SURGICAL TECHNOLOGY Evaluator Training Workshop

Accrediting Bureau of Health Education Schools (ABHES)
Training Objectives

 Become familiar with the Surgical Technology Program Accreditation Process (Self-Evaluation Report (SER), Site Visit Report, Preliminary Review, and Potential Commission Actions)

 Understand the Role and Responsibilities of the Subject Specialist, Team Leader, and Staff

 Distinguish between Programmatic and Institutional requirements
Be capable of:

- preparing for and conducting Surgical Technology Program Evaluation Visits
- completing the Site Visit Evaluation Report including clear explanation of a standard violation
- understanding the importance of ethical and appropriate conduct as an evaluator for ABHES
- interpreting and applying ABHES accreditation standards in the evaluation of a Surgical Technology Program
Formed in 1964 as the Accrediting Bureau of Medical Laboratory Schools, the Accrediting Bureau of Health Education Schools (ABHES) has undergone tremendous growth and major enhancements to its operations and scope of accreditation activity since its inception.

It has been recognized by the U.S. Secretary of Education since 1968 and has successfully achieved both continued recognition and expansions of scope over the years.
ABHES is unlike most accrediting agencies recognized by the U.S. Secretary of Education in that it specializes in health education and accredits both on the institutional and programmatic level.

ABHES is recognized to accredit private, postsecondary institutions in the United States offering predominantly allied health education programs and to programmatically accredit Medical Assistant, Medical Laboratory Technician, and Surgical Technology programs, which may be offered within its accredited institutions or by institutions otherwise accredited by other recognized accrediting agencies.
The programs accredited by ABHES lead to a certificate, diploma, an Associate of Applied Science degree, an Associate of Occupational Science degree, or an Academic Associate degree. ABHES’ recognition also includes the accreditation of programs offered by distance education.

ABHES has developed and published pilot program standards, and accredits at the baccalaureate degree level. This level is not yet approved by the U.S. Secretary of Education.
The ABHES Commission

The Commission is composed of fourteen (14) members:

- **Elected:**
  - Elected Seat 1 – Academician in a Healthcare related area
  - Elected Seat 2 – Administrator in a Healthcare related area
  - Elected Seats 3 & 4 – Ownership Representative
  - Elected Seat 5 – Programmatic Representative
  - Elected Seat 6 & 7 – Commissioner-at-large

- **Appointed:**
  - Appointed Seat 1 & 2 – Practitioner in Specialty Area
  - Appointed Seat 3 – Education in Specialty Area
  - Appointed Seat 4 – Commissioner-at-large
  - Appointed Seat 5 & 6 – Public Member
  - Appointed Seat 7 – Baccalaureate Representative

*See the ABHES Bylaws for specific information on each elected and appointed commissioner position*
ABHES has one of the most seasoned and stable staff in the accreditation field.

Fifteen full-time staff members:
- Executive Director
- Associate Executive Director
- Assistant Executive Director
- Director of Accreditation Development
- Director of Legal & Regulatory Affairs
- Director of Policy and Curriculum Development
- Assistant Director of Accreditation and Compliance
- Distance Education & Communications Specialist
- Accreditation Specialist
- Four (4) Accreditation Coordinators
- Office Manager
- Administrative Assistant
Summary of travel and consideration of applications:

- **Travel Cycles (approximate):**
  - First Cycle (February – May)
  - Second Cycle (August - November)

- **Preliminary Review Committee**
  - June and November
  - includes member of Programmatic Accreditation Committee for Surgical Technology

- **Commission Meetings**
  - July (following 1st travel cycle)
  - December (following 2nd travel cycle)
The Accreditation Process

1) Application
2) Required Workshop Attendance
3) Preliminary Visit (Initial applicants - staff only)
4) Submission of Self-Evaluation Report (SER)
5) On-Site Visitation (full team)
6) Institutional Response
7) Consideration by Preliminary Review Committee
8) Commission Review & Action
Types of Visits

- Preliminary (Initial Applicants - staff only)
- Initial & Reaccreditation (full team)
- Focus (directed by Commission)
- Unannounced (discretionary)
- Interim (announced and discretionary)
- Changes (e.g., change in location, new non-main campus)
The number of specialists is determined by the number and types of programs offered. A specialist is required for each program, or “like” program (i.e., medical assisting and medical administrative assistant could use one specialist)
Confirmation Letter

- Overview of on-site visit
- Attachments (Evaluator):
  - Evaluator Responsibilities
  - Entrance/Exit Interview Procedures
  - Guidelines for Instructor Interviews
  - Guidelines for Student Interviews
  - On-Site Visitation Student Satisfaction Survey
  - Instructions for Calculating Statistical Data
  - Evaluator Expense Form
  - On-Site Evaluation Review
Visit Preparation

- Make travel arrangements (staff handles hotel and local travel arrangements)
- Review ABHES Accreditation Manual ([www.abhes.org](http://www.abhes.org)) (Hard copy will be sent upon request)
- Submit signed statement of confidentiality, completed expertise checklist, and current resume
- Review the Self-Evaluation Report (SER)
- Participate in Preliminary Team Meeting (via conference call or on site)
Evaluator training for ABHES is combined with workshops and participation in the its Evaluator Mentorship Program which pairs new and seasoned evaluators, allowing for in-depth conversation, including time for questions and answers, both before, during, and after the evaluation visit.

In all cases, evaluators will have the ABHES staff at their sides during visits, to answer questions and direct the evaluator as necessary. The team leader will also be a great source of information and assistance.

See “The Importance of Evaluator Training in the ABHES Accreditation Process – A Policy Statement”
Visit Overview
(full team visits)

*Note: schedules may vary

Day 1

- Tour of facility
- Team meeting with institution/program administrator/supervisor
- Interviews/Classroom Observations/Surveys
- Working Lunch
- Externship Visits
- Visit Evening Classes and Conduct Interviews/Surveys
Day 2

- Confirmation calls to externship sites and employers
- Completion of all reviews
- Preparation and discussion with team of completed reports
- Exit interview with institution/program
POST-VISIT ACTIVITIES

- Program Response
  (evidence of compliance with each violation and response to concerns made by team that are not violations)
- Preliminary Review Committee meets; recommendation to Commission
- Commission considers and acts on application (options include: grant accreditation up to 8 years, defer action pending additional information, direct program to show cause (currently accredited only), deny application (appeal rights afforded))

*Note: Evaluator’s role ends on the visit! No additional contact should be made....
Evaluator Reimbursement

- Air & Ground Transportation
- Hotel Expenses
- Meals
- Honorarium
- Non-Reimbursable Expenses
- Deadline for Submission
THE SELF-EVALUATION REPORT (SER)

......WHAT IS IT?

An intensive review of all activities surrounding the program and institution, including curriculum, resources, policies and procedures, clinical externship site affiliations and agreements, and program supervision and faculty.

Note Correlation - SER, Accreditation Manual, Visitation Report
Conduct an objective review of the program and its compliance with ABHES requirements. The purpose of the review is not to compare and contrast with other programs.

Know the ABHES accreditation standards and how they relate to the evaluation process.

Confirm the information contained in the Self-Evaluation Report. Confirm through evidence any violations to be noted. Do not cite something based only upon comments.

Interview as many faculty, students, and program staff as possible.

Be punctual.

Be seen. Do not spend an excessive amount of time in the work room.

Do not speak out of turn. Specifically, do not provide your opinion (how you do something) – remember you represent ABHES and its standards. Do not speak with anyone outside of the team regarding potential violations of standards – share concerns with the team for discussion and allow the Team Leader and/or ABHES staff member to provide the information to the program director or appropriate personnel.
Obtaining Report Answers

- Surgical Technology Program Specialist Interviews
  - Program/Education Director
  - Externship/Placement Director
  - Faculty
  - Students
  - Safety Coordinator
Records to be Reviewed

- Student Files (Active, Graduates, Withdrawals)
- Faculty and Program Supervisor Files
- Advisory Board Minutes
- Placement & Retention Statistics
- Credentialing Exam Results (as required for employment)
- Program Advertising/Catalog
Report Writing Guidelines

- **Exceeds the Standard**
  - Explanation & examples must be provided on how the institution has exceeded the requirement

- **Meets the Standard**
  - No explanation needed. Recommendations can be made or concern(s) stated with specific information

- **Violates the Standard**
  - Detailed information must be provided for deficient area(s) cited to include documentation as available
Requirements for Surgical Technology Programs

- Chapter IV (applies only to schools institutionally accredited by ABHES)
- Chapter V, Evaluation Standards Applicable to All Educational Programs
- Chapter VI, Degree Standards
- Chapter VII, Program Evaluation Standards for Surgical Technology
CHAPTER IV – EVALUATION STANDARDS APPLICABLE TO INSTITUTIONALLY ACCREDITED MEMBERS

SECTION A – Mission and Objectives
SECTION B – Financial Capability
SECTION C – Administration (“Administrator”) and Management
SECTION D – Compliance with Government Requirements
SECTION E – Advertising and Enrollment Practices
SECTION F – Student Finance
SECTION G – Programs
SECTION H – Satisfactory Academic Progress
SECTION I – Student Satisfaction
SECTION J – Physical Environment
Overview of

CHAPTER V – EVALUATION STANDARDS APPLICABLE TO ALL EDUCATIONAL PROGRAMS

- SECTION A – Goals and Oversight
- SECTION B – Curriculum, Competencies, Externship, and Internal Clinical Experience
- SECTION C – Instruction
- SECTION D – Student Progress
- SECTION E – Supervision and Faculty
- SECTION F – Safety
- SECTION G – Student Services
- SECTION H – Disclosures
- SECTION I – Program Effectiveness
- SECTION J – Student Record Management
Overview of CHAPTER VI – DEGREE PROGRAM STANDARDS

- SECTION A - Occupational and Applied Science Degrees
  Basic Requirements, Faculty, Learning Resources, Curriculum

- SECTION B - Academic Associate Degrees
  Adds to Section A:
  Student Services, Advertising of Degree Programs, Admissions

- SECTION C - Baccalaureate Degrees
  Adds to Sections A and B:
  Program Supervision and Faculty and Library and Instructional Resources
Overview of
CHAPTER VIII – SURGICAL TECHNOLOGY PROGRAM
Program Evaluation Standards for Surgical Technology

- Description of the profession
- Credentialing
- SECTION A – Curriculum, Competencies, Externship, and/or Internal Clinical Experience
- SECTION B – Program Supervision, Faculty, and Consultation
- SECTION C – Laboratory Facilities and Resources
LET'S GO CHAPTER BY CHAPTER

Reference Chapter VII- of the Accreditation Manual
The surgical technologist is an operating room specialist who performs specific duties for pre-, intra-, and postoperative case management.

Surgical technologists must be knowledgeable in asepsis and sterile technique, and must be able to properly care for instrumentation, equipment and supplies. Education includes the following: basic sciences: microbiology, anatomy and physiology, pathophysiology, and surgical pharmacology. Additionally this education includes: surgical procedures, case management, wound care and closure, and surgical patient care, and safety.

Preoperative case management duties include operating room preparation, gathering of supplies and equipment, case set-up, and preparation of the operative site with sterile drapes. Intraoperative case management duties include maintenance of the sterile field, passing instruments and medications to the surgeon and assistant, specimen care, and application of wound dressings. Postoperative case management duties include care and maintenance of equipment and instruments after use, and preparation of the operating room for the next procedure.
ST.A.1.
The depth and breadth of the program’s curriculum enables graduates to acquire the knowledge and competencies necessary to become an entry-level professional in the surgical technology field.

Minimally, all programs require commonly accepted competencies and adhere to the current Core Curriculum for Surgical Technology, produced by the Association of Surgical Technology (www.ast.org).
ST.A.2. An externship experience is required for completion of the program.

The following is considered in choosing, placing and maintaining externship site affiliations:

(a) Assignment

(b) Activities

(c) Supervision

(d) Requirements for Completion
**ST.B.1. The program supervisor is credentialed and experienced in the field.**

- a. Supervisors of a surgical technology program hold a credential in the surgical technology field from a nationally recognized and accredited credentialing agency. Supervisors of a surgical technology program hired after July 1, 2010, hold the Certified Surgical Technologist (CST) credential.

- b. Supervisors possess a minimum of three (3) years of operating room experience in the scrub role within the last (five) 5 years or (3) years teaching in the field of surgical technology prior to employment.

- c. Supervisors evidence continued education and training intended to maintain and enhance their professional knowledge of surgical technology instruction and the administrative requirements of the program. The pursuit of advanced academic degrees and active participation in related state and national membership associations is encouraged. This promotes the necessary education, standards, and credentialing required in the surgical technology field.

- Supervisors may also serve as clinical coordinators and must be free of additional educational and administrative responsibilities that may impede them in effectively fulfilling their supervisory role.
ST.B.2.a. Faculty formal education/training and experience support the goals of the program.

ST.B.2.b. Faculty numbers and ratio support the goals of the program.

ST.B.2.c. A program must be served by an individual consultant or advisory board of program-related specialists to assist administration and faculty in fulfilling stated educational objectives.
ST.C.1.a.
The institution’s laboratory facilities include:
(no additional requirements beyond CH V)

ST.C.1.b.
Equipment and instruments are available within the institution’s laboratory facility to achieve the program’s goals and objectives. Equipment and instruments support the requirements of the Core Curriculum.

ST.C.1.c.
The institution’s laboratory facilities are available for students to develop required skills with faculty supervision.
Points to Remember During the Evaluation

1. **Externship Sites**

Conduct site visits to externship sites, randomly selected, and arrange for telephone calls to the supervisors at other sites.

This is key to the visit!
2. **Advisory Boards**

- Defined Purpose
- Composition
- Meets How Often?
- Review Agendas
- Documentation Of Actions
- Contact Members
- **RESULTS!**
Points to Remember During the Evaluation

2. Labs and Equipment

- Quality and quantity
- Maintenance & safety
- Does equipment work?
3. **Student and Staff Interviews**

**Talk, talk, and talk some more**
(remember to be positive, do not “bait” for response or speak negatively)
OUTCOMES!!

- Student Assessment
- Graduate Credentialing
- Student, Graduate and
- Employer Satisfaction
Upon reviewing files for fourteen current students, the following five files did not contain evidence of high school completion as required by the institution in its catalog: Mary Smith, John Jones, Leslie Thompson, Karen Battles, and James King.

Student files reviewed did not contain evidence of high school completion.

Specificity is essential!
The following faculty member files do not contain evidence that the faculty members have participated in professional associations, continuing education, and other professional growth activities within the past year: Kevin Deere; Karen Sagel.

Inadequate professional growth documentation for several faculty members.

Again, specificity. This helps the institution respond effectively with documentation.
DO
  • Of the 100 students surveyed, only 30 claimed to be satisfied with the training and educational services offered by the institution, and only 25 would recommend the school to a family member or friend. Complaints included lack of supplies, faulty equipment, and high faculty turnover. Review of these areas indicate likelihood of such concerns.

DON’T
  • Poor student satisfaction.

Follow up on concerns to ascertain likelihood of validity!
#10 DON’T SNITCH
- Site visitors often learn private matters about an institution that an outsider had no business knowing. Don’t “tell tales” or talk about the weaknesses of an institution

#9 DON’T STEAL APPLES
- Site Visitors often discover promising personnel. Don’t take advantage of the opportunity afforded by your position on the team to recruit good faculty members
#8 DON’T BE ON THE TAKE

- Site visitors may be invited to accept small favors, services, or gifts from the institution. Don’t accept, or even suggest, that you would like to have a sample of the wares of an institution (e.g., book it publishes, a product it produces, or a service it performs).

#7 DON’T BE A CANDIDATE

- Site visitors might see an opportunity to suggest themselves for a consultantship, a temporary job, or a permanent position with the institution.
#5 DON’T SHOOT SMALL GAME WITH A BIG GUN
Site visitors often see small problems that can be solved by attention to minor details. Don’t use the accreditation report, which should deal with major or serious policy-level matters, as the means of affecting minor mechanical reforms.

#6 DON’T BE A NIT-PICKER
The accreditation process is developmental, not punitive. Don’t use accreditation to deal heavily with small programs that may feel that they are completely at the mercy of the site visitors.
#4 DON’T BE A BLEEDING HEART

Site visitors with “do-good” impulses may be blinded by good intentions and try to play the role of savior. Don’t compound weakness by sentimental generosity in the hope that a school’s problems will go away if ignored or treated with unwarranted optimism.

#3 DON’T PUSH DOPE

Site visitors often see an opportunity to recommend their personal theories, philosophies, or techniques as the solution to a program’s problems. Don’t suggest that an institution adopt measures that may be altered or reversed by the review committee or by subsequent site visit teams.
#2 DON’T SHOOT POISON DARTS
- A committee may be tempted to “tip off” the administration to suspected treachery or to warn one faction of a campus of hidden enemies. Don’t poison the minds of the staff or reveal suspicions to the administration of hidden tensions.

#1 DON’T WORSHIP SACRED COWS
- Don’t be so in awe of a large and powerful institution that you are reluctant to criticize an obvious problem in some department.
Words of Wisdom

- Be reasonable and keep in mind ABHES IS here to help
- Check all sources before determining compliance
- Project professionalism at all times
- Do not speak out of turn
- Consider outcomes – if questioning compliance and it is not absolute, good student outcomes may resolve the concern
The Accrediting Bureau of Health Education School

www.abhes.org