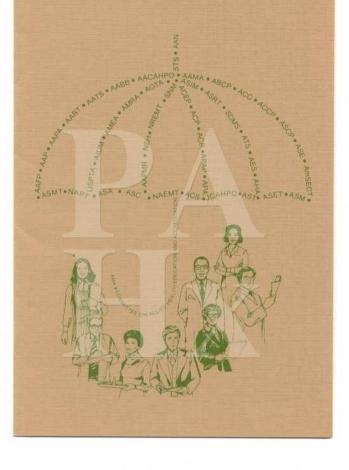
The CAHEA Umbrella: Accreditation of Allied Health Educational Programs





WHAT IS CAHEA?

The acronym CAHEA (pronounced kuh HE uh) stands for the Committee on Allied Health Education and Accreditation. CAHEA is a non-governmental agency that accredits educational programs which prepare individuals for entry into one of 26 allied health professions or occupations. Approximately 2,900 allied health educational programs across the nation are accredited by CAHEA.

WHY IS CAHEA CONSIDERED TO BE AN UMBRELLA ACCREDITING AGENCY?

CAHEA encompasses a broad range of review and evaluation activities of educational programs in allied health on behalf of the American Medical Association and 48 colfaborating organizations composed of allied health professional organizations, medical specialty societies and other interest groups. As the final deliberative body for the assessment of compliance with established minimum acceptable standards for education in the allied health professions. CAHEA formulates its accreditation decisions on the basis of recommendations received from the 21 review committees that are sponsored by the colfaborating organizations.

Accrediting educational programs for the allied health professions began in 1933 through a copperative agreement between the American Occupations Therapy Association and CAHEA's predecessor in accreditation, the Council on Medical Education of the American Medical Association. The growth in collaborative sponsorship for accreditation of allied health programs was moderate until the mid-1960's, when it accelerated to a rapid and sustained increase throughout the 1970's.

CAHEA, with the majority of the 21 raview committees, is recognized by the Council on Postsecondary Accreditation and the U.S. Commissioner of Education to be in compliance with their respective standards for national accrediting agencies.

WHAT IS THE ROLE OF THE AMA COUNCIL ON MEDICAL EDUCATION IN ALLIED HEALTH?

On behalf of the American Medical Association, the Council on Medical Education performs three functions in relation to allied health education; (f) formal recognition of emerging allied health occupations; (2) formal recognition of the allied health and medical specialty organizations as collaborating sponsors of review committees, and (3) adoption of new and revised Essentials in conjunction with other collaborating organizations.



WHAT ARE CAHEA'S RESPONSIBILITIES?

CAHEA's primary responsibility is the accreditation of allied health educational programs. Other responsibilities include

- working with review committees, collaborating organizations and other interested groups in developing, revising, and adopting policies and procedures that facilitate the accreditation process
- establishing and maintaining liaison with institutions that sponsor accredited programs and with related health and educational organizations to assure that CAHEA policies and procedures promote effective and efficient education
- establishing and maintaining relationships with ailled health professional organizations, related medical specialty societies and other reliable and competent graduates for service in the allied health professions

WHO DOES CAHEA REPRESENT?

CAHEA believes it has an obligation to reflect the communities of interest that are represented within the right allied health occupations for which it accredits programs. The fourteen members of CAHEA include individuals who have a broad interest in of competence in the allied health professions and services. They include allied health professionals, educators, physicians, hospital administrators, allied health students or recent graduates, and public representatives.

WHAT IS ALLIED HEALTH?

Allied health is a term used to describe a range of occupations in which individuals have responsibility for complementing, supporting, extending, or otherwise supplementing the physician in delivering health care services to the patient and in promoting the patient's health and well-being.

IN WHAT WAYS ARE THE ALLIED HEALTH PROFESSIONS ALLIED?

The allied health professions are allied with medicine in providing health care services. It is through cooperation within CAHEA's accreditation process that these allied health organizations, medical specialty societies, and other groups constitute the largest accrediting conscitum in the United States.

- 46 collaborating organizations sponsor 21 accreditation review committees
- 1,800 universities, colleges, vocational technical schools, hospitals and other institutions sponsor nearly 2,900 CAHEA-accredited programs
- 38,000 students are candidates for graduation from CAHEA-accredited programs each year
- 2,000 allied health professionals, physicians, and others volunteer their services in reviewing on-site the accreditation qualifications of over 800 programs each year



WHAT PART OF HEALTH MANPOWER IS ALLIED HEALTH?

In the broadest sense, allied health personnel make up about 3.5 million, or two-thirds of the 5 million individuals who are employed in the health care field. Many of the remaining one-third are the practitioners in medicine, osteopathy, dentistry, nursing, pharmacy, podiatry, optometry, and veterinary medicine.

WHAT DOES CAHEA ACCREDIT?

CAHEA accredits educational programs for 26 professions and occupations, as listed below.

CLINICAL ASSISTANCE

CUNICAL LABORATORY SERVICE

Assistant to the Primary Care Physician Emergency Medical Technician-Paramedic Perfusionial Surgeon's Assistant Surgical Technologist

Histologic Technician Medical Laboratory Technician (Associate Degree) Medical Laboratory Technician (Certificate) Medical Technologist Specialist in Blood Bank Technology

Medical Assistant
Medical Assistant in Pediat

Cytotechnologist

Medical Record Administrator Medical Record Technician

Occupational Therapist
Physical Therapist
Respiratory Therapist
Respiratory Therapy Technician

Diagnostic Medical Sonographer Electroen ephalographic Technician Electroencephalographic Technician Redicar Medicine Technologist Nuclear Medicine Technologist Radiation Therapy Technologist Radiation Therapy Technologist

MEDICAL ASSISTANCE

MEDICAL RECORD MANAGEMENT

REHABILITATION SERVICES

TECHNOLOGICAL SERVICES



HOW IS EDUCATION AFFECTED BY ACCREDITATION?

The educational process frequently is improved as programs make modifications in order to meet the accreditation standards. The comparison of the program with the national minimum standards for accreditation, called the Essentiais, affords the program faculty an opportunity to develop and maintain quality educational programs.

The value of the Essentials lies in their endorsement by broad consensus within the communities of greatest interest. All organizations and individuals interested in the education for a given allied health occupation are invited to provide comment in the course of developing or revising Essentials. The national silied health associations representing the professions, the medical specialty societies, and related organizations each assist in developing, revising, and adopting Essentials.* Therefore, the adopted Essentials represent the accepted standards for education in a given occupation.

Essentials are used by each component of the evaluation and review process. Institutions considering accreditation for a proposed or existing program use the Essentials to determine if their program is ready for evaluation. Programs applying for initial or continuing accreditation use them for guidance in conducting a self-enalysis of their compliance with the standards. On-site teams, review committees, and CAHEA use the Essentials to evaluate applicant programs' qualifications for accreditation.

WHY DO STUDENTS ENROLL IN PROGRAMS ACCREDITED BY CAHEA?

Graduation from a program that is recognized through accreditation benefits students by providing

- · assurance that the program mests nationally established standards;
- · recognition of their education by their professional peers; and
- eligibility, in many instances, for professional certification, registration, or state licensure

HOW BROAD ARE CAHEA'S ACTIVITIES IN RELATION TO EDUCATION?

As the final deliberative body that accredits educational programs in 26 allied health occupations, CAHEA establishes policies and procedures on issues and concerns relating to accreditation and to education as expressed in the Essentials.

*The Council on Medical Education, which adopts the Essentials on behalf of the American Medical Association, fulfills an important role by conducting a public hearing on proposed or revised Essentials before adoptive consideration. This hearing is open to representatives from the allied health professions and other communities of interest.



WHAT IS CAHEA ACCREDITATION?

Accreditation by the Committee on Allied Health Education and Accreditation (CAHEA) identifies educational programs that have met the national minimum standards for education, as established by those individuals and groups interested in or representing the profession.

HOW DOES AN EDUCATIONAL PROGRAM BECOME ACCREDITED BY CAHEA?

A program must successfully proceed through a five-step process in order to be according

- Application for Accreditation. The chief executive officer of the sponsoring institution requests and subsequently submits an application for accreditation to CAHEA.
- Self-Analysis: The program completes a self-analysis and submits a report
 of it to the appropriate review committee. The report examines the program's
 spensorally, curriculum, resources, and operational and student policies
 and practices.
- On-Site Review: A volunteer team of individuals knowledgeable about education for the particular profession then reviews the program on-site. If desirable, the review is conducted in conjunction with visits of other programmatic agencies and/or institutional accrediting agencies.
- Review Committee Evaluation After evaluating the application, the selfanalysis report or summary, the report of on-site review, and the accompanying documentation, the review committee formulates an accreditation recommendation that is forwarded to CAHEA.
- CAHEA Accreditation CAHEA examines the recommendation made by the
 review committee in fellation to the Essentials and its own judgment of the
 program's qualities. If it agrees with the recommendation, a formal notice of
 accreditation status is sent to the chief executive officer of the institution
 and to the program director. If the recommendation is considered inappropriate, it is referred back to the teview committee for recognideration.

WHAT ARE THE FUNCTIONS OF THE AMA DEPARTMENT OF ALLIED HEALTH EDUCATION AND ACCREDITATION?

The Department of Allied Health Education and Accreditation of the American Medical Association provides staff support to CAFEA in processing application and evaluation documents for programs seeking accreditation. Other functions of the department include the compilation of program data for publication in the Allied Health Education Directory, formulation of policy for consideration by CAHEA, research and analysis in accreditation matters, consultation with programs and sponsoring institutions, liaison with special interest groups and other representatives of the various communities of interest, and maintenance of the official CAHEA archives of each accredited program.

REVIEW COMMITTEES

The review committees listed below cooperate with CAHEA through their review of educational programs' compliance with the Essentials:

Cytotechnologist-Cytotechnology Programs Review Committee

Diagnostic Medical Sonographer-Joint Review Committee on Education in Diagnostic Medical Sonography

Electroencephalographic Technician, Electroencephalographic Technician, Electroencephalography.

Review Committee on Education in Electroencephalography.

Emergency Medical Technician-Paramedic—Joint Review Committee on Educational Programs for the EMT-Paramedic

Histologic Technician, Medical Laboratory Technician (Associate Degree), Medical Laboratory Technician (Certificate), Medical Technologist-Histologic Technician Review Committee, Medical Laboratory Technician (AD) Review Committee, Medical Laboratory Technician (C) Review Committee, Medical Technologist Review Committee, and NAACLS Review Board

Medical Assistant, Medical Assistant in Pediatrics-Curriculum Review Board of AAMA

Medical Record Administrator, Medical Record Technician-Education and Registration Committee of AMRA

Nuclear Medicine Technologist-Joint Review Committee on Educational Programs in Nuclear Medicine Technology

Occupational Therapist-Accreditation Committee of AOTA

Ophthalmic Medical Assistant-Joint Review Committee on Educational Programs for the Ophthalmic Medical Assistant

Perfusionist-Joint Review Committee on Educational Programs for the Perfusionist

Physical Therapist-Joint Review Committee for Physical Therapy Education

Physician's Assistant (Assistant to the Primary Care Physician, Surgeon's Assistant)-Joint Review Committee on Educational Programs for Physician's Assistants

Radiation Therapy Technologisi, Radiographia Joint Review Committee on Education in Radiologic Technology

Respiratory Theraptst, Respiratory Therapy Technician-Joint Review Committee for Respiratory Therapy Education

Specialist in Blood Bank Technology-Subcommittee on Accreditation of AABB

Surgical Technologist-Joint Review Committee on Education for the Surgical Technologist

The Department of Allied Health Education and Accreditation has available a publication which lists the educational programs accredited by CAHEA and provides basic job descriptions and information about allied health careers and educational financial aid. For a free copy of Education for Allied Health Careers, write: Order Dept., AH-75, American Medical Association, PO Box 821, Monroe, WI 53566. For information other than what is specified above, write: Department of Allied Health Education and Accreditation, American Medical Association, 535 N. Dearborn St., Chicago, IL 60610.

COLLABORATING ORGANIZATIONS

The organizations listed below, called collaborating organizations, cooperate with CAHEA in the accreditation process. The acronyms of these organizations are displayed on the umbrella on this pamphiet.

American Academy of Family Physicians (AAFP)

American Academy of Neurology (AAN)

American Academy of Pediatrics (AAP)

American Academy of Physical Medicine and Rehabilitation (AAPMR)

American Academy of Physician Assistants (AAPA)

American Association for Respiratory Therapy (AART)

American Association for Thoracic Surgery (AATS)

American Association of Blood Banks (AABB)

American Association of Certified Allied Health Personnel in

Ophthalmology (AACAHPO)

American Association of Medical Assistants (AAMA)

American Board of Cardiovascular Perfusion (ABCP)

American College of Cardiology (ACC)

American College of Chest Physicians (ACCP)

American College of Emergency Physicians (ACEP)

American College of Physicians (ACP) American College of Radiology (ACR)

American College Surgeons (ACS)

American Electroencephalographic Society (AES)

American Hospital Association (AHA)

American Institute of Ultrasound in Medicine (AlUM)

American Medical Association (AMA)

American Medical Electroencephalographic Association (AMEA)

American Medical Record Association (AMRA)

American Occupational Therapy Association (AOTA)

American Psychiatric Association (APA)
American Society for Medical Technology (ASMT)

American Society for Microbiology (ASM)

American Society of Anesthesiologists (ASA)

American Society of Clinical Pathologists (ASCP)

American Society of Cytology (ASC)

American Society of Eshocardingraphy (ASE)

American Society of Electroencephalographic Technologists (ASET)

American Society of Extra-Corporeal Technology (AmSECT)

American Society of Internal Medicine (ASIM)

American Society of Radiologic Technologists (ASRT)

American Thoracic Society (ATS)

Association of Physician Assistant Programs (APAP)

Association of Surgical Technologists (AST)

Joint Commission on Allied Health Personnel in Ophthalmology (JCAHPO)

National Association of Emergency Medical Technicians (NAEMT)

National Association of Physical Therapists (NAPT)

National Registry of Emergency Medical Technicians (NREMT)

National Society for Histotechnology (NSH)

Society of Diagnostic Medical Sonographers (SDMS)

Society of Nuclear Medicine (SNM)

Society of Thoracic Surgeons (STS)

United States Physical Therapy Association (USPTA)

FUNCTIONS OF ORGANIZATIONS INVOLVED IN THE CAHEA ACCREDITATION PROCESS

COLLABORATING ORGANIZATIONS AND AGENCIES develop and adopt Essentials

ALLIED HEALTH EDUCATIONAL PROGRAMS

develop programs apply for accreditation conduct self-analyses prepare self-analysis reports

REVIEW COMMITTEES
review self-analysis reports
coordinate site-visits
review site-visit reports
recommend accreditation status
to CAHEA

COMMITTEE ON ALLIED HEALTH EDUCATION AND ACCREDITATION (CAHEA) decides accreditation status notifies programs of status

For further information about CAHEA and allied health education and accreditation, contact the offices of John E. Beckley, PhD, CAHEA Secretary and Director, Department of Allied Health Education and Accreditation, American Medical Association, 535 N. Dearborn St., Chicago, IL 60610 (312)751-8272).

HBD:80-30:6/80:5M

Department of Alinot Health Education and Accreditation Arrenizan Medical Association 538 North Dealdon Street Criticago, Illinois 66610

PAIR



Mr. L. M. Detmer, Secretary Joint Review Committee on Educational Programs for Physician's Assistants American Medical Association 535 North Dearborn Street Chicago, Illinois 60610

Dear Mr. Detmer:

We have reviewed your recent site visit report concerning our Physician's Associate Program. This letter is to inform the JRC that clinical assignments and outrotations for PA's will be reviewed and changes made as necessary to assure compliance with the Essentials. This will be a time-consuming task and we will keep the JRC informed of the progress.

With best wishes,

Thomas T. Thompson, M. D. Associate Dean, Allied Health Education and Administration

CC: Dr. E. Harvey Estes Dr. Michael Hamilton



AMERICAN MEDICAL ASSOCIATION

535 NORTH DEARBORN STREET • CHICAGO, ILLINOIS 60610 • PHONE (312) 751-6000 • TWX 910-221-0300

DIVISION OF EDUCATIONAL STANDARDS AND EVALUATION

RICHARD L. EGAN, M.D. Director

DEPARTMENT OF ALLIED HEALTH EDUCATION AND ACCREDITATION (312) 751-6272 JOHN E. BECKLEY, Ph.D. Director

December 18, 1980

Michael A. Hamilton, MD Director Physician's Associate Program Duke University Medical Center Box 2914 Durham, North Carolina 27710

Dear Dr. Hamilton

It is a pleasure to express appreciation to you, your colleagues, students and graduates for the courtesies shown to Dr. Cherry, Mr. Dicker, Ms. Major and Dr. Oliver during the on-site evaluation of the Duke University Physician's Associate Program on November 18-19, 1980.

As was most likely mentioned during the evaluation, the application for continuing accreditation of the program will be considered by the Joint Review Committee on Educational Programs for Physician's Assistants during its coming meeting on February 12-13, 1981. The Committee on Allied Health Education and Accreditation (CAHEA) will act upon the recommendations resulting from this meeting on April 9. You will receive a formal written notice of the action taken shortly after the latter meeting.

As a part of the accreditation process, the program is invited to respond to the following summary of the on-site evaluators' report which includes an identification of the principal strengths of the program and concerns regarding the character of its compliance with the Essentials.

The evaluators identified six major strengths in the program. First, the commitment and enthusiasm for the program evidenced within the staff and faculty. Second, the well organized and personalized student selection process. Third, the fiscal planning for continued institutional support of the program. Fourth, the commitment devoted to the integration and evaluation of didactic instruction with feedback to individual faculty members. Fifth, the broad range of available clinical experiences which allow opportunities for students to pursue individual needs and interests. And sixth, the regard which program staff has for students, as mature responsible adult learners.

Michael A. Hamilton, MD Page Two December 18, 1980

There were five concerns cited by the evaluators regarding the character of the program's relative compliance with the Essentials. These concerns are not presented in a ranked order of significance. First, the potential for individual students to spend excessive amounts of time in non-primary care sub-specialty areas (Essentials VIII, C, 2). Second, there is not enough time devoted to family practice medicine during the clinical year (Essentials VIII, C, 3). Third, there is insufficient exposure to the private practice setting (Essentials VIII, C, 1). Fourth, there is insufficient evaluation of cognitive knowledge and patient management skills during the clinical year (Essentials VII, C, 1). And fifth, the program should assume more responsibility for identifying and developing primary care preceptors and Sites a responsibility now largely left to the individual student (Essentials V, D 2).

The objective in sharing the above summary of the evaluators' assessment of the program with you is to determine the degree to which these observations reflect fairly upon the present status of the Physician's Associate Program of Duke University. Should the Program care to respond, it is necessary that the response be received in three copies in this office no later than Thursday, January 8, 1981.

Should there be any questions regarding this summary, please let me know promptly (312/751-6280).

Cordially

(Mr.) L. M. Detmer, Secretary

Joint Review Committee on Educational Programs for Physician's Assistants

LMD:cc

Enclosre (Essentials)

cc: R. B. Chevalier, MD, Chairman JRC

T. Thompson, MD, Associate Dean for Allied Health Education and Administration

H. Estes, MD (Evaluators 4)