



ACCREDITATION REVIEW COUNCIL ON EDUCATION IN SURGICAL TECHNOLOGY AND SURGICAL ASSISTING (ARC/STSA)

ACCREDITATION PROCESS, PROCEDURE AND TIMELINE

- I. **Initiating the Accreditation Process (Approximately 8 – 12 months*)**
 - A. Contact the ARC/STSA office before or upon institutional accreditor approval of a new surgical technology or surgical assisting program start.
 - B. Programs applying for accreditation for the first time or renewing accreditation that has expired will apply for Initial Accreditation.
 1. The ARC/STSA will schedule a mutually agreed upon On-Site Evaluation date based on schedule and visiting team availability and the program's start date. An On-Site Evaluation if at all possible will be scheduled when the program is at least ½ completed with the required clinical component or final phase of the program.
 2. The program will order a copy of the 'Accreditation Packet' to begin the 'Self-Study Application'.
 - C. Submission of the Accreditation Application
 1. The 'Self-Study Application' should be received in the ARC/STSA office at least 4 months prior to the On-Site Evaluation and should include:
 - a. Completed Self-Study Report
 - b. \$1500.00 Initial Application Fee
 - c. \$2500.00 Initial On-Site Evaluation Fee (\$4000 total) by institutional check or money order
 - d. CAAHEP Request for Accreditation Services (RAS form available at(www.caahep.org))
 - e. On-Site Evaluation schedule
- II. **On-Site Evaluation and Program Approval (Approximately 8 to 12 months*)**
 - A. The On-Site Evaluation will be performed over approximately 1½ to 2 days. On-Site Evaluations (site visits) for all program applicants for Initial Accreditation cannot occur before at least one cohort/class is at least ½ complete with the clinical requirement for successful program completion and/or before the program has provided evidence of institutional accreditation.
 - B. The program is informed via letter of the On-Site Evaluators' findings and/or concerns found during the On-Site Evaluation (Approximately 6-8 weeks*).
 - C. The program is given approximately 6 to 8 weeks to submit a formal response to the letter of findings. The accreditation application is complete upon the receipt of the program's response and any additional documentation requested at the ARC/STSA office.
 - D. The program's application is forwarded to the next SASA (SA programs), ARC/STSA and CAAHEP board meetings.
 1. The ARC/STSA board (and its subcommittee SASA) meets twice a year in March and September.
 - a. On-Site Evaluations performed in the months of November –April are generally forwarded to the September ARC/STSA meeting, if the program's application is complete.
 - b. On-Site Evaluations performed in the months of May-October are generally forwarded to the March meeting, if the program's application is complete.
 2. Applications are forwarded by ARC/STSA to the CAAHEP board twice a year in May and November.
 - a. On-Site Evaluations performed in the months of November–April are generally forwarded to the November CAAHEP meeting, if the program's application is complete.
 - b. On-Site Evaluations performed in the months of May–October are generally forwarded to the May CAAHEP meeting, if the program's application is complete.
 3. Upon the completion of a CAAHEP meeting, each program will be notified of CAAHEP's decision in writing approximately 2 weeks following the meeting.

III. The Initial Accreditation (Initial accreditation expires in 5 years)

- A. Once a program has received Initial accreditation, it will begin submitting an Annual Report that is focused on the program outcomes and reflects the ARC/STSA mandated academic year 8/1/xx-7/31/xx.
- B. Each program should use the ARC/STSA standardized Graduate and Employer Satisfaction Surveys and an ARC/STSA *Approved* outcomes program assessment exam as tools for the Annual Report.
- C. Annual Reports are due by May 1st of every year.
 - 1. Any deficiencies reported must include the program's assessment and corrective plan of action to remedy the deficiencies satisfactory to the ARC/STSA.
 - 2. Deficient programs begin a dialogue with the ARC/STSA as part of the "Due Process" system.
- D. After receipt of two to three Annual Reports and a required Program Review Report (PRR), approximately 2 to 3 years after Initial Accreditation is awarded, the ARC/STSA will determine if the program is in continued compliance with the Standards.
 - 1. If the program is determined to be in compliance, then the ARC/STSA will forward a recommendation of Continuing Accreditation to CAAHEP.
 - 2. If the program is determined to be in non-compliance, then the ARC/STSA will require the scheduling of a Qualitative On-Site Evaluation. (Please see the "General Operating Procedures, Annual Reporting Information" for the "Due Process" system.)

Continuing Accreditation (No expiration)

- A. After a program receives Continuing accreditation, it will continue to submit Annual Reports under the schedule listed above. On-Site Evaluations will be performed at least once in a ten-year period. These evaluations will be performed in two different formats. The following is a basic synopsis of these processes:
 - 4. Random/Continuing On-Site Evaluation (1 day)
 - a. Will occur at least once in a 10-year period.
 - b. Focus is on the verification of Annual Report data.
 - c. Approximately 4-8 weeks' notice will be given to programs in advance of the visit.
 - d. No Self-Study report will be required, unless previously asked for by the ARC/STSA
 - 5. Consultative/Comprehensive On-Site Evaluation (2 days)
 - a. Triggered by consistently low outcomes thresholds
 - b. Focus on Annual Report deficiencies and program changes that will help the program bring its outcomes back to set threshold levels.
 - c. This On-Site Evaluation will be scheduled based on a mutually agreed upon date.
 - d. No Self-Study report will be required, unless previously asked for by the ARC/STSA
- B. Continuing programs will continue to go through the accreditation cycle until a decision is made by the program to voluntarily withdraw or the ARC/STSA recommends withdrawal of accreditation.

**Timelines are broad estimates and provided as a courtesy only. The actual process does not begin until the program has submitted its Self-Study application, all applicable fees have been paid, and a site visit scheduled. It is important to understand that each program progresses through the accreditation application process at an appropriate pace greatly based on the overall readiness of the program, the quality of the Self-Study Application submitted, the availability of site visitors and the schedule of Board meetings as noted. The time it takes a program to progress through accreditation does not specifically reflect on the qualities of the program.*