



New Interpretations Adopted by CoAEMSP Board

The CoAEMSP Board adopted four new interpretations of the CAAHEP *Standards and Guidelines* during its February 2020 board meeting. The interpretations are NOT part of the CAAHEP *Standards and Guidelines* document and are subject to change by CoAEMSP. Policy revisions may occur often, so this document should be reviewed frequently to ensure the most current version.

The companion document contains the CAAHEP *Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions* with CoAEMSP interpretations adopted by CoAEMSP through policies.

Please refer to the CoAEMSP Interpretations of the 2015 CAAHEP *Standards and Guidelines* found [here](#).

Download 2015 CAAHEP *Standards and Guidelines* and the CoAEMSP Interpretations [here](#) .

The revised or new Interpretations are:

Standard III.C.3. Team Leads - language added to clarify that all programs are required to have a written team lead definition and the definition must be accessible to students.

*The capstone field internship site must allow students to assess and manage patients in the pre-hospital environment where he/she will progress to the role of Team Leader. **Each program is required to define Team Lead and document it in program materials.***

Minimum team leads must be established by the program and accomplished by each student. The number of team leads is established and analyzed by the program through the program evaluation system and must reflect the depth and breadth of the paramedic profession.

The program must show that the timing and sequencing of the team leads occur as a capstone experience and in relation to the didactic and clinical phases of the program so as to provide an appropriate experience to demonstrate competence.

Evaluating the effectiveness of being a team lead is under standard IV.A.1 and IV.A.2.

Team Leadership Objective: The student has successfully led the team if he or she has conducted a comprehensive assessment (not necessarily performed the entire interview or physical exam, but rather been in charge of the assessment), as well as formulated and implemented a treatment plan for the patient. This means that most (if not all) of the decisions have been made by the student, especially formulating a field impression, directing the treatment, determining patient acuity, disposition and packaging/moving the patient (if applicable). Minimal to no prompting was needed by the preceptor. No action was initiated/performed that endangered the physical or psychological safety of the patient, bystanders, other responders or crew. (Preceptors



should not agree to a "successful" rating unless it is truly deserved. As a general rule, more unsuccessful attempts indicate willingness to try and are better than no attempt at all.)

To be counted as a Team Lead the Paramedic student must conduct a comprehensive assessment, establish a field impression, determine patient acuity, formulate a treatment plan, direct the treatment, and direct and participate in the transport of the patient to a medical facility, transfer of care to a higher level of medical authority, or termination of care in the field.

For the capstone field internship to meet the breadth of the paramedic profession, team leads must include transport to a medical facility and may occasionally include calls involving transfer of care to an equal level or higher level of medical authority, termination of care in the field, or patient refusal of care. Capstone field internship team leads cannot be accomplished with simulation. The program must have a written definition of a successful Team Lead available to the students (e.g., syllabus, student handbook, evaluation form).

Standard IV.B.1. Outcomes Assessment

~~Programs seeking Initial Accreditation are not required to have outcomes data, but must have a plan as to how they will collect and analyze the data upon achieving Initial Accreditation.~~

All programs (accredited and LoR) must publish their latest annual outcomes results for the National Registry or State Written Exam, Retention, and Postive Job Placement on the paramedic program's homepage of their website. At all times, the published results must be consistent with and verifiable by the latest Annual Report of the program (see CoAEMSP Policy IV.D).

Standard IV.B.2. Outcomes Reporting

~~The data reported in the annual report by programs achieving Initial Accreditation begins from the date that CAAHEP awards the Initial Accreditation.~~

~~Continuing Accreditation programs are notified by the CoAEMSP each year as to the due date of the Annual Report submission. The most recently filed Annual Report is added to the Continuing Accreditation Self Study Report (CSSR), when a continuing program undergoes comprehensive review.~~

~~Starting in 2015, all accredited programs must publish, preferably in a readily accessible place on their websites, the 3-year review window average results of the outcomes for:~~

- ~~• NREMT or State (as applicable) Written and Practical pass rates, and~~
- ~~• retention, and~~
- ~~• positive placement~~



~~At all times, the published results must be consistent with and verifiable by the online Annual Report of the program.~~

~~Starting with the 2015 annual report, each year in the Comments tab of the on-line Annual Report, the program must state the website link (or other publication) where its results are published. If the program uses a means other than its website, it must describe those means in the Comments tab, and submit/upload as Related Documents, the materials by which it publishes the outcome results.~~

~~Failure to meet the defined outcomes threshold over the most recent 3-year average may be considered by the CoAEMSP to be a Standards violation.~~

All programs (accredited and LoR) must publish their latest annual outcomes results for the National Registry or State Written Exam, Retention, and Postive Job Placement on the paramedic program's homepage of their website. At all times, the published results must be consistent with and verifiable by the latest Annual Report of the program (see CoAEMSP Policy IV.D).

Standard V.A.4. Publications & Disclosures:

~~No current interpretation for this Standard.~~

Institutions and programs accredited by the recognized accrediting organization: 1. Provide timely, readily accessible, accurate and consistent aggregate information to the public about institutional or programmatic performance and student achievement, as such information is determined by the institution or program, based on quantitative or qualitative information with external verification as appropriate.

Policies

The policies listed below were either revised or the language was cleaned up:

- I.A. Seeking Accreditation: Letter of Review Process
- I.C. Suspension, Revocation, Voluntary Withdrawal or Suspension of the Letter of Review
- III. A. Accreditation Statuses and Actions
- III.H. Inactive Status
- X.A. Accreditation Fees – Fee Types
- X.B. Accreditation Fees – Method of Payment
- XIII.C. Sections and Satellites – Program Satellite

Download the current CoAEMSP Policy Manual [here](#).