

**PROGRAM REVIEW:
AMERICAN HEART ASSOCIATION
AUTHORIZED TRAINING CENTER—OR04460
February 2017**

Executive Summary

The Columbia Gorge Community College (CGCC) American Heart Association (AHA) Authorized Training Center (TC) is operated to serve the regional need for AHA oversight and support of instructors as well as the standardization of training for basic and advanced life-saving skills. The TC has one Coordinator (the Director of Nursing & Health Occupations), six CGCC PT non-credit faculty (one of whom functions as the Lead TC faculty), and approximately 80 instructors in the region. As such, the TC serves as the principal resource for information, support, and quality control for all AHA Instructors aligned with the TC. We are required to renew our training center agreement every two years; our current contract term dates are 7/31/16 – 7/31/2018 (see Appendix D). Each class participant receives a course completion card; the CGCC AHA TC processed the following number of course completion cards for each given time period:

2012-13: 3,081

2013-14: 3,002

2014-15: 2,772

2015-16: 3,351

Section One: Mission and Goals

A. Describe the mission of the program.

In keeping with the mission of Columbia Gorge Community College, the mission of the CGCC AHA Authorized Training Center is to provide a local Training Center (TC) for American Heart Association AHA instructors so that they may strengthen the surrounding communities by providing instruction at several levels of First Aid and Cardio Pulmonary Resuscitation (CPR).

B. List the goals and objectives for the program.

-Offer a local option to our rural region for AHA oversight and support, including offering a low cost option for supplies and course completion card processing. According to the AHA Program Administration Manual (see Appendix B), TCs are responsible for:

- The proper administration and quality of the [Emergency Cardiovascular Care] ECC courses that they, their aligned instructors, and Training Sites (TSs) provide
- The day-to-day management of the TC, TSs, and instructors
- Providing aligned instructors and TSs with consistent and timely communication of any new or updated information about National, Regional, or TC policies, procedures, course content, or course administration that could potentially affect an instructor while carrying out his or her responsibilities
- Serving as the principal resource for information, support, and quality control for all AHA ECC Instructors aligned with the TC

-Offer quality AHA instruction at both the Hood River and The Dalles campuses in order to reach a wide range of students from the surrounding communities. Training is offered for students who need initial training and for those who need continuing education training as a job requirement or for personal enrichment. Courses currently taught are Heartsaver First Aid CPR & AED as well as the skills of Basic Life Support (BLS) for Healthcare Providers (HCP) CPR. Training in many cases also meets the requirements for successful completion of certificate and degree programs. An AHA new instructor and/or instructor recertification course is offered three times per year. A one credit First Aid and CPR/AED Professional Rescuers/Healthcare Providers (HE 113) is offered once a term. Since the last review we now offer an ACLS course to our graduating Nursing students in June of each year.

-Offer AHA instructors who live in the economically depressed communities of The Gorge training center oversight and support. This includes instructors who teach courses at the BLS level and at the Advanced Cardiac Life Support (ACLS) level. As above, these instructors offer courses to students who need initial training and for those who need continuing education training as a job requirement.

C. Describe the program alignment with Institutional Goals (Mission/Core Theme).

The CGCC AHA Authorized Training Center aligns most closely with "Core Theme C: Strengthen our Communities – Partnerships... by creating, maintaining, and growing community relationships." We provide BLS and First Aid Training for a variety of individuals and agencies. Our work with them fosters good community relationships.

Section Two: Action and Previous Review's Recommendations

A. Please summarize changes that have been made since the last review.

1. We have implemented a yearly review of all instructor files for completeness and compliance to both AHA requirements and the requirements of the CGCC training center.
2. All instructors of CGCC classes are required to have each student complete an Instructor Evaluation Form. The instructors keep these records for a period of three years and send in a summary form of the evaluations with their rosters.
3. The CGCC AHA TC has acquired repair parts for our mannequins. These mannequins have several skin tones that better represent the diverse communities served by CGCC.
4. The equipment/teaching materials lending "library" are on The Dalles campus, room 3.323. The majority of equipment is stored on shelves in room 3.301; it has worked extremely well to have the equipment stored in the same room as where it is primarily used. This room also has a mini office with a computer workstation and locking file cabinets to store records securely.
5. A Quality Assurance Plan based on AHA TC Requirements was developed (See Appendix B).
6. We have our instructors sign an Instructor agreement, ethics policy and conflict of interest policy (See Appendix C).
7. We have updated our Instructor Candidate Application and Instructor Renewal Checklist to include certification level if applicable (See Appendix C).

B. Were any of the changes made as a result of the last review? If so, please describe the rationale and result.

After performing an Administrative Self-Review (See Appendix D) in June of 2015, there were some minor corrections which needed to be made. It was determined that the AHA CGCC webpage qualifies as a website dedicated to the AHA. One instructor's records were incomplete and those were updated. Instructors were notified that they needed to retain course evaluations for 3 years and complete a summary of the evaluations to be submitted with each roster. An Ethics Policy and a Conflict of Interest Policy were created from language on the national AHA website and provided to instructors.

Section Three: Describe, Assess & Analyze

Use data to analyze and evaluate the adequacy of the program's key functions and data elements:

A. Faculty

I. Quantity of faculty needed to meet the needs of the program:

Faculty needed to meet the needs of the program includes one Lead TC faculty, two other part-time instructors, three backup part-time instructors, the Nursing & Health Occupations Administrative Assistant, and a portion of the department head's time. Community instructors number approximately 80 at any given time. A student worker assists with course completion card production in order to facilitate timely service to regional instructors. The work of the TC continues to evolve so that there are times when staffing is adequate and other times when more assistance is needed. If demand for services continues to grow, then the TC Coordinator recommends the creation of a 1/4-time administrative position to handle day-to-day operations.

II. Extent of the reliance upon part-time faculty:

Classes and record maintenance is done solely through the utilization of part-time faculty, administrative staff and the student worker. The TC Coordinator is full time but serves primarily in a supervisory role.

III. Incorporation of instructional best practices:

Updates from the AHA are sent directly via email by the AHA to aligned instructors. Statewide and regional training opportunities are made available by the AHA. Since the last review, the Lead TC Faculty has overseen the compliance with the new 2015 updates required of all AHA instructors. This includes establishment of a review course that all instructors are required to attend plus demonstration of teaching during an on campus session. This past year, a First Aid/CPR & AED course has been scheduled during the same time period; recertifying instructors and/or new instructors help teach the class. This facilitates some of the challenges faced previously in monitoring instructors as part of their renewal process.

IV. Use of professional development opportunities to improve teaching and learning strategies:

Instructors are encouraged to update their skills and participate in regional meetings. Instructors are required to keep their AHA Instructor Certification

current which includes the requirement of completing all required AHA updates and teaching a minimum of 3-4 classes every two years. Additionally, instructors are required to be monitored every two years by Training Center Faculty at which time feedback is given as part of the debriefing process.

- V. *Faculty involvement in activities that support student success (examples may include the use of instructional technology, service learning, learning communities, and co-curricular activities, etc.):*

Instructors have access to high quality hands-on instructional equipment and the most current curriculum approved by the American Heart Association. Instructors use technology to introduce new information and to keep students engaged. Instruction normally takes place in a small group setting or in small groups where principles of cooperative learning are utilized.

B. Curriculum

- I. *Program alignment with professional and national standards*

- *Course currency and relevancy.*

All courses are taught in compliance with the curriculum outlined by the American Heart Association. The standards taught within the AHA curriculum are the only standards that are in alignment with local industry standards for Healthcare Providers.

- *Evaluate the impact of the Advisory Committee on curriculum and instructional content methods, and/or outcomes (CTE programs only).*

The AHA does not require that this Program have a local advisory committee. We are under a national AHA ECC Committee which has jurisdiction over all AHA ECC volunteer positions.

- *Forecast future employment opportunities for students, including national or state forecasts if appropriate (CTE programs only).*

A majority of the students attending the AHA classes offered at CGCC must receive certification every two years in order to comply with the requirements of their employment.

Students who are enrolled in the Emergency Medical Technician, Medical Assisting, Nursing Assistant and Nursing Programs, and in Early Education & Family Studies are required to have a current BLS Healthcare Provider CPR card in order to participate in their respective program.

- *Degrees and certificates offered (CTE programs only)*

N/A. Students successfully completing AHA courses receive course completion cards valid for 2 years. This past year we have had a major employer request the provision of eCards in lieu of the usual course completion cards issued. We are still in the process of evaluating the effectiveness of this; initial impressions are that it is a time-saving and cost-saving measure.

II. Student Learning Outcomes

- *Course-Level Outcomes:*
 - *Identify and give examples of assessment-driven changes made to improve attainment of course-level student learning outcomes.*

AHA course curriculum, training materials, skills testing sheets, and written posttests are strictly controlled by the AHA. Instructors may have options within the materials provided but, in general training that occurs in each type of course is standardized. To that end, the outcomes for each course are determined by the AHA and are not CGCC outcomes. An exception to this is our HE 113, 1 credit course; CGCC outcomes were developed, however, they are based on the AHA provided outcomes.

Instructors utilize AHA standardized skill sheets as a means to determine if students are able to perform the hands on portion of the class they are attending. The skills sheets are very specific as to the steps to be followed to successfully pass the skill.

Certain levels of CPR also require the completion of an AHA written test with a score of 84% or better in order to successfully pass the course.

Students must perform to the standard set forth by AHA in both the skills portion and the written portion of the curriculum.

Students who are unable to meet these standards receive remediation and are then able to reattempt the skill and/or test.

Outside assessments were completed this past renewal cycle according to AHA standards by independent AHA Regional Faculty Members (see Appendix E for the reports of both a BLS course and an ACLS course review). No deficiencies were identified during either observation. Commendations were given for the instructors and the TC facilities.

- *Program-Level Outcomes:*

- *Describe the strategies that are used to determine whether students have met the outcomes of their program, degree or certificate.*

N/A

- *Summarize the results of the assessments of these outcomes.*

N/A

- *Identify and give examples of assessment-driven changes that have been made to improve students' attainment of program, degree and certificate outcomes.*

N/A

- *Core learning Outcomes (degrees only):*

N/A

C. Enrollment

III. Enrollment data since the last review

Total Enrollment for 06/01/16 through 11/30/16 was 1,435 people trained.

(ACLS Provider 88, BLS for Healthcare Provider 508, BLS Instructor 10, Heartsaver CPR AED only 58, Heartsaver First Aid CPR AED 73, Heartsaver First Aid only 40). This sampling is typical of a 6 month period.

IV. Student retention in classes in the program, progression term-to-term and year-to-year, as well as graduation rates for the program

Almost 100% of the people who participate in an AHA course pass the course by completing the course requirements. Each receives an American Heart Association course completion card or eCard good for two years.

V. Describe current and projected demand and enrollment patterns

Enrollment has remained steady and it is expected that this trend will continue. The local American Red Cross training center closed last year and we have seen some increase in students who now come to us for their training needs. It is not expected for enrollment to decline due to the fact that many students' employment is dependent on continued certification. Also, students who are enrolled in the Emergency Medical Technician, Medical Assistant, Nursing Assistant and Nursing Programs, and in Early Education & Family Studies are required to have a current BLS Healthcare Provider CPR card in order to participate in their respective program.

D. Budget

I. Adequate to meet the needs of the program

Yes. This past year the college developed an entrepreneurial fund for the AHA TC. Revenue that comes in covers the cost of instruction. Both tuition and fees for college held classes was increased with this recent budget cycle. A TC alignment fee was established; both new instructor and renewal instructor renewal fees were also put in place. These changes have helped provide revenue to support the college continuing to be a TC.

Section Four: Recommendations

Based on the analysis in Section Three:

A. Provide recommendations for the next review cycle.

1. We will be researching the demand for the addition of a Blood Borne Pathogens class to the current AHA curriculums offered by CGCC.
2. We will investigate developing a Policy and Procedure for the acceptance of students who have completed an online AHA class and are in need of a "skills check off" will be written. This policy and procedure will allow students with limited time the ability to become or remain certified by the American Heart Association.
3. If demand for services continues to grow, then the TC Coordinator recommends the creation of a 1/4-time administrative position to handle day-to-day operations.

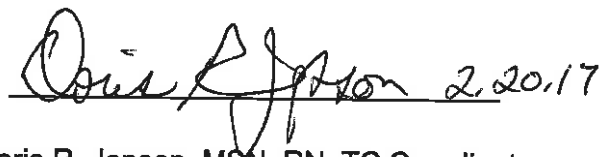
B. How will the program determine if it has made progress on its recommendations?

1. CGCC will offer a Blood Borne Pathogens class if it is found that there is a demand.
2. If feasible, a Policy and Procedure for Skills Only Students will be written and implemented.
3. Demand for services will continue to be audited by the TC Coordinator with a formal recommendation made to Dr. Toda if need warrants.

Submitted by:



Therese Adams, Paramedic
Training Center Faculty



Doris R. Jepson, MSN, RN, TC Coordinator
Director of Nursing & Health Occupations



Angela Jones, NHO Administrative Assistant
Columbia Gorge Community College

Appendices

Appendix A

AHA Program Administration Manual

https://www.evms.edu/media/evms_public/departments/tidewater_center_for_life_support/media_17626_en.pdf

Appendix B

Quality Assurance Plan

- TC Quality Assurance Plan, 2.25.14
- CGCC TC Policies, 7.01.15

Appendix C

Checklists and information created/updated to assist instructors in meeting requirements

- Instructor Agreement, 2.16.17
- Ethics Policy, 2.16.17
- Conflict of Interest Policy, 2.16.17
- Instructor Candidate Application, 2.16.17
- Instructor Renewal Checklist, 2.16.17

Appendix D

AHA Training Center Renewal Documentation, including

- Letter of TC Agreement Renewal, effective July 31, 2016 through July 31, 2018
- Training Center Administrative Self-Review 2015 and Response Plan
- General Liability and Auto Liability Evidence of Insurance Certificate, 2016-17

Appendix E

Course Evaluation by AHA Regional Faculty (required as part of TC Renewal Process)

- BLS Course Evaluation Survey Profile Report, November 20, 2015
- ACLS Course Evaluation Survey Profile Report, April 20, 2016

Appendix B

A TC Quality Assurance Plan should include the following points:

- Current AHA exams are used in all courses that require testing for issuance of a course completion card. *True.*
- The TC ensures that each student has the current appropriate textbook readily available for use before, during, and after the course. *True, evidenced by our registration.*
- The TC has a written policy for developing, monitoring, and updating instructors and renewing instructor status. *Yes, New and Renewing Instructor Checklist and see policy.*
- Every AHA course conducted by the TC uses the AHA core content and AHA developed materials. *True.*
- Course completion cards and written exams are stored securely in a locked location. *True.*
- The TC has adequate resources to complete the contracted program requirements, including staff, equipment, etc. *True.*
- The appropriate course completion card is issued to every student. *True.*
- The TC has written internal dispute resolution policies and procedures that each instructor receives. *Yes we have a policy but it is internal. Instructors or students are encouraged to contact the TCC or TCF for issues and these are resolved by referring to the PAM.*
- The TC monitors equipment used in all AHA courses to ensure that it is clean and works properly. *True.*
- TC records are complete and filed properly. *True.*
- The TC has a written policy detailing how TCF and instructors receive training for their roles and are actively involved in the Quality Assurance/Continuous Quality Improvement process to ensure providers are able to perform quality CPR. *True, see policy.*
- The TC has a written policy detailing how courses will be monitored that are taught by its instructors and TSs and all skills sessions conducted by instructors. *True, see policy.*
- The TC has a written policy detailing how to evaluate its courses, instructors, and program administration. *True, see policy.*

CGCC TC Policies

1. Policy for developing, monitoring, and updating instructors and renewing instructor status

BLS Faculty—AHA guidelines are followed, including

- CGCC TC offers a new instructor BLS course twice a year, usually in the fall & the spring. This course is a 3 step process—online work, in class session (including pass the written BLS post test for the course), course monitoring. A TC faculty performs the course monitoring.
- Instructor updates are sent via email.
- Renewal instructor BLS courses are offered usually 3x per year. Instructors are usually required to attend a class on campus conducted by a TC faculty. BLS instructors are required to teach or assist teaching a minimum of 4 courses in a two year period—exception for being in a rural area may be requested.

ACLS Faculty—AHA guidelines are followed, including

- New ACLS instructors are taught by an ACLS TC Faculty, including course monitoring.
- Instructor updates are sent via email.
- Renewal instructor ACLS are required to attend an ACLS course, be monitored by a TC faculty, and pass the written ACLS post test for the course. ACLS instructors are required to teach or assist teaching a minimum of 4 courses in a two year period—exception for being in a rural area may be requested.

2. Written internal dispute resolution policies and procedures that each instructor receives.

- See written policy.

3. Policy detailing how TCF and instructors receive training for their roles and are actively involved in the QA/Continuous Quality Improvement process to ensure providers are able to perform quality CPR

- Training Center faculty members are carefully chosen based on both reliability and ability. Our lead TC Faculty works with them to train for roles and makes them aware of QA process. The TC always welcomes feedback on improving processes.

4. Policy detailing how courses will be monitored that are taught by its instructors and TSS and all skills sessions conducted by instructors.

- The TC follows the written guidelines in the PAM, including utilizing AHA course content and monitoring forms.

5. Policy detailing how to evaluate its courses, instructors, and program administration.
 - In accordance with AHA standards, every student that participates in a TC course is offered a course evaluation. Lead TC Faculty reviews every course evaluation completed and follows up if needed.
 - Program Administration—the AHA Administrative Self Review is completed every two years. TCC consults with staff on a frequent basis and issues are problem-solved and resolved. Additional help/support is requested from CGCC as needed.

Appendix C



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Instructor Name _____ AHA Instructor # _____

Mailing Address _____

Phone Number _____ E-mail _____

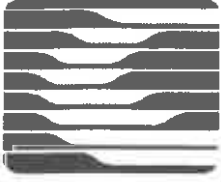
Instructor Agreement

Columbia Gorge Community College (CGCC) is an American Heart Association (AHA) Training Center. We are required to uphold the rules and regulations for course administration as described in the AHA Program Administration Manual (PAM) and the Instructor Manual for each discipline.

Initials

As an AHA instructor I agree to:

- _____ Maintain a current knowledge and skills base regarding the AHA guidelines and core content
- _____ Own a current copy of the *AHA Provider Manual* and *AHA Instructor Manual* for each discipline I am certified to teach
- _____ Teach the appropriate level of course content for the designated AHA-ECC program, as defined by the PAM manual and the Instructor Manual for the designated course
- _____ Use only current and approved AHA materials when teaching AHA-ECC programs
- _____ Evaluate all students to the established AHA guidelines and standards
- _____ Maintain security of testing materials per AHA standards and guidelines
- _____ Conduct and administer all courses as described in the Instructor Manual
- _____ Fully complete and submit class rosters and course evaluation summary within 10 days of class completion
- _____ Maintain class documents for three years
- _____ Follow AHA-ECC and PCC[®]-CHP guidelines when arranging for, coordinating and conducting all AHA-ECC courses
- _____ Teach the required minimum number of AHA courses (4 courses per discipline) per instructor certification period (2 years)
- _____ Attend the required AHA instructor updates as they occur



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_____ Provide documentation to support my recertification as required by my training center, using the "AHA Instructor/TCF Renewal Checklist" form

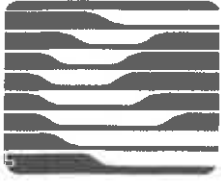
_____ Abide by the AHA's Ethics Policy

_____ Abide by the AHA's Conflict of Interest Policy

_____ Maintain student confidentiality by abiding by The Family Educational rights and Privacy Act (FERPA) guidelines

_____ Observe copyright laws and guidelines

Instructor Signature: _____ **Date:** _____



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Name _____

Ethics Policy

The American Heart Association Ethics Policy reflects the high standard of business conduct representing what is the hallmark of our organization. Our Ethics Policy helps define our commitment to support a culture of openness, trust and integrity in all we do.

We are committed to conducting all of the American Heart Association's affairs and activities with the highest standards of ethical conduct. All of us have an obligation to adhere to this policy and encourage others to do the same.

As volunteers and staff, we are passionate about working with all of our customers. We must dedicate ourselves to pursuing our mission with honesty, fairness and respect for the individual, ever mindful that there is no "right way" to do the "wrong thing."

The Ethics Policy helps clarify our standard of conduct. It makes clear that the American Heart Association expects volunteers and employees to understand the ethical considerations associated with their actions. Our Ethics Policy affirms our long standing commitment to not merely obey the law, but also to conduct our business with integrity and without deception.

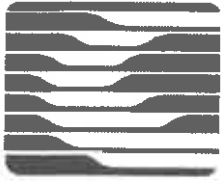
The American Heart Association's reputation for integrity and honesty is more important today than ever before. As we think of "what we do" at the American Heart Association and "how we do it," always remember our responsibility to ask ourselves: "Am I doing the 'right thing' for the 'right reason'?"

Code of Ethics

The summary code of ethics includes the following provisions:

American Heart Association employees and volunteers must:

- Proactively promote ethical behavior as a responsible partner among peers in the work environment.
- Deal fairly with AHA Customers, suppliers, competitors, volunteers, and employees.
- Provide constituents with information that is accurate, completely objective, relevant, timely, and understandable.
- Comply with applicable government laws, rules and regulations.
- Maintain the confidentiality of information entrusted to them by the AHA or its Customers except when authorized or otherwise legally obligated to disclose.
- Accept responsibility for preventing, detecting, and reporting all manner of fraud.



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- Be honest and ethical in their conduct, including ethical handling of actual or apparent conflicts of interest between personal and professional relationships.
- Protect and ensure the proper use of company assets.
- Prohibit improper or fraudulent influence over the External Auditor.

The purpose for this ethics policy is to support a culture of openness, trust, and integrity in all American Heart Association management and business practices. A well understood ethics policy requires the participation and support of every AHA volunteer and employee.

At the American Heart Association, we are dedicated to working with our volunteers, employees, partners, vendors and customers to reduce disability and death from cardiovascular diseases and stroke. We are committed to conducting all of the AHA's affairs and activities with the highest standards of ethical conduct. The AHA Code of Conduct in the Human Resources Policy Manual provides guidance for decisions and actions during our daily work.

We are committed to the responsible use of AHA assets; to provide accurate, complete and objective information; to respect the confidentiality of financial and other information; to act in good faith and exercise due care in all we do; to comply with all rules and regulations, and to proactively promote ethical behavior.

The AHA's Ethics are built on the AHA's Guiding Values. As such, we acknowledge our individual responsibility to ensure our collective success by practicing and promoting the following values which reflect a shared view of how we want to operate and be seen by others.

Our Values

- Improving and Extending People's Lives
- Bringing Science to Life
- Speaking with a Trustworthy Voice
- Building Powerful Partnerships
- Inspiring Passionate Commitment
- Meeting People Where They Are
- Making an Extraordinary Impact
- Ensuring Equitable Health for All

Our People

The AHA is committed to provide a work environment that values diversity among its volunteers and employees. All Human Resource policies and activities are intended to create a respectful workplace where every individual has the opportunity to reach their highest potential.



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Employees are provided opportunities regardless of race, color, national origin, religion, sex, sexual orientation, marital status, age, veteran status or disability. These policies apply to both applicants and employees in all phases of employment including, recruiting, hiring, placement, training, development, transfer, promotion, demotion, performance reviews, compensation, benefits and separation from employment.

We will evaluate how we are living up to our code of ethics by requesting feedback on a regular basis from our employees, volunteers and customers. We will provide all of our stakeholders a mechanism to report unethical conduct. We will begin with employee orientation and regularly communicate all of these expectations to employees and volunteers.

AHA volunteers, employees, contractors and suppliers are expected to report any practices or actions believed to be inappropriate to their supervisor, another AHA leader, the Human Resources department, or via the AHA ethics hotline.

Our Customers

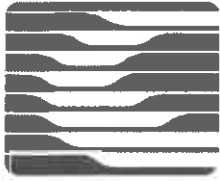
We are dedicated to 100% customer satisfaction. We are devoted to developing "customer enthusiasm" and are passionate about exceeding customer expectations. We dedicate ourselves to anticipating the changing needs of customers and creating timely, innovative and superior programs, products and services.

Fraud

Fraud is defined as any intentional act or omission designed to deceive others, resulting in the victim suffering a loss and/or the perpetrator achieving a gain. The AHA Board of Directors and Senior Management have adopted a "no fraud tolerance" attitude. In addition to the Board, volunteers, management and staff at all levels of the Association have responsibility for preventing, detecting and reporting fraud.

In addition to the definition of fraud set out above, this policy covers any dishonest or fraudulent act, including but not limited to:

- Misappropriation of funds, securities, supplies or other assets.
- Impropriety in the handling or reporting of money or financial transactions.
- Profiteering as a result of insider knowledge of company plans or activities.
- Disclosing confidential and proprietary information to outside parties.
- Intentional, false representation or concealment of a material fact for the purpose of inducing another to act upon it to procure an advantage, benefit or gain.
- Accepting or seeking anything of material value from contractors, vendors or persons providing services/materials to AHA, unless pursuant to the Acceptance of Gifts Policy.
- Destruction, removal, or unauthorized use of records, furniture, fixtures, and equipment.
- Any similar or related irregularity.



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Each member of management will be familiar with the types of improprieties that might occur within his or her area of responsibility and be alert for any indication of irregularity. An employee, volunteer, consultant, vendor, contractor, or outside agency doing business with AHA shall immediately report any irregularity that is detected or suspected, as instructed below under 'Reporting Ethics Violations.' Any employee or person who suspects or reports dishonest or fraudulent activity shall not attempt to personally conduct investigations or interviews related to any suspected fraudulent act. Investigations will be coordinated with the Legal Department and other affected groups, both internal and external. For additional information regarding fraudulent activities, refer to the AHA Fraud Risk Management Program.

Conflict of Interest

[See AHA Conflict of Interest Standards]

Association's Property and Information

Employees and volunteers are expected to protect the AHA's property at all times; including cash, equipment, records, employee, and customer information. This also requires employees and volunteers to maintain confidentiality regarding AHA records, and employee and customer information.

Nondiscrimination Policy

It is AHA policy that the volunteer membership and staff structures and all programs and activities of the American Heart Association, its Affiliates and components shall be designed and conducted without regard to race, religion, national origin, sex, age, disability or other non-merit criteria.

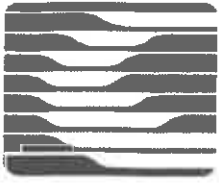
Reporting Violations

If you have questions or concerns about compliance with any of the policies listed above, or are unsure about what is the "right thing" to do, we **strongly encourage** you to first talk with your supervisor, program leader, another AHA Leader or the Human Resources department. If for any reason you are uncomfortable talking to any of these individuals, contact the **AHA ethics hotline at 866-293-2427** or www.ethicspoint.com to report your concerns. Your calls will be handled in confidence. No director, trustee, officer, employee or volunteer who in good faith reports an action or suspected action taken by or within the AHA that is illegal, fraudulent, or in violation of any adopted policy will suffer intimidation, harassment, discrimination or other retaliation. The AHA treats complaints about and reports of possible discrimination seriously and investigates them as required by our procedures and any applicable laws.

I have read and understood the above policy.

Name Printed _____

Signature _____ Date _____



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NAME _____

Conflict of Interest Policy

Representatives of the American Heart Association scrupulously shall avoid any conflict between their respective personal, professional or business interests and the interests of AHA, in any and all actions taken by them on behalf of AHA in their respective capacities. Representatives include, but are not limited to: its volunteer Board of Directors, Officers, committee members, council members, key employees, certain contracted parties or agents, and other national and local volunteers and staff.

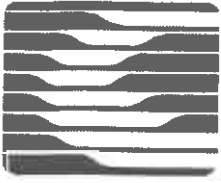
If any AHA Representative or a family member of any AHA Representative has any direct or indirect interest in, or relationship with, any individual or organization that proposes to enter into any transaction with AHA, including but not limited to transactions involving:

- a. The sale, purchase, lease or rental of any property or other asset;
- b. Employment, or rendition of services, personal or otherwise;
- c. The award of any grant, contract, or subcontract;
- d. The investment or deposit of any funds of the Association;

the AHA Representative shall: 1) give notice of such interest or relationship in accordance with AHA Standards and Procedures; 2) shall not be present at deliberation on and refrain from deliberation and voting on the particular transaction in which he or she has an interest; and 3) otherwise refrain from attempting to exert any influence on AHA to affect a decision to participate or not participate in such transaction.

AHA shall not enter into proposed transactions with a related party (i.e.: volunteer Officer or Director or key employee; their family members; or an entity in which the volunteer Officer or Director, key employee or their family members have a thirty-five percent or greater ownership or beneficial interest or, in the case of a partnership or professional corporation, a direct or indirect ownership interest in excess of five percent) unless it is determined by the AHA Board of Directors to be fair, reasonable and in the corporation's best interest at the time of such determination. Any volunteer Officer or Director or key employee who has an interest in a related party transaction shall disclose in good faith to the AHA Board or Directors, or an authorized committee of the Board, the material facts concerning such interest.

Designated AHA Representatives shall complete at least annually AHA's Conflict of Interest Disclosure Questionnaire, in accordance with AHA Standards and Procedures. Volunteer Officers and Directors of the AHA



COLUMBIA GORGE COMMUNITY COLLEGE

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THE DALLES, OREGON 97058

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Board shall complete the Disclosure Questionnaire before election and annually thereafter. Officers, Directors and key employees shall submit completed Disclosure Questionnaires to the Corporate Secretary, along with certification of compliance with this policy. The Secretary shall report to the Audit Committee at least annually on completed

disclosures and certifications, and the Audit Committee shall make any decisions required based on reported conflicts.

The existence and resolution of conflicts and any related party transactions shall be documented in AHA's records, including the minutes of any meeting at which the conflict or related party transaction was discussed or voted upon, in accordance with AHA Standards and Procedures.

Conflict of Interest requirements for Federally Funded Investigators are set out in AHA's Conflict of Interest Standards.

I have read and understood the above policy.

Name Printed _____

Signature _____ Date _____



American Heart Association Emergency Cardiovascular Care Programs
Instructor Candidate Application

Instructions: To be completed by the instructor candidate with appropriate signatures. Please complete 1 application for each discipline.

Name: _____

Mailing address: _____

Certification level (if applicable) [] EMT [] Paramedic [] RN [] MD

Phone (Home): _____ Phone (Cell) _____

Email: _____

Type of instructor course: HS BLS ACLS PALS

Recommended renewal date of provider card in discipline in which candidate is seeking instructor status: _____

Instructor Commitment: As an AHA Instructor, I agree to teach at least 4 courses in 2 years in accordance with the guidelines of the American Heart Association. I also agree to strengthen and support the Chain of Survival and the mission of the American Heart Association in my community.
Signature of Instructor Candidate Date

TC Alignment: I approve this application and grant alignment with this Training Center for this applicant. I agree to all responsibilities for this instructor as outlined in this manual.
Name of Training Center: _____ Training
Center ID#: _____
Signature of TC Coordinator: _____ Date: _____

Verification of Instructor Potential: I verify that this instructor candidate has achieved a score of 84% or higher on the provider written examination in the discipline for which he or she is applying and has completed at least 1 of the following options:
Has been identified as having instructor potential during performance in a provider course
Has demonstrated instructor potential during a screening evaluation
Has demonstrated exemplary performance of provider skills under my direct observation
Signature of TCF/Course Director (circle appropriate title) Date



**American Heart Association Emergency Cardiovascular Care Programs
Instructor/TCF Renewal Checklist**

Instructions:

This checklist may be used to document successful completion of instructor/TCF renewal requirements and contact information. It is recommended that the TC keep the completed form in the instructor's file.

Instructor/TCF Contact Information

Name: _____ Instructor ID#: _____

Address: _____

Phone Home: _____ Phone Cell: _____

Email: _____

Other contact information: _____

Certification level (if applicable) EMT Paramedic RN MD

Discipline: HS BLS ACLS ACLS EP PALS PEARS

Current instructor card expiration date: _____

Primary TC (for discipline seeking renewal): _____

Name of TC Coordinator: Doris Jepson TC ID#: OR04460

Renewal Checklist

Provider skills successfully demonstrated Date: _____ Method: _____

Instructor/TCF update(s) attended Date(s): _____

Instructor/TCF Monitor Form completed successfully Date: _____

At least 4 provider courses taught in past 2 years or waiver obtained (see below)

If applicable (for TCF), 1 instructor/instructor renewal course taught in past 2 years (see below)

Teaching Activity

Course Name	Date	Location (TC/Site)	Station/Module
1.			
2.			
3.			
4.			

Instructor/Instructor Renewal Course (if renewing TCF)

1.			
----	--	--	--

Additional courses may be attached or listed on the back of this form.

New instructor card issued Date: _____

TCF status maintained Date: _____

Appendix D

AHA Training Center

Thank you for your interest in establishing an American Heart Association AHA Training Center.

The American Heart Association has established a network of Training Centers (TC) to broaden its outreach of CPR, first aid and advanced educational courses and strengthen the Chain of Survival.

Please note that to renew your Training Center Agreement, you must acknowledge below that you reviewed and understand your responsibilities as an AHA Training Center. For more information, you may visit the Program Administration Manual (PAM) [here](#).

PAM overview language (http://ahainstructornetwork.americanheart.org/idc/heart-public/@wcm/@private/@ecc/documents/downloadable/ucm_308440.pdf)

Steps to renew your Training Center Agreement

Step 1

Upon your acceptance of the Terms of Use, you will need to provide/upload a copy of your current insurance certificate or letter stating waiver.

Step 2

Your renewal document(s) will be reviewed and your American Heart Association representative will contact with any questions.

Step 3

Once it has been determined that you have uploaded the required insurance documentation for renewal, you will be notified by email whether or not your Training Center Agreement has been renewed.

I understand and agree that this submission, and the AHA's review, of this renewal does not obligate me, this organization, or the American Heart Association in any manner, nor does it establish a legal or commercial relationship between us. I further understand and agree that the AHA may approve or disapprove this renewal, at its discretion and without liability.

I certify that the information contained in this renewal, and the documents submitted in support of this renewal, are true and correct, and that I am authorized to submit this renewal and to agree to the Terms of Use on behalf of this organization. I hereby authorize the AHA to investigate my background and that of my organization. I further authorize AHA to obtain a credit report and obtain any other information about the credit history of this organization as it deems necessary to evaluate its suitability as a potential American Heart Association Training Center.

I have read, understand and agree to the [Terms of Use \(/AHATC/agreement/Standard_Terms_of_Use_v1.1.html\)](#) on behalf of my organization.

I Agree to the Terms of Use I Do Not Agree

Training Center Name: Columbia Gorge Comm College (OR04460)

Approved Disciplines: BLS ,ACLS

Contract Term Dates: **Start Date:** 07/31/2016 **End Date:** 07/31/2018

Approved Training Territories:

State	Metros
WA	
OR	

Back ([/AHATC/trainingcenter.jsp?pid=ahatc.agreementHistory](#))

**American Heart Association Emergency Cardiovascular Care Program
Training Center—Administrative Self-Review**

Training Center: Columbia Gorge Community College Review Date: JUNE 2015
 Location: 400 E SCENIC DR THE DALLES OR 97058 (OR 04460)

Discipline: This administrative review may be used for more than one discipline.
Directions: Score 1 for every question with a "Yes" or "NA" marked. Non-boldface questions are for information only and not part of the scoring guidelines throughout the document.

Note to reviewer: Some convenient references are made to the BLS, ACLS, and PALS Instructor's Manuals and Program Administrative Manual (BIM, AIM, PIM, and PAM, respectively) for your evaluation criteria.

**SECTION I
ORGANIZATION/ADMINISTRATION-FOCUSED FUNCTIONS**

	BLS	ACLS	PALS
1. Purposely omitted.			
2. a. Does the TC have a <u>current certificate</u> for general liability insurance? \$5,000,000 for National TCs <input checked="" type="checkbox"/> \$1,000,000 for ACLS/PALS <input checked="" type="checkbox"/> \$300,000 for BLS	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
b. Does the TC have a <u>current letter</u> on file stating coverage by waiver, ie, sovereign immunity?			
3. a. Is there evidence that the TC stores records, including TCF/Instructor files? (Check applicable boxes below.) : <input checked="" type="checkbox"/> Hard copy <input checked="" type="checkbox"/> Electronically If stored electronically, are files backed-up on a regular basis? <input checked="" type="checkbox"/> Yes ___ No Is the TC capable of printing all electronic files as hard copies? <input checked="" type="checkbox"/> Yes ___ No	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
b. Is there evidence that all records are maintained for a minimum of three years from the date of issue?	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
4. Is there evidence that the TC maintains the following documents?			
a. An original or copy of the current signed TC Agreement	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
b. Website agreement (if applicable) marked NO (UNSURE) I BELIEVE N/A	___ Y <input checked="" type="checkbox"/> N	___ Y <input checked="" type="checkbox"/> N	___ Y ___ N
c. Documentation of any deficiencies identified during a review N/A Corrective action taken?	<input checked="" type="checkbox"/> Y ___ N ___ NA	<input checked="" type="checkbox"/> Y ___ N ___ NA	___ Y ___ N ___ NA
d. Current list of Training Sites and contact information	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N ___ NA
4.1 Copies of official correspondence from AHA: National and Regional? Can the TC show evidence that there is a process for reviewing/ distributing national and regional correspondence, ie, filed by date? <input checked="" type="checkbox"/> Y ___ N Does the TC have a process for timely distribution of information? <input checked="" type="checkbox"/> Y ___ N Can the TC show documentation that the timeline was followed? <input checked="" type="checkbox"/> Y ___ N Can the TC document that the basic content of appropriate AHA correspondence was distributed to TCF/Instructors? <input checked="" type="checkbox"/> Y ___ N Can the TC show documentation that appropriate AHA correspondence was distributed to TS if applicable? ___ Y ___ N <input checked="" type="checkbox"/> NA	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
REVIEWER TABULATION:	SECTION I Score summary of Page 1	7 of 8	7 of 8
		X of 8	

SECTION I: ORGANIZATION/ADMINISTRATION FUNCTIONS continued		BLS	ACLS	PALS
5.	Does the TC have policies and procedures that address the following issues:			
a.	Quality Assurance Plan (updated annually)?	<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
b.	Continuous Quality Improvement (Performance improvement-data, trends, and outcomes?)	<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
c.	Equipment maintenance/decontamination? <input checked="" type="checkbox"/> Does policies and procedures address cleaning of manikin and clothing if applicable?	<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
d.	Internal dispute resolution? Has the TC had any internal disputes? <u>—</u> Y <u>X</u> N <u>—</u> NA If yes, were the outcomes successful? <u>—</u> Y <u>—</u> N <u>X</u> NA	<u>X</u> Y 10 <u>—</u> N	<u>X</u> Y 10 <u>—</u> N	<u>—</u> Y <u>—</u> N
e.	Management of TCF/Instructor communication/updates?	<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
f.	Training Site management/relations? (May have contract in lieu of policies and procedures)	<u>X</u> Y <u>—</u> N <u>—</u> NA	<u>X</u> Y <u>—</u> N <u>—</u> NA	<u>—</u> Y <u>—</u> N <u>—</u> NA
6.	a. Is there evidence that the TC supports Chain of Survival initiatives? <u>—</u> Mass training CPR, or <input checked="" type="checkbox"/> public access events, by providing: <input checked="" type="checkbox"/> Instructors/TCF <input checked="" type="checkbox"/> Equipment <input checked="" type="checkbox"/> Financial <input checked="" type="checkbox"/> Manikins <input checked="" type="checkbox"/> Organizational support <u>—</u> Other	<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
REVIEWER TIPS: Question 6: TC must show evidence of participating in one of the above to obtain a Yes and a positive score of 1.				
7.	a. Does the TC have administrative capability to support the functions of the Training Network? <input checked="" type="checkbox"/> Issuance of cards <input checked="" type="checkbox"/> Maintenance of records <input checked="" type="checkbox"/> Submission of training reports <input checked="" type="checkbox"/> Maintenance of Instructor/TCF files	<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
REVIEWER TIP: Question 7: TC must meet all four components to obtain a Yes and a positive score of 1.				
8.	a. Is the AHA disclaimer clear on all marketing tools where a course fee is indicated?	<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
	b. Is the ECC provider logo used appropriately?	<u>X</u> Y <u>—</u> N <u>—</u> NA	<u>X</u> Y <u>—</u> N <u>—</u> NA	<u>—</u> Y <u>—</u> N <u>—</u> NA
REVIEWER TIP: Question 8a: If law or policy prohibits TC from offering community courses and there are no marketing materials or community courses, mark Yes for disclaimer use. Question 8b: If TC does not use the ECC Provider logo, mark NA and score as 1.				
9.	a. Does the TC have access to a computer with Internet access?	<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
	b. Does the TC have access to a computer with external email?	<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
REVIEWER TIPS: Question 9: If there are problems/issues with receiving AHA correspondence/exams, make sure TC has the free download Adobe Acrobat Reader.				
10.	a. Does the TC maintain an adequate number of TCF and Instructors to meet the needs of its customers? Please indicate total number of the following:			
		BLS	ACLS	PALS
	Instructors	81	19	—
	TC Faculty	35	5	—
		<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
REVIEWER TIPS: Question 10: Suggested ratios-number of Instructors to meet largest class size offered; suggested 48 as largest. BLS/ACLS/PALS 1 TCF and/or RF to 8 Instructors 1 Instructor to 8 students				
11.	a. Has the TC appointed TCF?	<u>X</u> Y <u>—</u> N	<u>X</u> Y <u>—</u> N	<u>—</u> Y <u>—</u> N
REVIEWER TABULATION:		SECTION I Score summary of Page 2		
		14 of 14	14 of 14	14 of 14

SECTION I – ORGANIZATION/ADMINISTRATION FUNCTIONS continued	BLS	ACLS	PALS
12. a. Can the TC show evidence of updated Instructor/TCF aligned with TC?	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
b. Does the TC identify Instructors who <u>teach but are not aligned</u> with the TC?	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N ___ NA
c. Does the TC TCF/Instructor list include a minimum of the following information? <input checked="" type="checkbox"/> Name* <input checked="" type="checkbox"/> Address * <input checked="" type="checkbox"/> Phone* <input checked="" type="checkbox"/> Discipline(s) * <input checked="" type="checkbox"/> Instructor card renewal date * <input checked="" type="checkbox"/> Email (optional)	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
The items with an (*) must be included in each file reviewed to obtain a "Yes" score.			
13. a. Can the TC show evidence of Training Site (TS) administrative reviews?	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N ___ NA
b. Can the TC show evidence of TS course reviews?	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N ___ NA
c. Can the TC show evidence of a current list of Training Sites?	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N ___ NA
d. Can the TC show evidence of conducting TS updates?	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N ___ NA
14. a. Is there evidence that the TS complies with all AHA policies and procedures?	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N ___ NA
b. Is there evidence that the TS complies with all TC policies and procedures?	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N <input checked="" type="checkbox"/> NA	___ Y ___ N ___ NA
15. a. Can the TC show evidence of documented QA activity?	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
b. Can the TC show any documentation of continuous quality improvement? (Performance Improvement: data, trends, and outcomes)	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
REVIEWER TIPS: Question 15: Mark NA for new TC applicants and add a positive score of 1 for each			
16. a. Does the TC have a current <i>Program Administration Manual</i> ?	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
b. Is it easily accessible (in a common location for use) for TCF/Instructors?	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
REVIEWER TIPS: Question 16: The TC only needs one <i>PAM</i> ; however, manuals need to be accessible for all disciplines			
17. a. Can the TC demonstrate that TCF/Instructors <u>have</u> the most current and appropriate textbooks and toolkits are made <u>available</u> to teach? <input checked="" type="checkbox"/> Does the TC purchase all textbooks for each Instructor/TCF member? <input checked="" type="checkbox"/> Do Instructors/TCF have to purchase their own textbooks? <input checked="" type="checkbox"/> Does the TC share the cost of textbooks with Instructors/TCF?	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
19. a. Can the TC show evidence of submitting reports submitted by stated deadline? ___ Course/participant statistics	<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
REVIEWER TABULATION: SECTION I Total score: Add scores of previous summaries and above questions.	<u>36</u> of 37	<u>36</u> of 37	<u>X</u> of 37

PROGRAM ENHANCEMENT (NO SCORING)	BLS	ACLS	PALS
Does the TC use any AHA self-instructional learning system, for example, Heartcode?	X Y __N	X Y __N	__Y __N
Does the TC offer contact hours? X Training courses X Retraining courses X Nursing X Respiratory X Other; be specific: <u>EMTs, Physicians, Pharmacists et.</u>	X Y __N	X Y __N	__Y __N
Does the TC offer CME for physicians? __ Training courses __ Retraining courses	__Y X N	__Y X N	__Y __N
Does the TC offer courses in a language other than English on a routine basis?	__Y X N	__Y X N	__Y __N
Does the TC offer courses in a language other than English on special request? X Spanish __ French __ Creole __ Sign __ Other, be specific _____	X Y __N	__Y X N	__Y __N
Does the TC subscribe to <i>Currents</i> ? __ Is there a process in place for storing the publication <i>Currents</i> ? __ Is there evidence that the TC encourages TCF/Instructors to subscribe to <i>Currents</i> ?	__Y X N	__Y X N	__Y __N
It is recommended that each TC Coordinator maintain current Instructor status in at least one discipline. (See PAM, Chapter 5) a. Is there evidence that the TC Coordinator maintain Instructor status in at least one discipline?	X Y __N	X Y __N	__Y __N
b. Is there evidence that the TC Coordinator attended <u>any</u> Instructor updates?	X Y __N	X Y __N	__Y __N

**SECTION II
COURSE-FOCUSED FUNCTIONS**

	BLS	ACLS	PALS
1. a. Is there evidence that the TC/TS offers classes to the community?	X Y __N __NA	X Y __N __NA	__Y __N __NA
REVIEWER TIPS: Question 1: If the TC is prohibited by law to open classes to the community, check NA and count as a Yes.			
2. a. Does the TC have an agenda for each course taught?	X Y __N	X Y __N	__Y __N
b. If the agenda been adapted for the individual needs of the TC, does the agenda reflect required core content?	X Y __N __NA	X Y __N __NA	__Y __N __NA
c. Do agendas for Instructor Courses reflect qualified faculty?	X Y __N	X Y __N	__Y __N
REVIEWER TIPS: Question 2: Program agendas are used to allow both the Instructor and student to know the format of the course taught within that TC.			
REVIEWER TABULATION: SECTION II Score summary of Page 4	<u>4</u> of 4	<u>4</u> of 4	X of 4

SECTION II: COURSE-FOCUSED FUNCTIONS continued		BLS	ACLS	PALS
3. a.	Does TC use current AHA cards?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
b.	Is there evidence of a process in place for securing cards?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
c.	Is there evidence of a process in place for issuing cards for a two-year period?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
d.	Can the TC show evidence of controlling the access of the security number for ordering cards?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
e.	Can the TC demonstrate that it issues cards within 30 days of receipt of paperwork?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
f.	Can the TC show evidence that cards are completed correctly? (ie, date: month/year)	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
4.	Does the TC maintain the following in its course files?			
a.	Agendas?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
b.	Completed roster?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
c.	Written exam for students who are "Incomplete"?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
d.	Psychomotor skills evaluations for students who are "not yet complete"?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
e.	Dispute resolutions if applicable? (attached to roster)	<input type="checkbox"/> Y __N <input checked="" type="checkbox"/> NA	<input type="checkbox"/> Y __N <input checked="" type="checkbox"/> NA	<input type="checkbox"/> Y __N <input type="checkbox"/> NA
f.	Instructor Candidate Application? (Instructor Courses only)	<input checked="" type="checkbox"/> Y __N __NA	<input checked="" type="checkbox"/> Y __N __NA	<input type="checkbox"/> Y __N __NA
REVIEWER TIPS: Question 4: Review 10 or 5%, whichever is greater. If the section you are reviewing is missing from any course files, that section scores a No. Due to the volume of courses, there may be a master agenda for the files and not one in each course roster for BLS. This should be reviewed as appropriate. Question 4f: If the TC has not held an Instructor Course, check NA and count as a Yes for the score.				
5. a.	Can the TC produce the course/Instructor evaluation form?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
b.	Is there evidence that the TC uses this form for every class? <i>Instructors keep these on file. TC only do for TC classes</i>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y __N
c.	Is there evidence that the course/Instructor evaluation tool is summarized? <i>N/A</i>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y __N
d.	Is a summary of course/Instructor evaluations maintained in course files and individual evaluations maintained for those with potential issues/problems?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
e.	Are individual Instructors evaluated? <input checked="" type="checkbox"/> Is there evidence that the TC used the information on the course/Instructor evaluation tool for improvement? <input checked="" type="checkbox"/> Is there evidence that the overall TC program administration has been evaluated, ie, course structure, overall management, etc?	<input checked="" type="checkbox"/> Y __N	<input checked="" type="checkbox"/> Y __N	<input type="checkbox"/> Y __N
REVIEWER TIPS: Question 5e: Both items listed in e must be present for a Yes and a positive score.				
REVIEWER TABULATION: SECTION II Score summary of page 5		15 of 17	15 of 17	__ of 17

SECTION II: COURSE-FOCUSED FUNCTIONS continued		BLS	ACLS	PALS
6. a.	Does the TC use current exams? <i>N/A</i> Is the precourse exam given before the course? (Only required in PALS.)	X Y __N	X Y __N	__Y __N
b.	Is there evidence of a process in place for securing exams?	X Y __N	X Y __N	__Y __N
c.	Is there evidence of a process in place as to who has access to the exams?	X Y __N	X Y __N	__Y __N
d.	Is there evidence of a process in place for distributing the exams to TCF/Instructors?	X Y __N	X Y __N	__Y __N
e.	Is there evidence that course exams are issued to students and proctored?	X Y __N	X Y __N	__Y __N
7. a.	Does the TC use rosters with AHA guidelines for all courses?	X Y __N	X Y __N	__Y __N
b.	Is there evidence that rosters are used for every class?	X Y __N	X Y __N	__Y __N
c.	Are all areas of the roster completed?	X Y __N	X Y __N	__Y __N
7-1.	Whether an AHA roster is used or not, are all the following components included?			
a.	Name of organization? (TC and TS if applicable)	X Y __N	X Y __N	__Y __N
b.	Type of course?	X Y __N	X Y __N	__Y __N
c.	Instructors listed and their status or position? Was a physician instructor available (ACLS/PALS only)?	X Y __N	X Y __N	__Y __N
d.	Number of participants?	X Y __N	X Y __N	__Y __N
e.	Number of participants remediated?	X Y __N	X Y __N	__Y __N
f.	Number of participants incomplete?	X Y __N	X Y __N	__Y __N
g.	Instructor-student-manikin ratio? (Determine from number of participants/Instructors listed)	X Y __N	X Y __N	__Y __N
h.	Total hours of instruction? (Time of start and finish)	X Y __N	X Y __N	__Y __N
i.	Signed and dated by Lead Instructor or Course Director?	X Y __N	X Y __N	__Y __N
j.	Test scores (optional) REVIEWER: Do not score this question.	__Y X N	__Y X N	__Y __N
8. a.	Does the TC have adequate space to conduct courses? Does the TC consistently use one facility? Yes __ No X Does the TC use multiple facilities? Yes X No __ If using multiple facilities, how does the TC ensure an atmosphere that is conducive to learning?	X Y __N	X Y __N	__Y __N
REVIEWER TIPS Question 8: Review rosters for average number of participants. Note criteria in BIM: Adult Learning. Non-boldface questions are for information only.				
REVIEWER TABULATION:		SECTION II Score summary of Page 6	19 of 19	19 of 19
				4 of 19

SECTION II: COURSE-FOCUSED FUNCTIONS continued		BLS	ACLS	PALS
9. Is there evidence that the TC provides access to textbooks:				
a. Before the course?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
b. During the course?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
c. After the course?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
d. Does the TC have an adequate supply of appropriate textbooks for courses offered?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
REVIEWER TABULATION:		SECTION II Total score: Add scores of previous summaries and above questions.		
		42 of 44	42 of 44	___ of 44

**SECTION III
INSTRUCTOR-FOCUSED FUNCTIONS**

		BLS	ACLS	PALS
1-1. Each TC must maintain a current file on Instructors/TCF in all disciplines. (See PAM, Chapter 5; Appendix D; Extranet)				
a. Is there evidence of a file for each Instructor/TCF member?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
1-2. All files should be complete. Note the following criteria:				
a. Name		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
b. Job status (ie, MD, RN, EMT-P, etc)		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
c. Mailing address? ___ Email addresses optional		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
d. Phone number?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
e. Copy of card?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
f. Initial recognition date?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
g. Renewal date?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
h. Instructor/TCF Monitor Form every two years for renewal instructors and within 90 days of Instructor course for Instructor candidates?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
i. Instructor/TCF Renewal Checklists: <input checked="" type="checkbox"/> Written exam <input checked="" type="checkbox"/> Psychomotor skills <input checked="" type="checkbox"/> Provider card (optional)		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
j. Instructor/TCF Teaching Activity Notice to Primary TC (if teaching outside primary TC)		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
k. Instructor Candidate letters of alignment with a TC on file?		<input checked="" type="checkbox"/> Y ___ N	<input checked="" type="checkbox"/> Y ___ N	___ Y ___ N
l. Instructor Course Completion Notice to Primary TC?		<input checked="" type="checkbox"/> Y ___ N ___ NA	<input checked="" type="checkbox"/> Y ___ N ___ NA	___ Y ___ N ___ NA
m. Instructor/TCF Records Transfer Requests? <input checked="" type="checkbox"/> Within 30-day time frame?		<input checked="" type="checkbox"/> Y ___ N ___ NA	<input checked="" type="checkbox"/> Y ___ N ___ NA	___ Y ___ N ___ NA
REVIEWER TABULATION:		SECTION III Score summary of Page 7		
		13 of 14	13 of 14	<input checked="" type="checkbox"/> of 14

SECTION III: INSTRUCTOR-FOCUSED FUNCTIONS continued		BLS	ACLS	PALS
2. a. Is there evidence of teaching activity for TCF/Instructors. <input checked="" type="checkbox"/> Individual Instructor file <input type="checkbox"/> Master list <input type="checkbox"/> Or both		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
3. a. Is there evidence that the TC has conducted an adequate number of provider courses?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
b. Is there evidence that the TC conducted any Instructor Courses?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA
4. Is there evidence that the TC updated Instructors/TCF with the latest information on:				
a. AHA courses?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
b. Science guidelines?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
c. Policies and procedures?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
d. Training bulletins?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
e. Has the TC updated TS with the latest information?		<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA
REVIEWER TABULATION:	SECTION III Total score: Add scores for all questions in this section.	2 of 22	2 of 22	4 of 22

**SECTION IV
EQUIPMENT-FOCUSED FUNCTIONS**

		BLS	ACLS	PALS
1. a. Can TC produce a list of training equipment for courses taught?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
b. Is there a sufficient amount of equipment available for each course?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
c. Is the equipment in good working order?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
2. a. Does the TC provide records that training equipment was cleaned?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
b. Are enough AED trainers available?		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
c. Has the TC inspected course equipment in its TS?		<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA
REVIEWER TIPS: Question 2: If the TC does not maintain Training Sites, "c" will have to be scored as an "NA." Count the "NA" as a "Yes."				
REVIEWER TABULATION:	SECTION IV Total score: Add scores for all questions in this section.	6 of 6	6 of 6	4 of 6

RATING	COMPLIANCE	REQUIREMENTS
1—(95% to 100%)	Assessment provides evidence of excellent compliance.	Compliant, no requirements, best practice for total score.
2—(80% to - 94%)	Assessment provides evidence of acceptable compliance.	Compliant, no requirements.
3—(70% to 79%)	Assessment does not provide evidence of acceptable compliance.	Noncompliant; additional documentation within 30 days.
4—(<70%)	Assessment does not provide evidence of acceptable compliance.	Noncompliant; additional documentation within 30 days and a focused administrative review within 90 days.

A score of 70% to 79% (rating of 3) in any individual section will result in the TC supplying additional documentation within 30 days.

A score of <70% (rating of 4) in any individual section will result in additional documentation and a focus review within 90 days.

Comments:

AHA Staff

Print

Signature

Date: _____

TC Coordinator

DORIS JEPSON

Print

Doris Jepson

Signature

Date: 6.16.15

NOTE: The following is a list of necessary equipment, including but not limited, to provide a successful course. For specific equipment requirements refer to the Instructor Manual in the appropriate discipline.			
REVIEWER: This is general information. There is no score for this section.			
	BLS	ACLS	PALS
Manikins: Number of manikins <u>25</u> Adult <u>4</u> Child <u>12</u> Infant <u>Y</u> Are manikins accessible for inspection? <u>Y</u> If manikins are available, are they in good working order? <u>Y</u> Adequate space for storage?	<u>X</u> <u>Y</u> <u> </u> <u>N</u>	<u>X</u> <u>Y</u> <u> </u> <u>N</u>	<u> </u> <u>Y</u> <u> </u> <u>N</u>
AEDs: <u>6</u> Number of AED trainers available.	<u>X</u> <u>Y</u> <u> </u> <u>N</u>	<u>X</u> <u>Y</u> <u> </u> <u>N</u>	<u> </u> <u>Y</u> <u> </u> <u>N</u>
Defibrillators/simulators (ACLS/PALS): <u>2</u> Number of defibrillators <u>1</u> Number of simulators <u>also Hospital provides simulator</u>	<u> </u> <u>Y</u> <u>NA</u> <u>N</u>	<u>X</u> <u>Y</u> <u> </u> <u>N</u>	<u> </u> <u>Y</u> <u> </u> <u>N</u>
Airway equipment: <u>30+</u> Number of masks <u>X</u> Number of valves disposable <u>20+</u> Number of bag masks	<u> </u> <u>Y</u> <u> </u> <u>N</u>	<u>X</u> <u>Y</u> <u> </u> <u>N</u>	<u> </u> <u>Y</u> <u> </u> <u>N</u>
Intubation equipment (ACLS/PALS): <u>2 sets</u> Number of handles/blades <u>X</u> Tracheal tubes (assorted sizes) <u>X</u> Combitubes (ACLS only) <u>X</u> LMA <u>Hospital provides</u>	<u> </u> <u>Y</u> <u> </u> <u>N</u>	<u> </u> <u>Y</u> <u> </u> <u>N</u>	<u> </u> <u>Y</u> <u> </u> <u>N</u>
IO needles for PALS (ACLS optional): <u> </u> Number of IO needles <u> </u> Bones or simulations for IO access <u>NA</u>	<u> </u> <u>Y</u> <u> </u> <u>N</u>	<u> </u> <u>Y</u> <u> </u> <u>N</u>	<u> </u> <u>Y</u> <u> </u> <u>N</u>

TRAINING CENTER SCORING			
	BLS	ACLS	PALS
SECTION I	<u>36</u> of 37 = <u>97</u> % =	<u>36</u> of 37 = <u>97</u> % =	<u> </u> of 37 = <u> </u> % =
Rating (1-4)			
SECTION II	<u>42</u> of 44 = <u>95</u> % =	<u>42</u> of 44 = <u>95</u> % =	<u> </u> of 44 = <u> </u> % =
Rating (1-4)			
SECTION III	<u>21</u> of 22 = <u>95</u> % =	<u>21</u> of 22 = <u>95</u> % =	<u> </u> of 22 = <u> </u> % =
Rating (1-4)			
SECTION IV	<u>6</u> of 6 = <u>100</u> % =	<u>6</u> of 6 = <u>100</u> % =	<u> </u> of 6 = <u> </u> % =
Rating (1-4)			
TOTAL	<u>106</u> of 110 = <u>96</u> % =	<u>106</u> of 110 = <u>96</u> % =	<u> </u> of 110 = <u> </u> % =
Rating (1-4)	<u>1</u>	<u>1</u>	

Training Center – Administrative Review

Proposed corrections

Section I

4. b. We do not have a website dedicated to the AHA. Students for our classes can go to the class list and sign up for classes through the college website.

12. b. We have one instructor who is an assistant teacher under one of our instructors aligned with a different training center. Her records will be updated.

We will still have a score of 7 out of 8 unless the CGCC website qualifies

Section II

5. a. Yes, the instructors are required to keep these documents 3 years.

5.b. Should have been marked yes, see above. We have them on file for all instructor classes taught at the college.

5.c. This has been created and will be distributed to all the instructors. They will still be required to keep the copies of the original forms but will also be required to submit the completed summary before their rosters will be accepted and processed

These changes to section II will bring us into full compliance.

Section III

1-2. b. Job status for our instructors has not been previously recorded. We will in the future include this in our records and update the records of our current instructors.

This change will bring us into full compliance with Section III

*Add line to
Renewal & initial
forms*

Section IV

No changes needed. We are in full compliance.

GENERAL LIABILITY and AUTO LIABILITY EVIDENCE OF INSURANCE CERTIFICATE

AGENCY/AGENT - ISSUING CERTIFICATE		Date: 7/12/2016 Print
Courtney Insurance Agency PO Box 580 The Dalles, OR 97058 Liz Narciso (541) 296-4604		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE COVERAGE DOCUMENTS. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE COVERAGE DOCUMENTS LISTED HEREIN. THIS CERTIFICATE DOES NOT CONSTITUTE A CONTRACT BETWEEN ANY OF THE FOLLOWING PARTIES: THE AGENCY, NAMED PARTICIPANT, CERTIFICATE HOLDER AND/OR COMPANIES AFFORDING COVERAGE.

NAMED PARTICIPANT/MEMBER - REQUESTING CERTIFICATE		ORGANIZATIONS AFFORDING COVERAGE
Columbia Gorge Community College 400 East Scenic Drive The Dalles, OR 97058-3456 Courtney Judah 541- 506-6000		Company A - Property Casualty Coverage for Education (PACE) Company B - Genesis Insurance Company

COVERAGES

This is to certify that Coverage Documents listed herein have been issued to the Named Participant herein for the Coverage Period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which the certificate may be issued or may pertain, the coverage afforded by the Coverage Documents listed herein is subject to all the terms, conditions and exclusions of such Coverage Documents. Aggregate Limits which are shown may have been reduced by paid Claims, Suits or Actions. The titles referenced under Type of Coverage are inserted solely for convenience of reference and shall not be deemed in any way to limit or affect the provisions to which they relate.

DR/CD LTR	Type of Coverage	Coverage Document	Effective Date	Expiration Date	Limits	
A B	General Liability	31P60253-414	7/1/2016	6/30/2017	General Aggregate	\$20,000,000
	X Commercial General Liability				Each Occurrence	\$10,000,000
	X Public Officials Liability					
	X Employment Practices					
	X Occurrence					
Employment Practices Deductible/SIR: \$0 Wrongful Acts Deductible/SIR: \$0 General Liability Deductible/SIR: \$0 *\$5,000 Minimum deductible for terminations if PACE or approved legal counsel is not consulted prior to an employment termination.						
A B	Automobile Liability	31P60253-414	7/1/2016	6/30/2017	General Aggregate	\$20,000,000
	X Scheduled Autos				Each Occurrence	\$10,000,000
	X Hired Autos & Non-Owned Autos					
	X Occurrence					
	X Deductible/SIR: \$0					

Remarks: Evidence.
 *Information is provided as of the date this certificate was generated and issued and is subject to change.

Certificate Holder - Requesting Certificate American Heart Association National Service Center 7272 Greenville Ave Dallas, TX 75231	CANCELLATION: Should any of the Coverage Documents herein be cancelled before the expiration date thereof, PACE will endeavor to provide notice in accordance with the PACE General Liability Coverage Document provisions. Failure to mail such notice shall impose no obligation or liability of any kind upon PACE, its agents or representatives, or the issuer of this certificate.
	Authorized Representative of Named Participant: Date: 7/12/16 <i>E. Narciso</i>

[Print](#)

Appendix E

BLS
COURSE
SURVEY

1. CHECK_TCID

A L E R T

ECC Online Course Monitoring Form

ONLY To be used for

OR04460 - Columbia Gorge Comm College

Discipline: BLS

If this is not the TC and Discipline being reviewed, please close this form and use the link to the correct form, or contact your VSS immediately for the correct link.

To confirm this is the correct TC and Discipline being reviewed, click the Confirm button to continue.

2. A_F

Course Monitoring Information

TC ID #: OR04460

Training Center Name: Columbia Gorge Comm College

Street Address

400 E Scenic Dr

City

The Dalles

State

OR

Zip

97058

Review Date
(MM/DD/YYYY)

10/17/2015

3. G_L

Course Start Date
(MM/DD/YYYY)

10/17/2015

Course Start Time (Select the time closest to the Course Scheduled Start Time):

8:30 AM

Course End Date
(MM/DD/YYYY)

10/17/2015

Course End Time (Select the time closest to the Course Scheduled End Time):

12:30 PM

Type of ECC Course reviewed:

2011 BLS for Healthcare Providers

Choose one:

Initial Course

4. M_P

Name of Training Center Coordinator

Doris Jepson

Name of course director(ACLS and PALS Courses)/Lead Instructor

Holly Webster (BLS)

Number of assisting instructors

1

Number of instructors monitored for renewal

0

Number of students registered

3

Number of students attending

2

5. Q_U

Reviewer's Name

Rod Rowan

Arrival Time Day 1 (Select the time closest to the Arrival Time):

8:00 AM

Departure Time Day 1 (Select the time closest to the Departure Time):

2:00 PM

Arrival Time Day 2 (Select the time closest to the Arrival Time):

Departure Time Day 2 (Select the time closest to the Departure Time):

6. Q1.1_Q1.2

Course Review

Evaluating the Critical Actions: The following questions are critical actions required for a successful course. Each item is written to maximize the objectivity and minimize the subjectivity of the evaluator. Comments are required for all questions responding with "Yes, with Req." or "No" Comments are optional with "Yes" responses. All comments will help the TCC and Instructor understand where improvements can be made.

For each item, mark:

Yes for items present or done if there are no required changes for improvement. There may be recommendations for improvement and comments, but not required changes.

Yes, with Req. (Yes, with Requirements) for items that were done, but changes are required for full compliance. Fill in the Comment Box with the required change and rationale.

No if the required action was not done or was done incorrectly.

1.1 Was facility accessible to persons with a disability?

Notation: Score "No" ONLY if a student required access that was not available.

In the United States, public facilities must be compliant with the Americans with Disabilities Act. Outside the United States, facilities must be compliant with national and local regulations

Yes

1.1.a) Reviewer's comments:

State of the art college facility.

1.2 Was there adequate floor and/or table space available to practice CPR?

Skill scenarios may be practiced on either a table or the floor. Ideally, practice should occur in the setting that the student would most likely perform the skill.

Yes

1.2.a) Reviewer's comments:

7. Q1.3_Q1.3c

1.3 Did Student-Instructor ratio meet AHA guidelines?

The Student to Instructor ratio is given in the discipline-specific instructor manual. This ratio may not be exceeded for any reason unless additional time is added to the station as specified in the instructor manual.

Yes

1.3.a) Number of Students per station:

2

1.3.b) Number of Instructors per station:

1

1.3.c) Reviewer's comments:

8. Q1.4_Q1.4e

1.4 Were students given the opportunity to evaluate the course?

A course evaluation is required for every AHA course. If the sample AHA course evaluation form is not used, at a minimum the form used must include the AHA items, including space to evaluate the facility, the course and the instructor. Directions for sending the form directly to the AHA must be included on the form.

Yes

1.4.a) Reviewer's comments:

1.4.b) Did evaluation form have all AHA required information?

Yes

1.4.c) Did the form give the student the opportunity to evaluate the instructor?

Yes

1.4.d) Were directions given for sending form directly to AHA if desired?

Yes

9. Q1.5_Q1.7a

1.7 Please provide any additional comments about the Facility/Class Structure.

The college is a beautiful campus and an icon in the community. Their professional and well established image represents the AHA very well.

10. Q2.1_Q2.2a

2.1 Was the AHA core course content completely covered?

The course outline or agenda given in the instructor manual should be followed as much as possible. In the rare instance where deviation from the course outline or agenda is allowed, all core content must be completely covered.

Yes

2.1.a) Reviewer's comments:

2.2 During the course, did the instructor use only AHA material as the course material?

Customized material can be added before or after the course, but must be clearly identified as not part of curriculum, or being AHA developed. Additional material must not contradict AHA science guidelines or be used as substitutes for the required AHA material. An instructor may not add a customized PowerPoint or DVD presentation. Any added materials must be disclaimed as not AHA materials and cannot be substituted for the material within the Lesson Maps. All material as presented in the Lesson Maps must be used. Appropriate time changes need to be considered when additional material is added.

Yes

2.2.a) Reviewer's comments:

12. Q2.3_Q2.4a

2.3 Was the skills practice time adequate according to the requirements of the Lesson Maps?

The Lesson Maps provide exact timing for skills practice. Additional practice time can be utilized freely as necessary.

Yes

2.3.a) Reviewer's comments:

2.4 Were AHA scenarios used throughout the course?

AHA case scenarios given on the Lesson Maps for BLS courses and on the instructor CDs for ACLS and PALS courses are not optional. The AHA case scenarios are specifically designed to encompass all of the core learning content. When the case scenarios are used, all of the core teaching points will be made and also skills evaluations will be more consistent. Instructors may vary the patient age (adult ages for ACLS), gender, or location to provide a scenario within the student's scope of practice.

Yes

2.4.a) Reviewer's comments:

13. Q2.5_Q2.7a

2.5 Was high quality CPR actually performed as necessary throughout the course?
The basis of the BLS , ACLS and PALS courses is high quality CPR. In a BLS course the students must take the practice seriously and perform to the best of their ability at all times. In ACLS and PALS courses, high quality CPR must be performed whenever CPR is required. Simulated CPR is not allowed except in environments that only have one of two students, such as skills tests for eLearning courses.

Yes

2.5.a) Reviewer's comments:

The Instructor is an allied healthcare professional with a passion for cardiac arrest and teaching CPR within the community. While not being active within a critical care environment, she emphasized appropriately maintained high quality CPR at all opportunities.

2.6 Did the Instructor refrain from "lecturing" during the practice stations except as outlined in the Lesson Maps?

Studies have shown that students learn better by practicing than by listening to lecture.

Yes

2.6.a) Reviewer's comments:

Yes. The instructor provided appropriate feedback and guidance when needed.

2.7 Did the instructor(s) or Course Director take corrective measures when students made mistakes during practice stations?

The corrective measures may be immediate, or during the debriefing as appropriate, but mistakes should be corrected during the learning or practice station debriefing time.

Yes

2.7.a) Reviewer's comments:

14. Q3.1_Q3.2a

3.1 Were the AHA skills performance checklists used for skills evaluation?

The AHA Skills Performance Checklists must be used for all skills evaluations. It is acceptable to document on a single "master list" for the entire class.

Yes

3.1.a) Reviewer's comments:

3.2 Did instructors AVOID prompting students during skills testing?

The instructor may not prompt any student in any way during skills testing. The instructor may only make remarks as listed on the Lesson Maps and skills performance checklists.

Did not prompt

3.2.a) Reviewer's comments:

15. Q3.3_Q3.4a

3.3 Did all instructors evaluate the students according to the critical skills descriptions?

The critical skills descriptions provide the detail necessary to use the skills performance checklists. The skills performance checklists when used together with the critical skills descriptions will yield the best evaluation of skills performance.

Yes

3.3.a) Reviewer's comments:

3.4 Were all students who needed remediation according to the critical skills descriptions identified, remediated and reevaluated?

If the instructor passed any student who you would have recommended for remediation according to the skills performance checklists and the critical skills descriptions, this response should be marked "Yes, with required improvements" or "no". Reviewer's comments are required.

No student needed remediation

3.4.a) Reviewer's comments:

The class consisted of only two people and one of the students was an emerging EMT with a string passion for healthcare. The instructor provided all needed information during the teaching and skills sessions, thereby negating any need for remediation.

16. Q3.5_Q3.7a

3.5 Was sufficient skill evaluation and written exam remediation (for HCP, ACLS and PALs only) provided to students who needed it?

Sufficient remediation varies with circumstances and although ideally results in a successful completion for the student, there may be instances where a student needs more remediation than time allows. In such circumstances sufficient remediation may mean asking the student to remediate at another time or retake the course.

Yes

3.5.a) Reviewer's comments:

Again, there was no need for remediation, but the instructor was appropriate in the provision of support during the course.

3.6 Were only the most recent and unaltered AHA written exams used?

Many AHA courses include written exams. The only authorized written exams are the most recent course-specific AHA written exams. The exams may not be altered in any way, including changing, adding or subtracting questions.

All HS courses will
be programmed "Yes"
Yes

3.6.a) Reviewer's comments:

Only AHA materials were used.

17. Q3.7b_Q3.7h

3.7.c) How many students scored less than 84% on the initial written exam?

0

3.7.e) Describe how students were remediated on the skills evaluations.

NA

3.7.f) How many students did not pass the course?

0

19. Q4.1_Q4.2a

4.2 Did instructors use Instructor Manual / Lesson Maps during the course?

The Lesson Maps contain specific instructions and information that an instructor must reference during the course. The Instructor Manual and Lesson Maps must be in the instructor's possession and preferably open and ready to use.

Yes

4.2.a) Reviewer's comments:

20. Q4.3_Q4.4a

4.3 Were ALL appropriate AHA audiovisual materials used?

Studies have shown that video presentation is superior to lecture or demonstration. Use of the course DVDs is outlined in the Lesson Maps and is not optional. A "Yes" may be entered only if the course DVDs were used as outlined in the Lesson Maps and no DVD lessons were omitted.

Yes

4.3.a) Reviewer's comments:

4.4 Was ALL the required equipment available and in sufficient quantity as listed in the instructor manual?

A list of the required equipment is available in the instructor manual for each discipline. While it is nice to have extra equipment and the newest equipment available, only the minimum equipment in working condition is required. The reviewer must exercise caution to avoid personal prejudice against a training center that uses equipment that is different or older.

Yes

4.4.a) Reviewer's comments:

22. Q4.7_Q4.8a

4.7 Were instructors familiar with equipment and able to perform any necessary troubleshooting?

An instructor must be familiar with the equipment being used at his or her station. It is not necessary for every instructor to be familiar with all equipment if a type of equipment is not being used in his or her station. The Course Director should be familiar with all of the equipment being used in the course. Even with the best preparation, equipment can develop problems. If problems developed with the equipment during the course, was the instructor able to handle the situation with a minimum disruption in the course either by changing equipment or by solving the problem?

Yes

4.7.a) Reviewer's comments:

4.8 Were all students given the opportunity to use the AED?

AED usage is a requirement for all Healthcare Provider courses including BLS HCP, ACLS and PALS, as well as some Heartsaver courses.

All HS courses will
be programmed "Yes"

Yes

4.8.a) Reviewer's comments:

26. Q6.1_Q6.4

6.1 Reviewer's overall comments:

Doris Jepson is the TC for Columbia Gorge Community College.

The facility is a modern well established icon in this small town in the Columbia gorge. The CTC operates in conjunction with the healthcare services and nursing program that is part of the same educational division. This structure and background works well with the AHA CTC, as it provides a consistent manner of doing business, which is in unison with the AHA requirements.

The HCP BLS course was only attended by two students this Saturday morning, but the instructor (Holly Webster) provided a well organized and methodical presentation as required by the AHA. Appropriate materials were used and the course maintained a flow conducive to a positive learning environment.

What I found most impressive about Ms. Webster was her passion for providing this critical care training on an ongoing manner for the CTC. Ms. Webster is a local healthcare provider, but does not routinely provide critical care where CPR would be employed. However, Ms. Webster took the initiative a few years ago and has maintained a consistent presence with the community by working with the college teaching CPR classes. This long-term relationship speaks volumes about the quality of instructor and is a direct reflection of the positive leadership and management of the CTC by Ms. Jepson.

The small class size helped to create a positive outcome for the students, but the instructor was instrumental in avoiding any pitfalls or shortcomings that are sometimes noted.

The equipment was clean and well-maintained and served to provide all the required elements helping to insure success.

I was able to note all the required documentation / cards / and associated paperwork was secure and I could not find any issues of irregularities that would be cause for concern.

The only item I wish to comment about concerns communication. Ms Jepson shared that it would be of benefit to have of know of resources that could offer support when needed. Ms. Jepson certainly understands the various resources available, byway of the instructor network and account management. However, being able to reach out to various regional faculty or other CTC's is sometimes helpful.

I concur that helping to provide closer networking in support of CTC's by Regional Faculty volunteers would benefit the CTC and serve the AHA. I believe the restructuring and mission of the ECC will help further this effort.

I appreciate the opportunity to have me Doris and Holly and am happy to know they are part of the AHA mission.

Respectfully Submitted,

Rod Rowan

Reviewer's Overall Score:

Successful monitoring with Recommendations (All Yes scores)

27. Q6.7_Q6.16

By typing in my name below I agree that to the best of my knowledge all statements and assessments included in this Monitoring Form are true.

When the Regional Faculty submits the report online, (s)he will have an opportunity to download a pdf file of the report. If the Regional Faculty does not download the pdf file, no copy will be sent to him/her. A pdf copy will be sent to the Training Center.

Your email and phone number are only associated with this report and will not be shared as a result of submitting it with this report.

Contact Information

6.7 Reviewer's Name:

Rod Rowan

6.8 Reviewer's Email Address:

rodr@mac.com

6.9 Reviewer's Daytime Phone:

360 910-5126

6.14 Date:

11/20/2015

6.10 Second Reviewer's Name:

6.16 Date:

6.10 Second Reviewer's Name:

6.11 TC Coordinator Name:

Doris Jepson

6.12 TC Coordinator Email Address:

DJepson@cgcc.edu

ACLS
COURSE
SURVEY

2. A_F
CUSTOM

1. Training Center & Course Information

TC ID #: OR04460

Training Center Name: Columbia Gorge Comm College

TC ID#

Use format: SSNNNNN

(Two Letter State Abbreviation followed by 5 digits)

OR04460

Training Center Name

Columbia Gorge Comm College

Street Address

400 East Scenic Drive

Apt/Suite/Office

City

The Dalles

State

OR

Zip

97058

2. TC Coordinator Name:

Doris Jepson

3. TC Coordinator Email Address:

djepson@cgcc.edu

3. G_L

4. Course Start Date

(MM/DD/YYYY)

03/30/2016

5. Course Start Time (Select the time closest to the Course Scheduled Start Time):

8:00 AM

6. Course End Date

(MM/DD/YYYY)

03/31/2016

7. Course End Time (Select the time closest to the Course Scheduled End Time):

4:30 PM

8. 1st Date class observed:

03/30/2016

9. Your Arrival Time:

11:00 AM

10. Your Departure Time:

3:00 PM

11. 2nd Date class observed:

03/31/2016

12. Your Arrival Time:

9:00 AM

13. Your Departure Time:

4:00 PM

14. Type of ECC Course reviewed:

2016 ACLS Instructor Led Course

4. M_P

15. Name of Course Director/Lead Instructor

Rachel Crowder

16. Number of assisting instructors

3

17. Number of students registered

14

18. Number of students attending

14

6. Q1.1_Q1.2

19.

1.1 Was facility accessible to persons with a disability?

Notation: Score "No" ONLY if a student required access that was not available. In the United States, public facilities must be compliant with the Americans with Disabilities Act. Outside the United States, facilities must be compliant with national and local regulations.

Yes

20. 1.1.a) Reviewer's comments:

No students required special accommodations

21.

1.2 Was there adequate floor and/or table space available to practice CPR?

Skill scenarios may be practiced on either a table or the floor. Ideally, practice should occur in the setting that the student would most likely perform the skill.

Yes

22. 1.2.a) Reviewer's comments:

7. Q1.4

23.

1.4 Were students given the opportunity to evaluate the course?

A course evaluation is required for every AHA course. If the sample AHA course evaluation form is not used, at a minimum the form used must include the AHA items, including space to evaluate the facility, the course and the instructor. Directions for contacting the Training Center or the AHA directly are included on the form.

Yes

24. 1.4.a) Reviewer's comments:

Students complete and submit evaluation electronically

25. 1.4.b) Did evaluation form have all AHA required information?

Yes

26. 1.4.c) Did the form give the student the opportunity to evaluate the instructor?

Yes

27. 1.4.d) Were directions given for contacting the Training Center or AHA directly if desired?

Yes

8. Q1.7

28.

1.7 Please provide any additional comments about the Facility/Class Structure.

A stretcher is used for BLS skills demonstration which adds to the in house scenario

9. Q1.3

29.

1.3 Did Student-Instructor ratio meet AHA guidelines?

The Student to Instructor ratio is given in the discipline-specific instructor manual. This ratio may not be exceeded for any reason unless additional time is added to the station as specified in the instructor manual.

Yes

30. 1.3.a) Number of Students per station:

5

31. 1.3.b) Number of Instructors per station:

1

32. 1.3.c) Reviewer's comments:

Instructors knowledgeable and related well to students

10. Q2.1_Q2.2

33.

2.1 Was the AHA core course content completely covered?

The course outline or agenda given in the instructor manual should be followed as much as possible. In the rare instance where deviation from the course outline or agenda is allowed, all core content must be completely covered.

Yes

34. 2.1.a) Reviewer's comments:

Interim tools used

35.

2.2 During the course, did the instructor use only AHA material?

Customized material can be added before the course, after the course, or during the "Local Protocols Discussion", but must be disclaimed as not AHA developed materials and cannot be substituted for the material within the Lesson Plans. Additional material must not contradict AHA science guidelines or be used as substitutes for the required AHA material. An instructor may not add a customized PowerPoint or DVD presentation in place of the required course materials. All the material as presented in the Lesson Plans must be used. Appropriate time changes need to be considered when the additional material is added.

Yes

36. 2.2.a) Reviewer's comments:

Use of in-house Code Blue documentation form; supplemental strips for EKG review

11. Q2.2d_Q2.2e

2.2.d) Pick one

2.2.e) Describe the nature of the added content i.e. added scenarios, scope of practice specific, supplemental material, etc.

12. Q2.3_Q2.4

37.

2.3 Was the skills practice time adequate according to the requirements of the Lesson Plans?

The Lesson Plans provide exact timing for skills practice. Additional practice

time can be utilized freely as necessary.

Yes

38. 2.3.a) Reviewer's comments:

39.

2.4 Were AHA scenarios used throughout the course?

AHA case scenarios for BLS, ACLS and PALS provider courses are not optional. The AHA case scenarios are specifically designed to encompass all of the core learning content. When the case scenarios are used, all of the core teaching points will be made and also skills evaluations will be more consistent. Instructors may vary the patient age (adult ages for ACLS), gender, or location to provide a scenario within the student's scope of practice.

Yes

40. 2.4.a) Reviewer's comments:

13. Q2.5_Q2.7a

41.

2.5 Was high quality CPR actually performed as necessary throughout the course?

The basis of the BLS, ACLS and PALS courses is high quality CPR. In a BLS course the students must take the practice seriously and perform to the best of their ability at all times. In ACLS and PALS courses, high quality CPR must be performed whenever CPR is required. Simulated CPR is not allowed except in environments that only have one or two students, such as skills tests for eLearning courses.

Yes

42. 2.5.a) Reviewer's comments:

43.

2.6 *Informational Only: Is a CPR feedback device being used for Practice and Skills Testing?

Skills Testing Checklists indicate that use of a CPR Feedback Device for practice and Skills Testing is preferred, when available.

**This is an informational question only, DO NOT consider the response for this questions in your Reviewer's Overall Score.*

Yes

44. 2.6.a) Reviewer's comments:

45.

2.7 Did the Instructor refrain from "lecturing" during the practice stations

except as outlined in the Lesson Plans?

Studies have shown that students learn better by practicing than by listening to lecture.

Yes

46. 2.7.a) Reviewer's comments:

47.

2.8 Did the instructor(s) or Course Director take corrective measures when students made mistakes during practice stations?

The corrective measures may be immediate, or during the debriefing as appropriate, but mistakes should be corrected during the learning or practice station debriefing time.

Yes

48. 2.8.a) Reviewer's comments:

14. Q3.1_Q3.2

49.

3.1 Were the AHA Skills Testing Checklists used for skills evaluation?

The AHA Skills Testing Checklists must be used for all skills evaluations. It is acceptable to document on a single "master list" for the entire class.

Yes

50. 3.1.a) Reviewer's comments:

Interim checklists used

51.

3.2 Did instructors AVOID prompting students during skills testing?

The instructor may not prompt any student in any way during skills testing. The instructor may only make remarks as listed on the Lesson Plans and Skills Testing Checklists.

Did not prompt

52. 3.2.a) Reviewer's comments:

15. Q3.3_Q3.4

53.

3.3 Did all instructors evaluate the students according to the Critical Skills Descriptors?

The critical skills descriptors provide the detail necessary to use the skills testing checklists. The skills testing checklists when used together with the

critical skills descriptions will yield the best evaluation of skills performance.

Yes

54. 3.3.a) Reviewer's comments:

55.

3.4 Were all students who needed remediation according to the critical skills descriptors identified, remediated, and reevaluated?

If the instructor passed any student who you would have recommended for remediation according to the skills testing checklists and the critical skills descriptors, this response should be marked "Yes, with required improvements" or "No". Reviewer's comments are required.

No student needed remediation

56. 3.4.a) Reviewer's comments:

Course Director verbalized remediation plan and adequate space was provided for remediation station

16. Q3.5_Q3.6

57.

3.5 Was sufficient skill evaluation and written exam remediation provided to students who needed it?

Sufficient remediation varies with circumstances and although ideally results in a successful completion for the student, there may be instances where a student needs more remediation than time allows. In such circumstances sufficient remediation may mean asking the student to remediate at another time or retake the course.

Yes, with Req.

58. 3.5.a) Reviewer's comments:

The same instructors who were grading exams were also providing remediation which resulted in some students waiting a prolonged period to have their exam graded. Course Director verbalized that she would review this with her instructor team to see if that wanted identify one instructor as the "remediator"

59.

3.6 Were only the most recent and unaltered AHA written exams used?

Many AHA courses include written exams. The only authorized written exams are the most recent course-specific AHA written exams. The exams may not be altered in any way, including changing, adding or subtracting questions.

All HS courses will
be programmed "Yes"

Yes

60. 3.6.a) Reviewer's comments:

17. Q3.7

61.

3.7.c) How many students scored less than 84% on the initial written exam?

5

62.

3.7.e) Describe how students were remediated on the skills evaluations.

None were required however the Course Director verbalized that the student would meet one-on-one with Course Director if needed

63.

3.7.f) How many students did not pass the course?

0

19. Q4.2

64.

4.2 Did instructors use Instructor Manual / Lesson Plans during the course?
The Lesson Plans contain specific instructions and information that an instructor must reference during the course. The Instructor Manual and Lesson Plans must be in the instructor's possession and preferably open and ready to use.

Yes

65. 4.2.a) Reviewer's comments:

All instructors are provided manuals by the TC

20. Q4.3_Q4.4

66.

4.3 Were ALL appropriate AHA audiovisual materials used?

Studies have shown that video presentation is superior to lecture or demonstration. Use of the course DVDs is outlined in the Lesson Plans and is not optional. A "Yes" may be entered only if the course DVDs were used as outlined in the Lesson Plans and no DVD lessons were omitted.

Yes

67. 4.3.a) Reviewer's comments:

68.

4.4 Was ALL the required equipment available and in sufficient quantity as listed in the Instructor Manual?

A list of the required equipment is available in the Instructor Manual for each discipline. While it is nice to have extra equipment and the newest equipment available, only the minimum equipment in working condition is required. The reviewer must exercise caution to avoid personal prejudice against a training center that uses equipment that is different or older.

Yes

69. 4.4.a) Reviewer's comments:

21. Q4.5

4.5 Please list missing/unavailable equipment:

22. Q4.7_Q4.8

70.

4.7 Were instructors familiar with equipment and able to perform any necessary troubleshooting?

An instructor must be familiar with the equipment being used at his or her station. It is not necessary for every instructor to be familiar with all equipment if a type of equipment is not being used in his or her station. The Course Director should be familiar with all of the equipment being used in the course. Even with the best preparation, equipment can develop problems. If problems developed with the equipment during the course, was the instructor able to handle the situation with a minimum disruption in the course either by changing equipment or by solving the problem?

Yes

71. 4.7.a) Reviewer's comments:

72.

4.8 Were all students given the opportunity to use the AED?

AED usage is a requirement for all BLS, ACLS, and PALS courses, as well as some Heartsaver courses.

All HS courses will
be programmed "Yes"

Yes

73. 4.8.a) Reviewer's comments:

23. Q5.1_Q5.2

74.

5.1 Were all students given the opportunity to use the defibrillator?

Actual hands-on defibrillator usage is a requirement for all AHA ACLS and

PALS courses. Manikins or simulators that allow actual energy discharge are most realistic and are preferred, but not required. Every student should be allowed enough practice with the defibrillator to develop competency.

Yes

75. 5.1.a) Reviewer's comments:

76.

5.2 Were team roles consistently assigned by the team leader?

The Resuscitation Team Concept is an integral component in AHA ACLS and PALS courses. Each scenario should include the assignment of team roles very early in the scenario.

Yes

77. 5.2.a) Reviewer's comments:

24. Q5.3_Q5.4

78.

5.3 Were all students engaged in each scenario?

The student learns valuable skills not only when playing the role of team leader, but also as a team member. The student will not learn if he or she is not engaged. Therefore, all students must be engaged in each scenario.

Yes

79. 5.3.a) Reviewer's comments:

Use of facility specific documentation tool was excellent way to engage the scribe

80.

5.4 Did each student serve as team leader as required?

The course design requires each student to take a turn as team leader, even if the student may not normally serve as a team leader in the clinical setting.

Yes

81. 5.4.a) Reviewer's comments:

25. Q5.6

82.

5.6 Was debriefing performed as indicated in the Lesson Plans and consistently throughout the course?

Debriefing should occur for all scenarios and according to the time allotted in the Lesson Plans.

Yes, with Req.

83. 5.6.a) Reviewer's comments:

Initial debriefing lead by instructor . Assigned this as a function of the Team Leader upon suggestion by this evaluator

26. Q7.1_Q7.2

7.1 Is this an Instructor Led Session of the 2016 HeartCode BLS, ACLS, or PALS Blended Learning?

Instructor Led Sessions of the HeartCode BLS, ACLS, or PALS Blended Learning are acceptable for course monitoring. Practice and Testing Sessions conducted with a Voice-Assisted Manikin (VAM) would not be allowed for course monitoring.

7.1.a) Reviewer's comments:

7.2 Did the Instructor collect the online certificate?

Following successful completion of the HeartCode Online Training, students will receive a course completion certificate. Instructors need to collect this certificate and this should be kept with the session paperwork for the TC files.

7.2.a) Reviewer's comments:

27. Q7.3_Q7.4

7.3 Was the date of completion of the online course verified to be within the last 60 days?

Completion of the HeartCode Practice and Testing portion must be within 60 days following completion of the online session. Instructors should verify the date of completion noted on the course completion certificate.

7.3.a) Reviewer's comments:

7.4 Did the Instructor follow all core content of the session as listed in the 2016 HeartCode Lesson Plans and Agenda within the Instructor's Manual?

The course outline or agenda given in the instructor manual should be followed as much as possible and all core content must be completely covered.

7.4.a) If not, what core content was not covered?

7.4.b) Additional Reviewer's comments:

28. Q7.5_Q7.6

7.5 Did the students practice the skills while watching the DVD?

Course Lesson Plans, agendas, and the course DVD include practice while

watching skills sessions that the instructor should use within the course.

7.5.a) Reviewer's comments:

29. Q7.7

7.7 Did the Instructor evaluate students according to the Critical Skills Descriptors and the discipline specific Skills Testing Checklist?

The Critical Skills Descriptors provide the detail necessary to use the Skills Testing Checklists. The Skills Testing Checklists when used together with the Critical Skills Descriptors will yield the best evaluation of skills performance. The AHA Skills Testing Checklists must be used for all skills evaluations. It is acceptable to document on a single "master list" for the entire class.

7.7.a) Reviewer's comments:

If the response is "No" list specifically the skills not evaluated that are listed on the Skills Testing Checklist.

30. Q6.1

84. 6.1 Reviewer's overall comments:

Very well organized and professional course. The Course Director is well respected by the course participants

85. Reviewer's Overall Score:

NOTE: The question regarding feedback devices should not be included when calculating the Reviewer's Overall Score.

Successful monitoring with Recommendations (All Yes scores)

31. Q6.7_Q6.14

86. Contact Information

6.7 Reviewer's Name:

Jodi B. Knapp

6.8 Reviewer's Email Address:

quackrn@hotmail.com

6.9 Reviewer's Daytime Phone:

3607721214

6.14 Today's Date:

04/20/2016

87.

6.10 Second Reviewer's Name:

6.16 Date: