



Talking Points & Conversational Starters for Site Visitors

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Table of Contents

Session with Program Director Before the Opening Session	3
Opening General Session Script	3
Talking points to cover	4
Conversational Starters	5
Program Director	5
Medical Director	5
Faculty – General	6
Faculty – Didactic and Lab	7
Clinical Coordinator	8
Students	9
Graduates	10
Advisory Committee	11
Employers	11
Clinical Preceptors	12
Capstone Field Internship Preceptors	12
Closing Session Script	13
Talking points to cover	14

The Site Visit Team may sound repetitive during the site visit. The same introduction of who the site visitors are and why you are there should be repeated with each group of individuals. Many questions are asked multiple times; however, they are asked to a different group each time. As a site visit team, you are looking for common themes. The goal is to be conversational in conversations, placing individuals at ease. Do not ask all the questions; they are only suggestions to cover the accreditation standards. Do not refer to the need to ask specific questions or requirements to complete the Site Visit Report.

Session with Program Director Before the Opening Session

You represent the CoAEMSP and the Commission on Accreditation of Allied Health Education Programs (CAAHEP).

- Explain who that is and what they do.
- You will review information for the CoAEMSP/CAAHEP by speaking with different groups and providing feedback to the program.
- You have reviewed all the documents that the program has previously submitted.
- The evaluation of the program is based on the CAAHEP *Standards*, and site visitors are supportive and consultative.
- You will draft the Site Visit Report and present the Site Visit Team's findings during the Closing Summation at the end of the site visit. The site visit findings are preliminary; therefore, the team does not leave a copy of the report or the summary. The program director is welcome to take notes.
- Identify the preliminary time frame of the process above (no promises!). Review the tentative dates provided in the confirmation of the site visit email to the program and site visitors.
- Projected CoAEMSP Board meeting: _____
- CAAHEP meets every other month; however, we cannot guarantee which month the recommendation will appear on their agenda
- The purpose of this session is to set the stage and the tone for the site visit.

Opening General Session Script

[Note to Site Visit Team: You must read this script at the beginning of the site visit.]

Good morning. We represent the Committee on Accreditation of Educational Programs for the EMS Professions (CoAEMSP), which operates under the auspices of the Commission on Accreditation of Allied Health Education Programs (CAAHEP). CAAHEP is the accreditor. We are here on-site to gather information through observation, interviews, and program documentation to verify, and clarify the self-study report and documentation prepared by the program. We will objectively report our findings to the CoAEMSP relative to the CAAHEP Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions. In addition, we are a consultative and facilitative team for the accreditation process. As site visitors for CoAEMSP, a Committee on Accreditation of CAAHEP, we understand that information about the program, institution, and faculty has been made available to us. We agree to respect and protect this information. All discussions and written information provided before, during, and after the site visit will remain confidential.

While the Family Educational Rights and Privacy Act (FERPA) generally requires written permission from the parent or eligible student 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).

To ensure the confidentiality of the site visit, the CoAEMSP prohibits audio or video recording/monitoring of any portion of the on-site evaluation, including interviews with students and staff, team meetings, deliberations, or exit summation, except for security purposes. The CoAEMSP reserves the right to take disciplinary action against sponsoring institutions/programs whose representatives knowingly violate this policy, including cancellation of a site visit scheduled or in progress or recommendation of probationary accreditation or similar sanction.

We will share our findings with you at the end of this review visit during the Closing Session.

Talking points to cover

- Introductions of everyone and their role (not just the site visitors)
- Thanks for the hospitality
- Comment on the Self-Study Report and supporting documentation (thorough, helpful, clear, informative, interesting, etcetera), if appropriate
- You are representing the CoAEMSP and are representatives of the Commission on Accreditation of Allied Health Education Programs (CAAHEP)
 - Who that is and what they do
- Your purpose is to obtain further information for the CoAEMSP/CAAHEP by speaking with different groups and providing feedback to the program.
- You have reviewed all the documents that the program has previously submitted.
- Evaluation of the program is against the CAAHEP *Standards*; the team wants to be helpful and consultative.
- You will draft a written Site Visit Report and present the findings during the Exit Summation session.
- This site visit is part of a CAAHEP accreditation process, which begins with submitting a Self-Study Report and supporting documentation; other steps include an Executive Analysis, Site Visit, official site visit Findings Letter, Confirmation of the Factual Accuracy (or alleging factual inaccuracy), Program's Response to the Findings Letter, review by the CoAEMSP Board members and formal recommendation to CAAHEP, and finally CAAHEP final decision.
- Possible accreditation recommendations:
 - Seeking Initial Accreditation
 - Initial Accreditation
 - Initial Accreditation with Progress Reports
 - Withhold Accreditation
(program is given an opportunity to Request Reconsideration in advance)
 - Seeking Continuing Accreditation
 - Continuing Accreditation
 - Continuing Accreditation with Progress Reports
 - Probationary Accreditation
(program is given an opportunity to Request Reconsideration in advance)

- Identify the preliminary time frame of the process above (no promises!)
 - Projected CoAEMSP Board meeting
 - CAAHEP meets every other month; however, we cannot guarantee which month the recommendation will appear on their agenda
- For the dean or leadership, ask any clarifying questions for administrative issues noted from the review of the Self-Study Report.
- This is also an opportunity for a conversation with the program administration to assess continuing financial commitment to the program.
- For consortiums and programs that outsource or receive outsourced resources, discuss the program structure, operational considerations, lines of authority and reporting, legal agreements in place, program naming issues, and other details specific to any unique arrangements for program operation.

Conversational Starters

Program Director

1. Tell us about your role with the program.
2. How much input do you have into the budget? If you need equipment, supplies, and continuing education, do you list needs and wants annually? What is the process for obtaining those?
3. What role do you play in scheduling, supervising, and evaluating faculty, including adjunct faculty?
4. Tell us how you and the medical director communicate and what the medical director's involvement is in the program.
5. If the medical director is not involved in the program, what steps have you taken to address this problem?
6. Do you have any satellites or alternate locations? If yes, have they been approved by CoAEMSP?
7. Does your program use services another organization provides, like instructional faculty, space, equipment, or supplies? If yes, do you have a formal written agreement?
8. Does the program sponsor employ you? Who do you report to?

Medical Director

1. Describe your role as the program's medical director.
2. How often do you communicate with the program director (in person, by phone, by email, etc.)?
 - a. What issues do you discuss (curriculum, student issues, etc.)?
3. Describe your involvement with the Program.
 - a. How did you become involved with the program?
 - b. Do you have a contract, or does the program sponsor employ you?
 - c. What are your duties?
 - d. Are you involved in the student selection process?
 - e. Do you review and approve the:

- i. course syllabi?
 - ii. formative evaluations?
 - iii. summative evaluations?
 - f. How do you document the review and approval process?
 - g. Do you teach in the program?
 - i. didactic, case studies, Q&A?
 - ii. practical labs?
 - iii. clinical setting?
 - h. Do you participate in the summative evaluation?
 - i. How do you assess student progress?
 - j. How do you assure student competency for graduation?
 - k. Are you involved with student disciplinary or counseling activities?
4. Do you participate on the Advisory Committee?
 5. If there is an associate medical director, how do you share the duties, and who has the final say on any issue or concern?
 6. Describe your involvement with EMS.
 7. Do you provide medical direction for EMS agencies?
 8. Are you involved in EMS locally? Regionally? At the state level? At the national level?
 9. What changes would you like to see within the program?
 10. What is needed by the program to be more effective in the educational process?
 11. What should we know that we have not asked?
 12. What questions do you have for us?

Faculty - General

Program directors are generally included in this session, although faculty and program directors are not included in other interviews.

1. Tell us about the application process, selection, class size, attrition, and success of students.
2. How do you conduct student recruitment?
3. What are the requirements for admission?
4. How are students selected for the program?
5. What are your responsibilities with the program?
6. Who instructs the didactic and lab portions of the program, and how are those assignments decided?
7. Who does most administrative work to support the program (admissions, financial aid, student support, etc.)?
8. Is anything not getting done when it comes to administrative work?
9. Who attends the Advisory Committee meetings?
10. What texts do you use in the program?
11. How often are student policies reviewed and updated?

Faculty - Didactic and Lab

1. What is your curriculum based on?
2. How is the course schedule developed?
3. Tell us about the classroom format, discussion, activities, and scenarios.
4. Do you have lesson plans for the classroom and lab? Describe how those are developed.
5. What (in)formal training or education have you had in writing test items and evaluating validity and reliability?
 - a. How do you develop your major exams, and who is involved?
 - b. What processes do you use to ensure the validity and reliability of your tests?
 - c. Do you conduct an item analysis (difficulty level and discrimination index or RPBI)?
 - d. What do you do with the results of the item analysis?
6. Do the classrooms and laboratories provide an adequate learning environment?
7. Do you have what you need for equipment, supplies, and other resources for the classroom and lab?
8. Is there equipment used locally that the program does not own?
9. How do students access computer/tablet resources?
10. Do you ever use guest lecturers? Do they get evaluated?
11. How often are physicians used to present lectures or labs?
12. Describe the medical director's interaction with students.
13. How are psychomotor performances tracked in the lab/skill setting and correlated with clinical/field?
14. Describe the summative (comprehensive) assessments for the final evaluation of the students (cognitive, psychomotor, and affective). When do these occur?
 - e. When a student is unsuccessful, what are the remediation or retest policies?
15. Who makes the final determination that a student has successfully completed the program?
16. What is the student success rate on the National Registry or State examinations (first time and overall)?
17. What is the process if a student is injured in class, lab, or clinical?
18. What are the requirements to be an instructor (program and state)?
19. How do you stay current with clinical issues, trends, and technologies?
20. Who evaluates you? Do supervisors, peers, or students evaluate you?
21. Are you provided sufficient CE opportunities to remain current with changes in medicine and education, and do you take advantage of those opportunities?
22. If you have a grievance about faculty matters, what do you do?

Clinical Coordinator

1. Describe your responsibilities for clinical coordination.
 - a. Scheduling
 - b. Documentation and tracking review
 - c. Visits to clinical and field sites with students
 - d. Counseling for performance issues
2. How do the students schedule clinical rotations, field experience, and capstone field internships?
3. Describe the tracking mechanism for the required patient contacts and procedures in the lab, clinical, and field experiences?
4. If students use a commercial tracking product, how does the program staff audit the records? What percentage of data is audited?
5. Who monitors the students at the clinical sites, field internship, and capstone field internship locations?
 - a. Who does the orientation for clinical and field experience preceptors?
 - b. Who does the training for capstone field internship preceptors?
 - c. How do you document liaison orientation and preceptor training?
6. Are clinical sites adequate to provide the necessary learning for the students with the volume of patients and variety?
7. Are capstone field internship sites adequate to provide the necessary learning for the students with the volume of patients and variety?
8. Describe your program clinical rotations.
 - a. Which sites do the students go to?
 - b. When do students start clinical and field experience rotations in relation to the program schedule and sequencing?
 - c. How long is a typical clinical shift?
 - d. How long is a typical field experience rotation?
9. Where do students get experience with specialty patients (pediatrics, OB, psych, geriatric)?
10. Describe your capstone field internship preceptor assignments, such as how they are selected, trained, and assigned.
11. Are there minimum criteria required to be a preceptor?
12. How are preceptors assigned (i.e., the same preceptor for all the student's shifts or the student is assigned to the preceptor who is on duty that day)? Is it possible that a student is assigned to their brother/sister-in-law or a friend?
13. How do you ensure consistent evaluation in the capstone field internship?
14. What are the policies for students in scheduled clinical rotations? Are students always a third rider and not part of the agency's minimum staffing (i.e., students are not substituted for staff)?
15. How is the affective domain evaluated during the clinical and field rotations?
16. How does the program ensure the students meet the required clinical/field student minimum competency requirements?

17. If a clinical or field internship preceptor has concerns about the student's abilities or other issues, how can they address the concerns?
18. Does the program provide formal feedback to the preceptors obtained from the students? Describe the process.
19. How does the program oversee the students at the out-of-state clinical/field sites? Who is the medical director for these sites?

Students

Provide a brief introduction to the accreditation process, the value of accreditation, and how it relates to Paramedic education.

1. Describe a typical class day.
2. Describe your quizzes and exams; are you adequately prepared for them? Do they make you think?
3. Do you have guest lectures? Who? What do you do if you find a guest lecture confusing?
4. Are you provided with the required student minimum competencies?
5. What is required for you to graduate?
6. Who is your medical director, and how often do you see them?
7. Does your medical director participate in any classes or labs? Do you see them in a clinical rotation?
8. What is the instructor-to-student ratio in labs? Are your labs adequately preparing you? Tell us more.
9. Are supplies adequate for lab? Do you have pediatric equipment and supplies?
10. Is the information in the lab and classroom consistent? Does the information ever conflict? If the information conflicts, how do you clarify?
11. How do you document and track your clinical experiences, patient contacts?
12. How do you know your status or grades in the program? Do you understand what you need to do to be successful?
13. Who monitors you in the clinical portion of the program?
14. Do your preceptors communicate with your instructor or program director?
15. How do preceptors know what skills you are able to perform?
16. What is the process for moving into the team leader role, and how do you know if you are meeting program objectives during your internship?
17. How many successful team leads must you perform?
18. Tell us about a time you all had a problem in class and how it was handled by the program faculty.
19. What if that problem involves your instructor or program director?
20. What do you do if you have a problem or issue with your preceptor or clinical site? Can you tell us about a time there was a problem and how it was handled?
21. What do you do if you have a needle stick or exposure in the clinical or field setting?
22. Have you had an affective or professional behavior evaluation? What did it include?
23. Were there any surprises from the program in terms of requirements or expenses? What were they?
24. What is the best part of this program and why did you choose to come here?

25. Would you recommend this program to family and friends?
26. What suggestions would you make to improve the program? Have you shared those suggestions with your instructors or program director?
27. Is there anything the program needs to help ensure your ongoing success?
28. What questions do you have for us?

Graduates

Interview **recent** graduates, and those who are not employed by the program. If the program has changed significantly from when the individual graduated, then some of these questions will not be important.

1. When did you graduate?
2. Describe what you were told entering the program regarding attendance, grades, clinical requirements, cost, and graduation requirements. Was the information accurate? Any surprises?
3. Describe a typical class session.
4. Were you clear about course requirements?
5. Did you know your progress toward achieving the requirements to graduate?
6. Did you evaluate instructors, guest lecturers, and the program? How often?
7. Did the program have clearly written course syllabi?
8. How often did you have exams?
9. Did you have guest lecturers?
10. If you had a guest lecturer and the material was unclear, what did you do?
11. Who was the medical director for the program?
12. When did you see the medical director?
13. Describe the practical labs. How many students were assigned to one instructor?
14. Was there adequate and appropriate laboratory space?
15. Did you have enough equipment in the lab including pediatric equipment?
16. How did you track your experiences in the clinical and field internship areas?
17. Did the clinical sites provide you with sufficient learning opportunities to ensure achievement of the student minimum competencies?
18. Did you feel competent when you were in the clinical setting?
19. Were you evaluated frequently and fairly?
20. Did the program prepare you for the National Registry or State credentialing examination?
21. How accessible were the faculty? If you were having difficulty with material, were you able to get help from an instructor?
22. If you had a problem in class, a clinical area, field internship, or capstone field internship, who do you go to?
23. If you could change one thing in the program, what would you change?
24. What had the greatest impact on your learning and success as a student in the program?
25. What content areas need more emphasizing or instruction?

26. Did you feel prepared to enter the EMS workforce?
27. What do you perceive was the greatest strength of this program?
28. What is the greatest limitation of this program?
29. If you were choosing again, would you choose this program?
30. Would you recommend this program to your favorite person?

Advisory Committee

1. Which community of interest do you represent? Who are the employers?
2. How often does the Advisory Committee meet?
3. Who is the chair of the Advisory Committee?
4. Do you receive the meeting minutes?
5. Do you recall reviewing the program's minimum expectation/goal and student minimum competency requirements?
6. Are your recommendations listened to and accepted? If not, give an example and explain why they were not adopted.
7. Does the group review performance indicators, i.e., attrition rates, first-time pass rates, job placement, and graduate and employer surveys?
8. Do you complete a survey annually, assessing the program's resources?
9. Do the program's goals serve the needs of the local communities of interest?
10. What are the program's strengths?
11. What are the program's limitations?
12. If you could change one thing about the program, what would it be?

Employers

1. Do you hire graduates of this program?
2. What attributes do graduates of this program possess that help in your hiring decision process?
3. Does your agency precept students from the program during the capstone field internship?
4. What are the greatest strengths of the program?
5. What would you like the program to improve or add?
6. Do you recommend this program to your employees?
7. If you were the program director, what single change would you make?
8. What did we not ask about that you think we should know?

Clinical Liaisons

Ideally, the individuals should work with the students, not just be the supervisor or department educator. Recently, more facilities have identified an EMS liaison responsible for communicating with the program, scheduling, and providing program information to their staff. This is the individual who is typically a representative on the Advisory Committee.

1. What is the average daily volume for your clinical area (or month or year)?
2. Do the students from this program report in uniform and with a name badge that identifies them as students?
3. Are students assigned to a single staff for the shift, or do they roam based on cases and activity?
4. How do you confirm which clinical procedures students can perform?
5. How are you oriented to the paramedic student skill levels, clinical preparation/expectations/objectives?
6. What do you allow students to perform (e.g., IVs, meds, suction, bagging, assessments, intubation)?
7. Describe how staff approaches a student who is assigned to them.
8. Do you have contact with a program representative when the students are in clinical rotations (e.g., instructor, clinical coordinator)? How often?
9. What do you do if you have a problem with a student (ex., skills, attitude, knowledge)? Who do you report it to?
10. What do you do if you have an urgent problem with a student (possible impairment, rude to a patient, etc.)?
11. Who completes an evaluation of the student for the shift?
12. What are the students from this program particularly good at (strengths of the program)?
13. What needs improvement?
14. Do you receive any feedback from the program?
15. What do you do if a student is exposed to a significant infectious disease?

Capstone Field Internship Preceptors

These individuals should be paramedic preceptors who work directly with the interns, not just supervisors. A supervisor can be interviewed and explain information but should not take the place of the preceptor.

1. How are you assigned as a preceptor for paramedic students in this program?
2. How often do you precept students?
3. What is your average patient call volume per shift?
4. Do you have a student from this program for multiple shifts? If so, how many shifts during the capstone field internship?
5. How do you confirm which clinical procedures students have been approved to perform?
6. Describe how you approach a student assigned to you (i.e., orientation, skills, drills, and evaluations).
7. Describe your approach to coaching the student during calls.

8. Do the students from this program report in uniform and with a name badge that identifies them as students?
9. How do you know if a team lead was successful? Does the program define a team lead?
10. What/who determines when a student has successfully completed their capstone field internship (e.g., hours, competencies, team leads)?
11. Do you complete an evaluation of the student daily and at major points during the field internship?
12. Do you have contact with the program when the students are in field rotations (e.g., instructor, clinical coordinator)? How often?
13. Does the program seek and accept your feedback and evaluation of the student?
14. Describe the training you receive from this program on the expectations of a preceptor and the student evaluation process.
15. Do you receive an evaluation from the student?
16. What are the students from this program particularly good at (strengths of the program)?
17. What needs improvement?

Closing Session Script

[Note to Site Visit Team: You must read this script following your thank you for the hospitality and consideration shown to the site visit team]

Site visitors do not make an accreditation recommendation or imply what CoAEMSP's recommendation might be. The program will be required to respond to the accuracy of the site visit findings later. The CoAEMSP Board may add, delete, change, or request clarification to the site visit summation in the Site Visit Findings Letter sent to the program following this site visit. CoAEMSP bases its recommendation to CAAHEP on the accreditation record of the program compiled during this review, which includes the Self-Study Report, the Site Visit Report, the Site Visit Findings Letter, and the Program's Response to the Site Visit Findings Letter. The Commission on Accreditation of Allied Health Education Programs (CAAHEP) determines the final status of public recognition. These are our site visitor's impressions of the program's strengths and potential areas of non-compliance with the accreditation standards.

Based on the information gathered during this on-site review, we have identified the following program strengths:

[Read the Strengths listed.]

Based on the information gathered during this on-site review, we have identified the following deficiencies:

[State the Standard and the Rationale for each potential non-compliance area listed.]

We have noted the following Suggestions for Recommendations:

[Read the Recommendations listed.]

Talking points to cover

- Thank the program for their hospitality, openness to the thorough evaluation, and your suggestions, if appropriate. Usually, it is!
- Tell them where we are, discussing the unofficial report. Explain that the site visit team will send the unofficial Site Visit Report to the CoAEMSP office within one week.
- The program will receive the official Findings Letter and Site Visit Report. Then, there will be 14 days to agree to factual accuracy or to allege factual inaccuracies with supporting documentation.
- Review the important dates in the email confirming the site visit from CoAEMSP.
- Read the disclosure statement on the Site Visit Report
- Give the unofficial feedback—both strengths (and elaborate; this is the time for the program personnel to be complimented, if appropriate) and potential citations. If specific statements are complimentary from students or others, pass that on.
- If there are numerous citations, you can mention that some may be simple to correct while others may take further discussion and planning. In some instances, citations may be combined.
- Present the other recommendations briefly and explain, if needed.
- Let the program know that they will receive a survey to provide feedback to CoAEMSP on the site visit and the site visitors.