SITE VISIT REPORT FINDINGS

111111 * Sample * SV Report

2023 CAAHEP *Standards & Guidelines*

Standard Reference	Standard	Met / Not Met	Was It Evaluated?	Possible Evidence May Include - OR - Additional Evidence Reviewed	Rationale for "Not Met"
	Paramedic				
I. Sponsorship					
A. Program Sponsor					
I.A.	I.A.1-Post-secondary	Met		Evidence of current State Office of EMS approval	
B. Responsibilities of Program Sponsor					
I.B.1	Ensure provisions of *Standards* are met.	Met			
I.B.2	Awards academic credit for the program or has an articulation agreement with an accredited post-secondary institution.	Met		Documented evidence of a pathway for credit or an articulation agreement	
I.B.3	Preparedness plan in place that assures continuity of education services in the event of an unanticipated interruption.	Met		Documented preparedness plan	
II. Program Goals					
A. Program Goals and Minimum Expectations					
II.A.1	Following goal(s) defining minimun expectations for Paramedic: 'To prepare Paramedics who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.'	Met		Reviewed published minimum expectations statement in student handbook, webpage, or other program materials (must be verbatim).	
II.A.1	Written statement of program's goals and learning domains	Met		Optional additional goals beyond the II.A minimum expectation verbatim statement	
	Consistent with and responsive to demonstrated needs and expectations of the various communities of interest served by the educational program			Conversation with Advisory Committee and employers	
	Regularly assesses goals and learning domains				
	Program-specific statements of goals and learning domains provide the basis for program planning, implementation, and evaluation.			Conversation with Program Director, Medical Director, and faculty	
	Compatible with the mission of the sponsoring institution(s), the expectations of the communities of interest, and nationally accepted standards of roles and functions			Conversation with Advisory Committee and employers	
	Based upon the substantiated needs of health care providers and employers, and the educational needs of the students served by the educational program.			Employer survey results	
B. Program Advisory Committee					
II.B.	Communities of interest served by the program include, but are not limited to, students, graduates, faculty members, sponsor administrators, employers, physicians, clinical and capstone field internship representatives, and the public.	Met		List of current Advisory Committee members identifying at least one representative from each required group Verify the public member qualifications/bio	
II.B.	The program advisory committee meets at least annually, advises the program regarding revisions to curriculum and program goals based on the changing needs and expectations of the program's communities of interest, and an assessment of program effectiveness, including the outcomes.	Met		Advisory Committee meeting minutes including attendance Response to employer survey feedback	
				Evidence that Advisory Committee reviews program goals and required minimum patient contacts	
II.B.	Program personnel identify and respond to changes in the needs and/or expectations of its communities of interest	Met		Conversation with Advisory Committee and program personnel	

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Paramedic					
III. Resources					
A. Type and Amount					
1. Program Resources					
III.A.1.	Faculty	Met		Sufficient number	
III.A.1.	Administrative and support staff	Met		Conversation regarding program activities	
III.A.1.	Curriculum	Met		Based on the current National EMS Education Standards	
				Local enhancements as appropriate	
III.A.1.	Finances	Met		Conversation of operating & capital budget	
III.A.1.	Faculty and staff workspace	Met		Faculty workspace	
III.A.1.	Space for confidential interactions	Met		Area for confidential interactions	
III.A.1.	Classroom and laboratory (physical or virtual)	Met		Adequate size & number for enrolled students	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		
III.A.1.	Ancillary student facilities	Met		Adequate facilities to support students	
III.A.1.	Clinical affiliates	Met		Adequate number and variety to meet experience requirements	
III.A.1.	Field experience and capstone field internship affiliates	Met		Adequate number and variety to meet experience requirements	
III.A.1.	Equipment	Met		Adequate quantity, quality, & type	
				Inspection of labs	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		
III.A.1.	Supplies	Met		Adequate number and variety to meet experience requirements	
III.A.1.	Information technology	Met		Adequate technology resources when using distance education methodologies	
III.A.1.	Instructional materials	Met		Reviewed student texts and resources	
III.A.1.	Support for faculty professional development	Met		Opportunity for professional development for staff (internal or external)	
				Sponsor support for participation in professional development	
2. Clinical, Field Experience, and Capstone Field Internship Affiliations					
III.A.2.	Students have access to adequate numbers of patients, proportionally distributed by age-range, chief complaint and interventions in the delivery of emergency care appropriate to the level of the EMS Profession(s) for which training is being offered	Met		Clinical, field experience, and capstone field internship sites demonstrate adequate volume	
				Conversation with Medical Director	
				Conversation with clinical and field internship preceptors	
				Conversation with students and graduates, if applicable	
III.A.2.	Clinical/field experience and capstone field internship resources ensure exposure to, and assess and manage the following patients and conditions: adult trauma and medical emergencies; pediatric trauma and medical emergencies; and geriatric trauma and medical emergencies	Met		Conversation with Program Director, Medical Director, faculty, students and graduates Review of student documentation	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		

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Paramedic					
B. Personnel					
III.B.	The sponsor must appoint sufficient faculty and staff with the necessary qualifications to perform the functions identified in documented job descriptions and to achieve the program's stated goals and outcomes.	Met		**Qualifications verified by review of CVs/Resumes:**	
				Program Director (on file with CoAEMSP)	
				Medical Director (on file with CoAEMSP)	
				Associate Medical Director(s)	
				Assistant Medical Director(s) (Only for out-of-state sites)	
				Satellite Lead Instructor(s) (on file with CoAEMSP)	
				Faculty (full or part-time)	
1. Program Director (PD)					
a. Responsibilities **The Program Director must be responsible for all aspects of the program, including but not limited to:**					
III.B.1.a.1)	Administration, organization, supervision of the educational program	Met		Teaching and administrative workload assignments	
				Confirmed adequate time allotted to each aspect of the program	
				Evidence that Program Director is responsible for: • Course scheduling • Teaching assignments • Evaluations • Testing • Curriculum review & revision • Evaluation of faculty & instructors	
III.B.1.a.2)	Continuous quality review and improvement of the educational program	Met		Evidence of periodic assessment & review of evaluations of the program, faculty, and clinical & field internship sites	
III.B.1.a.3)	Academic oversight, including curriculum planning and development	Met		Conversation with faculty or program staff	
III.B.1.a.4)	Orientation/training and supervision of clinical and capstone field internship preceptors	Met		Periodic assessment of clinical and field sites and capstone field internship preceptors	
				Evidence of orientation for clinical & field experience liaisons including: • Purposes of the student rotation (minimum competencies, skills, and behaviors) • Evaluation tools used by the program • Criteria of evaluation for grading students • Contact information for the program	
				Evidence of training of each capstone field internship preceptor to include: • Purposes of the student rotation (minimum competencies, skills, and behaviors) • Evaluation tools used by the program • Criteria of evaluation for grading students • Contact information for the program • Program's definition of team lead • Program's required minimum number of team leads • Coaching techniques	
Standard III.B.1.a.1-3.)	Administration, organization, and supervision of the program	N/A	No same state satellite location(s)		
	Continuous quality review and improvement of the educational program	N/A	No out-of-state satellite location(s)		
	Academic oversight, including curriculum planning and development	N/A	No unapproved satellite location(s)		

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Paramedic					
Standard III.B.1.a.4.)	Orientation/training and supervision of clinical liaisons and capstone field internship preceptors	N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		
b. Qualifications (PD)					
III.B.1.b.1)	Minimum of a Bachelor's degree	Met	Verified by CoAEMSP		
III.B.1.b.2)	Documented education or experience in instructional methodology	Met			
III.B.1.b.3)	Academic training and experience equivalent to that of a paramedic	Met	Verified by CoAEMSP		
III.B.1.b.4)	Experience in the delivery of prehospital emergency care	Met			
III.B.1.b.5)	Knowledgeable about the current versions: National EMS Scope of Practice and National EMS Education Standards, and about evidence-informed clinical practice	Met		Verified by conversation	
2. Medical Director (MD)					
a. Responsibilities **The Medical Director must be responsible for medical oversight of the program, and must:**					
III.B.2.a.1)	Review and approval of the educational content of the program to include didactic, laboratory, clinical experience, field experience, and capstone field internship to ensure it meets current standards of medical practice	Met		Verified by conversation and review of MD Responsibilities form and supporting documentation	
III.B.2.a.2)	Review & approval of required minimum numbers for each of the required patient contacts and procedures	Met		Verified by the program Student Minimum Competency (SMC) requirements	
III.B.2.a.3)	Review and approval of the instruments and processes used to evaluate students in didactic, laboratory, clinical, field experience, and capstone field internship	Met		Review of instruments used to evaluate students	
III.B.2.a.4)	Review progress of each student throughout the program and assist in the determination of appropriate corrective measures	Met		Evidence of process for Medical Director review and approval	
III.B.2.a.5)	Ensures the competence of each graduate in cognitive, psychomotor, & affective domains	Met		Signed Terminal Competency forms	
III.B.2.a.6)	Engages in cooperative involvement with Program Director	Met		Communicates with Program Director on a regular basis which may include: • Verified by conversation • Communication log • Email • Meeting notes	
III.B.2.a.7)	Ensures effectiveness and quality of any Medical Director responsibilities delegated to an Associate or Assistant Medical Director	Met		Communication with Associate/Assistant Medical Director(s)	
b. Qualifications (MD)					
III.B.2.b.1)	Currently licensed and authorized to practice in the state in which the program is located, and board certified or the equivalent	Met	Verified by CoAEMSP		
III.B.2.b.2)	Adequate training or experience in the delivery of out-of-hospital emergency care, including the proper care and transport of patients, medical direction, and quality improvement in out-of-hospital care	Met		Verified by conversation	
III.B.2.b.3)	Requisite knowledge and skills to advise the program leadership about the clinical/academic aspects of the program	Met		Verified by conversation	
III.B.2.b.4)	Knowledge about EMS education including professional, legislative, regulatory issues regarding the education of the Emergency Medical Services Professions	Met		Verified by conversation	
III.B.2.b.5)	Knowledgeable in teaching the subjects assigned, when applicable	Met		Verified by conversation	

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Paramedic					
3. Associate Medical Director (Assoc MD)					
	Does the program utilize the Associate MD position?	**N/A**			
4. Assistant Medical Director (Assist MD)					
	Does the program utilize out of state clinical or field internship affiliates?	**No**			
5. Faculty / Instructional Staff					
a. Responsibilities					
III.B.5.a.	Qualified individual(s) clearly designated by the program to provide instruction, supervision, and timely assessments of the student's progress in meeting program requirements	Met		Review of schedules for assignments and teaching load	
				Verified by conversation with program personnel, students, and graduates that faculty is assigned to monitor students during clinical rotations & field internship	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		
b. Qualifications					
III.B.5.b.	Effective in teaching and knowledgeable in subject matter as documented by appropriate professional credential(s)/certification(s), education, and experience in the designated content area	Met		Verified by conversation with personnel	
6. Satellite Lead Instructor (if applicable)					
	Are all Satellite Lead Instructors on file as CoAEMSP approved?	**N/A**			
7. Clinical Coordinator					
	Does the program utilize the clinical coordinator position?	**No**			
a. Responsibilities **Although the program does not utilize the clinical coordinator position, the responsibilities for the clinical coordinator position are required to be fulfilled.**					
III.B.7.a.1)	Coordinates clinical education	Met		Verified by conversation with the Program Director and, if applicable, Lead Instructor Verified by conversation with students	
III.B.7.a.2)	Ensures documentation of the evaluation and progression of clinical performance	Met			
III.B.7.a.3)	Ensures orientation to the program's requirements of the personnel who supervise or instruct students at clinical and capstone field internship sites	Met			
III.B.7.a.4)	Coordinates the assignment of students to clinical and field internship sites	Met			
c. Curriculum					
III.C.1.	Instruction based on clearly written course syllabi that include course description, course objectives, methods of evaluation, topic outline, & competencies required for graduation	Met		Reviewed course syllabi which include the following elements: • course description • description of prerequisites or preparatory work • course objectives • methods of evaluation • topic outline (as applicable)	
				A separate syllabus must clearly define the expectations and requirements for each course: didactic, laboratory, clinical, field experience, and capstone field internship.	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		

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Paramedic					
III.C.2.	Appropriate sequence of classroom, laboratory, clinical, & field internship experience, and capstone field internship activities	Met		Completed Program Course Requirements Table	
				Verified appropriate sequence that demonstrates progression of learning	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		
III.C.3.	Meets or exceeds content & competency of the latest edition of the National EMS Education Standards	Met		Reviewed schedule	
				Documentation of compliance with the latest National EMS Education Standards	
				Verified with preceptors	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		
III.C.4.	Sets and requires minimum numbers of patient/skill contacts for each of the required patients and conditions listed and at least annually evaluates and documents that the established program minimums are sufficient to achieve entry-level competency	Met		Completed Student Minimum Competency (SMC) document	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		
III.C.5.	Capstone field internship provides opportunity to serve as team leader in a variety of ALS situations	Met		Conversation with employers	
				Conversation with students & graduates, if applicable, regarding team lead opportunities	
d. Resource Assessment					
III.D.	Annually assess appropriateness & effectiveness of required resources	Met		Completed Resource Assessment Matrix [RAM] for the last three (3) years. Initial programs may not have three (3) years of RAMs	
				Resource assessment surveys administered to all students and personnel at least annually	
				Resource Assessment Matrix (RAM) completed annually and reviewed with the Advisory Committee	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		
III.D.	Assessment results are the basis for planning & change	Met		Evidence of documentation of implemented changes	
III.D.	Action plan developed when deficiencies identified	Met		Evidence of action taken	
III.D.	Documentation of action plan and measurement of results	Met		Advisory Committee meeting minutes or other evidence	
IV. Student and Graduate Evaluation / Assessment					
A. Student Evaluation					
1. Frequency & Purpose					
IV.A.1.	Evaluation conducted on a recurrent basis, sufficient frequency to provide students & faculty with valid & timely indications of progress of toward achievement of competencies & learning domains	Met		Validity and reliability assessments of program exams completed	
				Feedback mechanisms by program to students indicating progress toward achievement of competencies	
				Evidence of demonstration of skill mastery prior to entering clinical areas	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		

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Paramedic					
IV.A.1.	Assessment of the achievement of required competencies through criterion-referenced, summative, comprehensive final evaluations in all learning domains	Met		Evidence of the summative evaluation at the end of the course including cognitive, psychomotor, and affective evaluations	
				Documentation of summative competency assessment for cognitive, clinical, and field components for students	
				Reviewed process for grading and remediation	
2. Documentation					
IV.A.2.a.	Records maintained in sufficient detail to document learning progress & achievements, including all program required minimum competencies in all learning domains in the didactic, laboratory, clinical and field experience/internship phases	Met		Reviewed student records	
IV.A.2.b.	Tracks and documents each student successfully meets each established minimum patient/skill requirements for the appropriate exit point according to patient age-range, chief complaint, and interventions	Met		Reviewed summary tracking for the required minimum competencies (SMC)	
B. Outcomes					
1. Assessment					
IV.B.1.	Periodically assesses effectiveness in achieving stated goals & learning domains	Met	**N/A should only be selected for programs seeking Initial Accreditation**		
				Reviewed most recent annual report	
IV.B.1.	Results reflected in the reviews & timely revision of program	Met		Reviewed program's analysis and action plans in the annual report	
IV.B.1.	Assessments include: national/state credentialing examination results, programmatic retention, placement, graduate satisfaction, employer satisfaction	Met		Reviewed implemented changes based on analysis and action plans from the annual reports	
2. Reporting					
IV.B.2.	Periodically submits goal(s), learning domains, evaluation systems, outcomes, analysis of outcomes & appropriate action plan based on the analysis	Met	**NA should only be selected for programs seeking Initial Accreditation**		
				Validate that the outcomes in the Annual Report match outcomes posted on the program's website	
V. Fair Practices					
A. Publications & Disclosure					
V.A.1.	Announcements, catalogs, publications, advertising, and website accurately reflect the program offered.	Met	**Note: All of V.A.2. and V.A.3. items may appear in one or more of the following documents**		
V.A.2.	**Make known to applicants and students:** Sponsor's accreditation status (institutional & programmatic)	Met			
V.A.2.	Name and website address of CAAHEP	Met			
V.A.2.	Admissions policies & practices	Met			
V.A.2.	Technical standards	Met		Reviewed the policies (institutional and/or program)	
V.A.2.	Occupational risks	Met			
V.A.2.	Policy on advanced placement (program-specific)	Met		Reviewed student handbook	
V.A.2.	Policy on transfer of credits (sponsor)	Met			
V.A.2.	Policy on credits for experiential learning (sponsor)	Met		Reviewed website	
V.A.2.	Number of credits required for completion of the program if applicable	Met		Verified with students & graduates	
V.A.2.	Tuition / fees and other costs required to complete the program	Met			
V.A.2.	Policies & processes for withdrawal & refund of tuition	Met			
V.A.2.	Policies & process for assignment of clinical experiences	Met			

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Paramedic					
V.A.3.	**Make known to students:** Academic calendar	Met		Reviewed requirements for graduation Verified with students & graduates	
V.A.3.	Student grievance procedure	Met			
V.A.3.	Appeals process	Met			
V.A.3.	Criteria for successful completion of each program segment & graduation	Met			
V.A.3.	Policies regarding performing clinical work while enrolled in the program	N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		
V.A.4.	Maintains and makes available current & consistent summary information about student/graduate achievements on required outcomes assessments	Met		Validated outcomes in the Annual Report match outcomes posted on the program sponsor's website	
B. Lawful & Non-discriminatory Practices					
V.B.	Student & faculty recruitment, student admission, and faculty employment practices are non-discriminatory & in accordance with federal & state statutes, rules, and regulations	Met		Reviewed student handbook	
				Reviewed catalog	
				Reviewed faculty handbook	
V.B.	Faculty grievance procedure known to all paid faculty	Met		Conversations with paid faculty	
				Written faculty grievance policy	
V.B.	Notification to State Office(s) of EMS for all states the program has educational activities	Met		Out-of-state EMS office notification(s)	
C. Safeguards					
V.C.	Health & safety of patients, students, faculty, & other associated participants is sufficiently safeguarded	Met		Policy on the health and safety of all participants	
				Plan/policy to address injury and post exposure	
V.C.	Students are not substituted for paid staff	Met		Policy that students are always identified as students and not substituted for paid staff (i.e., are a student 3rd rider)	
D. Student Records					
V.D.	**Satisfactory records must be maintained for:** Student admission	Met		Reviewed a sample of components of student records	
V.D.	Advisement	Met			
V.D.	Counseling	Met			
V.D.	Evaluation	Met			
V.D.	Permanent storage for grades & credits	Met		Reviewed grading documentation or other records	
				Conversation regarding permanent storage and transcripts	
		N/A	No same state satellite location(s)		
		N/A	No out-of-state satellite location(s)		
		N/A	No unapproved satellite location(s)		
E. Substantive Change					
V.E.	Reports substantive changes in a timely manner: change in sponsorship, change in location, notification of key personnel, addition of a satellite location, or addition of a distance learning program	Met		Changes in sponsorship since submission of self-study report	
				Changes in location since submission of self-study report	
				Addition of satellite location(s) Addition of alternate location(s)	
				Addition of a distance learning program	

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Paramedic					
F. Agreements					
V.F.	Formal affiliation agreements or MOUs exist between the sponsor and all other entities that participate in education of students describing relationship, role, and responsibilities of sponsor and entity	Met		Reviewed that all agreements are current with appropriate signatures	
Satellite Locations					
	Number of CoAEMSP Approved Same State Locations (according to the Executive Analysis [EA] and any approved since the SSR was submitted)	N/A			
	Number of CoAEMSP Approved Out-of-State Locations (according to the Executive Analysis [EA] and any approved since the SSR was submitted)	N/A			
	Are there any satellite locations not CoAEMSP approved?	N/A			