We have no actual or potential conflicts of interest in relation to this presentation.
Common Citations
About the Top 5

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


• I – Sponsorship (0)
• II – Program Goals (0)
• III – Resources (3)
• IV – Student and Graduate Evaluation/Assessment (2)
• V – Fair Practices (0)
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.
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.
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.
Continuous improvement

“It’s okay to have a citation; it’s not the end of the world…”
ACCREDITATION IS NOT AN EVENT.

IT IS A PROCESS.
Outcomes Data
Enrollment & Graduates

<table>
<thead>
<tr>
<th>Year</th>
<th>Enrolled</th>
<th>Graduated</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>17,422</td>
<td>13,582</td>
</tr>
<tr>
<td>2019</td>
<td>17,457</td>
<td>13,884</td>
</tr>
<tr>
<td>2020</td>
<td>16,397</td>
<td>12,921</td>
</tr>
<tr>
<td>2021</td>
<td>17,475</td>
<td>13,796</td>
</tr>
</tbody>
</table>

Credible education through accreditation
Retention Outcome

<table>
<thead>
<tr>
<th>Year</th>
<th>Retention</th>
<th>Attrition</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>78%</td>
<td>22%</td>
</tr>
<tr>
<td>2019</td>
<td>80%</td>
<td>20%</td>
</tr>
<tr>
<td>2020</td>
<td>79%</td>
<td>21%</td>
</tr>
<tr>
<td>2021</td>
<td>79%</td>
<td>21%</td>
</tr>
</tbody>
</table>

Credible education through accreditation
Reasons for Attrition - 2021

- Dismissed, 33%
- Medical Personal, 25%
- Other/Unknown, 18%
- Other Academic, 11%
- Withdraw, 10%
- Financial, 3%
Paramedic educational program attrition accounts for significant loss of potential EMS workforce

Matthew Ball MD¹ | Jonathan R. Powell MPA, NRP²,³ ID | Christopher B. Gage MHS, NRP²,³ ID | Katelynn A. Kapalo PhD² | Jordan D. Kurth PhD² | Lisa Collard AS⁴ | Michael G. Miller EdD, RN⁴ | Ashish R. Panchal MD, PhD²,³,⁵ ID
Comparison to Other HCP

- Nursing attrition - ~20% (2019)


- Respiratory Therapy attrition - ~18% (2020)

Influential Factors to Retain Students

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

An average of 3.75% of graduates do not attempt examination...
Positive Placement Outcome

2018: Employed 88%, Education/Military 4%
2019: Employed 89%, Education/Military 3%
2020: Employed 86%, Education/Military 6%
2021: Employed 88%, Education/Military 5%
Instructional Hours
Total Instructional Hours

- 2018: 1188
- 2019: 1178
- 2020: 1212
- 2021: 1228
Total Clinical Hours

Year | Clinical Hours
--- | ---
2018 | 232
2019 | 229
2020 | 219
2021 | 220

Credible education through accreditation
Total Capstone Field Internship Hours

- 2018: 195
- 2019: 198
- 2020: 195
- 2021: 189
Distance Education
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
Additional Resources

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

Credible education through accreditation
“The CoAEMSP–staff and site visitors–are available as a resource.”
Thank you for your education through accreditation.