

Checklist for Program Directors of CoAEMSP Letter of Review Programs

The following checklist is a tool to assist you, the Program Director, with managing what is required by CoAEMSP to maintain the CoAEMSP Letter of Review and seek CAAHEP accreditation. The checklist is an internal document for a program's use. Due dates will differ for each program; therefore, the due date column is empty in many cases. You may fill in the Program's due date. Where the due date is the same for every program, such as the annual report and annual fee, the date is listed.

What	Location	Comments
Should have in place prior to seeking Initial Accreditation...		
<p>Minimums for patient/skill contacts</p> <p>CAAHEP <i>Standards</i> to reference:</p> <ul style="list-style-type: none"> ▪ II.B. Program Goals Appropriateness of Goals and Learning Domains ▪ III.B.2.a.2) Resources Medical Director – Minimum Numbers ▪ III.C.2. Resources Curriculum – Minimum Numbers 	<p>Appendix G located at www.coaemsp.org</p>	<p><i>Note:</i> the minimum number of patient encounters must be 2 or more, including each of the pediatric age subgroups.</p> <p>The program's established minimums for patient encounters must be endorsed by the program's Medical Director (documentation of that endorsement) and the program's Advisory Committee (meeting minutes of that endorsement).</p>
<p>Tracking System</p> <p>CAAHEP <i>Standards</i> to reference:</p> <ul style="list-style-type: none"> ▪ IV.A.2. Student and Graduate Evaluation/Assessment Documentation 	<p>www.coaemsp.org/Evaluations.htm</p>	<p>Detailed patient encounter tracking system, in use for at least one entire class of students (enrollment through graduation) that will show that every student has met the minimum patient encounter numbers, in each category, as specified in Appendix G.</p> <p>Programs may develop their own, adopt the sample tracking spreadsheets on www.coaemsp.org, or use a commercially available tracking tool.</p>
<p>Clinical & Field Sites</p> <p>CAAHEP <i>Standards</i> to reference:</p> <ul style="list-style-type: none"> ▪ III.A.2. Resources Hospital/Clinical Affiliations and Field/Internship Affiliations 		<p>Ensure sufficient clinical and capstone field internship resources necessary to provide every student with the specified number of patient/skill contacts.</p>
<p>Action Plan for not meeting minimums</p>		<p>Develop an action plan by which students can demonstrate competence on the rare occasion when a student does not get live patient encounters (e.g., high-fidelity simulation).</p> <p><i>Note:</i> the alternative method must encompass the psychomotor and affective learning domains associated with the patient encounter. In other words, a written test alone cannot substitute for a patient encounter.</p>

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<p>Advisory Committee</p> <p>CAAHEP <i>Standards</i> to reference:</p> <ul style="list-style-type: none"> ▪ II.A. Program Goals Program Goals and Outcomes ▪ II.B. Program Goals Appropriateness of Goals and Learning Domains <p>Composition and responsibilities are spelled out in the <i>Standards</i>. Evidence must exist to demonstrate that the Advisory Committee plays a substantial role with the program.</p>	<p>www.coaemsp.org/Evaluations.htm</p>	<p>The Advisory Committee must include at least 1 each of the following categories:</p> <ul style="list-style-type: none"> ▪ students ▪ graduates ▪ faculty ▪ sponsor administration ▪ hospital/clinic representatives ▪ physicians ▪ employers ▪ police and/or fire services with a role in EMS ▪ key governmental officials ▪ the public <p>The responsibilities are to:</p> <ul style="list-style-type: none"> ▪ meet at least annually ▪ assist program and sponsor personnel in formulating and revising goals ▪ monitor needs and expectations ▪ ensure program responsiveness to change
<p>Resource Assessment</p> <p>CAAHEP <i>Standards</i> to reference:</p> <ul style="list-style-type: none"> ▪ III.D. Resource Assessment 	<p>www.coaemsp.org/Evaluations.htm</p>	
<p>Validity and Reliability of Major Exams</p> <p>CAAHEP <i>Standards</i> to reference:</p> <ul style="list-style-type: none"> ▪ IV.A.1. Student and Graduate Evaluation/Assessment Frequency & Purpose 		
<p>Outcomes Data Collection</p> <p>CAAHEP <i>Standards</i> to reference:</p> <ul style="list-style-type: none"> ▪ IV.B.1. Student and Graduate Evaluation/Assessment Outcomes Assessment 		

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Be Familiar with...			
Initial-Accreditation Self Study Report (ISSR) no later than _____. → due no later than 6 months after graduation of the cohort that firsts enrolls after the date of issue of the LoR. → CoAEMSP letter awarding Letter of Review status will have the date. If you cannot locate the letter, contact Lynn at lynn@coaemsp.org).			
CAAHEP Standards	www.coaemsp.org or www.caahep.org		
CoAEMSP Interpretations of the CAAHEP Standards	www.coaemsp.org		
CoAEMSP Policies & Procedures (for programs)	www.coaemsp.org		
CoAEMSP + CAAHEP websites	www.coaemsp.org and www.caahep.org		
As Needed			
Notify CoAEMSP of Personnel Change			No later than 15 days following the effective date of vacancy ¹
Program Director	www.coaemsp.org/personnel_changes.htm	Submit personnel change form	
Medical Director			
Associate Medical Director ²			
Assistant Medical Director ³			
Lead Instructor ⁴		Name and contact information is sufficient	
CEO			
Dean of health professions (or equivalent)			
Billing Contact			
Submit Self Study Report (SSR)	Flowchart of the accreditation process http://coaemsp.org/Accreditation_Tools.htm	CoAEMSP will notify the program director when the Letter of Review is issued by the CoAEMSP	

¹ Failure to notify CoAEMSP of a Personnel Change within the times prescribed will be assessed a fee. (see <http://coaemsp.org/Fees.htm>)

² **Associate Medical Director:** When the program Medical Director *delegates* specified responsibilities, the program must designate one or more Associate Medical Directors.

³ **Assistant Medical Director:** When the program Medical Director or Associate Medical Director cannot legally provide supervision for *out-of-state location(s)* of the educational activities of the program, the sponsor must appoint an Assistant Medical Director.

⁴ **Lead Instructor:** When the *Program Director delegates* specified responsibilities to a lead instructor.

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Satellite Approval Request (SAR)	www.coaemsp.org/Accredited_Programs.htm	<p>Adding a satellite campus? Deactivating a satellite campus? The CoAEMSP must be notified of all active satellite campuses for each class at each location.</p> <p>Satellite Approval Request (SAR) forms must be submitted at least 30 days in advance of class start date and applicable fees must be paid before final approval is granted. CoAEMSP approves only one class at a time.</p>	each class / each location
Annually			
Annual Fee	Emailed to Billing Contact	Invoiced May 1	July 1
Resource Assessment Matrix (RAM)	Tools available at www.coaemsp.org	Site visit team will review the completed RAMs.	
Personnel [including PD, MD(s), faculty, staff]			
Students			
Graduates			
Employers		Administer surveys 6-12 months <u>after</u> graduation	
Exam Results			
Advisory Committee meeting	Advisory Committee agenda and checklist form: www.coaemsp.org/Forms.htm	Advisory Committee meets at least annually	

WHO TO CONTACT AT CoAEMSP

Submissions: Self Study Reports, SurveyMonkey Questionnaires	Karen
ShareFile User Names + Passwords	Karen
Accreditation Workshops	Karen
Paramedic specific content	George Gordy
Consortium Agreements + Sponsorship	George Gordy
Best Practices for Programs	Gordy
Distance Education	Gordy
Accreditation Tools	Jennifer
Accreditation Process	Lisa Lynn
Community Relations	Jennifer
Satellite Campus Approval & Deactivation	Lynn
Program Personnel Changes	Lynn Ruth
Invoices	Ruth
Request for Accreditation Services	Ruth
Transfer of Sponsorship	Lisa Lynn

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