

Paramedic Program Accreditation: Best Practices and Common Questions

August 18, 2023



Credible education through accreditation



We have no actual or potential conflicts of interest in relation to this presentation.



Common Citations



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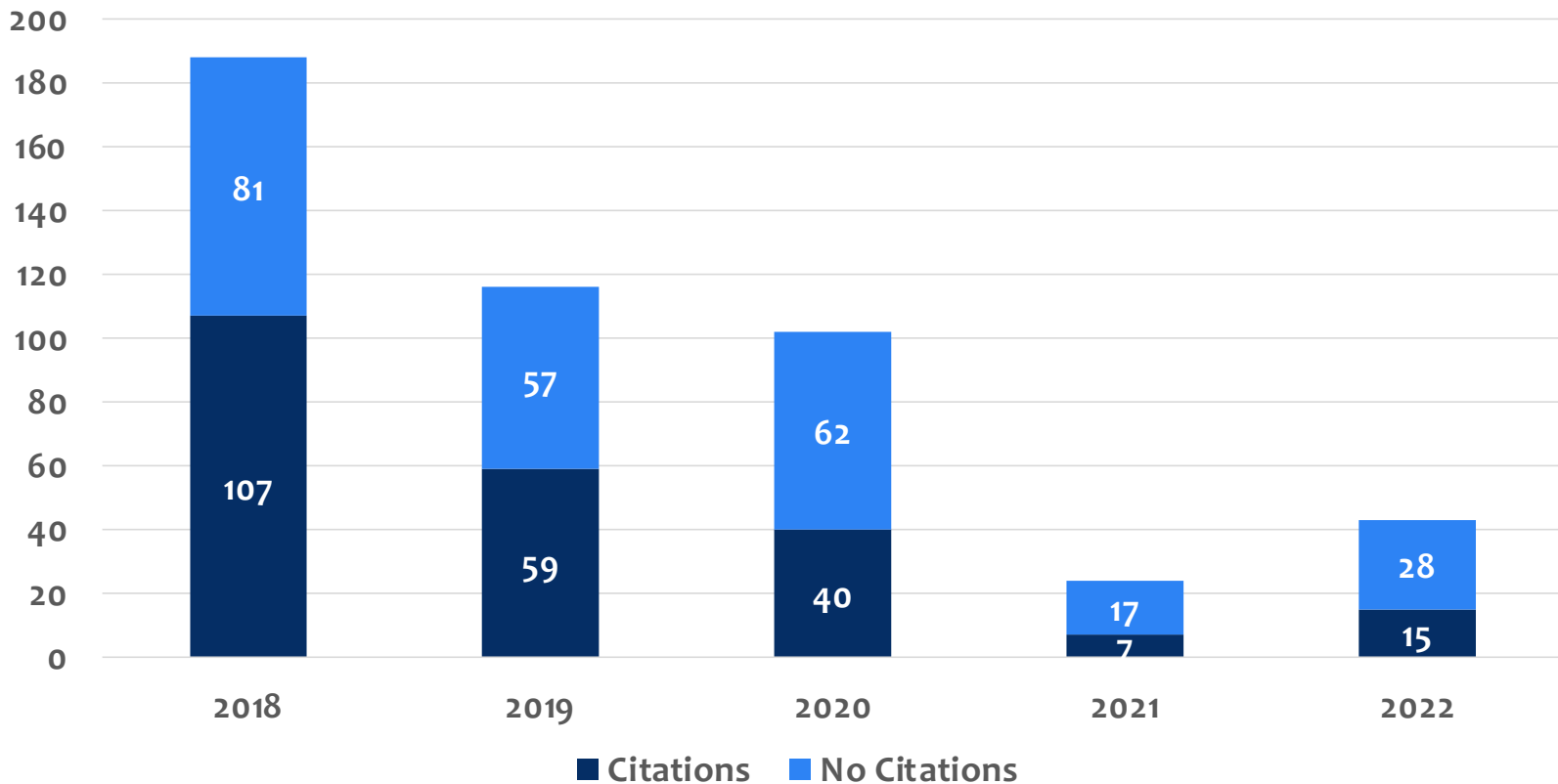
About the Top 5

- Examines 5 years of aggregate data – 2018-2022
- 473 site visits
- Typically, average ~150 site visits annually
- COVID impact
 - 2021 – 24 site visits
 - 2022 – 43 site visits



With Citations & Without Citations

N=473 (2018-2022)



Site Visits and Citations

N=473 (2018-2022)

- 52% (245) of programs had NO citations
- Mean of 4.75 citations per program (228)





**Standards and Guidelines
for the Accreditation of Educational Programs in the Emergency Medical
Services Professions**

Essentials/Standards initially adopted in 1978; revised in 1989, 1999, 2005, and 2015

- I – Sponsorship (0)
- II – Program Goals (0)
- III – Resources (**3**)
- IV – Student and Graduate Evaluation/Assessment (**2**)
- V – Fair Practices (0)



#5 – III.C.1. Resources – Curriculum ~36 programs~

The curriculum must ensure the achievement of program goals and learning domains. Instruction must be an **appropriate sequence** of classroom, laboratory, clinical/field experience, and field internship activities. Progression of learning must be didactic/laboratory integrated with or followed by clinical/field experience followed by the capstone field internship, which must occur after all core didactic, laboratory, and clinical experience. Instruction must be based on **clearly written course syllabi** that include course description, course objectives, methods of evaluation, topic outline, and competencies required for graduation. The program must demonstrate by comparison that the curriculum offered meets or exceeds the content and competency of the latest edition of the National EMS Education Standards.



#4 – III.D. Resources – Resource Assessment ~36 programs~

The program must, **at least annually**, assess the appropriateness and effectiveness of the resources described in these Standards. The program must include results of resource assessment from at least students, faculty, medical director(s), and advisory committee using the CoAEMSP resource assessment tools. The results of resource assessment must be the basis for ongoing planning and appropriate change. An action plan must be developed when deficiencies are identified in the program resources. Implementation of the action plan must be documented and results measured by ongoing resource assessment.



#3 – III.B.1.a.6).
Resources – Program Director Responsibilities
(preceptor training)
~49 programs~

The program director must be responsible for all aspects of the program, including, but not limited to: the **orientation/training and supervision** of clinical and field internship preceptors.



**#2 – IV.A.2.b.
Student and Graduate Evaluation/Assessment -
Documentation
~65 programs~**

The program must track and document that each student successfully meets each of the program established minimum patient/skill requirements for the appropriate exit point according to patient age range, chief complaint, and interventions.



#1 – IV.A.1.

Student and Graduate Evaluation/Assessment – Student Evaluation-Frequency and Purpose ~86 programs~

Evaluation of students must be conducted on a recurrent basis and with sufficient frequency to provide both the students and program faculty with **valid** and timely indications of the students' progress toward and achievement of the competencies and learning domains stated in the curriculum. Achievement of the program competencies required for graduation must be assessed by criterion-referenced, **summative**, comprehensive final evaluations in **all learning domains**.





improvement
continuous

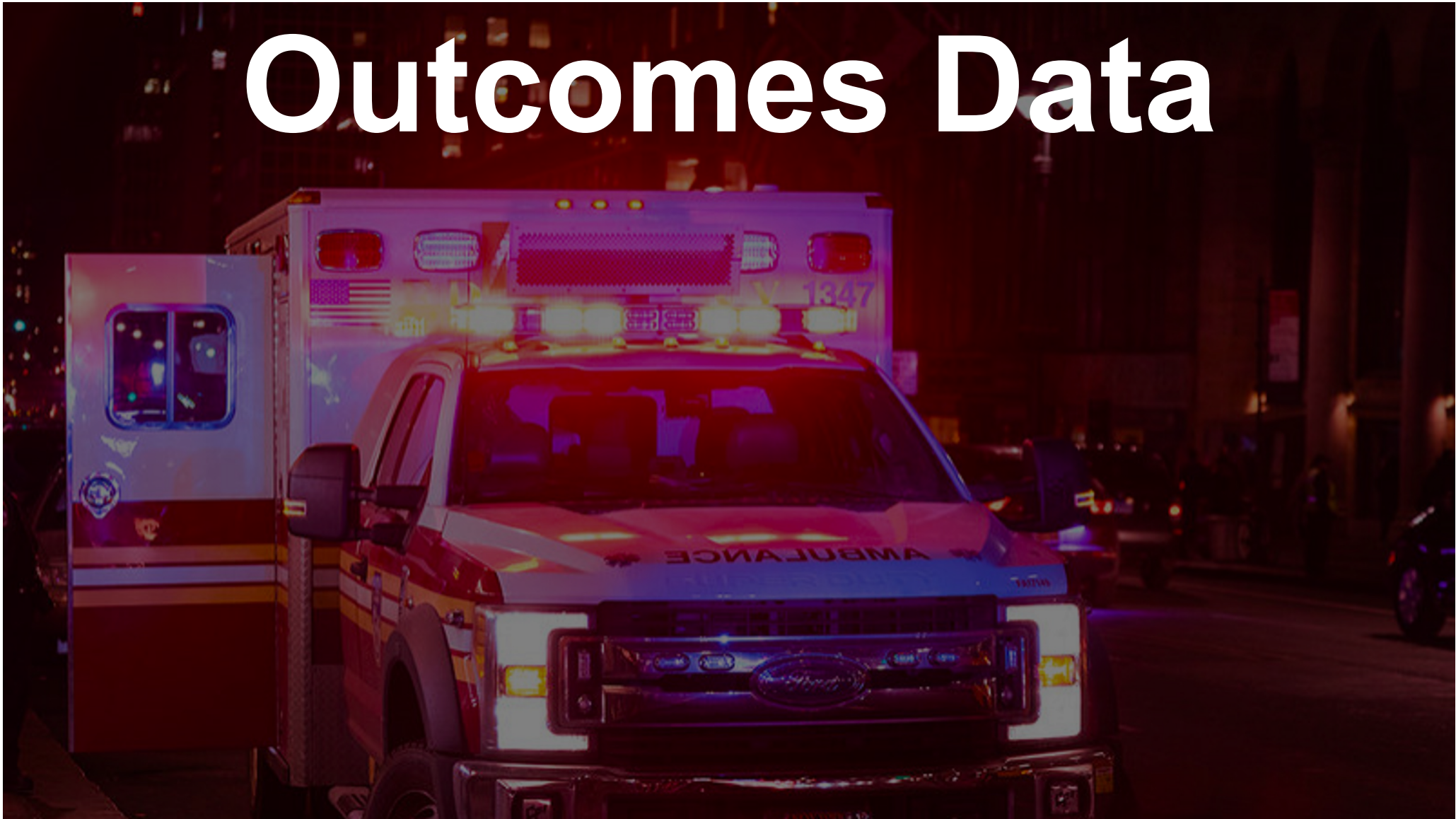
“It’s okay to
have a citation;
it’s not the end
of the world...”

ACCREDITATION
IS NOT AN EVENT.

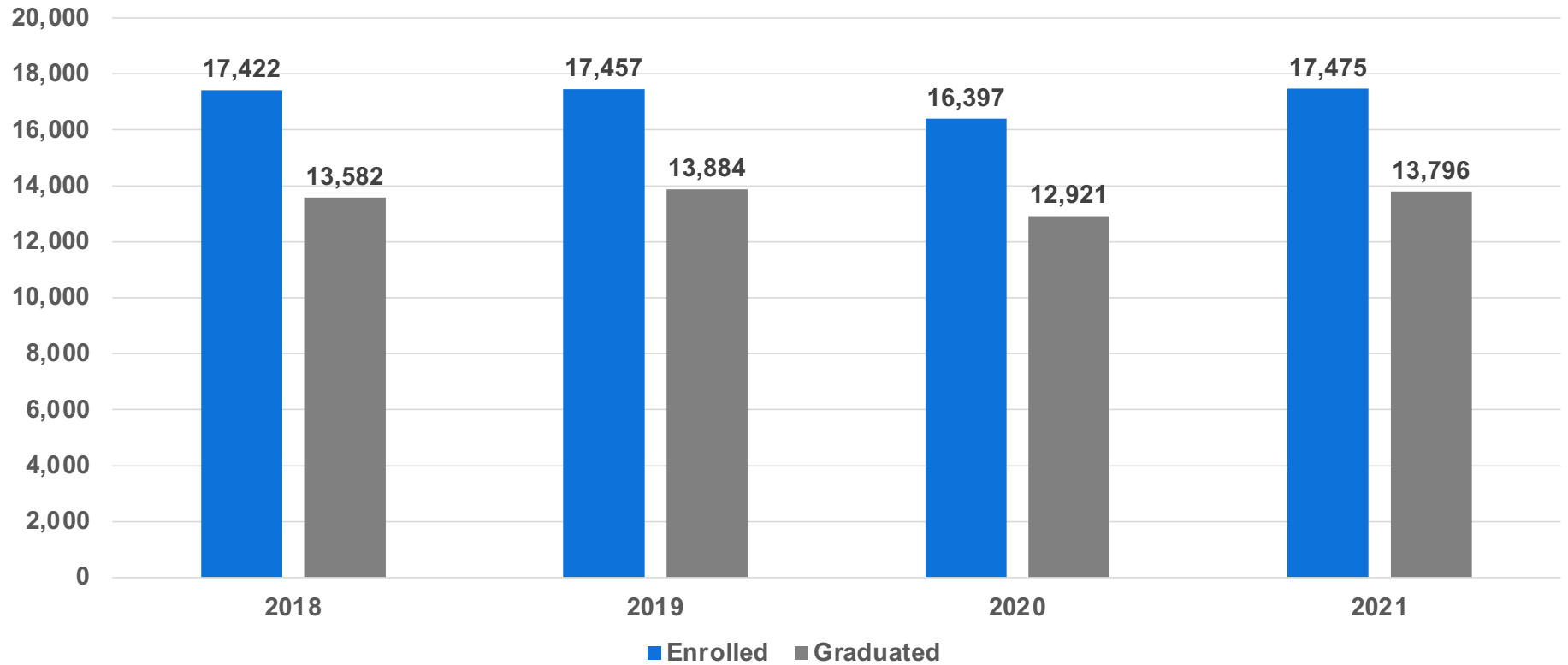


IT IS A PROCESS. *A*

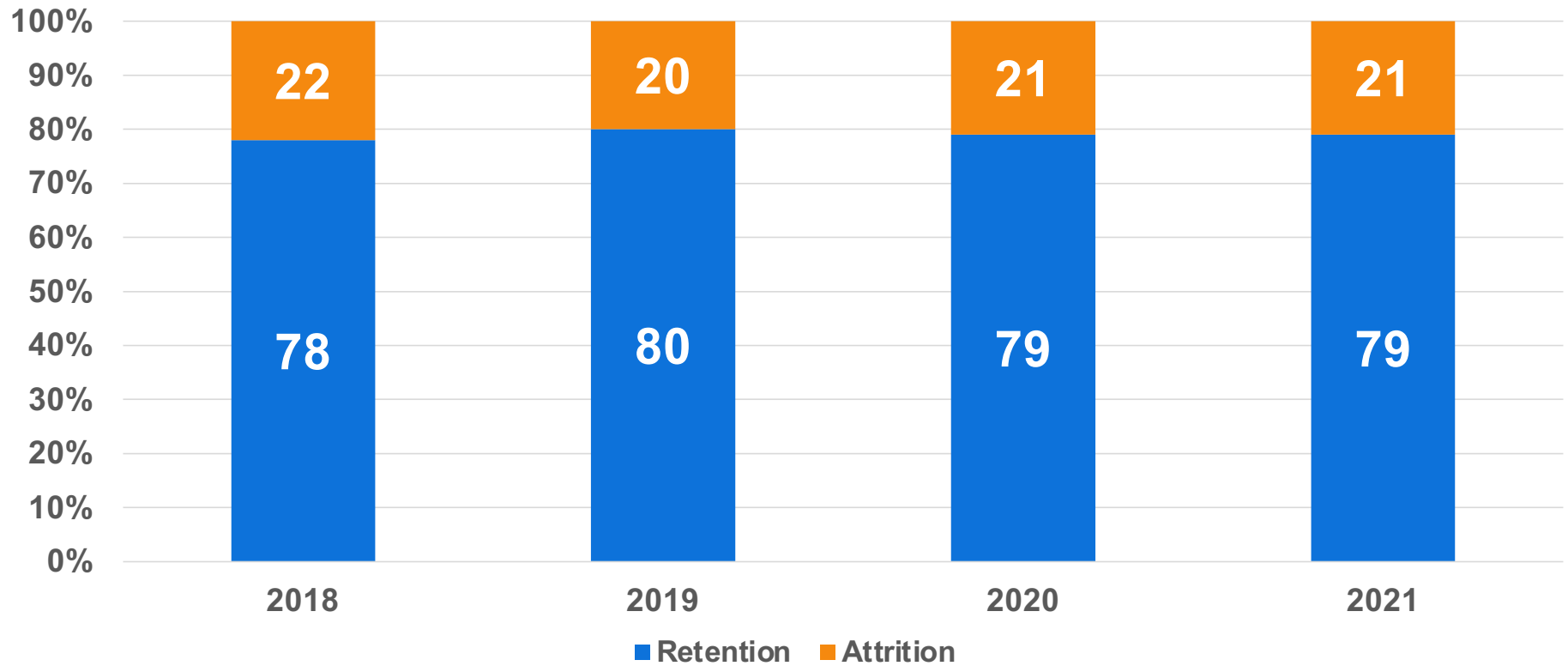
Outcomes Data



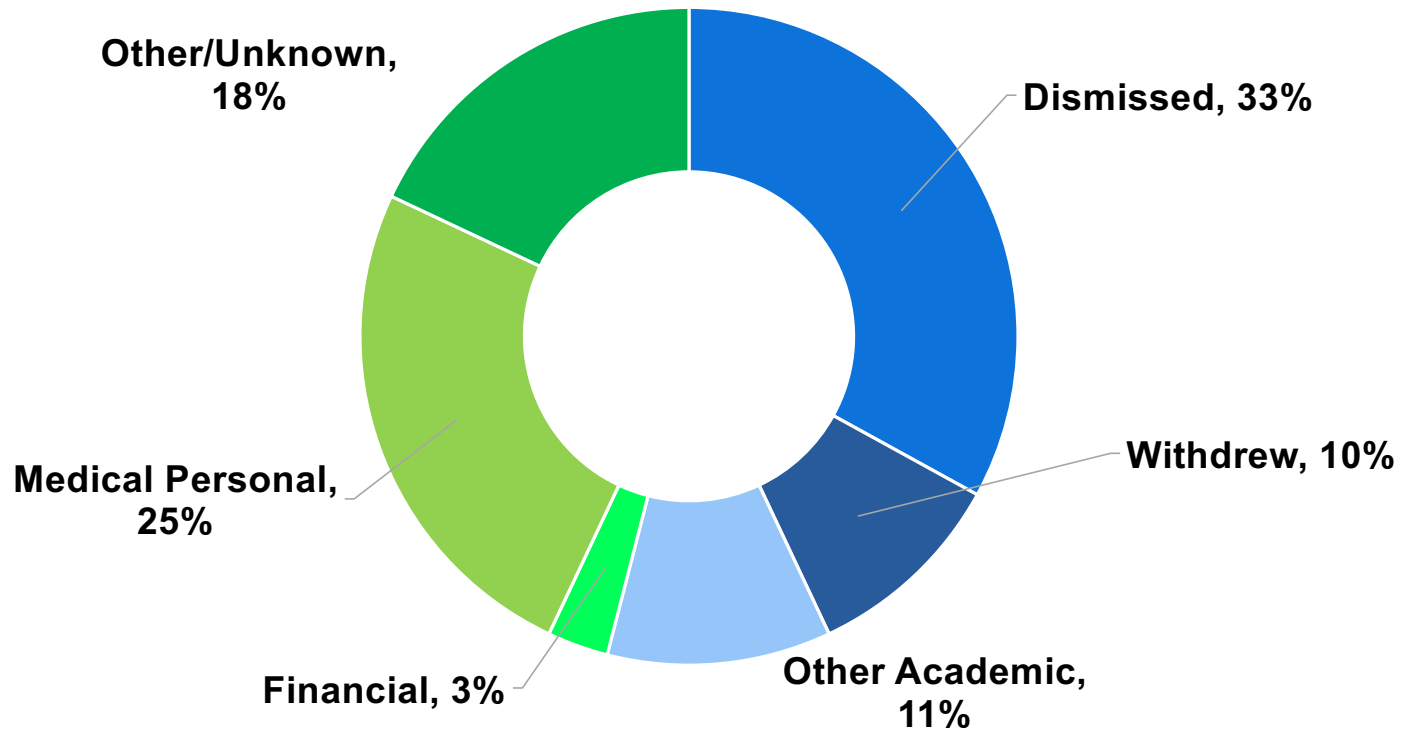
Enrollment & Graduates



Retention Outcome



Reasons for Attrition - 2021



Received: 24 October 2022

Revised: 16 January 2023

Accepted: 6 February 2023

DOI: 10.1002/emp2.12917




ORIGINAL RESEARCH

Emergency Medical Services



WILEY

Paramedic educational program attrition accounts for significant loss of potential EMS workforce

Matthew Ball MD¹ | Jonathan R. Powell MPA, NRP^{2,3}  | Christopher B. Gage MHS, NRP^{2,3}  | Katelynn A. Kapalo PhD² | Jordan D. Kurth PhD² | Lisa Collard AS⁴ | Michael G. Miller EdD, RN⁴ | Ashish R. Panchal MD, PhD^{2,3,5} 



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Comparison to Other HCP

- Nursing attrition - ~20% (2019)
- Respiratory Therapy attrition - ~18% (2020)

Accreditation Commission for Education in Nursing. 2021 Report to Constituents. Accreditation Commission for Education in Nursing. Accessed September 27, 2022.

Commission on Accreditation for Respiratory Care. 2021 CoARC Annual Report of Current Status. Accessed September 27, 2022.



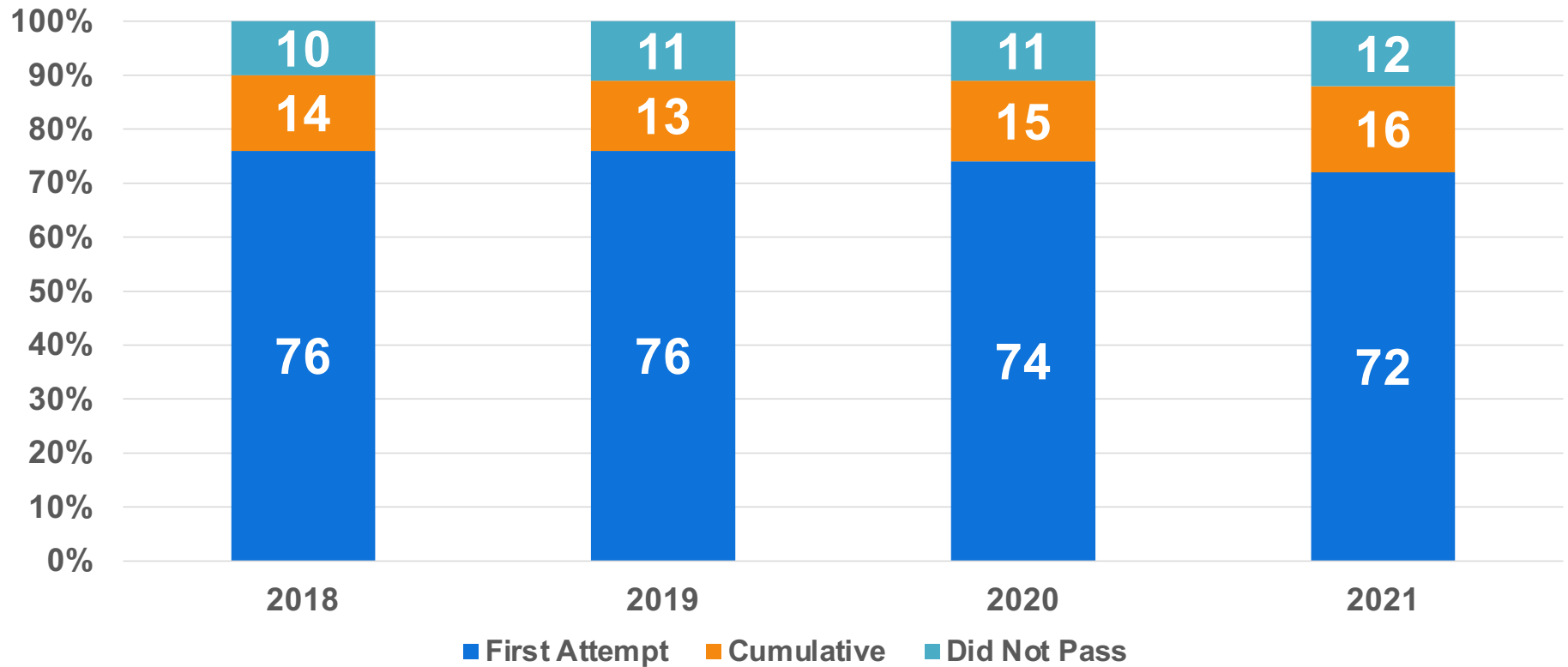
Influential Factors to Retain Students

- Academic Advising
- Social Connectedness
- Student Involvement
- Faculty & Staff Approachability
- Business Procedures
- Learning Experiences
- Student Support Services

*Hanover Research. Strategies for Improving Student Retention. Hanover Research.
Accessed October 19, 2022.*



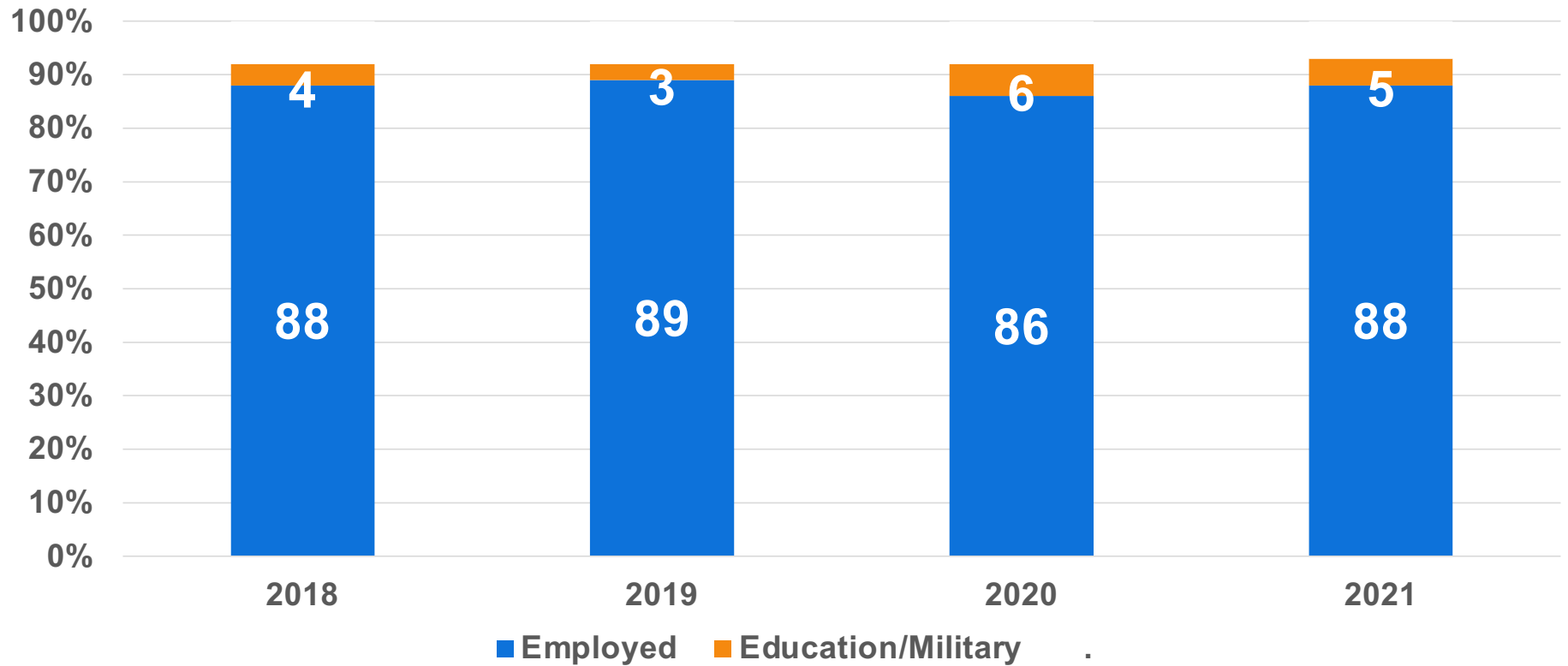
Examination Outcome





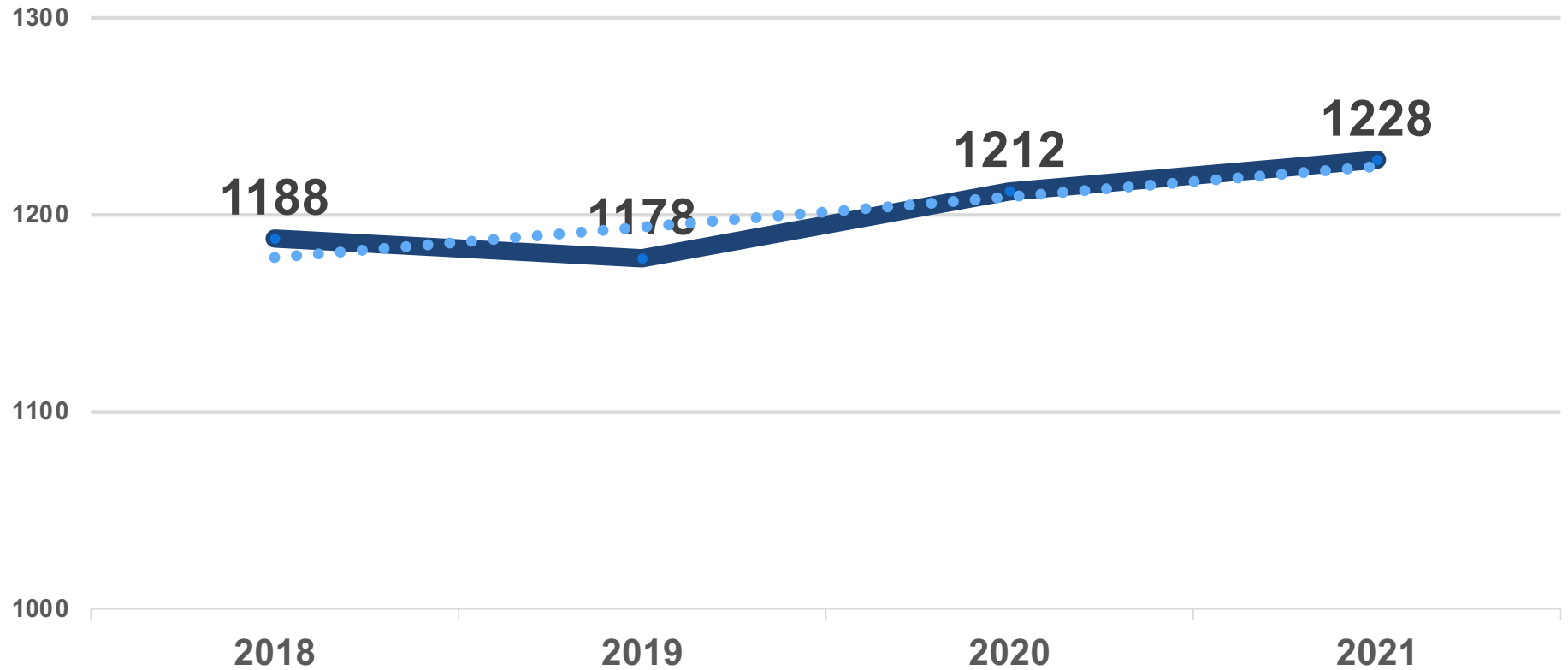
**An average of
3.75% of
graduates do
not attempt
examination...**

Positive Placement Outcome

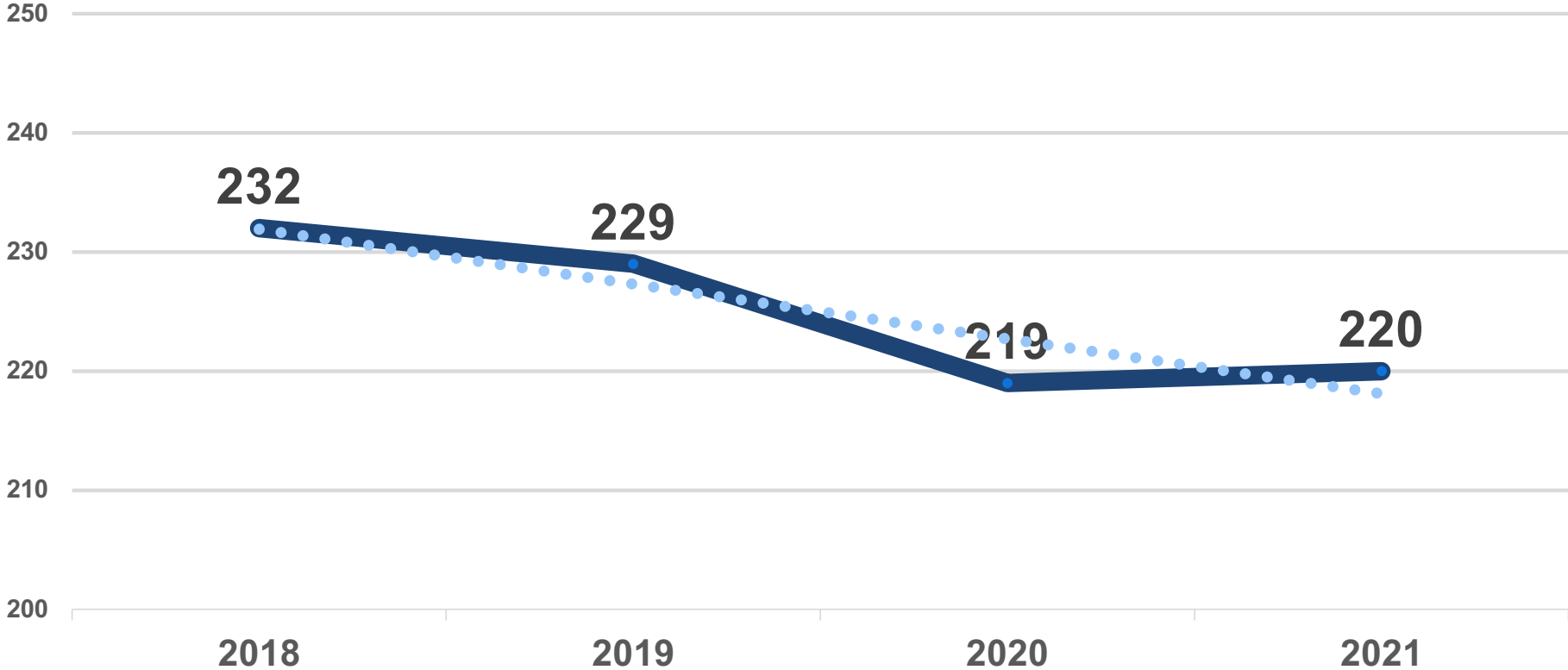


Instructional Hours

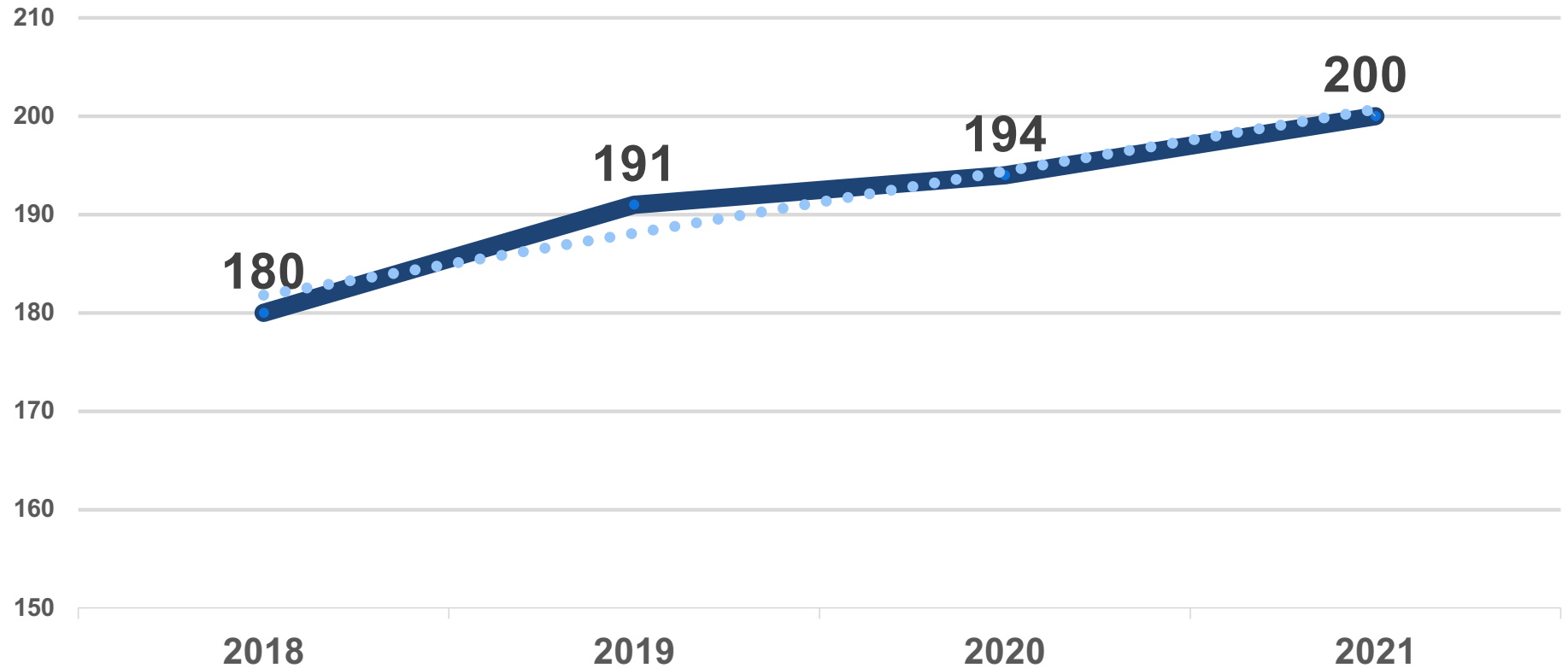
Total Instructional Hours



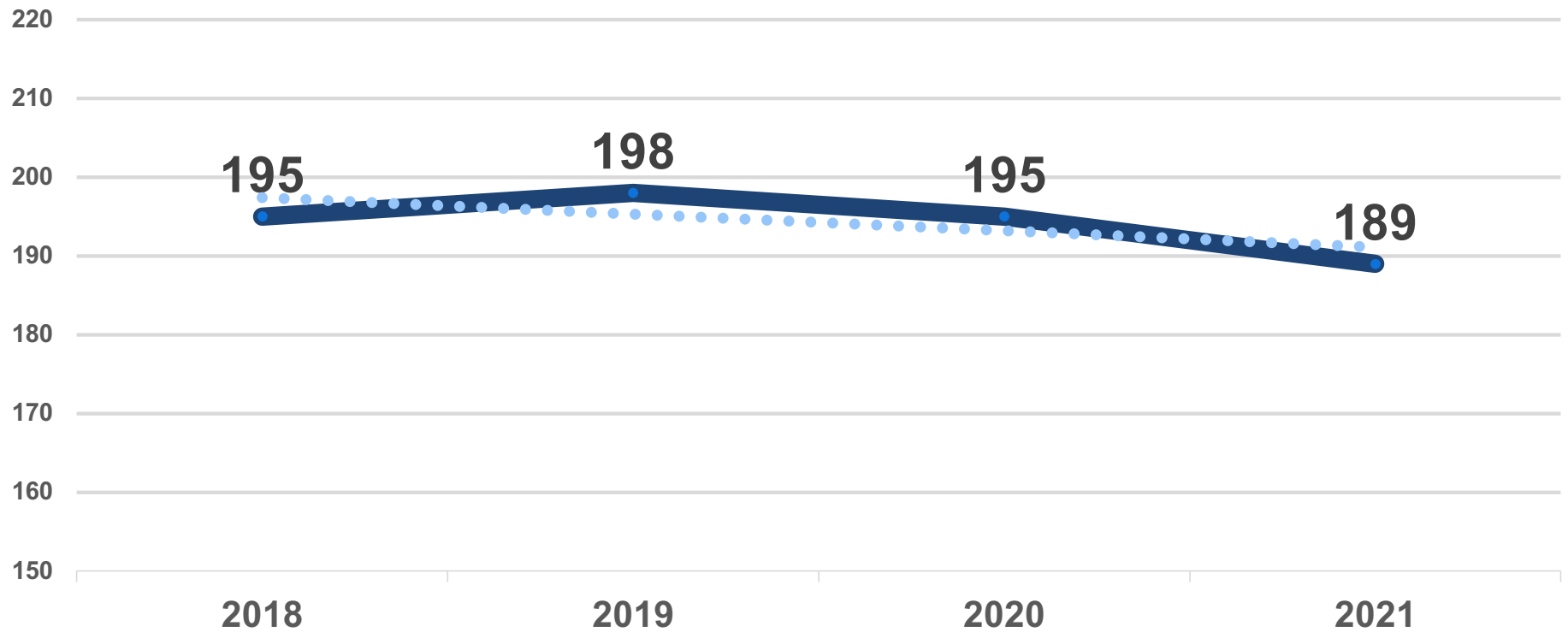
Total Clinical Hours



Total Field Experience Hours



Total Capstone Field Internship Hours



Distance Education



**COMMISSION ON ACCREDITATION
OF ALLIED HEALTH EDUCATION PROGRAMS**

Policy 209 – Instructional Modalities, p. 22-26

Policies & Procedures

Distance Education (1 of 2)

- Approval of institutional accreditor
- Requires substantive interaction between instructor and student
- Process to uphold academic integrity
- Adequate information technology resources for students and faculty
- Technical support for students and faculty



Distance Education (2 of 2)

- Experience and competency in distance education instructional design
- Student orientation to distance education delivery system(s)
- Professional development for faculty including assessment of effectiveness in DE delivery
- Clearly discloses technology requirements and resources to support students learning



**What
questions
do you have
of us?**

- Advisory Committee
- Public Member
- Access to Clinical Sites
- Advanced Placement
- Policy Development
- SMC & Tracking
- SAT/ALT Locations
- Site Visits

QUESTIONS

Additional Resources



[ACCREDITATION](#) ▾ [AEMT](#) [SITE VISITS](#) ▾ [STUDENTS & PUBLIC](#) ▾ [ABOUT](#) ▾ [NEWS & EVENTS](#) ▾ [RESOURCE LIBRARY](#)

Resource Library

Take advantage of this array of accreditation tools. These resources include articles, webinars, and explanations of terminology and requirements that everyone associated with the accreditation process will find indispensable in seeking or maintaining accreditation.

Quick Links

- [Application / Voluntary Withdrawals](#)
- [CAAHEP Standards & Guidelines](#)
- [Instruments & Forms](#)
- [Medical Directors \(MD\)](#)
- [Personnel](#)
- [Policies & Procedures](#)
- [Program Directors \(PD\)](#)
- [Program Minimum Numbers](#)
- [Resource Assessment](#)
- [Samples](#)
- [Self-Study Reports](#)
- [Site Visits](#)
- [Step by Step Instructions](#)



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“The CoAEMSP–staff and site visitors–are available as a resource.”

**Contact Us /
Staff Members**



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