Commission on Accreditation of Allied Health Education Programs

2019 CAAHEP Annual Meeting

April 14-15, 2019

The Menger Hotel  ★ San Antonio, Texas
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2019 CAAHEP Annual Meeting
San Antonio, Texas

Sunday, April 14, 2019

12:00 – 1:15 PM  **Welcome Luncheon** (Ballroom A)
Introductions and Preliminary Nominating & Elections Committee Report

1:30 - 2:15 PM  **Keynote Address** (Ballroom B&C)
Hugh Bonner, PhD, FASAHP, Dean Emeritus, SUNY Upstate Medical University

2:15 – 3:15 PM  **“CAAHEP through the years…”**
A panel of past presidents: Larry Leverenz, PhD, ATC; M. LaCheeta McPherson, PhD, MLS; and Sondra Flemming, MSN, RN. Facilitated by Fred Lenhoff, MA

3:15 – 3:30 PM  Break

3:30 – 4:45 PM  **Concurrent Sessions:**
1) Q & A with CoAs from the Following Professions:
   Diagnostic Medical Sonography *(Minuet Room)*
   EMS-Paramedic *(Cavalier Room)*
   Medical Assisting *(Ballroom A)*
   Surgical Technology *(Patio)*
2) **Behind the Curtain at CAAHEP and Review of Strategic Plan** *(Ballroom B&C)*

4:45 – 5:30 PM  **Commission Business Meeting**

6:00 PM  **Welcome Reception** *(Patio & Minuet Room)*
Monday, April 15, 2019

8:00 – 8:45 AM  Breakfast (Ballroom A)

9:00 – 9:45 AM  Simulation and Innovation (Ballroom B&C)

Accreditors talk about supporting innovation but few of them accept simulation in lieu of clinical experiences. A panel discussion led by Stacey Ocander, EdD, Dean, Metropolitan College with Joseph Vibert, Executive Director of ASPA, and George Hatch, Jr., EdD, LP, EMT-P, Executive Director, CoAEMSP

9:45 – 10:30 AM  Health Professions Accreditors Collaborative: Providing Guidance on Quality Interprofessional Education

Peter Vlasses, PharmD, DSc (Hon.), FCCP, Executive Director, Accreditation Council for Pharmacy Education

10:30 – 10:45 AM  Break

10:45 – 11:30 AM  Washington Update

Elise Scanlon, JD, Elise Scanlon Law Group, Washington, DC

11:30 AM – 12:45 PM  Awards Luncheon (Minuet Room)

Presentation of the William W. Goding Exceptional Service Award and recognition of outgoing Board members

12:45 – 1:15 PM  Medical Education Training Campus (METC) Presentation

Deputy Commandant, METC, Fort Sam Houston, Joint Base San Antonio

1:30 – 3:45 PM  Tours of METC (advance registration is necessary)

1:30 – 3:00 PM  How Do We Determine Which Certifications are Legitimate? (Ballroom B&C)

Panel Discussion with William Teutsch, CAE, FASAHP, Chief Executive Officer, Association of Surgical Technologist; Donald Balasa, JD, MBA, Chief Executive Officer, American Association of Medical Assistants; Robin Seabrook, Executive Director, National Commission on Orthotic and Prosthetic Education

3:00 PM  Adjourn
2019 Annual Meeting Speakers

Keynote Speaker: Hugh Bonner, PhD, FASAHP
Dean Emeritus, SUNY Upstate

Dr. Bonner is Dean Emeritus, SUNY Upstate Medical University, College of Health Professions, retiring in 2015, after 20 years at SUNY. Prior to joining SUNY, he served as associate dean for the School of Allied Health at Texas Tech University Health Sciences Center and program director in health affairs for the Texas Higher Education Coordinating Board. He earned a doctorate from the University of California at Berkeley, a master’s degree from California State University, and a bachelor’s degree from the University of Minnesota.

Dr. Bonner has a long history with CAAHEP. He served as Commissioner representing the Association of Allied Health Professions from 2006-2017. He was elected to the CAAHEP Board in 2006 and served as Vice President from 2009-2011. He became President in 2012. He served as Board Liaison to the Accreditation Review Committee for Anesthesiologist Assistant (ARC-AA) from 2012-2018. During his tenure, he was instrumental in designing CAAHEP’s Generalist Site Visitor Training program and has served as a site visitor for several Committees on Accreditation. He is currently serving as a public member of CoAEMSP. In 2018, Dr. Bonner was the recipient of CAAHEP’s highest honor, the William W. Goding Award for Exceptional Service.

CAAHEP Through the Years...Past Presidents’ Panel

Sondra Flemming, MSN, RN - Ms. Flemming was a Commissioner to CAAHEP representing the National Network of Health Career Programs in Two-Year Colleges. She was appointed to the Nominating and Elections Committee in 1995. She served on the CAAHEP Board of Directors for two terms and was President from 2002-2005. She served as liaison to the Cytotechnology CoA and the LEAARC Board. She was the recipient of the 2009 CAAHEP Award for Exceptional Service.

Larry J. Leverenz, PhD, ATC - Dr. Leverenz served as a CAAHEP Commissioner representing the National Athletic Trainers’ Association from 1994-2003. He was elected to the CAAHEP Board in 1997, was then as Vice President of the Board in 1998, and served as President from 1999 to 2002. His Board term ended in 2003. He received the CAAHEP Award for Exceptional Service in 2006.
M. LaCheeta McPherson, PhD, MLS - Dr. McPherson served on the CAAHEP Commission as a representative of National Network of Health Career Programs in Two-Year Colleges. She served two terms on the Board and was elected Vice President in 2007 and was President from 2009-2011. She continues to serve on the CAAHEP Standards Committee, as Liaison to NCOPE and ARC-MI. She is also a site visitor for several CoAs. She received the CAAHEP Award for Exceptional Service in 2013.

Moderator: Fred Lenhoff, MA – Mr. Lenhoff is a current Public Member on the CAAHEP Board of Directors. He is the Director of the Academic Physicians Section for the American Medical Association in Chicago.

Simulation and Innovation Panel Discussion

Stacey Ocander, EdD – CAAHEP Board member Dr. Ocander is Dean of the Metropolitan College in Omaha, Nebraska. She is a Commissioner representing the National Network of Two-Year Programs, and was elected to the CAAHEP Board in 2018.

Joseph Vibert – Mr. Vibert is the Executive Director of Association of Specialized Professional Accreditors, a position he has held since 2011. Prior to this, he served as Chief Executive Officer of the Canadian Alliance of Physiotherapy Regulators (The Alliance) in Toronto, Canada, and as the Director of the Physical Therapy Assistant Program at Keiser University in Fort Lauderdale, Florida.

George Hatch, PhD – Dr. Hatch has been the Executive Director of the Committee on Accreditation in Education of EMS Professions since 2007. During his tenure, CoAEMSP has grown to be the largest CoA within CAAHEP. He has over 40 years of experience as an EMS provider and professional educator.
Health Professions Accreditors Collaborative: Providing Guidance on Quality Interprofessional Education

Peter Vlasses, PharmD, DSc (Hon.), FCCP – There have been calls over several decades from the Institute of Medicine (IOM) and others for expansion of interprofessional education to prepare graduates for interprofessional collaborative practice as a means to drive higher quality and more cost-effective care. Over 10 years ago, LCME (medicine), CCNE (nursing), and In 2013, after the formation and publication of the Interprofessional Education Collaborative (IPEC), Dr. Vlasses led discussions about expanding to include other IPEC-related accreditors, (i.e., CODA [dentistry], CEPH [public health] and COCA [osteopathic medicine]). HPAC was officially founded December 2014 to formally address these interprofessional collaborative meetings, and in 2016, outreach to other health profession accreditors expanded membership and collaboration.

Dr. Vlasses, who has announced his retirement effective this summer, will have served as the executive director of ACPE for 20 years and been a leader in the profession of pharmacy for almost 45 years.

During his tenure at ACPE, he oversaw the accreditation of the professional degree program in pharmacy amid transition, evolution, and unprecedented growth; strengthened continuing professional education and development for pharmacists and pharmacy technicians; championed interprofessional collaboration in education and accreditation across the continuum of education and practice; led the establishment of the ACPE International Services Program and supported its extensive reach to improve the quality of pharmacy education and training throughout the world; and worked to collaboratively expand pharmacy technician education accreditation.

Prior to his leadership of ACPE, Dr. Vlasses was well established and respected in academic circles serving in leadership positions within the Philadelphia College of Pharmacy and Science and the University of Illinois at Chicago, College of Pharmacy. He practiced clinically within the Ohio State University Hospitals and was engaged in clinical research for over a decade with the University Health-System Consortium Clinical Practice Advancement Center. Dr. Vlasses is a founding board member and fellow of the American College of Clinical Pharmacy and was elected to the board of directors of the Association of Specialized and Professional Accreditors and has served as chair and then treasurer of the board.

Dr. Vlasses received his BS and PharmD degrees from the Philadelphia College of Pharmacy and Science (PCPS) and completed a residency at Thomas Jefferson University Hospital in Philadelphia. He has authored hundreds of professional publications, case reports, and editorials.
Washington Update

Elise Scanlon, JD - Elise Scanlon Law Group is a Washington, D.C. based law and consulting firm that offers more than 30 years of experience in accreditation and higher education policy and regulation. Ms. Scanlon has more than 20 years of experience in higher education accreditation having served as Executive Director of the Accrediting Commission of Career Schools and Colleges (ACCSC) from 1999-2008. As ACCSC’s Executive Director, Elise managed an accreditation process that included more than 700 higher education institutions. During her time at ACCSC, Elise was a national voice on issues pertaining to accreditation and for-profit institutions of higher education.

How Do We Determine Which Certifications are Legitimate?

William Teutsch, CAE, FASAHP – Mr. Teutsch is the Chief Executive Officer of the Association of Surgical Technologists. He was the first President of CAAHEP and served on its Board of Directors during CAAHEP’s founding years.

Donald Balasa, JD, MBA – Mr. Balasa is the Executive Director of the American Association of Medical Assistants. He was elected to the CAAHEP Board of Directors in 2018. He has been a Commissioner for the National Commission for Certifying Agencies and served as the Chair of the Task Force on Administrative Standards of the NCCA for the revision of the NCCA Standards for the Accreditation of Certification Programs. He has also authored a white paper for the Institute for Credentialing Excellence and presented at numerous associations, health organizations, and professional societies.

Robin Seabrook - Robin Seabrook is the Executive Director of the National Commission on Orthotic and Prosthetic Education. One of the longest Committees on Accreditation under the CAAHEP umbrella, NCOPE has four professions for which it manages accreditation services.
The 2019 annual election for CAAHEP is for the following elected positions:

Four 3-year positions on the Board of Directors

The Nominating and Elections Committee received a total of five nominations in response to the Call for Nominations which set a deadline of March 1, 2019. Nominations also will be accepted from the floor during the Annual Meeting in San Antonio. In considering candidates for floor nominees, be advised that the eligibility criteria for candidates to these positions, as specified in the CAAHEP Bylaws are:

A. Must be a Commissioner or a Commissioner-Designate.
B. Must continue as a Commissioner during the term of office to which elected; the sponsoring organization must verify the candidate will continue as their Commissioner for the full term of office (3 years).
C. Commissioner can only hold one office at a time.
D. The Board of Directors has a limit of two consecutive terms for which a Commissioner can serve.

NOMINATIONS FROM THE FLOOR AT THE CAAHEP MEETING:

Additional nominations will be accepted from the floor during the opening luncheon on Sunday, April 14, 2019. Such nominees must be able to present the full documentation necessary to the Chair of the Nominating and Elections Committee no later than 1:00 pm on Sunday, April 14, 2019.

INTRODUCTION OF NOMINEES AT THE CAAHEP MEETING:

The Nominating and Elections Committee will formally present the preliminary slate of nominees to the Commission at the Luncheon on Sunday, April 14, 2019. Nominees will be asked to stand for visual identification.

ELECTION PROCESS AT THE CAAHEP MEETING:

The election of Commissioners to positions on the Board of Directors is scheduled during the Business Meeting on Sunday, April 14, 2019. Ballots will be distributed to and collected from Commissioners in attendance during the 15-minute period.
The Bylaws require a 50% + 1 majority for election to the Board. If runoff elections are required to meet this provision, ballots for the runoff will be distributed to the Commissioners at the end of the business meeting and collected from the Commissioners during the afternoon break.

**NOMINATIONS RECEIVED**

**TWO POSITIONS OPEN FOR SPONSORING ORGANIZATION**

**ONE POSITIONS OPEN FOR COMMITTEE ON ACCREDITATION**

**ONE POSITION OPEN FOR “AT LARGE” EDUCATOR**

**ONE POSITION OPEN FOR REPRESENTATIVE FROM NN2**

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<th>ORGANIZATION</th>
<th>CATEGORY</th>
<th>CURRENT INCUMBENT?</th>
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<tr>
<td>Catherine A. Carter</td>
<td>American Board for Certification in Orthotics, Prosthetics and Pedorthics</td>
<td>Sponsoring Organization</td>
<td>No</td>
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<tr>
<td>Kathryn “Katie” Kuntz</td>
<td>Society of Diagnostic Medical Sonography</td>
<td>Sponsoring Organization</td>
<td>Yes</td>
</tr>
<tr>
<td>Glen Mayhew</td>
<td>Jefferson College of Health Sciences</td>
<td>“At Large” Educator</td>
<td>Yes</td>
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<tr>
<td>Don Martin</td>
<td>National Network of Health Career Programs in Two-Year Colleges</td>
<td>NN2/Two-year Deans</td>
<td>No</td>
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***No nomination was received by March 1st for the Committee on Accreditation position.***
NOMINEE FOR SPONSORING ORGANIZATION REPRESENTATIVE
(TWO SEATS OPEN/TWO NOMINEES)

Nominee: Catherine A. Carter, M.A.
CAAHEP Commissioner for: American Board for Certification in Orthotics, Prosthetics and Pedorthics
Current Position Title: Executive Director

Personal Statement:
As the landscape of higher education programmatic and institutional accreditation changes with increased federal scrutiny, CAAHEP is poised to be both a leader and an innovator. The recently completed strategic plan (2015-2018) laid a foundation to enhance both CAAHEP’s internal capacity/specific operational issues and strengthened the organization’s strategic focus and external programs. I would like to help ensure that the next strategic plan and action steps effectively carry us into the next set of challenges for CAAHEP and programmatic accreditation.

Describe current or recent activity in CAAHEP or programmatic accreditation.
I have been the Commissioner for a Sponsoring Organization for over 10 years. As such I have been responsible for facilitating the review, discussion and approval process for standards proposed by our Committee on Accreditation. I have attended each annual meeting and have presented twice. The organization I work for is the certification body for the profession and our eligibility criteria requires CAAHEP accreditation. Therefore, I am very familiar with the educational standards each of them are required to adhere to, and the process they undergo to attain and keep accreditation.

List other relevant experience (list no more than five).
1. University Admissions (undergraduate admissions)
3. Member, Institute of Credentialing Excellence
4. International Society of Prosthetics and Orthotics Category 1 Accreditation (NCOPE and ABC, participated in review, site visit and reporting)
5. Patient Care Accreditation Standards (program of our organization, development and review of standards and on-site inspections of facilities)

Nominee: Kathryn “Katie” Kuntz, BS, MEd, RDMS, RVT, RT-R
CAAHEP Commissioner for: Society of Diagnostic Medical Sonography
Current Position Title: Retired from Program Director and Assistant Professor of Radiology, Mayo Clinic (1975-2008) and Past Assistant Clinical Professor, University of Wisconsin-Milwaukee (2009-2018)

Personal Statement:
My interest and perceptions of CAAHEP began in the mid 1990’s as a program director seeking to meet the established quality Standards. I immediately realized the importance and value of not only achieving and maintaining accreditation for my program but also encouraging other programs to seek CAAHP recognition. I became a site visitor and eventually joined the Board of Directors for the Committee of Accreditation for Sonography, the JRCDMS, serving two terms as Chair. My avid interest in my profession and allied health education and accreditation was sustained as I served on numerous committees and task
forces for the Society of Diagnostic Medical Sonographers and 12 years on the SDMS Board of Directors, including serving as President. The unique structure of CAAHEP allows for the collaboration of professional organizations (through their Commissioners) the Committees on Accreditation, and CAAHEP. I have been fortunate to participate in leadership roles for all three groups which allows me to see opportunities to strengthen the connections that can foster and promote quality education standards. An aspirational goal, if elected, will be to increase these opportunities and connections.

Describe current or recent activity in CAAHEP or programmatic accreditation.
I currently serve as the Vice President of CAAHEP. In addition to the responsibilities of serving on the CAAHEP Board of Directors, I also serve as a member of the Standards Committee and chair the Recommendations and Review (RRC) Committee. As a member of the Board, I serve as the liaison to the LEAARC (Lactation Education Accreditation Review Committee) Committee on Accreditation. As Commissioner to the Society of Diagnostic Medical Sonography, I collaborate with the leadership regarding any programmatic accreditation and other educational activities.

List other relevant experience (list no more than five).
Site Visitor (JRCDMS)
Former Chair, JRCDMS
Former President and Accreditation Consultant (SEAC) Sonography Education and Accreditation, Inc.

NOMINEE FOR COMMITTEE ON ACCREDITATION REPRESENTATIVE
(ONE SEAT OPEN/NO NOMINEE)

NOMINEE FOR “AT LARGE” EDUCATOR REPRESENTATIVE
(ONE SEAT OPEN/ONE CANDIDATE)
Nominee: Glen Mayhew, DHSc, NRP
CAAHEP Commissioner for: Hospital Based Programs
Current Position Title: Dean of Institutional Effectiveness, Jefferson College of Health Sciences, Roanoke, Virginia

Personal Statement:
Accreditation, reporting, and strategic planning are truly part of everyday work-life, as Dean for Institutional Effectiveness. My job functions allow me to engage regularly with our institutional accreditor and our various programmatic accreditors including CAAHEP. During my tenure as a faculty, program director and department chair, I viewed accreditation from different lenses. With the current view, I have to be cognizant of the policies and procedures of various accrediting bodies including CAAHEP and how it impacts our institution, programs, faculty, students and other constituencies. Having a background as a faculty, program director, and administrator for accreditation oversight has provided me with a greater prospective on the value of accreditation to the education process, licensure/certification, and career pathways of our students.
Serving on various CAAHEP committees and workgroups, along with engaging in collegial discussion with the various CoA’s and colleagues has provided a well-rounded vision of the tireless work that goes on across multiple layers to ensure effective processes and outcomes are in place for the graduates of tomorrow. Additionally, serving as a Team Captain for CoAEMSP and as a generalist site visitor for CoA-SBBT has allowed me to see the commitment to professionalism and strengthening our individual professions that our volunteer site visitor provide and the conduit they provide to the individual programs.

I value teamwork, collaboration, and a healthy dialogue as we forge ahead to meet the demands we are faced with as an organization. I believe in standing on our strengths and embracing opportunities to continue our evolution. It would be an honor to continue to serve on the Board of Directors.

**Describe current or recent activity in CAAHEP or programmatic accreditation.**
I have afforded to represent hospital-based programs and my profession by serving in the following capacities:
- CAAHEP Board of Directors (2017 – 19); CAAHEP Board of Directors Secretary (2018 – 19)
- CAAHEP Chair, Performance Oversight Committee (2018 – 19); CAAHEP Member, Performance Oversight Committee (2017 – 19)
- CAAHEP Governance Committee (2018 – 19); CAAHEP Budget Workgroup (2019)
- CAAHEP Policy and Procedures Workgroup (2019); CAAHEP Planning Committee (2018)
- CAAHEP Chair, New Graduate Commissioner Committee (2017); CoA-SBBT Liaison, and Generalist Site Visitor (2017 – 19); Hospital Based Programs Commissioner (2015 – 19); CoAEMSP Site Visitor Team Captain (2014 – 19)

**List other relevant experience (list no more than five).**
- Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), Institutional Effectiveness Site Visitor Trained
- Current position roles and responsibilities include planning, assessment, strategic planning, programmatic and institutional accreditation, and state and federal reporting.

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**Nominee:** Don Martin, MEd

**CAAHEP Commissioner for:** National Network of Health Career Programs in Two-Year Colleges

**Current Position Title:** Dean of Health Occupations, El Centro College

**Personal Statement:**
CAAHEP is the foremost accreditation body of allied health education programs in the U.S. This belief is supported by the fact that many professional organizations require an individual to be a graduate of a CAAHEP accredited program in order to sit for a credentialing exam. Programmatic accreditation is a vital component in the process of assuring that the education provided through a program meets the standards of a successful education program to help assure both student success and good patient care upon graduation. My goal as a member of the CAAHEP Board would be to maintain CAAHEP’s preeminence as an accreditor and to help with the continuous improvement of the accreditation standards and processes that help insure the effectiveness of our educational and healthcare systems.
Describe current or recent activity in CAAHEP or programmatic accreditation.
I have served as a CAAHEP Site Visitor for the Accreditation Review Committee on Surgical Technology and Surgical Assisting (ARC/STSA). I am also the responsible administrator for 11 programs in 6 allied health disciplines which are CAAHEP accredited. In the past year I have led 5 programs through the reaccreditation process and have begun the process for another (Diagnostic Medical Sonography). During that period, we also successfully navigated the reaccreditation process for the JRCERT (Radiologic Science) and CoARC (Respiratory Care).

List other relevant experience (list no more than five).
2. Chair of the Health Science Program of Study Advisory Committee for the Texas Higher Education Coordinating Board
3. Board of Directors (Secretary) of NN2
4. Dean of Health Occupations for 11 allied health disciplines
5. Served as Program Director for startup program in Surgical Technology – secured initial and 10-year accreditation for that program

CURRENT CAAHEP BOARD OF DIRECTORS 2017-2018

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<tr>
<td>SPONSORING ORGANIZATIONS</td>
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<tr>
<td>Amber Donnelly</td>
<td>American Society for Clinical Pathology</td>
<td>1st</td>
<td>2019</td>
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<tr>
<td>Kate Feinstein</td>
<td>American College of Radiology</td>
<td>2nd</td>
<td>2020</td>
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<td>Donald A. Balasa</td>
<td>American Association of Medical Assistants</td>
<td>1st</td>
<td>2021</td>
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<td>Kathryn (Katie) Kuntz</td>
<td>Society for Diagnostic Medical Sonography</td>
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<td>Gregory Ferenchak</td>
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<td>Stacey Ocander</td>
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<td>Barry S. Eckert</td>
<td>Association of Schools of Allied Health Professions</td>
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<td>Gregory Frazer</td>
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<tr>
<td>Catherine (Cathie) Rienzo</td>
<td>Joint Review Committee- Diagnostic Medical Sonography</td>
<td>1st</td>
<td>2021</td>
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<tr>
<td>Elizabeth (Betsy) Slagle</td>
<td>Accreditation Review Council on Education in Surgical Technology and Surgical Assisting</td>
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<td>Jennifer (Jenny) Spegal</td>
<td>Medical Assisting Education Review Board</td>
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<tr>
<td>Douglas K. York</td>
<td>Committee on Accreditation – EMS Professions</td>
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**PUBLIC MEMBERS**

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<th>Current Term Ends</th>
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<tr>
<td>Glenda Carter</td>
<td>1st</td>
<td>2021</td>
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<tr>
<td>Fred Lenhoff</td>
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**AT-LARGE EDUCATOR**

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<tr>
<td>Glen Mayhew</td>
<td>1st</td>
<td>2019</td>
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**RECENT GRADUATE**

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<tr>
<td>Melissa McKnight</td>
<td>1st</td>
<td>2020</td>
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Thank you to the Annual Meeting Planning Committee:

*Betsey Slagle, MS, RN, CST, Chair*
*Jennifer Spegal, CMA (AAMA), MT, Med*
*Stacey Ocander, EDD*
*Melissa McKnight, RDcs*
Call to Order – Gregory Ferenchak, President

Review and Approval of Minutes from 2018

Treasurer’s Report – Barry Eckert, Treasurer

Final Report of Nominating and Elections Committee – David Becker, Chair
Distribution of Ballots (if needed)

President’s Report – Gregory Ferenchak

Executive Director’s Report – Kathleen Megivern

New Business:
  Application for new Committee on Accreditation – the Joint Review Committee on Education in Respiratory Care (JRCRC)
  Request for membership as a Sponsoring Organization – National Association for Associate Degree Respiratory Care (NA2RC)

  Proposed Vision and Mission Statements – Greg Ferenchak

  Proposed Bylaws Amendments – Donald Balasa, Chair, Bylaws Committee

Open Forum

Announcement of Election Results

Adjourn
Call to Order: President Carolyn O’Daniel called the meeting to order at 11:04 A.M. at the Hyatt Regency Louisville, in Louisville, Kentucky. A quorum of Commissioners was present.

2017 Annual Meeting Minutes: President O’Daniel called for a motion to approve the minutes from the 2017 Annual Meeting.

Motion to approve the April 24, 2017 Annual Business Meeting minutes as distributed.

Moved and seconded; motion carried.

Report of Nominating and Elections Committee: Committee Chair Lois Simmons reported that no new nominations had come forward from the floor. She indicated one change, which was that Susan Muller had withdrawn her name from the ballot of CoA representatives running for the Board. Ballots were distributed to the Commissioners and collected when votes were cast.

Treasurer’s Report: Treasurer Gregory Ferenchak presented the Treasurer’s Report and responded to questions. President O’Daniel called for a motion to accept the report.

Motion to approve the Treasurer’s Report as presented.

Moved and seconded; motion carried.

President’s Report: President O’Daniel noted that she continually updates the Commission on activities in her bimonthly updates in Communiqué and shared her most recent actions, meeting attendance, and Board accomplishments. She noted the completion of the 2015-2018 Strategic Plan and the Board’s activities in preparing for the development of the 2018-2020 plan. She thanked the attendees for allowing her to serve as President for the past year, noting that this was her last Annual Meeting as she is in her final term on the CAAHEP Board.

Executive Director’s Report: Kathleen Megivern shared updates to CAAHEP’s progress reports to CHEA. She indicated that CHEA is pressing for even more transparency in how CAAHEP reports its accreditation actions and on how programs report outcomes. Presently, CAAHEP reports on the citations of those
programs being placed on probation, and CHEA is requiring that all CAAHEP accreditation actions include citations, whether or not the program achieves initial or continuing accreditation. In addition, CHEA is requiring that CAAHEP provide additional information on the programs receiving accreditation but have no citations. These CHEA-required changes will require CAAHEP to re-write policies and change our Standards template. She also noted the growth that CAAHEP is experiencing with the addition of new professions, Committees on Accreditation, and sponsoring organizations up for a vote at this meeting. In addition, she thanked the CAAHEP staff for their work and support.

**Nominating and Elections Committee Update:** Due to a tie vote for the second Committee on Accreditation representative on the CAAHEP Board, Lois Simmons, Chair, asked for a re-vote between candidates Stephen Sonstein and Catherine Rienzo. Ballots were distributed and collected.

**New Business:** President O’Daniel reviewed each of the following profession, Committee on Accreditation, and sponsorship request and asked for a motion on each:

| Motion to accept Orthoptics as a profession in CAAHEP. |
| Moved and seconded; approved. |
| Motion to accept the application for a new Committee on Accreditation of Orthoptic Fellowship Programs (CoA-OFP). |
| Moved and seconded; approved. |
| Motion to accept the request of American Orthoptic Council for membership as a Sponsoring Organization. |
| Moved and seconded; approved. |
| Motion to accept Rehabilitation/Disabilities Studies (undergraduate) as a profession in CAAHEP. |
| Moved and seconded; approved. |
| Motion to accept the application for a new Committee on Rehabilitation Accreditation (CORA). |
| Moved and seconded; approved. |
| Motion to accept the request from the National Rehabilitation Counseling Association for membership as a Sponsoring Organization. |
| Moved and seconded; approved. |
Motion to accept the application for a new Committee on Accreditation for Clinical Postgraduate PAs (CoA-CPPA).
Moved and seconded; approved.

Motion to accept the request from Association of Postgraduate Physician Assistant Programs for membership as a Sponsoring Organization.
Moved and seconded; approved.

Motion to accept the request from the American Medical Technologists for membership as a Sponsoring Organization.
Moved and seconded; approved.

Motion to accept the request from the National Healthcareer Association for membership as a Sponsoring Organization.
Moved and seconded; approved.

Open Forum: President O’Daniel introduced the Open Forum, where Commissioners can discuss topics of their interest. One question regarding CAAHEP’s new Annual Reporting Tool was posed, which Kathleen Megivern addressed.

Election Results: Lois Simmons gave the election results following a final count of all votes. The following Commissioners were elected to the CAAHEP Board of Directors for the 2018-2021 term:

- Donald Balasa
- Barry Eckert
- Stacey Ocander
- Catherine Rienzo
- Jennifer Spegal

Adjournment: The meeting adjourned at 12:10 PM
# Profit & Loss

**Commission on Accreditation of Allied Health Educ Progs**

**July 1, 2018 through March 12, 2019**

<table>
<thead>
<tr>
<th>Income</th>
<th>Jul 1, '18 - Mar 12, 19</th>
<th>Budget 2018-19</th>
</tr>
</thead>
<tbody>
<tr>
<td>4100 · Educational Institution Fees</td>
<td>745,302 $</td>
<td>742,500 $</td>
</tr>
<tr>
<td>4105 · Sponsoring and COA Fees</td>
<td>239,700 $</td>
<td>243,000 $</td>
</tr>
<tr>
<td>4200 · Dividends and Interest Income</td>
<td>19,628 $</td>
<td>28,000 $</td>
</tr>
<tr>
<td>4500 · Annual Meeting Revenue</td>
<td>12,380 $</td>
<td>37,000 $</td>
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<tr>
<td>4300 · Realized Gain/Loss Investments</td>
<td>1,078</td>
<td></td>
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<tr>
<td>4999 · Miscellaneous Income</td>
<td>10,984 $</td>
<td>1,000 $</td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
<td><strong>1,029,072 $</strong></td>
<td><strong>105,151,500 $</strong></td>
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</table>

<table>
<thead>
<tr>
<th>Expense</th>
<th>Jul 1, '18 - Mar 12, 19</th>
<th>Budget 2018-19</th>
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</thead>
<tbody>
<tr>
<td>6196 · Rent</td>
<td>6,200 $</td>
<td>7,620 $</td>
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<tr>
<td>9800 · Annual Meeting Expense</td>
<td>5,679 $</td>
<td>65,000 $</td>
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<tr>
<td><strong>Total 8100 · Dues/Subscriptions/Publications</strong></td>
<td>12,190 $</td>
<td>15,950 $</td>
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<tr>
<td><strong>Total 5000 · Furniture/Equip/Supplies</strong></td>
<td>5,259 $</td>
<td>6,300 $</td>
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<tr>
<td>6245 · Miscellaneous</td>
<td>4,789 $</td>
<td>2,278 $</td>
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<tr>
<td><strong>Total 6000 · Personnel &amp; Professional Serv</strong></td>
<td>507,565 $</td>
<td>718,602 $</td>
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<tr>
<td>6195 · Insurance</td>
<td>5,690 $</td>
<td>6,450 $</td>
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<tr>
<td><strong>Total 8000 · Telephone/Internet</strong></td>
<td>6,547 $</td>
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<tr>
<td>Postage/Printing</td>
<td>$</td>
<td>1,800 $</td>
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<tr>
<td><strong>Travel /Lodging/Meals</strong></td>
<td><strong>209,453 $</strong></td>
<td><strong>213,000 $</strong></td>
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<tr>
<td>ASPA Scholarships</td>
<td>6,286 $</td>
<td>8,000 $</td>
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<tr>
<td>January Meeting</td>
<td>87,433 $</td>
<td>84,000 $</td>
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<tr>
<td>July Meeting</td>
<td>84,636 $</td>
<td>84,000 $</td>
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<tr>
<td>Liaison Travel</td>
<td>19,838 $</td>
<td>20,000 $</td>
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<tr>
<td><strong>Other (CHEA,ASPA, FSAE,ETC.)</strong></td>
<td>11,260 $</td>
<td>17,000 $</td>
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<tr>
<td><strong>Total 6355 · Travel /Lodging/Meals</strong></td>
<td><strong>209,453 $</strong></td>
<td><strong>213,000 $</strong></td>
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<tr>
<td><strong>Total Expense</strong></td>
<td><strong>763,858 $</strong></td>
<td><strong>1,051,500 $</strong></td>
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**Net Ordinary Income**

265,214
### Commission on Accreditation of Allied Health Educ Progs

**STATEMENT OF FINANCIAL POSITION**

As of March 12, 2019

<table>
<thead>
<tr>
<th>Mar 12, 19</th>
</tr>
</thead>
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#### ASSETS

**Current Assets**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checking/Savings</td>
<td></td>
</tr>
<tr>
<td>1000 · Petty Cash</td>
<td>100.00</td>
</tr>
<tr>
<td>1100 · Regions Bank Checking</td>
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<tr>
<td>1115 · Regions Business Money Market</td>
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<td><strong>Total Checking/Savings</strong></td>
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<table>
<thead>
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<tbody>
<tr>
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<tr>
<td>1150 · Accounts Receivable</td>
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<tr>
<td><strong>Total Accounts Receivable</strong></td>
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**Other Current Assets**

<table>
<thead>
<tr>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>1204 · RJ Cash and Cash Alternatives</td>
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<tr>
<td>1160 · Prepaid Expenses</td>
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<tr>
<td>1165 · Security Deposits</td>
<td>600.00</td>
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<tr>
<td><strong>Total Other Current Assets</strong></td>
<td><strong>1,481,496.04</strong></td>
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</table>

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td><strong>Total Current Assets</strong></td>
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**Fixed Assets**

<table>
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<tr>
<td>1200 · Computer Equip &amp; Software</td>
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<tr>
<td>1220 · Office Furniture and Equipment</td>
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<tr>
<td>1230 · Accumulated Depreciation</td>
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<td><strong>Total Fixed Assets</strong></td>
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**TOTAL ASSETS**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td><strong>2,156,069.33</strong></td>
</tr>
</tbody>
</table>

#### LIABILITIES & EQUITY

**Liabilities**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Liabilities</td>
<td></td>
</tr>
<tr>
<td>Accounts Payable</td>
<td></td>
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<tr>
<td>2000 · 0600-Accounts Payable</td>
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</tr>
<tr>
<td><strong>Total Accounts Payable</strong></td>
<td><strong>5,349.90</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Credit Cards</td>
<td></td>
</tr>
<tr>
<td>2120 · CAAHEP Credit Card</td>
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</tr>
<tr>
<td><strong>Total Credit Cards</strong></td>
<td><strong>431.37</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Current Liabilities</td>
<td></td>
</tr>
<tr>
<td>2210 · Accrued Expense</td>
<td>1,743.59</td>
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<tr>
<td>2100 · Payroll Liabilities</td>
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<td>2115 · Other-Current Liabilities</td>
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<tr>
<td>2730 · Deferred Institutional Fee</td>
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</tr>
<tr>
<td><strong>Total Other Current Liabilities</strong></td>
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</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Current Liabilities</strong></td>
<td><strong>20,469.39</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>20,469.39</strong></td>
</tr>
</tbody>
</table>

**Equity**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>3000 · Opening Bal Equity</td>
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<tr>
<td>3200 · Unrestricted Net Assets</td>
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<tr>
<td>Net Income</td>
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<tr>
<td><strong>Total Equity</strong></td>
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</tr>
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</table>

**TOTAL LIABILITIES & EQUITY**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL LIABILITIES &amp; EQUITY</strong></td>
<td><strong>2,156,069.33</strong></td>
</tr>
</tbody>
</table>
Joint Review Committee
On Education in Respiratory Care ~ JRCRC

Request for Approval

CAAHEP Committee on Accreditation

Submitted February 14, 2019
**Joint Review Committee**
On Education in Respiratory Care ~ JRCRC

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<td>4</td>
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<td>JRCRC Mission Statement</td>
<td>5</td>
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<td>JRCRC Founding Board</td>
<td>6</td>
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<td>JRCRC Draft Fee Schedule</td>
<td>7</td>
</tr>
<tr>
<td>JRCRC Draft Policy and Procedure Manual</td>
<td>9</td>
</tr>
</tbody>
</table>
February 12, 2019

Gregory Farenchak, EdD, RT(R)(QM)
President
CAAHEP
25400 US Highway 19 North, Ste. 158
Clearwater, FL 33763

Dear Dr. Farenchak:

The Joint Review Committee on Education Respiratory Care (JRCRC) is requesting approval as a CAAHEP committee on accreditation.

As you are likely aware, the Commission on Accreditation for Respiratory Care (CoARC), the sole agency offering programmatic accreditation to educational programs designed to provide education for the profession of respiratory care, changed the educational award requirement in its Standards such that as of January 1, 2018 all new applicants for accreditation must award a baccalaureate or graduate degree. While associate degree programs currently holding accreditation through CoARC may remain accredited so long as they comply with the CoARC Standards and Policies, no new associate degree programs will be accepted as candidates for accreditation. CoARC statistics (2017) revealed 457 educational programs in respiratory care (2017 Report on Accreditation in Respiratory Care Education, Commission on Accreditation for Respiratory Care, Bedford, TX). The overwhelming majority of accredited respiratory care programs awarded an associate degree (84%, or 370).

JRCRC has been established to not only allow the current 370 respiratory care programs to maintain programmatic accreditation, but also to allow new associate degree programs to develop and apply for programmatic accreditation. While the proposed Standards and Guidelines for Accreditation of Educational Programs in Respiratory Care require the associate degree as the minimum educational award, there is no exclusion for programs offering either the baccalaureate or master's degree.

Thank you for considering our request for approval as a new CAAHEP committee on accreditation.

Sincerely,

Carolyn O’Daniel, EdD, RRT
Chair, JRCRC
February 7, 2019

Commission on Accreditation of Allied Health Education Programs  
25400 US Highway 19 North  
Suite 158  
Clearwater, FL 33763

Dear CAAHEP Commissioners:

The National Association for Associate Degree Respiratory Care (NA2RC), a professional membership organization consisting of nearly a thousand respiratory therapy student, faculty, practitioner and manager members, is hereby requesting to become a CAAHEP sponsoring organization for the newly incorporated Joint Review Committee on Respiratory Care (JRCRC).

The NA2RC is committed to academic and professional excellence in order to meet the needs of patients who require respiratory care services. Respiratory therapists provide care for patients across the lifespan, from newborns to the elderly. Indeed, NA2RC supports respiratory care education across the academic award levels. However, absent valid and reliable research to demonstrate that graduates of an associate degree educational program are not prepared to enter the workforce as competent entry-level practitioners (e.g., inability to secure jobs as entry level respiratory therapists, failing to complete the certification and registry credentialing examinations offered by the National Board for Respiratory Care, failing to obtain state licenses to practice), NA2RC advocates for associate degree programs to remain the minimum educational award required for entry into practice.

The proposed Standards and Guidelines for the Accreditation of Educational Programs in Respiratory Care, which are currently being developed by JRCRC, will allow accreditation of respiratory care educational programs that award associate, baccalaureate, and graduate degrees. The current accrediting agency for respiratory care, the Commission on Accreditation for Respiratory Care (CoARC) changed the educational award requirement in its Standards such that as of January 1, 2018 all new applicants for accreditation must award a baccalaureate or graduate degree. Associate degree programs currently holding accreditation from CoARC may remain accredited so long as they comply with the CoARC Standards and Policies.

While NA2RC advocates for associate degree educational programs in respiratory care, it is dedicated to lifelong learning by encouraging the development of clinical career ladders and continuing education, including advanced degrees for the incumbent workforce.

Thank you for considering NA2RC as a sponsor for the newly formed JRCRC.

Sincerely,

Peggy Spears Davis, MS, RRT  
President, NA2RC  
Peggy77777777@aol.com  
502-599-3928 cell
Mission Statement

The mission of the JRCR includes (1) being a Committee on Accreditation (CoA) member of the Commission on Accreditation of Allied Health Education Programs (CAAHEP) to provide accreditation services to educational programs in the profession of respiratory care, and (2) educating the public, sponsoring organizations, governmental agencies, healthcare professions, and others about recognition, review, and accreditation of educational programs in the profession of respiratory care.
Joint Review Committee
On Education in Respiratory Care ~ JRCRC

Founding Board

Chair
Carolyn O’Daniel, EdD, RRT
4613 Southern Parkway
Louisville, KY 40214
(502) 526-2286
codaniel@earthlink.net

Vice-Chair
Jackie L. Long-Goding, PhD, RRT, FAARC
1449 Hill Street
Whitinsville, MA 01588
978-590-5307
jlonggoding@comcast.net

Secretary
Maria Galati, MBA, RRT
Icahn School of Medicine @ Mt. Sinai
Gustave Levy Pl Box 1010
Anesthesia Department
New York City, BY 10029
212-241-7473
Maria.galati@mountsinai.org

Treasurer
Tommy Rust, MEd, RRT, FAARC
751 Cockrell Road
Red Oak, TX 75154
214-641-8328
trust@flash.net

Member-at-Large
Peggy Spears-Davis, MS, RRT
8336 South Lewis Ave., Apt. 514
Tulsa, OK 74137
502-599-3928
Peggy7777777@aol.com

Public Member
LaCheeta McPherson, PhD, MT
1513 Stoneham Pl.
Richardson, TX 75-91
214-783-3884
McPherson.lacheeta@gmail.com
# DRAFT FEE SCHEDULE

## Domestic Program Accreditation Fees

### Initial Accreditation
- Program Application Fee: $1,500
- Self-Study Fee: $1,200
- Site Visit Administrative Fee: $500
- Site Visit: Actual cost
- Annual Accreditation Fee**: $1,800

### Continuing Accreditation
- Annual Accreditation Fee: $1,800
- Self-Study Fee: $1,200
- Site Visit Administrative Fee: $500
- Site Visit: Actual cost

### Satellite Locations
- Satellite Application Fee: $500
- Satellite Self-Study Fee: $500
- Site Visit Administrative Fee: $500
- Site Visit: Actual cost

## International Program Accreditation Fees

### Initial Accreditation
- Program Application Fee: $4,200
- Self-Study Fee: $1,200
- Site Visit: Actual cost
- Annual Accreditation Fee**: $1,800

### Continuing Accreditation
- Annual Accreditation Fee: $1,800
- Self-Study Fee: $1,200
- Site Visit Administrative Fee: $500
- Site Visit: Actual cost
**Satellite Locations**

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satellite Application Fee</td>
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</tr>
<tr>
<td>Satellite Self-Study Fee</td>
<td>$ 7,500</td>
</tr>
<tr>
<td>Site Visit Administrative Fee</td>
<td>$ 500</td>
</tr>
<tr>
<td>Site Visit</td>
<td>Actual cost</td>
</tr>
</tbody>
</table>

**Site Visit**

*The actual cost of site visits includes airfare, hotel, ground transportation, meals and incidental expenses. For budgeting purposes, JRCRC recommends that domestic programs budget approximately $2500 for site visit expenses; international programs should contact the JRCRC Executive Office to discuss projected expenses.**

"The annual fee is invoiced after Initial Accreditation has been granted."
Joint Review Committee for Respiratory Care

Policy and Procedures

DRAFT – February 7, 2019

A Committee on Accreditation of the Commission on Accreditation of Allied Health Education Programs
I. AUTHORIZATION
Structure, Organization, and Policy and Procedure Development. The Joint Review Committee for Respiratory Care (JRCRC) functions as a Committee on Accreditation (CoA) within the Commission on Accreditation of Allied Health Education Programs (CAAHEP) system and adheres to the CAAHEP policies and procedures. The JRCRC will assure its policies and procedures are consistent with the CAAHEP policies and procedures, and may be developed and/or modified by the Board of Directors.

II. FUNCTIONS
A. Program Review. The primary function of the Joint Review Committee for Respiratory Care is to assess the merits of applicant educational programs for accreditation by CAAHEP in accordance with the Standards and Guidelines for Respiratory Care.

B. Educational Outcomes Assessment. The Joint Review Committee for Respiratory Care is also responsible for evaluating and recommending means by which its collaborating sponsoring organizations may favorably influence the quality and availability of education for Respiratory Care as a service to the public and professions.

C. Review CAAHEP Standards and Guidelines of Accreditation. The Joint Review Committee for Respiratory Care conducts periodic reviews of the CAAHEP Standards and Guidelines and revises them as necessary.

III. ETHICAL STANDARDS
A. Conflict of Interest. Committee members of the CoA will sign annually a “Conflict of Interest” form provided by the Executive Director in preparation for the Annual Meeting. Information so provided will be for the purpose of determining existence of any conflicts of interest relevant to CoA deliberations and actions in the upcoming calendar year. Any change in affiliations during the interim will be reported by submission of an updated disclosure form.

B. Conflict of Interest Policy for JRCRC Volunteers, Employees and Contractors

Conflict of interest refers to any situation in which a volunteer, employee or contractor of JRCRC stands to gain materially from his or her association with JRCRC. A conflict of interest also exists when any member of the JRCRC or other volunteer (or immediate family) is directly associated with or stands to realize financial or similar tangible personal or proprietary gain as a result of any action of the JRCRC. Similarly, members of the JRCRC are not to enter into employment relationships with persons or activities that are either directly or indirectly detrimental to the JRCRC.

The situations listed below constitute examples of potential conflicts of interest. These are intended to be illustrative and not necessarily inclusive of all possible scenarios. When a member of the JRCRC has violated this conflict of interest policy, he or she will be subject to disciplinary action.

1. Accepting gifts, entertainment or favors from an outside concern that is seeking to do business with JRCRC. (This does not include normal business luncheons.)

2. Having a financial interest in an outside concern from which the JRCRC purchases goods or services.
3. Accepting personal compensation for Board-related speaking engagements, consulting services, or other activities.

4. Representing the JRCRC in any transaction in which the member of the JRCRC (or immediate family) has a substantial interest.

5. Members of the JRCRC and volunteers associated with the JRCRC (e.g., site visitors, self-study reviewers) are prohibited from reviewing a program within their own state, within 50 miles of their employer.

6. Members of the JRCRC and volunteers associated with the JRCRC (e.g., site visitors, self-study reviewers) are prohibited from reviewing a program if there is any employment relationship between the individual and the sponsoring institution, or if there is an employment relationship between an immediate family member and the sponsoring institution. Members of the JRCTC and volunteers associated with the JRCRC are prohibited from reviewing a program if he or she has interviewed for a position at the sponsoring institution within the past three years.

7. Members of the JRCRC and volunteers associated with the JRCRC (e.g., site visitors, self-study reviewers) are prohibited from reviewing a program if the individual or a member of the individual’s immediate family (defined as spouse, life partner, child, parent, or sibling) graduated from the sponsoring institution.

All members of the JRCRC are prohibited from participating in any discussion regarding his/her program while the program is engaged in the accreditation process (e.g., recommendation for a site visit, review of the site visit report, review of annual and progress reports; during the consideration of an official student complaint).

If any voting member of the JRCRC has a conflict of interest in any matter brought before the body for a vote, that member shall declare such conflict before any discussion of the matter. Further, any other voting members may share their concern regarding a potential conflict of interest of other voting members prior to the beginning of any discussion of the matter in question.

When considering accreditation recommendations at face-to-face meetings of the JRCRC, members shall absent themselves from the room for any discussion and/or vote on programs located within their own state or within 50 miles of their employer. When considering accreditation actions during conference call meeting of the JRCRC members shall refrain from participating in the discussion or vote on programs located within their own state or within 50 miles of their employer. During any meetings of the JRCRC, individual members are not permitted to be present when their own program is being discussed.

Each member of the JRCRC and other volunteers (e.g., site visitors, self-study reviewers) will annually sign a Conflict of Interest and Disclosure Statement.

C. Confidentiality Policy. JRCRC members will hold in confidence all matters and information pertaining to CoA, unless disclosure is authorized by the board. All members will sign a “Confidentiality Statement,” which will be held in their file.

All information made available to reviewers will be considered confidential. Disclosure of any information obtained during the accreditation process will be a breach of confidence. Committee members are also privy to a number of opinions that will also be considered as confidential. In any other role a committee member may assume outside the CoA, the
member will refrain from discussing any aspect of an institution, or individuals involved in
the accreditation process.

D. Standards of Ethical Conduct. All members and representatives of the JRCRC, including
officers, members, site visitors, and staff, will adhere to ethical standards of conduct.

E. Compensation. The JRCRC recognizes the appropriateness of reimbursement for
reasonable expenses incurred by JRCRC volunteers in the course of their activities on
behalf of JRCRC. However, the CoA does not permit honoraria to be paid for any
accreditation services rendered.

F. Site Visitor Consultation Policy. Consultation by non-board member site visitors - either
paid or unpaid - is not specifically prohibited by the JRCRC. The practice of consulting is
at the sole discretion of the individual doing the consultation and is considered outside of
the CoA/CAAHEP accreditation process. Site visitors cannot visit as JRCRC
representatives any program for which they have consulted Consultation with programs
that he or she has visited as a site visitor is also prohibited. Site visitors may not use their
role as a CoA/CAAHEP site visitor to promote themselves for financial gain.

IV. MEMBERSHIP

A. Committee Membership.

The Board of Directors shall consist of a minimum of six (6) and a maximum of eighteen
(18) members from the sponsoring organization(s). Each sponsoring organization will
nominate at least two representatives for each representative vacancy that occurs either
as a result of the standing term expiring, or resignation or removal of an incumbent
representative. The Board of Directors will elect one individual to serve from among
those nominated.

The term of service shall be for three (3) year. Directors may be elected for two additional
terms of three years, for a maximum of nine (9) consecutive years of service. In the
event a Director is elected to a leadership position (e.g. Chair, Vice-Chair), the term of
service shall not end prior to the end of that leadership term. The JRCRC Board may
appoint a public member to serve on the Board.

B. Additional Sponsoring Organizations.

Additional organizations may be accepted as sponsors of the CoA. Organizations
petitioning for sponsorship must meet the following criteria:

1. demonstrate a significant relationship to the profession and the education of
practitioners;
2. be national in scope;
3. accept the current CAAHEP Standards and Guidelines; and
4. agree to participate in the entire review process, including site visits.

Organizations seeking to sponsor the JRCRC must submit a request to the JRCRC
Office. The request will be added to the next JRCRC Board meeting that is a minimum of
30 days from receipt of the request.
The JRCRC will review and discuss the request. After the JRCRC Board has reviewed and has approved the request, the request will be sent to all of the current sponsor organizations for endorsement.

Upon written endorsement by the sponsor organizations, the CoA will convey the recommendation for a new sponsor organization member to CAAHEP for a vote by the full Commission. The new sponsor organization will become a sponsor effective with the next CAAHEP annual meeting.

A time limit will be invoked for endorsement by the sponsor organizations, provided each sponsor organization has at least 60 days, and no more than 120 days, to take action. The JRCRC may extend the time limit for sponsor organization action that is longer than 120 days, provided it is the same period for all sponsor organizations.

V. OFFICERS

JRCRC shall have the following officers: Chair, Vice-Chair, Secretary, and Treasurer. No officer need be a resident of Texas.

A. Chair. The Chair is elected by the Board of Directors. He/she will preside at all meetings of the JRCRC and administer all policies, procedures and functions of the JRCRC. He/she serves as the Chair of the Executive Committee and serves as an ex officio member of all standing and ad hoc committees. The Chair (a) supervises the Executive Director; (b) appoints members and chairs of the standing and ad hoc committees; (c) identifies the need for new committees and appoints the members of the new committee(s), and shall report the creation of new committees to the Board of Directors at the next meeting.

B. Vice-Chair. The Vice-Chair serves in the absence of the Chair or when the Chair is unable to perform the duties of the position. The Chair assumes the position of Chair in the event the Chair vacates the position for any reason.

C. Secretary. The Secretary shall keep accurate minutes and records of the JRCRC meetings and distribute the minutes to the Board.

D. Treasurer. The Treasurer serves as the chief financial officer for the JRCRC and has the general responsibility for the financial affairs and supervision of all JRCRC funds and official records. The Treasurer shall insure that an annual budget is prepared and distributed to the Board of Trustees for approval not later than the last meeting of each fiscal year.

E. Elections and Terms of Officers. Elections of officers of the Corporation shall be held at the annual meeting of the Board of Directors on odd years or at a special meeting to fill a vacancy. Officers shall serve two (2) year terms and are eligible for re-election.

VI. MEETINGS

A. Meetings of Directors. Directors of the Corporation may hold meetings, both regular and special either inside or outside of the State of Texas. Regular meetings of the Board of Directors may be held at such time and place as shall be determined by the Directors.
B. Annual Meeting. The annual meeting of the Board of Directors shall be held at such date and time as shall be designated by the Board of Directors.

C. Quorum. A simple majority of the Board of Directors shall constitute a quorum.

D. Participation in Meeting by Electronic Technology. Members of the Board of Directors may participate in and act at any meeting of the JRCRC through the use of conference call or other communication methods by which all persons participating in the meeting can synchronously communicate with each other. Such participation shall constitute attendance and presence at the meeting.

E. Meeting Schedule. The meeting schedule will be determined by the Chair and/or Executive Director with consent of the Board.

VII. CAAHEP COMMISSIONER

A. Appointment and Sponsorship. The Chair will serve as, or appoint, a JRCRC Board member to serve as the CAAHEP Commissioner. The Commissioner will be sponsored by the JRCRC to attend CAAHEP annual meetings and will provide the JRCRC with a report of CAAHEP proceedings at the next CoA meeting.

VIII. ACCREDITATION REVIEW

A. Core Elements of the Accreditation Process

1. Program Initiates Accreditation Process through the JRCRC

   Upon receipt of the Request for Accreditation Services Form (located on the CAAHEP website), via e-mail, the JRCRC provides instructions for the program’s next steps.

   Note: If Continuing Accreditation, JRCRC will notify the program in writing providing the self-study submission date.

2. Submission of Self-Study Report

3. Review of Self-Study by JRCRC to verify all elements are included.

4. Site Visit - An on-site visit is required to be part of the evaluation process to determine compliance with the CAAHEP Standards. Site visitors represent both the JRCRC and CAAHEP.

   a. A narrative report of findings from the site visit will be provided to each program following a site visit. The Site Visit Report, in addition to stating the areas not meeting the CAAHEP Standards, will also include a listing of the program strengths and deficiencies or areas of non-compliance. Programs will be given an opportunity to respond to the report of findings.

   b. The program’s response to the report of findings will be taken into consideration when determining an accreditation action recommendation.

5. JRCRC Reviews Program’s Compliance with CAAHEP Standards
a. Review the program’s response to site visit findings letter including additional materials, if submitted.

b. Request additional materials as appropriate.

6. Accreditation recommendation determined by the JRCRC.

After careful review of all documents, the JRCRC Board of Directors collectively determines a recommendation for each program. The recommendation options are located in CAAHEP policy. The JRCRC recommendation for each program will be forwarded to CAAHEP where the final accreditation decision is made.

7. The program will be notified by CAAHEP of the accreditation decision.

8. Continuous Quality Review (Annual Reports)

The JRCRC monitors programs for effective compliance with published criteria through the use of annual reports.

B. Accreditation Categories. The JRCRC will utilize only those accreditation categories currently approved by CAAHEP as delineated in the CAAHEP Policy and Procedures Manual.

C. Length of Accreditation. After a comprehensive review, accreditation is granted by CAAHEP, upon the recommendation of the CoA, to programs in substantial compliance with the Standards and Guidelines.

Initial accreditation will be for five years. Continuing accreditation may be awarded for up to 10 years before the next comprehensive evaluation will be due.

D. Expedited Pilot Review Process. During the initial period, and prior to finalization of the JRCRC Standards, the JRCRC Board may use an expedited review process for currently accredited programs seeking concurrent or alternative JRCRC/CAAHEP accreditation.

1. Following the usual application process, rather than submitting a new self-study, the “pilot” program may submit the most recent self-study upon which their current accreditation is based, along with all follow-up documentation, including annual reports.

2. The self-study will be reviewed for compliance with the JRCRC/CAAHEP standards, and a site visit will be scheduled, if indicated by the findings, but at minimum a focused visit will be conducted, prior to recommending accreditation to CAAHEP.

IX. REQUEST FOR RECONSIDERATION OF AN ADVERSE RECOMMENDATION

A. When JRCRC first formulates a recommendation of Withhold of Accreditation, Probationary Accreditation, or Withdrawal of Accreditation, the Chief Executive Officer of the sponsor will be notified in writing of that action. The sponsor will have fourteen (14) calendar days after receipt of that written notice (sent certified mail, return receipt requested) to request reconsideration of that recommendation or to request voluntary withdrawal of its accreditation or application.
B. The notification will include the specific areas where the program was found deficient (Standards cited), the rationale for those citations, and the suggested documentation by which the Program may demonstrate its compliance with the Standards.

C. If the Program does not request reconsideration by the deadline, the original JRCRC recommendation is forwarded to CAAHEP with the correspondence documenting that the Program was notified of its rights and that due process was followed.

D. If the Program requests reconsideration, it is notified of a deadline to submit additional (new) material for consideration by the JRCRC.

E. The JRCRC will place reconsideration of the original recommendation on its next agenda following the Program’s deadline for submission of materials.

F. The JRCRC Board will review the reconsideration action based on all the materials at the time of the original recommendation as well as all new materials submitted by the Program.

1. The JRCRC then formulates a recommendation to CAAHEP for:
   a. Initial Accreditation or Withhold Accreditation for new programs, or
   b. Continuing Accreditation, Probationary Accreditation, or Withdrawal of Accreditation for currently accredited programs, including the Standards cited, the rationale for each citation, and the suggested documentation to correct each citation.

2. If the JRCRC formulates a recommendation that could change the CAAHEP accreditation status of the program, the recommendation is forwarded to CAAHEP along with the correspondence documenting that the Program was notified of its rights and that due process was followed.

3. If the JRCRC formulates a recommendation that would not change the CAAHEP accreditation status, but includes citations, the recommendation is not forwarded to CAAHEP and a Progress Report is requested of the Program.

X. SITE VISITORS

A. Composition of Site Visit Team. A site visit team consists of at least two visitors, one of whom must be an educator in an accredited respiratory care program, and another who maybe an educator in an accredited program, or an experienced generalist site visitor.

No visitor will have any real or potential conflict of interest that may affect the evaluation. If the site visitor, program, or the CoA has reason to believe that a conflict of interest exists, the visitor will be excused and another member selected. All site visitors are required to sign a confidentiality statement.

Trainees and/or observers may accompany the on-site evaluation team.

A single site visitor is acceptable only in unusual and extenuating circumstances and only with the approval of the JRCRC Chair, the sponsor institution and the program administration.
B. Site Visitor Selection and Appointment. Site visitor applicants will be qualified by education and experience.

1. All Site Visitors
   a. Successful completion of the CAAHEP Site Visitor Quiz.
   b. If with a CAAHEP-accredited program, the program must be in good standing.

C. Site Visitor Expectations. The general competencies expected of site visitors include:

1. An in-depth knowledge of:
   a. The full scope of the program’s resources, operations and components as described in the Self-Study Report prepared by the institution under evaluation.
   b. The most current CAAHEP Standards and Guidelines.
   c. The existing procedures for accreditation, including the mechanism for reconsideration.
   d. The role of resource assessment and outcome evaluation in programs.

2. A general knowledge of:
   a. The principles of institutional organization/administrations including:
      1) Institutional accreditation processes
      2) Fiscal policy and planning
      3) Various organizational/authority structures
   b. Curriculum design and instructional methods, including non-traditional approaches.
   c. Psychometric theory and application including:
      1) Cognitive testing and evaluation
      2) Performance evaluation
   d. Contemporary standard of [profession] care, including current procedures and equipment, and the expected role of practitioners.
   e. Current learning resources related to patient care, and medicine.
   f. Sensitivity to the potential for personal or professional bias.

D. Withdrawal of Site Visitor Appointment. Individuals may be deleted from the roster of active site visitors if they: voluntary resign, are inactive for a period of three or more years, or fail to correct any deficiencies revealed on the evaluative process.

E. Responsibilities of the Site Visit Team. The primary responsibilities of the site visit team include:

1. Before the Site Visit
   a. Confirm participation.
      Selected team members should promptly notify the JRCRC of their willingness to participate in a scheduled site visit. Any real or potential conflict of interest should be considered and ruled out. Site visitors will decline any assignment in which a real conflict of interest may be perceived.
   b. Review Self-Study Report
      Team members will review the contents of the Self-Study Report in relation to the CAAHEP Standards. When necessary, the team captain should communicate with the program for any clarification of submitted materials.
c. Communicate with Team
Following review of the written report and the supplementary documentation, team members will communicate with each other to develop strategies for data collection and evaluation, outline specific areas of scrutiny, and identify concerns.

d. Finalize Site Visit Agenda
A mutually satisfactory agenda will be arranged in consultation with the Program Director of the program being visited. The JRCRC and team captain will be contacted if a change in the length of the visit is deemed appropriate. The program personnel may be asked to assist in arranging for appropriate accommodations and ground transportation. When possible, travel arrangements of the team members will be coordinated. Late arrival to or early departure from the sponsor institution reduces the efficiency of the site visit and can adversely affect the site visit team's ability to evaluate the educational program completely and objectively.

2. During the Site Visit

a. Preliminary Team Meeting
Arrangements should be made for the site visitors to meet prior to the formal agenda. At this meeting the team should compare notes and decide how they will conduct the various interviews and discuss any other concerns.

b. Orientation
All program personnel and representatives of the administration will be clearly informed about the purposes, function, and mechanics of the on-site evaluation and its relationship to the accreditation processes of JRCRC and CAAHEP.

c. Collect & Interpret Data
The team members will collect, verify, and interpret all information likely to demonstrate how the program meets the Standards by:

1) Interviewing all key program personnel, support staff, students, graduates, and representation of advisory committees.
2) Reviewing and analyzing relevant documentation and reports, particularly resource assessment materials
3) Inspecting pertinent facilities and resources.

d. Documentation
Team members will carefully document all findings on the on-site review report form. Evidence will be provided to substantiate all Standards 'not met'. For all Standards cited as 'not met' reference will be made to the number/letter designation of the applicable Standards(s).

e. Site Visit Report
An on-site review report should be developed in a collaborative manner prior to the exit summation conference. It will be reviewed for accuracy prior to its submission. Errors identified will be corrected. Consistency between the observation and impressions of the site team and their documentation is essential. The site visit report will complement and validate, not duplicate, the Self-Study Report submitted by the program.

The team's report will address specifically any concerns. The report will be
concise but will provide evidence, from objective sources, of the program’s quality relative to the Standards.

In addition, the report will be free from personal philosophical iterations and from convoluted terminology. The report will be candid and analytical and give an accurate picture of the strengths and weaknesses of the program.

For problem areas, there will be description of the specific suggestions made in writing by the site visitors to help the program address the situation.

f. Consultation Conference with the Program Director

After completion of the Site Visit Report, team members will arrange to meet the Program Director to confirm the data and discuss the site visit team’s conclusions and recommendations. It is important to determine whether any of the conclusions have been based on faulty interpretations or incomplete information. This is an ideal time for the team to function as consultants, providing ideas and suggestions to help the program personnel address identified shortcomings.

g. Exit Summation Conference

The site visit team members will provide program personnel and administration officials with an objective oral review of the findings of the team. Those present during the summation conference will be documented. Team members will try to evaluate the degree of concurrence expressed by those present regarding the team’s observations and determine the likelihood of correcting those Standards cited as ‘not met’. The team should reiterate their function and review the sequence of events for the accreditation process including the program’s right to verify the facts in the report, the ability of the program to inform the JRCRC of improvements made prior to the close of the agenda, and the reconsideration mechanism.

The team will not indicate the JRCRC’s accreditation recommendation and will not leave a copy of the Site Visit Report with the program.

3. After the Site Visit

a. Submit Site Visit Report to the JRCRC Office

The Site Visit Report must be submitted to the JRCRC within two (2) weeks of the completion of the on-site evaluation.

b. Send Findings Letter

The program will receive a formal written report from the JRCRC within four (4) weeks of the site visit. At this time, the program will be given the opportunity to respond to any inaccuracies of fact and to comment on the site visit team’s interpretation of information gathered on site.

F. Professionalism. All individuals associated with JRCRC, including committee members, site visitors, consultants and other representatives, will maintain the highest standard of professionalism and integrity and will conduct themselves in a manner that fosters respect for the integrity, expertise and reliability of all.

G. Confidentiality. The JRCRC requires that its procedures and the actions of its site visitors are consistent with the need to maintain confidentiality during the review process in
accordance with JRCRC and CAAHEP policies. All information made available to site visitors for and during their evaluation will be considered confidential. Disclosure of any information obtained during the accreditation process will be a breach of confidence. Team members are also privy to a number of opinions expressed by individuals during interviews; these too will be confidential. Site visitors will refrain from discussion of any aspect of a sponsor institution, even positively, with anyone other than representatives of the sponsor institution, or individuals involved in the accreditation process.

H. Site Visit Evaluation. Peer evaluation of team members will be completed after each site visit. Additionally, the program director and the senior officer of the sponsor institution who participated in the on-site evaluation are each given the opportunity to evaluate the site visitors both as a team and as individuals.

Post site visit questionnaires will be reviewed on an annual basis. Staff will mail a report regarding performance, to all site visitors who participated in a site visit during the previous year. Any site visitors receiving an unfavorable evaluation will be reviewed by the CoA.

I. Focused Site Visits. Programs will be given 90-days’ notice prior to arrival on site. The program will be given three (3) days to confirm the assigned site visit dates. If no confirmation is received from the program, it will be assumed that assigned dates are acceptable. Random site visits are determined based on the JRCRC’s review of the annual outcome reports and a programs’ ability to meet the established thresholds. Selection may also be based on the date of the program’s last site visit or any significant changes taking place within the program.

XI. OUTCOMES BASED EVALUATION

A. Criteria. The JRCRC will use a number of criteria for outcomes measures including employer surveys, graduate surveys, student retention, positive placement and, the percentage of graduates passing the certification and registry examinations.

B. Reporting. Programs will provide information on an annual basis using the electronic format designated by the JRCRC. Failure to do so within 30 days of the determined deadline may result in a program being placed on administrative probation.

C. Established Thresholds. Here are some outcomes thresholds that programs must meet/maintain for accreditation:

1. Graduate Surveys are administered six (6) months to one (1) year post graduation and have a 50% or greater return rate.

2. Employer Surveys are administered six (6) months to one (1) year post graduation and have a 50% or greater return rate.

3. Retention of 75% or greater of total enrollment, including attrition due to academic dismissal, clinical dismissal, or student withdrawal.

4. Positive Placement of 85% or greater. Positive Placement requires the graduate to be employed as a respiratory therapist or continuing their education.

5. Certification Success of 85% or greater; Registry Success 70% or greater.
D. **Failure to Meet Established Thresholds.** Failure to meet the established thresholds will result in recommendations from the JRCRC and require an action plan be developed by the program and submitted to the JRCRC. The action plan should provide documentation regarding how the deficiencies will be corrected. Non-compliance, inability to correct deficiencies in a timely manner, or serious deviation from the threshold in any particular measure may trigger an unscheduled comprehensive review, progress report, or a change in the program’s accreditation status.

E. **Transparency of Outcomes.** All programs must publish, preferably in a readily accessible place on their websites, the outcomes measures required by the JRCRC. These include Retention, Positive placement, and certification/registry results. The Programs may publish additional outcomes, such as graduate satisfaction, employer satisfaction, and programmatic summative measures.

At all times, the published results must be consistent with and verifiable by the online Annual Report of the program.

Each year in the Comments tab of the Annual Report, the program must state the website link (or other publication) where its results are published.

**XII. COMPLAINTS REGARDING THE JRCRC AND ACCREDITED PROGRAMS**

The JRCRC follows due process procedures when written and signed complaints are received by CAAHEP or the JRCRC alleging that they or an accredited program are not following established policies or CAAHEP Standards. CAAHEP and the JRCRC maintain indefinitely a record of all complaints received.

A. To receive formal consideration, all complaints will be submitted in writing and signed (If filed via CAAHEP website, the form must have an electronic signature). The complaint will demonstrate that reasonable efforts have been made to resolve the complaint, or alternatively that such efforts would be unavailing.

B. When received by CAAHEP, complaints are transmitted within five (5) working days to the chairperson and staff of the JRCRC for consideration. When received by the chair or staff of the CoA, a copy is forwarded to the CAAHEP office within five (5) working days.

C. Following consultation among staff of the JRCRC and CAAHEP, the chairperson of the JRCRC determines whether the complaint relates to the manner in which the program complies with the Standards or follows established accreditation policies.

1. If the complaint does not relate to the Standards or to established policies, the person initiating the complaint will be notified accordingly within 20 working days following receipt of the complaint by the JRCRC. A copy of this correspondence will be shared with CAAHEP.

2. If the complaint does relate to the Standards or to established policies, the chair or representative of the JRCRC will acknowledge receipt of the complaint within 20 working days and share with the filing party a description of the process and policies which pertain to handling such complaints.
a. The Chair or representative of the JRCRC will notify the program director and the chief executive officer of the sponsoring institution of the substance of the complaint and will request a preliminary investigation and report on the findings within 30 days of the sponsoring institution's receipt of the letter of notice.

b. The Chair or representative of the JRCRC may request further information or material relative to the complaint from the complaining party, the institution, or other relevant sources.

c. The CAAHEP office should receive copies of this correspondence.

d. The identity of the complaining party will be kept confidential, unless the complainant authorizes disclosure of his/her identity, or unless such disclosure is required by legal process in a subsequent proceeding.

D. On receipt of the responses referred to above, the JRCRC will consider the complaint and all relevant information obtained in the course of investigation and formulate an appropriate action according to the following guidelines:

1. If the complaint is determined to be unsubstantiated or unrelated to the Standards or established accreditation policies, the complaining party, officials of the program in question, and the appropriate official of the sponsoring institution, will be so notified within ten days of the completion of the investigation.

2. If the investigation reveals the program may not be or may not have been in substantial compliance with the Standards or may not have been following the established accreditation policies, one of two approaches will be taken.

   a. The program must submit a report and documentation within 30 days following the investigation demonstrating the manner in which the substantiated complaint has been corrected. Should the JRCRC be satisfied with the response, the program, its sponsoring institution, and the party filing the complaint will be notified of the JRCRC’s satisfaction with the resolution of the matter and notice that the program’s accreditation status remains unaffected by the complaint.

   b. Should the JRCRC judge the program or sponsoring institution's response to the complaint inadequate and lacking in evidence of the program's continuing substantial compliance with the Standards or adherence to accreditation policies, the CoA may request and arrange for a return site visit of the program as soon as reasonably feasible, but not more than 30 days following the investigation. The purpose of the return site visit will be limited to an investigation of the complaint and the manner in which it affects compliance with the Standards or with accreditation policies. The cost of the return site visit will be borne by the JRCRC.

1.) Should the CoA, on evidence received through the return on-site evaluation, consider the program to remain in substantial compliance with the Standards and in adherence with accreditation policies, the program, its sponsoring institution, and the complaining party will be notified of this assessment and the fact that the program's current accreditation status remains unaffected by the complaint.

2.) Should the JRCRC consider the evidence of the site visit to indicate the complaint is valid and the program is not in substantial compliance with the
Standards or with accreditation policies, the JRCRC will recommend a change in accreditation status to CAAHEP.

E. Should XII.D.2.(b)(2) pertain, all information regarding the complaint, a full report of its investigation, and the CoA's recommendation will be transmitted to CAAHEP for consideration and action.

F. CAAHEP and the JRCRC emphasize that they will not intervene on behalf of individuals or act as a court of appeal for faculty members or students in matters of admission, appointment, promotion or dismissal. They will act only when they believe practices or conditions indicate the program may not be in substantial compliance with the Standards or with established accreditation policies.

XIII. FINANCES

A. Organizational JRCRC Sponsorship Fees. Although sponsorship fees are paid directly to CAAHEP, JRCRC does not charge a separate sponsorship fee. Sponsoring organizations will, however, be responsible for covering the cost of travel for one face-to-face meeting for each JRCRC Board Member nominated by and elected to the Board from their organization.

B. Program Accreditation Fees.

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XIV. RECORDS RETENTION

A. Records Retention Schedule

Contracts and leases Until expired plus 10 years

Correspondence (legal and important matters only) 10 years
Financial statements (end-of-year, other months optional) Permanently
Insurance policies Permanently
Minutes of directors and committees, including bylaws and charter Permanently
Transcripts of disciplinary hearings Permanently

Accounts payable and receivable ledgers and schedules 10 years
Audit reports of accountants Permanently
Cash books Permanently
General ledgers (and end-of-year trial balances) Permanently
Internal and external audit reports Permanently
Internal reports (miscellaneous) 3 years
Inventories of products, materials, and supplies 7 years
Invoices from vendors 7 years
Notes receivable ledgers and schedules 7 years
Payroll records and summaries 7 years
Purchase orders 3 years
Receiving sheets 3 years
Requisitions 3 years
Sales records 7 years
Subsidiary ledgers 7 years
Tax returns and documents relating to determination of income tax liability Permanently
Time books 7 years
Self-study documents (keep current only) 10 years
Program’s response to the findings letter (keep current only) 10 years
Invoices to programs 10 years
Program permanent files Permanently
Correspondence (general) 5 years
Complaints Permanently
Probationary / Withdrawal actions Permanently
Accreditation actions Permanently
Affiliate requests Affiliate Approved Affiliate spreadsheets (current only) Permanently
Findings letter Permanently
Annual Reports 10 years
Any and all documents responsive or relevant to any investigation or legal proceeding should be permanently retained.

B. **Program Retention of Student Records.**

1. **Outcome Data.** Programs are required to maintain a file of raw data for outcomes for the most current 5-year window (consistent with the most recent accreditation comprehensive review). This includes:
   
   a. Graduate Surveys
   
   b. Employer Surveys
   
   c. Placement data
   
   d. Student Retention data
   
   e. NBRC exam statistics

2. Programs are required to maintain the following documentation for all students:
   
   a. Grading Policy
   
   b. Grading Scale
   
   c. Pass Score
   
   d. Official roster of students most recently assessed cohort in each of the cognitive domain areas
   
   e. Copy of blank exam(s) and/or other required assessments covering each objective in the cognitive domain areas.
   
   f. Grade book or transcripts covering all students in the covered cohorts, documenting satisfactory completion of each objective.

Electronic record keeping is encouraged.
Proposed Changes to CAAHEP’s Vision and Mission

On February 15, 2019, a message was sent to 108 Commissioners asking for feedback on the revised Vision and Mission statements that were approved by the Board of Directors as part of the strategic planning process. We asked for a response by February 25, 2019. The Board would like to thank all of you for your responses. While dozens of Commissioners indicated their approval of the new language and two more asked for clarification, four Commissioners proposed significant changes. The following are the proposed changes and the board responses:

Comment: *Our board had a discussion on this, and believe that a mission statement should answer “why” in addition to the what and how – the revised mission answers what and how, however, To provide quality assurance in health sciences and health professions education could easily be the why instead of the what. – so would need a new what.*

Response: The Board feels that the Mission Statement, as written, is sufficient.

Comment: *I’m more certain that I do NOT like “provide quality assurance” than I am on what to replace it with. But there has to be something better. “Quality assurance” is a term of art in healthcare and manufacturing and other sectors that I don’t think is what we’re driving at. Perhaps something more like: Mission: “To promote highly effective (“instructional” or “learning”) (“processes” or “experiences” or “activities”) in health sciences and health professions education by setting standards for program accreditation and evaluating program performance.” Proposed new Vision:*

Response: While some members of the Board agree that “quality assurance” may not be the best phrase, in the absence of any consensus on a better term and, because this is a term used often by CHEA, the Board feels that the Mission Statement, as written, is sufficient, especially given the extensive amount of debate and input from the Board.

Comment: *Proposed new language: Vision: To accelerate innovation in health sciences and health professions education and accreditation.*

Response: Other Commissioners had specifically indicated that they liked the proposed terminology of “innovative leader” and one specifically disagreed with this proposed change, so the determination is that the Vision Statement, as written, is sufficient.

Comment: *The mission statement should be more outcomes oriented: “We improve the health outcomes of patients by ensuring a quality education for those entering health sciences and health professions.”*

Response: While it is true that improved health outcomes of patients is the ultimate goal, CAAHEP’s interest is in student learning outcomes through quality education.
Here is the current Mission:
“To assure quality health professions education to serve the public interest”

The Proposed new Mission:
“To provide quality assurance in health sciences and health professions education by setting standards for program accreditation and evaluating program performance.”

Here is the Current Vision:
“To be the premiere agency for programmatic accreditation services”

The Proposed new Vision:
“To be the innovative leader for the accreditation of health sciences and health professions education.”
MEMORANDUM

TO: CAAHEP Commissioners
FROM: Donald A. Balasa, JD, MBA, Chair, 2018-2019 CAAHEP Bylaws Committee
DATE: March 11, 2019
TOPIC: Proposed revision to CAAHEP Bylaws
COPIES: CAAHEP staff

The CAAHEP Bylaws state the following:

ARTICLE XII - AMENDMENTS TO BYLAWS

Section 1: Amendments to the Bylaws of CAAHEP shall be submitted in such a form as the Bylaws Committee may from time to time prescribe, and each amendment proposed by any party other than the Bylaws Committee itself shall be filed with the Bylaws Committee at least ninety days prior to the annual meeting. The Bylaws Committee shall present each proposed amendment to the Commission in substantially the form presented to the Bylaws Committee with such technical changes and amendments to the proposal as the Bylaws Committee deems necessary or desirable. The proposed amendment shall be printed and distributed to each Commissioner at least thirty days prior to the annual meeting.

Section 2: A two-thirds vote of all Commissioners present and voting at the annual meeting shall be required to adopt the proposed amendment and thereby change the Bylaws.

The Bylaws Committee moves that the attached, revised Bylaws be adopted in toto at the CAAHEP Annual Meeting, April 14 and 15, 2019, to replace the current Bylaws.

In addition to editorial corrections, the proposed revision to the Bylaws contains the following substantive or major reformatting changes:

1. For ease of reference, categories of membership and their definitions, the composition of the Board of Directors (BOD) and the bodies that elect the respective BOD members, and the composition of the Commission and the bodies that elect the respective Commission members have been removed from the body of the Bylaws and put into the Appendix;

2. As required by the General Not-for-Profit Corporation Act of Illinois (the state in which CAAHEP is incorporated), members of the BOD elected by the Commission may be removed from the BOD only by the Commission. See Article VI, Section 8.

3. Article XI, Section 1, has been rewored to clarify that a motion to dissolve CAAHEP “must be approved by a two-thirds vote of the Board of Directors,” and the BOD “must notify in writing all CAAHEP members about the BOD’s approval of the motion to dissolve.” The last sentence of the proposed Section 1 does not change the substance of the current Section 1: “Such dissolution shall become effective only if a majority of Commissioners within 90 calendar days following transmittal of the written notice to dissolve do not object in writing to the Board of Directors.”

4. The current Article XIII is as follows: “Any organization appointing members to CAAHEP, any member of CAAHEP, or any member of the Board of Directors that files a lawsuit in which CAAHEP is named as a defendant agrees and consents to the jurisdiction of the State of Illinois.” The proposed Article XIII adds “any other entity” to the list of plaintiffs that are subject to Illinois jurisdiction for any lawsuit brought against CAAHEP.

I thank and commend the members of the Bylaws Committee—LaCheeta McPherson, Doug York, and Fred Lenhoff—for their outstanding work. Feel free to email me with questions: dbalasa@aama-ntl.org
BYLAWS OF THE COMMISSION ON ACCREDITATION OF ALLIED HEALTH EDUCATION PROGRAMS

A Nonprofit Organization Incorporated in the State of Illinois

ARTICLE I - NAME

The name of this organization shall be Commission on Accreditation of Allied Health Education Programs (CAAHEP or Commission).

ARTICLE II - PURPOSES

The purposes of CAAHEP are to:

1. Promote and support the education of competent and compassionate allied health professionals who will provide the highest quality of care for their patients;
2. Promote the continued improvement of allied health education programs;
3. Inform the public of the status of the educational programs accredited by the Commission;
4. Establish standards of accreditation based on input from the professions and other communities of interest;
5. Recognize allied health education programs that meet or exceed the CAAHEP Standards of accreditation for each allied health profession;
6. Maintain the integrity and ensure the credibility of the process of accrediting allied health education programs;
7. Enhance and promote dialogue among all parties and accrediting agencies in the allied health professions regarding the issues that affect the accreditation of allied health education programs, and to take a leadership role in coordinating a collective approach to resolving problems in the allied health professions;
8. Provide, at the request of any institution maintaining an allied health education program, accreditation and related coordination services for programs seeking initial or continuing CAAHEP accreditation;
9. Compile, analyze, and disseminate information and data on allied health education and accreditation within the allied health educational system and to prospective/current students and the public;

10. Promote the study of critical issues in allied health education and accreditation and respond to the changing health care needs of society by assisting institutions that offer allied health education programs to respond creatively and appropriately to public policy initiatives;

11. Engage in charitable, educational, or other substantially related activities.

ARTICLE III - REGISTERED OFFICE AND AGENT

CAAHEP shall have and continuously maintain in the State of Illinois a registered office and an agent whose office shall be identical with such registered office. It may have such other offices within or without the State of Illinois and such other registered agents as the Board of Directors may from time to time determine.

ARTICLE IV - MEMBERSHIP

Section 1: Categories. CAAHEP shall have six categories of membership, four of which are organization- or agency-based and two of which are individual-based. The designation and qualifications of the members of each category shall be as described in the Appendix.

Section 2: Membership. Membership in CAAHEP shall be as described in the Appendix.

Section 3: Representation. The representation of the Commission shall consist of the following:

A. Each member, either individually or as part of a member group, has the right to the number of representatives ("Commissioner(s)") as set forth in the Appendix. All Commissioners are to be selected in accordance with the procedures set forth in the Appendix. Each member or member group, whichever is applicable, shall designate in writing the individual(s) to serve as its Commissioner(s). The Board of Directors shall designate in writing the Commissioner(s) selected by the Board of Directors to represent those members appointed by the Board. Commissioner(s) shall have full authority to vote on behalf of and act for the member or member group represented in all matters coming before CAAHEP.
B. For each Commissioner so designated, an Alternate may be designated in writing by the appointing body, who, in the absence of the Commissioner, shall have full authority to vote for such member or member group at any meeting of the Commission at which the relevant Commissioner would have had the right to vote if present. An Alternate may not serve in the place of the applicable Commissioner in any elected or appointed position of CAAHEP held by the Commissioner. An Alternate may only vote in the place of a Commissioner at Commission meetings.

Section 4: Voluntary Membership Termination. Any member may terminate its/his/her membership; however, organizational members shall be obligated to pay all dues, assessments, and any other indebtedness to CAAHEP for the fiscal year in which it terminates its membership. Such termination notice shall be in writing and delivered to the Executive Director.

Section 5: Membership Termination. Any organizational member may be suspended or expelled, for cause, by a two-thirds vote of the entire Commission, provided that the organizational member shall have been furnished a full statement of the charges against such member and shall have been afforded adequate opportunity for a hearing to be conducted by the Board of Directors in accord with CAAHEP policies as established by the Commission and Article X, Rules of Order. Any individual member may be dismissed for cause by a two-thirds vote of the Board of Directors.

ARTICLE V - COMMISSION

Section 1: Commission. The Commission shall be composed of Commissioners who have been duly appointed/elected by a member, member group, or the Board of Directors as set forth in Article VI, Section 3.

Section 2: Composition. The composition of the Commission shall be as described in the Appendix.

Section 3: Selection. Commissioners shall be selected as described in the Appendix.

Section 4: Powers, Duties, and Responsibilities. In addition to any powers, duties, and responsibilities of the Commission set forth elsewhere in these Bylaws, the powers, duties, and responsibilities of the Commission include the following:

A. Approval of CAAHEP's bylaws, mission, and vision statements.
B. Approval of certain members of the Commission, as described in the Appendix.

C. Determining whether an occupation is eligible to participate in the CAAHEP system.

D. Monitoring of the Board of Directors' development of accreditation standards and accreditation activities to ensure the quality and equity of CAAHEP’s accreditation practices.

E. Achievement of national recognition as an accrediting agency through appropriate national and/or international recognized agency(ies) as deemed necessary.

Section 5: Term and Tenure of Commissioners. The terms of Commissioners shall be three years. All terms of office due to expire do so at the close of CAAHEP’s fiscal year (June 30).

Section 6: Vacancies. Commission vacancies resulting from expiration of term, resignation, death, or any other reason shall be filled by the organizational member that appointed/elected the Commissioner whose departure has created a vacant Commissioner's position, or, in the case of Categories 3.C, D, E; 4; and 5 Commissioners, by the Board of Directors, in accordance with the selection procedures set forth in Article V, Section 3 and the Appendix. A Commissioner selected to fill such a vacancy shall serve for the remainder of a full term as set forth in Article V, Section 5.

Section 7: Loss of Powers, Rights, Privileges, and Benefits. A Commissioner representing either a member that has not paid its dues within 30 days of its membership renewal date or a member from a member group that has not paid its dues within 30 days of its membership renewal date shall lose all the powers, rights, privileges, and benefits of a Commissioner. A Commissioner losing the powers, rights, privileges, and benefits of a Commissioner under this Section shall be reinstated as a Commissioner upon payment of dues by the delinquent member. Upon reinstatement, the Commissioner shall serve the remainder of the term as originally appointed/elected. A loss of privileges under this Section shall not constitute a vacancy under Article V, Section 6.

Section 8: Censure, Suspension, and Expulsion A Commissioner representing an organizational member may be censured, suspended, or expelled for cause by a two-thirds vote of the Commission, provided that the member shall have been furnished a full statement of the charges against such Commissioner and shall have been afforded adequate opportunity for a hearing to be conducted by the Board of Directors in accordance with CAAHEP policies as established by the Commission and Article X, Rules of Order. Before the procedure for censure, suspension or expulsion is begun for a Commissioner representing an organizational member, the Board of Directors shall have the option of informing the organizational member of the reasons for potential censure, suspension, or expulsion of the commissioner representing the organizational member. In such a case, the organizational member shall have the option of replacing its commissioner.

Section 9: Commission Meetings. The following shall constitute Commission meetings:
A. Annual Meeting - The Annual Meeting of the Commission shall be held at such day, time, and place as the Board of Directors shall designate. The President shall preside at all meetings of the Commission.

B. Special Meetings - Special meetings of the Commission may be called by the President, a majority of the Board of Directors, or a majority of Commissioners.

Section 10: Notice of Meetings. The following meeting notices shall be observed:

<table>
<thead>
<tr>
<th>Type of meeting</th>
<th>Time requirement for advance written notice</th>
<th>Meeting purpose(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Written notice stating the place, day, hour, and purpose(s) of the annual meeting of the Commission shall be delivered at least [see below]:</td>
<td>... but not more than [see below] in advance by or at the direction of the person(s) calling the meeting to each Commissioner of record or Board of Directors member entitled to vote at such meeting.</td>
</tr>
<tr>
<td>A. Annual Meetings</td>
<td>30 days</td>
<td>60 days</td>
</tr>
</tbody>
</table>
| B. Special Meetings      | Five days                                   | 60 days                                                                          | • Removal of one or more members of the Board of Directors
• Merger, consolidation, dissolution or sale, lease or exchange of assets |
| C. Organizational/Structural Meetings | 20 days                                     | 60 days                                                                          |                                                                                                          |

Section 11: Quorum. A majority of Commissioners registered at a meeting – including at least one Commissioner representing an Educational Institution Member, one Commissioner representing a Sponsoring Organization, and one Commissioner representing a Committee on Accreditation – shall constitute a quorum.

Section 12: Voting. All actions of the Commission shall be by majority vote at a meeting of the Commission (a meeting may be held via interactive electronic means). Except as otherwise provided by the Bylaws or required by law, voting by Commissioners shall be in person or via interactive electronic
means, and each Commissioner is entitled to one vote. An Alternate may only vote in the place of a Commissioner at Commission meetings.

Section 13: Action. Any act of a majority of the Commissioners present and voting at a meeting in which a quorum is present shall be an act of the Commission, except as otherwise provided by law or these Bylaws.

Section 14: Records. CAAHEP shall keep correct and complete books and records of account and minutes of the meetings of the Commission, Board of Directors, and any other committees having any of the authority of the Commission or Board of Directors. CAAHEP shall keep at its registered or principal office a record of the names and addresses of the Commissioners and corresponding Alternates entitled to vote. All CAAHEP books and records may be inspected by any Commissioner entitled to vote or that Commissioner's agent or attorney for any purpose at any reasonable time.

Section 15: Compensation. Except as otherwise provided herein, all Commissioners shall serve without pay and shall not be reimbursed by CAAHEP for expenses of attendance at meetings of the Commission. CAAHEP may reimburse the Public Members and the Recent Graduate member for reasonable expenses incurred in attending meetings of the Commission.

ARTICLE VI - BOARD OF DIRECTORS

Section 1: Board of Directors. The Board of Directors is the accrediting body of CAAHEP that awards or denies accreditation after review of accreditation recommendations made by the Committees on Accreditation, and is the governing body that implements the mission and vision adopted by the Commission. The Board of Directors shall have sixteen (16) members, as described in the Appendix. Only current Commissioners and Commissioners-Designate shall be eligible to run for the Board of Directors.

Section 2: Selection, Status, and Representation. A candidate for the Board of Directors shall be a Commissioner or Commissioner-Designate at the time of nomination. If elected, the candidate shall continue as a Commissioner and must remain a Commissioner to continue to serve on the Board of Directors. A Commissioner, while serving on the Board of Directors, may change representation provided the composition set forth in the Appendix is maintained. [members of the Board of Directors are eligible to serve as officers, as specified in Article VI, section 14.] The members of the Board of Directors shall be duly elected by the Commission at the annual meeting. The terms of Board of Directors’ members shall begin on July 1 following the election.
Section 3: Power, Duties, and Responsibilities. In addition to any powers, duties, and responsibilities of the Board of Directors set forth elsewhere in these Bylaws, the Board of Directors shall have the power, duty, and responsibility to:

A. Approve and implement CAAHEP policy.

B. Manage CAAHEP’s property, business, fiscal planning, accounting, and affairs.

C. Select an Executive Director, who shall be the executive officer in charge of CAAHEP staff. The Board of Directors shall oversee the activities of the CAAHEP staff through the Executive Director to ensure the quality of the CAAHEP staff’s activities and that the activities are in accord with CAAHEP policy.

D. Establish criteria and develop policies and procedures for evaluating existing health professions or emerging health professions that request the accreditation services of CAAHEP and, when appropriate, recommend to the Commission that a particular profession be allowed to participate in the CAAHEP system.

E. Provide a report of its activities for the preceding year to the Commissioners at the annual meeting of the Commission.

F. Establish and implement the accreditation appeals procedure.

G. Guide and review the development, revision, and evaluation of accreditation standards and criteria as well as CAAHEP policies, procedures, and practices.

H. Approve on behalf of CAAHEP the accreditation Standards as submitted by the Committees on Accreditation.

I. Establish special committees as needed.

J. Confer, deny, withhold, or withdraw, on behalf of CAAHEP, the statuses of public recognition related to accreditation after reviewing the recommendations submitted by a Committee on Accreditation.

K. Formulate criteria for participation of Committees on Accreditation in the CAAHEP system, and make a recommendation(s) to the Commission to approve the membership of a new Committee on Accreditation(s).

L. Establish quality assurance and improvement criteria for Committees on Accreditation.

M. Formulate policy, procedures, and practices for consistent programmatic evaluation for approval or review in accordance with these Bylaws to be used by the Committees on Accreditation.

N. Maintain the confidentiality of information collected during the accreditation review process.
O. Obtain liability insurance coverage and retain legal counsel for CAAHEP, its appointed and elected committees, and all Committees on Accreditation.

P. Fulfill any other duties and responsibilities assigned by the Commission.

Section 4: Conflicts of Interest. A conflict of interest shall be deemed to exist with respect to a particular matter when any member of the Board of Directors would be involved in the consideration of any accreditation action having a direct bearing on the profession or an educational program in that discipline or any other particularized interest represented by the organizational or individual member. In that circumstance, any member having such a conflict of interest shall be recused from any and all consideration, discussion, decision, and voting upon the matter.

Section 5: When acting in the capacity as a member of the Board of Directors, each member shall have a fiduciary duty to act in the best interests of CAAHEP, regardless of that member's obligations to any other organization.

Section 6: Term and Tenure. The terms of Board of Directors' members shall be three years. Each member may be elected to serve a maximum of two consecutive terms. Terms of office shall begin on the July 1 following the election.

Section 7: Vacancies. Board of Directors' vacancies occurring between annual meetings shall be filled by the Board of Directors. The Board of Directors shall appoint a Commissioner representing the same constituency as was represented by the Commissioner whose departure created the vacant position on the Board of Directors. The Commissioner so appointed shall serve for the remainder of the predecessor's term. For purpose of re-election, the completion of an appointed term shall not constitute an elected term.

Section 8: Removal. Any member of the Board of Directors elected by the Commission may be removed for cause by a two-thirds vote of the Commission. Such removal shall not constitute termination as a Commissioner, absent a separate vote by the Commission in accordance with Article V, Section 8.

Section 9: Board of Directors' Meetings. Board of Directors' meetings shall be held at least twice a year in January and July. The Board of Directors may provide by resolution the time, day, hour, and place of any additional regular meetings. The President or any ten members of the Board of Directors then in office may call for a special meeting of the Board of Directors. Any authorized person who calls a special meeting must fix the time and place for such meeting.

Section 10: Notice of Meetings. Written notice stating the place, day, hour, purpose(s) of, and business to be transacted at any meeting of the Board of Directors shall be delivered to each member of the Board of Directors at least 15 days in advance by or at the direction of the person(s) or entity(ies) calling the meeting.
Section 11: Quorum. For purposes of transaction of business at any meeting of the Board of Directors, a quorum shall be constituted by a simple majority of the Board, two of whom shall be officers of the Board. The simple majority shall include at least one representative from the membership category representing Sponsoring Organizations, one from Committees on Accreditation, one from Educational Institution Members, and at least one representing the General Public or Recent Graduates.

Section 12: Action. Any act of a majority of the members present and voting at a meeting at which a quorum is present shall be the act of the Board of Directors except where otherwise provided by law or these Bylaws.

Section 13: Compensation. Board of Directors members shall not receive any salaries or other compensation for their CAAHEP services, but may be reimbursed for authorized expenses connected with the business of the Board of Directors if approved through the budgetary process of CAAHEP.

Section 14: Officers. The members of the Board of Directors shall elect officers from among Board of Directors’ members as follows: President; Vice President; Secretary, and Treasurer. Officer terms shall be one year in length, and officers may be reelected.

Section 15: President. The President shall preside at all meetings of the Commission and the Board of Directors. The President or the Executive Director, within the policy guidelines established by the Commission, may sign—with the Secretary, Treasurer, or any other proper individual duly authorized by the Commission—any deeds, mortgages, debts, contracts, or other instruments that the Commission has authorized to be executed and shall perform all duties incident to the office of President and such other duties as may be assigned from time to time by the Commission.

Section 16: Vice President. In the absence or inability of the President to serve, the Vice President shall exercise all the powers and discharge all the duties of the President and shall perform such other duties and have such other powers as may from time to time be assigned by the Commission.

Section 17: Secretary. The Secretary shall record and maintain written minutes of all Board of Directors’ and Commission meetings. The Secretary shall perform all duties incident to the office of Secretary.

Section 18: Treasurer. The Treasurer shall be responsible for preparing and distributing to the Commission at the annual meeting an annual budget for the upcoming year and a report on the status of CAAHEP’s funds. Reports on the finances of CAAHEP are to be made at each meeting of the Board of Directors.
ARTICLE VII - COMMITTEES

Section 1: Committees of the Board. The Board of Directors shall have four standing committees:
Governance, Performance Oversight, Planning and Development, and Recommendation Review.

A. Governance, chaired by the President and consisting of the Board officers, the chairs of the other
three Board Standing Committees, and the Executive Director, is responsible for the effective
functioning of the CAAHEP Board and for the maintenance and development of the
Board/Executive Director working relationship

B. Performance Oversight oversees CAAHEP’s operational and financial performance, its image
building, and stakeholder relations efforts. The President shall appoint Board members to serve on
this Committee.

C. Planning and Development develops and leads the Board in all CAAHEP planning and guides
financial resource development. The President shall appoint Board members to serve on this
Committee.

D. Recommendation Review assures thorough, consistent review of all accreditation
recommendations submitted by the Committees on Accreditation and works to continuously
improve the review process. The President shall appoint Board members to serve on this
Committee.

Section 2: Nominating and Elections Committee. Membership on the Nominating and Elections
Committee shall be by annual appointment by the Board of Directors.

A. The composition shall be one member each representing the Sponsoring Organization,
Committees on Accreditation, and Educational Institution membership categories. All committee
appointees must be current Commissioners or Commissioners-Designate at the time of their
appointment, and must remain Commissioners for the duration of their term on the Committee.
Committee members may be reappointed to serve a maximum of two consecutive terms; terms
begin on July 1 and run through the following June 30. The committee shall select its own
chairperson.

B. The committee shall actively solicit proposed candidates from the CAAHEP membership and, using
criteria established by CAAHEP policy and procedure, consider the qualifications of proposed
candidates.

C. Names of any of the proposed candidates and a statement of the qualifications shall be received
by the committee six weeks prior to the annual meeting.

D. The Committee shall, to the extent possible, submit two or preferably more names as needed to
complete the ballot from the following three membership categories: Sponsoring Organizations,
Committees on Accreditation, and Educational Institutions. The Commissioners shall be notified
of the report of the committee no later than the start of the Commission's annual business
meeting. Additional candidates may declare their candidacy by means prescribed in CAAHEP policy and procedure.

E. The Committee shall distribute a ballot to all eligible to vote who are present at the annual meeting.

F. The Nominating and Elections Committee shall collect and tabulate ballots. Election results shall be announced during the annual meeting by the committee chairperson.

Section 3: Audit/Finance Committee. Membership on the Audit/Finance Committee is by annual appointment by the Board of Directors. The Committee shall be responsible for development of the annual budget and the oversight of the Commission’s financial reporting process on behalf of the Board of Directors. The Committee shall approve the selection of the independent auditors; review the audited financial statements and the management letter from the independent auditors; and meet with the auditors without staff present so that any issues and/or concerns can be discussed openly without potential bias or conflict of interest or undue influence by management.

Section 4: Bylaws Committee. Membership on the Bylaws Committee is by annual appointment by the Board of Directors. Duties are in accordance with CAAHEP policy and procedures.

Section 5: Standards Committee. Membership on the Standards Committee is by annual appointment by the Board of Directors. The committee is responsible for working with the Committees on Accreditation as they review and propose revisions to Standards. Pursuant to CAAHEP policies, the committee conducts open hearings on proposed revisions to Standards and makes final recommendations for approval to the Board of Directors.

Section 6: Special Committees. In addition to special committees which may be appointed by the Board (pursuant to Article VI, Section 3.(I) the Commission may from time to time identify issues and may appoint special committees as deemed advisable, in accordance with CAAHEP policy and procedures, to study these issues and report recommendations to the Commission.

ARTICLE VIII - FINANCES

Section 1: Fiscal Year. CAAHEP’s fiscal year shall be July 1 through June 30.

Section 2: Dues. The annual dues and any assessments and initiation fees of members shall be determined from time to time by the Board of Directors and paid in accordance with the procedures established by the Board of Directors and deposited in the treasury.
Section 3: Budget. An annual operating budget covering all activities of CAAHEP shall be prepared by the Audit/Finance Committee, approved by the Board of Directors, and forwarded to the Commission for its information.

Section 4: Financial Statements. A report on CAAHEP’s finances shall be prepared and submitted by the Treasurer to the Commission at the annual meeting.

Section 5: Audit. A financial audit shall be performed by professional auditors annually, and a summary will be published and distributed annually to each Commissioner. A copy of the complete auditor’s report will be available for review by any Commissioner upon request.

Section 6: Funding. The Board of Directors and committees of CAAHEP will be funded in accordance with policy, procedures, and within the guidelines established within the budget of the organization.

ARTICLE IX - RESPONSIBILITIES OF ACTS, OMISSIONS, AND LIABILITIES

Section 1: Neither the member organizations nor any other societies or organizations that are qualified and authorized to name Commissioners shall be in any manner whatsoever responsible or liable for any act, omission, or liability of CAAHEP, its individual Commissioners, officers, committees, employees, or agents.

Section 2: CAAHEP shall indemnify and hold harmless all Board of Directors’ members, officers, agents, employees, or other persons acting on behalf of CAAHEP to the fullest extent permitted by the General Not-For-Profit Corporation Act of Illinois; and shall be entitled to purchase, if the Commission so authorizes, insurance on behalf of such persons and CAAHEP against any liability that arises from their actions in such capacities.

ARTICLE X - RULES OF ORDER

In the absence of any provisions to the contrary in the Article of Incorporation and Bylaws, all meetings of CAAHEP, the Commission, and the Board of Directors shall be governed by the parliamentary rules and usages contained in the current edition of Robert’s Rules of Order, Newly Revised (latest edition).
ARTICLE XI - DISSOLUTION

Section 1: A motion to dissolve CAAHEP must be approved by a two-thirds vote of the Board of Directors. The Board of Directors must notify in writing all CAAHEP members about the Board of Directors’ approval of the motion to dissolve. Such dissolution shall become effective only if a majority of Commissioners within 90 calendar days following transmittal of the written notice to dissolve do not object in writing to the Board of Directors.

Section 2: Upon dissolution of CAAHEP, the Board of Directors shall, after paying or making provision for the payment of all its liabilities, dispose of all its assets to such organization or organizations organized and operated exclusively for charitable, educational, and/or scientific purposes as shall at the time be an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code as the Board of Directors shall determine. Any such assets not so disposed shall be disbursed by the court of general jurisdiction of the county in which CAAHEP's principal office is then located, exclusively to such organization or organizations organized and operated exclusively for charitable, educational, and/or scientific purposes as shall at the time be an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code.

ARTICLE XII - AMENDMENTS TO BYLAWS

Section 1: Amendments to the Bylaws of CAAHEP shall be submitted in such a form as the Bylaws Committee may from time to time prescribe, and each amendment proposed by any party other than the committee itself shall be filed with the committee at least 90 days prior to the annual meeting. The committee shall present each proposed amendment to the Commission in substantially the form presented to the committee, with such technical changes and amendments to the proposal as the committee deems necessary or desirable. The proposed amendment shall be distributed in writing to each Commissioner at least 30 days prior to the annual meeting.

Section 2: A two-thirds vote of the Commissioners at the annual meeting shall be required to adopt an amendment to the Bylaws for which written notice shall have been given at least 30 days prior to the annual meeting.

Section 3: Any proposal to amend the Bylaws without prior notice may be made and acted upon by an 80 percent vote of the Commission.

ARTICLE XIII - COURT JURISDICTION
Any organization appointing members to CAAHEP, any member of CAAHEP, any member(s) of the Board of Directors, or any other entity that files a lawsuit in which CAAHEP is named as a defendant agrees and consents to the jurisdiction of the State of Illinois. Venue of any action brought against CAAHEP shall be deemed to be in Cook County, Illinois.
## Appendix: Composition of the Commission and Board of Directors

<table>
<thead>
<tr>
<th>Category of Membership</th>
<th>Membership type</th>
<th>Definition</th>
<th>Membership entry</th>
<th>Board of Directors</th>
<th>Commission</th>
<th>Elected by:</th>
<th>Number</th>
<th>Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sponsoring Organization</td>
<td>Organization</td>
<td>Establishes or supports one or more Committee(s) on Accreditation and supports the accreditation system</td>
<td>Commission approval(^4) 4 Yes</td>
<td>1 per Sponsoring Organization</td>
<td>Member group(^1)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Committee on Accreditation</td>
<td>Organization</td>
<td>Evaluates allied health education programs that have requested CAAHEP accreditation. Committees on Accreditation shall have policies, procedures and practices for standardized and equitable program evaluation that are consistent with CAAHEP policies.</td>
<td>Commission approval(^4) 4 Yes</td>
<td>1 per Committee on Accreditation</td>
<td>Member group(^1)</td>
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<td>Educational Institution</td>
<td>Organization</td>
<td>An institution that assumes responsibility for the conduct of allied health education and maintains a CAAHEP-accredited educational program</td>
<td>Upon CAAHEP accreditation of one or more educational programs</td>
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<tr>
<td>Four-year institutions</td>
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<td>Appointed by the Association of Schools of Allied Health Professions (ASAHP)</td>
<td>2 Yes</td>
<td>5 Member group(^1)</td>
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<td>Two-year institutions</td>
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<td>Appointed by the National Network of Health Career Programs in Two-Year Colleges (NN2)</td>
<td>2 Yes</td>
<td>5 Member group(^1)</td>
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<td>Hospitals and the Department of Veterans Affairs</td>
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<td>1 Yes</td>
<td>3 Board of Directors(^2)</td>
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<td>Department of Defense, proprietary institutions, and vocational/technical institutions</td>
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<td>3 Board of Directors(^2)</td>
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<td>Four-year and two-year institutions</td>
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<td>(Where neither the institution nor the representative is a member of ASAHP or NN2)</td>
<td>2 Yes</td>
<td>2 Board of Directors(^2)</td>
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<td>Public</td>
<td>Individual</td>
<td>Representative of the general public</td>
<td>2 Yes</td>
<td>2 Board of Directors(^2)</td>
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<td>Recent Graduate</td>
<td>Individual</td>
<td>Recent graduate of a CAAHEP-accredited program (within three years of the date of appointment)</td>
<td>1 Yes</td>
<td>2 Board of Directors(^2)</td>
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<td>Associate</td>
<td>Organization</td>
<td>National organization or agency that has requested of the Commission the addition of a health science discipline to the CAAHEP system and is working toward formation of a new Committee on Accreditation for that discipline</td>
<td>Commission approval(^4) 1 per association</td>
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<td>Member group(^1)</td>
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<td>AABB (formerly American Association of Blood Banks)</td>
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<td>Meredith Eller</td>
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<td>Accreditation Committee-Perfusion Education</td>
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<td>Linda Cantu</td>
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<td>Accreditation Council for Art Therapy Education</td>
<td></td>
<td>Eileen Estes</td>
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<td>Richard Bassi; Jennifer Anderson Warwick (Alternate)</td>
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<td>Elizabeth “Betsy” Slagle; Ronald Kruzel (Alternate)</td>
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<td>Alliance of Cardiovascular Professionals</td>
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<td>Jeff Davis</td>
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<td>Lori Burns</td>
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<td>American Board for Certification in Orthotics, Prosthetics and Pedorthics</td>
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<td>Catherine A. Carter</td>
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</table>
American College of Radiology
Kate Feinstein

American College of Sports Medicine
Francis Neric

American College of Surgeons
Constantine Godellas

American Council on Exercise
Graham Melstrand

American Institute of Ultrasound in Medicine
Marie De Lange

American Kinesiotherapy Association
Melissa Fuller Ziegler

American Medical Technologists
Christopher Damon

American Orthoptic Council
Vacant

American Society for Clinical Pathology
Amber Donnelly

American Society for Cytotechnology
Michele Smith

American Society of Anesthesia Technologists & Technicians
Victoria Reyes

American Society of Anesthesiologists
Howard Odom

American Society of Cytopathology
Robert Goulart

American Society of Echocardiography
Christopher Kramer

American Society of ExtraCorporeal Technology
Craig Vocelka

American Society of Neurophysiological Monitoring
Barbara Tetzlaf; Joshua Mergos (Alternate)

American Society of Radiologic Technologists
Myke Kudlas

American Therapeutic Recreation Association
Betsy Kemeny

American Thoracic Society
Vacant

ASET – The Neurodiagnostic Society
Faye McNall

Association of Medical Illustrators
Kathleen Jung

Association of Schools of Allied Health Professions
Barry Eckert; Gregory Frazer; Julie O’Sullivan Maillet; David Shelledy; Yasmen Simonian

Association of Surgical Technologists
Jeff Bidwell

At-Large Representatives of Educational Institutions
Linda Kerwin; Keith Monosky

Board of Registered Polysomnographic Technologists
Daniel Herold

College of American Pathologists
Jennifer A. Brainard

Committee on Accreditation for Advanced Cardiovascular Sonography
Matt Umland

Committee on Accreditation for Anesthesia Technology Education
Jeremy Wyatt
Committee on Accreditation for Education in Neurodiagnostic Technology
Stephanie Jordan

Committee on Accreditation for Polysomnographic Technologist Education
Christine Robison

Committee on Accreditation for Rehabilitation Engineering and Assistive Technology Education
Mary Goldberg

Committee on Accreditation for the Exercise Sciences
Benjamin C. Thompson

Committee on Accreditation of Academic Programs in Clinical Research
Stephen Sonstein

Committee on Accreditation of Education Programs for Kinesiotherapy
Jerry Purvis

Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions
Douglas York

Committee on Accreditation of Orthoptic Fellow Programs
Alex Christoff

Committee on Accreditation of Recreational Therapy Education
Theresa Beck

Committee on Accreditation of Specialist in Blood Bank Technology Schools
Jayanna Slayten

Committee on Rehabilitation Accreditation
Penny Willmering

Consortium of Academic Programs in Clinical Research
William Gluck

Cooper Institute (The)
Gina Cortese Shipley

Cytotechnology Programs Review Committee
Kalyani Naik

Hospital-Based Programs
Glen Mayhew; Timothy Reitz; Donald Schnitzler

International Association of Fire Chiefs
David Becker

International Association of Fire Fighters
Vacant

International Board of Lactation Consultant Examiners
Vacant

International Lactation Consultant Association
Lisa Akers

Joint Review Committee on Education in Cardiovascular Technology
Raymond Lenuis

Joint Review Committee on Education in Diagnostic Medical Sonography
Catherine Rienzo

Lactation Education Accreditation and Approval Review Committee (LEAARC)
Elaine Webber

Medical Assisting Education Review Board
Jennifer Spegal

Medical Scribe Specialist Review Board
Syed Mir Athar M. Ahmed

National Academy of Sports Medicine
Ian Montell
National Association of Emergency Medical Services Educators
Chris Nollette

National Association of Emergency Medical Technicians
Richard Ellis

National Association of EMS Physicians
Debra Cason

National Association of State Emergency Medical Services Officials
Donna Tidwell

National Commission on Orthotic and Prosthetic Education
Robin C. Seabrook

National Council on Strength & Fitness
Brian Biagioli

National Healthcareer Association
Vacant

National Network of Health Career Programs in Two-Year Colleges
Gregory Ferenchak; Marianne Krismer; Anne Loochtan; Stacey Ocander, Lois Simmons

National Registry of Emergency Medical Technicians
Gregory Applegate

National Rehabilitation Counseling Association
Michelle Marme

National Surgical Assistant Association
Clint Crews

Perfusion Program Directors’ Council
Bruce Searles

Proprietary Institutions
Vacant

Public Members
Glenda Carter; Fred Lenhoff

Recent Graduate
Melissa McKnight

RESNA – Rehabilitation Engineering and Assistive Technology Society of North America
Vacant

Society for Vascular Surgery
Eugene Zierler

Society for Vascular Ultrasound
Jennifer VanderPoel

Society of Cardiovascular Anesthesiologists
Michael Eaton

Society of Diagnostic Medical Sonography
Kathryn (Katie) Kuntz

Society of Thoracic Surgeons
Thomas E. MacGillivray

United States Department of Defense
Suzan F. Bowman

United States Department of Veteran’s Affairs
Vacant

Vocational Technical Education
Michael O’Donnell
CAAHEP Board of Directors
2018-2019

President
Gregory Ferenchak, EdD, RT (QM)
(Term ends 2019 – 2nd Term)

Vice President
Kathryn (Katie) Kuntz, Med, RT®, RDMS, RVT, FSDMS
(Term ends 2019 – 1st Term)

Treasurer
Barry S. Eckert, PhD., FASAHP
(Term ends 2021 – 1st Term)

Secretary
Glen Mayhew, DHSc, NRP
(Term ends 2019 – 1st Term)

Board Members:
Donald A. Balasa, JD, MBA
(Term ends 2021 – 1st Term)

Glenda Carter, PhD
(Term ends 2021 – 1st Term)

Melissa McKnight, RDCS
(Term ends 2020 – 1st Term)

Stacey Ocander, EdD
(Term ends 2021 – 1st Term)

Amber Donnelly, PhD, MPH, SCT
(Term ends 2019 – 1st Term)

Catherine (Cathie) Rienzo, MS, RT(R)(ARRT), RDMS, FSDMS
(Term ends 2021 – 1st Term)

Elizabeth (Betsy) Slagle, MS, RN, CST
(Term ends 2019 – 1st Term)

Gregory Frazer, PhD, FASAHP
(Term ends 2020 – 1st Term)

Jennifer L. (Jenny) Spegal, CMA (AAMA), MT, MEd
(Term ends – 1st Term)

Fred Lenhoff, MA
(Term ends 2020 – 1st Term)

Douglas K. York, NREMT-P, PS, (NAEMT)
(Term ends 2020 – 2nd Term)
2018-19 CAAHEP Committees

**Governance**

- **Gregory Ferenchak, EdD, RT(R)(QM), Chair**
- **Kathryn (Katie) Kuntz, Med, RT(R), RDMS, RVT, FSDMS**
- Barry S. Eckert, PhD, FASAHP
- **Glen Mayhew, DHSc, NRP**
- Staff Liaison: Kathleen Megivern, JD

**Performance Oversight**

- **Glen Mayhew, DHSc, NRP, Chair**
- **Donald A. Balasa, JD, MBA**
- **Kate Feinstein, MD, FACR**
- Stacey Ocander, EdD
- **Elizabeth (Betsy) Slagle, MS, RN, CST**
- Staff Liaison: Lorna Frazier-Lindsey

**Planning and Development**

- **Barry S. Eckert, PhD, FASAHP, Chair**
- **Fred Lenhoff, MA**
- **Melissa McKnight, RDCS**
- Glenda Carter, PhD
- Jennifer (Jenny) Spegal, CMA(AAMA), MT, MEd
- Staff Liaison: Kathleen Megivern, JD

**Recommendation Review**

- **Kathryn (Katie) Kuntz, Med, RT(R), RDMS, RVT, FSDMS, Chair**
- **Amber Donnelly, PhD, MPH, SCT**
- **Gregory Frazer, PhD, FASAHP**
- Catherine (Cathie) Renzo, MS, RT(R)(ARRT)RDMS, FSDMS
- Douglas K. York, NREMT-P, PS, (NAEMT)
- Staff Liaisons: Kalyani Naik and Theresa Sisneros

**Standards Committee**

- **Jennifer Anderson Warwick, MA, Chair**
- **Kate Feinstein, MD, FACR**
- **Jeffrey Hill, BS, RDCS, FASE (SDMS)**
- **Katie Kuntz, Med, RT(R), RDMS, RVT, FSDMS**
- M. LaCheeta McPherson, PhD, MLS(ASCP)℠
- Keith Orloff, CST, FAST
- Julie O’Sullivan Maillet, PhD
- Staff Liaisons: Kalyani Naik and Lorna Frazier-Lindsey

**Nominating and Elections**

- **Davis Becker, MA, Chair**
- **Stephen Sonstein, PhD, M(ASCP)**
- Julie O’Sullivan Maillet, PhD
- Staff Liaison: Kathleen Megivern, JD

**Annual Meeting Planning Committee**

- **Betsy Slagle, MS, RN, CST, Chair**
- **Jennifer (Jenny) Spegal, CMA (AAMA), MT, MEd**
- **Stacey Ocander, EdD**
- Melissa McKnight, RDCS
- Staff Liaison: Kathleen Megivern, JD
2018-2019 CAAHEP Liaisons

Advanced Cardiovascular Sonography
Liaison: Thomas K. Skalko, PhD, LRT/CTRS*

Anesthesia Technology
Liaison: Greg Frazer, PhD, FASAHP

Anesthesiologist Assistant
Liaison: Amber Donnelly, PhD, MPH, SCT

Art Therapy
Liaison: Elizabeth (Betsy) Slagle, MS, RN, CST

Assistive Technology
Liaison: Douglas K. York, NREMT-P, PS, (NAEMT)

Cardiovascular Technology
Liaison: Douglas K. York, NREMT-P, PS, (NAEMT)

Clinical Research
Liaison: Bernard Allan Cohen, PhD, FASNM*

Cytotechnology
Liaison: Kerry Weinberg, MPA, RDMS, RDCS, RT *

Diagnostic Medical Sonography
Liaison: Carolyn O’Daniel, EdD, RRT*

Exercise Sciences
Liaison: Gregory Ferenchak, EdD, RT(R)(QM)

Emergency Medical Services Professionals
Liaison: Barry S. Eckert, PhD., FASAHP

Kinesiotherapist
Liaison: Theresa Sisneros*

Lactation Consultants
Liaison: Kathryn (Katie) Kuntz, Med, RT®, RDMS, RVT, FSDMS

Medical Assisting
Liaison: Kate Feinstein, MD

Medical Illustrator
Liaison: M. LaCheeta McPherson, PhD, MT(ASCP), CLS(NCA)*

Medical Scribe Specialist
Liaison: Paulette Brown Bracy, PhD, MLS

Neurodiagnostic Technologist
Liaison: Kalyani Naik, MS, SCT(ASCP)*

Orthotics
Liaison: Jennifer Anderson Warwick, MA*

Orthotics and Prosthetics
Liaison: M. LaCheeta McPherson, PhD, MT(ASCP), CLS(NCA)*

Perfusionist
Liaison: Kathleen Jung, M.S., F(AMI), CMI*

Polysomnographic Technology
Liaison: Cynthia Butters, EdD*

Recreational Therapy
Liaison:

Rehabilitation/Disability Studies
Liaison: Thomas Skalko, PhD, LRT/CTRS*

Specialist in Blood Bank Technology
Liaison: Glen Mayhew, DHSc, NRP

Surgical Technology/Surgical Assistant
Liaison: Susan Fuchs, MD

*Indicates non-Board liaison
# 2018-19 CAAHEP Committees on Accreditation

<table>
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<tr>
<th>Committee</th>
<th>Joint Review Committee on Education in Cardiovascular Technology</th>
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<tbody>
<tr>
<td>Advanced Cardiovascular Sonography</td>
<td>[<a href="http://www.caahep.org/coa-acs">www.caahep.org/coa-acs</a>]</td>
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<tr>
<td>Chair – Matt Umland, RDCS, FASE</td>
<td>Chair – Raymond Lenius, RCIS, MS</td>
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<tr>
<td>Staff – Mary Alice Dilday</td>
<td>Staff – Jackie L. Long-Goding, PhD, RRT-NPS</td>
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<td>Anesthesia Technology</td>
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<tr>
<td>Chair – Victoria A. Reyes</td>
<td>Chair – Stephen Sonstein, PhD, M(ASCP)</td>
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<td>Chair – Rich Bassi, Med, CAA</td>
<td>Chair – Karen Atkison, MPA, CT(ASCP)CMIAC</td>
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<td>Staff – Jennifer Anderson Warwick</td>
<td>Staff – Debby MacIntyre Sheldon</td>
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<td>Art Therapy</td>
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<td>Chair – Janet Kempf, ATR-BC</td>
<td>Chair – Dale Collins, MS, RT®(M)(QM), RDMS, RVT</td>
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<td>Staff - Dana Elmendorf, MA, ATR-BC, LPC</td>
<td>Staff – Gerry Magat, MS</td>
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<td>Chair – Mary Goldberg, PhD</td>
<td>Chair – Paul A. Berlin, MS, NRP (IAFC)</td>
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<td>Staff – George W. Hatch, Jr., EdD, LP, EMT-P</td>
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<td>Diagnostic Medical Sonographer</td>
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<td>Staff – Gerry Magat, MS</td>
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<td>EMS-Paramedic</td>
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<tr>
<td>Staff – George W. Hatch, Jr., EdD, LP, EMT-P</td>
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Exercise Physiology, Exercise Science, & Personal Fitness Trainer
Committee on Accreditation for the Exercise Sciences
(www.coaes.org)

Chair – Ben C. Thompson, PhD, ACSM EP-C
Staff – William Coale

Kinesiotherapy
Committee on Accreditation for Education Programs for Kinesiotherapy
(www.coakt.org)

Chair – Jerry W Purvis, MS, RKT
Staff – Kareesa Keys, RKT

Lactation Consultants
Lactation Education Accreditation and Approval Review Committee
(www.leaarc.org)

Chair – Cheryl Benn, RM, IBCLC, FILCA
Staff – Judith Lauwers, BA, IBCLC, FILCA

Medical Assisting
Medical Assisting Education Review Board
(www.maerb.org)

Chair – Rebecca L. Walker, CMA (AAMA), BS, CPC
Staff – Sarah Marino, PhD

Medical Illustration
Accreditation Review Committee for the Medical Illustrator
(www.caahep.org/arc-mi)

Chair – Shelley Wall, AOCAD, MScBMC, PhD, CMI
No Staff

Medical Scribe Specialists
Medical Scribe Specialist Review Board
(www.caahep.org/MSSRB)

Chair – Syed Mir Athar M. Ahmed, MD
No Staff

Neurodiagnostic Technology
Committee on Accreditation for Education in Neurodiagnostic Technology
(www.coa-ndt.org)

Chair – Stephanie Jordan, REEG/EP T, CNIM, CLTM
Staff - Jackie L. Long-Goding, PhD, RRT-NPS

Orthoptic
Committee on Accreditation of Orthoptic Fellowship Programs

Chair: David T. Wheeler, M.D.
No staff

Orthotic/Prosthetic
National Commission on Orthotic and Prosthetic Education
(www.ncope.org)

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Perfusion
Accreditation Committee-Perfusion Education
(www.ac-pe.org)

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Polysomnographic Technology
Committee on Accreditation for Polysomnographic Technologist Education (www.coapsrg.org/)

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Committee on Accreditation of Recreational Therapy Education (CARTE) (www.caahep.org/carte)

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