



ACCREDITING
COMMISION FOR CONTINUING EDUCATION

2025 Accreditation Manual

9900 W Sample Rd Ste 203

Coral Springs, FL 33065

(954) 234-2328

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Standards List

Eligibility

Type of Organization

All continuing education (CE) providers seeking accreditation of one or more educational activities must be either an educational institution; a national, state, regional, or local agency or association; a nonprofit or for-profit corporation; a hospital; any combination of the above, or other appropriate CE provider; and must meet all ACCE Standards and Requirements (S&R) contained herein, ACCE Conditions of Accreditation, and all published rules, regulations, terms of accreditation, policies and procedures of ACCE.

Letter of Support from CEO of Applicant Organization

All CE providers seeking accreditation of an educational activity must submit a letter of support from the CEO (or equivalent) of the organization stating that the organization as a whole supports ACCE accreditation; that they are authorized to coordinate the work of all departments and individuals involved in designing, implementing, evaluating and reporting activity completions electronically for ACCE accredited activities; and that they have a comprehensive knowledge of ACCE S&R and will enforce the S&R detailed in this document and all published rules, regulations, terms of accreditation, policies and procedures of ACCE. ACCE may, at its sole discretion, require CE providers to verify the organization's letter of support at any time.

Letter of Reference

If the applicant operates under the authority of a government body tasked with maintaining quality in educational programs (e.g., state EMS office, health department, Ministry of Health), the applicant must provide a letter from the body confirming that the applicant is not currently under investigation or indictment and has not received any type of communication, verbal or written, indicating that the organization's Emergency Medical Services (EMS) CE is in any way inadequate. ACCE may, at its sole discretion, verify this letter at any time.

If the applicant does not operate under the authority of such a government body, they must present a letter of reference from an individual or organization who can attest to the quality of the educational product offered by the applicant. This acknowledgement may be in the form of a letter, or any other appropriate documentation signed by a person with experience in EMS education. ACCE may, at its sole discretion, verify a reference at any time.

Contact Information for Relevant Government Body, if Applicable

If the applicant operates under the authority of a government body tasked with maintaining quality in educational programs (e.g., state EMS office, health department, Ministry of Health) the applicant must provide contact information for the individual within that body who can confirm that the applicant is currently not being investigated or under indictment, or within the last two years has not received any type of communication, verbal or written, indicating that the organization's EMS CE is in any way inadequate.

Physical Infrastructure:

All CE providers seeking accreditation of an educational activity must have the physical infrastructure or technological assets to provide and administer an educational activity or program consistent with educational standards outlined in the National Emergency Medical Services Education Standards. This applies primarily to education providers who conduct live, in-house, training programs.

Distributed Learning (DL) Activities

Distributive learning activities must be easily accessible to the student. If delivered via CD or USB drive, participants must be able to access the delivery platform on the device specified by the CE provider. This includes desktop computers, laptop computers, tablets and cellular telephones. CE providers must have all systems in place to meet the requirements of the following:

- ACCE Distributed Learning Policy (see Appendix A).
- ACCE Item Writing Standards (see Appendix B).
- ACCE CEH Assignment Guidance (see Appendix C).
- All other published policies related to distributed learning.

DL providers must provide technical support for instructors and activity participants. In addition, a mechanism must be in place that allows participants to ask for and receive additional information or clarification for all activity content and summative post-test within one business day.

Content Gating

It is mandatory that an active mechanism be in place that ensures participants complete all content including videos, slide presentations, cases studies and other delivery platforms before the user is allowed to access the summative post-test. For

the purposes of this manual, this is called “gating”. Applications for accreditation that do not employ “gating” of the content in this manner will not be considered. ACCE accredited providers who are found not to comply with this requirement risk suspension of their accreditation. DL education providers must also develop a mechanism that ensures that participants complete the summative test for an activity by reading the test items and selecting the answer based on their participation in the activity, and have this mechanism approved by ACCE. DL providers must randomize items on the summative post-test and randomize the answer choices associated with these items. DL providers must develop a bank of questions for each topic from which a randomized test with randomized choices is created. The test bank must be at least 30% larger than the number of items that appear in the test. A student who fails an activity post-test must not be given an identical test for their next post-test attempt.

If the design of a specific activity requires any variance from these standards, the applicant organization must provide a detailed description of the need for variance, how it will vary, and how it will meet the spirit of the ACCE standards.

Note: If you offer a certification course online such as ACLS, PALS, CPR, etc. please refer to Appendix G, Certification/Card Bearing Courses Policy. If you do not presently offer such a course but decide to do so at some point during the three-year accreditation period covered by this application, you must advise ACCE and allow time for a review before making the course available to students.

Traditional Live Classroom Activities

Equipment and Supplies: The organization must have dedicated equipment and supplies necessary to develop the participant competencies defined by the training session objectives.

Comfort and Safety: Facilities must provide adequate restrooms and common areas, adequate environmental controls to maintain participants' comfort and safety, adequate space, access, and accommodations for participants with disabilities in accordance with the Americans with Disabilities Act standards, and a reasonable level of personal safety for all individuals involved in all aspects of the activity.

Medical Devices: Medical devices must be kept clean and in good working order. These devices and the consumable supplies that are used with them must be available in sufficient quantity to maintain a minimum participant-to-equipment ratio of six-to-one.

Equipment Inventory: An inventory of equipment and supplies along with the cleaning and replacement policies must be submitted with the application and kept on file in the CE provider's office for a period of three years.

Dedicated Audiovisual Equipment: All appropriate audiovisual equipment must be dedicated to each EMS CE activity. This equipment must be kept clean and maintained in good working order.

Policy for Maintaining Medical Devices and Consumable Supplies: The organization must have a policy detailing how medical devices and consumable supplies are maintained and replenished.

Virtual Instructor Led Training (VILT) Activities

ACCE designates VILT courses as "F5" courses such that the course number will include F5. For example, a VILT course developed in the year 2023 will adhere to the following course number format (year) 20-(provider abbreviation) ABCD-F5- (4-digit number code) 1234 or 23-ABCD-F5-1234.

VILT activities are accepted as traditional live activities by the NREMT and many states because they provide synchronous interaction between students and instructors, the CE provider is able to verify student attendance throughout the activity, and each topic requires that the student make a satisfactory score on the summative exam for each topic presented. The course number for a VILT activity must contain an F5 designation. ACCE approved VILT classes must not contain recorded content. A course will only be considered as an F5 course if the instructor and students can interact in real time despite being separated geographically. Playback of a recorded session that is moderated by an instructor shall be considered an F3 course.

Organizational Requirements

Only those organizations that hold current approval as a ACCE accredited organization may offer VILT activities. In addition, each VILT activity must be reviewed by ACCE before it is offered to students. A beta test using actual students to validate the number of CEH assigned to the activity must be performed.

VILT programs are given an "F5" course designation. F5 denotes a live class that is held and administered by a live instructor in real time. F5 courses can never offer a presentation of previously recorded content.

Delivery Platform Requirements

Computer network and internet access equipment necessary to ensure advertised accessibility must be maintained and supported properly and allow for:

- Electronic storage of test results, scores, and other evaluation materials.

- Storage for three years and are adequately protected with appropriate backup and security from unauthorized access.
- Student accessibility of all browsers, plug-ins, and technical requirements prior to the class.
- Display of the real-time presentation of instructional graphics, interactive polling, instructor feedback and other items made necessary by the specific delivery platform.

Instructor/learner interactions must be possible in real time via simultaneous visual and audio communication during the session. Chat-based interfaces may be used for housekeeping or support actions, but all learning activities must support real time audio. The delivery platform must track total time spent in the learning session and provide a method of generating reports verifying attendance and activities for each participant.

Needs Assessment

Performing an educational Needs Assessment is a key component of ACCE-accredited activities. CE providers must be sure that their activities address an educational need. Needs Assessment methods must target both perceived and unperceived needs. Below are examples of needs assessment methods. These examples are not all-inclusive. An organization should not limit its needs assessment efforts to the examples on this list, nor is it obligated to engage in all of the methods listed.

- A written survey of a random sample of potential participants.
- An intercept, or walk-up survey in which the surveyor approaches an individual and asks questions.
- A focus group.
- Questions and comments gathered from evaluation forms.
- Quality Assurance data, incident reports, etc.
- A literature search.
- Consensus of recognized experts in the EMS arena.
- A review of past EMS CE offerings available to the target audience to identify gaps in content.
- Consensus of an educational planning committee that includes potential participants.
- Data from standardized tests.
- Trends in the provision of care identified by the EMS Medical Director
- State and NREMT requirements.

ACCE application standards require that the applicant present the data from their most recent Needs Assessment for review.

Instructional Design

All CE providers must submit a description of how the program committee will address the following sequential steps:

- Conduct an educational needs assessment (see above).
- Identify the target audience relative to the identified educational needs.

Note: ACCE does and will continue to accredit such advanced practice activities as critical care, community paramedic, flight paramedic, etc., the content of which does not fall within the current Standard of Practice levels. Because some states and NREMT may not accept all of these activities for license renewal or recertification, the CE provider must display a disclaimer prominently when offering these activities instructing participants to contact their state EMS and/or NREMT to verify acceptance for recertification or relicensing.

- Identify overall goal(s) to meet identified educational need(s).

Write objectives based on the identified goals. These objectives must be specific and define a short-range goal that describes what the participant will be able to do upon completing the educational activity. Objectives must begin with a verb that describes an observable action that may be evaluated at the end of the activity. “Understand” does not describe an observable action; “list,” “describe,” or “explain” do. Objectives (and activity content) must indicate appropriate educational orientation and not an orientation that promotes commercial interests.

- Identify qualifications for authors or instructors who will write or otherwise deliver the content that addresses the goals and objectives for the target audience.
- Identify the format that will best address the goals and objectives (e.g., lecture, discussion, Q and A, laboratory, etc.).

Develop lesson content and a bibliographic list of references on which the content is based (see Appendix D, Style Sheet). List complete reference information for all materials used to prepare the activity and use an activity format that allows participants to relate specific content to each reference. ACCE considers thorough research an indispensable element of sound educational design. References at a minimum must support the current National EMS Education Standards and evidence-based medicine. Best practices include articles from peer reviewed journals, standard textbooks, and information from the internet. ACCE at its sole discretion may require applicants to provide additional content and references appropriate to the topic. There should be at least three references per stated objective.

- Evidence Based Medicine:
Evidence Based Medicine is a systematic approach to medicine in which health care professionals use the best available scientific evidence from clinical research. Applicants for ACCE accreditation are encouraged to design and build continuing educational activities that are supported by scientific evidence and clinical research. Course bibliographies should reflect recent scientific evidence and clinical research.
- Select qualified authors and/or faculty for the activity. Require faculty and authors to complete and sign a conflict of-interest statement that is displayed at the beginning of the materials for each activity (see Conflict of Interest Disclosure below).
- Develop test items based on the lesson objectives (required for distributed learning and VILT activities; optional for traditional live classroom activities) that will assess the participants' mastery of the objectives (see Appendix B, Item Writing Standards). There should be at least three questions per stated learning objective.
- Develop an evaluation instrument that uses a five-point Likert scale to solicit participants' opinions about the activity, instructor, lesson format, syllabus, AV, and the activity.
- Give participants a mechanism for asking and receiving answers to questions regarding lesson content and test items within a maximum of five days.
- Develop a mechanism that ensures that participants complete all content including videos, slide presentations, cases studies and other delivery platforms before the user is allowed to access the summative post-test. Applications for accreditation that do not employ "gating" of the content in this manner will not be considered.
- Ensure activity content conforms to the current National EMS Education Standards at a minimum (see above for exceptions).
- Summarize the participants' responses to the test items and to the evaluation instrument (see Evaluation section below) to pinpoint strengths and weaknesses in the activity and document plans for quality improvement.
- ACCE requires that each activity undergoes comprehensive review at least every three years. Conduct an ongoing review of an activity, via continuous quality improvement, to adjust activity content based on changing guidelines and protocols and participant and faculty feedback. The medical director must review each revised activity and affirm that the revised content is medically accurate and consistent with the standard of care for emergency prehospital medicine.

Definitions of CEH Categories

ACCE awards credit for each session or portion of the activity based on the course content. You must indicate on the application the category(ies) and number of credit hours requested. ACCE strongly suggests that current literature be reviewed and cited in all materials. Applicants should cite evidence-based guidelines whenever possible.

Emergency Medical Responder: Topics that address the care of the patient in the first minutes of an emergency and before the arrival of BLS or ALS unit as described in the current DOT curriculum and current literature.

Basic: Topics which address skill and knowledge objectives included in the patient care practice of basic prehospital care personnel as described in the current U.S. D.O.T. National Standard Curriculum for EMT Basic and current literature.

Advanced: Topics which address skill and knowledge objectives included in the patient care practice of advanced EMT or EMT-Paramedic personnel and beyond the scope of basic prehospital care personnel as described in the current U.S. D.O.T. National Standard Curriculum for EMT-Intermediate and Paramedic and current literature.

Operational: Topics which are relevant to the operational activities of EMS personnel, such as emergency vehicle operations, dispatch communications, rescue, etc. and non-patient care activities as described in the current U.S. D.O.T. National Standard curriculum for EMT-Basic, Intermediate and Paramedic and current literature.

Educator: Topics oriented to the EMS educator (e.g., instructional methodologies and techniques, evaluation principles and techniques, etc.), and not directly related to the provision of emergency patient care.

Management: Topics directed to the manager/supervisor, related to the administration of emergency medical services, and not directly related to the provision of emergency patient care (e.g., fiscal, personnel and vehicle management issues).

Conflict of Interest Disclosures

- CE providers must secure from authors and faculty a written conflict-of-interest disclosure that, at a minimum, includes responses to the items listed below. A statement regarding any conflict of interest or absence thereof must be posted at the beginning of each activity regardless of mechanism of delivery (traditional live classroom, DL, VILT). These completed statements must be kept on file for three years and made available to ACCE on request.
- Disclose any financial relationship one has with organizations (other than the CE provider) and include a brief description of the nature and purpose of the organization(s).

- Disclose one's position of employment, including the nature of the business of the employer, the position held, and a description of daily employment responsibilities.
- Disclose any outside relationships held with any person or entity from which the CE provider obtains substantial amounts of goods and services, or which provides services that substantially compete with the CE provider where the relationship involves holding a position of responsibility; a substantial financial interest (other than owning less than a 1% interest in a publicly-traded company); or the receipt of any unusual gifts or favors.
- Disclose any financial interests or positions of responsibility in entities providing goods or services in support of EMS practice other than owning less than a 1% interest in a publicly traded company.
- Disclose any other interest that may create a conflict of interest or the appearance of a conflict of interest with ACCE or with the CE provider.

Evaluation

The applicant must submit a written policy stating there is a sound evaluation process for each activity offered for EMS professionals and how the applicant summarizes and uses the results of evaluations in planning future EMS CE. CE providers must be prepared to submit summary evaluations upon request for a period of three years after the date of the activity. Review of evaluation summaries should be recorded in the minutes of the program committee. Minutes of program committee meetings should include review of course evaluation data.

Participant Summative Test Materials

A summative test on content is required for DL activities; a summative test is optional for traditional live classroom and VILT activities. Participant summative test materials must be compliant with ACCE Item Writing Standards (see Appendix G, Item Writing Standards). Assessments of participants' ability to demonstrate psychomotor competencies such as those necessary for certification or "card" courses must be measured using a simulation evaluation instrument and completed by a qualified examiner. Evaluation of cognitive material must be tested at multiple levels of Bloom's taxonomy, from the "knowledge" level through the "evaluation" level (see Appendix G Item Writing Standards). All tests and related data must be kept on file in the office of the CE provider for a period of three years.

Participant Evaluation of the Activity

Conducting a course evaluation is an integral part of any educational activity. The following items will be evaluated by each participant for individual learning sessions:

- This activity presented content relevant to EMS practice.
- This activity addressed each learning objective.
- The content was well-organized and moved logically from one point to the next.
- The content was supported appropriately by examples, graphs, tables, photos and documented references that added to my comprehension and understanding.
- The visual design of presentation materials enhanced the learning experience.
- The presentation materials were free of typos, spelling errors, and grammar errors.
- The presenter spoke clearly and in a way that was interesting. Even without visual aids, one would be able to demonstrate mastery of the learning objectives.
- The activity did not promote a product or exhibit a commercial bias.

Medical Direction

All activities must be reviewed by a licensed MD or DO who is currently active in the delivery of EMS or has significant recent (within the last three years) EMS delivery experience. Acceptable experience includes board certification in EMS, experience as the medical director for an ambulance service, or experience in EMS research, education, or administration. The EMS medical director's name must appear on the CE provider's website. The accredited organization must verify that it has a current agreement with a Physician Medical Director (PMD) who provides guidance to the ACCE program committee. The name of the EMS medical director must appear on the CE provider's website.

Qualifications

The medical director must be currently licensed MD or DO. The medical director must be active in the delivery of EMS or have significant recent (i.e., within the last three years) EMS delivery experience. This experience may include a combination of the following:

- Board certification in EMS
- Board certification as an emergency physician
- Experience as an EMS physician
- Experience as the medical director for an ambulance service
- Experience in EMS research, teaching, or administration

NON-medical courses must be performed and have oversight by an expert in the field of courses being delivered.

Duties

The medical director must perform the following duties:

- Review and approve all activities offered by the accredited organization or cosponsored organizations including objectives, instructional personnel, and evaluation tools.
- Provide clarification on all appropriate medical issues.
- Approve all medical content.
- Assist with participant outcome recommendations.
- Review all program evaluation summaries and make recommendations to improve the activity.
- Actively participated on the program committee

Reporting Changes Regarding the PMD

Changes in the name or job description of the PMD must be submitted to ACCE within 30 days. Organizations that allow the agreement with a PMD to lapse for more than 30 days will be subject to withdrawal of ACCE accreditation.

Program Committee

The accredited organization must maintain a program committee that reviews and approves all activities offered by the accredited organization and by all cosponsored organizations. The review must ensure that all ACCE S&R are met and documented in the minutes of the committee meeting. The committee must meet or exceed the standards listed below:

Membership

The program committee must have at least three members. The committee must have at least one member who is a physician with recent (within the last three years) EMS experience. Physician(s) may be regular or ad hoc members of the committee. This physician may be the organization's EMS medical director.

The committee may have, as an ex officio member, the full-time activity coordinator from the accredited organization and, if applicable, the cosponsored organization. This

member may not be counted as one of the three members necessary for approving an activity and may not vote or influence the approval of any activity.

The committee must approve all EMS activities submitted for review in a meeting of a minimum of three members of the committee, one of which must be an EMS physician and may be the medical director. In the case of activities developed for a specific EMS service, the committee must have direction from the PMD of that service.

Activity Oversight

The committee must ensure that EMS CE activities are consistent with the CE needs of EMS personnel as indicated by the needs assessment.

The committee must review all participant evaluations and other information submitted by students, make prompt revisions to the activity suggested by the results of these evaluations, and document these actions in their meeting minutes.

The committee must ensure that all accredited CE activities are reviewed and updated at least every three years (more often if needed), assigned a current activity number (a number that has as its first two digits the year in which the update is done), and entered as a new activity in the AMS.

The committee must ensure that all EMS CE activities it accredits meet all ACCE S&R, including activities offered by the accredited organization itself and those offered by a cosponsored organization.

The committee must require that each application for approval from a cosponsored organization be submitted on the appropriate ACCE application form and kept on file in the office of the accredited institution for three years.

The committee must require that documentation of the planning process is kept on file for all activities offered by the accredited organization.

Meetings

The committee must meet at least twice a year, in person or by video conference, to review the accredited organization's overall EMS CE program considering ACCE organizational accreditation requirements. Other meetings may take place in person via teleconference or videoconference. Regardless of the meeting venue, minutes must be taken that record the date, venue, those present, the items discussed, assignments made, and actions taken. These minutes must be approved by the committee at its next meeting, kept on file for at least six years, and be available for review upon request.

For the purposes of ACCE accreditation, program committee meeting minutes should show clear evidence that the program committee meets all of the standards outlined in this section.

Marketing

Materials

Marketing materials for an activity must communicate the following:

- A clear, concise description of the activity.
- The overall goals for the activity.
- Prerequisites, if applicable.
- A statement of the number of CEH associated with the activity.
- Date, time and location, including how to access the activity with URL, directions and maps, as applicable.
- All scheduled instructional personnel.
- Fees for the activity.
- Information about travel, lodging and meal services, if applicable.
- A complete activity schedule, received by potential participants prior to the activity, meeting the following criteria, where applicable:
 - The activity topic(s), location and date(s),
 - The title for each session with date and time,
 - All confirmed speakers and other instructional personnel, and the overall goals and objectives for the activity.
- *Note: CEH are awarded according to the CEH Assignment Guidance (see Appendix C) and are based on a 60-minute hour.*

Statements

Statements about ACCE Accreditation Specific to Providers of Individually Accredited Activities

Required statements about the organization's application for ACCE approval or actual approval for an individual activity appear below. No other references to accreditation of the activity by ACCE or its member organizations may appear on materials for the activity:

If activity materials go to print after an application for accreditation has been submitted but before approval is final, use this statement:

An application for accreditation has been submitted to Commission on Accreditation for Pre-Hospital Continuing Education".

If activity materials go to print after approval is final, use this statement:

“This CE activity is accredited by the Commission on Accreditation for Pre-hospital Continuing Education (ACCE) for (number) (category) CEH.” For example, “This CE activity is accredited by the Commission on Accreditation for Prehospital Continuing Education for two AEMT CEH.”

The following is an optional statement that may be used. If used, this statement must appear in its entirety and is to be included in addition to, not instead of, the required statements.

“The purpose of ACCE is to standardize the review and approval of quality EMS Continuing Education activities.”

The member organizations of ACCE are as follows:

- American College of Emergency Physicians
- American College of Osteopathic Emergency Physicians
- American Heart Association
- National Association of Emergency Medical Services Educators
- National Association of Emergency Medical Services Physicians
- National Association of Emergency Medical Technicians
- National Registry of Emergency Medical Technicians
- National Association of State Emergency Medical Services Officials
- American Red Cross

Logo Use General

Statement

The ACCE logo is a trademark and is the property of Commission on Accreditation for Prehospital Continuing Education. It was designed for the purpose of identifying ACCE publications, services, and other materials developed by ACCE. The ACCE logo is registered with the U. S. Patent and Trademark Office.

Policy

The ACCE mark is intended only to identify publications, services, and materials developed by ACCE or for other uses as specifically authorized by ACCE. CE providers wishing to use the ACCE logo in connection with their publications, services, or other materials must request the electronic file from ACCE and must use it in accordance with written permission from ACCE.

The mark must never be recreated or altered in any way or be superimposed on another device or have another device superimposed on it. No words or letters other

than ACCE may be used with the logo with the exception of the words “ACCE accredited” to designate materials and organizations that have received ACCE accreditation. The logo should not be rearranged or altered. Use of the mark that is unauthorized or not in compliance with these policies will be vigorously opposed.

Persons or organizations using the ACCE mark in an unauthorized or nonconforming manner will be notified by certified letter that they must cease such use. A standard letter will be sent from ACCE headquarters within 72 hours from the time ACCE is made aware of the misuse of its mark. Persons or organizations using a mark that is confusingly similar shall be asked to cease the use of such a mark in those cases where it appears to be used in an attempt to mislead or confuse. In cases where the user refuses to cease after notification by certified letter, an attempt will be made to make telephone contact. If direct contact fails to convince the user to cease using the mark, the executive committee shall determine the appropriate course of action to be taken.

The executive director shall take appropriate steps to protect the mark and will have the responsibility for the implementation of this policy with the approval of the chair.

Changes in this policy must have the approval of the ACCE board of directors.

Certificates

ACCE accredited certificates of attendance provide EMS professionals with documentation required for maintaining their EMS license and/or NREMT certification. Each certificate of attendance must clearly present the following information:

Participant and Activity Information:

The following information must appear on all certificates:

- Name of CE provider and CE provider number assigned by ACCE
- Participant's name
- Activity title
- Date(s) of activity
- Location of activity (traditional classroom courses only)
- Number and category of CEH
- ACCE activity number
- Name and signature of the program coordinator
- Participant's license number
- Participant's state of licensure
- Participant's NREMT number (if applicable)
- Name of EMS medical director

Accreditation Statement on Certificates

The ACCE logo can be utilized in place of a statement. If a statement is used, it shall state:

“This course is accredited by the Accrediting Commission for Continuing Education.”.

Reviewers and Review Process

Reviewers

The peer-review process for quality EMS CE is facilitated by qualified reviewers. Candidates seeking to become a reviewer must document substantial experience in EMS practice and education.

The documents that applicants submit are reviewed by a committee of the board of directors which decides to approve or reject the application.

Review Process

Continuing Education Accreditation applications are distributed to multiple reviewers (usually three) who remain anonymous to the applicant, but whose names appear on a list of all reviewers at www.ACCE.global. Generally, reviews are completed within six weeks. Reviewers submit their questions and concerns regarding an application to the accreditation manager who relays these messages to the applicant for resolution. When the application is approved for accreditation, the review coordinator sends the applicant a letter of accreditation and instructions on accessing the “Providers Only” screen on the ACCE website.

Similarly, applicants whose accreditation has not been approved will receive a letter of rejection clearly stating the reason(s) for non-approval

Confidentiality

No ACCE committee member, or other individual affiliated with ACCE or any of its sponsoring organizations, may release to any person any materials or information submitted to or produced by ACCE, its members, staff, or reviewers in connection with a continuing education activity or organizational review conducted by ACCE without approval from ACCE and the express written consent of all parties to the review.

No committee member, reviewer, or other individual affiliated with ACCE or any of its member organizations may release to any person copyrighted material received in connection with an ACCE review of a continuing education activity or an organization without approval from ACCE and the express written consent of the copyright holder to such a release. Committee members and reviewers should destroy all such materials after they have been notified that the committee activity has been completed.

Conflict of Interest

No committee member or reviewer may participate in any ACCE committee or reviewer activity dealing with an organization or a course submitted by an organization with which he/she is affiliated as a board member, fiduciary of that organization, or as an author or planner of the specific activity being reviewed.

Records Collection and Reporting

Attendance Verification

The accredited organization must put in place a mechanism for reliably verifying participant attendance for the time allotted to each topic or session. The CE provider must develop a method that will document the participant's identity, time spent on the activity, test items and scores, if applicable, and a summary of the participants' evaluations of the effectiveness of the activity. The method must also meet the requirements of the state and professional organizations to which participants must report their CE.

Records Maintenance

The accredited organization must maintain paper or electronic attendance records on file in its office for a minimum of three years and be prepared to forward a copy to ACCE upon request.

Reporting to the ACCE Accreditation

ACCE does not require a fee per credit hour issued for your course(s). The courses approved for your organization cover all organization locations and will be listed on the www.acce.global website. Monthly, a report on courses taught will be forwarded to ACCE showing the location, students name, address, phone number, and email address. A sample of students will be contacted as part of a survey.

Privacy

Privacy Statement

I understand that [name of CE provider] as a requirement of ACCE accreditation will submit a record of my course completions to ACCE. I further understand that my course completion records may be accessed by or shared with such regulators as state EMS offices, training officers, and NREMT on a password-protected need-to- know basis. In addition, I understand that I may review my record of ACCE accredited course completions by contacting ACCE.

Standards for Accredited Organizations

Maintenance of Accreditation

Accreditation carries with it the responsibility for maintaining compliance with the Conditions of Accreditation. The applicant must appoint an individual who will be responsible for maintaining ACCE accreditation. This person must be dedicated to the reporting and continued advancement of the organization. The person must be knowledgeable of the accreditation process and its professional standards.

ACCE reserves the right to audit any activity and to verify all appropriate documentation at any time during the accreditation period and will revoke the accreditation of any ACCE-accredited organization denying a request for verification of compliance. ACCE also maintains the right to impose a penalty of up to \$5,000 for such infractions

Many ACCE-accredited CE providers contribute their time and expertise to their local and state EMS communities. If one's organization conducts pro bono activities at the local, state, or national level, and they would like to make ACCE aware of these activities, they should describe them briefly.

Attendance Verification

The accredited organization must put in place a mechanism for reliably verifying participant attendance for the time allotted to each topic or session. The CE provider must develop a method that will document the participant's identity, time spent on the activity, test items and scores, if applicable, and a summary of the participants' evaluations of the effectiveness of the activity. The method must also meet the requirements of the state and professional organizations to which participants must report their CE.

Records Maintenance

The accredited organization must maintain paper or electronic attendance records on file in its office for a minimum of three years and be prepared to forward a copy to ACCE as stated prior.

Privacy Consideration

Privacy Statement

I understand that [name of CE provider] as a requirement of ACCE accreditation will submit a record of my course completions to the ACCE AMS. I further understand that my course completion records may be accessed by or shared with such regulators as state EMS offices, training officers, and NREMT on a password-protected need-to-know basis. In addition, I understand that I may review my record of ACCE accredited course completions by contacting ACCE.

Virtual Site Visits

A letter of full ACCE Organizational Accreditation will be provided after the successful virtual site visit. The applicant must budget to pay reasonable travel expenses for two reviewers to perform one site visit if deemed necessary by ACCE. ACCE reserves the right to perform random site visits at its sole discretion to verify compliance with the Conditions of Accreditation for Organizations. ACCE also reserves the right to perform for-cause site visits at its sole discretion to verify compliance with the Conditions of Accreditation for Organizations. The program receiving a for-cause site visit is subject to payment of reasonable travel expenses and other expenses associated with the investigation and remediation, including refunding participant fees for participants in improperly approved activities as well as immediate termination of ACCE accreditation

Support and Human Resources

Management and Supervision

The accredited organization must appoint an individual who will be responsible for maintaining ACCE accreditation.

Mission Statement

The accredited organization must have a written statement signed by its governing individual or body that supports its EMS CE mission.

Budget

The program coordinator or someone in the organization directly involved in the educational planning process must be responsible for developing the budget for the organization's overall EMS educational program and the individual activities included in that program. A percentage of the budget sufficient to maintain a robust EMS educational program must be allocated to salaries for the program's administrative personnel.

Organizational Chart

The accredited organization must submit a chart that clearly illustrates the lines of authority flow within the organization.

Education Program Coordinator Job Description

The job description of the person responsible for coordinating the educational program and its accreditation must be kept on file in the office of the accredited organization and must be included in the application. The coordinator or equivalent must perform the following duties:

- Serve as the liaison to ACCE for all matters involving the organization's accreditation.
- Work with the physician medical director and instructional personnel to accomplish the following requirements - needs assessment, program planning, program implementation, program evaluation and revision and selection of instructional personnel.
- Develop the program budget.
- Develop and maintain all necessary contractual agreements.
- Develop an appropriate program syllabi.
- Supervise the cleaning and maintenance of all medical devices and audio-visual equipment necessary for implementing the organization's activities.
- Keep appropriate records that include all of the required information (see section on Attendance Verification,
- Monitor adherence to ACCE requirements.

NON-EMS Programs

Programs not related to Emergency Medical Services can request accreditation. Compliance is required as noted in this manual. The organization must be approved or a licensed organization in their State or Country that represents the programs offered.

Medical Direction for EMS Programs

All activities must be reviewed by a licensed MD or DO who is currently active in the delivery of EMS or has significant recent (within the last three years) EMS delivery experience. Acceptable experience includes board certification in EMS, experience as the medical director for an ambulance or rescue 911 service, or experience in EMS research, education, or administration. The EMS medical director's name must appear on the CE provider's website. The accredited organization must verify that it has a current agreement with a Physician Medical Director (PMD) who provides guidance to the ACCE program committee.

Medical Director Qualifications

The medical director must be currently licensed MD or DO. The medical director must be currently active in the delivery of EMS or have significant recent (i.e., within the last three years) EMS delivery experience. This experience may include a combination of the following:

- Board certification in EMS
- Board certification in Emergency Medicine
- Experience as an EMS physician
- Experience as the medical director for an ambulance service
- Experience in EMS research, teaching, or administration

Medical Director Duties

The medical director must perform the following duties:

- Review and approve all activities offered by the accredited organization or cosponsored organizations including objectives, instructional personnel and evaluation tools.
- Provide clarification on all appropriate medical issues.
- Approve all medical content.
- Assist with participant outcome recommendations.
- Review all program evaluation summaries and make recommendations to improve the activity.
- Actively participate on the program committee.

Reporting Changes Regarding the Medical Director or Organization Director

Changes in the name or job description of the medical director must be submitted to ACCE within 30 days. Organizations that allow the agreement with a medical director to lapse for more than 30 days will be subject to the withdrawal of ACCE accreditation. Non-EMS organizations must send a change of program director within 30 days.

Program Committee

The accredited organization must maintain a program committee that reviews and approves all activities offered by the accredited organization and by all cosponsored organizations. The review must ensure that all ACCE S&R are met and documented in the minutes of the committee meeting. The committee must perform the duties listed below regarding activities submitted to it by the accredited organization and cosponsored organizations:

Membership

The program committee must have at least three members. The committee must have at least one member who is a physician with recent (within the last three years) EMS experience. Physician(s) may be regular or ad hoc members of the committee. This physician may be the organization's EMS medical director.

The committee may have, as an ex officio member, the full-time activity coordinator from the accredited organization and, if applicable, the cosponsored organization. This member may not be counted as one of the three members necessary for approving an activity and may not vote or influence the approval of any activity.

The committee must approve all EMS activities submitted for review in a meeting of a minimum of three members of the committee, one of which must be an EMS physician and may be the medical director. In the case of activities developed for a specific EMS service, the committee must have direction from the PMD of that service.

Non-EMS programs must have a minimum of three experts in the area of the programs being delivered.

Activity Oversight

The committee must ensure that EMS CE activities are consistent with the CE needs of EMS personnel as indicated by the needs assessment. This requirement applies to Non-medical organizations as well.

The committee must review all participant evaluations and other information submitted by students, make prompt revisions to the activity suggested by the results of these evaluations, and document these actions in their meeting minutes.

The committee must ensure that all accredited CE activities are reviewed and updated at least every three years (more often if needed), assigned a current activity number (a number that has as its first two digits the year in which the update is done), and entered as a new activity in the AMS.

For planning and approval of programs primarily intended for non-EMS providers, the committee must include at least one EMS provider who reviews the activity for its applicability to EMS.

The committee must ensure that all EMS CE activities it accredits meet all ACCE S&R, including activities offered by the accredited organization itself and those offered by a cosponsored organization.

The committee must require that each application for approval from a cosponsored organization be submitted on the appropriate ACCE application form and kept on file in the office of the accredited institution for three years.

The committee must require that documentation of the planning process is kept on file for all activities offered by the accredited organization.

Meetings

The committee must meet at least twice a year, in person or by video conference, to review the accredited organization's overall EMS and non medical CE programs relevant to ACCE organizational accreditation requirements. Other meetings may take place in person, via teleconference or videoconference. Regardless of the meeting venue, minutes must be taken that record the date, venue, those present, the items discussed, assignments made, and actions taken. These minutes must be approved by the committee at its next meeting, kept on file for at least six years, and be available for review upon request.

Co-Sponsored Activities

Co-sponsored organizations refer to organizations that submit activities for accreditation by a ACCE-accredited organization. The ACCE-accredited organization is responsible for supervising such activities so that the activity is in compliance with the applicable accreditation standards specified in this document.

If the organization chooses to award accreditation to an activity offered by another organization, that activity must be fully compliant with ACCE accreditation standards, and the organization must monitor the activity to ensure that compliance. In addition, it must submit a Co-sponsorship Request Form for Accredited Organizations to ACCE headquarters for approval before the organization agrees to cosponsor an activity. ACCE views a cosponsored activity just as it views those offered by the accredited organization itself. Failure to properly enforce ACCE accreditation standards for these activities may result in a fine, loss of organizational accreditation and/or loss of eligibility for accreditation for individual activities.

Virtual Instructor Led Training (VILT) Activities

Organizational Requirements

Only those organizations that hold current approval as a ACCE accredited organization may offer VILT activities. In addition, each VILT activity must be reviewed by ACCE before it is offered to students. A beta test using actual students to validate the number of CEH assigned to the activity must be performed.

VILT programs are given an “F5” course designation. F5 denotes a live class that is held and administered by a live instructor in real time. F5 courses can never offer a presentation of previously recorded content.

Delivery Platform Requirements

Computer network and internet access equipment necessary to ensure advertised accessibility must be maintained and supported properly and allow for:

- Electronic storage of test results, scores, and other evaluation materials.
- Storage for three years and are adequately protected with appropriate backup and security from unauthorized access.
- Student accessibility of all browsers, plug-ins, and technical requirements prior to the class.
- Display of the real-time presentation of instructional graphics, interactive polling, instructor feedback and other items made necessary by the specific delivery platform.

Instructor/learner interactions must be possible in real time via simultaneous visual and audio communication during the session. Chat-based interfaces may be used for housekeeping or support actions, but all learning activities must support real time audio. The delivery platform must track the total time spent in the learning session and provide a method of generating reports verifying attendance and activities for each participant.

Marketing

Marketing materials for an activity must communicate the following:

- A clear, concise description of the activity.
- The overall goals for the activity.
- Prerequisites, if applicable.
- A statement of the number of CEH associated with the activity.
- Date, time and location, including how to access the activity with URL, directions and maps, as applicable.
- All scheduled instructional personnel.
- Fees for the activity.
- Information about travel, lodging and meal services, if applicable.
- A complete activity schedule, received by potential participants prior to the activity, meeting the following criteria, where applicable:
 - The activity topic(s), location, and date(s),
 - The title for each session with date and time,
 - All confirmed speakers and other instructional personnel, and the overall goals and objectives for the activity.

Additional Standards for International Organizations:

Organizations headquartered outside of the United States must meet the standards and requirements outlined in this manual. All application materials and participant materials must be submitted in English.

Approval of Appropriate Government Entity

The International Organization (IO) must submit evidence of a relationship with the government authority responsible for EMS, (e.g., Department of Health, Ministry of Health, Ministry of Education, etc.). This approval may be in the form of a letter, or any other appropriate documentation signed by an appropriate person and will be kept in the organization's ACCE accreditation file. ACCE may, at its sole discretion, require accredited organizations to verify this reference on an annual basis.

Section Three: Complaint Review and Disciplinary Policy

Definitions

Activity: Any type of continuing education offering.

Activity Sponsor: The sponsoring institution, organization, agency, association, corporation, hospital, or other appropriate continuing education (CE) provider offering ACCE-accredited continuing education.

Criteria: Any other published rules, regulations, conditions, standards, criteria, terms of accreditation, policies, or procedures of ACCE, however titled. Day: A calendar day, including weekends.

Executive Committee: The committee appointed by the chairman of the ACCE board of directors as set forth in the ACCE by-laws.

Penalty Provisions

The ACCE board of directors reserves the right to review and investigate any complaint or credible evidence of any alleged violation of the Conditions of Accreditation, signed by the activity sponsor upon submission of an application for accreditation, or any other ACCE criteria. When a violation has been found to have occurred, ACCE reserves the right to deny, suspend, or revoke the relevant accreditation. In lieu of revocation, ACCE may provide the activity sponsor with an opportunity to enter into an agreement that would include a plan for compliance and payment of one of the following penalties. Failure of the activity sponsor to successfully complete the terms of agreement, including payment of the penalty, must result in revocation.

- A penalty payable within 30 days of billing, in an amount not to exceed \$5,000 to cover the costs to ACCE to correct any problem caused by the violation; or,
- A penalty, payable within 30 days of billing of 1.5% interest per month on the amount of fees owed if the violation is failure to pay the appropriate fees; or,
- A penalty, payable within 30 days of billing of ten (10) cents per participant fee owed for failure to report ACCE accredited CE activity participants.

The ACCE board of directors must utilize the following procedure when determining whether any such disciplinary action is appropriate.

Compliance with Review by ACCE

Each activity sponsor must comply with a written request for information from a member of the ACCE board of directors and agree to participate in a review of any complaint or alleged violation of ACCE's Conditions of Accreditation or Standards & Requirements to assist the ACCE board in determining if there exists a violation of the Conditions of Accreditation or Criteria. In the absence of any response from the activity sponsor within 30 days of ACCE's written request, ACCE will assume such complaint or alleged violation has merit and initiate the investigation and review process noted below. Failure to respond adequately to any review or request for information must be considered as additional evidence in support of the complaint or alleged violation.

Reasons for Review, Denial, Suspension, Revocation or Fine

The ACCE board of directors must utilize its professional judgment in determining whether denial, suspension, revocation of accreditation, or a fine in lieu of revocation is appropriate. Reasons for such an action must include, but not be limited to, the following:

- Material misrepresentation, whether intentional or unintentional, in the application which, if known at the time of review, would have resulted in denial of accreditation.
- Fraud in written information provided to ACCE during the procurement of any ACCE accreditation as an activity sponsor (examples include, but are not limited to, falsifying history as an activity sponsor, falsifying credentials, etc.).
- Fraud in activity content during the procurement of any ACCE accreditation of a continuing education activity (examples include, but are not limited to, plagiarism of activity materials).
- Intentional or unintentional failure to comply with any Conditions of Accreditation and Attesting Statement, as specified in the signed application.
- Failure to comply in a timely fashion with an audit or review as requested by the ACCE board of directors. Such a request must allow a reasonable time for scheduling and completion.
- Failure to remit fees as required by ACCE and as agreed upon by the activity sponsor in the signed application.
- Refusal to participate in a review to determine whether the activity sponsor is complying with the Conditions of Accreditation and Attesting Statement as agreed upon in the signed application.
- Refusal to submit a plan of correction when requested by the ACCE board of directors after the investigation and complaint review process or completion of the disciplinary process.
- Failure to remit any fine(s) or adhere to any corrective measures or failure to complete the disciplinary process.

Investigation and Complaint Review

ACCE may investigate upon receipt of a complaint or credible evidence of a violation of the Conditions of Accreditation. The investigator must be a member of the ACCE board or their designee. A designee may not be:

- Any person who is a competitor of the activity sponsor whose activity or accreditation(s) is under review for possible suspension or revocation.
- Any employee of ACCE.
- Any individual who has received fees or payments from ACCE during the prior three years.
- Anyone else who has a conflict of interest with the activity sponsor.

An investigation may include, in no specific order: notifying the activity sponsor in writing by overnight delivery of such complaint or alleged violation requesting a response within 30 days of the date of ACCE letter; requesting an explanation of the matter; requesting the provision of information concerning the complaint or alleged violation; and/or offering the activity sponsor an opportunity to discuss and resolve the complaint.

The investigation and communication must provide both ACCE's investigator and the activity sponsor with an opportunity of a period of 90 days to understand the issue(s) and to explore potential resolutions of the issue(s).

At the completion of the investigation, the ACCE board of directors must provide the activity sponsor with a summary letter indicating the resolution of the issue or, if not resolved, detailing at a minimum the complaint or concern, the investigator's findings, suspicions and/or conclusions, and a list of the relevant information that was requested and was then provided, denied, or not obtained.

If a resolution has been agreed to by the activity sponsor and ACCE, the letter must restate the resolution, and the matter must then be closed with no further action necessary. The activity sponsor must be advised of this fact.

If the resolution is not reached, the activity sponsor must be given 30 days from the date of the letter from ACCE to submit a written response to ACCE's letter and conclusions. ACCE need not wait for such a written response before providing information to the chair of the board.

If the investigator determines that discipline or other corrective action may be required, the investigator must provide the summary letter and any supporting documentation to the chair of the board, who must then provide such documents to the executive committee.

- The executive committee must review the same and decide whether ACCE has followed its required policies leading to their involvement.
- The alleged violation warrants further discussion by the full board.
- There has been adequate resolution to the violation.
- Any mitigating factors must be considered.

The executive committee may terminate the process at any time if, in its judgment, the alleged violation does not warrant a hearing, or if adequate resolution has been reached. Otherwise, the executive committee may proceed to the disciplinary process.

If the executive committee desires to proceed, all documents will be provided to the full board of directors.

Disciplinary Process

After review or investigation of the complaint, allegation, or credible evidence, if the ACCE board determines that a suspension or revocation must be imposed, ACCE must take the following actions in an effort to provide due process to the accredited activity sponsor.

ACCE must provide a written notice to the activity sponsor that the activity sponsor is being charged with a violation of the Conditions of Accreditation and/or any other ACCE criteria. The notification must state the violation in terms which must be understood by the activity sponsor. The written notice must also provide the process to be followed, including the following rights:

- To be present in person or by conference call or other mutually agreeable form of communication at the hearing.
- To present and cross examine witnesses; and
- To present evidence in support of its defense or to mitigate the consequences of the violation.

Such a written notice must provide the activity sponsor with 15 days from the date of mailing as evidenced by the postmark date to appear before a hearing panel and may be adjourned for good cause shown upon the sole discretion of the ACCE board of directors. ACCE must have the right to determine the location of the hearing; however, a telephone conference call will always be available. In the event a meeting site is selected, hearing participants, including the activity sponsor, may attend by phone if desired, except that the ACCE chair must appear in person.

ACCE must provide a hearing to the activity sponsor. The hearing panel must be the fact finder and must determine:

- Whether ACCE has followed its required policies leading to the hearing.
- The facts of the underlying allegation(s).
- If the alleged violation(s) has merit.
- If there has been an adequate resolution to the violation(s).
- Any mitigating factors.

The hearing panel may recommend but not impose a penalty. There must be no rules of evidence for the hearing. The hearing must provide the opportunity for the charges to be presented, for testimony to be taken if necessary, and for the activity sponsor to present a defense if the activity sponsor desires to do so.

The chair of the board or the chair's designee, who must be one of the executive committee members, excluding any ACCE employees, must chair and appoint a hearing panel of up to three people, comprised of the chair or his/her designee and either ACCE reviewers or other people knowledgeable in the related field or in the ACCE accreditation process. The members of the hearing panel must not consist of:

- Any person who is a competitor of the activity sponsor whose activity accreditations are under review for possible suspension or revocation.
- Any employee or director of ACCE.

Any individual who has received fees or payments from ACCE during the prior three years. There must be no appeal to the members of the hearing panel. After the conclusion of the hearing, the hearing panel must render a proposed statement of facts within seven days of the date of the conclusion of the hearing. The proposed statement of facts must state the violation and any related findings of the panel. The proposed statement of facts must be provided to the activity sponsor in writing, sent by certified mail, who must then have seven days after delivery of the proposed statement of facts to deliver (meaning to have sent via certified mail to ACCE's office) a dispute or concurrence of the proposed statement of facts in writing sent certified mail. The hearing panel must then have up to seven days to revise the proposed statement of facts as deemed necessary or to leave the decision as is. The hearing panel must provide its final Finding of Facts in writing, sent by certified mail, to the activity sponsor and to the ACCE board of directors.

The activity sponsor may submit a response to the final Findings of Fact for consideration by ACCE. Such findings must be submitted to the board within five days of the activity sponsor's date of receipt of the final Findings of Fact. Mitigating factors may also be submitted to the board. Before the board convenes, it must inquire whether a response will be submitted by the activity sponsor.

No more than 10 days after the delivery of the final Findings of Fact, the board must then convene by phone or in person to decide on the matter. The board must determine if:

- ACCE has followed its required policies leading to a board decision.
- The violation warrants a disciplinary action.
- There has been adequate resolution to the alleged violation.
- Any mitigating factors must be considered.

The board may terminate the meeting at any time if, in its judgment, the alleged violation does not warrant a meeting or if adequate resolution has been reached. Otherwise, the board may impose a penalty. A majority of the seated members of the board must be necessary to impose any penalty. Such a penalty must be consistent with the Findings of Fact. Written notice of the penalty must be provided to the entity within three days of the date of the decision of the board. There must be no internal appeal from the decision of the board.

An activity sponsor must comply with the terms of the penalty within 14 days of the notice of the penalty, and no penalty must become effective until the passage of the 14th day.

Waivers and Jurisdiction

Activity sponsors hereby waive any right to seek or obtain attorney fees, costs, or other awards upon successfully obtaining an order or award from a court regarding the penalty imposed by ACCE. This waiver must not apply to the finding that ACCE intentionally violated the due process rights of the activity sponsor.

ACCE has consented to jurisdiction in a federal court in Florida. Any proceeding brought pursuant to this policy in a court of any jurisdiction must be held in Florida.

Summary

ACCE, by its charter, maintains the standards for the delivery of EMS continuing and non-medical education. These standards include requirements for active medical direction, active directors knowledgeable in the field for non-medical courses, valid post-tests, quality infrastructure, sound educational design including delivery methodology, marketing, fees, evaluation, student record keeping and data reporting.

ACCE accreditation exists so that providers have access to high quality, standard-driven continuing education activities and are awarded credit for participating in such activities. It is of the utmost importance that each and every EMS provider gets credit for the CE they complete. Furthermore, the quality of the presentation must meet or exceed the investment the student makes to view and participate in the activity.

ACCE expects that all continuing education content is:

- Relevant for the intended audience
- Medically accurate
- Properly referenced
- Original work that is correctly cited
- Grammatically correct and spelled accurately
- Not misleading
- It is approved by a medical director or expert for non-medical courses.

ACCE also has established standards for:

- Item writing
- Continuing Education Hour assignment
- Distributive Education standards
- Plagiarism
- Confidentiality
- Content gating

The ACCE board of directors consists of nine voting members and their alternates. ACCE will serve as the recognized leader for continuing education in EMS, promoting its evolution and growth through development of continuing education standards, encouragement of innovative learning solutions, support of continuous learning opportunities and the assurance of optimal learning experiences to prepare all EMS providers for their professional challenges.

Distributed Learning Policy

Introduction

ACCE recognizes that Distributed Learning (DL) is an instructional model that allows instructors, participants, and content to be located in different locations so that instruction and learning may occur independent of time and place. The distributed learning model can be used to offer education and training in real-time settings such as virtual classrooms with an instructor in a separate location (e.g., via television, satellite, telephone, or internet); through recorded programs; or in combination with traditional classroom-based EMS continuing education.

While a variety of distribution methods are available to the EMS educator, ACCE is particularly aware that the internet is an efficient method to rapidly distribute educational resources and information. It is expected that as technology evolves, the scope and types of available DL offerings will continue to expand.

Policy

To support the growth in development, acceptance, and quality of EMS continuing education using DL methods, the following policies are applicable to the ACCE review and accreditation process for eligible organizations and individual activities that incorporate DL methods.

ACCE will emphasize and promote organizational accreditation rather than activity-by activity review of CE programs that use distributed learning methods.

Organizational accreditation will be based on the applicant organization's self-assessments of its infrastructure and process for distributed learning activity production, participant support and quality management. The self-assessment will follow a schedule provided by ACCE and will require submission of sample curricula. Organization accreditation may include a site visit by an ACCE team qualified to assess compliance with distributed learning structure, process, and outcome requirements.

Each type of distributed learning methodology involves the use of different structural and process methods that will be reviewed separately on self-assessment and during site visits. Therefore, organizations will be accredited to offer DL continuing education in one or more of the following strategies: print, Internet, videotape, CDROM/DVD, satellite, podcasts, and television.

Unaccredited organizations will submit all activities for ACCE review prior to delivery. ACCE will provide forms for submission that will focus on the organization's infrastructure and process for DL activity production, participant support and quality management. The entire activity must also be presented for review prior to delivery. A key requirement for review will be the specification of the target audience level of training. The use of out-of-level content in activities must be clearly justified.

ACCE requires applicants to identify each learning objective and the following supporting information:

- The prerequisites required to understand the material related to a specific objective.
- Learners can ask and receive timely answers to questions regarding activity content. CE providers must provide a mechanism for instructors (or instructor proxy) and learner to interact (synchronously or asynchronously) regardless of what type of DL methodology is being used, for a period of no less than 30 days after the learning has taken place.
- The instructional content related to each learning objective. Learning strategies and learning activity the designer is using to facilitate meeting each learning objective. Assessment measures for each learning objective (i.e., test questions for each learning objective must be presented.) Test questions that simply require learner recall of the content by means of a rote memory response must be limited to no more than 50% of all test questions.
- References used to support instructional content used for each learning objective.
- Descriptions of the rationale for establishment of any specific cut-off score for passing the assessment tool.
- The number of hours and/or minutes it takes for the average person to finish the lesson must be based on actual test usage of the lesson or activity.

DL providers must develop a mechanism that ensures that participants complete all content including videos, slide presentations, case studies and other delivery platforms before the user is allowed to access the summative post-test. Applications for accreditation that do not employ “gating” of the content in this manner will not be considered. ACCE accredited providers who are found not to comply with this requirement risk suspension of their accreditation.

Item Writing Standards

Introduction

Multiple-choice tests are widely viewed as the most effective and objective means of assessment. Item development is the central component of creating an effective test, but test developers often do not have the background in item development. ACCE recognizes that there is a broad spectrum of item (test question) writing abilities among CE providers. Although many currently available EMS CE offerings provide excellent quantifiable posttests, many do not.

This inequity exists for many reasons and ultimately creates a lack of standardization of continuing education activities and overall uncertainty about the validity and reliability of CE knowledge assessments. ACCE offers a compilation of accepted item writing standards. It intends to hold applications for ACCE accreditation to these standards. ACCE holds the right and responsibility to reject applications for continuing education accreditation that do not meet the guidelines outlined herein. Post-tests that are deemed unacceptable must be revised and resubmitted until all standards are met.

ACCE fully recognizes that this document does not and cannot replace or supplant formal preparation in educational design. ACCE and its member organizations strongly suggest that CE providers seek out instructor coordinator or educational design training from their state EMS office, local educational institution or the National Association of EMS Educators.

Policy

All multiple-choice test items must be written to assess knowledge of meaningful facts and concepts, not trivial information. Each item must be specific enough to pose only one question or problem and each response must be related to that question. Each exam item must be kept independent so as not to reveal the answer to another item in the wording of that item. “True or false” questions do not test the participant’s understanding of a concept or mastery of subject matter, thus will not be accepted.^{1, 9, 10}

All multiple-choice items consist of two basic parts, the stem and the responses. The stem is the question that seeks a correct answer. The responses are suggested answers that complete the question asked in the stem. Only one of the responses can be the correct answer and the others are considered the distractors.^{1, 5}

Each stem must address only one problem or content area. The stem must be clear and verbally uncomplicated. It must provide enough information for the reader to anticipate the answer before reading the responses. Write test questions in a simple structure that is easy to understand. Because words can have different meanings depending on usage and context, be as accurate as possible in the choice of words.

The stem must be an incomplete statement or a direct question. The following are keys to constructing proper stems:

- Include in the stem all words that would have to be repeated in each of the responses. This way, the answer options can be short, making them less confusing and more legible.
- Negatively stated items should be avoided. Negatives in the stem usually require that the answer be a false statement. Because participants are likely searching for true statements, this may introduce an unwanted bias.³
- Keep the number of responses consistent. This helps learners remain focused on the tested information and not the test design itself.^{9, 10}

All incorrect responses should be plausible and attractive. Avoid using humor and superfluous wording as they indicate incorrect responses and fail to test the participant's knowledge of the subject matter. These types of give-away distractors detract from the test's validity. Make sure all of the wrong answer choices are completely reasonable. The following are keys to constructing proper stems:

- Keep responses uniform in length and devoid of unnecessary technical wording.
- Avoid making the correct response longer and more technical than the distractors. Often the longest answer is the correct one. If you cannot get all four responses to the same length, use two short and two long.
- Balance the placement of correct responses throughout the exam.
- "All of the above" and "none of the above" type answers never truly indicate if the participant knows the correct answers. "None of the above" answers indicate only that the participants recognize wrong answers. For this reason, questions that include "all" or "none of the above" response items will not be accepted.
- The correct response must clearly stand out as the one that experts in the field would recognize as the best answer.
- Distractors must represent unsafe practices or commonly held misconceptions.^{9, 10}

Test Validity

For a test to be valid, it must evaluate whether the students achieved the desired outcomes. For that reason, test questions must be directly related to the learning objectives outlined at the beginning of the presentation. ACCE requires a minimum of three post-test items per stated objective.²⁻⁶

Multiple choice questions are criticized for testing the superficial recall of knowledge. Test question writers should go beyond asking students to recall simple facts and basic information. Evaluate learners on their ability to explain cause and effect, assess and manage situations, and predict results. This ACCE standard is based on Bloom's Revised Taxonomy of Learning:

- No more than 25% of the questions may be at Bloom's Knowledge level (e.g. remembering facts, defining terms, stating basic principles).
- Another 25% may be at the comprehension level (e.g. understanding and explaining a principle, requiring learners to recognize a previously unseen example of a principle).
- The remaining half of all the post-test items must be at the application level or higher (e.g. requiring learners to apply a principle in a new context). ^{8, 11, 12}

References

1. Vacc NA, Loesch LC, Lubik RE, Writing Multiple-Choice Test Items that are Reliable and Valid. *American International Journal of Humanities and Social Science*. 2019;5:3:1-9.
2. Cohen AS, Wollack JA. *Handbook of Test Development: Helpful Tips for Creating Reliable and Valid Classroom Tests*. Testing and Evaluation Services, University of Wisconsin-Madison. Available at <https://testing.wisc.edu/Handbook%20on%20Test%20Construction.pdf>. Accessed April 1, 2020.
3. Kehoe J. Writing Multiple-Choice Test Items. Office of Measurement and Research Services, Virginia Polytechnic Institute and State University, Blacksburg. Available at <https://pdfs.semanticscholar.org/b5a3/81ec244832f8694e25347ccb33d11eef3976.pdf>. Accessed April 1, 2020.
4. Bothell TW. 14 Rules for Writing Multiple-Choice Questions. Brigham Young University, 2001 Annual University Conference.
5. Frary RB. More Multiple-Choice Item Writing Do's and Don'ts. *Practical Assessment, Research & Evaluation*, 4(11) 1994. Available at <https://scholarworks.umass.edu/pare/vol4/iss1/11>. Accessed April 1, 2020.
6. Kehoe J. Writing Multiple-Choice Test Items. *Practical Assessment, Research & Evaluation*. 4(9) 1995. Available at: <https://scholarworks.umass.edu/pare/vol4/iss1/9>. Accessed April 1, 2020.
7. Armstrong P. Bloom's Taxonomy. Vanderbilt University Center for Teaching Website. Available at <https://cft.vanderbilt.edu/guides-sub-pages/blooms-taxonomy/#2001>. Accessed April 1, 2020.
8. Brame C. Writing Good Multiple-Choice Questions. (2013). Vanderbilt University Center for Teaching website. Available at <https://cft.vanderbilt.edu/guides-sub-pages/writing-good-multiple-choice-test-questions/>. Accessed April 1, 2020.
9. Malamed C. 10 Rules for Writing Multiple Choice Questions. The eLearning Coach. Available at http://theelearningcoach.com/elearning_design/rules-for-multiple-choice-questions/. Accessed April 1, 2020.

10. Malamed C. Are Your Online Tests Valid? The eLearning Coach. Available at http://theelearningcoach.com/elearning_design/isd/are-your-online-tests-valid/. Accessed April 1, 2020.
11. McCowan, Richard C. Developing multiple-choice tests; tips and techniques: 1999 Research Foundation of State University of New York (SUNY)/Center for Development of Human Services. Available at <http://www.eric.ed.gov/PDFS/ED501714.pdf>. Accessed on April 1, 2020.
12. Adams NE. Bloom's taxonomy of cognitive learning objectives. NCBI Website. Available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4511057/>. Accessed April 3, 2020.

CEH Assignment Guidance

Purpose

This document provides guidance for ACCE reviewers in the determination of continuing education hour (CEH) assignments for Distributed Learning accreditation applications.

Background

ACCE is a continuing education (CE) accrediting body that services educational institutions, not-for-profit educational organizations and for-profit companies that provide emergency medical services CE.

ACCE recognizes that Distributed Learning (DL) is an instructional model that allows instructors, students, and content to be located in different, non-centralized locations so that instruction and learning occur independent of time and place. The distributed learning model can be used in combination with traditional classroom-based EMS continuing education, can operate independently as a traditional distance learning course, or can be used by educators to operate a virtual classroom through television, satellite, telephone, or Internet technology.

While a variety of distribution methods are available to the EMS educator, ACCE is aware that technological improvements and improved access to high-speed internet connections as well as smart technology and mobile computing have allowed more and more EMS personnel to benefit from education delivered via DL. Furthermore, the volunteer EMS community comprises greater than 90% of all EMS providers. These providers are often hindered from seeking CE hours by extended travel time from rural areas wherein attractive CE programs may be hours away. The ease and convenience of completing required CE from the comfort of one's home, station house computer, or mobile computing device makes DL-based CE programs increasingly attractive.

Unlike the traditional classroom setting, DL presentations may not be governed by an instructor. The presentation rate or content breadth cannot be immediately adjusted based on concurrent student feedback; nor can the student have direct contact with the presenter that allows for adaptation of the presentation to meet the student's needs. In the DL format, the rate of presentation/absorption and subsequent comprehension of the presented material is completely dependent on the reading comprehension skill-level of the student/reader.¹⁻³

Reviewers of DL accreditation applications are required to identify several requirements such as timeliness of references, well-defined objectives, course prerequisites, and retrospective feedback mechanisms. Reviewers are also asked to recommend the number of CE hours deemed appropriate for each presentation based on applicant request, length of presentation, and the time required for the reviewer to complete his/her assessment.

Rationale

By providing this document, the ACCE board of directors seeks to provide its reviewers with objective guidelines toward the assignment of CEH for DL applications.

Written word only CEH determination

Review of this application type and presentation format may be considered overly subjective as it is based on the reading speed and comprehension skill level of the reviewer and not of the average student or reader. The accomplishments and acknowledgements of individuals who are selected by ACCE's sponsoring organizations to become reviewers may also indicate well-developed reading and comprehension skills that may not be representative of typical EMS providers.

Each presentation is comprised of a finite number of written words that are "consumed" by the reader in a finite amount of time. On average, adults read between 150-250 words per minute.¹⁻⁶ Thus, a one-hour presentation will consist of roughly 8,000 words with appropriate charts, graphs and case presentations that support the written objectives and a 20-question post-test.

Current literature suggests that student interest and comprehension decrease dramatically after the first hour of any CE session. Therefore, any applicant requesting more than one hour's worth of CE will be required to provide justification for such by matching course objectives with additional content. Further, applications that request two or more hours should be broken up into hour-long presentations as "volumes" of the subject matter presented, e.g., advanced airway-1, advanced airway-2, etc. (see chart on page 54).

Degree of Difficulty Consideration

DL presentations have a varying degree of difficulty. A lesson on how to apply an arm splint is typically not as challenging as a presentation on 12-lead ECG interpretation. ACCE reviewers are asked to increase CEH assignments by 0.5 hours above the initial hour if the presented material can reasonably be considered complex and the objectives are supported by content. Lastly, DL presentations should include a posttest that complies with the ACCE item writing policy. Participants should add an additional minute for every question in the post-test (see chart).

Distributive Education Models

Print Documents: In instances where the number of written words is known or obtainable, hours will be based on the ability of adults to read between 150 and 250 words per minute. For non-electronic based documents, hours are assigned based on the description above (see chart).

Video/DVD and other Visual Media Presentations: Hours are assigned based on the actual running time of the presentation when watched by the reviewer of the materials plus one minute for each ACCE compliant post-test question (see Appendix B, ACCE Item Writing Standards).

On-Line Web-based Presentations such as satellite video or mobile device streaming video: CEH are assigned based on the actual time for the reviewer to complete the course/activity plus one minute for each ACCE-compliant post-test question (see Appendix B, ACCE Item Writing Standards).

CD-ROM Presentations: Hours are assigned based on the actual time for the reviewer to complete the course/activity plus one minute for each ACCE-compliant post-test question (see Appendix B, ACCE Item Writing Standards).

Virtual Instructor Lead Training: VILT activities that are provided in the VILT format can be assigned one minute for each minute of video plus one minute for each ACCE compliant post-test question. For example, a one-hour interactive session with a 30-question post-test can be assigned 1.5 CEH.

Total CEH Assignment: Assignment of total CEH is calculated by adding the amount of time to complete the course/activity plus any allowance for increased level of difficulty of the material plus the amount of time required to complete the post-test. For example, a video presentation that takes 45 minutes to watch followed by a 15-question assessment would be assigned one CEH.

Competency-based Learning and CEH Assignment

Competency is defined in multiple ways by multiple sources. Competency is defined as the quality of being adequately or well-qualified physically and intellectually or having great facility, capacity and ability; the quality of being able to perform; and a quality that permits or facilitates achievement or accomplishment. In 2007 the Accreditation Council for Graduate Medical Education (ACGME) released “Integrating the Core Competencies: Proceedings from the 2005 Academic Assembly Consortium.” Although addressed specifically at medical residency programs and not Emergency Medical Services, the authors identified core competencies that should be at the heart of every health care profession. They include patient care, medical knowledge, communications and interpersonal skills, professionalism, system-based practice, and practice-based learning.⁶

Richard Zollinger, vice president of Learning, Central Piedmont Community College, described competency in education as “Communication, critical thinking, personal growth and responsibility and information technology literacy”.

While there is no clear model that describes what competency-based, accredited, continuing education will look like, there is a strong push from the National Highway Traffic Safety Administration (NHTSA) and the National Registry of Emergency Medical Technicians (NREMT) toward competency-based original and continuing education. In an article in the Journal of Emergency Medicine, De Lorenzo and Abbott concluded that a focused and directed continuing education program that emphasizes skill practice in key resuscitation areas can improve skills performance. After focusing on retraining the study found that the subjects’ skills increased.⁷

Summary

Continuing education can be more than it has become. Student-focused learning driven toward self-improvement and professional development can easily become the future of continuing education. ACCE embraces the concepts of excellent communication, professionalism, critical thinking, personal and professional development, case-based learning, excellent clinical skills, excellent clinical decision making and patient-focused care. Most of these critical components of competency-based learning are constructed on the educational foundation that ACCE holds dear.

This includes valid needs assessment, current and relevant content that is expertly referenced, educational innovation, valid CEH assignments, validated post-tests, and involvement of an active and qualified medical director.

References

1. Victor S. Distributed Learning: A flexible learning model for a global economy. Obsidian Learning. February 2016. Available at <https://www.obsidianlearning.com/assets/white-papers/distributed-learning-a-flexible-learning-model-for-a-global-economy.pdf>. Accessed April 3, 2020.
2. Bailey, R.W. Human Performance Engineering: Designing High Quality Professional User Interfaces for Computer Products, Applications and Systems. Upper Saddle River, NJ. Prentice-Hall. 1996.
3. Bailey, R.W. and Bailey, L.M. Reading speeds using RSVP, User Interface Update – February 1999. Available at http://www.humanfactors.com/newsletters/screen_fonts.asp#.U_zXTvldXt. Accessed April 1, 2020.
4. Williams, J.R. Guidelines for the use of multimedia in instruction, Proceedings of the Human Factors and Ergonomics Society 42nd Annual Meeting, Santa Monica, CA. 1998:1447-1451.
5. Lewis, J.R. (1999). Effect of error correction strategy on speech dictation throughput, Proceedings of the Human Factors and Ergonomics Society, Chicago, IL. 1999:457-461.
6. Stahmer, Sarah, MD, Stephanie Ellison MD etc. al, Academic Emergency Medicine 2007; 14:80–94 by the Society for Academic Emergency Medicine. Available at <https://www.ncbi.nlm.nih.gov/pubmed/17079791>. Accessed April, 2020.
7. De Lorenzo Robert A, MD, FACEP, Cynthia A. Abbott, RN, PhD. “Effect of a Focused and Directed Continuing Education Program on Prehospital Skill Maintenance in Key Resuscitation Areas.” The Journal of Emergency Medicine. 2007;33:3:293-297.

Co-Sponsorship Request Form for Accredited Organizations

Name of ACCE-accredited organization:	
Name of organization requesting accreditation:	
Title of activity:	
ACCE activity number:	
Date(s) of activity:	
Activity format:	
Number of CEH requested:	
Name of person responsible for maintaining ACCE accreditation standards:	
Mailing address:	
Phone number:	
<p>By my signature below, I acknowledge responsibility for the above-named activity being completely compliant with all ACCE Standards and Requirements including, but not limited to, approval by our in-house program committee, review by our medical director, attendance verification, and report of course completions to ACCE Accreditation Management System. In addition, I understand that failure to ensure that ACCE Standards and Requirements are met may result in a fine, loss of organizational accreditation and/or denial of accreditation for individual activities.</p>	
Signature	Date

Plagiarism Policy

Description of Issue

ACCE was formed to improve and standardize the delivery of continuing education for practicing EMS providers. ACCE is a professional organization that holds dear the concepts of professionalism and originality of work. This document has been developed for all ACCE-accredited providers, accreditation applicants and reviewers to clarify ACCE's policy on plagiarism. This policy also provides prohibition on plagiarism.

Definition

According to the Merriam-Webster online dictionary, to "plagiarize" means: to steal and pass off (the ideas or words of another) as one's own; to use (another's production) without crediting the source; to commit literary theft; to present as new and original an idea or product derived from an existing source.¹

In other words, plagiarism is an act of fraud. It involves both stealing someone else's work and lying about it afterward. The act of plagiarism is of particular interest to ACCE, because it is a means of gaining ACCE accreditation through "Fraud in course content during the procurement of any ACCE accreditation of a continuing education activity."²

Policy

ACCE has no legal obligation to detect or report plagiarism. However, ACCE will check ACCE-accredited courses and accreditation applications for originality and proper citation/referencing practices. Any article, course, presentation or other EMSCE offering that is submitted to ACCE for accreditation is expected to be original work. ACCE requires that all non-original work be properly cited.

ACCE will reject any application for accreditation that is not original, is found to be plagiarized and/or is not properly cited or referenced.

ACCE maintains the right to withdraw accreditation from any work that is found to be not original and not properly cited/referenced or is plagiarized. Work that is not original but is properly cited to the original author is acceptable.

ACCE is not liable for acts of plagiarism discovered or not discovered by its review process.

Upon recognizing potential plagiarism in an ACCE application, the ACCE reviewer shall:

- Document his/her findings.
- Record as much information as possible.
- Contact the ACCE office and report the incident.

References

1. What is Plagiarism? Plagiarism.org website. Available at <http://www.plagiarism.org/plagiarism-101/what-is-plagiarism/>. May 17, 2017. Accessed April 1, 2020.
2. 2020 ACCE Accreditation Manual, Section Three: Complaint Review and Disciplinary Policy: Complaint Review and Discipline Policy, Reasons for Review, Denial, Suspension, Revocation or Fine.

Certification and Card Bearing Courses Policy

Introduction

ACCE recognizes that EMS providers and non-medical providers are required to maintain certification in a number of disciplines, including:

- CPR for Health Care Providers (CPR)
- Advanced Cardiac Life Support (ACLS)
- Pediatric Advanced Life Support (PALS)
- Advanced Medical Life Support (AMLS)
- Advanced Trauma Life Support (ATLS)
- Pediatric Education for Prehospital Professionals (PEPP)
- Advanced Pediatric Life Support (APLS)
- Pediatric Emergency Assessment, Recognition and Stabilization (PEARS)
- Non-Medical careers may require specific credits for renewal.
- EMS providers frequently maintain these certifications simultaneously.

EMS and non-medical providers often maintain these certifications through distributive learning. There are several ACCE-accredited organizations that offer these certification courses. The most popular are ACLS, PALS and CPR, and include practical skills evaluation as a required component. For example, it is difficult to know whether EMS providers have mastered CPR without having a qualified instructor observing them perform the component psycho-motor steps that comprise that skill. Practical skills evaluations are a necessary part of most, if not all, certification courses.

Because of the volume of accreditation applications for certification courses, ACCE requires that CE providers who apply for accreditation of certification courses and the ACCE reviewers who evaluate them adhere to the following requirements:

- The didactic content of such courses must be original work and properly referenced.
- Safeguards must prevent the user from skipping past the content to proceed directly to the final written post-test.
- The Continuing Education Hours assigned to each of these courses must be an accurate reflection of the time required to complete the content area successfully.
- CE providers of certification courses must put into place a credible, documented process for practical skills exams for all participants.

- A reviewable practical exam skill sheet must be available for review at the time of application.
- Although completion certificates and CEHs may be awarded upon completion of the didactic portion of a certification and the accompanying post-test, certification cards must not be accessible until such time as all content areas, written post-tests, and practical skills exams have been completed.
- Logos on certification cards must be easily distinguishable from those of other organizations that offer certification courses.
- Quantifiable evaluation forms must be completed by each participant so that content and practical skills exams can be objectively evaluated by students/participants.

If an organizationally accredited CE provider offers a certification course at the time it applies for organizational accreditation, this course must be reviewed as part of the application process. If the organization does not offer such a course at the time of application but decides to do so at some point during the three-year accreditation period covered by the application, it must advise ACCE and allow time for a review originated at ACCE headquarters before making the course available to students.

Document Check List for Organizational Accreditation

- Letter of support from CEO
- Letter of recommendation from State EMS Office or Agency for non-medical
- Job description for person responsible for maintaining ACCE accreditation
- Policy for maintaining medical devices and consumable supplies
- Inventory of equipment
- Organizational Mission Statement
- Organizational Chart
- CV of Medical Director
- Applicants' agreement with EMS Medical Director
- Physician Medical Director Job Description
- Example and data from most recent needs assessment
- Conflict of Interest Form
- Example of Summative Test
- Activity evaluation form
- Schedule of individual session
- CVs of all members of the program committee
- Rules and procedures concerning how the committee votes to approve activities
- Program (education) committee minutes from the previous 12 months
- CVs and Bios for the faculty for one activity
- Using an activity that your organization offers, attach materials from the planning process or program committee minutes for that activity in which you demonstrate compliance with the requirements outlined in section 2D
- Marketing materials from at least three activities
- Sample certificate
- Written policy signed by the CEO that describes how the organization collects the required information for each EMS provider

Express Consent Policy

Adopted by ACCE Board of Directors, January 2025.

Obtaining Express Consent is a basic ethical obligation and frequently a legal requirement for anyone using a person's image, likeness or a video for the purposes of producing and distributing continuing education activities. Express Consent is the process by which sufficient information is provided in writing to a potential participant, in a language which is easily understood by the participant, so that the individual can make a voluntary decision as to whether or not that person will allow the use of their image, likeness or a video of them, and then obtaining a signature on the written explanation/disclosure for the use of the information.

Specifically, regarding images, likenesses and videos gathered on an EMS scene during direct patient care, you must describe your process for obtaining Express Consent for participation to the individual(s) involved and provide the written document to be provided containing all disclosures. The process you employ to obtain Express Consent will depend on the setting and your participant population but it must be a written disclosure at a minimum. Consent to participate in a continuing education activity can only be obtained in writing by people who have the capacity for decision making, understanding the consequences of participation, and freely granting their consent for use of their imagery, story, and personal information. Images, likenesses or videos of people who cannot provide written consent, as described herein, must not be used.

If you will be recruiting from a non-English speaking population, the Express Consent documents should be translated into the language of that person.

- The typical Express Consent process takes place in person. A potential participant or Legally Authorized Representative (LAR) is provided with a physical copy of the consent form during the consent process. The educational video team will discuss the educational activity in depth with the potential participant/LAR and answer any questions they may have. Sufficient time will be provided for the individual/LAR to consider participation, including the opportunity to discuss the activity with anyone outside of the education team. If the participant/LAR chooses to take part in the activity, a written signature and date is obtained from the participant/LAR, as well as the person obtaining consent, and a signed/dated copy is provided to the participant.
- Electronic Express Consent that captures an electronic signature and date from the study participant as well as the person obtaining consent, often referred to as "eConsent", can take place either in person or remotely. may be useful in developing your electronic/online Express Consent process, including verifying the identity of participants that are consented electronically.

It is considered the best practice to document in the participant file, that the Express Consent process has occurred, and that the participant was provided a copy of their signed consent document.

For the purposes of this application for accreditation, please provide a copy of your Express Consent document for consideration.

FEE Structure

Non-Refundable Application Fee: \$150 USD

Annual Accreditation Fee: \$1500

Single Course Approval: \$400

*** Please note that the ACCE Accreditation Application Fee covers our administrative cost by reviewing your application. If your application for accreditation is not successful, and accreditation is not granted, your application/review fee will not be refunded.**