

STATEMENT OF PURPOSE

To meet the statutory requirements of the EMS Act, Section 24-10B-7 B, NMSA 1979.

To promote the safe and effective practice of EMS by graduates of NM Approved EMS training programs.

To provide guidance for developing new EMS education programs.

To facilitate continued oversight and measurable improvement of established EMS training programs. This will occur via an annual retrospective review process. Annual reporting required for continued approval.

To provide criteria for the evaluation for approval of new programs as well as ongoing approval of established EMS training programs.

To grant recognition and approval that an EMS training program is meeting the required minimum standards as determined by the JOE.

To ensure that EMS training programs are meeting minimum standards of EMS Programs, and take appropriate action when standards are not being met.

To establish a list of NM JOE approved training programs.

To establish eligibility of approved EMS program graduates to apply for licensure by examination.

To take corrective action or remove JOE approval from an EMS training program, at any time, if they fail to meet the required minimum standards of EMS training programs as determined by the JOE.

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PART ONE: APPROVAL**1-1 TYPES OF APPROVAL**

To be a New Mexico Approved Training Program, a program must be CoAEMSP accredited, or hold a Letter of Review from CoAEMSP, and JOE Approved.

Section A-1 Initial approval of **New Programs** (no previously admitted students within the past six (6) months under the umbrella of another JOE Approved Program)

1. Initial approval shall be granted as outlined in Part Two and Part Three. Initial approval is valid for a maximum two years from the date of approval with one additional year with approval by the JOE. However the program must demonstrate progression towards accreditation.
2. Programs must have Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) accreditation recommendation for approval, as demonstrated by a Letter of Review from CoAEMSP or Accreditation from Commission on Accreditation of Allied Health Education Programs (CAAHEP).
3. The program shall have initial approval prior to recruiting and enrolling students into the EMS program.
4. A self-evaluation report of compliance with the “Minimum Standards for EMS Programs,” Part Three, shall be submitted to the JOE and an INITIAL site visit shall be made by representatives of the JOE for consideration of continued approval.

Section A-2. Initial approval of Established Program (students currently admitted as a satellite of a JOE Approved Program)

1. Initial approval shall be granted as outlined in Part Two and Part Three. Initial approval is valid for a maximum two years from the date approval, with one additional year with approval by the JOE. However the program must demonstrate progression towards accreditation.
2. Programs must have CoAEMSP accreditation recommendation for approval, as demonstrated by a Letter of Review from CoAEMSP or Accreditation from CAAHEP.
3. The program may begin recruitment of students during the approval process with the consent of the parent program. Students must be informed of the program’s approval status. Students will be considered enrolled in the program only after initial approval.
4. A self-evaluation report of compliance with the “Minimum Standards for EMS Programs,” Part Three, shall be submitted to the JOE and an EVALUATION site visit shall be made by representatives of the JOE for consideration of continued approval.

Section B. JOE Approval of CAAHEP Accredited programs

1. Programs which have received accreditation from CAAHEP shall file evidence of

accreditation to the Chair of the JOE, and thereafter shall file notice of any change in program accreditation status and report from CAAHEP with ten (10) working days of notification. The JOE shall grant approval based upon evidence of such accreditation.

2. Programs holding approval based upon national accreditation are also responsible for complying with Part Three, “Minimum Standards for EMS Programs.”
3. Out of state CAAHEP accredited programs seeking JOE approval would need to proceed as a **New Program** under this process.

Section C. Conditional Approval

1. Any EMS education program may be placed in a conditional approval status when there is evidence of substantial non-compliance with the “Minimum Standards for EMS Program” as specified in Part Three of these policies.
2. The following situations are cause for review and a site visit by the JOE:
 - a. Complaints relating to violations of the “Minimum Standards for EMS Programs” in Part Three.
 - b. Denial, withdrawal or change of program accreditation agency or general academic accreditation agency. Or major changes in the sponsoring agency or withdrawal support to the program.
 - c. Failure to obtain JOE approval of changes that require approval of the JOE under Part Four, “Program Changes.”
 - d. Providing false or misleading information to students or the public concerning the EMS program.
 - e. Continuous disruptions in retaining a qualified director or faculty, resulting in disorganization and breakdown of supervision and teaching of students.
 - f. Non-compliance with the program’s stated philosophy, objectives, policies, and curriculum resulting in unsatisfactory faculty/student achievement.
 - g. Less than an aggregate passing rate of 70% of program graduates, of those who attempt the exam, of the state or national written and practical licensing examination, for two (2) consecutive years. Aggregate is defined as within three (3) attempts. Programs that fall below the aggregate passing rate will be reviewed on a case by case basis.
 - h. Failure to provide clinical experiences necessary to meet the objectives of the EMS program.
3. When a program is placed on conditional approval:
 - a. The JOE Chair will send to a letter to the program, with a copy to appropriate higher-level administrator (Provost, Dean, President, or CEO):
 - i. Requesting an action plan to resolve the issues(s) from the program; and
 - ii. Timeline to resolve the issue and progress reports.

- b. The program will provide a progress report as requested by the JOE. The JOE can request modification to the action plan and/or additional progress report.
 - c. If the program has not resolve the issue(s) by the end of the timeline, the program may request addition time. Extension of the timeline will be granted at the discretion of the JOE.
4. Conditional approval is not renewable. Failure to correct deficiencies within the designated time period (including extension) will result in withdrawal of approval and involuntary closure of the program by the JOE.
 5. The JOE may deny approval of an EMS education program that does not meet the “Minimum Standards for EMS Program.” Part Three.
 6. Actions against training programs will take place during regular or special meetings. The individual institution will be required to refrain from voting on this issue. Any JOE Officer whose program is under review will relinquish their position while this matter is under discussion.

1-2 TYPES OF JOE VISITS TO EMS PROGRAMS

Section A. **INITIAL SITE VISIT**-- Visits made to an EMS training program by representatives of the JOE for the sole purpose of granting initial JOE approval. The site visit is at the expense of the program.

Section B. **EVALUATION VISIT**-- visits made to an EMS training program by JOE representative(s), at the request of the JOE, for the purpose of evaluating a program’s progress and approval status. The evaluation visit is at the expense of the program.

Section C. **CONSULTATION VISIT**-- visits made to an EMS training program by the JOE representative(s), at the request of an EMS training program. Requests to the JOE for consultation must be made, in writing, to the Chair of the JOE. The consultation visit is at the expense of the program.

Section D. **SURVEY VISIT**—is encouraged at the discretion of the JOE during any CoAEMSP visit.

1-3 GENERAL REQUIREMENTS

Section A. Representatives of the parent institution and EMS program shall be notified, in writing, regarding the approval status of the program.

Section B. A report of any visit, made by representative(s) of the JOE, shall be provided to the program’s officials of the institution.

Section C. An annual report shall be submitted to the JOE by the EMS education program.

PART TWO: ESTABLISHMENT OF NEW PROGRAMS OR REOPENING PROGRAMS

2-1 REQUIREMENTS

All programs not previously approved by the JOE and programs that are reopening are required to be approved by the JOE under the procedures prescribed in this section. Applications, proposals, and initial approvals shall be considered during a regular or special JOE meetings.

Section A. Any institution considering the establishment of an EMS training program shall submit, in writing, a statement of intent at least six (6) months in advance of the proposed opening date to the Chair of the JOE. The application shall be prepared by an EMS educator as specified in the “Minimum Standards for EMS Programs,” Part Three.

1. The application shall contain the following:
 - a. Rationale for establishing the program and details of the type of program planned, length of the program, and probable opening date.
 - b. Philosophy and objectives of the parent institution or agency.
 - c. Evidence of CAAHEP accreditation or CoAEMSP Letter of Review.
 - d. A completed feasibility study to include:
 - i. documentation of the need/demand for a new EMS program,
 - ii. analysis of EMS needs in the region,
 - iii. impact on other EMS education programs.
 - iv. proof of sufficient clinical site resources available in training area.
 - e. Documentation of the geographic region to support the program in relation to:
 - i. availability of the proposed number of faculty, clinical coordinator, program director and Medical director.
 - ii. source and number of potential students.
 - iii. proposed clinical facilities detailing accessibility and documenting the plan for clinical facility use to provide educationally sound experiences (as appropriate). The effect on other schools utilizing the facility must also be documented.
 - f. Documentation of the post-secondary institution to support the program in relation to:
 - i. plans for providing adequate support services including library audio/visual resources, classroom, laboratory, offices, secretaries, and counseling.
 - ii. evidence of financial resources for planning, implementing and continuing

the program.

- iii. tentative timetable for planning and implementing the entire program.

Section B.

1. A survey of the institutional or clinical facilities may be done at the discretion of the JOE to verify information on the application and proposal.
2. Following approval of the proposal, arrangements will be made for the initial approval visit to include a review of the proposed educational program and clinical facilities, by representatives of the JOE and to the institution.
3. The JOE shall advise the institution in writing, regarding the approval/disapproval of the application, proposal, initial approval status, and may include specific recommendations and requests for additional information and reports.
4. The JOE may deny approval to a program that does not meet the “Minimum Standards for EMS Programs,” Part Three.

PART THREE: MINIMUM STANDARDS FOR EMS PROGRAMS

3-1 ADMINISTRATION AND ORGANIZATION

Section A. The EMS education program shall be an integral part of a post-secondary accredited institution

Section B. The EMS Program shall have status comparable with other academic units, as appropriate.

Section C. The administration of the parent institution or sponsoring agency shall provide adequate financial support for the EMS program.

Section D. The parent institution shall designate that the EMS program meet all CAAHEP/CoAEMSP policies, procedures, standards, and guidelines.

Section E. Faculty, administration and students shall have the opportunity to participate in the governance of the EMS program and the parent institution.

3-2 CURRICULUM

Section A. The mission of the Program shall be consistent with that of the parent institution or sponsoring agency.

Section B. The curriculum shall be developed, implemented, controlled and evaluated by the faculty within the framework of the mission, goals and outcomes of the EMS program. The curriculum will meet or exceed the minimum curriculum set approved by the JOE and the National EMS Educational Standards.

Section C. The curriculum shall extend over a period of time sufficient to provide essential,

sequenced learning experiences which enable a student to develop EMS competence and show evidence of an organized pattern of instruction consistent with principles of learning and educational practice.

Section D. Clinical and field experience shall provide opportunities for application of theory and for achievement of the stated objectives in a client care setting, and shall include clinical learning experience to develop EMS skills required for safe practice. The ratio of students to clinical faculty shall allow students to meet clinical course objectives and safe and effective care of clients.

Section E. The curriculum will meet the JOE approved and National EMS Education Standards

Section F. A plan for curriculum and program evaluation shall be in place.

3-3 STUDENTS

Section A. There shall be written policy statements consistent with those of the parent institution made available to the student.

3-4 FACULTY

Section A. Qualifications and Requirements

1. Each program will have at minimum:
 - a. A Program Director, whose qualifications and job description meets or exceeds CoAEMSP requirements.
 - i. The Program Director and the Clinical Coordinator at minimum must be full-time when students are in session.
 - b. Medical Director will be a physician currently licensed to practice medicine in New Mexico with experience and current knowledge of emergency care of acutely ill and injured patients, have adequate training or experience in the delivery of out-of-hospital emergency care, including the proper care and transport of patients, medical direction, and quality improvement in out-of-hospital care; be an active member of the local medical community and participate in professional activities related to out-of-hospital care; be knowledgeable about the education of the Emergency Medical Services Professions, including professional, legislative and regulatory issues regarding the education of the Emergency Medical Services Professions.
 - c. A Clinical Coordinator who is responsible for organization, administration, continuous review, planning, development, and general effectiveness of clinical/field experiences for students enrolled in the EMS Training Program. The Clinical Coordinator must have the qualification to meet the expectation of the position, but at minimum must be a Licensed Paramedic or Registered Nurse with prehospital experience.
 - i. The Program Director and the Clinical Coordinator at minimum must be

full-time when students are in session.

- d. EMS Faculty, whose qualifications and job description meets or exceeds CoAEMSP requirements.
2. Faculty shall meet the educational requirements of the parent institution and those requirements defined shall be a least comparable to other faculty members of like status, as appropriate

Section B. Personnel policies for EMS faculty shall be the same as those in effect for other faculty.

3-5 RESOURCES

Section A. The parent institution or sponsoring agency shall provide sufficient resources, services and facilities to operate the EMS program.

3-5 PROGRAM EVALUATION

Section A. The EMS program shall periodically assess its effectiveness in achieving its mission and quality of graduates, and take appropriate action as outlined by the CoAEMSP student internal validation standards.

PART FOUR: PROGRAM CHANGES

4-1 PROGRAM CHANGES REQUIRING JOE APPROVAL

Changes that affect the program's compliance with the "Minimum Standards for EMS Program," Part Three, or changes in level of EMS course offerings, require JOE approval.

PART FIVE: CLOSURE OF APPROVED PROGRAMS

5-1 REQUIREMENTS

Section A. Upon voluntary or involuntary closure of an EMS program, the school shall:

1. Notify the JOE, NM EMS Bureau, and CoAEMSP of the closure date of the program;
2. make provision for students to complete their EMS education;
3. notify the JOE of the location of the permanently stored program records and;
4. discontinue admissions.

PART SIX: RENEWAL OF PROGRAMS

Section A. Renewal

In order to remain in good standing each program will submit to JOE on the first meeting of the new calendar year:

1. Number and level of students entering the program and graduating.
2. Exam results. (State and/or National Registry)
3. Major changes with the program and supporting documentation, if applicable.
4. Cohort and Program attrition.
5. Distance course /program outcomes
6. CAHEEP Annual Report
7. Provide EMS Programs Current Accreditation certificate.
8. Maintain JOE minimum requirements for an EMS training program.

Section B. Non Compliance

Should a program not provide a complete report at the JOE annual meeting, the program may fall under conditional approval. The program will be required to complete a progress report/action plan to the JOE at the next scheduled JOE meeting should they fail to comply with the listed renewal requirements.

PART SEVEN: APPEAL PROCESS

Section A. Program may appeal deny or withdrawal of approval. The program must:

1. Submit in writing to the JOE Chair the appeal, within 30 days of the action.
2. The JOE Chair will convene an Appeal Committee and meet within 30 days of receipt of the letter. This committee will be composed of:
 - a. EMS Bureau Representative (determined by the EMS Bureau Chief)
 - b. Regional Office Representative (not from the region in which the program is located and determined by the JOE Chair)
 - c. EMS Advisory Member (determined by the EMS Advisory Chair)
 - d. SWAC (based upon availability and as determined by the SWAC)
 - e. Medical Director Committee (MDC) (determined by the MDC Chair)
 - f. JOE Representative (determined by the JOE Chair)
 - g. Program directors from 2 JOE approved NM EMS educational institutions (not from the region in which the program is located, and to be determined by the JOE chair).
3. A Chair will be elected at the beginning of the meeting to preside over the meeting and

select a recorder.

4. The decision of the Appeal Committee is final.

PART EIGHT: PERSONNEL CHANGES

Section A Key Personnel are the Program Director, Director of Clinical Education, and the Medical Director.

1. Vacancy of Key Personnel:
 - a. For purpose of this section, a vacancy is defined as the permanent loss (e.g., resignation, retirement) of the Key Personnel.
 - i. The Chair fifteen (15) calendar days following the effective date of the vacancy.
 - ii. Key Personnel vacancies must be filled either on a Temporary, Acting, or permanent basis within thirty (30) calendar days following the effective date of the vacancy with a fully qualified Key Personnel.
2. Absences of Key Personnel
 - a. For the purpose of this section, an absence is when the individual holding the permanent Key Personnel position is on approved leave (e.g., sabbatical, illness, leave of absence).
 - b. When an absence is expected to last more than thirty (30) calendar days, the program must notify the Chair of that absence no later than fifteen (15) calendar days following the start of the absence.
 - c. If the absence is expected to exceed sixty (60) days, a Temporary or Acting replacement must be appointed within thirty (30) days following the start of the absence.
3. Temporary Replacement of Key Personnel
 - a. Temporary replacement must meet all the qualifications required in the applicable Standards, and is appointed to fulfill all of the duties and responsibilities of the position with the vacancy/absence as outlined in the applicable Standards.
 - b. A program may have Temporary replacement(s) for a maximum of twelve (12) months. This twelve (12) month period begins from the date of the vacancy/absence and cannot be extended without the approval of the JOE. The twelve (12) months is continuous and irrespective of the number of Temporary individuals appointed during that period.
 - c. In case of absences, the Program may request an extension for addition six (6) months. However, in no event may a Key Personnel be held by Temporary personnel for more than 18 months.
4. Failure of the program to meet any of the above notification requirements will result in administrative action by the JOE.