

## FAQs During the COVID-19 Crisis

The ARC/STSA commends administrators, program directors, and faculty for their commitment to the education and preparation of competent entry-level surgical technologists and surgical assistants, especially during these challenging times. We recognize that during the pandemic, programs have had to make difficult decisions to delay or interrupt studies, offer limited or redesigned coursework, and/or initiate different approaches and strategies influenced by individual institutional policies/procedures, and local, state and federal regulations.

The ARC/STSA is committed to supporting each of our programs as they work through these challenges to ensure that students receive the required education per the surgical technology and surgical assisting core curricula and CAAHEP Standards.

We have compiled a list of responses to frequently asked questions as guidance for programs working to address the specific needs of their students, graduates, and communities of interest.

Please note that the guidance and allowances provided below are effective during the public health crisis and will conclude on December 31, 2020, unless otherwise specified by the ARC/STSA. A [COVID-19 Plan of Action form](#) has been developed to track a program's temporary changes throughout the pandemic. This information and supporting documentation should be maintained by the program and will be submitted with its Annual Report in early 2021.

### Outcomes, Annual Reporting and Other Notifications

1. How do we report all of our changes related to COVID-19 to the ARC/STSA?

A [COVID-19 Plan of Action form](#) has been developed to record and track a program's temporary changes directly related to the impact of COVID-19. This information should be maintained by the program and will be submitted with the applicable Annual Report. The [COVID-19 Plan of Action form](#) does not need to be submitted at this time.

The ARC/STSA will distribute two to three brief surveys to all programs from August through December 2020 to collect general information regarding your program's status. Please note, programs will **no longer** be required to email temporary, non-substantive changes due to COVID-19 to [info@arcstsa.org](mailto:info@arcstsa.org). **Instead**, programs will respond to the surveys through 2020, and track and maintain your changes on the [COVID-19 Plan of Action form](#) for submission with the Annual Report in early 2021.

2. Is the ARC/STSA still expecting programs to report their substantive changes during the pandemic?

Yes, substantive changes not directly related to the impact of COVID-19 should be reported to the ARC/STSA within 30 days of the change, following appropriate protocol and submission

guidelines for the change. If an extension is needed, please contact [info@arcstsa.org](mailto:info@arcstsa.org). Please refer to Standard V.E. and page 40 of the ST SIG and page 36 of the SA SIG for examples of substantive changes.

3. How do we report outcomes during the pandemic?

The program should track the completion dates for each student and/or cohort as it normally would using the [Outcomes Tracking Tool \(OTT\)](#), for utilization in reporting on the applicable and subsequent Annual Reports. The program should refer to its institutional policies regarding graduation date for cohorts, including but not limited to leave of absence and incomplete policies and any emergency institutional policies developed to address delayed graduation or extended graduation periods. The ARC/STSA will continue to assess the impact of the pandemic on outcomes reporting periods and will communicate any updates or changes to our programs accordingly.

4. Are we required to submit a 2020 Annual Report?

Programs will be responsible for completing and submitting a 2020 Annual Report, but not until 2021. The ARC/STSA has extended the 2020 Annual Report launch until January of 2021 due to the extreme challenges that our programs are facing. We understand and appreciate the extraordinary amount of time you have devoted and continue to devote to safely provide a quality education to your students in the midst of daily uncertainty.

**Distance Education\***

5. We plan to offer didactic coursework online for the fall semester. What documentation will we need to provide to the ARC/STSA?

No documentation needs to be submitted at this time. The program should track these curriculum changes on its [COVID-19 Plan of Action form](#), and maintain this form for submission on the applicable Annual Report.

6. How long will the ARC/STSA approve online coursework due to the pandemic?

At this time, approval for temporary online coursework is granted through December 31, 2020. In 2021, if the program continues to offer online coursework, the program may need to submit curriculum change documentation for review and approval. Contact [info@arcstsa.org](mailto:info@arcstsa.org) with questions or to discuss your program's specific situation.

7. Will the ARC/STSA ask to see our online assessment tools?

The program should ensure students are being assessed in compliance with **Standard IV.A.1**. Evaluation of the students must be conducted on a recurrent basis and with sufficient frequency to provide both the students and the program faculty with valid and timely indications of the students' progress toward and achievement of the competencies and learning domains stated in the curriculum. Assessment tools will be reviewed during the program's next accreditation visit.

\*Be sure to download the list of online learning [Resources to Support Instructors](#) provided by the ARC/STSA and EdAccred

### Lab and Clinical Coursework\*

8. If students submit video documentation of themselves performing specific lab competencies, may we sign off on those competencies without reviewing their skills in person on ground?

If appropriate resources are available, the ARC/STSA supports students *practicing* their lab skills at home as preparation for clinical; however, **final skill competencies are to be graded in the live lab setting with the instructor or program director in person.** We understand that this may cause a delay in course completion until sufficient lab resources are available.

9. May simulation be substituted for clinical cases?

No, simulation may not be substituted for clinical cases, as it cannot replicate a surgical experience.

\*See additional guidance provided in [March 27, 2020](#), and [April 23, 2020](#), COVID-19 statements

### MEC/Clinical Overlap

10. How do we report temporary changes in MEC to the ARC/STSA?

If the changes are directly related to the impact of COVID-19, the program should track these changes on its [COVID-19 Plan of Action form](#). Temporary changes in MEC could include a change (increase or decrease) to the number of new cohorts brought into the program in an academic year, or to the number of students comprising those cohorts, or the number of students/cohorts overlapping in clinical.

11. We will have a cohort of students still completing their clinical rotation when we admit our next class. Is this considered a MEC change?

No, this is not considered a MEC change. However, when weighing the decision to delay a cohort start or proceed with a cohort overlap due to COVID-19, programs are reminded to assess all resources to ensure compliance with Standard III.A. – Resources and Standard III.B – Faculty Resources.

12. Since clinical opportunities were unavailable for several months, we will have multiple cohorts in clinicals at the same time. How can we schedule students during this time to evidence clinical sufficiency?

The program should ensure students are not overlapping and that documentation is available to evidence sufficient clinical slots. If students do overlap, the program should maintain a clinical schedule to indicate sufficient slots/days to accommodate each student. We ask that the program maintain this information for its records, and for reporting on the applicable Annual Report.

## Graduation/Transfers

### 13. May our school graduate students who have not finished their clinical requirements?

As detailed in the [ARC/STSA Guidance Document released April 23, 2020](#), the ARC/STSA has determined to uphold the required 120 clinical case minimum as stated in the Surgical Technology Core Curriculum (6e) and 140 clinical case minimum as stated in the Surgical Assisting Core Curriculum (3e). We recognize that each accredited program may need to initiate different approaches and strategies that may be influenced by institutional policies and procedures, community needs, as well as local, state, and federal regulations.

Programs that graduate students with fewer clinical cases than the required minimum as stated in the core curricula, to include required minimum General and Specialty cases, will be required to provide documentation to address non-compliance with Standard III.C. – Curriculum. **It is important for sponsoring institutions to understand that this determination should only be considered by the program in the most extenuating of circumstances, when the program has exhausted all other options to maintain compliance with currently established clinical case criteria. Programs that graduate students with fewer than the required number of clinical cases must provide evidence of efforts to maintain compliance with currently established clinical case criteria. If, upon review of program documentation, the ARC/STSA establishes the program did not exercise due diligence in implementing this course of action, the program will be cited for non-compliance under Standard III.C. – Curriculum. The ARC/STSA has extended this guidance for program consideration until October 1, 2020.**

Programs must maintain documentation regarding how the need for early graduation was determined, including the program's assessment of community need; how the program determined graduate competency; and, how the program incorporated the administrative team, program advisory committee, employers, and community partners into the decision-making process. Supporting documentation to accompany the program's [COVID-19 Plan of Action form](#) may include:

- completed student clinical evaluations
- completed student clinical logs demonstrating student clinical experience
- documentation, and analysis, of how the institution/program determined student competency, with fewer than the required minimum cases completed
- documentation of personnel involved in assessment of student competence
- evidence of communications with students related to early graduation
- evidence of student agreement to and consent for early graduation
- employer surveys
- evidence of communication with potential employers
- evidence of communication with PAC members
- documentation of post-graduation employer orientation procedures, graduate experience during orientation (if applicable)

The program must maintain documentation that consideration was given to student enrollment agreements; institutional policy and procedure; institutional accreditation requirements, in

particular requirements for program length; Fair Practices as defined by Standard V of the CAAHEP Standards for Surgical Technology and Surgical Assisting; and, the program's responsibilities to students, graduates, employers, and surgical patients to assure that graduates are competent to practice as surgical technologists.

14. May our program graduate students in a cohort who have completed their clinical requirements, yet hold back students in the same cohort who have not completed their required cases?

Selective early graduation of students falls under the jurisdiction of the program and sponsoring institution. As with instances of early graduation (detailed above), the program must adequately communicate its intent to all students the required competency for early graduation as defined by the program. The program must provide documentation that consideration was given to student enrollment agreements; institutional policy and procedure; institutional accreditation requirements, in particular requirements for program length; Fair Practices as defined by Standard V of the CAAHEP Standards for Surgical Technology and Surgical Assisting; and, the program's responsibilities to students, graduates, employers, and surgical patients to assure that graduates are competent to practice as surgical technologists.

15. My students have finished their clinical cases required by the ARC/STSA but have not finished their semester clock hours. May we graduate them?

ARC/STSA encourages the program to defer to its institutional accrediting agency, state/regional approval agency, and its own institutional requirements with regard to student enrollment agreements, interruption of studies and extended graduation, including but not limited to leave of absence and incomplete policies. The ARC/STSA does not designate quarter/semester clock hour requirements related to clinical case completion as required by the Surgical Technology Core Curriculum (6e) and the Surgical Assisting Core Curriculum (3e).

16. May we transfer students who have not completed their clinicals to another school that is willing to take them for clinical?

Programs opting to transfer students to other CAAHEP-accredited surgical technology or surgical assisting programs must do so following all published student transfer policies as defined in the CAAHEP Standards and Guidelines, Standard V: Fair Practices. In addition, the program is responsible for clinical oversight of the student being transferred, i.e. evaluation of the student in the clinical setting, maintaining student clinical evaluations, verification of clinical case experience, and completion of all clinical requirements of the student's original program.

### **PAC Meetings**

17. We have a scheduled PAC meeting; however, we are restricted from having on-campus meetings. What can we do to conduct the meeting?

Programs are permitted to conduct virtual Program Advisory Committee (PAC) meetings. Programs must maintain documentation to demonstrate involvement of all PAC members in the discussion to support the program and sponsoring institution in formulating and periodically revising appropriate goals and learning domains, program resources, and program outcomes.

Acceptable documentation supporting virtual PAC meetings could include meeting minutes, evidence of voting for meeting minutes, email communications, screenshots of virtual meetings, virtual meeting attendee list, etc.

If a PAC member is unable to attend a meeting and there is evidence to demonstrate that the absent PAC member was involved in the discussion, this will satisfy Standard II.B. – PAC meeting requirements.

The ARC/STSA staff is always happy to answer any questions you may have. Please email [info@arcstsa.org](mailto:info@arcstsa.org) and we will respond within 1-2 business days, or give us a call at (303) 694-9262.