

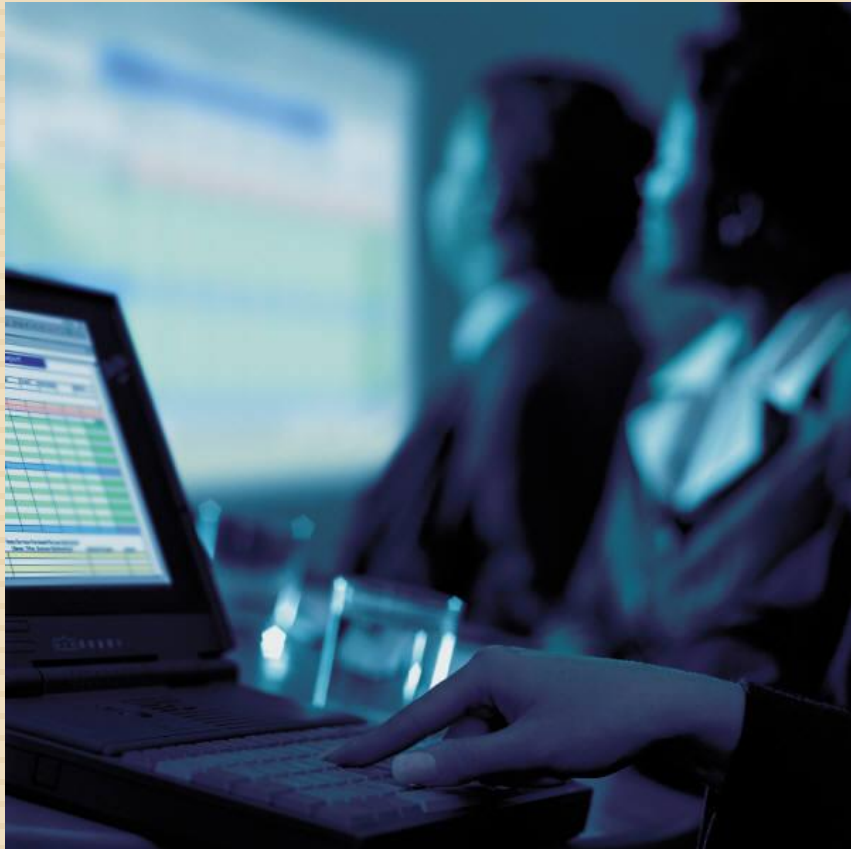
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Self Study Handbook

Revised March 2023

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Section 1

The Accreditation Process

The Accreditation Process

Accreditation is a system for recognizing educational institutions and professional programs affiliated with those institutions for a level of performance, integrity and quality which entitles them to the confidence of the educational community and the public they serve. In the United States this recognition is extended primarily through nongovernmental, voluntary institutional or professional associations. These groups establish criteria for accreditation, arrange onsite reviews, evaluate institutions and professional programs that desire accreditation and publicly designate those that meet their criteria.

In most countries, the establishment and maintenance of educational standards is the responsibility of a central government bureau. In the United States, public authority in education is constitutionally reserved to the states. A system of voluntary nongovernmental evaluation, called accreditation, has evolved to promote both regional and national approaches to determine educational quality. Although accreditation is basically a private, voluntary process, accrediting decisions are used in many formal actions by governmental funding agencies, scholarship commissions, foundations, employers, counselors and potential students. Accrediting bodies have come to be viewed as quasi-public entities with certain responsibilities to the many groups that interact with the educational community.

In the United States, accreditation at the postsecondary level performs a number of important functions, including the encouragement of efforts to achieve maximum educational effectiveness. The accrediting process requires institutions and programs to examine their goals, activities and achievements; to consider expert criticism and suggestions of an onsite review team and to determine internal procedures for action on recommendations from the accrediting body. Since accreditation is reviewed on a periodic basis, recognized institutions and professional programs are expected to maintain continuous Self Study and improvement mechanisms.

The Accreditation Process

continued

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Postsecondary education in the United States derives its strength and excellence from the unique and diverse character of its many individual institutions. Such qualities are best sustained and extended by the freedom of institutions to determine their own objectives and experiment in the ways and means of education within the framework of their respective authority and responsibilities. Public as well as educational needs must be served simultaneously when determining and fostering standards of quality and integrity in institutions and specialized programs. Accreditation, conducted through nongovernmental institutional and specialized agencies, provides a major means for meeting those needs.

Specialized accreditation

Specialized accreditation of professional and occupational schools and programs is granted by accrediting agencies established by national professional organizations.

Each group has its own distinctive definitions of eligibility, criteria for accreditation and operating procedures, but all have undertaken accreditation activities primarily to provide quality assurance concerning the educational preparation of members of the profession or occupation.

Purpose of Accreditation

- Accreditation is a dynamic, evolving process, which has moved away from quantitative criteria which examine checklists of resources and moved toward qualitative criteria which measure the degree of effective learning. The formal process begins with Self Study, a comprehensive effort to measure progress according to previously accepted objectives. Self Study considers the interests of a broad cross-section of constituencies: students, faculty, administrators, alumni, trustees and, in some circumstances, the local community.
- The Self Study report is reviewed by the appropriate accrediting agency and serves as the basis for evaluation by a team from the accrediting agency. The onsite review team normally consists of professional educators who assess programs in light of the Self Study and add judgments based on their own expertise and external perspective. The team prepares an evaluation report that is reviewed by the program for factual accuracy. The team report is forwarded to the accrediting agency, along with any response the institution or program may wish to make. The review body uses these materials and the original Self Study as the basis for action regarding the accreditation of the program. Adverse decisions may be reconsidered and then appealed according to established procedures of the accrediting agency and appeal body.
- Although accreditation is generally granted for a specific term, accrediting bodies reserve the right to review member programs for cause at any time. Accrediting bodies also reserve the right to review any substantive changes. Such changes require prior approval and/or review before implementation. This enables accrediting bodies to hold their member programs continually responsible to their educational peers, to the constituents they serve and to the public.

Self Study Report

The Self Study form is designed to provide programs with a tool by which they can assess and record the quality of their educational activities in relation to national standards, their institution's mission, the program's goals and objectives, the appropriateness of the curriculum and measured outcomes. This format provides programs with an opportunity to assess and document qualitative and quantitative assets, utilize a systems approach to evaluate their program, and, when necessary and appropriate, to institute change.



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Section 2

Prior to the Onsite Visit

Visit Notification

The program receives notice of its upcoming visit via email with a link to the program's COAccess portal. In the portal there will be a series of tasks which establishes a timeline for the various accreditation activities:

- Submit dates for onsite review
- Submit Continued Accreditation Fee
- Submit Reaffirmation of Eligibility Letter
- Complete Consent for Taping
- Complete Demographic Data
- Submit CV and transcripts for program administrator and assistant program administrator.
- Submit Self Study

Prior to the onsite visit

1. Visit notification is sent to programs
2. The program submits at least 2 dates for onsite visit based on timeline
3. The program submits payment for onsite visit
4. The COA schedules an online training session with the program and provides COAccess Orientation
5. The COA selects reviewers and notifies the program of the dates and review team.
6. The program distributes student and faculty evaluations on behalf of the COA
7. The Chair Reviewer contacts the program to develop agenda
 - Occurs after the reviewer receives the student and faculty evaluation reports
8. The program submits the Self Study document

Scheduling the Onsite Visit

1. The COA works with the program to schedule the visit.
2. Most visits are 2 days with 2 reviewers. The length and size of the review team may vary depending on the number of clinical sites to be visited and their distance from the program.
3. Select dates for the onsite review at a time convenient to your institution with an understanding that the onsite review should be held during regularly scheduled student lectures, laboratory and/or clinical affiliation weeks. (Final examinations and college vacation-holiday periods are not recommended onsite review dates.) These dates will be tentative until confirmed with the chair and team onsite reviewers.

Scheduling the Visit continued

4. The COA is willing to schedule collaborative or cooperative accreditation site reviews at the written request of the program. The program will need to communicate with the staff of each accrediting agency to get approval for a joint visit, agree upon acceptable dates, and discuss guidelines for the review.
5. Requests to change the dates of an onsite review, after authorization, are rarely approved. Therefore, it is important to see that all key people will be available on the proposed dates before they are accepted.
6. The program will be invoiced for the visit.

Reviewer Selection

1. The Council will appoint onsite reviewers to represent the Council during onsite reviews to nurse anesthesia programs.
2. Reviewer selection is based on the “Onsite Reviewers and Fellowship Review Committee: Application and Appointment” policy.
3. The Council will notify the program when the date and the reviewer selection are completed.
4. Written authorization that the proposed dates and assigned reviewers are acceptable/not acceptable must be remitted to the COA's executive office within two (2) weeks of receipt of this communication.
 - a. If the program fails to provide such written authorization, the proposed dates and assigned reviewers will be considered as acceptable to the program.

Eligibility for Accreditation

For new programs: submit all required information outlined in section “1. Requirements for applicant programs” of COA policy E-1, “Eligibility for Accreditation” to the COA as directed by your accreditation specialist. Following review of all submitted documents, the specialist may contact the program for more information. When all documentation is complete, the program will receive a confirmation letter.

For established programs: obtain a letter from the chief executive officer of the conducting institution as outlined in “2. Requirements for established programs” of COA policy E-1, “Eligibility for Accreditation” that reaffirms the institution's legal authorization to operate the program and award the degrees and/or certificates. Please refer to the policy for letter requirements.

Email a copy of the eligibility letter to your accreditation specialist.

- Upload a copy of the letter in COAccess.

If the letter is found to be complete, the specialist will email and upload the confirmation letter.

Student/Faculty Evaluations

- An email will be sent to programs requesting total number of students and faculty to receive evaluations.
 - Note: programs in capability review complete only the faculty portion of the evaluation process
- The program will be sent evaluation directions for distribution to students/faculty
- Evaluations will be open for approximately 3 weeks
- The program will receive a summary of the student and faculty evaluations
- Program may respond to any issues identified in the Self Study document and/or during the onsite visit

Transcripts

- Contact your accreditation specialist to verify that a copy of the official academic transcript for highest degree held by the CRNA program administrator and assistant administrator is already on file at COA office.
- If it is not on file, you will be asked to have an official copy of the transcripts sent to the COA.

Agenda

A Word version of the agenda template has been uploaded to your program's portal (and is available in the Reference Library).

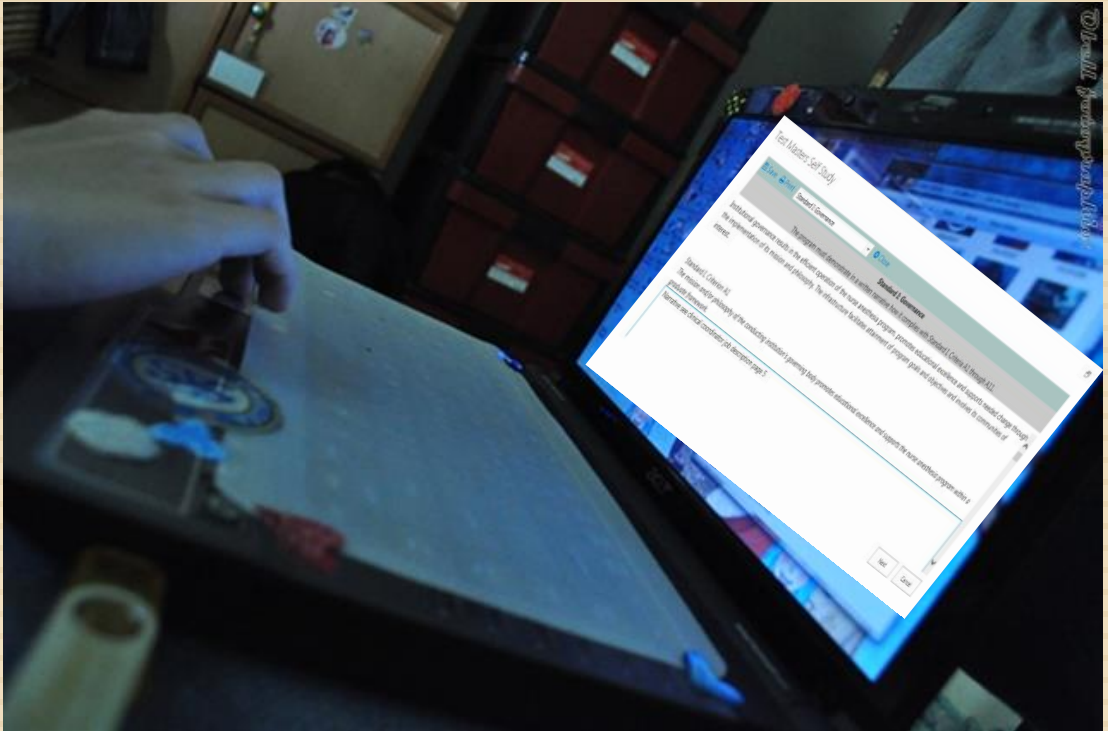
Sample Agenda Outline

Day 1

1. Finalize agenda for onsite review.
2. Review Self Study, with verification, amplification, and/or clarification of information.
3. Review program records.
4. Visits/conferences at the academic institution.
5. Confer with all students and review of student records.
6. Confer with all CRNA faculty (including representation from affiliate faculties).
7. Confer with anesthesiologists involved with the program.

Day 2

1. Observe clinical practicum and clinical facilities.
2. Review physical plant, teaching/learning resources, and related areas as appropriate (OB, ICU, PACU, etc.)
3. Finalize draft summary report.
4. Review draft report with program director and other interested faculty.
5. Review draft report with communities of interest.



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Section 3

Writing and Submitting the Self Study Document

Preparing the Self Study

1. The conducting institution should appoint a committee for overseeing the completion of the Self Study, as well as a project director to coordinate all aspects of this self-assessment. The project director will ordinarily be the director of the nurse anesthesia program.
2. Each faculty member involved in the program at both conducting and affiliating institutions should be informed that the Self Study process is being conducted by the program and, where appropriate, be given a copy of this entire directions document and the *Standards for Accreditation* to study in detail, especially those parts for which he/she has responsibility. The project director should make every attempt to keep both the Self Study committee and other key institutional and program personnel fully informed of the progress being made toward completion of the project.
3. To facilitate completion of the narrative analysis of compliance, the Self Study committee should review the document and determine data it needs to provide. A system should be identified whereby data are collected, collated, tabulated, analyzed and recorded in appropriate areas of the Self Study.

Training Materials in Portal

Reference Library

Training Manuals

- Recorded Tutorials
 - [Capability Review - Part 1.mp4](#)
 - [Capability Review - Part 2.mp4](#)
 - [Self Study - Initial Submission.mp4](#)
 - [Self Study Resubmission After Revision.mp4](#)
 - [Submitting MPC, DE, or Doctoral Application.mp4](#)
 - [Submitting Additional Information - Response to Summary Report.mp4](#)
 - [Submitting Response to Summary Report or Progress Report.mp4](#)
- User Guides
 - [Capability Review for Initial Accreditation.pdf](#)
 - [Responding to a Summary Report or Progress Report.pdf](#)
 - [Submitting a Class Size Increase Application.pdf](#)
 - [Submitting a Clinical Site Application.pdf](#)
 - [Submitting a Major Programmatic Change, DE, or Doctoral Application.pdf](#)
 - [Submitting a Program Name Change Request.pdf](#)
 - [Submitting a Temporary or Permanent Program Administrator Change.pdf](#)
 - [The Self-Study Form.pdf](#)
 - [Updating Other Program Contacts.pdf](#)

COAccess Portal – Logging In

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Go to <https://www.coacrna.org/coaccess/>

Select Program Portal



[About](#) ▾ [Accreditation](#) ▾ [COAccess](#) [Programs & Fellowships](#) ▾ [FAQ](#) [Contact Us](#)

COAccess Portal

The COAccess portal is for authorized users only.

The COA provides program administrators, Council directors and onsite reviewers with a portal to serve as the main source of communication with the COA. Please log in to the appropriate portal below using your username (typically your email) and password. If you forgot your password, select “Forgot Your Password” and you will receive a system generated email to the email on file with the COA. If you do not receive this email within two minutes, check your spam folder. If you are an authorized user and you have not received a login, have trouble logging into your portal, or have questions on the COAccess system, please contact Tom Anderson at tanderson@coacrna.org.

[Program Portal – Access for Programs](#)

[Council Director Portal – Access for Council Directors](#)

[Onsite Reviewers – Access for Onsite Reviewers](#)

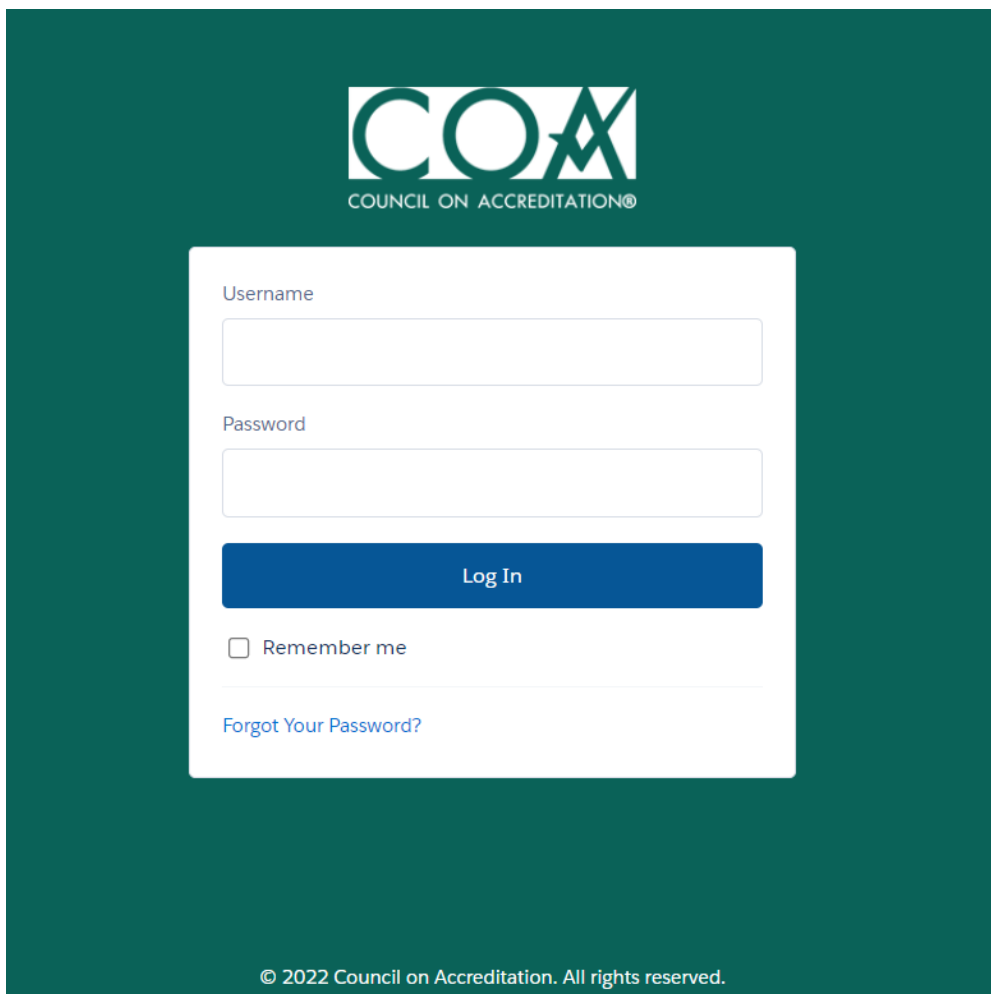
Logging into COAccess

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Username: lcuriel@coacrna.org (your email address)

Password: You set the password (click forgot password to reset)

If you select “Forgot Your Password” you will receive a system generated email to the email on file with the COA. If you do not receive this email within 2 minutes, check your spam folder. If you do not receive the email in your spam folder, please contact Tom Anderson at tanderson@coacrna.org.



The image shows a login form for the Council on Accreditation (COA). At the top, the COA logo is displayed, consisting of the letters 'COA' in a stylized green font with a white outline, and the text 'COUNCIL ON ACCREDITATION®' below it. The login form is a white rectangular box with a dark green background. It contains the following elements: a 'Username' label above a text input field; a 'Password' label above a text input field; a blue 'Log In' button; a checkbox labeled 'Remember me'; and a link labeled 'Forgot Your Password?'.

COA
COUNCIL ON ACCREDITATION®

Username

Password





Log In


Remember me

[Forgot Your Password?](#)

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Program Portal


 **PROGRA...** 

 **HOME** [MY PROGRAM](#) [ACCREDITATION PROCESS](#)


Program's Announcements

Clinical Site Application Naming Conventions


FAQ



REFERENCE LIBRARY



HOW-TO: SUBMIT CLINICAL SITE APPLIC...



HOW-TO: APPLY FOR CLASS SIZE INCREA...

My Program

Account Name	Parent Account	Program Type	Initial Accreditation Date
Testing Program	Test Institution for Program	Program	

Accreditation Processes

Accreditation Process Number	Accreditation Process Record Type	Status
00004542	Capability Review	Self-Study
00004545	Major Programmatic Change	Application
00004546	Progress Report	New
00004662	Clinical Site Application	Application
00004780	Major Programmatic Change	Application

My Tasks

<input type="checkbox"/> Approve Timeline 00004542	No due date
<input type="checkbox"/> Complete Consent for Taping Self Study	No due date
<input type="checkbox"/> Complete Consent for Taping	No due date

Program Portal – Reference Library

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Reference library has recorded tutorials and user guides.

COA
COUNCIL ON ACCREDITATION

Search... **SEARCH**

HOME MY PROGRAM ACCREDITATION PROCESS

FAQ

REFERENCE LIBRARY

HOW-TO: SUBMIT CLINICAL SITE APPLIC...

HOW-TO: APPLY FOR CLASS SIZE INCREA...

Reference Library

Training Manuals

- Recorded Tutorials
 - Capability Review - Part 1.mp4
 - Capability Review - Part 2.mp4
 - Self Study - Initial Submission.mp4
 - Self Study Resubmission After Revision.mp4
 - Submitting MPC, DE, or Doctoral Application.mp4
 - Submitting Additional Information - Response to Summary Report.mp4
 - Submitting Response to Summary Report or Progress Report.mp4
- User Guides
 - Capability Review for Initial Accreditation.pdf
 - Responding to a Summary Report or Progress Report.pdf
 - Submitting a Class Size Increase Application.pdf
 - Submitting a Clinical Site Application.pdf
 - Submitting a Major Programmatic Change, DE, or Doctoral Application.pdf
 - Submitting a Program Name Change Request.pdf
 - Submitting a Temporary or Permanent Program Administrator Change.pdf
 - The Self-Study Form.pdf
 - Updating Other Program Contacts.pdf

COA Standards, Policies, and Procedures

- 2004 Standards for Accreditation of Nurse Anesthesia Educational Programs, revised May 2022.pdf
- Post Graduate CRNA Fellowship Standards, revised May 2022.pdf
- Standards for Accreditation of Nurse Anesthesia Programs - Practice Doctorate, revised May 2022.pdf
- Accreditation Policies and Procedures Manual, revised May 2022.pdf
- [Guidelines for Counting Clinical Experiences - Jan 2021.pdf](#)

Documents for Self Study/Onsite Review Process

- Self Study Template (incl. suggested documentation for each Standard)
- Clinical Experiences Table
- Self Study Signature Page
- Accreditation Review Agenda Template

Self Study Checklist

All steps must be completed prior to submission:

- 1. Update Demographic Data - Check Program address, website, make changes as needed.**
- 2. Update Clinical Site data for each active and inactive site.**
- 3. Review program degrees, provide current enrollment.**
- 4. Review program officials and submit Program Information Update Requests as needed.**
- 5. Provide responses to Standards and Criteria**
- 6. Upload Signature Page**
- 7. Upload Clinical Experiences Form**
- 8. Review Tasks Assigned to Program**
- 9. Print PDF copy of the Self Study and review formatting**
- 10. Submit Self Study**

Do's and Don'ts

Do's	Don'ts
<p>Remove any formatting before you paste the narrative into COAccess.</p> <p>For example, if you paste the narrative into Notepad and recopy the narrative to paste into COAccess, this will remove any formatting such as bolding, italics, and font color.</p> <p>If you wish to bold, underline, or italicize information, please use the formatting option available in the COAccess system.</p>	<p>Do not cut and paste narrative from other documents (i.e. webpages, other manuals) if the narrative is formatted.</p> <p>Narrative from other documents can contain embedded formatting that will impact the final printed version of your self study (even if it looks OK when pasted in the text box).</p>
<p>Create a separate attachment for any visual representations such as tables, charts, or graphs.</p> <p>Embedding visual representations into the program narrative box can impact the view and printing of the self study.</p>	<p>Do not embed any visual representations such as tables, charts, or graphs into the program narrative box.</p>
<p>Each attachment must be numbered with 3 digits and appropriately named (e.g., 001 org chart; 010 program admin CV).</p>	<p>Don't upload attachments more than once. After uploading an attachment, it can be selected as supporting documentation, as often as needed, for other narratives.</p>

Do's and Don'ts

Do's	Don'ts
<p>Relevant portions of attachments should be highlighted and/or referenced by page number and paragraph to clearly identify sections of the document that support the narrative.</p>	<p>Don't list attachments in the narrative. When attachments are selected as supporting documentation, they will be listed below the narrative when the self study is generated to a PDF.</p>
<p>Programs should combine multiple related documents, such as course descriptions, into one file (PDF preferred).</p>	
<p>PDF versions of webpages should be provided to ensure they are available for review, as website addresses change over time and may become inactive.</p>	<p>Do not put web addresses in your self study for the reader to look for supporting documentation without adding a corresponding attachment.</p>

Updating Clinical Site Data

All clinical sites must contain the following information:

1. Updated Demographic Information
2. Updated Contacts (Credentials [MSN, CRNA] must be included).
3. Purpose and other details if needed
4. Case Numbers for ALL SITES (not just required sites)
5. Learners Assigned to Facility – Number of learners that use the site on an average day- should not exceed the number of ORs at the site
6. Average OR/Anesthesia Areas Available Per Day
 - $\text{Your learners} - \text{Other Learners} = \text{Number of Areas Available to Program SRNAs}$ (see example below)
 - $\text{Number of Areas Available} / \text{Average number of ORs} = \text{Percent Avail to Program SRNAs}$ (see example below)

▼ Learners Assigned to Facility

Learners Assigned to Facility ⓘ

1

Number of SRNAs – Program

1

Number of SRNAs – Other Programs

Physician Residents

Dental Residents

0

Other Physician Residents

0

Anesthesiologist Assistants

0

▼ Average OR/Anesthesia Areas Available Per Day

Average Number of OR and Anesth Areas

7

Number of Areas Avail to Program SRNAs ⓘ

6

Percent Avail to Program SRNAs

86

Narrative Responses

To facilitate completion of the narrative analysis of compliance, the Self Study committee should review the document and determine data it needs to provide. A system should be identified whereby data are collected, collated, tabulated, analyzed and recorded in appropriate areas of the Self Study.

The type of response expected is one that:

- is written on a Standard-by-Standard basis, with an explanation of how the program meets the Standard;
- addresses each component or segment of a Standard separately; provides documentation which directly supports the narrative responses to a specific Standard;
- presents sufficient information about each document;
- demonstrates how students are helped to learn effectively;
- assures the program is functioning under sound administrative, budgetary, curricular and ethical policies;
- utilizes the glossary to insure proper meaning of terms.

Narrative statements which merely rephrase the Standard, without providing the reasons why or the means by which the program fulfills the Standard, are not acceptable.

Narrative Responses continued

NOTE: The list of suggested documentation is available in the Word template found in the COAccess Reference Library.

The list of suggested documentation following each Standard is not meant to be mutually exclusive or inclusive. Each program is expected to:

- respond in writing to each segment of an evaluative Standard;
- pay particular attention to areas identified as critical weaknesses, especially if the program can't comply with them;
- select only those documents which lend support to what is being discussed in its narrative responses;
- give evidence that things are as they are claimed to be.

The suggested documentation following each Standard in the Self Study form does not preclude other materials from being included by the program. Unique purposes and needs may dictate the inclusion of additional materials to provide evidence of support for a particular provision. The key word is "essential" rather than "superfluous." The Self Study itself should define the program activities, as they relate to specific criteria, clearly, cogently and succinctly. Supportive materials should be included only to the extent that they are needed to provide substantive clarification of program activities.

- When attaching a document with multiple pages, remember to tell the reviewer on what page the reference can be found.
- Highlight text in the attachment when possible.

Final Steps

Once the narrative and supporting documentation has been entered into COAccess, complete the final steps:

1. Upload signature page
2. Check the following:
3. All clinical sites have been updated
 - ✓ Program experiences form has been uploaded
 - ✓ Attachments are numbered
 - ✓ Narrative includes **no embedded tables**
4. Once you have checked the above items, **click on 'Submit Self Study'**
5. Print Self Study for program records



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During the Onsite Visit

Logistics

1. Housing arrangements should be made in consultation with Chair Reviewer
2. Provide a comfortable work space with Internet connectivity
3. All conferences with students and faculty require presence of all reviewers
4. The program must provide a room with a projector and Internet access for the exit conference

Exit Conference

1. Before the final exit conference, a pre-conference will be conducted with the program administrator to present findings
2. During the exit conference, an oral presentation will be given to the program administrators, university officials and communities of interest.



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Section 5

After the Visit

After the Visit

1. Program receives final invoice for onsite reviewer expenses.
2. The chair reviewer submits the completed report to the COA within 14 days of the visit.
3. Final Summary Report emailed to program approximately 6 weeks after receipt in the COA office.
 - Reviewer evaluations will be available in the COAccess portal. The program completes and returns them to the COA.

Contact Us

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COAccess Related Problems or Questions

Tom Anderson, MLIS – Senior Accreditation Specialist

Email: tanderson@coacrna.org

Phone: 224-275-9134

Monday - Friday 8:00 am to 4:00 pm CST

Emergency Support for Onsite Visits

Frank Gerbasi, PhD, CRNA

Chief Executive Officer

Pager: 847-569-0990

For Self Study content related questions please contact your program's Accreditation Specialist.