

Standard Interpretations – What is the ARC-AA/CAAHEP Really Expecting?

Setting and requiring minimum number of clinical hours,

The 2016 CAAHEP *Standards* were implemented January 1, 2017. Since the implementation, there has been confusion surrounding CAAHEP Standard III.C.2. Curriculum – Set & Require Clinical Hours and Minimum Number of Cases:

"For first year students, the program must set and require minimum number of clinical hours, and at least annually evaluate and document that the established program minimum is adequate to continue promotion to the second year of the program.

For second and third year students, the program must set and require minimum number of cases by patient population (including pediatrics, adults, geriatrics, acuity, and subspecialties cases - neuro, obstetrics, cardiac, trauma, out-patient) 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."

Confusion exists on the time period for which 'second and third year students' applies. The Board interprets this standard as requiring programs to set the *cumulative number of hours* and cases.

Expectations of Preceptor Orientation/Training

What is the expectation, if any, for a program to have an orientation or a training for its preceptors? (CAAHEP Standard III.B.1.a. Program Director Responsibilities)

The ARC-AA Board has determined, at its April 2019 meeting, that a *program must have a*

Standards and Guidelines for the Accreditation of Educational Programs for the Anesthesiologist Assistant

Essentials/Standards initially adopted June 1987; revised in 2000, 2001, 2004, 2009, 2016

Adopted by the

American Academy of Anesthesiologist Assistants
American Society of Anesthesiologists
Accreditation Review Committee for the Anesthesiologist Assistant
and
Commission on Accreditation of Allied Health Education Programs

preceptor orientation with each of the clinical coordinators (i.e., the point of contact at the clinical site) at a minimum. The clinical coordinator is required to ensure the preceptors have the necessary information for precepting. The information might include expectations of the students, evaluation tools used by the program, and contact information for the program. What the orientation / training may include, and the delivery method are the program's decisions. Ultimately, the responsibility is that of the program director.



Policies Create the Framework of the Organization's Actions

The ARC-AA Board of Directors continuously reviews its <u>policies</u> to ensure they remain current and appropriate. Several policies were recently adopted:

- When a program is awarded CAAHEP initial accreditation, it is for a maximum of 5 years. When the program is seeking CAAHEP Continuing Accreditation for the first time, the maximum number of years the ARC-AA will recommend is 5 years. For subsequent recommendations of continuing accreditation, the maximum length the ARC-AA may recommend has increased to 10 years. (At this point, the program will have held CAAHEP accreditation for at least 10 years.) (VIII. Accreditation Review > E. Length of Accreditation).
- Programs are required to publish on their websites the 3-year review window for its outcomes for:
 - o national credentialing examination(s) performance,
 - o job (positive) placement, and
 - o programmatic retention/attrition.

Additionally, programs must publish the first-time pass rate and the cumulative pass rate for the national credentialing examination(s) performance. The Programs may publish additional outcomes, such as graduate satisfaction, employer satisfaction, and programmatic summative measures. (XI. Outcomes Based Evaluation > E. Transparency of Outcomes).

- One of the recent policies it reviewed centered around satellite campuses. Based on its discussion and obtaining feedback from programs, the Board decided to maintain the current policy (XVI. Programs > A. Satellite Programs) that states "Satellite programs are not defined nor endorsed as models for AA programs and AA education."
- Additional policies were approved surrounding the operations and governance of the organization. For the most current ARC-AA Policy and Procedure Manual, please download it on www.caahep.org/arc-aa.

Questions? Comments?

Call or email Jennifer Anderson Warwick, Executive Director, ARC-AA
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The following information was initially introduced in the December 2018 ARC-AA Update and is worth repeating now. Remember, the Program's Annual Report is due September 15, 2019.

Programs are Required to Use Specific forms

During its annual meeting in October 2018, the ARC-AA Board of Directors reviewed the 2018 Annual Reports from each of the accredited Anesthesiologist Assistant programs. General observations from the collaborative review:

- The requirement for the programs to use the standardized reports and tools from the ARC-AA will be enforced moving forward. The board is seeking meaningful data for the program and for the board and is hopeful that by requiring programs to use standardized reports, it will streamline the process for both the program as well as the board while ensuring the information desired is provided.
- In an effort to demonstrate the importance of each question asked on a Student Survey or a Program Personnel survey, which are used to assess the program's resources, the questions were revised, and each question is now linked directly to a CAAHEP *Standard*. Every program is required to use these surveys, which are available on www.caahep.org/arc-aa.
 - o *revised* Resource Survey Students
 - revised Resource Survey Program Personnel



In addition to the PDF version, if you have a paid SurveyMonkey account, email the 'user name' to jennifer@arc-aa.org, and she will copy the surveys to your account.

- If a report is submitted in the wrong format, it will be rejected and deemed not received.
- We heard you...the RAM rolled out in January 2018 for the collection of data and the automated analysis of it was too much busy work and duplicated efforts by program staff; therefore, that format of the tool is no longer required.
- Advisory Committee Meeting Minutes vary widely among programs in terms of what information is captured, the
 formatting, and the substance of the meeting. The Advisory Committee Minutes should not include disciplinary
 actions or behavior issues related to anyone; this includes faculty and students.
- All of the tools referred to in this document are available on www.caahep.org/arc-aa. To recap the tools the program must begin using effective immediately are the:
 - o Resource Assessment Matrix (RAM) [available in Excel]
 - o Advisory Committee Meeting Agenda & Minutes template [available in Word]
 - o **Resource Survey Students** [available via SurveyMonkey, PDF]
 - Resource Survey Program Personnel [available via SurveyMonkey, PDF]

The documents have been updated, so for programs that have been using or all of these tools, please replace them with the newer versions.