



July 29, 2019

Larry Johnson, PhD
President
Maricopa Community Colleges-Phoenix College
1202 W Thomas Road
Phoenix, AZ 85013

Dear Dr. Johnson:

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) is pleased to inform you of its vote on **July 24, 2019** to award **continuing accreditation** to the Emergency Medical Services - Paramedic program at Maricopa Community Colleges-Phoenix College, Phoenix, AZ.

The recent peer review conducted by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoA EMSP) and CAAHEP's Board of Directors recognizes the program's substantial compliance with the nationally established accreditation Standards. The next comprehensive evaluation of the program, including an on-site review, is scheduled to occur no later than **2024**.

The CoA EMSP will regularly monitor the program's compliance with the outcomes assessment thresholds through the program's Annual Report as well as other documentation that may be requested (Standard IV.B.).

The following citations merit your institution's attention and resolution in order to strengthen the program's compliance with the Standards (for a complete copy of the Standards, check the CAAHEP website at www.caahep.org, or call the office at 727-210-2350):

III.A.2. Resources - Hospital/Clinical Affiliations and Field/Internship Affiliations
For all affiliations, students must 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 Emergency Medical Services Profession(s) for which training is being offered.

The clinical/field experience/internship resources must ensure exposure to, and assessment and management of the following patients and conditions: adult trauma and medical emergencies; airway management to include endotracheal intubation; obstetrics to include obstetric patients with delivery and neonatal assessment and care; pediatric trauma and medical emergencies including assessment and management; and geriatric trauma and medical emergencies.

Rationale: The Clinical and Field Institutional Data forms do not include any volume data; therefore, it is not possible to determine adequacy of the hospital/clinical and field/internship resources. The team met with preceptors at only one field internship site.

Post Site Visit Response: The program provided several blank forms, seven (7) CoAEMSP Appendix E Clinical Affiliate Data Forms, and seven (7) CoAEMSP Appendix F Capstone Field Internship Institutional Data Forms. However, the CoAEMSP Appendix E & Appendix F forms were incomplete and contained little or no data. Therefore, it could not be determined if the number of resources are sufficient.

Requested Documentation

Submit a completed Clinical Affiliate Institutional Data form (Appendix E) and Field Internship Institutional Data form (Appendix F) for each clinical affiliate and each field affiliate. [Appendices E and F are available at http://coaemsp.org/Self_Study_Reports.htm].

III.C.2. Resources - Curriculum

The program must set and require minimum numbers of patient/skill contacts for each of the required patients and conditions listed in these Standards, and at least annually evaluate and document that the established program minimums are adequate to achieve entry-level competency.

Rationale: The minimum required numbers for Appendix G are not consistent.

Post Site Visit Response: The program provided the CoAEMSP Appendix G; however, there was no evidence the program required minimum numbers have been reviewed and approved by the program Medical Director or reviewed and endorsed by the program Advisory Committee, as well as, no evidence where the information is published as requested.

Requested Documentation

Submit documentation specifying the program-required minimum numbers of patient/skill contacts by age group including pediatric subgroup, pathologies, complaint and intervention for each of the patients and conditions listed in these Standards. The program-required minimum numbers of patient/skill contacts for each of the patients and conditions listed in these Standards must not be less than two (2) encounters.

Evidence includes the:

- > completed Appendix G – Student Patient Contact Matrix [Appendix G – Student Patient Contact Matrix for available at http://coaemsp.org/Self_Study_Reports.htm],
- > approval by Medical Director (e.g., signed letter, email correspondence),
- > endorsement by Advisory Committee (e.g., minutes), and
- > where that information is published (e.g., program webpage screenshot(s), institutional catalog including exact page(s), student handbook including exact page(s), etc.)

III.D. Resources - Resource Assessment

The program must, at least annually, assess the appropriateness and effectiveness of the resources described in these Standards.

The program must include results of resource assessment from at least students, faculty, medical director(s), and advisory committee using the CoAEMSP resource assessment tools.

The results of resource assessment must be the basis for ongoing planning and appropriate change. An action plan must be developed when deficiencies are identified in the program resources.

Implementation of the action plan must be documented and results measured by ongoing resource assessment.

Rationale: In 2017, the Resource Assessment Matrix was not completed, missing data, and survey tools could not be located. For 2018, the program director has administered surveys; however, there is no evidence of analysis and action plans.

Post Site Visit Response: The program provided emails; however, a completed CoAEMSP Resource Assessment Matrix (RAM) was not submitted as requested.

Requested Documentation

Submit a completed CoAEMSP Resource Assessment Matrix (RAM) reflecting 2018 utilizing the CoAEMSP Student Resource Survey instrument and the Program Personnel Resource Survey instrument, as well as any other program assessment activities or tools elected by the sponsor. The CoAEMSP Resource Assessment Matrix (RAM) is available on the CoAEMSP website at (<https://coaemsp.org/Forms.htm>)

IV.A.1. Student and Graduate Evaluation/Assessment - Student Evaluation Frequency and Purpose

Evaluation of students must be conducted on a recurrent basis and with sufficient frequency to provide both the students and program faculty with valid and timely indications of the students' progress toward and achievement of the competencies and learning domains stated in the curriculum.

Achievement of the program competencies required for graduation must be assessed by criterion-referenced, summative, comprehensive final evaluations in all learning domains.

Rationale: Exams are from a test bank and statistics are run on the exam results; however, no documentation of analysis of validity and that changes made based on that analysis.

Post Site Visit Response: The program provided several examinations demonstrating item analysis is occurring; however, there is no evidence there are changes made, if any, based on the program's analysis as requested.

Requested Documentation

Considering all the data collected by the program from the analytic method(s) used, submit documentation clearly demonstrating the program's analysis of that data, and the changes made, if any, based on the program's analysis. For a given major exam, state one (1) or two (2) items (specify the item #'s) where analyzed statistics prompted a review, and state the results of that review for those item(s):

- > multiple keying of the item,
- > revision of the item content,
- > review of the curriculum for that content,
- > confirmation that the item was acceptable, and
- > any additional information.

IV.A.2. Student and Graduate Evaluation/Assessment - Student Evaluation Documentation

a. Records of student evaluations must be maintained in sufficient detail to document learning progress and achievements, including all program required minimum competencies in all learning domains in the didactic, laboratory, clinical and field experience/internship phases of the program.

Rationale: Student records from the satellite campuses, which recently closed, are fragmented and it is difficult to determine if all necessary components are completed. There is access to some electronic files and there are no paper files on campus. The storage for records appear to be with personnel at the satellite location.

Post Site Visit Response: The program did not provide evidence of completed student records from satellite location, and only provided the entire college catalog. No evidence of the sponsor's policy regarding maintenance of completed student records was provided, as requested.

Requested Documentation

Specify where and how complete student records are properly maintained for the satellite campuses now closed, specifically Chandler (Chandler Fire Department, 3550 S. Dobson Rd) and Mesa (PMT Ambulance Training Program, 222 East Main Street).

IV.A.2. Student and Graduate Evaluation/Assessment - Student Evaluation Documentation
b. The program must track and document that each student successfully meets each of the program established minimum patient/skill requirements for the appropriate exit point according to patient age-range, chief complaint, and interventions.

Rationale: A tracking system is in place using Platinum Planner, however, there is evidence that all graduates from the last two cohorts did not meet the required minimums. Two cohorts are currently in session but have not begun clinical.

Post Site Visit Response: The program provided a narrative stating there are currently cohorts in progress which have not begun the clinical phase of the program. However, there was no summary tracking documentation and no action plan for students who do not meet the program required minimum numbers provided as requested.

Requested Documentation

Submit summary tracking documentation of the number of times each graduate has successfully performed each of the competencies according to patient age (including pediatric age subgroups), pathologies, complaint and interventions to demonstrate that the program required minimum numbers are being met. [Note: The response needs to include the actual tracking documentation of each graduate.] Summary tracking documentation must clearly demonstrate that students are meeting all of the program-required minimum numbers of patient/skill competencies prior to graduation.

Submit the program's specific action plan for any students who do not yet meet the program-required minimum numbers in the on-time educational activities of the curriculum (e.g., in the usual scheduled clinical and field experience, and capstone field internship activities). [NOTE: simulation cannot be used for team leads.]

CAAHEP requests that a progress report, **using the progress report template provided**, be sent **electronically to karen@coaemsp.org** by **December 01, 2019** indicating the manner in which these citations have been resolved.

Failure to respond satisfactorily to the citations above may result in a withdrawal of accreditation.

In order to comply with the need for public disclosure, CAAHEP publishes on its website the accreditation award letters and accreditation actions summaries. Award letters can be found within individual program listings in the "Find An Accredited Program" section of the CAAHEP website. Accreditation actions summaries include a list of actions taken at each meeting, including accreditation statuses awarded and dates of the next reviews/comprehensive evaluations. Summaries can be found by clicking the "Recent Accreditation Actions" link on the home page of the CAAHEP website.

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Dr. Johnson

The accreditation standards are established by CAAHEP, CoA EMSP, American Academy of Pediatrics (AAP), American Ambulance Association (AAA), American College of Cardiology (ACC), American College of Emergency Physicians (ACEP), American College of Osteopathic Emergency Physicians (ACOEP), American College of Surgeons (ACS), American Society of Anesthesiologists (ASA), International Association of Fire Chiefs (IAFC), International Association of Fire Fighters (IAFF), National Association of Emergency Medical Technicians (NAEMT), National Association of State EMS Officials (NASEMSO), National Registry of Emergency Medical Technicians (NREMT), National Association of EMS Physicians (NAEMSP), and the National Association of EMS Educators (NAEMSE).

The commission commends you and your colleagues for your commitment to continuous quality improvement in education, as demonstrated by your participation in program accreditation. Questions concerning the submission or content of the progress report should be directed to the CoA EMSP Executive Office.

Sincerely,

A handwritten signature in black ink, appearing to read "Glen Mayhew". The signature is fluid and cursive, with a large loop at the end.

Glen Mayhew, DHSc, NRP
President

cc: Maria Reyes, MSE, MPA, Dean of Industry and Public Service
Orlando Alcordo, Jr, NRP, Temporary Program Director
Paul A. Berlin, MS, NRP (IAFC), Chair, CoA EMSP
George W. Hatch Jr., EdD, LP, EMT-P, Executive Director, CoA EMSP



Commission on
Accreditation
of Allied Health Education Programs

The Commission on Accreditation of Allied Health Education Programs, upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoA EMSP), verifies that the following program

*Emergency Medical Services - Paramedic
Maricopa Community Colleges-Phoenix College
Phoenix, AZ*

is judged to be in compliance with the nationally established standards and awarded continuing accreditation on July 24, 2019.

A handwritten signature in black ink, appearing to read 'Glen Mayhew', written over a horizontal line.

Glen Mayhew, DHSc, NRP
President, CAAHEP

A handwritten signature in black ink, appearing to read 'Paul A. Berlin', written over a horizontal line.

Paul A. Berlin, MS, NRP (IAFC)
Chair, CoA EMSP



The Final Step in the CAAHEP Accreditation Process

Congratulations! Now that your program has earned CAAHEP accreditation, there is just one more item to be done to complete the accreditation process. Within a week, the **program director** will receive an email with a link to an electronic Accreditation Process Assessment Survey. Response to this brief survey will complete the accreditation process and give CAAHEP valuable feedback about your program's experience.

In this packet you will find:

- This congratulatory notice, which includes information on CAAHEP;
- A Certificate of Recognition, suitable for framing; and
- Policy 302 Public Use of CAAHEP Accreditation Status by Programs and Institutions.

If you are missing any of the above items, if an error was made, or if you have any questions, please contact us at 727-210-2350 ext. 104 or via email at Katie@caahep.org.

Some important notes:

- The [CAAHEP website](#) receives numerous visits every day from potential students looking for accredited programs. Please check the accuracy of your program's data by reviewing the list of [Accredited Programs](#). If an error is found, please email the correction to updates@caahep.org. Also, keep this information handy if your web address, phone number, dean, program director, or other key contact information changes. Please help CAAHEP keep its website accurate by keeping your program's information update to date.
- In accordance with CAAHEP's recognizing body, the Council for Higher Education Accreditation (CHEA), CAAHEP provides public accessibility to information about the accreditation process, the results of the accreditation reviews, and student achievement. An individual who is reviewing an accredited program's record on the CAAHEP website will find the Program Director's name and contact information as well as the address of the program, its current accreditation status, the degree(s) and concentrations or tracks offered, the most recent CAAHEP award letter, and the URL to the program's outcomes on the program's website. If any of this information changes, please provide the correct information to updates@caahep.org
- In order to comply with the need for public disclosure, CAAHEP publishes a summary of accreditation actions taken at each of its meetings. The summary includes the actions taken, date of the next comprehensive evaluation, as well as progress report due dates that appear in accreditation award letters, if applicable. Summaries can be found on the [CAAHEP website](#).
- In promoting your CAAHEP accreditation, if your institution would like to establish a link to our website, you have permission to do so. Please use the URL <http://www.caahep.org>.

Publication of a program's accreditation status must include specific language, including the full name, mailing address, and telephone number of CAAHEP. Please refer to [Policy 302 Public Use of CAAHEP Accreditation Status by Programs and Institutions](#) which is attached, and can also be found in the [CAAHEP Policies and Procedures Manual](#).

- In addition, your program and institution are welcome to use the CAAHEP logo in marketing materials. The logo can be downloaded from the [CAAHEP website](#).

The logo must be used in accordance with CAAHEP **Policy 303 Use of CAAHEP Logo by Programs and Sponsoring Institutions**. This policy requires that any use of the logo and any reference to CAAHEP **must** be accurate. Remember, CAAHEP accreditation is programmatic, so there should be no reference that implies other programs or the institution itself is "CAAHEP-accredited."

Be sure you have CAAHEP's current address:

**25400 US Highway 19 North, Suite 158
Clearwater, FL 33763**

- If your program experiences any type of substantive change as defined in the CAAHEP Standards under Section **V.E. Fair Practices-Substantive Change** or **Appendix A, A.3. Program and Sponsor Responsibilities-Administrative Requirements for Maintaining Accreditation** these changes must be shared with the appropriate [Committee on Accreditation](#) and CAAHEP immediately. Failure to do so may result in a withdrawal of accreditation.

(Please refer to the appropriate set of Standards and Guidelines, found on the [CAAHEP website](#).)

Background Information on CAAHEP

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) was incorporated as a non-profit organization on July 1, 1994. Prior to the formation of CAAHEP, the Committee on Allied Health Education and Accreditation (CAHEA) performed its allied health accrediting functions. CAHEA was both sponsored by and housed within the American Medical Association (AMA). The AMA continued to be CAAHEP's primary sponsor through a three-year transition period, ending on December 31, 1996. Currently, the AMA is one of CAAHEP's approximately 70 sponsoring organizations.

CAAHEP accredits educational programs that prepare health professionals in a variety of disciplinary areas. Accreditation is one step in a process that is meant to protect the public and ensure a supply of qualified health care professionals. Programs are accredited when it is determined that they meet the educational Standards and Guidelines established by the profession.

The 32 CAAHEP professions are:

- Advanced Cardiovascular Sonography Technology
- Anesthesia Technology
- Anesthesiologist Assistant
- Art Therapy
- Assistive Technology
- Cardiovascular Technology
- Clinical Research
- Cytotechnology
- Diagnostic Medical Sonography
- Emergency Medical Services-Paramedic
- Exercise Physiology
- Exercise Science
- Intraoperative Neurophysiologic Monitoring
- Kinesiotherapy
- Lactation Consultant
- Medical Assisting
- Medical Illustration
- Neurodiagnostic Technology
- Orthoptics
- Orthotic and Prosthetic Assistant
- Orthotist/Prosthetist
- Orthotic and Prosthetic Technician
- Pedorthist
- Perfusion
- Personal Fitness Training
- Polysomnographic Technology
- Recreational Therapy
- Rehabilitation/Disability Studies
- Respiratory Care
- Specialist in Blood Bank Technology/Transfusion Medicine
- Surgical Assisting
- Surgical Technology

CAAHEP is the accrediting body. However, 25 committees on accreditation (each representing one or more of the CAAHEP accredited professions) do the day-to-day work of accreditation. These committees are composed of professionals from the individual disciplines. Each committee on accreditation is responsible for reviewing self-studies, performing on-site reviews, and making recommendations to the CAAHEP Board of Directors for final action.

For more information about CAAHEP or the Committees on Accreditation with whom CAAHEP works, visit our website at www.caahep.org or call 727-210-2350.



302 Public Use of CAAHEP Accreditation Status by Programs and Institutions

CAAHEP requires institutions and programs to be accurate in reporting to the public the program's accreditation status.

Publication of a program's accreditation status must include the full name, mailing address and telephone number of CAAHEP.

CAAHEP requires a program to inform all current students and applicants in writing of the program's accreditation status in cases of Probation or Withdrawal (Voluntary and Involuntary).

A. Except for paragraphs 2 and 3 below, if a program has not yet been accredited by CAAHEP and has not yet been scheduled for an initial site visit by the appropriate Committee on Accreditation, no mention of CAAHEP accreditation may be made.

1. Once a site visit has been scheduled by the appropriate Committee on Accreditation, a program may publish the following statement:

"The [name of program] at [institution] has a site visit scheduled for pursuing initial accreditation by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org). This step in the process is neither a status of accreditation nor a guarantee that accreditation will be granted."

There should be no claims of timelines or when accreditation will be achieved.

2. If a program has been issued a Letter of Review by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) they may publish that fact with the following statement:

"The EMT-Paramedic program at [institution] 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."

3. If a program has been issued Candidacy status by the appropriate Committee on Accreditation, they may publish that fact with the following statement:

"The [name of profession] program at [institution] has been issued Candidacy status by the [name of CoA]. This 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 to warrant that status. However, it is NOT a guarantee of eventual accreditation."

B. If a program has CAAHEP accreditation, the sponsor must use the following language when referring to that accreditation:

1. In at least one of its comprehensive publications customarily used to officially convey institutional information, it must state:

“The [name of program] is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of [name of Committee on Accreditation].

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

2. Provided the requirements of paragraph B.1 have been met, when the sponsor additionally publishes the accreditation status of the program, it must state:

“The [name of program] is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of [name of Committee on Accreditation].

3. Provided the requirements of paragraph B.1 have been met, the sponsor may choose, but is not required, to include the program accreditation statement in small publications such as newspaper ads, flyers, pamphlets, etc.

C. If a program has been placed on Probationary Accreditation by CAAHEP, it must inform all students and applicants in writing, and must disclose this sanction whenever reference is made to its accreditation status, by including the statement:

“[Name of program] is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of [name of Committee on Accreditation]. The program has been placed on Probationary Accreditation as of [date of Probation action].”

Since Probationary Accreditation is a temporary status, publications that are published less frequently than once a year (e.g., catalogues) are not required to carry the above wording. However, whenever such publications are distributed to the program’s current students or potential applicants, they must include an insert containing the above language. Any promotional pieces, print advertisements or areas on the program’s website that make reference to accreditation status must include the above language about Probationary Accreditation.