



Updated Statement Regarding COVID-19 (Coronavirus)

March 20, 2020

The Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) has been closely monitoring the impact of the coronavirus (COVID-19) on Paramedic education programs and their institutions. It is recognized that institutions are preparing or enacting action plans to keep students, faculty, and staff safe; that programs are considering alternative methods for delivery of didactic courses; and that clinical and capstone field internship sites are enacting plans and processes that might impact clinical and capstone field internship education. The CoAEMSP recognizes that programs may need to employ different approaches and strategies that may be influenced by individual institutional policies and procedures, local, state and federal regulations, and possible variations in the spread of COVID-19. The CoAEMSP is providing the following guidance to programs in order to remain compliant with the *CAAHEP Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions* during this difficult time. We fully recognize that this is an evolving situation so additional guidelines will be provided, as deemed appropriate.

Didactic Courses – Temporary Changes to Mode of Instruction

If disruption in didactic courses occurs, the CoAEMSP appreciates that programs need the flexibility to quickly respond. Therefore, the CoAEMSP is providing broad approval to programs to use on-line technologies to accommodate students on a temporary basis, without going through the standard CoAEMSP substantive change process. This temporary approval will sunset when the CoAEMSP determines it is reasonable and appropriate to do so in light of the COVID-19 crisis. At that time, programs will be notified of the requirement to follow the CoAEMSP's policy and resume formal notifications to the CoAEMSP of any substantive changes. No information is required at this time.

Clinical and Capstone Field Internship

The CoAEMSP expects programs to maintain compliance with the CAAHEP *Standards*. In particular, Standard III.C.2. Curriculum delineates CAAHEP's expectations for the program to set and require minimum numbers of patient/skill contacts. In addition, Standard IV.A.2. delineates expectations that the program must track and document that each student successfully meets each of the program established minimum patient/skill requirements for patient age-range, chief complaint, and interventions. Finally, Standard III.B.2.a.5) delineates that the medical director ensures the competence of each graduate of the program in the cognitive, psychomotor, and affective domains. All programs are expected to follow their own policies regarding the number of required patient/skill contacts, as approved by their Medical Director and endorsed by their advisory committee (communities of interest).

Should capstone field internship education be unavailable or discontinued, programs will need to find ways to make up that time, which might involve a delay of graduation. If there are changes required to the minimum numbers of patient/skill contacts or capstone team leads, then documentation is required of (1) both the review and approval by (2) both the program director and medical director, and (3) both review and endorsement by the advisory committee.

For students who have demonstrated entry-level competency but have **not** achieved the minimum number of team leads previously set by the program, the program director, in consultation with the medical director, **may** consider the student complete and graduate the student. Since students might reach entry-level competency at different points, this could result in variations in the number of team leads during the capstone field internship phase.

Alternate learning experiences may include, but are not limited to, simulations or written assignments, but please note that *these are not acceptable substitutions for capstone field internship team leads*.

The CAAHEP *Standards* do not identify a specific number of procedures. Program policies related to establishing entry-level competency are expected to be followed. Each program has previously determined its minimum number of required patient contacts/skills in concert with its program director, medical director, and advisory committee. If the program requires a specific number of procedures before the student is evaluated it **may** be reasonable to defer the specific number during this public health crisis and to determine whether the student is ready for a competency evaluation based on the skills the student has developed. The program's capstone field preceptors may be best prepared to determine this since they work with the students in the capstone field internship phase on a regular basis. Programs **must** continue to ensure that students demonstrate entry-level competency in all three learning domains prior to graduation.

Documentation of Action Plans and Changes

This extraordinary situation will likely require an individualized approach for each paramedic education program and student. The CoAEMSP continues to believe in the value of completing all of the clinical and capstone field internship, and, while we understand that most capstone field internships cannot continue as originally planned, at this time, there is **no** waiver of the expectations related to this requirement to meet the CAAHEP *Standards*. During this national emergency, programs are required to document their action plans and the specific changes being made. In 2021, when the program is required to submit its annual report to the CoAEMSP, it will be asked to submit with it the following evidence:

- **Institutional Accreditor Notification.** Official notification from the institution to its institutional accreditor of the temporary relocation of on-campus and off-campus instruction or moving the learning modality from residential instruction to an online format.

In emergency situations, institutions are often required by their institutional accreditor to notify them of temporary relocation of on-campus and off-campus instruction. Emergency relocations are for unforeseeable situations such as natural disasters, fires, or other extraordinary circumstances, including COVID-19. Unlike routine relocations in which a site permanently relocates to another single site, emergency relocations temporarily move instruction to another single site or to multiple other sites. The documentation your institution provided to its accreditor, as well as to the state higher education authority (if applicable), is the documentation the CoAEMSP will request.

- **Program's Action Plan to Determine Student Competency.** The program's action plan on **how** it will determine a student is entry-level competent even though the student had not achieved the program's established minimum patient/skill requirements.
- **Student's Action Plan.** When a student is deemed entry-level competent prior to achieving the program's terminal competencies, documentation of the student's learning progress and achievements, including any final evaluations.
- **Modifications to minimum patient/skill requirements.** If modifications are made to the program's overall established minimum patient/skill requirements, documentation demonstrating (1) who was involved with the decision and (2) documentation of the change to the numbers, including (3) evidence of approval of the medical director and (4) endorsement by the advisory committee.

Conclusion

Although the situation regarding the COVID-19 is unpredictable and unprecedented, the only constant is that we want to do the right thing by the patients, our programs, our students, and our volunteers. The need to protect our community is essential, especially at this critical time to prevent further spread of the COVID-19 virus.

If a program finds itself pausing a student's education so the individual can work in the field, the program is encouraged to require the student to return after the national emergency has passed to complete their formal education.

March 20, 2020

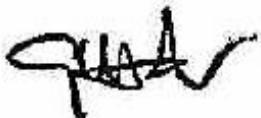
Suggested resources for the latest information on COVID-19:

- [WHO](#)
- [CDC](#)
- [NHTSA's Office of EMS](#)
- [US Department of Education](#)
- [Federal Student Aid](#)
- Your local public health authority for your county and state
- Your local and state regulatory institutions including the State OEMS

We are all in this together and recognize that the health of our nation depends on how we all respond---together. To that end, the CoAEMSP is committed to continually working with each of our programs to ensure that students receive the required education according to their Paramedic curricula and CAAHEP *Standards*.

We would like to formally acknowledge and extend our deepest respect for the community of CAAHEP-accredited Paramedic programs and the challenge you are facing. This is an unprecedented time in which all of us have had to adjust to new realities daily, even hourly, and you have done so gracefully and thoughtfully, demonstrating the best of our profession. You have heard us say this before, however, it always bears repeating, it is an honor and distinct pleasure to be a member of the EMS community and to serve it. Please stay safe out there – we need you!

Sincerely,



George W. Hatch, Jr., EdD, LP
Executive Director



Paul A. Berlin, MS, NRP
Chair, Board of Directors