



**ACCREDITATION COMMITTEE – PERFUSION EDUCATION
INITIAL ACCREDITATION PROCESS
For Programs Applying for Initial Accreditation**

I.	Statement on Students	2
II.	Initial Accreditation	
A.	Self-study Report	2
B.	Site Visit	2
C.	Selection of the Site Visit Team	2
D.	Site Visit Agenda	2
E.	Report of Findings	3
F.	Reviewing the Program Response	3
G.	Site Visit Expenses	3
H.	Developing and Submitting a Progress Report	3
III.	Accreditation Categories	
A.	Initial Accreditation	4
B.	Continuing Accreditation	4
C.	Probationary Accreditation	4
D.	Administrative Probation	4
E.	Withhold Accreditation	5
F.	Withdrawal Accreditation	5
G.	Voluntary Withdrawal of Accreditation	5
H.	Inactive Status	5
IV.	Fee Schedule	6

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

I. STATEMENT ON STUDENTS

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

II. INITIAL ACCREDITATION

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

A. Self-Study Report

The program can request the self-study report outline from the AC-PE at office@ac-pe.org. Once the self-study is submitted, it is thoroughly reviewed by two AC-PE committee members. The committee members' reviews are forwarded to the site visit team prior to the site visit.

B. Site Visit

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

C. Selection of the Site Visit Team

The site visit team consists of a team chair and team member that are current or recent, past members of the AC-PE. All site visitors are qualified by education and experience. Programs are given the opportunity to reject an assigned site visitor based on a real or perceived conflict of interest.

D. Site Visit Agenda

The site visit includes a review of the didactic and clinical segments of the program. To evaluate the correlation between the didactic and clinical components of the curriculum and clinical resources available for student experience, clinical affiliates are visited.

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

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

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

E. Report of Findings

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

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

F. Reviewing the Program Response

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

G. Site Visit Expenses

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

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

H. Developing and Submitting a Progress Report

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

2. III. ACCREDITATION CATEGORIES

A. Initial Accreditation

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

B. Continuing Accreditation

Continuing accreditation is granted to a program when it is re-evaluated at specified intervals. Continuing accreditation remains in effect until another status is awarded by CAAHEP.

C. Probationary Accreditation

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

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

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

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

Reconsideration

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

D. Administrative Probation

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

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

3. E. Withhold Accreditation

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

4. F. Withdrawal Accreditation

Accreditation can be withdrawn from a program when it is no longer in compliance with the Standards. Before transmitting a recommendation to CAAHEP to withdraw accreditation, the AC-PE provides the program an opportunity to: 1) request AC-PE reconsideration; or 2) voluntarily withdraw from the CAAHEP system before CAAHEP considers the recommendation. Institutions sponsoring programs from which accreditation is withdrawn may appeal the decision to CAAHEP.

G. Voluntary Withdrawal of Accreditation

A sponsor may voluntarily withdraw a program from the CAAHEP system of accreditation by submitting the appropriate template letter to CAAHEP.

5.

6. H. Inactive Status

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

IV. FEE SCHEDULE

Optional Candidacy Status

Application Fee	\$2500
Consult Visit	actual cost (approximately \$1000-\$1500)

Initial Accreditation

Application Fee	\$2500
Site Visit	actual cost (approximately \$2000-\$3000)
Annual Fee *	\$2500

* The annual fee is charged after initial accreditation has been granted. Programs receiving initial accreditation prior to July 1st are responsible for the total annual fee. Programs receiving initial accreditation after July 1st are responsible for payment of 50% of the annual fee. Following the initial invoice for the annual fee, programs are invoiced in January of each year for the annual fee.

Continuing Accreditation

Annual Fee*	\$2500
Site Visit	all site visit expenses are covered by the AC-PE

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

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

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

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

An additional 5% charge may be assessed when payment is not received within 60 days of the invoice date.

FEES ARE NOT REFUNDABLE
