

CAAHEP Accreditation Workshop for Paramedic Programs

sponsored by the CoAEMSP



Credible education through accreditation

Be Present



▶ Remove distractions



▶ Get a beverage



▶ Get note-taking stuff



▶ Center yourself (namaste)

The word "Welcome" is rendered in a bold, white, sans-serif font with a 3D effect. The letters are positioned over a series of overlapping, colorful brush strokes. The colors of the strokes include shades of pink, red, yellow, green, blue, and orange. The strokes have a textured, fibrous appearance, giving the overall graphic a dynamic and artistic feel. The text is centered horizontally and slightly elevated from the background.

Welcome



**NO AUDIO
OR VIDEO
RECORDING**

**WITHOUT
EXPRESS PERMISSION**





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Executive Director



Mike Miller
Assistant Director



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The Facilitators



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Topics we will cover...

Today



Overview of Accreditation



Available Resources



Transparency & Confidentiality



Overview of *Standards*

Tomorrow



Self-Study Report



Policies & Procedures



Administrative Processes



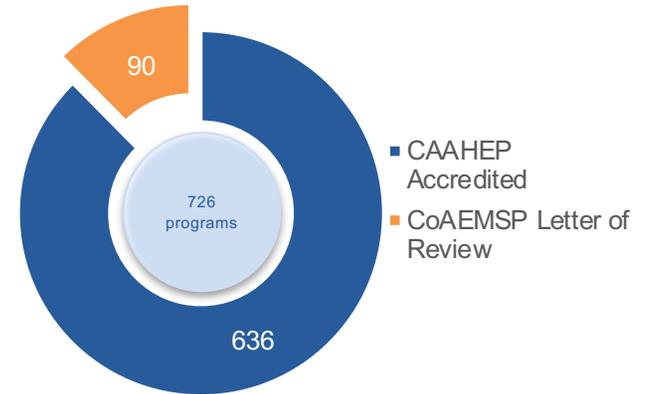
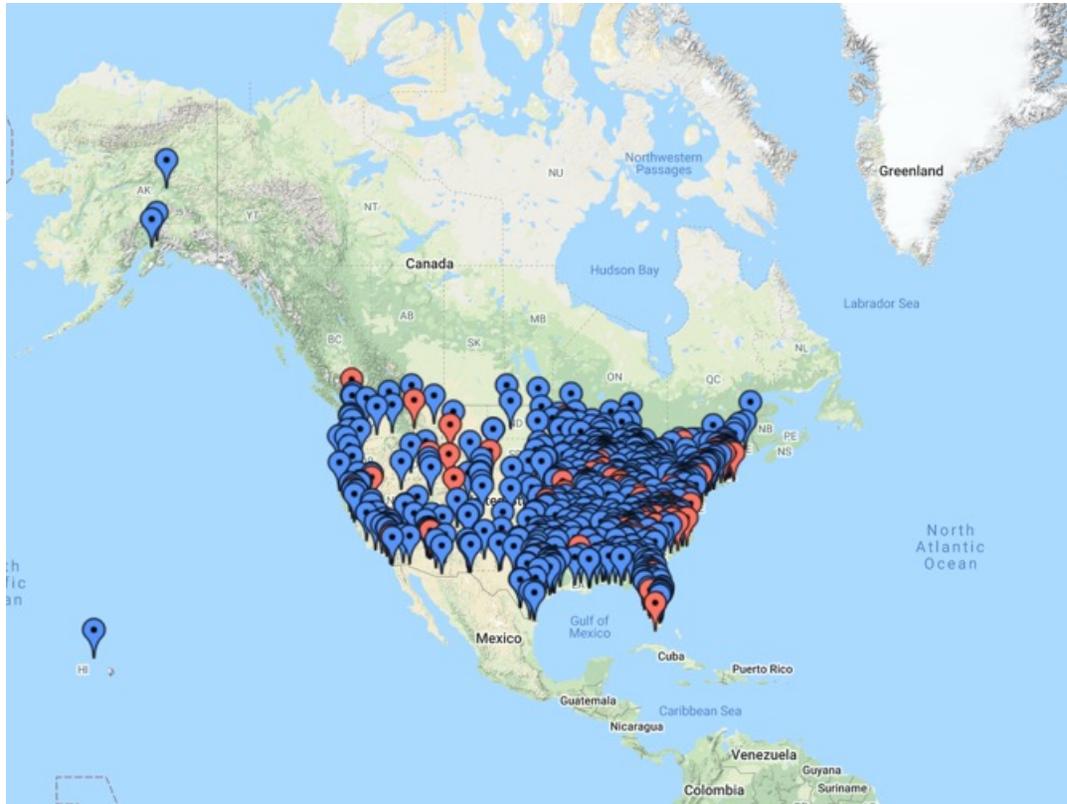
Site Visits

Accreditation **OVERVIEW**

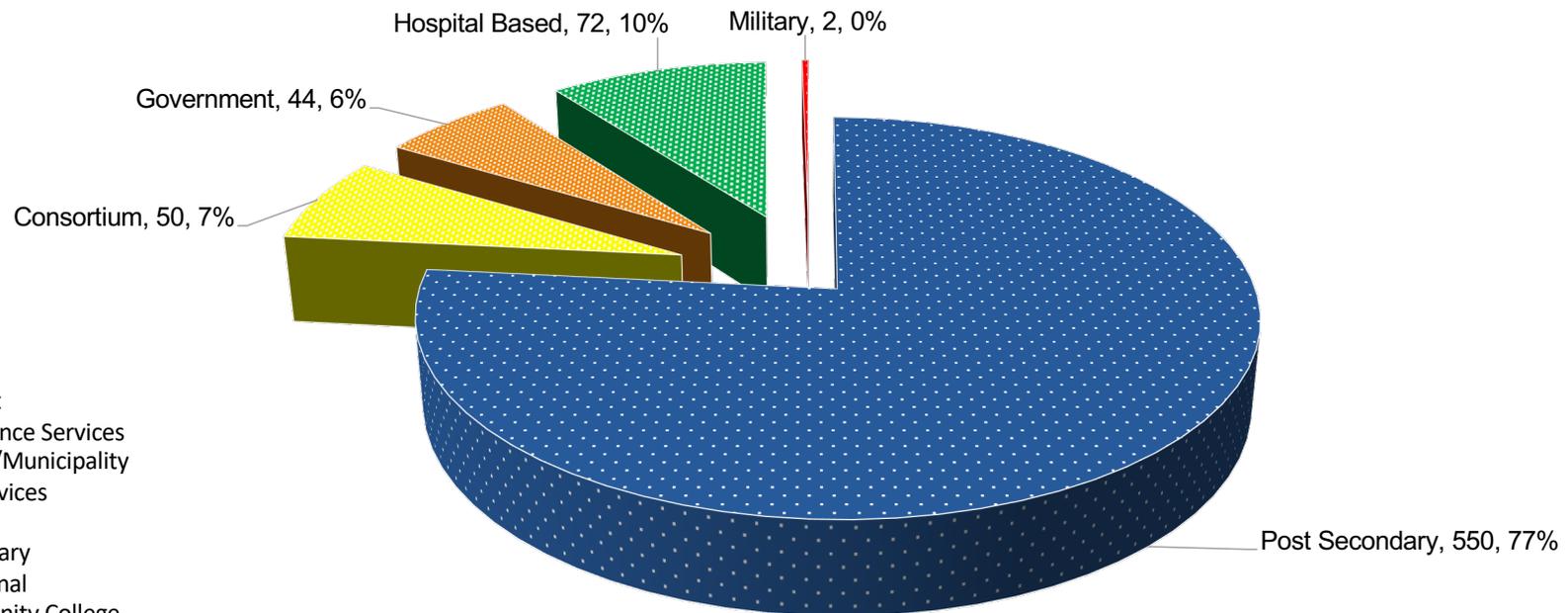


Credible education through accreditation

Program Activity Map



of Programs by Sponsor Type



Government

- Ambulance Services
- County/Municipality
- Fire Services

Post-Secondary

- Vocational
- Community College
- Junior College
- Technical College
- College / University

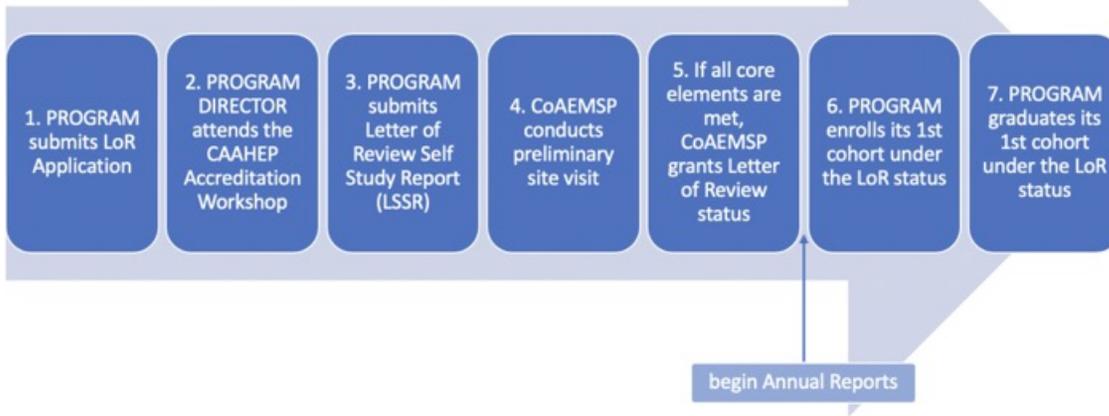


CoAEMSP Letter of Review Process and CAAHEP Accreditation Process for Paramedic Educational Programs



Credible education through accreditation

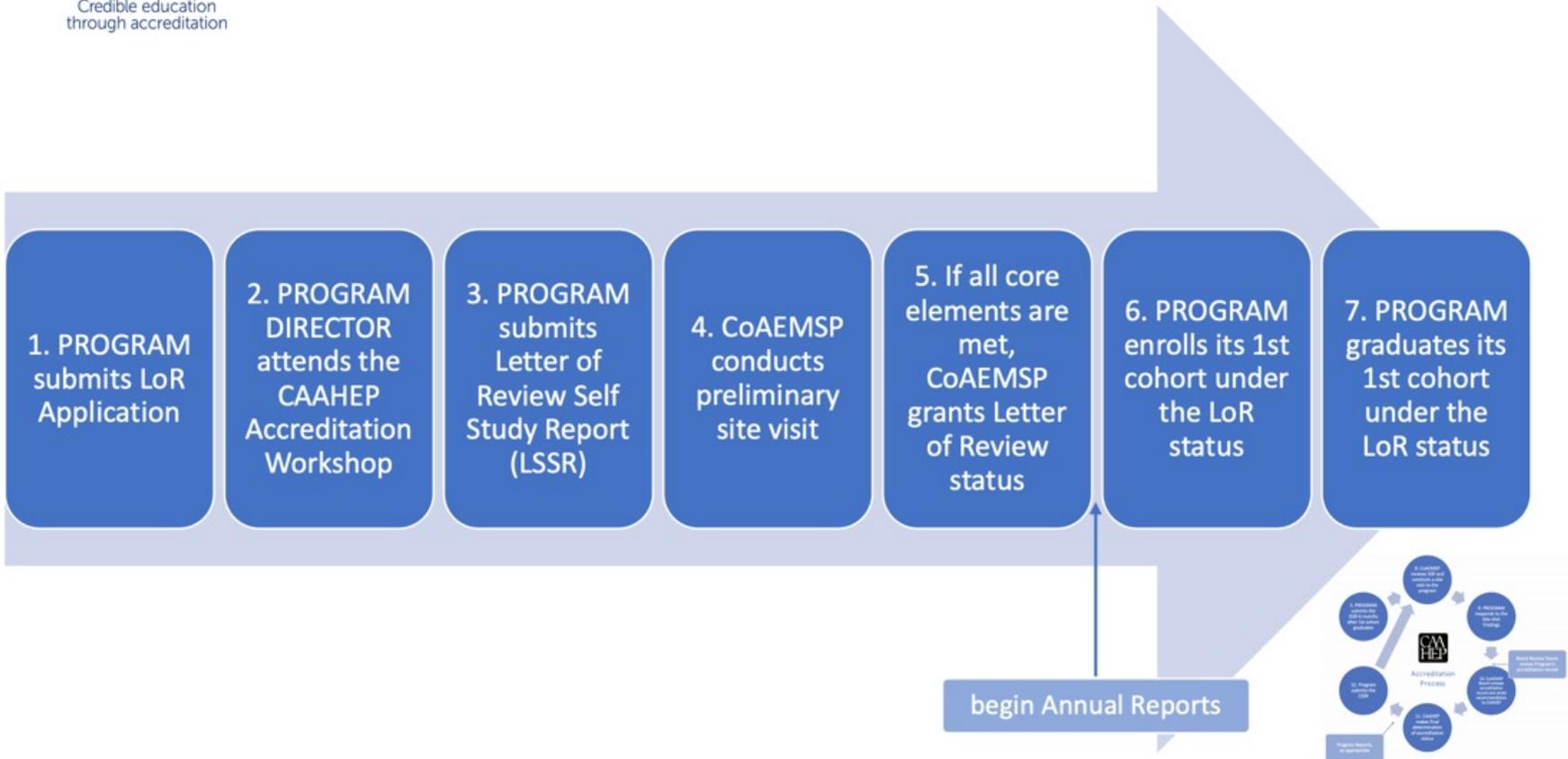
Letter of Review Process

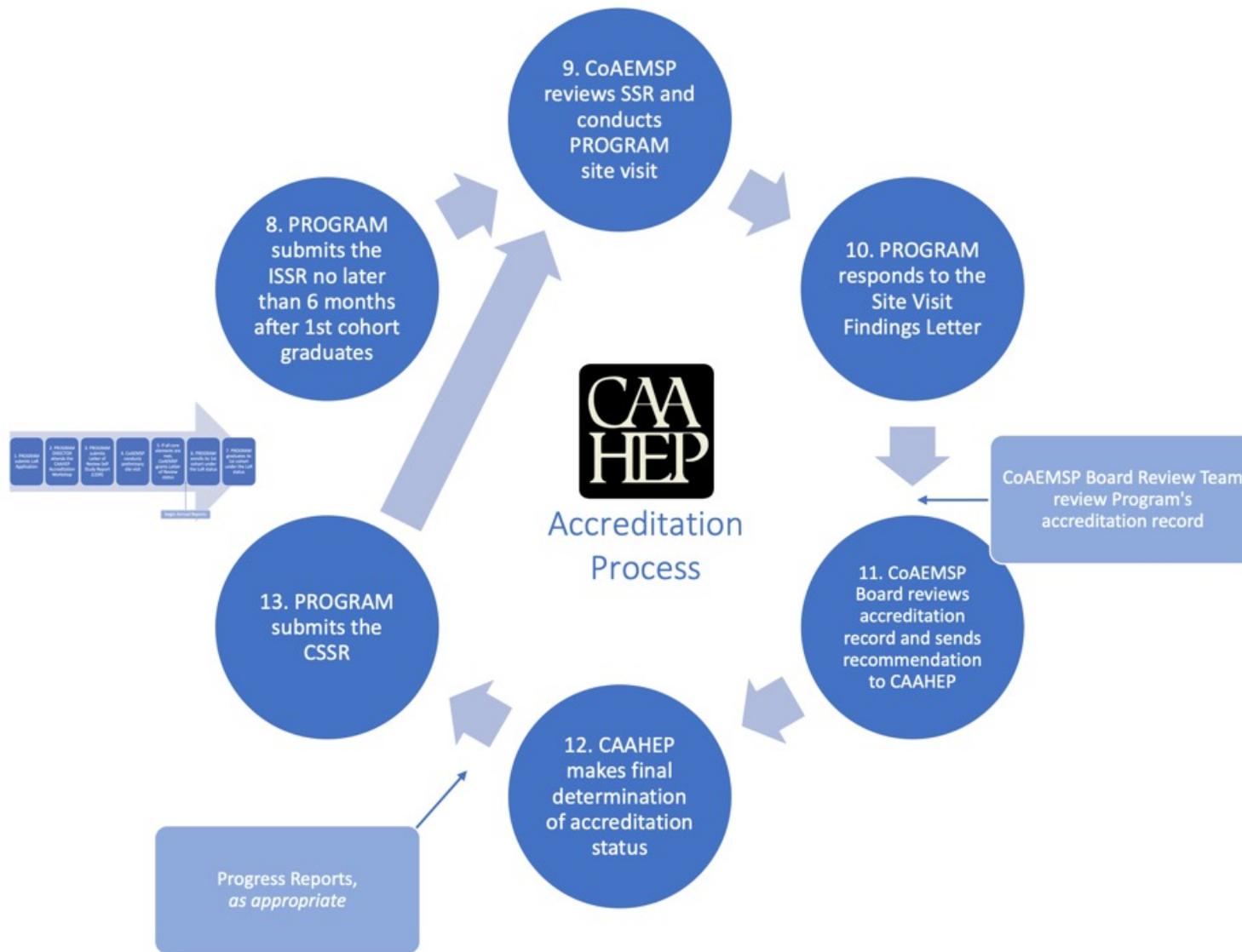




Credible education
through accreditation

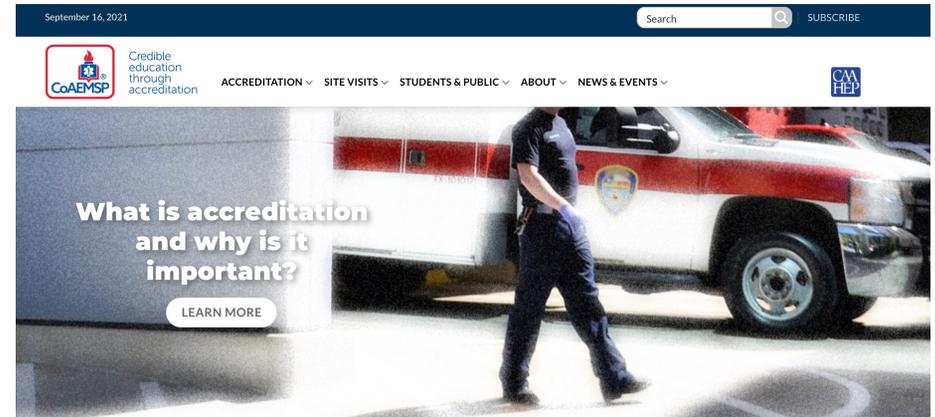
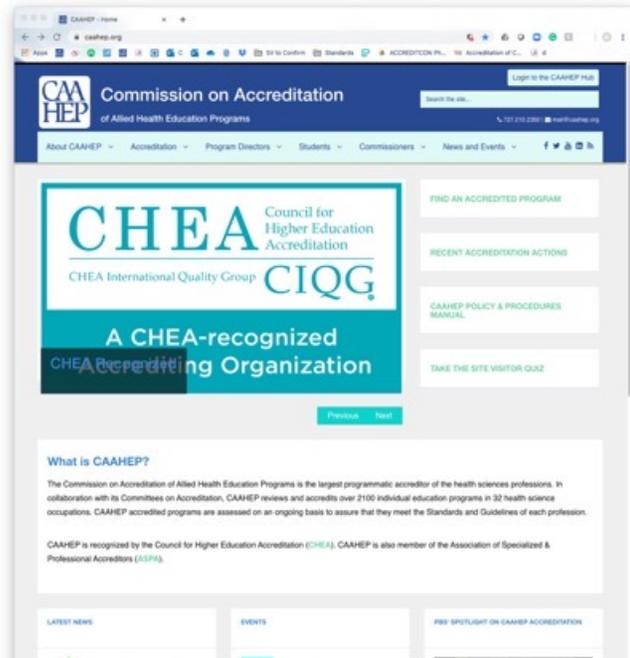
Letter of Review Process





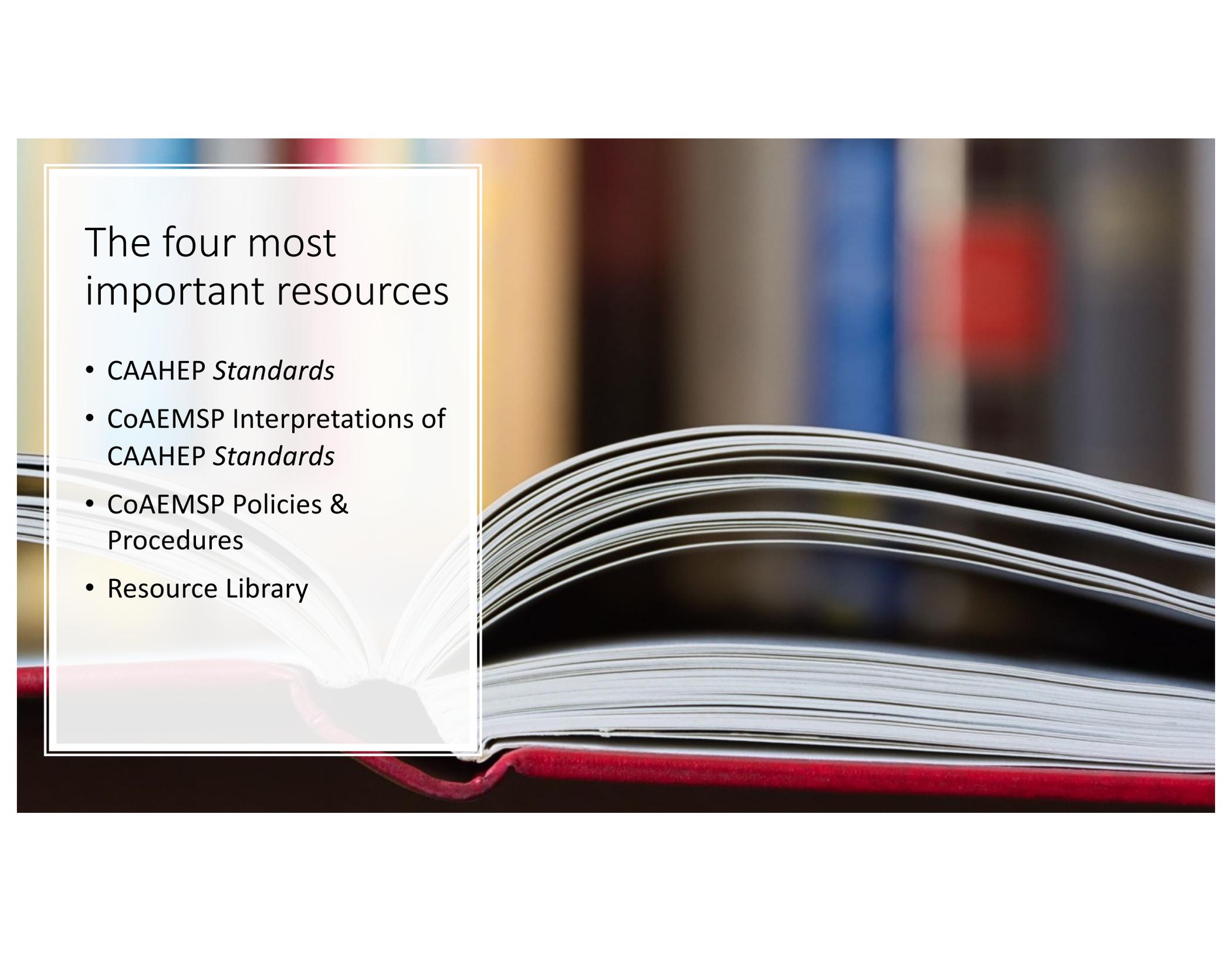


WHAT HAVE
YOU LEARNED?



Available Resources





The four most important resources

- *CAAHEP Standards*
- CoAEMSP Interpretations of *CAAHEP Standards*
- CoAEMSP Policies & Procedures
- Resource Library

Transparency & Confidentiality



Private Information

- Site Visit Report & Findings Letter
- Recommendation to CAAHEP



Public Information

- CoAEMSP Letter of Review Status
- CAAHEP Accreditation Status
- CAAHEP Accreditation Award Letter (*including deficiencies*)
- Program Outcomes
- Program Director's Contact Info



FERPA

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).**

Overview of CAAHEP *Standards*



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



Sponsorship

at least one of the following

1. post-secondary academic institution
2. foreign post-secondary academic institution
3. hospital, clinic or medical center
4. governmental educational or governmental medical service
5. branch of the United States Armed Forces or other Federal agency

must award a minimum of a diploma/certificate



Consortium Sponsor

Consortium

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 I.A.**

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

Pathway to Credit

Sponsorship

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



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



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 (formerly known as Appendix G) (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

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

Resource Library

- > Self-Study Reports
- > Documents for Self-Study Report.pdf

Standard I: Sponsorship

1. Evidence of institutional accreditation (letter, certificate, website screenshot)
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Advisory Committee

- meet at least annually
- assist with formulating and revising goals and learning domains
- monitor needs and expectations
- ensure program responsiveness to change
- review and endorse the program required student minimum competency numbers

Advisory Committee



Communities of Interest

- students
- graduates
- faculty
- sponsor administration
- hospital/clinic representatives
- employers
- police and/or fire services with a role in EMS services
- key governmental officials
- physicians
- **!** public

Advisory Committee

Advisory Committee Roster

- ! Advisory Committee Meeting Minutes
 - Recommend the CoAEMSP tool
 - Review sample on CoAEMSP website



Minimum Expectation

The program **must have** the following goal defining minimum expectations

- **Paramedic:** “To prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains with or without exit points at the Advanced Emergency Medical Technician and/or Emergency Medical Technician, and/or Emergency Medical Responder levels.”

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)



Clinical & Field Internship Affiliations

- access to adequate numbers of patients
- proportionally distributed by age-range, chief complaint and interventions
- **!** currently executed Affiliation Agreements / Contracts

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



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

Preceptor Training

Best Practice

①

②

③





Program Director Responsibilities

- administration, organization, and supervision
- quality review and improvement
- long range planning
- effectiveness of program
- involvement with medical director

Paramedic Program Director Sample Checklist

Activity	Timing	Verify Activity
Evaluations: Program		
Resource Assessment Matrix: all groups complete annually, students at closeout and faculty, Medical Director, and Advisory Committee at the Advisory meeting Complete the RAM	Closeout Advisory meeting Tabulate RAM at year end	
Evaluation of Instructors and/or presentations: weekly for new instructors, at least once during each course for current faculty	Weekly new instructors Once during each course for current faculty	
Observe each faculty member in the classroom annually and complete the <i>Instructor Classroom Observation</i> form	Annually	
Evaluation of skill instructors: frequently for new instructors, at least once during each course for current adjuncts	Frequently Once during each course for current adjuncts	
Evaluation of course: end of course	End course	
Evaluation of Program: end of Program at closeout	At closeout	
Completion of <i>Program Summary Report</i> at the end of each cohort	End of each cohort	
Evaluation of clinical sites by students and faculty annually	Students each cohort Faculty annually	
Evaluation of field internship sites by students and faculty annually	Students each cohort Faculty annually	
Evaluation of field preceptors (all)	Each preceptor	
<i>Graduate Surveys</i> : 6 months after graduation	6 months after graduation	
<i>Employer Surveys</i> : 6 months after graduation	6 – 12 months after graduation	
SWOT analysis: annually and <i>Action Plan</i>	Annually	
Completion of <i>Long-Range Planning</i> form: annually based on results of feedback and analysis	Annually	
Evaluations: Student		
Conduct an academic advising session with each student during each term and complete the <i>Student Academic Progress</i> form	Each term	
Communicate with Medical Director weekly regarding cohort progress and any issues: may be by email or phone. File emails and maintain a log if phone communication	Weekly	
Complete the <i>Medical Director Review Form</i> for students three times : didactic/lab; clinical; field internship. Signed by the Medical and Program Director. Keep a copy in the course/cohort file	Three times: didactic/lab; clinical, field internship	

Paramedic Program Director Sample Checklist

Activity	Timing	Verify Activity
Other: Student		
Schedule Medical Director in Program activities multiple times throughout the cohort: orientation, classroom, psychomotor testing, other course activities	Multiple times throughout the cohort	
Monitor student progression in attaining competencies (grades and skill competency tracking) every two weeks	Every two weeks	
Complete <i>Major/High Stakes Exam Analysis</i> for each unit exam, final, and summative examination	Each unit exam, final, and summative examination	
Monitor clinical visits/contact by faculty every two weeks	Every two weeks	
Monitor field internship visits/contacts by faculty every two weeks	Every two weeks	
Monitor field internship preceptor training as preceptors added	As preceptors added	
Final affective behavior evaluation at closeout (part of summative with cognitive and psychomotor)	Closeout	
<i>Graduation Checklist</i> : each student at closeout	Closeout	
<i>Terminal Competency Forms</i> : each student at closeout	Closeout	
Other: Administrative		
Conduct monthly campus staff meetings and maintain minutes/meeting notes.	Monthly	
Maintain and post completed schedules for each cohort	Each cohort	
Maintain a complete cohort file for each cohort	Each cohort	
Monitor that affiliate contracts are current	Ongoing	
Screen, onboard, and orient faculty and adjunct instructors	As needed	
Maintain a personnel file on each staff member	Ongoing	
Faculty to complete <i>Professional Development Tracking</i> annually	Annually	
Advisory Committee meetings: Annually	Annually	
Complete the CoAEMSP/CAAHEP self-study report as directed	Every 5 years	
Submit the program's response to site visit findings letter or a progress report or as directed	As needed	
Pay the annual accreditation fee to CoAEMSP, billed each May, due July 1	Annually	

Paramedic Program Director Sample Checklist

Activity	Timing	Verify Activity
As Needed: Student		
Conduct interviews for reported incidents as necessary	As needed	
Complete <i>Student Progress Notes</i> as appropriate	As needed	
Conduct student counseling and document appropriately as necessary on a Student Counseling form	As needed	
Complete a <i>Performance Improvement Plan</i> as necessary	As needed	
Complete <i>Change of Status</i> form for all drops or fails: at the time of the event	At the time of the event	
Changes or adds: Submitted to CoAEMSP within 15 days		
Program Director	As needed	
Medical Directors	As needed	
Lead Instructor	As needed	
Dean	As needed	
CEO	As needed	
Location	As needed	
Requests		
Submit a <i>Request for Approval of a Satellite location</i> to CoAEMSP prior to each new satellite location	As needed	
State Approval for courses as required	As specified	
Submit a <i>Request for Approval of a Satellite location</i> to CoAEMSP prior to each new satellite location	As needed	
Submit a <i>Voluntary Closure of a Satellite Location Template Letter</i> to CoAEMSP to discontinue a satellite location	As needed	
State Approval for courses as required	As specified	
Submit a <i>Voluntary Closure of an Alternate Location Template Letter</i> to CoAEMSP to discontinue an alternate location	As needed	
Reports		
CoAEMSP Annual report submitted by: May 15	May 15	
Publish outcomes on webpage by: May 15	May 15	
Regulatory agency reports as required	As specified	

Medical Director Responsibilities

- review and approve the
 - educational content
 - required minimum numbers
 - evaluation instruments
 - progress of each student throughout the program
 - assist with corrective action
- ensure the competence of each graduate
- involvement with the program director
- effectiveness of delegated activities to another qualified physician





CoAEMSP Terminal Competency Form

CoAEMSP Program Number: 600XXX

Paramedic Program Name:

We hereby attest that the candidate listed below has successfully completed all of 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:

PROGRAM REQUIREMENTS successfully and fully completed on
Program Overall Score

List of Written High Stakes Examinations (including the final cumulative summative examination)

	Score		Score		Score
(1)		(5)		(9)	
(2)		(6)		(10)	
(3)		(7)		(11)	
(4)		(8)		(12)	

- Completed Student Minimum Competency (SMC) Matrix Requirements (required minimums, competencies, and patient contacts)
- Documented Skill Competencies
- Affective Learning Domain Evaluations
- Clinical/Field Experience Tracking Records (attended all required areas, completed required competencies)
- Capstone Field Internship Tracking Records (number of team leads, achieved competencies)
- Graduation Requirements Report
- Summative Comprehensive Final Evaluation
 - Cognitive
 - Psychomotor
 - Affective

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

Associate
Medical
Director

Assistant
Medical
Director

**Associate
Medical Director**

- delegated specified responsibilities by Medical Director

local

**Assistant
Medical Director**

- Medical Director or Associate Medical Director cannot legally provide supervision for out-of-state location(s)

out-of-state

Medical Director Responsibilities

Best Practice

- ①
- ②
- ③



Lead Instructor

- minimum of an associate's degree
- coordinates the course of study
- **!** required for a satellite campus

*not a required position, but
! if you have an individual fulfilling the role, they need to be identified*

Curriculum – Sequencing, Syllabi

- 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
- capstone occurs after all core clinical content



Syllabus

body of instruction, which includes

- learning goals
- course objectives
- competencies required for graduation
- course description
- days/times of class meetings
- required textbooks and other reference materials
- policies: attendance, grading, ADA statement
- evaluations (e.g., test, quizzes, projects, research papers)
- content and weekly topic outlines

Establish Minimum Competencies

Table 1 - Ages

Table 2 – Conditions

Table 3 – Skills

Table 4 – Field Experience & Capstone Field Internship

Table 5 – EMT Skills Competency



Student Minimum Competency Table 1 Ages

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.

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.

CoAEMSP Student Minimum Competency (SMC)	Column 1 Formative Exposure in Clinical or Field Experience Conducts patient assessment (primary and secondary assessment), performs motor skills if appropriate and available, and assists with development of a management plan in patient exposures with some assistance for evaluation	Column 2 Exposure in Clinical or Field Experience and Capstone Field Internship Conducts a patient assessment and develops a management plan for evaluation on each patient with minimal to no assistance	Total	Minimum Recommendations by Age* (*included in the total)	
				Minimum Exposure	Age
Pediatric patients with pathologies or complaints	15	15	30	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		

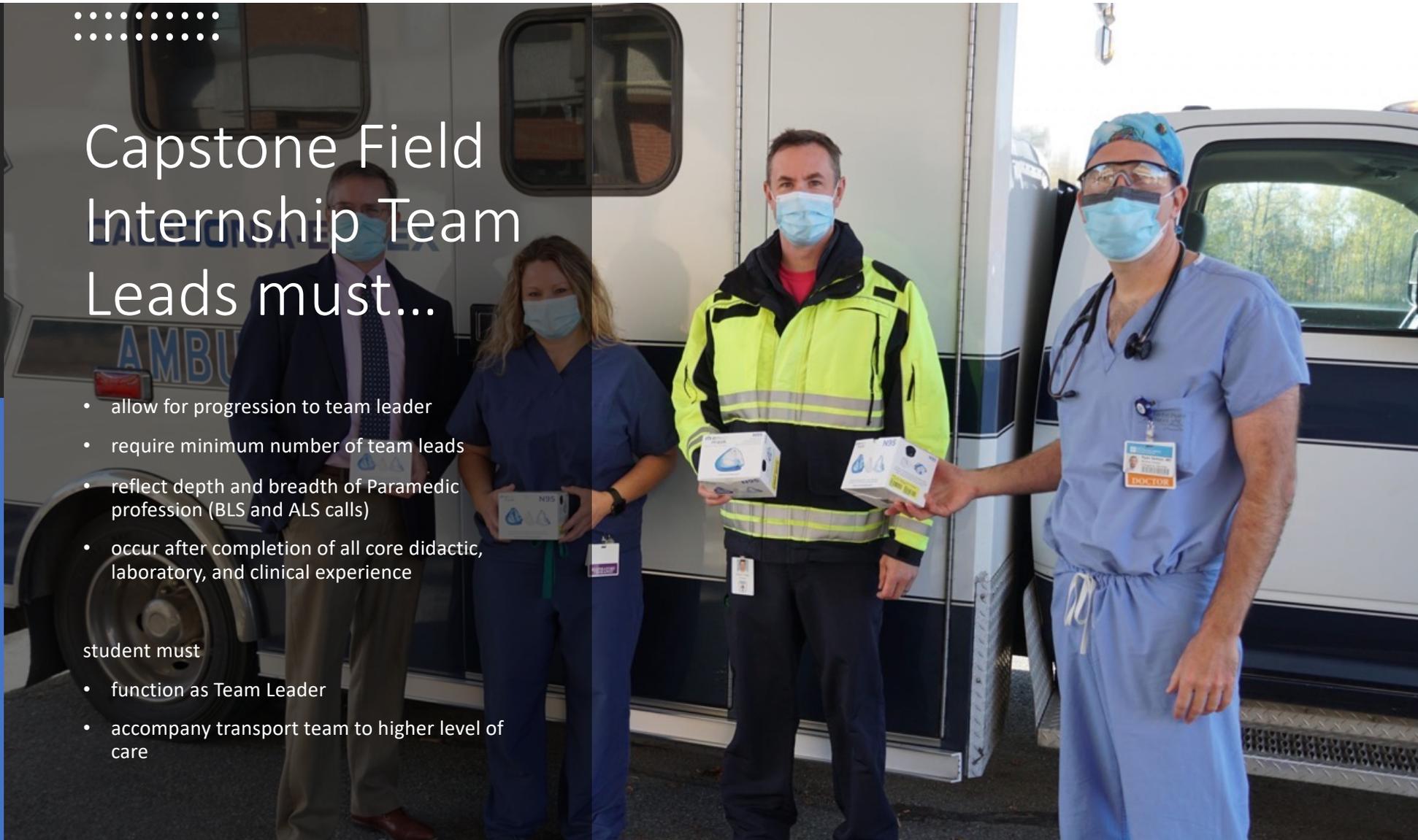


Capstone Field Internship Team Leads must...

- 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



Resource Assessment

Webinar



CoAEMSP
Credible education through accreditation

**Assessing Resources:
Why is it important and how to incorporate it into your program**

Webinar



CoAEMSP
Credible education through accreditation

Resource Assessment & Evaluation Processes

Resource Assessment Matrix (RAM)

Revised 2020.07

CoAEMSP Program #: (the 600xx number assigned by CoAEMSP)

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 Responded:

Link to access the forms available on the CoAEMSP website ==>

[CoAEMSP Forms Available](#)

Program Resource Survey-Program Personnel
Program Resource Survey-Students

At a minimum, programs are required to use the survey items contained in the Student Resource Survey and the Program Personnel Resource Survey.

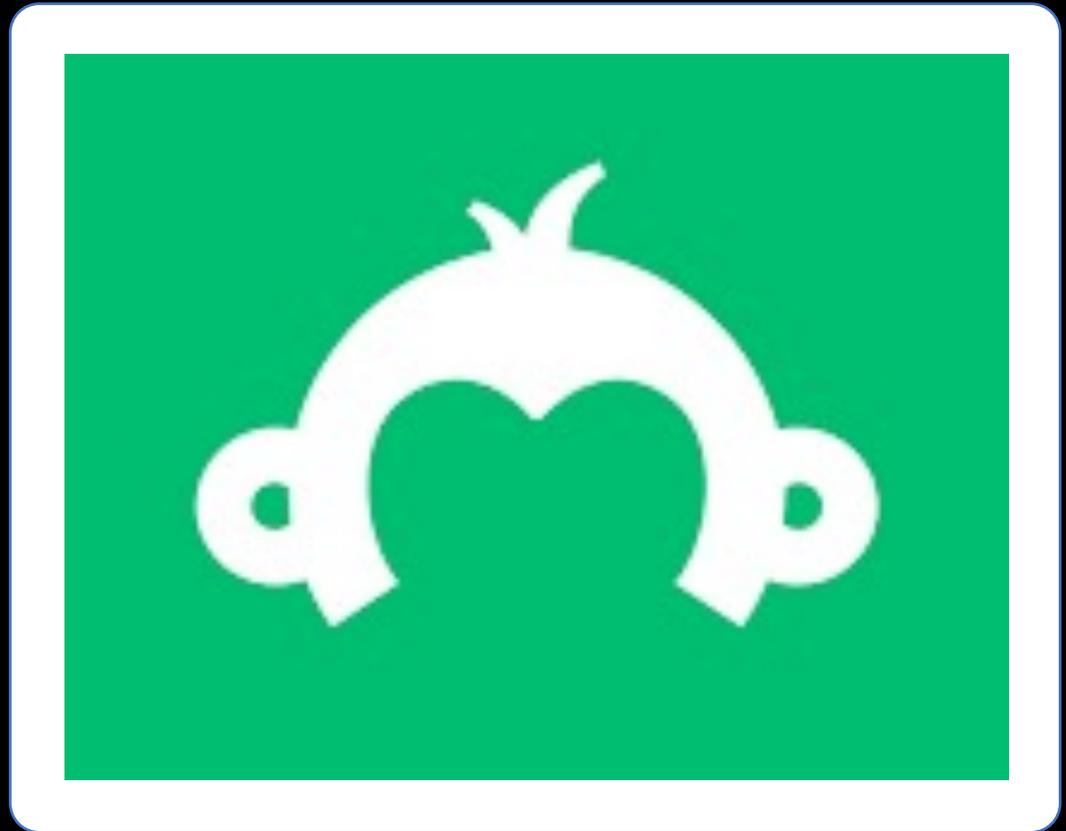
The Advisory Committee is involved in both assessing the resources and reviewing the results.

#	(A) RESOURCE	(B) PURPOSE(S) (Role(s) of the resource in the program)	(C) MEASUREMENT SYSTEM (Types of measurements)	(D) DATE (S) OF MEASUREMENT (The time during the year when data is collected (e.g., month(s)))	(E) RESULTS and ANALYSIS (Include the overall average (%) from each Resource category. For each Resource category below 80%, complete Column F)	(F) ACTION PLAN / FOLLOW UP (What is to be done and Due Date)
1.	FACULTY	Provide instruction, supervision, and timely assessments of student progress in meeting program requirements. Work with advisory committee, administration, clinical/field/externship affiliates and communities of interest to enhance the program.	1. Program Personnel Resource Survey 2. Student Resource Survey	April October, November, December	100 88	Continue to monitor Continue to monitor
	Additional Faculty Purpose(s) =>					
	MEDICAL DIRECTOR	Full responsibilities specified in accreditation Standard R.D.2.a.	1. Program Personnel Resource Survey 2. Student Resource Survey	April October, November, December	100 65	Continue to monitor 65
2.	Additional Medical Director Purpose(s) =>					
	At the time of this survey, only 62% of students knew who the Medical Director was, and 67% thought the Medical Director interacted with students. We are working to look at our Medical Director's role and schedule them for more time in the classroom. The Program Director is also starting conversations with him to see how he would like to interact and how he thinks he can be more involved.					
3.	SUPPORT PERSONNEL	Provide support personnel services to ensure achievement of program goals and outcomes (e.g. admissions, advising, clinical)	1. Program Personnel Resource Survey	April	82	Continue to monitor 88

Graduate Survey
Employer Survey
Student Survey
Personnel Survey

Have a PAID
SurveyMonkey account?

Email your USERNAME to
jennifer@coaemsp.org



Resource Assessment

Best Practice

①

②

③



Standard III: Resources

1. Completed Resource Assessment Matrix (RAM) for the most recent three years
2. Student Minimum Competency (formerly known as Appendix G)
(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

Student Evaluation – Frequency and Purpose

- conducted on a recurrent basis
- provide students and program faculty with indications of students' progress





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



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

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

Student Evaluation – Documentation

- document learning progress
- program required minimum competencies in all learning domains
 - didactic
 - laboratory
 - clinical and field experience/internship
 - capstone field internship



Credible education
through accreditation

Webinar

**Resource
Assessment &
Evaluation
Processes**

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) ↓				Program Required Minimum Numbers ==>										
1														
2														
3														
4														
5														
6														

Enter each student's name

Enter program's required minimums

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)?





Fair Practices

- 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

Statement for Programs with the CoAEMSP Letter of Review (LoR)

"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"



Verbatim

Statement for Programs with CAAHEP Accreditation

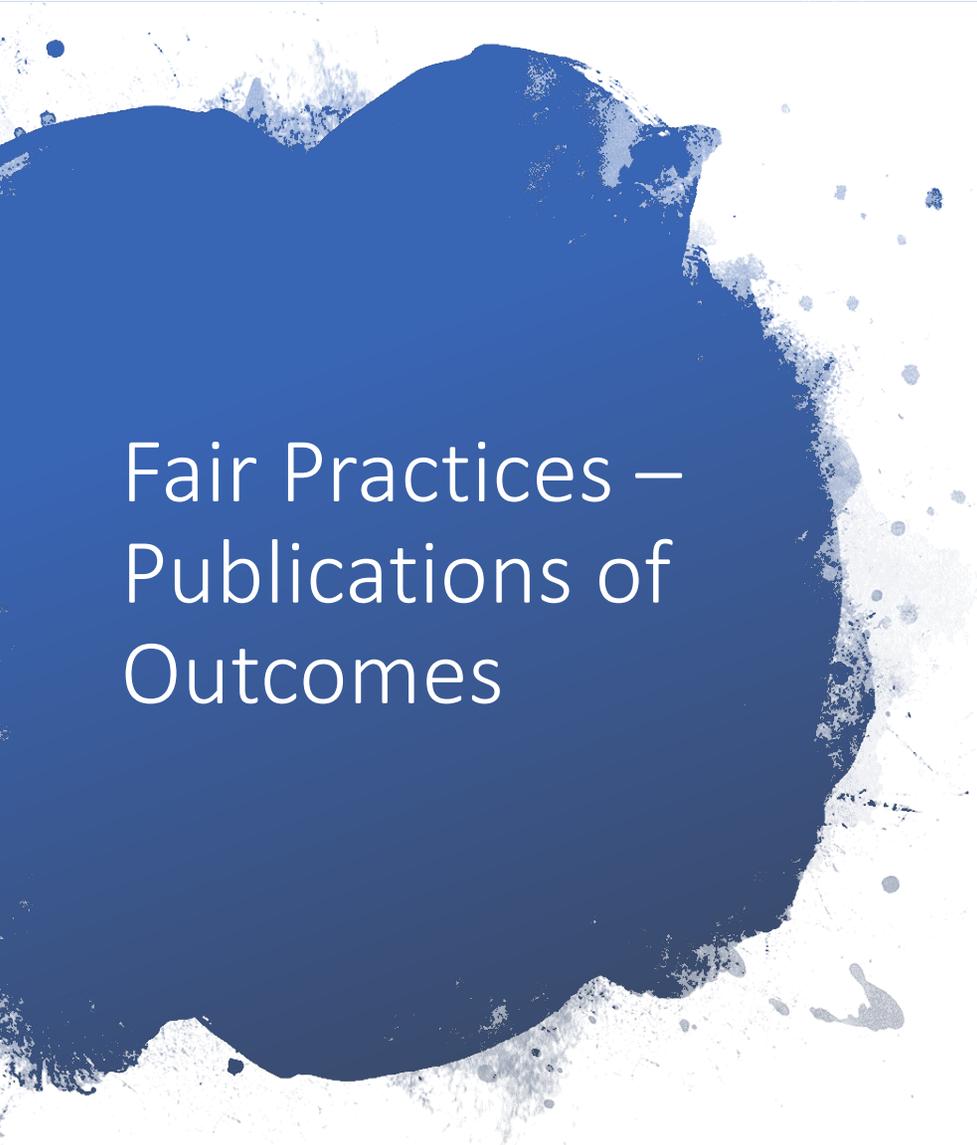
“The [name of program] is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

Commission on Accreditation of Allied Health Education Programs
727-210-2350
www.caahep.org

To contact CoAEMSP:
214.703.8445
www.coaemsp.org”



Verbatim



Fair Practices – Publications of Outcomes

make public the program's outcomes

- retention
- positive placement
- NREMT or State Exam

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

Fair Practices – Safeguards

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)



Additional Considerations

Satellite

- 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 Key Personnel of the program





Satellite Campuses

regardless of location, the
educational program
delivered to the students
must be the same



Credible education
through accreditation

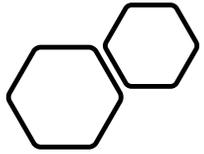
Webinar
Satellites &
Alternate
Locations

Alternate Locations

- 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





Educational Methods

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



Expectations of Simulation

- simulations can be integrated to help achieve competency
- at least 2 live patients in each of the pediatric age subgroups is required
- simulation cannot be used for capstone field internship team leads

Topics we will cover...

Yesterday



Overview of Accreditation



Available Resources



Transparency & Confidentiality



Overview of *Standards*

Today



Self-Study Report



Policies & Procedures



Administrative Processes



Site Visits

Completing the Self-Study Report

Self-Study Report

For Programs Seeking

Letter of Review

(LSSR)

for the 2015 Standards & Guidelines

for additional information about CoAEMSP accreditation services.

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Each program conducts an internal review culminating in the Letter of Review (LSSR) and any additional information submitted to the CoAEMSP Executive Office. The LSSR and any additional information submitted to the CoAEMSP Executive Office will be reviewed by the CoAEMSP Executive Office. The CoAEMSP Executive Office will review the LSSR and any additional information submitted to the CoAEMSP Executive Office. The CoAEMSP Executive Office will review the LSSR and any additional information submitted to the CoAEMSP Executive Office.

Electronic copies may ONLY be submitted by uploading this documentation (no paper copies or USB/CDs are accepted). The LSSR and any additional information submitted to the CoAEMSP Executive Office will be reviewed by the CoAEMSP Executive Office.

Self-Study Report

For Programs Seeking

Initial Accreditation

(ISS)

for the 2015 Standards & Guidelines

for additional information about CoAEMSP accreditation services.

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Each program conducts an internal review culminating in the preparation of the Initial Accreditation Self-Study Report (ISS) and any additional information submitted to the CoAEMSP Executive Office. The ISS and any additional information submitted to the CoAEMSP Executive Office will be reviewed by the CoAEMSP Executive Office. The CoAEMSP Executive Office will review the ISS and any additional information submitted to the CoAEMSP Executive Office.

Electronic copies may ONLY be submitted by uploading this workbook documentation (no paper copies or USB/CDs are accepted). The ISS and any additional information submitted to the CoAEMSP Executive Office will be reviewed by the CoAEMSP Executive Office.

Self-Study Report

For Programs Seeking

Continuing Accreditation

(CSSR)

for the 2015 Standards & Guidelines

for additional information about CoAEMSP accreditation services.

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INSTRUCTIONS

Each program conducts an internal review culminating in the preparation of a Continuing Accreditation Self-Study Report (CSSR). The CoAEMSP will use the report, and any additional information submitted, to assess the program's degree of compliance with the Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions of the Commission on Accreditation of Allied Health Education Programs (CAAHEP) [www.caahep.org]. Programs should carefully read the Standards & Guidelines as well as the CoAEMSP Interpretations to the Standards and Guidelines to fully understand and respond to the corresponding questions in the CSSR and the future preparation for the site visit. The CoAEMSP Executive Office will review the CSSR and any additional documentation for completeness.

Electronic copies may ONLY be submitted by uploading this workbook in its original format plus a single pdf file of ALL supporting documentation (no paper copies or USB/CDs are accepted). The CSSR (electronic) must be received in the CoAEMSP executive office, in addition to the CAAHEP Request for Accreditation Services (RAS), Student Questionnaires, and the payment of fees, for the submission to be complete.

Individuals to tap for assistance

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



Credible education through accreditation

Webinar

Completing the Self-Study Report

Tips for completing the Self-Study Report

- answer the question
- follow tabs in order
- follow the instructions
- name the exhibits correctly



Credible education
through accreditation

Getting Started: an Action Plan for CAAHEP Accreditation

Self-Study Report Due Date: _____

Often the hardest part of any project is organizing a plan to get started. The action plan that follows breaks the activities into phases and identifies the activity and associated resource, such as the location on the CoAEMSP website that will provide the necessary information.

1. Once notification is received from CoAEMSP that the accreditation process has begun, the Program typically has six (6) months to submit the self-study report and supporting documents.
2. The Program is encouraged to complete all materials and ready for final review by all appropriate parties **within five (5) months** of notification (one month before the date due to the CoAEMSP).
3. It is the Program Director's responsibility to obtain all necessary information for submission. If action items are delegated to other staff, the Program Director must monitor progress and insure completion.
4. This template uses the convention of -6, -5, etcetera to designate the month the activity should be completed using the CoAEMSP due date as -0. All documents are to be completed by the beginning of month -1. The expected time frames should assist planning.
5. This plan/checklist is heavily weighted for months -6 and -5 which revolves around data gathering. Months -4 through -2 will be devoted to completing the documents required.

<input checked="" type="checkbox"/>	To Do List	Month Due	Date Due	Completed Date
Phase I: Self-Assessment				
<input type="checkbox"/>	1. Review the CAAHEP <i>Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions</i> : http://coaemsp.org/Standards.htm .	-6		
<input type="checkbox"/>	2. Review the CoAEMSP Interpretations of the CAAHEP <i>Standards</i> : http://coaemsp.org/Standards.htm .	-6		
<input type="checkbox"/>	3. Review the Site Visit Report form: http://coaemsp.org/Site_Visits_Visitors.htm .	-6		
<input type="checkbox"/>	a. Answer honestly the questions 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 that is not clear to you (for example: Sponsorship, Terminal Competencies).	-6		



Webinar
**Getting Started:
An Action Plan
for CAAHEP
Accreditation**
July 16, 2020

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

Policies & Procedures for Programs



Credible education
through accreditation

Approved by the CoAEMSP Board of Directors November 6, 2020



Administrative Processes

Self-Study Report

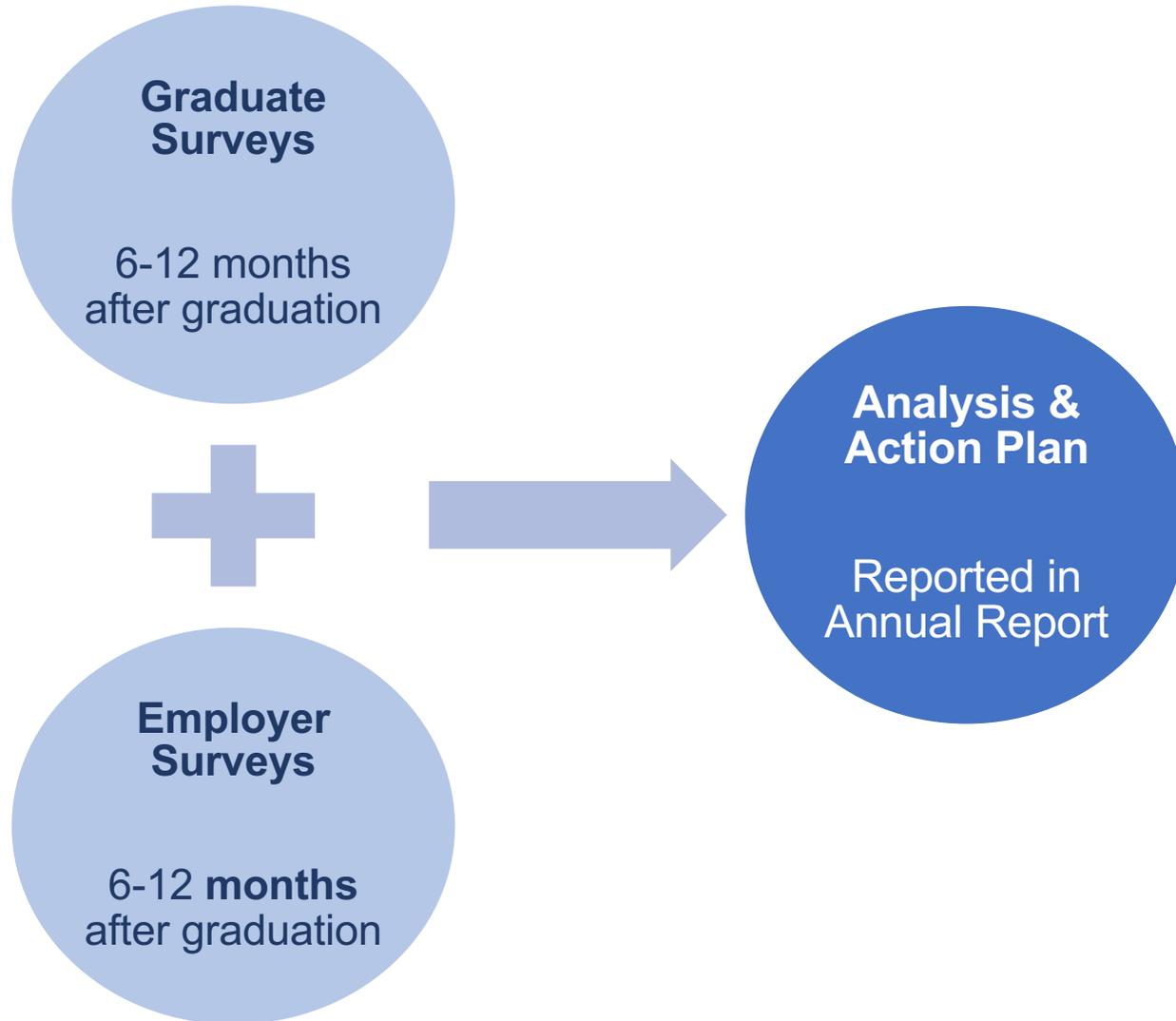
- Every 5 years
- Program demographic data
- Evidence documents

Annual Report

- May 15 due date
- Enrollment
- Retention
- Credentialling
- Positive Placement
- Graduate & Employer Surveys

Resource Assessment

- Annual calendar year
- Program Resource Survey: Students
- Program Resources Assessment: Personnel
- Resource Assessment Matrix



Progress Reports

Requested in response to citations

Format and evidence specified

Due date specified



Report of Substantive Changes



**Change in
Sponsorship**



Change in Location



**Addition of a
Satellite or Alternate
Location**



**Change in
Administrative
Personnel**



**Change in Key
Personnel**

Forms

Useful

- Affective Behavior Evaluation Form
- Course Evaluation Form
- Presentation Evaluation Form
- Program Summary Report Form
- Student Academic Progress Form
- Student Counseling Form
- Medical Director Student Update Form

Required

- Resource Assessment Matrix (RAM)
- Program Resource Survey: Students
- Program Resource Survey: Personnel
- Graduate and Employer Surveys
(can add questions)

Strongly Advised

- Terminal Competency
- Advisory Committee Meeting Minutes
- High Stakes Exam Analysis Form
- Long Range Planning
- Program Director Responsibilities Form
- Medical Director Responsibilities Form

Site Visits



Unsolicited Feedback from a Program Director

"I just wanted to drop a quick line and let you know that the site visit team that we hosted earlier this week was very much appreciated. The site visitors were professional, personable, helpful, and provided a great experience for my entire team from start to finish. If I could paint a picture of how I would hope my site visit teams would conduct themselves, these guys would be the template."



Unsolicited Feedback from a Program Director

"I just wanted to pass on a quick thank you to you both. The site visit last week was a very positive experience for our entire department in no small part to your professional and personable approach. We were a little apprehensive as I think anyone would be when you place something that you invest a lot of time into under scrutiny. Everyone commented that you were both very easy to talk to and engaged them in good conversation. As I said last week, you make a good team. You were very easy to work with, a great resource as we were getting ready and you provided us with valuable feedback on our program."



Resources for Site Visits & Site Visitors

✓ Resources

NAME ^	LAST MODIFIED	DOWNLOAD
XLS Expense Report for Site Visitors	Jan-2019	Download
PDF Hosting the Site Visit - Best Practices	May-2019	Download
PDF Interview Questions & Talking Points	Mar-2020	Download
DOC List of Site Visit Participants	Mar-2018	Download
PDF List of Site Visit Participants - sample	Mar-2018	Download
PDF Organizing Documents for the Site Visit	Jan-2021	Download
XLS Site Visit Information Form	May-2007	Download
XLS Site Visit Report - for reference only	Aug-2015	Download
DOC Site Visitor Checklist	Oct-2018	Download
DOC Site Visitor Team Captain Application (must be a team member to apply)	Oct-2017	Download
DOC Site Visitor Team Captain Progression Plan	Jul-2012	Download
DOC Site Visitor Team Captain Recommendation Form	Oct-2017	Download
PDF Site Visits & Visitor Manual	Sep-2020	Download
DOC Suggested Site Visit Agenda	Mar-2018	Download
DOC Virtual Self-Study Report Addendum	Sep-2020	Download
XLS Virtual Site Visit Agenda	Sep-2020	Download
DOC Virtual Site Visit Agreement	Aug-2020	Download
XLS Virtual Site Visit Information Form-SV Info	Aug-2020	Download
PDF Virtual Site Visits & Visitor Manual Supplement	Sep-2020	Download



Philosophy

Transparency – no surprises

Verify

Confidentiality

- communications
- documents
- FERPA

Consultative, as appropriate

Conflict of Interest



a real or perceived



Site visitor is employed or lives in the same state as the Program



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



acceptance of compensation or gifts related to the visitation.

Site Visitors

Who are they?

- Paramedic educator
- Physician
- Dean

How are they qualified?

- meet *Standards* requirements
- attend Site Visitor workshop
- complete continuing education sessions
- QA reports good

Coordinating Site Visit



Jennifer Anderson Warwick

jennifer@coaemsp.org | 214-703-8445, x114



contacts Program after Executive
Analysis (EA) is complete

request possible dates, a date range is given
ensure dates are mutually convenient
coordinate with site visitors



Committee on Accreditation for the EMS Professions

Site Visit Information and Travel Arrangements Recommendation Form

As part of the accreditation / comprehensive review, after submission of your self study report (SSR) and the Executive Analysis (EA) has been issued, an on-site review will be conducted. A regular site visit is 2 visitors for 2 days. On a case-by-case basis, CoAEMSP determines if there are special circumstances that require more than a regular site visit.

Please fill in the information below and email this file to jennifer@coaemsp.org.

CoAEMSP Prog ID#: begins with 600xxx

Sponsor name:

City: State: Zip:

Convenient Airport(s): -----

Approx distance from program => miles ----- miles

Preferred method for transportation from airport to hotel:

Program Director:

Name:

Email:

Work Phone: Cell Phone:

Program Dates:

Your site visit dates will be determined by the CoAEMSP with approval from the program. List dates the program (including program director, medical director, and students) IS available in the projected site visit date range. (The range is listed in the email notifying the program of its SSR due date.) Include ALL dates. The site visit team usually consists of 2 members.

	Program Enrolls Students	Students Begin Clinical	Students Begin Capstone Field Internship	Program Graduates Students	Weekdays and/or Evenings students are on Campus			
					Weekdays	List the Weekdays [M T W R F]	Evenings	List the Evenings [M T W R F]
Current Cohort #1								
Current Cohort #2								
Next Cohort #1								
Next Cohort #2								



List 3 to 5 Date(s) Program IS available

Start Date	End Date	Are students available on Day 1?

The end date must be at least one day later than the start date.
 The end date must be at least one day later than the start date.
 The end date must be at least one day later than the start date.
 The end date must be at least one day later than the start date.
 The end date must be at least one day later than the start date.

Hotel Recommendations:

Please provide three recommendations for a suitable hotel. It should be economical, but clean and safe. There should be a restaurant either in the hotel or within walking distance.

Note: The CoAEMSP travel agent will make the travel reservations, including transportation and lodging.

	Approx distance from program	AAA rating	Room Cost/night	Has Restaurant?
Hotel #1 Name:				
Address:	miles			
City:				
Phone number:	Does the college have a favorable corporate rate?			
Hotel #2 Name:				
Address:	miles			
City:				
Phone number:	Does the college have a favorable corporate rate?			
Hotel #3 Name:				
Address:	miles			
City:				
Phone number:	Does the college have a favorable corporate rate?			

Additional Comments for CoAEMSP Executive Office + Travel Agent:



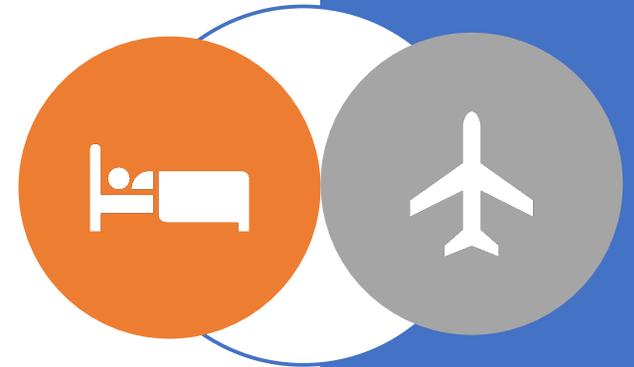
Proposed Dates

- students available (entire group preferable)
- key people available
- after clinical phase preferable



Logistical Arrangements

- suggest hotels and closest airport
- provide transportation to/from airport and program





CAAHEP ACCREDITATION SITE VISIT

A Program Director's Guide: Organizing the Documents for the Site Visit by Standard

The Initial or Continuing Self-Study Report has been submitted, and the site visit is scheduled. You are eagerly anticipating the site visitors, including a Paramedic educator and a physician involved in EMS education or two Paramedic educators. (Periodically, additional site visitors may be on the team.) You want to be well prepared, so where do you start?

Effective preparation for the site visit will facilitate the review, ensure that your Program is well represented by providing documentation of the Program's processes, answer site visitor questions, and reduce your stress level. Having all potential documents available for review also demonstrates the degree of organization of the Program. Whether this is your first site visit or a seasoned veteran, the following checklist will assist you with your preparations.

The following pages are a list of documents the Program must make available for the site visit, **all organized by the Standard Reference** (i.e., II.A., or III.C.2., etc.). These documents are in addition to documents identified in the Executive Analysis (EA). There are two primary methods of organizing the materials: either in 1) a file box or crate with labeled hanging file folders or 2) electronic format. Either way is acceptable for the residential/in-person site visit. The electronic format is used for the virtual site visit. For the residential/in-person site visit, the documentation remains available in the private conference room; for the virtual site visit, the documentation is available in the CoAEMSP-established ShareFile folder. Some standards will require several years of data, such as summary tracking documentation for graduated cohorts. In these cases, you will need to label each year with a separate divider or folder. Additionally, site visitors will pull student files at random for review and be prepared to provide additional examples if requested.

This document is the list of required documentation. Many of the accreditation standards will be verified through conversations and interviews with different people during the site visit.

If items were provided in the Self-Study Report, then it is **not necessary to provide another copy**. If the document was **not** supplied with the original submission of the Self-Study Report and is noted in the EA, then provide it for the site visit. *The file structure of how a program will organize electronic files is located on the final pages of this document.*

Once you have organized the files, have another staff member review the contents against the checklist. Are all the requested materials present and current? Are the copies legible? Do the materials address the "evidence" column in the Site Visit Report? If you have not already done so, you can download an example of the Site Visit Report at http://www.coaemsp.org/Site_Visits_Visitors.htm. Ensure that your key faculty members are familiar with the documents on hand and can answer all questions in their area of responsibility.

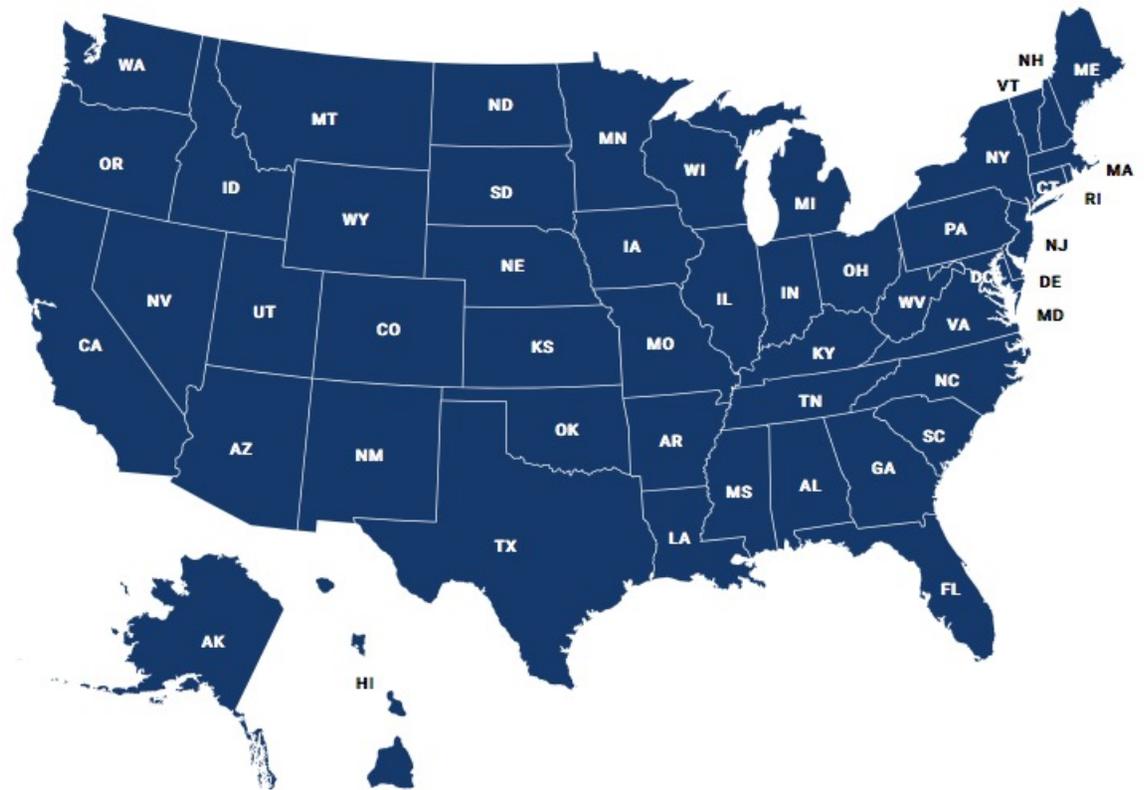
You should now be ready for the site visit, so relax and engage the site visitors in dialog about your Program!

Resources for Site Visits & Site Visitors

Resources		
NAME ^	LAST MODIFIED	DOWNLOAD
XLS	Expense Report for Site Visitors	Jan-2019 Download
PDF	Hosting the Site Visit - Best Practices	May-2019 Download
PDF	Interview Questions & Talking Points	Mar-2020 Download
DOC	List of Site Visit Participants	Mar-2018 Download
PDF	List of Site Visit Participants - sample	Mar-2018 Download
PDF	Organizing Documents for the Site Visit	Jan-2021 Download
XLS	Site Visit Information Form	May-2007 Download
XLS	Site Visit Report - for reference only	Aug-2015 Download
DOC	Site Visitor Checklist	Oct-2018 Download
DOC	Site Visitor Team Captain Application (must be a team member to apply)	Oct-2017 Download
DOC	Site Visitor Team Captain Progression Plan	Jul-2012 Download
DOC	Site Visitor Team Captain Recommendation Form	Oct-2017 Download
PDF	Site Visits & Visitor Manual	Sep-2020 Download
DOC	Suggested Site Visit Agenda	Mar-2018 Download
DOC	Virtual Self-Study Report Addendum	Sep-2020 Download
XLS	Virtual Site Visit Agenda	Sep-2020 Download
DOC	Virtual Site Visit Agreement	Aug-2020 Download
XLS	Virtual Site Visit Information Form-SV Info	Aug-2020 Download
PDF	Virtual Site Visits & Visitor Manual Supplement	Sep-2020 Download

Organizing Documents

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



Anticipate need
for flexibility



Schedule



recruit/confirm
participants



secure place to
meet/work/print



working lunch



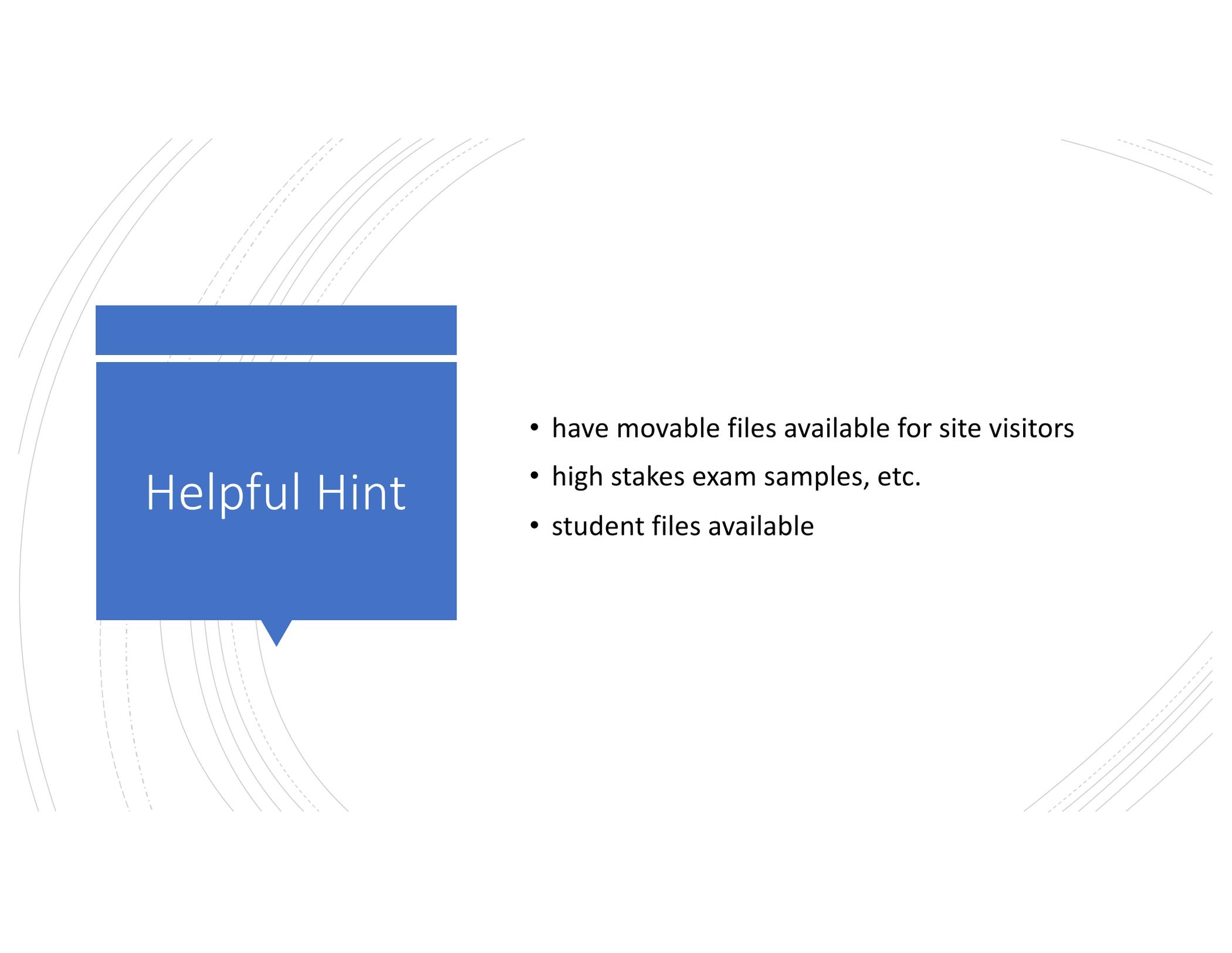
no dinner or
entertainment



Exit Summation in time
for outgoing flights

TIME	ACTIVITY	PARTICIPANTS	PURPOSE
DAY 0 Travel Day for the SV Team			
	Meet Site Visit Team at airport & Transport to hotel	Site Visit Team Program Director	Opportunity to have light conversation and meet the Program Director and SV Team in advance of the site visit.
Evening <i>allow 60 minutes</i>	Meet with Current Students <i>if needed</i>		If a program only has students together for class on the evening before the visit. No other formal activities are planned.
Evening	Site Visit Team Meeting	Site Visit Team	To discuss concerns and plans for the visit.
DAY 1 Site Visit			
7:30 am – 8:00 am	Arrive on Campus	Program Director Site Visit Team	Program Director meets the SV Team at hotel and transfers them to program. The SV Team settles into the private conference room.
8:00 am – 8:30 am	Meet with Program Director <i>must occur first on Day 1</i>	Program Director Site Visit Team	Review the schedule of on-site activities planned by the program, making adjustments as necessary. Briefly discuss what has changed since the submission of the Self Study Report.
8:30 am – 9:00 am	Opening Session <i>must occur on Day 1</i>	Site Visit Team Program Director Medical Director, <i>recommended</i>	Provides the SV Team an opportunity to explain the CAAHEP accreditation process, the functions of the CoAEMSP, the type of CAAHEP accreditation statuses, what the accreditation status implies, and the purpose of the Site Visit.
		Administrative Staff, <i>recommended</i>	
9:00 am – 9:30 am	Meet with Medical Director <i>must occur on Day 1</i>	Site Visit Team Medical Director	Assess medical accountability in all phases of training.

Agenda for Site Visit

The background features several sets of curved lines in the corners, some solid and some dashed, creating a modern, abstract design. A blue speech bubble is positioned on the left side of the slide.

Helpful Hint

- have movable files available for site visitors
- high stakes exam samples, etc.
- student files available



Self preparation:
Review
Accreditation
Documents

- CoAEMSP Interpretations of the
CAAHEP Standards and Guidelines
- Site Visit Report form
- have others review also
 Medical Director
 faculty
 administrative personnel

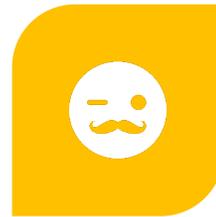
Student Preparation



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



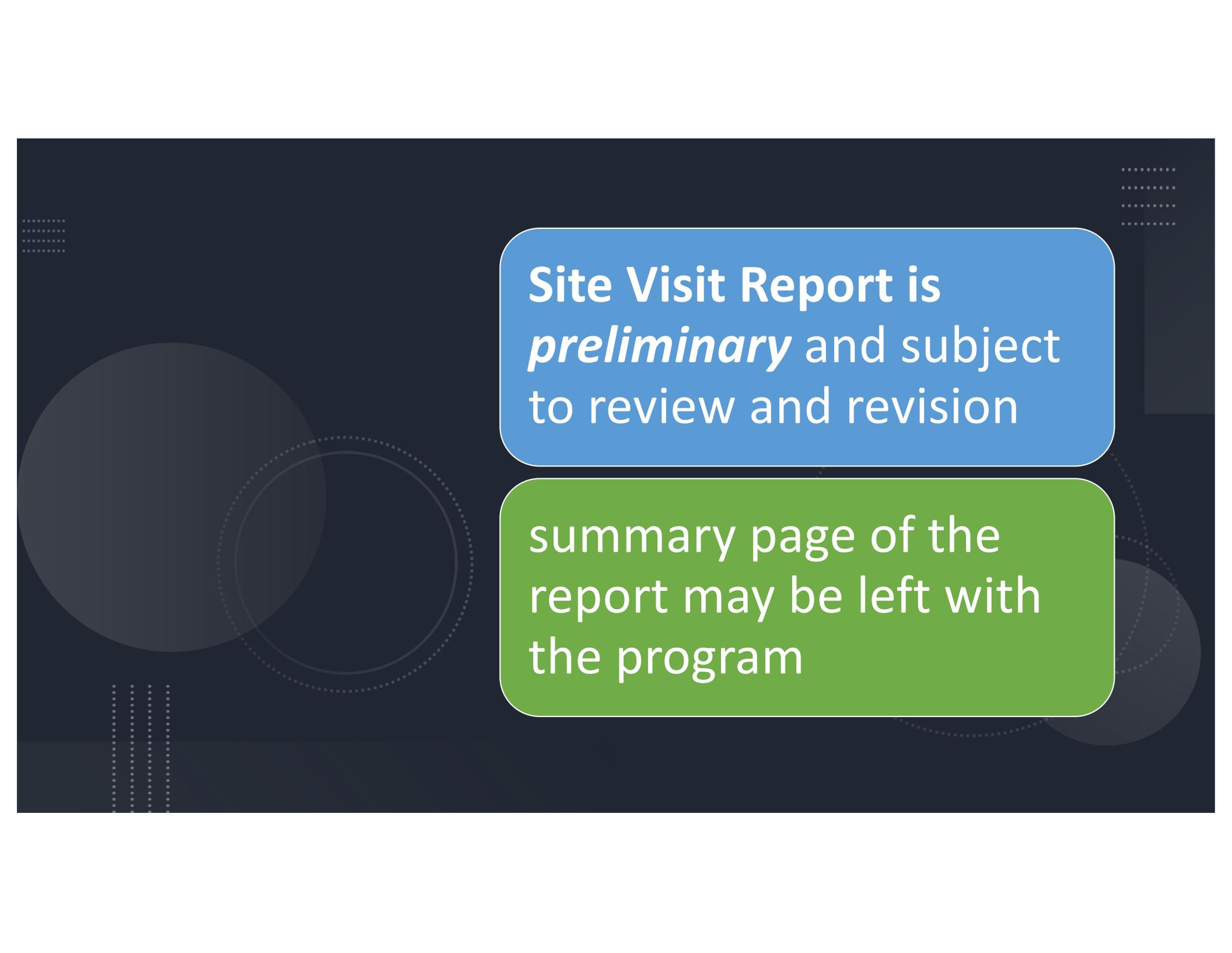
reinforce requirements of
accreditation



interview:
tell them to be honest



Student Questionnaire



Site Visit Report is
preliminary and subject
to review and revision

summary page of the
report may be left with
the program

First step after
the site visit

Time to take a break



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

Next Steps



Program's Response using required templates

1

Confirmation of Factual Accuracy

due 14 days after receipt of Findings Letter

- confirm accuracy – or –
identify errors and submit supporting documentation (based on evidence provided at the time of the site visit)

2

Respond to Findings Letter

date set for program:

March 1, June 1, September 1, December 1

- working on plans
- implementing plans
- already done

The CoAEMSP Board Meeting

information from site visit and Program's response reviewed by 1 of 5 CoAEMSP Board Review Teams

review team recommendation to full CoAEMSP Board

CoAEMSP Board reviews Program's accreditation record

CoAEMSP Board makes a *recommendation* to CAAHEP

Possible Actions by CAAHEP



Continuing
Accreditation



Probation



Withdraw
Accreditation
(Continuing Only)



Initial
Accreditation



Withhold
Accreditation
(Initial Only)

CAAHEP Meeting

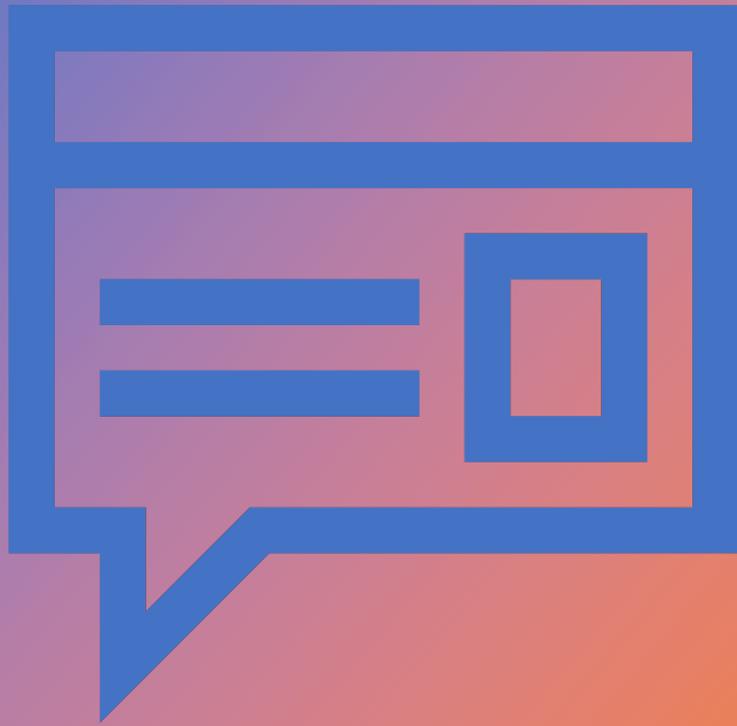
reviews the
recommendation
from CoAEMSP

makes final
decision

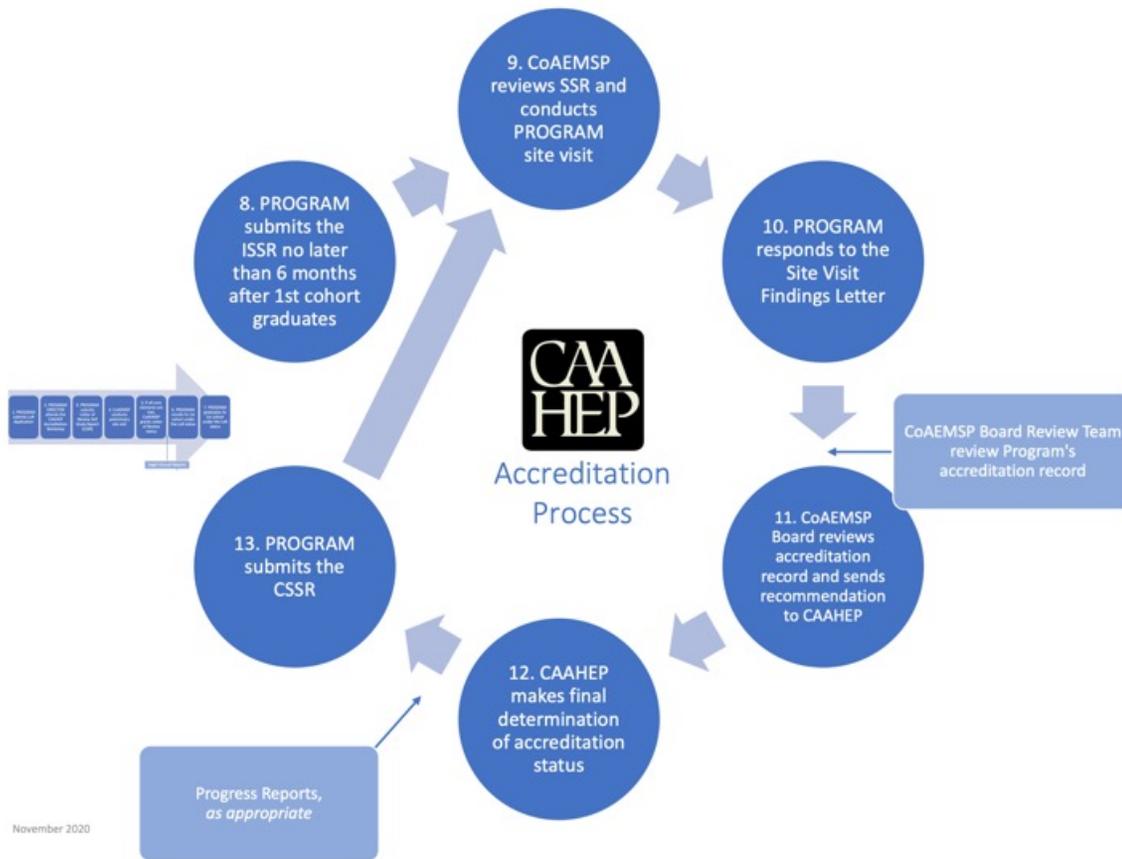


Site Visitor Quality Assurance

Your feedback is important to CoAEMSP and CAAHEP about your experience with the accreditation process



Accreditation is
an everyday activity



Accreditation
is cyclical



Credible
education
through
accreditation

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



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

**Contact Us /
Staff Members**



8301 Lakeview Parkway
Suite 111-312
Rowlett, TX 75088
p **214.703.8445**
f 214.703.8992