



March 23, 2020

Louise Pagotto, PhD  
Chancellor  
Kapiolani Community College  
4303 Diamond Head Rd  
Honolulu, HI 96816-4421

Dear Dr. Pagotto:

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) is pleased to inform you of its vote on **March 20, 2020** to award **continuing accreditation** to the Medical Assisting Associate Degree program at Kapiolani Community College, Honolulu, HI.

The recent peer review conducted by the Medical Assisting Education Review Board (MAERB) and CAAHEP's Board of Directors recognizes the program's substantial compliance with the nationally established accreditation Standards. The next comprehensive evaluation of the program, including a site review, is scheduled to occur no later than **Spring 2029**.

The MAERB will regularly monitor the program's compliance with the outcomes assessment thresholds through the program's Annual Report as well as other documentation that may be requested (Standard IV.B.).

The following citations merit your institution's attention and resolution in order to strengthen the program's compliance with the Standards (for a complete copy of the Standards, check the CAAHEP website at [www.caahep.org](http://www.caahep.org), or call the office at 727-210-2350):

### **III.C.2. Resources - Curriculum**

**The program must demonstrate that the content and competencies included in the program's curriculum meet or exceed those stated in the MAERB Core Curriculum (Appendix B).**

#### **I.C ANATOMY & PHYSIOLOGY-COGNITIVE**

- 4. List major organs in each body system**
- 9. Analyze pathology for each body system including: a. diagnostic measures b. treatment modalities**
- 10. Identify CLIA waived tests associated with common diseases**
- 12. Identify quality assurance practices in healthcare**

#### **II.C APPLIED MATHEMATICS-COGNITIVE**

- 6. Analyze healthcare results as reported in: a. graphs b. tables**

#### **III.C INFECTION CONTROL-COGNITIVE**

- 2. Describe the infection cycle including: a. the infectious agent b. reservoir c. susceptible host d. means of transmission e. portals of entry f. portals of exit**
- 7. Identify Center for Disease Control (CDC) regulations that impact healthcare practices**

#### **V.C CONCEPTS OF EFFECTIVE COMMUNICATION-COGNITIVE**

- 1. Identify styles and types of verbal communication**
- 3. Recognize barriers to communication**
- 6. Define coaching a patient as it relates to: a. health maintenance b. disease prevention c. compliance with treatment plan d. community resources e. adaptations relevant to individual patient needs**

- 8. Discuss applications of electronic technology in professional communication**
- 9. Identify medical terms labeling the word parts**
- 10. Define medical terms and abbreviations related to all body systems**
- 17. Discuss the theories of: a. Maslow b. Erikson c. Kubler-Ross**

#### **VI.C ADMINISTRATIVE FUNCTIONS-COGNITIVE**

- 3. Identify critical information required for scheduling patient procedures**
- 5. Identify methods of organizing the patient's medical record based on: a. problem-oriented medical record (POMR) b. source-oriented medical record (SOMR)**

#### **VII.C BASIC PRACTICE FINANCES-COGNITIVE**

- 1. Define the following bookkeeping terms: a. charges b. payments c. accounts receivable d. accounts payable e. adjustments**

#### **IX.C PROCEDURAL AND DIAGNOSTIC CODING-COGNITIVE**

- 3. Describe how to use the most current HCPCS level II coding system**

#### **X.C LEGAL IMPLICATIONS-COGNITIVE**

- 1. Differentiate between scope of practice and standards of care for medical assistants**
- 2. Compare and contrast provider and medical assistant roles in terms of standard of care**
- 6. Compare criminal and civil law as they apply to the practicing medical assistant**
- 7. Define: a. negligence b. malpractice c. statute of limitations d. Good Samaritan Act(s) e. Uniform Anatomical Gift Act f. living will/advanced directives g. medical durable power of attorney h. Patient Self Determination Act (PSDA) i. risk management**

#### **XI.C ETHICAL CONSIDERATIONS-COGNITIVE**

- 2. Differentiate between personal and professional ethics**

#### **XII.C PROTECTIVE PRACTICES-COGNITIVE**

- 2. Identify safety techniques that can be used in responding to accidental exposure to: a. blood b. other body fluids c. needle sticks d. chemicals**
- 5. Describe the purpose of Safety Data Sheets (SDS) in a healthcare setting**
- 6. Discuss protocols for disposal of biological chemical materials**

#### Rationale

One or more objectives in the cognitive domain was either not available for review or was not appropriate for either the objective or the domain.

I.C.4: The tool submitted asks the student to draw an organ from each system into an outline of the human body, but that does not completely fulfill the objective.

I.C.9: The tool submitted for Immune, Integumentary, Urinary, Endo and Reproductive meets the objective. Missing were Cardio-Vascular, Respiratory, Digestive, and Muscular-Skeletal. The Nervous System was incomplete, as it only addressed treatment.

I.C.10: The tool only asks students to identify CLIA-waived tests. It does not associate them with common diseases.

III.C.2: The tool submitted does not include the infectious agent or the susceptible host.

III.C.7: The tool submitted asks about the role of the regulations, but not to identify the regulations that affect healthcare.

V.C.1: The tool submitted asks to give an example of verbal communication but does not ask about styles of verbal communication.

V.C.3: The tool provided only requests identification of one barrier.

V.C.8: The tool submitted addresses benefits of electronic technology but not the applications of electronic technology.

V.C.9: The tool submitted does not identify medical term parts, only matching definition of root, prefix, suffix, and so on.

V.C.10: The tool submitted does not include abbreviations or medical terms related to all body systems.

V.C.17: The tool submitted for the theories of Maslow and Erikson does not meet the objective as it only asks the student to name a stage of the theories. The assessment tool focused on the theories of Kubler-Ross meets the objective.

VI.C.3: The tool submitted does not address procedures, as it focuses only on office visit information.

IX.C.3: The assessment tool defines what HCPCS is but does not describe how to use it.

X.C.1: The tool covers scope of practice and duty of care, but not standard of care.

X.C.2: The tool covers provider's standard of care but not the medical assistant's standard of care.

X.C.6: The tool submitted asks for the definition of law in general but does not focus on the practicing medical assistant.

XI.C.2: The tool submitted does not address the objective, but, rather, focuses on general ethics development.

XII.C.2: The tool submitted does not include safety techniques that address needle sticks.

XII.C.6: The tool addresses killing spores but not disposal of biological chemicals

There was additional documentation submitted for the following cognitive objectives, but the documentation did not fully satisfy the requirement for the reasons listed below:

II.C.6: Original Rationale: The assessment tool consists of a graph, without an explanation or a means of evaluation.

MAERB's Response to Additional Documentation: The tools that were submitted analyzes graphs, not tables.

V.C.6: Original Rationale: The assessment tool covers disease prevention and compliance with treatment plan, but it does not cover health maintenance, community resources, and adaptations relevant to individual patient needs.

MAERB's Response to Additional Documentation: The tool submitted is not appropriate for the objective, as it only addresses community resources.

VI.C.5: Original Rationale: The assessment tool focused on problem-oriented medical record, but it did not cover the Subjective, Objective, Assessment, and Plan method.

MAERB's Response to Additional Documentation: The tool submitted does not meet the objective. It asks the student to select the type of record they like best and why.

VII.C.1: Original Rationale: The assessment tool focuses on third-party payers but does not define any of the terms in the objective. MAERB's Response to Additional Documentation: The tools submitted does not define accounts receivable.

X.C.7: Original Rationale: The assessment tool covers the Good Samaritan Act, malpractice, and statute of limitations, but there is no definition of negligence, Uniform Anatomical Gift Act, medical durable power of attorney, and Patient Self Determination Act.

MAERB's Response to Additional Documentation: The updated tool includes all these definitions except risk management. If there is no rationale listed for a given cited cognitive objective, there was no assessment tool available for review on site.

*Requested Documentation*

*For the cognitive domain, submit the following:*

*Current syllabi/course outlines for the courses in which any of the above-listed cognitive objectives are taught and assessed, with those objectives highlighted. If the program does not use the alphanumeric designation and precise MAERB language of the cognitive objective, label the objective with the appropriate MAERB alphanumeric designation.*

*Grading policy, grading scale, and pass score applied for the cognitive objectives need to be highlighted on each syllabus.*

*Copy of the blank examinations and/or other required assessment tools covering the listed objectives, highlighting which specific question covers the objective in question. Indicate the course number and course title on the assessment tool.*

*Official roster of the most recently assessed group of students who took the course(s) in which the specific objectives listed above are taught.*

*Copy of gradebooks (containing grades of tests and other academic projects focused on the cognitive objectives) covering the most recently assessed students who took the course.*

**X.P LEGAL IMPLICATIONS-PSYCHOMOTOR**

**4. Apply the Patient's Bill of Rights as it relates to: a. choice of treatment b. consent for treatment c. refusal of treatment**

**XI.P ETHICAL CONSIDERATIONS-PSYCHOMOTOR**

**1. Develop a plan for separation of personal and professional ethics**

**XII.P PROTECTIVE PRACTICES-PSYCHOMOTOR**

**4. Participate in a mock exposure event with documentation of specific steps**

**V.A CONCEPTS OF EFFECTIVE COMMUNICATION-AFFECTIVE**

**4. Explain to a patient the rationale for performance of a procedure**

#### **XI.A ETHICAL CONSIDERATIONS-AFFECTIVE**

##### **1. Recognize the impact personal ethics and morals have on the delivery of healthcare**

#### **XII.A PROTECTIVE PRACTICES-AFFECTIVE**

##### **1. Recognize the physical and emotional effects on persons involved in an emergency situation**

###### Rationale

One or more competencies in the psychomotor and/or affective domain was either not available for review or was not appropriate for either the competency or the domain.

For the three psychomotor competencies cited, there were no assessment tools available for review on site.

For the affective domain:

XI.A.1: The tool supplied includes a scenario but no method of evaluation.

For the other two affective competencies, there were no assessment tools available for review on site.

###### *Requested Documentation*

*For the psychomotor and affective domains, submit the following:*

*Current syllabi for courses in which the above-listed competencies are taught and assessed, with that competency highlighted. If the program does not use the alphanumeric designation and precise MAERB language of the psychomotor competencies, label the competency with the appropriate MAERB alphanumeric designation.*

*Grading policy, scale, and pass score for the competencies, designating the specific pass/fail standards, the number of attempts that students are allowed to achieve the competency, and the statement that the students are required to achieve all the competencies to pass the course and/or progress in the program.*

*Official roster of the most recently assessed group of students who completed the specific class in which the competencies outlined above were taught.*

*Copy of blank skill assessment tool used to assess student achievement for the specific competencies listed above, with the step highlighted if the tool assesses more than one competency, and the course number and name indicated on the tool.*

*Tracking mechanism (tool that lists all the psychomotor and affective competencies) covering the most recently assessed group of students who took the course, documenting successful completion of each psychomotor and affective competency by all students who passed the course. Highlight on the tracking mechanism the competencies that are outlined above.*

#### **IV.B.1. Student and Graduate Evaluation/Assessment - Outcomes Assessment**

**The program must periodically assess its effectiveness in achieving its stated goals and learning domains. The results of this evaluation must be reflected in the review and timely revision of the program.**

**Outcomes assessments must include, but are not limited to: national credentialing examination(s) performance, programmatic retention/attrition, graduate satisfaction, employer satisfaction, job (positive) placement, and programmatic summative measures. The program must meet the outcomes assessment thresholds.**

#### Rationale

The raw data for the 2018 Annual Report Form was not available for review during the site visit, so the program was not able to demonstrate assessment of the outcomes.

#### *Requested Documentation*

*Submit the following:*

*The raw data that has been submitted on the 2021 Annual Report Form (ARF) for all the cohorts for the calendar years of 2019 and 2020, including the following information:*

- *A PDF version of the ARF*
- *Admission rosters for the requested cohorts. Rosters should be classified by month and year of entry into the program, based upon compliance with MAERB's definition of a trigger course.*
- *Unprotected Excel spreadsheet/s to substantiate the summative data found on the Enrollment, Retention, and Graduation tab of the ARF indicating the status (graduated, in-progress, or dropped) of all students admitted into the program.*
- *Copies of completed graduate and employer surveys organized by graduation year.*
- *Copies of job placement tracking organized by graduation year, including the name of the graduate and whether the individual got a job as a medical assistant or in a related field, went directly into the military, or continued with her/his education. If the person got a job as a medical assistant or in a related field, include the name of the employer.*
- *Unprotected Excel spreadsheet to substantiate the Participation and Passage exam data on the ARF. The spreadsheet should include each test taker's name, the year of graduation, the name of the certifying exam taken, and if the student has passed the exam.*
- *Unprotected Excel spreadsheet that includes a listing of graduates for the full five years represented on the Graduate Analysis tab, including year of graduation and the month and year of admission into the program. If you are using the MAERB Tracking Tool and it contains all of the above-requested information, you may submit it in lieu of the requested spreadsheets and tracking tools, as long as the documentation still includes the requested graduate and employer surveys.*
- *Written analysis of the data that summarizes the program's process for ensuring the integrity of the data and the retention of the documentation. In addition, the analysis needs to define the trigger course for those who entered the Medical Assisting program in those specific calendar years. Clearly note if the trigger course for those admission cohorts differs from previous admission cohorts.*

CAAHEP requests that a progress report be sent to MAERB by **February 01, 2022** indicating the manner in which these citations have been resolved.

The program must submit the progress report via one of the following: 1) Send one (1) USB thumb drive with all requested information to MAERB at 20 North Wacker Drive, Suite 1575, Chicago, IL 60606 or 2) scan the cover letter (on institution letterhead with appropriate signatures) and documentation into a PDF file and e-mail it to MAERB at [maerb@maerb.org](mailto:maerb@maerb.org). If you submit a PDF file, it must be bookmarked.

On the Documents tab of the MAERB website, under Program Resources, is a document titled "Organization of Documents for Progress Reports and Other Submissions." It explains how to organize your progress report materials and how to label each document. MAERB asks that you follow these protocols when composing your Progress Report.

Page 7  
Dr. Pagotto

Failure to respond satisfactorily to the citations above may result in a withdrawal of accreditation.

In order to comply with the need for public disclosure, CAAHEP publishes on its website the accreditation award letters and accreditation actions summaries. Award letters can be found within individual program listings in the "Find An Accredited Program" section of the CAAHEP website. Accreditation actions summaries include a list of actions taken at each meeting, including accreditation statuses awarded and dates of the next reviews/comprehensive evaluations. Summaries can be found by clicking the "Recent Accreditation Actions" link on the home page of the CAAHEP website.

The accreditation standards are established by CAAHEP, MAERB, American Association of Medical Assistants (AAMA), American Medical Technologists (AMT), and National Healthcareer Association (NHA).

The commission commends you and your colleagues for your commitment to continuous quality improvement in education, as demonstrated by your participation in program accreditation. Questions concerning the submission or content of the progress report should be directed to the MAERB Executive Office.

Sincerely,

A handwritten signature in black ink, appearing to read "Glen Mayhew", with a large, sweeping flourish at the end.

Glen Mayhew, DHSc, NRP  
President

cc: Lisa Radak, MBA, RT, Dean, Health Academic Programs  
Lynn Hamada, MPH, RN, CMA (AAMA), Medical Assisting Program Director  
Karon G. Walton, MEd, CMA (AAMA), Chair, MAERB  
Jennifer S. Williams, MS, BHA, CMA (AAMA), Co-Vice Chair, MAERB  
Connie M. Morgan, MEd, RN, CMA (AAMA), Co-Vice Chair, MAERB  
Sarah R. Marino, PhD, Executive Director, MAERB



Commission on  
Accreditation  
of Allied Health Education Programs

The Commission on Accreditation of Allied Health Education Programs, upon the recommendation of the Medical Assisting Education Review Board (MAERB), verifies that the following program

*Medical Assisting - Associate  
Kapiolani Community College  
Honolulu, HI*

is judged to be in compliance with the nationally established standards and awarded continuing accreditation on March 20, 2020.

A handwritten signature in black ink, appearing to read 'Glen Mayhew', written over a horizontal line.

**Glen Mayhew, DHSc, NRP**  
**President, CAAHEP**

A handwritten signature in black ink, appearing to read 'Karon G. Walton', written over a horizontal line.

**Karon G. Walton, MEd, CMA (AAMA)**  
**Chair, MAERB**





# The Final Step in the CAAHEP Accreditation Process

*Congratulations!* Now that your program has earned CAAHEP accreditation, there is just one more item to be done to complete the accreditation process. Within a week, the **program director** will receive an email with a link to an electronic Accreditation Process Assessment Survey. Response to this brief survey will complete the accreditation process and give CAAHEP valuable feedback about your program's experience.

In this packet you will find:

- This congratulatory notice, which includes information on CAAHEP;
- A Certificate of Recognition, suitable for framing; and
- Policy 302 Public Use of CAAHEP Accreditation Status by Programs and Institutions.

If you are missing any of the above items, if an error was made, or if you have any questions, please contact us at 727-210-2350 ext. 104 or via email at [Katie@caahep.org](mailto:Katie@caahep.org).

## Some important notes:

- The [CAAHEP website](#) receives numerous visits every day from potential students looking for accredited programs. Please check the accuracy of your program's data by reviewing the list of [Accredited Programs](#). If an error is found, please email the correction to [updates@caahep.org](mailto:updates@caahep.org). Also, keep this information handy if your web address, phone number, dean, program director, or other key contact information changes. Please help CAAHEP keep its website accurate by keeping your program's information up to date.
- In accordance with CAAHEP's recognizing body, the Council for Higher Education Accreditation (CHEA), CAAHEP provides public accessibility to information about the accreditation process, the results of the accreditation reviews, and student achievement. An individual who is reviewing an accredited program's record on the CAAHEP website will find the Program Director's name and contact information as well as the address of the program, its current accreditation status, the degree(s) and concentrations or tracks offered, the most recent CAAHEP award letter, and the URL to the program's outcomes on the program's website. If any of this information changes, please provide the correct information to [updates@caahep.org](mailto:updates@caahep.org).
- In order to comply with the need for public disclosure, CAAHEP publishes a summary of accreditation actions taken at each of its meetings. The summary includes actions identified by profession, status awarded, date of the next evaluation, and whether a progress report (to improve program compliance with Standards) is required. Summaries can be found on the [CAAHEP website](#).
- In promoting your CAAHEP accreditation, if your institution would like to establish a link to our website, you have permission to do so. Please use the URL <http://www.caahep.org>.

***Publication of a program's accreditation status must include specific language, including the full name, mailing address, and telephone number of CAAHEP. Please refer to [Policy 302 Public Use of CAAHEP Accreditation Status by Programs and Institutions](#) which is attached, and can also be found in the [CAAHEP Policies and Procedures Manual](#).***

- In addition, your program and institution are welcome to use the CAAHEP logo in marketing materials. The logo can be downloaded from the [CAAHEP website](#).

The logo must be used in accordance with CAAHEP **Policy 303 Use of CAAHEP Logo by Programs and Sponsoring Institutions**. This policy requires that any use of the logo and any reference to CAAHEP **must** be accurate. Remember, CAAHEP accreditation is programmatic, so there should be no reference that implies other programs or the institution itself is "CAAHEP-accredited."

**Be sure you have CAAHEP's current address:**

**25400 US Highway 19 North, Suite 158  
Clearwater, FL 33763**

- If your program experiences any type of substantive change as defined in the CAAHEP Standards under Section **V.E. Fair Practices-Substantive Change** or **Appendix A, A.3. Program and Sponsor Responsibilities-Administrative Requirements for Maintaining Accreditation** these changes must be shared with the appropriate [Committee on Accreditation](#) and CAAHEP immediately. Failure to do so may result in a withdrawal of accreditation.

*(Please refer to the appropriate set of Standards and Guidelines, found on the [CAAHEP website](#).)*

### **Background Information on CAAHEP**

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) was incorporated as a non-profit organization on July 1, 1994. Prior to the formation of CAAHEP, the Committee on Allied Health Education and Accreditation (CAHEA) performed its allied health accrediting functions. CAHEA was both sponsored by and housed within the American Medical Association (AMA). The AMA continued to be CAAHEP's primary sponsor through a three-year transition period, ending on December 31, 1996. Currently, the AMA is one of CAAHEP's approximately 70 sponsoring organizations.

CAAHEP accredits educational programs that prepare health professionals in a variety of disciplinary areas. Accreditation is one step in a process that is meant to protect the public and ensure a supply of qualified health care professionals. Programs are accredited when it is determined that they meet the educational Standards and Guidelines established by the profession.

The 32 CAAHEP professions are:

- Advanced Cardiovascular Sonography Technology
- Anesthesia Technology
- Anesthesiologist Assistant
- Art Therapy
- Assistive Technology
- Cardiovascular Technology
- Clinical Research
- Cytotechnology
- Diagnostic Medical Sonography
- Emergency Medical Services-Paramedic
- Exercise Physiology
- Exercise Science
- Intraoperative Neurophysiologic Monitoring
- Kinesiotherapy
- Lactation Consultant
- Medical Assisting
- Medical Illustration
- Neurodiagnostic Technology
- Orthoptics
- Orthotic and Prosthetic Assistant
- Orthotist/Prosthetist
- Orthotic and Prosthetic Technician
- Pedorthist
- Perfusion
- Personal Fitness Training
- Polysomnographic Technology
- Recreational Therapy
- Rehabilitation/Disability Studies
- Respiratory Care
- Specialist in Blood Bank Technology/Transfusion Medicine
- Surgical Assisting
- Surgical Technology

CAAHEP is the accrediting body. However, 25 committees on accreditation (each representing one or more of the CAAHEP accredited professions) do the day-to-day work of accreditation. These committees are composed of professionals from the individual disciplines. Each committee on accreditation is responsible for reviewing self-studies, performing on-site reviews, and making recommendations to the CAAHEP Board of Directors for final action.

For more information about CAAHEP or the Committees on Accreditation with whom CAAHEP works, visit our website at [www.caahep.org](http://www.caahep.org) or call 727-210-2350.



### **302 Public Use of CAAHEP Accreditation Status by Programs and Institutions**

*CAAHEP requires institutions and programs to be accurate in reporting to the public the program's accreditation status.*

*Publication of a program's accreditation status must include the full name, mailing address and telephone number of CAAHEP.*

*CAAHEP requires a program to inform all current students and applicants in writing of the program's accreditation status in cases of Probation or Withdrawal (Voluntary and Involuntary).*

A. Except for paragraphs 2 and 3 below, if a program has not yet been accredited by CAAHEP and has not yet been scheduled for an initial site visit by the appropriate Committee on Accreditation, no mention of CAAHEP accreditation may be made.

1. Once a site visit has been scheduled by the appropriate Committee on Accreditation, a program may publish the following statement:

*"The [name of program] at [institution] has a site visit scheduled for pursuing initial accreditation by the Commission on Accreditation of Allied Health Education Programs ([www.caahep.org](http://www.caahep.org)). This step in the process is neither a status of accreditation nor a guarantee that accreditation will be granted."*

There should be no claims of timelines or when accreditation will be achieved.

2. If a program has been issued a Letter of Review by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) they may publish that fact with the following statement:

*"The EMT-Paramedic program at [institution] has been issued a Letter of Review by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP). This letter is NOT a CAAHEP accreditation status, it is a status signifying that a program seeking initial accreditation has demonstrated sufficient compliance with the accreditation Standards through the Letter of Review Self Study Report (LSSR) and other documentation. Letter of Review is recognized by the National Registry of Emergency Medical Technicians (NREMT) for eligibility to take the NREMT's Paramedic credentialing examination(s). However, it is NOT a guarantee of eventual accreditation."*

3. If a program has been issued Candidacy status by the appropriate Committee on Accreditation, they may publish that fact with the following statement:

*"The [name of profession] program at [institution] has been issued Candidacy status by the [name of CoA]. This is NOT a CAAHEP accreditation status, it is a status signifying that a program seeking initial accreditation has demonstrated sufficient compliance with the accreditation Standards to warrant that status. However, it is NOT a guarantee of eventual accreditation."*

B. If a program has CAAHEP accreditation, the sponsor must use the following language when referring to that accreditation:

1. In at least one of its comprehensive publications customarily used to officially convey institutional information, it must state:

*“The [name of program] is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of [name of Committee on Accreditation].*

Commission on Accreditation of Allied Health Education Programs  
25400 US Highway 19 North, Suite 158  
Clearwater, FL 33763  
727-210-2350  
www.caahep.org

2. Provided the requirements of paragraph B.1 have been met, when the sponsor additionally publishes the accreditation status of the program, it must state:

*“The [name of program] is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of [name of Committee on Accreditation].*

3. Provided the requirements of paragraph B.1 have been met, the sponsor may choose, but is not required, to include the program accreditation statement in small publications such as newspaper ads, flyers, pamphlets, etc.

C. If a program has been placed on Probationary Accreditation by CAAHEP, it must inform all students and applicants in writing, and must disclose this sanction whenever reference is made to its accreditation status, by including the statement:

*“[Name of program] is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of [name of Committee on Accreditation]. The program has been placed on Probationary Accreditation as of [date of Probation action].”*

Since Probationary Accreditation is a temporary status, publications that are published less frequently than once a year (e.g., catalogues) are not required to carry the above wording. However, whenever such publications are distributed to the program’s current students or potential applicants, they must include an insert containing the above language. Any promotional pieces, print advertisements or areas on the program’s website that make reference to accreditation status must include the above language about Probationary Accreditation.