

Program Advisory Committee (PAC) Member and Meeting Policy

Relevant Standard: Standard II. Program Goals B. Program Advisory Committee

Purpose

The ARC/STSA PAC Member and Meeting Policy:

- Defines and specifies PAC member roles and qualifications of those who may be appointed
- Outlines meeting criteria acceptable to the ARC/STSA for Standards compliance.

This policy supplements Program Advisory Committee requirements as found in the current *CAAHEP Standards and Guidelines for the Accreditation of Education Programs in Surgical Technology* and the current *CAAHEP Standards and Guidelines for the Accreditation of Education Programs in Surgical Assisting.*

PAC Member Roles

The PAC must include at least one representative from each of the communities of interest as detailed below:

- * Current student
- * Program graduate
- Program director (Faculty)
- Sponsoring institution administrator
- * Employer
- * Physician
- Practicing surgical technologist (for surgical technology programs)
- Practicing surgical assistant (for surgical assisting programs)
- Public member

PAC Member Qualifications

- Each PAC position must be represented by a unique member; PAC members may not serve in more than one capacity. Programs must maintain resumes or biographical summaries for all members, and evidence of professional credentials for the practitioner and physician.
- PAC members must be located within the program's immediate community of interest.

- The physician representative must be a practicing surgeon or practicing anesthesiologist. Recently retired surgeons or anesthesiologists (within five years) may serve as a physician representative.
- For surgical technology programs, the practitioner representative must be a credentialed surgical technologist. For surgical assisting programs, the practitioner representative must be a credentialed surgical assistant.
- * Either the employer, physician or practicing surgical technologist (for surgical technology programs)/practicing surgical assistant (for surgical assisting programs) must be employed by one of the program's clinical sites.
- The public member representative must represent the interests of the surgical patient, may not be employed in, or retired from a health care field, may not be an employee of the sponsoring institution or a clinical affiliate, and may not be a family member of institutional or program faculty or staff.
- * Only the program director, faculty and institutional administrative representatives may be employed by the sponsoring institution.

Meeting Criteria

- * PAC meetings must be held at least once every 12 months and include at least one representative from each community of interest.
- * PAC meetings must be presented live/synchronously, but may be conducted in an on-ground, virtual or hybrid format using telecommunications technology as needed.
- * PAC meeting may be held in conjunction with departmental or institutional advisory committee meetings; however, the surgical technology or surgical assisting program portion must be conducted independently as a separate meeting or a breakout session.
- Programs must maintain verifying documentation which demonstrates all PAC members are involved in the discussion/conversation regardless of the meeting format (meeting minutes, email communications, sign-in sheets, screenshots of teleconference, etc.) to assist program and sponsoring institutional personnel in formulating and periodically revising appropriate goals and learning domains, program resources, and program outcomes.
- If an individual PAC member is unable to attend a meeting and there is evidence to demonstrate that the absent PAC member was involved in the discussion/conversation, this will satisfy Standard II.B. PAC meeting requirements. Please note, email and survey input/feedback from this individual must demonstrate meeting participation (i.e., substantive commentary and/or contributions to the agenda topics).