

SUB-COMMITTEE ON ACCREDITATION FOR SURGICAL ASSISTING (SASA) PROCESS, PROCEDURE AND TIMELINE

I. Initiating the Accreditation Process

(Approximately 8 – 12 months*)

A. Contact the SASA-ARC/STSA before or upon the institutional accreditor approval of a new 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 SASA-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. A visit if at all possible should be scheduled when the program is $\frac{3}{4}$ completed with the 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 SASA-ARC/STSA office at least 4 months prior to the on-site evaluation and should include:

a. Completed Self-Study

b. **\$1200** Initial Application Fee *and* **\$2500** Initial Site Visit Fee (\$3700 total payable to ARC/STSA)

c. CAAHEP Request for Accreditation Services (RAS form available at www.caahep.org). This is **not** an application

d. On-site evaluation schedule

II. On-Site Evaluation and Program Approval

(Approximately 8 to 12 months*)

A. The on-site evaluation will be performed in approximately 1 ½ to 2 days. On-site evaluations (site visits) for all program applicants for *Initial Accreditation* cannot occur before at least one cohort/class is $\frac{3}{4}$ complete with the clinical requirement for successful program completion.

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 response to the letter of findings. The accreditation application is complete upon the receipt of the program's response in the SASA-ARC/STSA office.

D. The program's application is forwarded to the next SASA subcommittee, and subsequent ARC/STSA and CAAHEP board meetings.

1. The SASA board 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 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. SASA recommendations on program applications are forwarded to the ARC/STSA board twice a year in March and September.

a. On-site evaluations performed in the months of November-April are generally forwarded to the September 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.

3. ARC/STSA recommendations on program applications are forwarded 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 May 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.

4. 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 Process

(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 programs outcomes and reflects the ARC/STSA mandated academic year 8/1/xx-7/31/xx.

B. Each program should use the SASA-ARC/STSA standardized: Graduate and Employer Satisfaction Surveys and an SASA- ARC/STSA Approved program assessment exam as tools for the Annual Report (see Standards & Guidelines).

C. Annual Reports will be due May 1st:

1. Any Deficiencies found will be reviewed at the subsequent March SASA and ARC/STSA Board of Directors meeting.

2. Deficient programs begin "Due Process" system.

D. After the 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 SASA-ARC/STSA will determine if the program is in continued compliance with the Standards.

1. If the program is determined in compliance then the SASA will forward a recommendation of Continuing Accreditation to ARC/STSA. After satisfactory review of the recommendation, 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 upon recommendation of SASA will require the scheduling of a Qualitative on-site evaluation. (Please see the "General Operating Procedures, Annual Reporting Information" for the "Due Process" system.)

IV. 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:

1. Random/Continuing Evaluation (1 day)

- a. Will occur once in a 10-year period.

- b. Focus is on verification of Annual Report data

- c. Approximately 4-6 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.

2. Consultative/Comprehensive 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 visit 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 withdrawal or the SASA-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, 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 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.*

**For more information on the surgical assisting programmatic accreditation process, please visit our website at www.arcstsa.org or contact our office at (303) 694-9262.