Virginia
OFFICE OF EMERGENCY MEDICAL SERVICES
Virginia Department of Health

Program Accreditation Application, Instructions and Self Study

Paramedic

Application for EMT-Paramedic Accreditation

APPLICATION DATE _____

TYPE OF APPLICATION
(*CHECK ONE*):

☐ INITIAL GRANT OF ACCREDITATION – PARAMEDIC PROGRAM

A. **INSTITUTIONAL DATA**

OFFICIAL NAME OF INSTITUTION _____

MAILING ADDRESS 1 _____

ADDRESS 2 _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ FAX _____

ON-SITE ADMINISTRATOR'S E-MAIL ADDRESS (THIS INDIVIDUAL WILL RECEIVE ALL RELATED CORRESPONDENCE FROM OEMS)

E-MAIL ADDRESS _____

WEB SITE ADDRESS _____

PHYSICAL ADDRESS
(IF DIFFERENT FROM ABOVE) _____

CITY _____ STATE _____ ZIP _____

NAME AND TITLE OF CEO OR COO _____

NAME AND TITLE OF ON-SITE ADMINISTRATOR _____

NAME AND TITLE OF PROGRAM DIRECTOR _____

July 2012

PROGRAM CREDENTIALS*
(CHECK ALL THAT APPLY)

FOR POSTSECONDARY INSTITUTIONS ONLY

☐ CERTIFICATE   ☐ DIPLOMA
OCCUPATIONAL
☐ ASSOCIATE'S DEGREE   ☐ ACADEMIC ASSOCIATE'S DEGREE

☐ BACHELOR'S DEGREE   ☐ OTHER

CORPORATION TYPE (*CHECK ONE*):

☐   PRIVATELY HELD CORPORATION
☐   PUBLICLY TRADED CORPORATION
☐   NOT-FOR-PROFIT CORPORATION
  LIMITED PARTNERSHIP WITH CORPORATE GENERAL
☐   PARTNER
☐   LIMITED LIABILITY COMPANY

DATE OF ORIGINAL ESTABLISHMENT OF INSTITUTION _____

B. ALTERNATIVE SITE INFORMATION

DOES THE INSTITUTION INTEND TO OPERATE THIS PROGRAM AT ANY
OTHER LOCATIONS OTHER THAN THE ONE SPECIFIED ON PAGE 2?   YES ☐   NO ☐
*IF YES, LIST ADDRESS, PHONE NUMBER, AND ADMINISTRATOR (IF APPLICABLE) OF EACH
LOCATION (ATTACH A SEPARATE SHEET, IF NECESSARY):*
ADDRESS OF
ADDITIONAL SITE _____

CITY _____   STATE _____   ZIP _____

       FAX
TELEPHONE _____ (IF AVAILABLE) _____
NAME AND TITLE OF ON-SITE
ADMINISTRATOR _____

WHAT IS THE RELATIONSHIP OF THIS SITE TO ONE LISTED ON PAGE 2 OF THIS
APPLICATION?

_____

_____

C. **PERSONNEL** *LIST EACH PERSON IN ONLY ONE CATEGORY.*

NUMBER OF ADMINISTRATIVE STAFF: FT _____ PT _____

NUMBER OF FACULTY MEMBERS FOR THIS PROGRAM: FT _____ PT _____

OF THE FACULTY MEMBERS:

NUMBER WHO HOLD AN ASSOCIATE'S DEGREE: FT _____ PT _____

NUMBER WHO HOLD A BACHELOR'S DEGREE: FT _____ PT _____

NUMBER WHO HOLD A MASTER'S DEGREE: FT _____ PT _____

NUMBER WHO HOLD A DOCTORATE DEGREE: FT _____ PT _____

D. **STUDENTS**

ANTICIAPTED NUMBER OF REGULARLY
ENROLLED STUDENTS:

_____ FULL-TIME   _____ PART-TIME   _____ TOTAL

E. **SIGNATURES**

CEO OR COO _____ DATE _____

ON SITE
ADMINISTRATOR _____ DATE _____

PROGRAM DIRECTOR _____ DATE _____

Office of EMS use only:

Site Visitor:_____ Date_____ Recommendation: ☐ Yes ☐ No

Site Visitor:_____ Date_____ Recommendation: ☐ Yes ☐ No

State Medical Director:_____ Date_____ Recommendation: ☐ Yes ☐ No

July 2012

Development of the Comprehensive Self Study

Each institution affiliated with the Virginia Office of Emergency Medical Services accepts the responsibilities to undergo periodic evaluation through self study and professional peer review. The effectiveness of self-regulatory accreditation depends upon an institution's acceptance of certain responsibilities, including involvement in and commitment to the accreditation process. An institution is initially expected to conduct a self-study as specified by the Office of EMS in order to gain an initial grant of accreditation up to 5 years in length. At the conclusion of the self-study, the institution is expected to accept an honest and forthright peer assessment of institutional strengths and weaknesses.

Self study is part of a three-part process of accrediting an institution. This process includes a self appraisal, an on-site visit by a team of peers, and a review and a decision on the accredited status of the institution by the Office of EMS. The self appraisal results in a report that is an analysis of the on-going and systematic activities and achievements of an institution. The aim of self appraisal is to assess how well an institution meets accreditation standards and to stimulate improvement of educational quality and institutional performance. The ultimate goal of accreditation is to help an institution improve attainment of its own mission—improving student learning and student achievement.

Self appraisal requires a conscious and self-reflective analysis of strengths and weaknesses and an examination of every aspect of institutional function against predefined standards. Broad involvement in the both the institutional self appraisal and preparation of the self study narrative enhances the credibility and usefulness of the self study.

Additional Locations or Learning Sites

On occasion, accredited training programs in Virginia contact the Office of EMS regarding offering additional training in alternative training sites which differ from the site receiving initial accreditation. As a result, OEMS training staff has contacted the "Commission on Accreditation of Allied Health Programs" for clarification. The OEMS has determined that additional programs can be offered under the original accreditation, dependant upon the program sponsoring the training demonstrating that all program components and evaluation tools are essentially the same as the original.

In an effort to accommodate institutions offering accredited programs, the Office is not requiring that the entire accreditation process be repeated a second time. The Office of EMS is putting in place a policy for those alternative sites.

Institutions that intend to operate entire programs or parts of programs at a different location or learning site must prepare and submit a separate Alternative Site Self Study for each additional location. This application can be obtained from the Office of EMS. The questions which make up the Alternative Site Self Study must be addressed for each alternative site to assure OEMS that the two programs are essentially the same.

A site different from the original accreditation can be approved upon receipt of written verification of site details. As a reminder, it is important for all accredited programs to remember that should changes occur within the program, it is necessary to notify OEMS in writing of those changes.

Organization Prior to Preparation of the Self-Study

Since the accreditation process from initial receipt of the self study to receiving a grant can take from three to six months, a realistic and detailed timetable for the organization and completion of the self study report should be developed. Although the exact organizational plan will vary from institution to institution, the following suggestions may be helpful:

1. Select an appropriate member of the staff to direct the preparation of the self-study.

2. Involve all members of the faculty, administration, governing board or council in the discussions of the self-study.

3. Establish subcommittees to prepare specific sections of the self-study.

4. Adopt a reasonable time schedule and enforce it.

The Self-Study Questions

The self-study questions are designed to elicit a thorough analysis of the institution and the program.

The narrative should be prepared in clear and concise language and should respond to each of the questions asked. The format for the narrative report should be as follows:

- The narrative shall be contained in a *3-ring binder and all materials must be typewritten or prepared using a computer, collated, tabbed to divide the various sections as designated in the Self Study document*. Individual pages of the self-study **should not** be submitted in plastic page holders.
- Required attachments shall be included at the end of the narrative and any exhibits shall be included at the end of the narrative report should be provided only if they are essential to the team's review and preparation prior to the visit. Exhibits should be clearly marked and logically ordered.
- Please provide the following information on the front cover and spine of the 3-ring binder and the binder of exhibits accompanying the disk: Site/School name, City, State.

Submitting the Self-Study

Institutions should send two hard copies of the completed self-study (including exhibits) and one copy of the narrative on diskette or CD-ROM with exhibits in an accompanying binder to:

> Virginia Department of Health
> Office of Emergency Medical Services
> ALS Accreditation Program
> Attn: Chad L. Blosser
> 1041 Technology Park Drive
> Glen Allen, VA 23059

The institution should keep at least one copy for the institution's files.

The self-study document is reviewed for completeness upon receipt in the office. You will be contacted if it does not contain all of the required items. Please do not submit other applications or requests with the self-study.

Scheduling Site Visits

The scheduling of a visit depends on a number of factors, including the availability of site evaluators and staff and the date when the completed materials arrive.

Once the Office of Emergency Medical Services has received the application materials in complete and proper form, a staff member will contact the site/school to schedule a date for a site visit.

Evaluation Teams

The evaluation team will be composed of at least one representative from the Office of Emergency Medical Services and may include at least one other person from Office of EMS or from outside. Rarely, additional team members may be required and will be assigned where necessary for the evaluation of any type of institution and its programs.

Prior to the site visit, the Office of Emergency Medical Services will advise the institution as to the date of the visit and, if available, the names of the team members. Team members will review a complete copy of the application materials, to include the Self Study and any updates. The materials will be reviewed in advance so that the time spent at the institution will be as productive as possible. The major portion of the visit time is devoted to verification of the information provided in the application.

Preparing for the Team

The institution shall provide a suitable workspace for the evaluation team. This room must be private, with sufficient table space to allow team members to comfortably review all materials, interview administrative and faculty personnel, and write the report. A telephone in the workroom or other private area and a computer with a printer also should be made available.

Also, institutions are required to update the application where significant changes have occurred since its submission to the Office of EMS at least two weeks prior to the on-site evaluation visit.

The team normally will arrive in the morning on the day of the visit. In some cases, when the institution offers evening classes, the team may visit the institution the evening before the scheduled day of the visit. When the team arrives, they will take a brief tour of the facilities followed by an introductory meeting with the chief on-site administrator. At the introductory meeting, the administrator(s) should fully describe all changes that have occurred since the filing of the application.

During the visit, members of the team will meet with administrators, faculty, and students. They will visit classrooms and other parts of the facility. The institution should have informed its faculty, staff, and/or students of the date and purpose of the visit. The team will examine information such as course syllabi, student academic

and financial records, files of faculty and staff, and minutes of meetings. Some teams
also may want to consult with directors or trustees and community leaders or local employers.

Program Reaccreditation

In order to obtain grant of reaccreditation for an EMT-Paramedic program, the institution must seek out and obtain program accreditation at the national level from an accrediting agency approved by the Office of EMS; see 12 VAC 5-31-1390 C. National accreditation must be secured within the initial 5 year grant of accreditation issued by the Office of Emergency Medical Services.

Programs wishing to renew their site accreditation shall apply to the Office of Emergency Medical Services for renewal not less than 90 days before expiration of their current grant of accreditation. The application included in this package—less the self study document—along with a copy of the CAAHEP accreditation certificate will be official means of application for renewing grants of accreditation.

Self-Study Questions for EMT Programs

Section I: Resources

1. What percent of each day will the program director allocate toward participating with the paramedic program before and during the begin and end dates of the course?

    ___ *Full time (primary job while the program is in progress, min. 40 hours/week)*

    (There should be at least one-full time position to fulfill the program director responsibilities)

    [place cursor here to type answer]

2. Explain how the Program Director is qualified to fulfill the responsibilities of this position.

    Job Description (*The program director shall possess a Bachelor's degree from an accredited institution of higher education. Address education, field experience in the delivery of pre-hospital emergency care, certification as a Paramedic required*.)

    [place cursor here to type answer]

3. What evidence is there that the program director is responsible for:

    - Organization - *Documentation of program's organization, lectures, syllabus, clinical activities.*
    - Administration - *Documentation of program's policies and procedures to include but not limited to:*
        a) *passing criteria;*
        b) *interim test, quizzes, practicals;*
        c) *record keeping of students progress;*
        d) *clinical agreements;*
        e) *field Internship agreements*
    - Periodic Review - *How often, with whom, review criteria.*
    - Continued Review - *Changes to program, proposed changes to the program, program evaluation criteria.*
    - Effectiveness of the Educational Program - P*rogram stats for test, quizzes, practical results, NREMT-P results.*

    [place cursor here to type answer]

4. Indicate by what methods the program director actively solicits and requires the cooperative development of the medical director of the program including but not limited to student selection?

    (Reviews curriculum prior to start of program. Monitors faculty presentations. Participates in instruction of program. Reviews instructor list. Reviews tests and quizzes for medical validity. Reviews evaluation criteria and stats. Reviews student applications and any course prerequisites.)

    [place cursor here to type answer]

5. Indicate how the program director has the authority to administer all phases of the educational program, including didactic, laboratory, clinical, and field internship components?

   (License, certifications, past experiences, knowledge of EMS, knowledge of curriculum. Educational experience and degree.)

   [place cursor here to type answer]

Section II: Medical Direction

1. Indicate the various methods with which the medical director reviews the educational content of the program curriculum?

   (Reviews or is familiar with curriculum content; i.e. monitors faculty presentations, participates in instruction of program, reviews instructor list, reviews tests and quizzes for medical validity, reviews evaluation criteria and stats, and reviews program stats.)

   [place cursor here to type answer]

2. How will the medical director review the quality of medical instruction?

   (Periodically monitors lectures and practicals, reviews instructors for appropriate qualifications, oversees the entire program content)

   [place cursor here to type answer]

3. How and when will the medical director review the supervision of students by the faculty?

   (Defined by program guidelines agreed to by Medical Director to include but not limited to didactic/clinical/internship)

   [place cursor here to type answer]

4. How and when does the medical director review each student's performance?

   (Identified by program policy when the Medical director will minimally review student's progress, documents used for this and any interview the medical director will have with the student)

   [place cursor here to type answer]

5. How will the medical director assure adequate progress toward completion of the program by each student?

   (Meets with the program director regularly to review students progress and monitors preceptor's

evaluations in clinical and internship settings.)

[place cursor here to type answer]

6. Indicate the methods the medical director utilizes to attest that each graduating student has achieved the desired level of competence prior to graduation?

    (Reviews each student's progress through program by examining class records, preceptor's evaluations in clinical and internship settings, and meets with students periodically to discuss students progress. Documentation of review and comments to be included in student files.)

    [place cursor here to type answer]

7. How does the medical director actively participate in the local medical community?

    (Meets regularly with medical community and participates in local regional medical control committees. Takes part in state Medical Direction Committee.)

    [place cursor here to type answer]

8. To what extent is the medical director familiar with base station operations?

    (Currently works either full or part time at a facility which functions as a base station providing on line medical control.)

    [place cursor here to type answer]

9. Has the medical director reviewed the DOT Paramedic Curriculum?

    (Has reviewed the layout of the curriculum and is familiar with the course guide and the general contents of the curriculum.)

    [place cursor here to type answer]

10. Is the medical director knowledgeable about the state administrative guidelines regarding educational programs in Virginia to include:

    - EMS Rules and Regulations;
    - Training Administration Manual;
    - Virginia EMS Laws;
    - Possession of and review the contents of the OMD notebook provided by the Office of EMS.

    (The medical director has reviewed the portions of the documents listed above and assures the program meets the criteria each establishes.)

    [place cursor here to type answer]

Section III: Faculty

1. What evidence is there that the program has assured that each instructor is qualified through academic preparation, training and experience to instruct students in assigned topics?

   (Program should be able to provide evidence (CV's) that each instructor is fully capable of instructing students in assigned topics. Appropriate expertise in the assigned topic should be assessed prior to initial selection and ongoing expertise must be monitored.)

   [place cursor here to type answer]

2. What evidence is there of appropriate evaluation of instructional faculty?

   (Confirmed by copies of students evaluations and documentation by program director and or medical director.)

   [place cursor here to type answer]

Section IV: Financial Resources

1. What evidence is there that financial resources are assured for continued operation of the classes of students admitted?

   (Confirmed by the commitment of consistent resources, facilities, and materials for conducting educations and training given specific class size.)

   [place cursor here to type answer]

Section V: Facilities

1. Do the classrooms have adequate seating for the number of students in each class?

   [place cursor here to type answer]

2. Are the laboratories adequate to support the curriculum requirements for the number of students assigned?

   (There is available adequate number of rooms and space for the practical skills to be practiced.)

[place cursor here to type answer]

3. Is sufficient equipment available for the provision of instruction for the lesson plans and number of students enrolled to include all age groups?

   (Is the equipment owned or borrowed. If borrowed, is there a written agreement for use of the equipment? Is there a sufficient quantity of equipment to allow half the class to practice with a ratio of 1 complete set per 6 students? A list of available equipment to the program should be included.)

   [place cursor here to type answer]

4. Are there library facilities readily accessible to students?

   (Are the facilities used by students? Example: Are research   papers assigned and reviewed)

   [place cursor here to type answer]

5. Does the library include current EMT and medial periodicals, scientific books, audio-visuals, self-instructional resources, and other references?

   [place cursor here to type answer]

Section VI: Clinical Resources

1. Is there a signed clinical affiliation agreement with each clinical affiliate associated with the program that are appropriate to the objectives of that rotation?

   (Are there signed agreements with each clinical affiliation indicating student needs which meet the programs requirements for each of the below listed areas.)

   - Emergency Department
   - Intensive Care
   - Operating Room
   - Coronary Care
   - Recovery Room
   - Labor and Delivery
   - Pediatric Unit
   - Psychiatric Unit/Crisis Center

   [place cursor here to type answer]

2. What evidence exists that the students will have access to adequate numbers of patients who present common problems in the delivery of advanced emergency care?

   (Documentation that the facility has the census, patient visits, and variety of cases that meet the

curriculum needs.)

[place cursor here to type answer]

3. Will the students encounter patients of appropriate distributions by sex and age?

    (See #2 above. Must provide evidence that students will have contact with neonates, infants, children, adults [young, middle aged, geriatric] of both sexes.)

    [place cursor here to type answer]

4. Are the overall clinical resources adequate to support the number of students enrolled?

    (Documentation indicating the number of students allowed at any one time in each of the areas described in number 1 of this section.)

    [place cursor here to type answer]

5. Are there clearly established learning objectives for each clinical assignment?

    (Documentation which is provided to each of the clinical affiliations describing what is expected of each student as far as skills, and listing the learning objectives.)

    [place cursor here to type answer]

6. Indicate how the learning in the clinical setting is efficient and effective in achieving the learning objectives of each clinical assignment?

    (Copy of the evaluation forms used for each student during clinicals which relate back to clinical objectives indicating satisfactory and unsatisfactory performance.)

    [place cursor here to type answer]

7. Describe the evidence found to substantiate that adequate supervision is available in each clinical site to assure effective learning?

    (Documentation describing the arrangement with clinical preceptors/instructors. Documentation describing their formal orientation to the program and ratios of students to instructors.)

    [place cursor here to type answer]

Section VII: Field Internship

1. What evidence is there of medical accountability within the EMS system in which the field internship

of the program functions?

(Students are functioning only with approved preceptors present who are authorized by the program's OMD. Run sheet reviews are conducted as well as evaluation forms by the programs OMD. Communication with on-line medical control by program OMD for additional evaluation.)

[place cursor here to type answer]

2. Are written affiliation agreements or memoranda of understanding with agencies that provide field/internship experience under appropriate medical direction and clinical supervision?

    (Copies of agreements must be included with self study)

    [place cursor here to type answer]

3. Are the students under the direct supervision of preceptors at all times?

    (Documented in program guidelines, field agreements, and program guidelines to students.)

    [place cursor here to type answer]

4. Describe the program's methods utilized to designate preceptors?

    (Documentation reviewing the formal training received by the preceptors that has the approval of the OMD. Should include learning objectives, expectations, skills evaluation, and evaluation reports. How contact is made with programs coordinator and OMD.)

    [place cursor here to type answer]

5. What relationship to the program do the preceptors have?

    (Documentation on how the preceptors are formally recognized by the paramedic program.)

    [place cursor here to type answer]

6. What evidence is there that assures the students receive objective evaluations?

    (Documentation which describes conflicts of interest and periodical interviews with preceptors and students during the field internship with involvement of the medical director and/or programs internship coordinator.)

    [place cursor here to type answer]

7. What evidence is there that assures students progress is appropriate and progressive?

    (Documentation indicating how often internship reviews are held with program coordinators, medical director and preceptors using evaluations and comments.)

    [place cursor here to type answer]

8. Do the field internship experiences occur on intensive care vehicles?

(Documentation that verifies all internship rotations must be on ALS vehicles delivering ALS level of care at the level for which the program is geared.)

[place cursor here to type answer]

9. Does the field internship occur in an EMS system that has the capabilities of voice telecommunications with on-line medical direction?

[place cursor here to type answer]

10. Is the EMS system in which the field internship occurs supplied with equipment and drugs necessary for advanced life support?

[place cursor here to type answer]

11. How is the field internship component integrated with the overall curriculum of the program?

(Documentation showing how the field internship is weighted when evaluating satisfactory performance for the overall program.)

[place cursor here to type answer]

12. Is there evidence that a student is never a substitute for paid or regular personnel or a required team member within the EMS system during the field internship component of the program?

(Documentation showing that the agreement with agencies conducting field internships understand that students are not substitutes for staffing the EMS organization. Furthermore, students are provided documentation stating this and what they should do if ever placed in this situation.)

[place cursor here to type answer]

13. What methods are utilized to assure that there is medical accountability throughout the field internship component of the program?

(Documentation describing and or showing ongoing review of student's field internship activities based upon program objectives and local protocol.)

[place cursor here to type answer]

14. What evidence exists that there is adequate opportunity for each student to attain the required competencies?

(Documentation demonstrating the ability of students to perform patient intervention activities and evidence that the system participating in the field internship program has adequate call volume and acuity to permit students to apply intervention skills being taught.)

[place cursor here to type answer]

Section VIII: Student Relations

1. Is there evidence that the program has published admissions and course administration policies and procedures?

   (A copy of which is provided to each student. Should include but not limited to prerequisites for the program, student expectations, class/course rules, policies for all student activities such as clinicals and internships.)

   [place cursor here to type answer]

2. Are evaluations conducted frequently enough to assure that both students and program faculty have evidence of student progress?

   (Documentation demonstrating the frequency and evaluation tools used to measure progress.)

   [place cursor here to type answer]

3. Do students have ample time to correct identified deficiencies?

   (Documentation providing policies for the appropriate management of deficiencies.)

   [place cursor here to type answer]

4. Are evaluation instruments related to behavioral objectives stated in the curriculum?

   (Evaluation instruments include reference to the behavioral objectives.)

   [place cursor here to type answer]

5. What evidence is there that frequent review of the effectiveness of student evaluation will occur?

   (Documentation which defines the frequency which a student's performance is reviewed and by whom.)

   [place cursor here to type answer]

6. Does the program require records of each student's health status? (i.e. immunizations, TB, etc.)

   [place cursor here to type answer]

7. Is there evidence that students have information about access to health care services of the institution?

(Documentation which defines how student health care during the program is handled.)

[place cursor here to type answer]

8. Will students received accurate information regarding the program's:

    - Requirements
    - Fees
    - Expectations
    - Grievance Process

    [place cursor here to type answer]

9. Is a descriptive synopsis of the current curriculum available to students and applicants of the program?

    (Documentation to minimally include program description, length of program, list of primary text book and resource materials, program syllabus including scheduled class times, dates, subject to be taught, faculty.)

    [place cursor here to type answer]

10. Are objectives for the program available for the students?

    (Copy of the program objectives which at a minimum satisfy the DOT curriculum.)

    [place cursor here to type answer]

11. What evidence is there that the following meet the minimum standards for:

    - current and updated teaching plans?
    - current and updated course objectives?

    [place cursor here to type answer]

12. Are there on file appropriate records addressing:

    - clinical and field internship experience schedules?
    - class and laboratory schedules?
    - copies of course outlines?

    [place cursor here to type answer]

13. Is there evidence that written recruitment and admission policies are non-discriminatory with respect to race, color, creed, sex, age, disabling conditions, handicaps, and national origin?

    [place cursor here to type answer]

14. Are faculty selection processes non-discriminatory with respect to race, color, creed, sex, age,

disabling conditions, handicaps, and national origin?

[place cursor here to type answer]

15. Is there a grievance policy in place for student grievances?

[place cursor here to type answer]

16. Are there records of student admission, student attendance, academic counseling and evaluation?

[place cursor here to type answer]

17. Are grades and credits for courses completed, recorded, and permanently maintained by the sponsoring institution?

[place cursor here to type answer]

18. In student records, was there evidence of:

- high school graduation, or
- GED

[place cursor here to type answer]

19. How is evidence of completion of all didactic and field internship requirements for each student, including attendance and listings of competencies attained?

[place cursor here to type answer]

20. Are there copies of examinations and assessments throughout the curriculum and training program on file?

[place cursor here to type answer]

21. Is there evidence that each student is provided with information about his/her progress in the curriculum?

[place cursor here to type answer]

Section IX: Program Evaluation

1. Is there a plan for the program to periodically assess its effectiveness in achieving goals and objectives?

(Policy describing the frequency and manner by which the program's effectiveness in achieving goals and objectives are monitored.)

[place cursor here to type answer]

2. Does the program survey the various communities of interest to determine effectiveness and how is that information utilized?

(Program evaluation methods should emphasize gathering and analyzing data on the effectiveness of the program in developing competencies consistent with the stated program goals and objectives)

[place cursor here to type answer]

Section X: Curriculum

1. Is there evidence that the goals and objectives of the program are understood and known by representatives of the medical community.

(Documentation describing how the medical community is notified and participate in the program.)

[place cursor here to type answer]

2. Is there evidence that the program goals and objectives are known and understood by students in the program?

[place cursor here to type answer]

Section XI: Self Assessment

1. What are the limitations, if any, that are associated with your program?

[place cursor here to type answer]

2. What are the strengths that are associated with you program?

[place cursor here to type answer]