The Committee on Accreditation (CoA) recognizes the impact that COVID-19 is having on programs and Student Anesthesia Technologists (SATTs). The CoA continues to receive guidance from Commission on Accreditation of Allied Health Education Programs (CAAHEP) as well as other organizations including the Council for Higher Education Accreditation (CHEA) and Association of Specialized and Professional Accreditors (ASPA). The CoA supports actions being taken to ensure the health and safety of SATTs, faculty and patients. The CoA acknowledges that programs may need to implement strategies outside of normal operational procedures at this time. These strategies may be influenced by individual programmatic and institutional policies and procedures as well as; local, state and federal regulations. Guidance provided by the US Department of Education allows accrediting agencies some flexibility in addressing these circumstances. Our goal is to assist programs in remaining compliant with the CoA/CAAHEP's Standards and Guidelines during this pandemic.

The CoA is providing broad approval for programs to use Distance Education on a temporary basis. Approval for this purpose is not immediately required, however, a Substantive Change notification is required if programs plan to continue this type of education after the emergency period is over and face to face teaching is allowed.

The CoA requested committee members contribute information on how their programs are addressing clinical and didactic education. Additionally, the CoA gathered information from CAAHEP and other CoAs to determine how best to handle the abrupt change in how we deliver this education. These and other agencies are having discussions about specific methods and ideas. The answer to most options presented is yes, with the caveat to document and synchronous learning be included. Examples of learning activities include (but are not limited to) virtual simulation, journal clubs, case presentations, academic work, and review in preparation for the National Certification Examination. No one has all the answers and we really won't know what does and doesn't work for a while, however, the programs should make every effort to assure these are meaningful educational experiences. Decisions regarding the continuation of clinical rotations fall under the purview of programs, their conducting institutions, and clinical sites.

Programs are best at determining how to address educational experiences for students. They are most adapt at assuring competence is at the center of all instruction, regardless of the format. Activities should enable students to acquire needed competencies using alternate methods to clinical placements. These may include case studies, scenarios or role play. Engage members of faculty and your Advisory Committee in making decisions, if possible. Be sure to document how the program arrived at decisions for change, and what changes were implemented. If the program is required to make exceptions to any existing program policies for any students, be sure that exceptions are applied consistently to all students. Accreditors are collecting data and information on changes and accommodations put in place by programs. Again, documentation will be essential.

A Poll was conducted during the recent ASPA meeting. The Poll showed that about 35% of accreditors are asking programs to include information with their next annual report, about 17% requested submission of information now, and some remain undecided.

Accreditors, like CAAHEP, are monitoring outcomes as a normal part of the annual reporting process. It is up to the individual CoA to determine when reporting shall occur. The CoA-ATE may request an updated report of information and a full report included in the annual report.

Regarding On-Site Visits, the CoA's are: Rescheduling on-site visits to the fall of 2020; postponing fall 2020 visits pending information on schools opening; and requiring virtual visits to avoid a back-up with large CoAs.

The CoA-ATE will be meeting in the next few weeks to review what will work best for the Anesthesia Technology Profession. Summer/Fall semester 2020 will be discussed for students accepted prior to or during the COVID pandemic. We will update the website as soon as the CoA works out these processes.

Below is a list contributed by our committee members who are involved with programs:

1. Cengage – MindTap
   A. Nursing oriented information but the following courses apply to anesthesia technology.
   1. Patient Safety
   2. Blood gas analysis
   3. Positioning
CoA-ATE STATEMENT on COVID – 19

4. Medical Surgical Areas
5. Invasive and Non-Invasive monitoring equipment

2. Edwards LifeScience - www.edwardseducation.com
   A. Professional Development opportunities
   B. CE courses

   A. 25 free public simulations
   B. Gas machine troubleshooting

4. Virtual Clinical Excursions offered by Elsevier - Evolve.Elsevier.com
   A. Requires publisher access (publishers are offering free supplements during the pandemic).

   A. AnesSoft is a virtual anesthesia simulator. This software comes with preloaded simulations or simulations developed by AT Programs can be loaded into AnesSoft virtual software. Programs purchase this software. It is primarily built for anesthesiologists and nurse anesthetists.

6. Shadow Health - https://www2.shadowhealth.com/e/496501/covid19-webinar-recording/2rwmnt/326587578?h=1aZrPZPvHCMgpAX5vUjxWyNfuv8xZNbz6QUxHszIK-I
   A. Quality virtual patient scenarios – nursing based.

7. Zoom synchronous case reviews - break out groups review spontaneous OR, L&D and Code situations for clinical approach and report findings. Debriefing by entire class and faculty.

8. Research projects – In depth research and academic paper written. Corresponding PowerPoint presentation given with 50 min. minimum. Includes Q & A by classmates.

9. Additional sources for education and virtual site visits:
   - GoPro
   - pre-recorded tours
   - Zoom; use of waiting rooms helps with security
   - Web X
   - Ring Control
   - Institution/Program to choose platform used