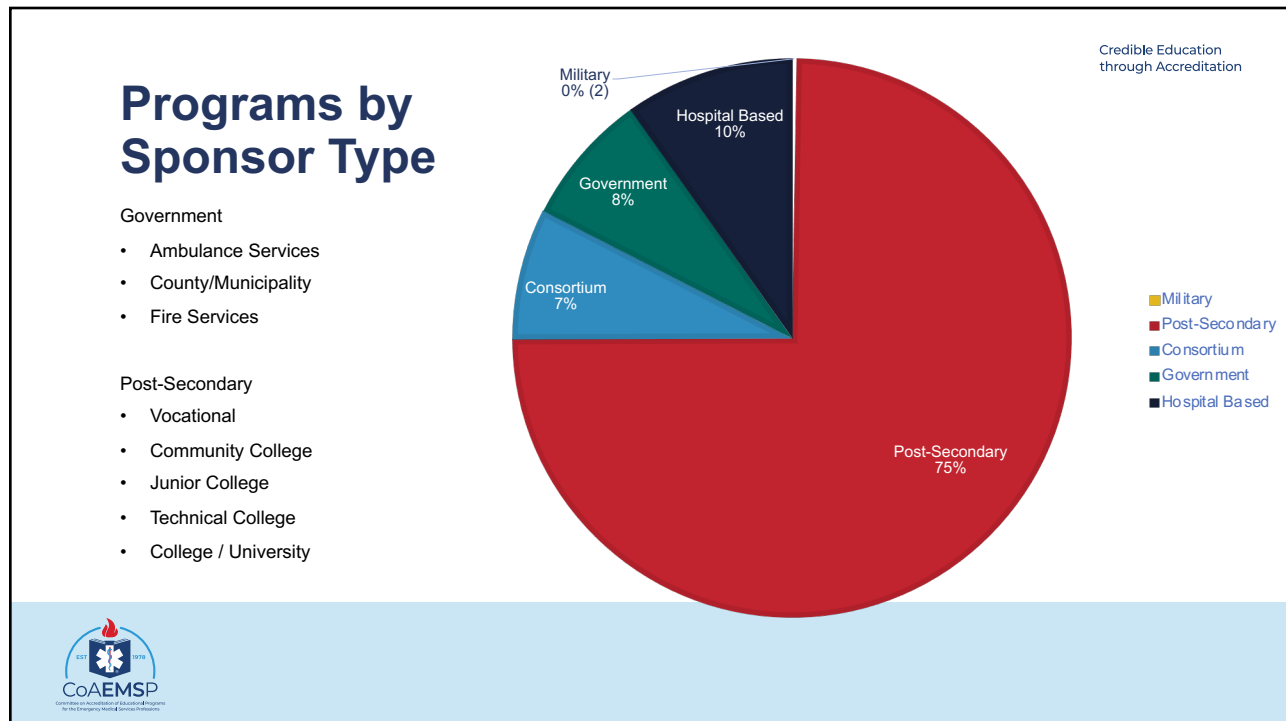
11 sponsor organizations

2 public members

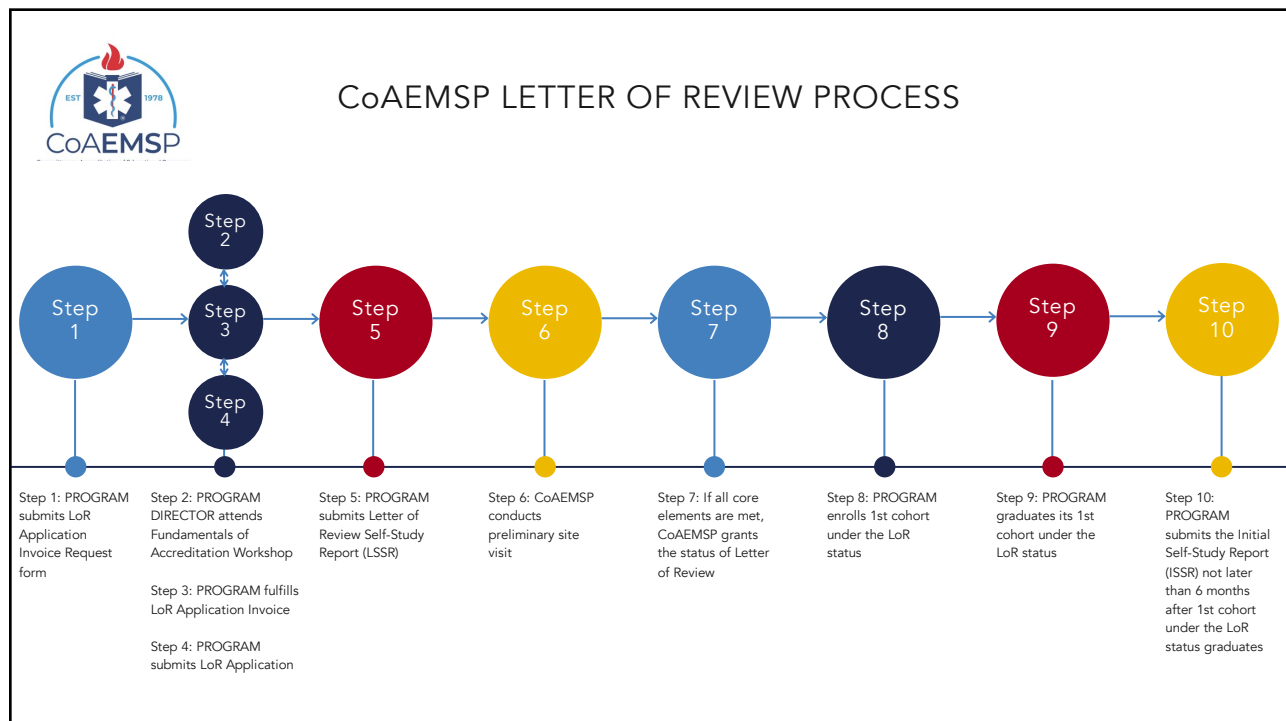
24-person board



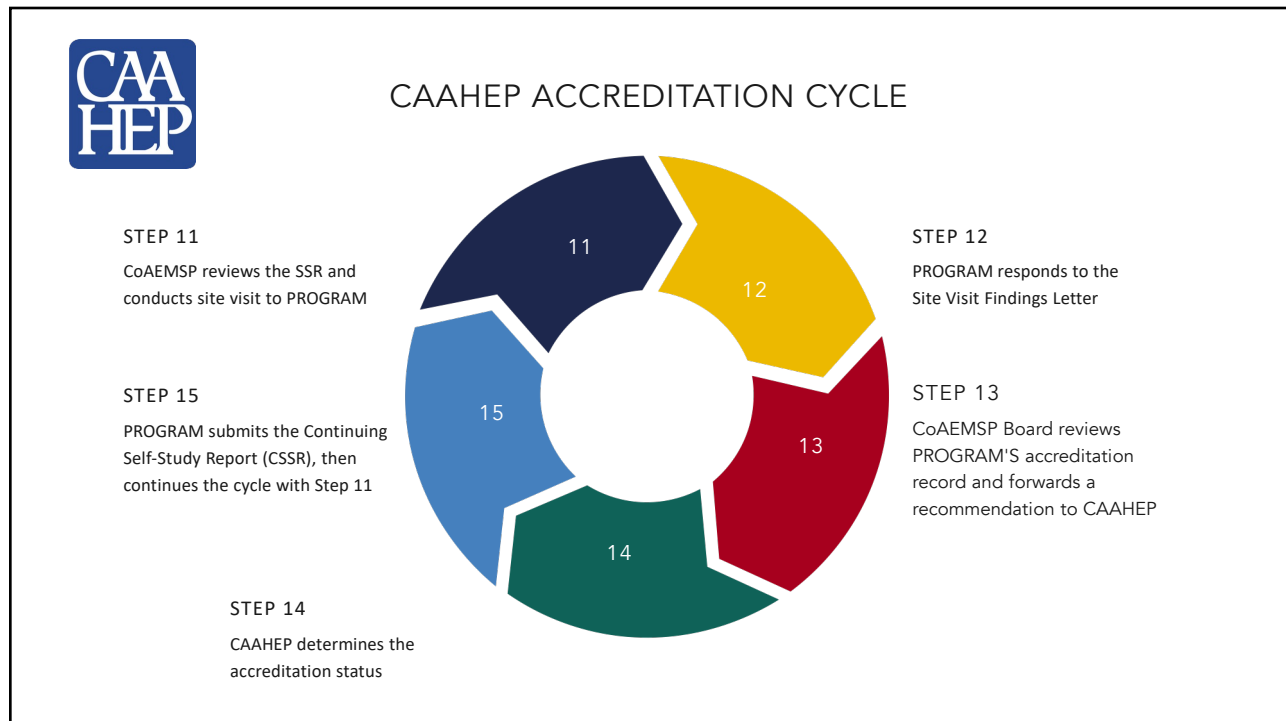
16



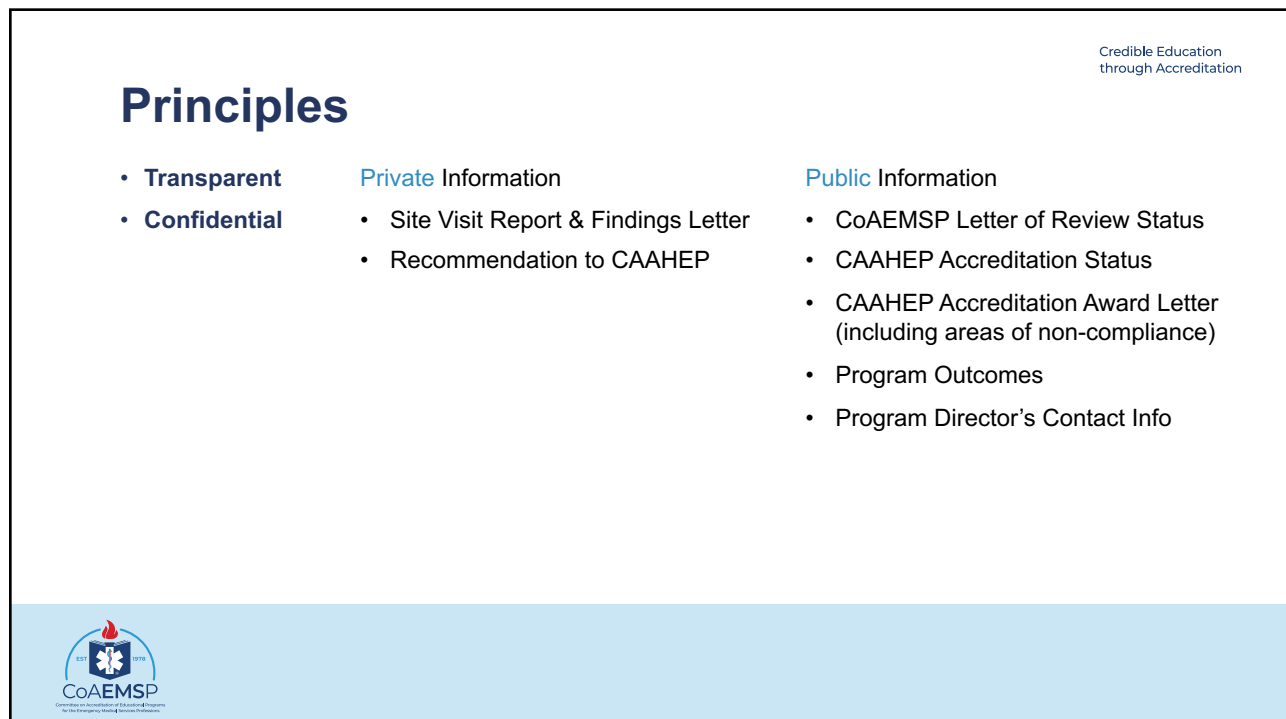
17



18



19



20

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).



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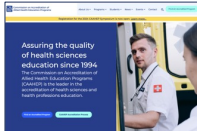
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Credible Education
through Accreditation

Available Resources

www.caahep.org

www.coaemsp.org



CAAHEP *Standards*

CoAEMSP Interpretations of CAAHEP *Standards*

CoAEMSP Policies & Procedures

CAAHEP Policies & Procedures

Resource Library




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CAAHEP *Standards*

An Overview



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Credible Education
through Accreditation

Purpose of the

- 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 practices the program must follow to protect itself, the students, and the public?

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Credible Education
through Accreditation

I. Sponsorship

at least one of the following:

1. post-secondary academic institution
2. post-secondary academic institution outside of the United States and its territories
3. hospital, clinic or medical center
4. branch of the United States Armed Forces or a federal, state, or local governmental or municipal agency
5. consortium

must award a minimum of a diploma/certificate

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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 standard I.A.1-4**

responsibilities of each member are clearly documented in a **formal affiliation agreement or MoU**, including governance and lines of authority



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Pathway to Credit

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



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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



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have a preparedness plan in place that assures continuity of education services in the event of an unanticipated interruption

Responsibilities of Program Sponsor



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Documents for the Self-Study Report

Resource Library

> Self-Study Reports

> Documents for Self-Study Report.pdf

Credible Education
through Accreditation



Documents for Self-Study Report

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)

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)

Standard III: Resources

1. Completed Resource Assessment Matrix (RAM) for the most recent three years
2. Student Minimum Competency (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

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II. Program Goals

- A. Minimum Expectation
- B. Advisory Committee



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To prepare Advanced Emergency Medical Technicians who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

Standard II.A. Minimum Expectation → must be **verbatim**



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“ To prepare Paramedics who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

Standard II.A. Minimum Expectation → must be **verbatim**



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Advisory Committee

- | | |
|--|---|
| • students | meet at least annually |
| • graduates | respond to changes in the needs and expectations of its communities of interest |
| • faculty members | |
| • sponsor administrators | advises the program regarding revisions to curriculum and program goals |
| • employers | |
| • physicians | assesses of program effectiveness, including the outcomes specified in these Standards. |
| • clinical & capstone field internship representatives | meeting minutes must document support of the program required minimum numbers of patient contacts |
| • the public | |



Advisory Committee Meeting Minutes template
Advisory Committee Roster

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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)

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III. Resources

- A. Type and Amount
- B. Personnel
- C. Curriculum
- D. Resource Assessment



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Resources

Type & Amount

<ul style="list-style-type: none"> a. faculty b. administrative and support staff c. curriculum d. finances e. faculty and staff workspace f. space for confidential interactions g. classroom and laboratory (physical or virtual) h. ancillary student facilities 	<ul style="list-style-type: none"> i. clinical affiliates j. field experience and capstone field internship affiliates k. equipment l. supplies m. information technology n. instructional materials o. support for faculty professional development
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through Accreditation



Resources

Clinical, Field Experience, & Capstone Field Internship Affiliations

access to adequate numbers of patients

proportionally distributed by age-range, chief complaint, and interventions

resources must ensure exposure to, and assessment and management of

- adult trauma and medical emergencies
- pediatric trauma and medical emergencies
- geriatric trauma and medical emergencies

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2) Continuous quality review & improvement of the educational program

3) Academic oversight, including curriculum planning & development

4) Orientation/training and supervision of clinical and capstone field internship preceptors



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[illegible]

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Checklist for Program Directors of CAAHEP-Accredited Programs¹

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CAAHEP-accredited and CoAEMSP Letter of Review programs may be used for the program's educational purposes. All other uses are prohibited without express written permission.

The checklist below is a tool to assist you, the program director, with managing what CoAEMSP requires to maintain CAAHEP accreditation. The checklist is an internal document for the program's use. Due dates will differ for each program. The date is listed where the due date is the same for every program, such as the annual report and annual fee. This checklist is based on the 2023 *Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions*.

¹Indicates a required CoAEMSP form from the Resource Library

Activity	Timing	Verify Activity
Evaluations: Program		
*Complete the Resource Assessment Matrix: all groups complete the surveys: students at closeout and faculty, Medical Director, and Advisory Committee at the Advisory meeting . Complete the RAM annually.	Closeout Advisory meeting Tabulate RAM at year end	<input type="checkbox"/>
Evaluate the instructors and/or presentations: recommended weekly for new instructors, at least once during each course for current faculty.	Weekly new instructors Once during each course for current faculty	<input type="checkbox"/>
Observe each faculty member in the classroom annually and complete the <i>Instructor Classroom Observation</i> form.	Annually	<input type="checkbox"/>
Evaluate skill instructors: frequently for new instructors, at least once during each course for current adjuncts.	Frequently Once during each course for current adjuncts	<input type="checkbox"/>
Evaluate the Program: end of Program at closeout .	At closeout	<input type="checkbox"/>
Complete <i>Program Summary Report</i> at the end of each cohort .	End of each cohort	<input type="checkbox"/>
Evaluate the clinical sites (by students and faculty) annually .	Students each cohort Faculty annually	<input type="checkbox"/>
Evaluate the field internship sites by students and faculty.	Students each cohort	<input type="checkbox"/>



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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



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Preceptor Orientation & Training

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



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Preceptor Orientation & Training

What are your best practices for preceptor orientation & preceptor training?



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Program Director Qualifications

AEMT	Paramedic
<ul style="list-style-type: none"> • Minimum of an Associate's degree 	<ul style="list-style-type: none"> • Minimum of a Bachelor's degree
	




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Credible Education
through Accreditation

Medical Director Responsibilities

- **Document**
 - review and approve
 - educational content of the program
 - required minimum numbers for each of the required patient contacts and procedures listed in these standards
 - instruments and processes used to evaluate students in didactic, laboratory, clinical, field experience, and capstone field internship
 - review progress of each student throughout the program, assist in determination of appropriate corrective measures
 - ensure competence of each graduate
 - engage in cooperative involvement with the program director
 - ensure the effectiveness and quality of any medical director responsibilities delegated to an associate or assistant medical director




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Credible Education
through Accreditation

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



Terminal Competency Form

CoAEMSP Program #: 600000

Program Sponsor Name: Enter Sponsor's Name Here

We hereby attest that the candidate listed below has successfully completed all the Terminal Competencies required for graduation from the Paramedic Education program as a minimally competent, entry-level, Paramedic and as such is eligible for State and National Certification written and practical examination in accordance with our published policies and procedures.

Name of Graduate: Enter Graduate's Name Here

PROGRAM REQUIREMENTS successfully and fully completed on

Program Overall Score


List of Written High Stakes Examinations (including the final cumulative summative examination)		
(1) <input type="text"/>	%	(12) <input type="text"/>
(2) <input type="text"/>	%	(13) <input type="text"/>
(3) <input type="text"/>	%	(14) <input type="text"/>
(4) <input type="text"/>	%	(15) <input type="text"/>
(5) <input type="text"/>	%	(16) <input type="text"/>
(6) <input type="text"/>	%	(17) <input type="text"/>
(7) <input type="text"/>	%	(18) <input type="text"/>
(8) <input type="text"/>	%	(19) <input type="text"/>
(9) <input type="text"/>	%	(20) <input type="text"/>
(10) <input type="text"/>	%	(21) <input type="text"/>
(11) <input type="text"/>	%	(22) <input type="text"/>

☐ Completed Student Minimum Competency (SMC) Matrix Requirements (required minimums, competencies, and patient contacts)

☐ Documented Skill Competencies

☐ Affective Learning Domain Evaluations

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Medical Director Qualifications

requirement: board-certified or equivalent

recommend (guideline only): board-certified in EMS medicine or emergency medicine



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Associate & Assistant Medical Directors

Associate Medical Director

- delegated specified responsibilities by Medical Director
- authorized to practice in the state in which assigned program activities occur (modification from 2015 *Standards*)

local

Assistant Medical Director

- Medical Director or Associate Medical Director cannot legally provide supervision for out-of-state location(s)
- "...participating in clinical rotations, field experience, and capstone field internship"

out-of-state



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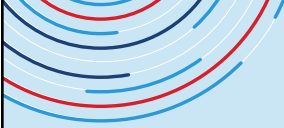
Medical Director Responsibilities

What are your best practices for partnering with your medical director?




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Lead Instructor

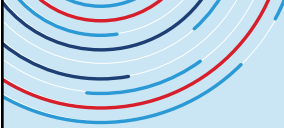


minimum of an associate's degree
coordinates the course of study


only required for satellite campuses

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Clinical Coordinator

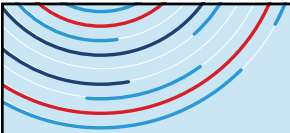


- program identifies assignment of clinical coordinator responsibilities
- responsibilities must be identified and assigned to a faculty member


not a requirement for a new position

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Curriculum



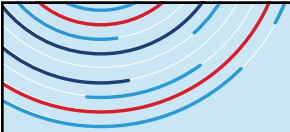
Syllabi

- based on clearly written course syllabi, including
 - course description
 - course objectives
 - methods of evaluation
 - topic outline
 - competencies required for graduation/program completion


must have a separate syllabus for the capstone field internship

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Curriculum




Sequencing

- appropriate sequence of classroom, laboratory, clinical and field activities.
- demonstrate curriculum offered meets or exceeds the National EMS Education Standards

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Student Minimum Competency

set and require minimum student competencies for each of the required patients and conditions

- at least annually evaluate and document that the established program minimums are adequate to achieve entry-level competency.

capstone field internship must provide the student with an opportunity to serve as team leader

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Student Minimum Competency



Table 1 - Ages

Table 2 – Conditions

Table 3 – Skills

Table 4 – Field Experience & Capstone Field Internship

Table 1				
AEMT				
Ages				
(Only Report Successful Attempts)				
	Pediatrics (Newborn to 18 years)	Adult (19 to 64 years)	Geriatric (65 and older)	Sum of the three age groups
Minimum Number Recommended ==>	5	15 - 30	15 - 30	50
Place Program Required Minimum Numbers Here ==>				
Graduate Name(s) ↓				

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Student Minimum Competency

Table 1 - Ages


Table 2 – Conditions


Table 3 – Skills

Table 4 – Field Experience & Capstone Field Internship

Table 5 – EMT Skills Competency Summary Tracking

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 Student Minimum Competency Table 1 Ages				
<p>Patients of different ages present with distinct anatomies, physiologies, and disease processes. Students must have exposure to patients of various ages to build both competence and confidence. There is age-specific considerations for assessment and management for age groups. The educational institution must assess student ability to provide safe and effective care for a variety of ages of patients.</p> <p>Each patient encounter or simulation should only have one (1) age designation. If a simulation involves multiple patients, the competency should be assessed for each patient.</p>				
CoAEMSP Student Minimum Competency (SMC)	Column 1 Formative Exposure in Clinical or Field Experience	Column 2 Exposure in Clinical or Field Experience and Capstone Field Internship	Total	Minimum Recommendations by Age* (*Included in the total)
Pediatric patients with pathologies or complaints	15	15	30	Minimum Exposure
				2 Neonate (birth to 30 days)
				2 Infant (1 mo -12 mos)
				2 Toddler (1 to 2 years)
				2 Preschool (3 to 5 years)
				2 School-Aged/ Preadolescent (6 to 12 years)
				2 Adolescent (13 to 18 years)
Adult	30	30	60	(19 to 65 years of age)
Geriatric	9	9	18	(older than 65 years of age)
Totals:	54	54	108	



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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



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Standard III: Resources

1. Completed Resource Assessment Matrix (RAM) for the most recent three years
2. Student Minimum Competency (approved by Medical Director and endorsed by the Advisory Committee)
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12. Capstone field internship Preceptor training materials

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IV. Student and Graduate Evaluation/Assessment

- A. Student Evaluation
 - Frequency and Purpose
 - Documentation
- B. Outcomes
 - Assessment
 - Reporting



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Student Evaluation: Frequency and Purpose

conducted on a recurrent basis

provide students and program faculty with indications of students' progress



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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



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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

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



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Student Evaluation: Documentation

document learning progress

program required minimum competencies in all learning domains

didactic

laboratory

clinical and field experience/internship

capstone field internship



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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 2										
Ages				Pathology or Complaint (*) Simulation Permitted										
(Only Report Successful Attempts)				(Only Report Successful Attempts)										
Minimum Number Recommended =>	Pediatrics (Newborn to 18 years)	Adult (19 to 64 years)	Geriatric (65 and older)	Minimum Number Recommended =>	Trauma	Psychiatric/ Behavioral	Obstetric delivery w/ normal newborn care and/or complicated obstetric delivery	Distressed neonate (birth to 30 days)	Cardiac pathology or complaint	Cardiac arrest	Cardiac dysrhythmia	Medical neurologic pathology or complaint	Respiratory pathology or complaint	Other medical conditions or complaints
	15	30	9		9	6	2*	2*	6	1*	6	4	4	6
Program Required Minimum Numbers =>				Program Required Minimum Numbers =>										
Graduate Name(s) ↓														
1														
2														
3														
4														
5														
6														

Enter each student's name

Enter program's required minimums



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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)?



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Standard IV: Student and Graduate Evaluation/Assessment

1. Completed CoAEMSP High Stakes Analysis form
2. Documentation of one recent graduate: completed, graded summative, comprehensive, (final) evaluations
3. Signed, completed sample of Terminal Competency form
4. Summary Tracking form for most recent completed cohort

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through Accreditation


V. Fair Practices

- A. Publications and Disclosure
- B. Lawful and Non-discriminatory Practices
- C. Safeguards
- D. Student Records
- E. Substantive Change
- F. Agreements



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through Accreditation




Fair Practices

Publications and Disclosures

- 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
- occupational risks

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through Accreditation






“

"The [name of sponsor] AEMT 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 the CoAEMSP Letter of Review



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"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 the CoAEMSP Letter of Review

Verbatim



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"The AEMT program of [name of sponsor] 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"

Statement for Programs with the CAAHEP Accreditation

Verbatim



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“The Paramedic program of [name of sponsor] 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”

Verbatim

Statement for Programs with the CAAHEP Accreditation



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Fair Practices

Publication of Outcomes


make public the program's outcomes

- retention
- positive placement
- NREMT or State exam



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through Accreditation




Fair Practices

Outcomes Reporting

"If established outcomes thresholds are not met, the program must participate in a dialogue with and submit an action plan to the CoAEMSP that responds to the identified deficiency(ies). The action plan must include an analysis of any deficiencies, corrective steps, and a timeline for implementation. The program must assess the effectiveness of the corrective steps."

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through Accreditation




Fair Practices

Safeguards

- health and safety of patients, students, faculty, and other participants
- educational
- *students must not be substituted for staff*

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Credible Education
through Accreditation




Fair Practices

Substantive Change

- change in sponsorship
- adverse decision affecting its institutional accreditation
- change in location
- addition of a satellite location
- addition of an alternate location
- addition of a distance learning program
- change in CEO, Dean, Program Director, Medical Director

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Credible Education
through Accreditation



Fair Practices

Agreements

- formal affiliation agreement between program sponsor and all other entities that participate in the education of the students
- describes relationship, roles, and responsibilities of the program sponsor and that entity

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Standard V: Fair Practices

1. Program information screenshots for:
 - a. Sponsor Institutional Status
 - b. Program accreditation status statement (if applicable)
 - c. Admission policies
 - d. Technical standards
 - e. Advanced placement
 - f. Transfer of credits
 - g. Experiential learning
 - h. Credits required
 - i. Program costs
 - j. Withdrawal policy
 - k. Refund policy
 - l. Academic calendar
 - m. Student grievance
 - n. Completion certificate
 - o. Graduation criteria
 - p. Student work policy
 - q. Published outcomes
 - r. Faculty grievance
 - s. Faculty recruitment
 - t. Student admission
 - u. Faculty employment
 - v. Safeguard
 - w. Student responsibilities
 - x. Checkoff tool
 - y. Scope of responsibilities
 - z. Transcript location
2. Affiliation Agreements (fully executed)
3. Out of State approval for affiliations (if applicable)

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Satellite Campus & Alternate Location



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Satellite

Credible Education
through Accreditation




- 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 Program Director and Medical Director of the program
- regardless of location, the educational program delivered to the students must be the same

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Credible Education
through Accreditation

Alternate Location

- 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




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Credible Education
through Accreditation

Satellite & Alternate Locations

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

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



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Outsourcing

Instructional services

Space

Equipment

Supplies

Written agreement required!



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Educational Methods

Distance Education

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

CAAHEP Policy 209.A.: Distance Education
(see CAAHEP Policy for the policy in its entirety)

A. Distance Education

CAAHEP recognizes the following United States Department of Education (USDE) definition of distance education. (See: [Federal Register :: Distance Education and Innovation](#))
Distance education means education that uses one or more of the technologies listed in paragraphs (1) through (4) to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies may include:

- 1) The internet;
- 2) One-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
- 3) Audioconferencing; or
- 4) Video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course in conjunction with any of the technologies listed in paragraphs (1) through (3).

For purposes of this definition, an instructor is an individual responsible for delivering course content and who meets the qualifications for instruction established by the institution's accrediting agency.

For purposes of this definition, substantive interaction is engaging students in teaching, learning, and timely assessment; consistent with the content under discussion, and also includes at least two of the following:

- 1) Providing direct instruction;
- 2) Assessing or providing feedback on a student's coursework;
- 3) Providing information or responding to questions about the content of a course or competency;
- 4) Facilitating a group discussion regarding the content of a course or competency; or,
- 5) Other instructional activities approved by the institution's or program's accrediting agency.



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Simulation

- simulations can be integrated to help achieve competency
- simulation cannot be used for capstone field internship team leads

www.coaemsp.org > Resource Library

> Program Minimum Numbers

> CoAEMSP & NREMT Simulation Guidelines and Recommendations



Credible Education
through Accreditation

CoAEMSP and NREMT Simulation Guidelines and Recommendations February 2022

Preamble

Simulation continues to evolve as an important technique that facilitates student learning. The use of simulation in EMS education is appropriate in both the learning process (formative phase) and when evaluating competency. Simulations can be used to evaluate individual skills, management of various patient conditions and ages, and comprehensive summative assessments. The structure, length, and complexity of simulations vary. Simulations ideally begin early in the curriculum and are incorporated throughout the program as one means to help learner move toward competency. The determination of competency for graduates is not made at a single point in time, at a single event, but rather is an accumulation of a body of evidence when a student consistently performs at an acceptable level. Entry level competency is determined using simulation, clinical, and field assessments.

Programs are responsible to evaluate student progression from novice to competency and have discretion in the development of the curriculum, the sequencing of content, and the use of simulation to augment live patient encounters. This learning plan ideally includes incremental steps from simulation to clinical and field experiences.

Simulation has proven to be an effective education strategy that can replace or enhance other traditional delivery methods, such as lecture, to achieve student learning outcomes. The strength of simulation isn't that it's real. The strength of simulation is that it *isn't* real, and the facilitator controls the variables. Simulation is a technique, not a specific technology. It often involves a scenario followed by a structured debriefing process. Many of the learning objectives are reinforced during debriefing phase.

This document does not define requirements for simulation but is intended to provide guidelines that programs must consider when assessing the appropriate incorporation of simulation as a learning and evaluation tool. The decision on when and how to incorporate simulation in the curriculum should be a deliberate part of the instructional design.

These Guidelines and Recommendations are not intended to be exhaustive or address the entirety of simulation. Programs are encouraged to explore various avenues to acquire increased depth and breadth of information on the subject. Literature relevant to simulation is referenced later in this document. A short glossary of terms is included later, and a complete list of definitions can be found in the Healthcare Simulation Dictionary, Second Edition (2.1)

Simulation Definition

A technique that creates a situation or environment to allow persons to experience a representation of a real event for the purpose of practice, learning, evaluation, testing, or to gain

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Self-Study Report




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Credible Education
through Accreditation


Individuals to tap for assistance

- Medical Director
- Faculty / Staff
- Dean
- Advisory Committee




Committee on Accreditation of Educational Programs
for the EMS Professions
8301 Lakewood Pkwy, Suite 111-312
Rowlett, TX 75088

Self-Study Report
For EMS Programs Seeking
Letter of Review
(LSSR)
for the 2023 CAAHEP Standards & Guidelines




Committee on Accreditation of Educational Programs
for the EMS Professions
8301 Lakewood Pkwy, Suite 111-312
Rowlett, TX 75088

Self-Study Report
for Paramedic Programs Seeking
Initial Accreditation
(ISSR)
for the 2023 CAAHEP Standards & Guidelines



Committee on Accreditation of Educational Programs
for the EMS Professions
8301 Lakewood Pkwy, Suite 111-312
Rowlett, TX 75088

Self-Study Report
For Paramedic Programs Seeking
Continuing Accreditation
(CSSR)
for the 2023 CAAHEP Standards & Guidelines




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Credible Education
through Accreditation

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: _____

Getting Started: an Action Plan for CAAHEP Accreditation Page 2

#	Activity	Month Due	Date Due	Date Completed
Phase I: Self-Assessment				
<input type="checkbox"/>	1. Review the CAAHEP Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions at www.coaemsp.org/Standards.htm .	-6		
<input type="checkbox"/>	2. Review the CoAEMSP Interpretations of the CAAHEP Standards at www.coaemsp.org/Standards.htm .	-6		
<input type="checkbox"/>	3. Review the Site Visit Report form at www.coaemsp.org/Site_Visits_Visitors.htm .	-6		
<input type="checkbox"/>	a. Answer the questions honestly and evaluate Met or Not Met.	-6		
<input type="checkbox"/>	b. Pay attention to the items in the Evidence column and ensure you can provide the identified evidence.	-6		
<input type="checkbox"/>	c. Make a list of anything unclear to you (for example, Sponsorship, Terminal Competencies).	-6		
<input type="checkbox"/>	4. Give Faculty members and the Medical Director a copy of the CAAHEP Standards and Guidelines and highlight their areas of responsibility.	-6		
<input type="checkbox"/>	5. Meet with the Faculty and Medical Director to discuss areas that seem unclear.	-6		
<input type="checkbox"/>	6. Discuss with Program Directors of other accredited programs how they prepared for document preparation and the site visit.	-6		
<input type="checkbox"/>	7. Make a list of your most burning questions and then prioritize them.	-6		
<input type="checkbox"/>	8. Make a list of your Program's current strengths and weaknesses/limitations (use a SWOT analysis: strengths, weaknesses, opportunities, threats).	-6		



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Policies, Procedures, & Administrative Requirements

Policy Manuals (CoAEMSP + CAAHEP)

Annual Report

Resource Assessment

Substantive Change

Progress Reports



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Policies and Procedures



COMMISSION ON ACCREDITATION
OF ALLIED HEALTH EDUCATION PROGRAMS

Policies & Procedures

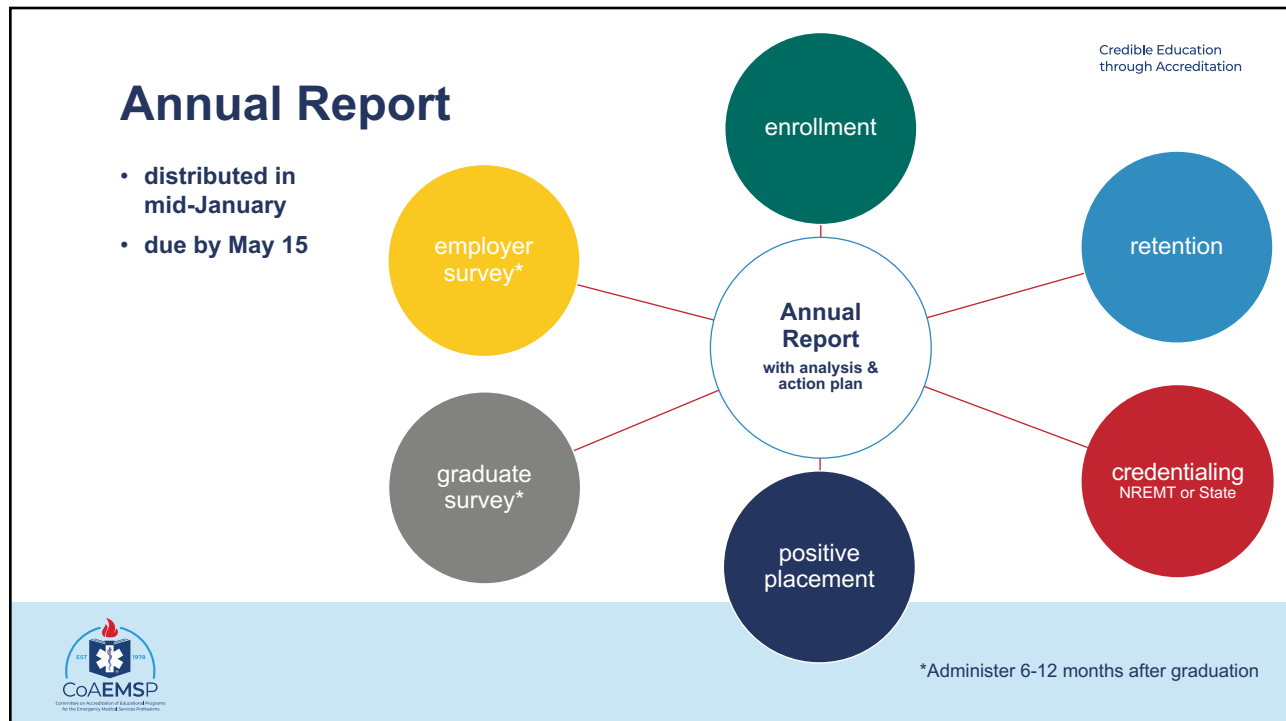
Updated through July 15, 2023

Credible Education
through Accreditation

Policies & Procedures for Programs



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Credible Education through Accreditation

Publishing Outcomes

CoAEMSP Reported Outcomes	2023	2022	2021
Retention			
NREMT or State cognitive exam			
Placement			

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

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Resource Assessment

- completed each calendar year

Credible Education
through Accreditation

Program Resource Survey Completed by Students

Name of Program Sponsor (School): _____
 Paramedic Program Number: _____ (the 600xx number assigned by CoAEMSP) Date: _____

The purpose of this survey instrument is to evaluate the Program resources of your school. The data will aid the Program in ongoing program improvement.

INSTRUCTIONS: Consider each item separately and rate each item independently. Check the rating that indicates the extent you agree with each statement. Please do NOT skip a rating. If you are not able to evaluate a particular area, please check N/A.

N = No

Program Faculty

A. Faculty effectively...
 1. facilitate learning and interact with students
 2. facilitate learning and interact with staff
 3. provide supervision/coordination in the classroom
 4. provide supervision/coordination in the laboratory

B. The number of faculty is adequate...
 1. for classroom instruction
 2. for laboratory instruction

C. Faculty effectively communicate and interact with students
 D. Faculty assist me with my academic needs

Comments: _____

Program Resource Survey Completed by Program Personnel

Name of Program Sponsor (School): _____
 Paramedic Program Number: _____ (the 600xx number assigned by CoAEMSP) Date: _____

The purpose of this survey instrument is to evaluate our Program resources. The data will aid the Program in ongoing planning, appropriate change, and development of action plans to address deficiencies. Unless specified, all sections should be completed by program faculty, Medical Director(s), and Advisory Committee members.

INSTRUCTIONS: Consider each item separately and rate each item independently. Check the rating that indicates the extent you agree with each statement. Please do NOT skip a rating. If you do not know about a particular area, please check N/A. If you are not able to evaluate a particular area, please check N/A.

N = No Y = Yes N/A = not able to evaluate

Program Faculty (completed by Medical Directors & Advisory Committee members)

A. Faculty effectively...
 1. keep the Advisory Committee informed of program status and changes
 2. respond to changes in needs and expectations of communities of interest
 3. foster positive relations with hospitals and field internships agencies
 4. encourage student participation in professional activities

Comments: _____

Resource Assessment Matrix (RAM)

CoAEMSP is a member of the Accreditation of Education Programs for the Emergency Medical Services Professions, Inc. (AEP)

Program ID: _____
 Sponsor Name / Year: _____
 Current Accreditation Status: _____
 Date RAM Completed: _____

Number of Students Completing the Program: _____
 Number of Student Survey Responses: _____
 Number of Program Personnel Surveyed: _____
 Number of Program Personnel Responses: _____

Link to access the forms available on the CoAEMSP website: _____

CoAEMSP Forms Available

Program Resource Survey Program Personnel
 Program Resource Survey Students

Area	1	2	3	4	5	6	7	8	9	10
RESOURCE	1. Purpose of the resource in the program	2. Effectiveness of the resource	3. Effectiveness of the resource	4. Effectiveness of the resource	5. Effectiveness of the resource	6. Effectiveness of the resource	7. Effectiveness of the resource	8. Effectiveness of the resource	9. Effectiveness of the resource	10. Effectiveness of the resource
FACULTY	1. Purpose of the resource in the program	2. Effectiveness of the resource	3. Effectiveness of the resource	4. Effectiveness of the resource	5. Effectiveness of the resource	6. Effectiveness of the resource	7. Effectiveness of the resource	8. Effectiveness of the resource	9. Effectiveness of the resource	10. Effectiveness of the resource
MEDICAL DIRECTOR	1. Purpose of the resource in the program	2. Effectiveness of the resource	3. Effectiveness of the resource	4. Effectiveness of the resource	5. Effectiveness of the resource	6. Effectiveness of the resource	7. Effectiveness of the resource	8. Effectiveness of the resource	9. Effectiveness of the resource	10. Effectiveness of the resource
SUPPORT PERSONNEL	1. Purpose of the resource in the program	2. Effectiveness of the resource	3. Effectiveness of the resource	4. Effectiveness of the resource	5. Effectiveness of the resource	6. Effectiveness of the resource	7. Effectiveness of the resource	8. Effectiveness of the resource	9. Effectiveness of the resource	10. Effectiveness of the resource

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Surveys

- Graduate
- Employer
- Student
- Program Personnel

Google Forms & Microsoft Forms

Graduate & Employer:

- > Resource Library
- > Instruments & Forms

Student & Program Personnel:

- > Resource Library
- > Resource Assessment

SurveyMonkey

Have a paid SurveyMonkey account?

Email your username to

sarah@coaemsp.org



Credible Education
through Accreditation



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Substantive Change

- **Must notify CoAEMSP of any key personnel change within 30 calendar days of the change.**

change in sponsorship

addition/deletion of satellite campus or alternate location

change of location

change of Program Director

change of Medical Director

change of Lead Instructor of satellite campus

change of President/CEO

change of Dean



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Progress Reports

requested in response to citations listed in the CAAHEP award letter

format and evidence specified in the letter

due dates specified



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Site Visits



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Credible Education
through Accreditation

Steps to Coordinating the Site Visit

1. Program is approved for a site visit after the review of the Self-Study Report and the Executive Analysis is written
2. CoAEMSP coordinates a date, 4-6 months in advance, based on mutually convenient dates
 - Program receives the save-the-date email
 - add the date to your participants' calendar (medical director, dean, advisory committee, students, graduates, etc.)
3. CoAEMSP confirms the site visit 6-8 weeks in advance
 - site visitors' names & contact information shared
 - confirm the site visit schedule with the site visit team

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Resources for Site Visits



Credible Education
through Accreditation

Resources for Site Visits

✓ RESOURCES

Resources for Program Directors (PD)

NAME ^	LAST MODIFIED	DOWNLOAD
PDF Best Practices for Hosting a Successful Site Visit (Logistics)	JUN-2024	DOWNLOAD
DOC Documents for the Site Visit	APR-2024	DOWNLOAD
DOC Response to Executive Analysis (EA) Program Update	FEB-2024	DOWNLOAD
DOC Site Visit Agenda	JAN-2025	DOWNLOAD
DOC Site Visit Agenda - for Consortium Sponsored Programs	JAN-2025	DOWNLOAD
XLS Site Visit Agenda for Programs Seeking the Letter of Review (no students)	JAN-2025	DOWNLOAD
XLS Site Visit Agenda for Programs Seeking the Letter of Review (students are enrolled)	JAN-2025	DOWNLOAD
XLS Site Visit Information Form	FEB-2024	DOWNLOAD
Video Orientation to Site Visits for Program Directors		
PDF Orientation to Site Visits for Program Directors - Slides		

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Site Visitors

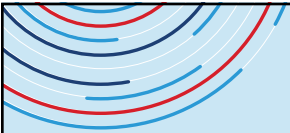


Credible Education
through Accreditation


Philosophy

transparency – no surprises
trust, but verify
confidential
consultative
supportive
encouraging
accountable

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Site Visitors



Credible Education
through Accreditation

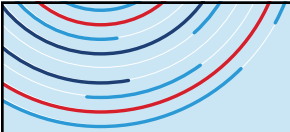
Who are they?

- Paramedic educator
- Physician
- Dean


How are they qualified?

- meet the qualifications for PD or MD in the *CAAHEP Standards*
- complete the Site Visitor Workshop
- complete CE sessions
- positive QA reports

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Site Visitors



Credible Education
through Accreditation

Conflict of Interest

real or perceived

site visitor is employed or lives in the same state as the program being evaluated

individuals have a close (positive or negative) personal, professional, academic or business relationship

acceptance of compensation or gifts related to the visitation

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Site Visit for Programs Seeking the CoAEMSP Letter of Review

1-day site visit

1 site visitor

web-based

CoAEMSP staff manages Zoom

at least 4-6 weeks after the program's Self-Study Report is accepted



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Site Visit for Programs Seeking CAAHEP Accreditation

2-day site visit*

2 site visitors*

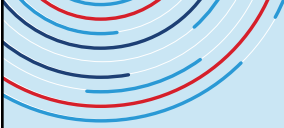
on-campus or web-based

*If program has satellite campuses or alternate locations, additional site visitors and/or days




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Credible Education
through Accreditation



Proposed Dates



Coordinating Site Visits

- CoAEMSP staff contacts Program after Executive Analysis (EA) is complete
- request dates from program when it is available
- a list of dates is given to select from
- Program must ensure students, Medical Director, and other key people are available

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Credible Education
through Accreditation

Site Visit

- **Logistics**

recommend hotels, nearest airport(s)

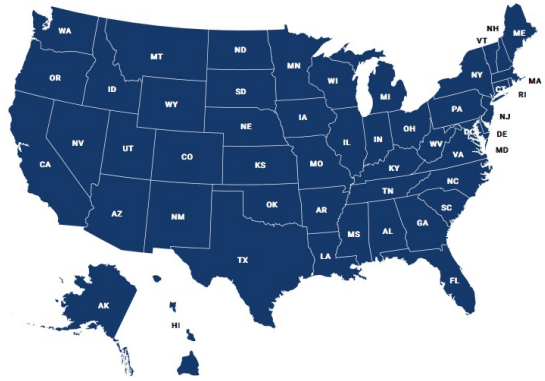

provide transportation to/from airport, hotel, and program



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Credible Education
through Accreditation


Expect someone from the State
Office of EMS to observe the
site visit

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Credible Education
through Accreditation

Schedule

-  recruit/confirm participants
-  secure place to meet/work/print
-  working lunch
-  no dinner or entertainment
-  exit summation in time for outgoing flights




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Site Visit Agenda

Credible Education
through Accreditation



Site Visit Agenda for CAAHEP Accreditation
Enter Here the CoAEMSP Program Number & Sponsor Name

Enter Here the Site Visit Date

NOTE: The template is the recommended timeline; the final agenda times will vary based on the scheduling of conversations. **You may adjust the schedule according to what works best for the participants.**

Day Before the Site Visit				
Arrival Time		Team Captain Pickup	Airline	Airport
Arrival Time		Team Member Pickup	Airline	Airport

TIME	ACTIVITY	LOCATION	PRINCIPLES	WEB MEETING INFORMATION <i>If applicable</i>	PURPOSE
DAY 1					
7:30 AM – 8:00 AM	Pick up SV Team & Arrive Campus	Hotel			
8:00 AM – 8:30 AM	Meet with the Program Director		Site Visit Team Program Director		Review the schedule of on-site activities planned by the program, adjusting as necessary.
8:30 AM – 9:00 AM	Host Opening General Session		List participants here	Meeting ID: Passcode:	To provide the college administration an opportunity to formally welcome the site team. To provide the team an opportunity to explain the CAAHEP accreditation process and functions of the review committee.

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Before the Site Visit

upload files at least 2 weeks before the site visit to Sharefile

Documents for the Site Visit Page 2

1. Minutes


- Advisory Committee meeting minutes*
- Consortium meeting minutes*
- Faculty meetings (if applicable)

*Form available on www.coaemsp.org on the Resource Library page in the Instruments & Forms section.

Have there been any meetings since the Self-Study Report was submitted?

☐ Yes ☐ No If "Yes", title the document(s) using the following **example**:
 (01 type of minutes & revision date)

01 Advisory Committee Meeting Minutes 202X.05.01
 01 Advisory Committee Meeting Minutes 202X.10.15
 01 Consortium Meeting Minutes 202X.09.05
 01 Faculty Meeting Minutes 202X.08.20



**Documents for the Site Visit
Step-By-Step Instructions**

The following documents are required to be uploaded to the program folder on the CoAEMSP ShareFile site. The upload is required for programs scheduled for *both virtual and onsite visits*. The upload should be completed at least two weeks prior to the site visit date so that the site visitors have ample opportunity to prepare for the visit.

The additional documents bridge the time frame from submission of the Self-Study report to the site visit. The specified documents below are *only required* when they provide updated information, such as Advisory Committee minutes. Do not upload any documents provided with the program's self-study submission.

In preparation for the site visit, you are encouraged to download an example of the Site Visit Report at www.coaemsp.org/Site_Visits_Visitors.htm.

The Step-By-Step Instructions below must be followed carefully to correctly complete the Documents for the Site Visit form. Click on the Step-By-Step Instructions link below to correctly compile and complete the Documents for the Site Visit form.

For questions or help composing the Documents for the Site Visit form, please contact Lisa Collard (lisa@coaemsp.org) or 214-703-8445 ext. 118.

CoAEMSP Program #: 800000

Program Sponsor Name: Enter Sponsor's Name Here

If the answer is 'Yes' to any of the questions below, place the documentation in the Documents for the SV sub-folder and name each of the documents as outlined in the orange boxes below. Do not upload any documents provided in the program's self-study submission. Any type of file format (i.e., Adobe Portable Document [.pdf], Word, 97-2003 [.doc], Word 2013 [.docx], PowerPoint Presentation [.ppt or .ppx], or Excel [.xlsx]) may be used.

For items with multiple documents, combine the documentation and create a single PDF file (see Step By Step Instructions for creating a single PDF file).

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Review Accreditation Documents

CoAEMSP Interpretations of the CAAHEP
Standards and Guidelines

Site Visit Report form

Interview Questions & Talking Points

Ask colleagues to review

- Medical Director
- faculty
- administrative personnel

Site Visitor Resources

RESOURCES		
NAME ^	LAST MODIFIED	DOWNLOAD
XLS Expense Report for Site Visitors	JAN 2025	DOWNLOAD
XLS Site Visit Report (blank)	APR 2024	DOWNLOAD
PDF Site Visitor Checklist	MAY 2024	DOWNLOAD
PDF Site Visitor Manual	JAN 2025	DOWNLOAD
PDF Site Visitor Quick Reference Guide	NOV 2024	DOWNLOAD
PDF Talking Points & Conversational Starters	JAN 2025	DOWNLOAD
WEB Peer Evaluation Form		



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Student Preparation



1st day of class:
tell them your
goals/objectives



reinforce
requirements of
accreditation



interview:
tell them to be
honest



Student
Questionnaire



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Credible Education
through Accreditation

Official Site Visit Findings

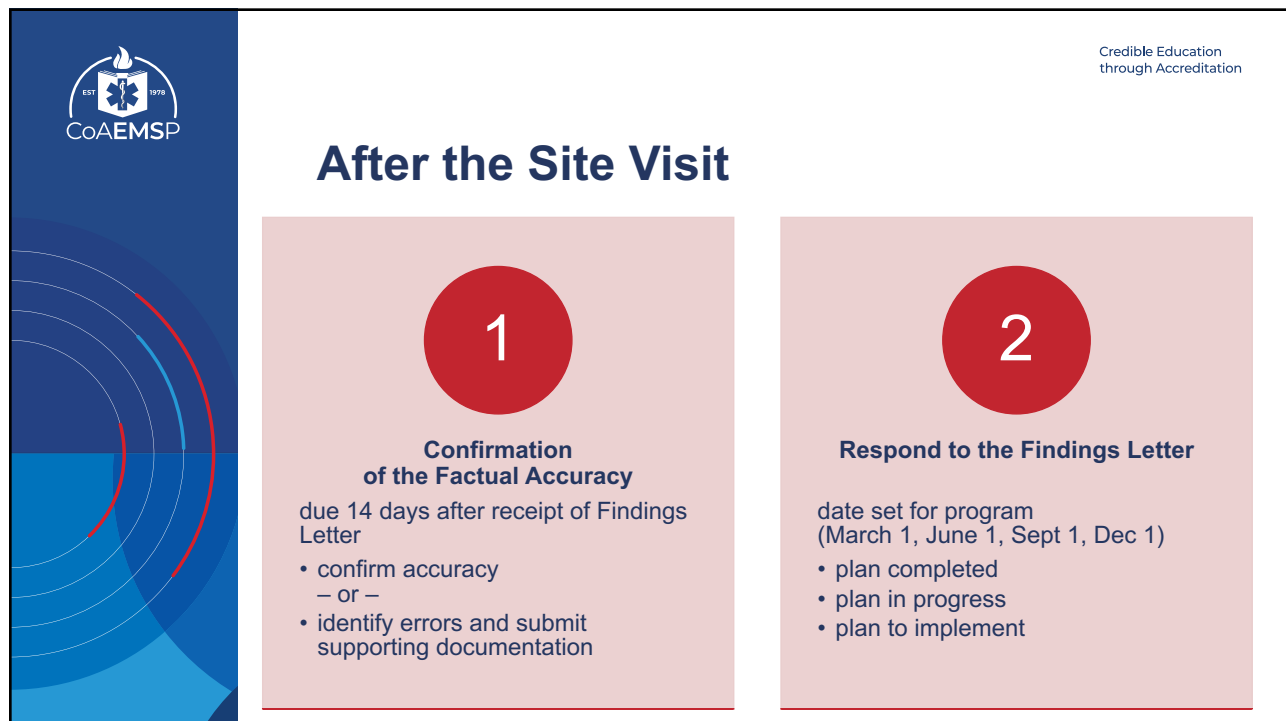
findings reported during Exit Summation are *preliminary* and subject to review and revision

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




CoAEMSP
Commission on Accreditation of Educational Programs
for the Emergency Medical Services Professions

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Credible Education
through Accreditation


After the Site Visit



**Confirmation
of the Factual Accuracy**

due 14 days after receipt of Findings Letter


- confirm accuracy
– or –
- identify errors and submit supporting documentation



Respond to the Findings Letter


date set for program
(March 1, June 1, Sept 1, Dec 1)

- plan completed
- plan in progress
- plan to implement



CoAEMSP

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Credible Education
through Accreditation

After the Site Visit


1. Program responds to the Site Visit Findings Letter
2. CoAEMSP Board reviews the Program's response in two stages
 - Review Team (Alpha, Bravo, Charles, Delta, Echo)
 - Full Board
3. CoAEMSP Board makes a recommendation for an accreditation status to CAAHEP
4. CAAHEP Board reviews recommendation in two stages and makes final determination
 - Recommendation Review Committee
 - Full Board
5. CAAHEP notifies the program of the decision

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Possible Actions by CAAHEP


Credible Education
through Accreditation




Withhold
Accreditation
(seeking Initial)




Initial Accreditation



Continuing
Accreditation



Probationary
Accreditation





Withdraw Accreditation

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Quality Assurance

Credible Education
through Accreditation

- CoAEMSP invites the program director and the dean to evaluate the process, the site visitors, and CoAEMSP when the program receives the Site Visit Report & Findings Letter
- CAAHEP invites the program director to evaluate the accreditation process after it acts on the program

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