

ACCREDITATION COMMITTEE – PERFUSION EDUCATION ACCREDITATION PROCESS

For New Programs Applying for Candidacy Status and Initial Accreditation

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The information provided here is an overview and does not supplant or replace the provisions of the **Standards and Guidelines for an Accredited Educational Program in Perfusion Technology (Standards)**. Accreditation is a voluntary process. Evaluation of a perfusion educational program is undertaken only with specific authorization from the chief executive officer (CEO) of the sponsoring institution.

I. STATEMENT ON STUDENTS

Students will be considered graduates of a CAAHEP accredited perfusion program if they are enrolled in the program anytime while the program is accredited. There is no grandfather clause of retroactive recognition for CAAHEP accreditation. CAAHEP accreditation covers all students who have successfully completed a program, which has been granted any accreditation status at any time during their enrollment.

II. CANDIDACY STATUS

All programs planning to apply for accreditation must first attain a minimum of six months of Candidacy status. The purpose of Candidacy status is to allow the AC-PE to work with developing programs as a liaison prior to beginning the accreditation process. The proposed program will be reviewed for compliance with the **Standards** and will have a consult visit by an individual designated by the AC-PE, prior to student acceptance. Both the AC-PE Chair and staff will be available to the program throughout this process. Candidacy status begins with the program's submission of the fee and application materials. Candidacy status ends when the program has a site visit for initial accreditation or three (3) years after submission of application materials, whichever comes first. **Candidacy status is not an accreditation status.** There is no guarantee of accreditation. (For further instructions on applying for candidacy status see the AC-PE Candidacy Application Instructions.)

III. INITIAL ACCREDITATION

Programs are eligible for Initial Accreditation following completion of Candidacy status. Initial accreditation requires programs to submit an application fee and includes a site visit, at the program's expense. Initial accreditation may be granted when the AC-PE confirms that the perfusion program is in substantial compliance with the **Standards**. Compliance is determined by: completion of Candidacy status; submission of the self-study; submission of the application fee; completion of the site visit; and review of the program's response to findings.

A. Self-study Report

The program will be sent a self-study guide following satisfactory completion of the Candidacy consult visit. The program can then begin work on the self-study in preparation for application of Initial Accreditation. Once the self-study is submitted, it is thoroughly reviewed by two AC-PE committee members. The committee members' reviews are forwarded to the site visit team prior to the site visit.

B. Site Visit

Following submission of the self-study, the site visit evaluation will occur at a mutually agreed upon date, approximately six (6) months prior to graduation of the first class of students. The purpose of the site visit is to validate the self-study report and evaluate the program's compliance with the **Standards**. The length of a site visit is normally 1 ½ - 2 days. To assist the site visitors, the program should provide a conference room or office for the team's use throughout the site visit.

C. Selection of the Site Visit Team

The site visit team minimally consists of a team chair and a team member. All site visitors are qualified by education and experience.

Appropriate program officials are notified of the names and institutional affiliation of the individuals assigned to the team by letter prior to the site visit. If any member of the team is unacceptable to sponsor representatives, a written request, sent to the AC-PE office, is all that is required to initiate changes in team composition. It is not necessary to provide a reason for this request.

D. Site Visit Agenda

The site visit includes a review of the didactic and clinical segments of the program. To evaluate the correlation between the didactic and clinical components of the curriculum and clinical resources available for student experience, clinical affiliates are visited. A minimum of three (3) clinical affiliates must be visited.

The team chair, in cooperation with the program director, is responsible for developing an agenda for the site visit. This agenda includes meetings with representatives from institutional administration, faculty, clinical education personnel and students. The site visit team will review the master plan of education and student records, interview program officials and students, and visit the library, laboratory and clinical affiliates.

Prior to the exit summation, the site visit team will review their findings with the program director to assure mutual understanding and to avoid presentation of inaccurate information. At the exit summation, the team chair and/or member will report the team's findings related to each *Standard*. The site visit team does not make an accreditation recommendation.

The sponsoring institution determines the attendees at the exit summation. It is appropriate for institutional administration, program officials and clinical representatives to attend.

E. Report of Findings

The site visit report is submitted to the AC-PE office, where it is developed into the report of findings by AC-PE staff. Once site visitors confirm accuracy of the report, it is transmitted to the chief executive officer, dean, program director, and medical director. The report defines any area of the *Standards* in which the site visit team found the program to be deficient at the time of the site visit.

A response to the report of findings, including the signature of the chief executive officer of the sponsoring institution, is required by all programs. If no deficiencies are cited, receipt of the report of findings must be acknowledged. The response may also include comments on the site visit, site visitors or the accreditation process.

F. Reviewing the Program Response

The report of findings and the program's response are reviewed by the AC-PE at its next scheduled meeting. A recommendation for appropriate accreditation action is forwarded to the Commission on Accreditation of Allied Health Education Programs (CAAHEP). CAAHEP determines the accreditation status of the program and notifies the sponsoring institution and program of its action in writing, promptly after each meeting.

G. Site Visit Expenses

The sponsoring institution is responsible for payment of each site visitor's expenses. Site visitor lodging and meal reimbursement is based on reasonable and customary rates for locations convenient to the site being visited. Site visitors are expected to select the lowest practical airfare in consideration of program budget impact. Travel by personal car is reimbursed to the equivalent of the lowest practical round-trip coach airfare available. Expenditures for alcoholic beverages, movies and other entertainment costs are not reimbursable. The AC-PE covers all expenses up front and bills the program for the entire cost following the site visit. Expenses that appear excessive are investigated by AC-PE staff prior to program billing.

A sponsoring institution may consider combining the site visits of multiple allied health educational programs. Perfusion education program site visits may be combined with those of other allied health education programs. A single site visit of multiple programs may be cost-effective, eliminating various visits by individual site teams. Contact the AC-PE office for further information.

H. Developing and Submitting a Progress Report

A progress report is sometimes required of a program, at a time specified by the AC-PE, to document progress in resolving problems of compliance with the *Standards* or associated administrative requirements. A program may submit its progress report earlier than requested; prior approval from AC-PE staff is necessary if a delay in submission is anticipated.

I. Annual Report

Once a program receives accreditation, it is required to submit an Outcomes Based Accreditation (OBA) annual report. The annual report will be due approximately 120 days following the completion of each academic year. In the case that a program completes more than one class a year, one completion month will be selected by the AC-PE and the annual report will be due approximately 120 days following the completion of the selected month. Definitive due dates will be assigned by the AC-PE based on reported completion dates and are subject to change.

There will be some portions of the annual report that new programs cannot complete until outcomes data is acquired. However, programs are still required to complete as much of the report as possible and submit it by the assigned due date.

J. Annual Report Review

Upon submission of the annual report, AC-PE staff will review the report to identify missing or incomplete information. Once the report is determined to be complete, it is placed on the next meeting agenda of the AC-PE.

1. If all outcomes meet the established thresholds, the program is placed on a consent agenda.
2. If any of the outcomes are below the established thresholds, the annual report will be thoroughly reviewed by the committee.
3. Upon review of the report, the AC-PE will either: 1) accept the report, in which case no additional information will be required prior to submission of the next annual report; 2) require a progress report or request additional documentation and clarification; 3) conduct a consultative site visit if there are major concerns that require immediate attention; and/or 4) recommend a change in accreditation status. (ie, putting a program on or taking a program off probation.)

K. Transition to Continuing Accreditation

Continuing Accreditation may be recommended after submission of at least one (1) annual report with satisfactory outcomes data or at the conclusion of the 5-year initial accreditation.

IV. ACCREDITATION CATEGORIES

A. Initial Accreditation

Initial accreditation is the first status of accreditation granted to a program that has demonstrated substantial compliance with CAAHEP Standards. Initial accreditation is granted for a period of five (5) years. At the conclusion of the 5-year award, the AC-PE can: 1) recommend continuing accreditation; 2) recommend probationary accreditation; or 3) take no action, in which case the program's accreditation will expire. A program may request reconsideration of the AC-PE's decision to allow initial accreditation to expire. However, the AC-PE's final decision cannot be appealed.

B. Continuing Accreditation

For programs with initial accreditation: Accreditation is recommended after submission of at least one (1) annual report with satisfactory outcomes data or at the conclusion of the 5-year initial accreditation award. Continuing or probationary accreditation should be granted prior to expiration of initial accreditation. If accreditation is not granted and initial accreditation is allowed to expire (due to unsatisfactory outcomes data or non-compliance with the **Standards**) the program must start over and re-apply for initial accreditation if it wishes to pursue accreditation again.

For programs with continuing accreditation: Continuing accreditation is granted to a program when it is re-evaluated at specified intervals. Once continuing accreditation is granted, it does not expire. Continuing accreditation is ongoing and can be ended only with an involuntary or voluntary withdraw of accreditation.

C. Probationary Accreditation

Probationary accreditation is a temporary status of accreditation granted when a program continuously does not meet accreditation **Standards**, but should be able to meet them within the specified time.

Recommendations of probationary accreditation can be based on evidence substantiated by a site visit or documentation submitted through a progress report or annual report.

The CAAHEP accreditation letter contains a clear statement of each deficiency contributing to the failure to be in substantial compliance with the **Standards**. The letter also indicates that (1) a progress report is required by a specific date; (2) failure to come into substantial compliance with the **Standards** may result in the withdrawal of accreditation and (3) currently enrolled students and those seeking admission must be advised that the program is on probation.

CAAHEP awards of probationary accreditation are final and are not subject to appeal. During a period of probationary accreditation, programs are recognized and listed as being accredited. The probationary status of a program is disclosed to the public in response to telephone or written inquiries.

Reconsideration

The AC-PE provides an opportunity for reconsideration of its recommendation for probationary accreditation prior to CAAHEP action. The AC-PE letter to the program, following committee action, contains a clear statement of each deficiency contributing to the failure of the program to be in substantial compliance with the **Standards**. The letter also contains instructions for the program to follow when requesting committee reconsideration of a recommendation of probationary accreditation. The request for reconsideration must include a concise rationale and documentation to support reconsideration.

D. Probationary Accreditation - Administrative

Probationary accreditation - administrative may be granted when the perfusion program does not comply with one or more of the administrative requirements for maintaining accreditation, which include but are not limited to the following:

1. Submitting the annual or self-study report or a required progress report within a reasonable period of time as determined by the AC-PE.
2. Agreeing to a reasonable site visit date.
3. Informing the AC-PE within a reasonable period of time of changes in the perfusion program personnel, as required by the **Standards**.
4. Paying the AC-PE accreditation fees and charges within a reasonable period of time, as determined by the AC-PE.

Probationary accreditation - administrative is an accreditation category that is not subject to CAAHEP appeal. However, the program may request that the AC-PE provide an opportunity for reconsideration prior to CAAHEP action. During a period of probationary accreditation - administrative, programs are recognized and listed as being accredited; their probationary status is not publicized.

E. Withhold of Accreditation

Accreditation may be withheld from a program seeking initial accreditation if the program is not in substantial compliance with the **Standards**. Before transmitting a recommendation to withhold accreditation, the AC-PE provides the program an opportunity to: 1) request AC-PE reconsideration; or 2) decide to voluntarily withdraw from the accreditation system before CAAHEP considers the recommendation.

If after reconsideration the AC-PE proceeds with the recommendation to withhold accreditation, and CAAHEP acts upon this recommendation, CAAHEP will notify the appropriate officials that accreditation has been withheld from the program and include a letter with clear statements of each deficiency. Institutions sponsoring programs from which accreditation is withheld may appeal the decision. The CAAHEP letter also informs the sponsoring institution that it may apply for accreditation as a new applicant whenever the program is believed to be in substantial compliance with the **Standards** and with administrative requirements for maintaining accreditation.

F. Withdrawal of Accreditation

Students enrolled in a program at the time the sponsoring institution is notified that accreditation has been withdrawn may complete the requirements for graduation and be considered graduates of a CAAHEP-accredited program.

1. Accreditation withdrawn - voluntary (at request of the sponsoring institution).
2. Accreditation withdrawn - involuntary (for failure to be in substantial compliance with the **Standards** or with administrative requirements). The perfusion program may request reconsideration by the AC-PE of this recommendation to CAAHEP.

Accreditation may be involuntarily withdrawn from a program with probationary accreditation if, at the conclusion of the specified probationary period, the AC-PE process confirms that the program is not in substantial compliance with the **Standards** or with the administrative requirements for maintaining accreditation.

The CAAHEP letter notifying the appropriate officials that the perfusion program has received accreditation withdrawn - involuntary indicates that the institution may appeal the decision. A copy of the CAAHEP appeals procedures for accreditation withheld or withdrawn accompanies the letter of notification.

The appropriate official is provided with a clear statement of each deficiency and is informed that the sponsoring institution may apply for accreditation as a new applicant whenever the perfusion program is believed to be in substantial compliance with the *Standards* or with administrative requirements for maintaining accreditation.

G. Inactive Status

The sponsoring institution may request inactive accreditation status for a perfusion program that does not enroll students for a period of up to two years. Such programs must continue to pay annual fees to the AC-PE. While the program will not be required to file an annual report during inactive status, the program will be responsible for acquiring all outcomes information from the last active class and will need to report that information on the next annual report, if/when the program is reactivated. After being inactive for two consecutive years, programs must decide to: 1) reactivate the program; or 2) voluntarily withdraw accreditation. If the program takes no action, CAAHEP may withdraw accreditation.

V. FEE SCHEDULE

Candidacy Status

Application Fee	\$1500
Consult Visit	actual cost (approximately \$1000-\$1500)

Initial Accreditation

Application Fee	\$1500
Site Visit	actual cost (approximately \$2000-\$2500)
Annual Fee *	\$1750

* The annual fee is charged after Initial accreditation has been granted. Programs receiving Initial accreditation in the spring are responsible for payment of the total annual fee. Programs receiving accreditation in the fall are responsible for payment of 50% of the annual fee. Following the initial invoice for the annual fee, programs are invoiced in January of each year for the annual fee.

Continuing Programs

Annual Fee*	\$1750
Site Visit	◆ all site visit expenses are covered by the AC-PE

* Programs are invoiced in January of each year for the annual fee.

* Programs notifying the AC-PE (in writing) of an intention to discontinue prior to July 1 of a given year are invoiced 50% of the annual fee for that year. Programs discontinuing July 1 or later in a given year are responsible for payment of the total annual fee.

* Inactive accredited programs must pay the annual fee to maintain accreditation.

◆ Policy: The AC-PE will pay expenses for two (2) site visits within a 10-year period for each program. Programs are responsible for paying the actual cost of any subsequent visits required within the same 10-year period.

Clinical Site Recognition

Application Fee	\$100 per site
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An additional 5% charge is assessed when payment is not received within 60 days of the invoice date.

FEES ARE NOT REFUNDABLE
