



March 18, 2019

Johnny Moore, PhD
President
Pierpont Community & Technical College
1201 Locust Avenue
Fairmont, WV 26554

*All citations have been resolved;
the accreditation status and next
evaluation date remain in place.*

Dear Dr. Moore:

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) is pleased to inform you of its vote on **March 15, 2019** to award **continuing accreditation** to the Emergency Medical Services - Paramedic program at Pierpont Community & Technical College, Clarksburg, WV, including an approved satellite at Kanawha County EMS, Charleston, WV.

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.C.1. Resources - Curriculum

The curriculum must ensure the achievement of program goals and learning domains. Instruction must be an appropriate sequence of classroom, laboratory, clinical/field experience, and field internship activities.

Progression of learning must be didactic/laboratory integrated with or followed by clinical/field experience followed by the capstone field internship, which must occur after all core didactic, laboratory, and clinical experience.

Instruction must be based on clearly written course syllabi that include course description, course objectives, methods of evaluation, topic outline, and competencies required for graduation.

The program must demonstrate by comparison that the curriculum offered meets or exceeds the content and competency of the latest edition of the National EMS Education Standards.

Rationale: Progression of learning and course sequencing are not as prescribed in the Standard. There is evidence the program's course sequencing does not allow for all required core didactic, laboratory and clinical/field experience content to be delivered prior to commencement of the capstone field internship.

Post Site Visit Response: The program provided evidence demonstrating review and approval by the program Medical Director and endorsement of the program Advisory Committee of revisions to the program's curriculum sequence.

The program provided the CoAEMSP's Appendix D; however, the sequencing appears to include core courses during the capstone field internship phase and lecture hours are not listed.

Submit documentation clearly demonstrating that the progression of instruction is an appropriate sequence of classroom (core didactic), laboratory, clinical/field experience, and capstone field internship activities, including documentation that the sequence of the curriculum ensures that the students have achieved the desired core didactic and clinical/field experience competencies specified in the curriculum prior to commencement of the capstone field internship.

Submit the CoAEMSP Appendix D as evidence that the sequence of the curriculum ensures students have achieved the desired didactic and clinical/field experience competencies of the curriculum prior to commencement of the capstone field internship (CoAEMSP Appendix D available at http://coaemsp.org/Self_Study_Reports.htm).

The program should communicate with Dr. George Hatch or Dr. Gordon Kokx at the CoAEMSP Executive Office to discuss the documentation needed to satisfactorily address this citation.

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: Achievement of program competencies required for graduation are not assessed as prescribed in the Standard. There is no evidence of summative, comprehensive final evaluations in the cognitive, psychomotor or affective domains.

Post Site Visit Response: The program provided a single sample of a comprehensive evaluation which measured the psychomotor learning domain using nine (9) Yes or No questions in a single scenario rather than a representative sample used to measure all three (3) learning domains from three (3) graduates as requested.

Describe how the program ensures that each graduate's achievement of program-required competencies is assessed on summative, comprehensive (final) evaluations in all three (3) learning domains conducted at the conclusion of the capstone field internship.

Submit a representative sample of completed, graded summative, comprehensive (final) evaluations conducted at the conclusion of the capstone field internship from the most recently graduated students that are used to measure cognitive, psychomotor and affective learning domains for three (3) of the students. [Note: The response needs to include the actual documentation; sample or blank evaluation forms are not a sufficient demonstration of compliance.]

The representative sample submitted should clearly demonstrate graduate achievement of all program-established minimum competency requirements prior to graduation.

[Note: For assistance in student evaluation, CoAEMSP has obtained permission from the National Association of EMS Educators (NAEMSE) and Delmar, Cengage Learning to reproduce and make available to you Chapter 21 "Using Written Evaluation Tools" from the Foundations of Education: An EMS Approach, 2nd Edition book. [Click Here](#) to view Chapter 21.]

The program should communicate with Dr. George Hatch or Dr. Gordon Kokx at the CoAEMSP Executive Office to discuss the documentation needed to satisfactorily address this citation.

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: The program does not track and document students' successful achievement of program established minimum competencies prior to graduation. There is no documentation demonstrating the program tracks each graduate's achievement of the program established minimum patient/skills requirements. There is evidence all graduates from the last graduating cohort did not meet all program required patient established minimum patient/skills requirements including team lead requirements.

Post Site Visit Response: The program described how it accurately tracks and documents each students successfully meets each of the program required minimum numbers and provided tracking documentation. However, the tracking documentation provided demonstrated students are graduating without achieving all of the program required minimum numbers. Additionally, the program did not provide an action plan for students who do not meet the program required minimum numbers as requested.

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.] An example of summary tracking is available on the CoAEMSP website (see the "summary sheet" in the document at http://coaemsp.org/Documents/Patient_Encounters_Tracking_2_2013.xls).

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.]

The program should communicate with Dr. George Hatch or Dr. Gordon Kokx at the CoAEMSP Executive Office to discuss the documentation needed to satisfactorily address this citation.

CAAHEP requests that a progress report, **using the progress report template provided**, be sent **electronically to karen@coaemsp.org** by **March 01, 2020** 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 a summary of accreditation actions taken at each of its meetings. The summary includes the actions taken, dates of the next review/comprehensive evaluation, as well as Standards citations and progress report due dates that appear in accreditation award letters, if applicable. Summaries can be found by clicking the "Recent Accreditation Actions" link on the home page of the CAAHEP website.

Page 4
Dr. Moore

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 that reads "Gregory J. Ferenczak". The signature is written in a cursive, flowing style.

Gregory Ferenczak, EdD, RT(R)(QM)
President

cc: Vickie Findley, RHIA, MPA, Dean, School of Health Sciences
Benjamin B Tacy, MEd, NRP, MCCP, Program Director
Paul A. Berlin, MS, NRP (IAFC), Chair, CoA EMSP
George W. Hatch Jr., EdD, LP, EMT-P, Executive Director, CoA EMSP