



# INTERIOR REGION EMERGENCY MEDICAL SERVICES COUNCIL, INC.

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## Instructor Renewal Checklist

Instructor's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Please select the discipline you are renewing:

*(Select 1 only)*

ACLS     BLS     Heartsaver     PALS

**Attach the signed and completed AHA Monitoring Form**

*\*All paperwork and payment must be received before new eCards are issued*

*\*\*You must contact IREMSC to arrange payment*

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IREMSC Office Info:

- Receive the completed AHA Monitoring Form
- Process Payment
- Issue new instructor eCard
- Issue new provider eCard
- Scan and file renewal paperwork to Enrollware and instructor file
- Update expiration dates in Enrollware
- Update *Monitored Instructors Tracking* Spreadsheet



## American Heart Association Emergency Cardiovascular Care Programs

### **Instructor/Training Faculty Renewal Checklist**

***Instructions:** This checklist may be used to document successful completion of instructor/Training Faculty (TF) renewal requirements and contact information. It is recommended that the TC keep the completed form in the instructor's file.*

**Complete 1 form per renewing discipline.**

*To be used in conjunction with the Instructor Monitoring Tool.*

#### **SECTION 1:**

**General information for the renewing instructor or TF member.**

Renewing discipline:

- Heartsaver®     BLS     ACLS     ACLS EP     PALS     PEARS®  
 ASLS

Instructor ID#: \_\_\_\_\_ Expiration date of instructor card: \_\_\_\_\_

Primary TC name: \_\_\_\_\_ TC ID #: \_\_\_\_\_

TC Coordinator's name: \_\_\_\_\_

Instructor's or TF's name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

#### **SECTION 2:**

**Instructor or TF member teaching, monitoring, and update activity for renewal.**

Instructor/TF monitoring completed successfully:

Course name: \_\_\_\_\_

Date: \_\_\_\_\_ TF observer name: \_\_\_\_\_



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**Instructor/Training Faculty Renewal Checklist**

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Instructor/TF update(s) attended:

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

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Instructor Essentials course completed (if applicable):

Date: \_\_\_\_\_ Location: \_\_\_\_\_

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**Instructor/Training Faculty Renewal Checklist**

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- At least 4 provider courses taught in the past 2 years or waiver obtained (list classes below; additional classes may be attached or listed on the back of this form)

Course Name	Date	Location (TC or Site)	Station or Module

- If applicable (for TF), at least 1 instructor/instructor renewal course taught in the past 2 years (list courses below)

Course Name	Date	Location (TC or Site)	Station or Module

**SECTION 3:**

**Administrative Review of Conflict of Interest and Code of Conduct. Reviewed by TC Coordinator with instructor.**

**Professional Behavior:** The *Program Administration Manual* provides specific guidelines regarding code of conduct and conflict of interest for all representatives of the AHA as leaders in the community. Instructors need to comply with these AHA guidelines because they represent the AHA while they are conducting courses.

- Endorses the ECC Leadership Code of Conduct  
Date of review: \_\_\_\_\_
- Acknowledges the AHA Statement of Conflict of Interest  
Date of review: \_\_\_\_\_
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## American Heart Association Emergency Cardiovascular Care Programs

### Instructor/Training Faculty Renewal Checklist

#### SECTION 4:

**Administrative Competencies and Indicators. Observed by TC Coordinator through regular teaching activities**

***Cognitive and Psychomotor Skills:*** Maintains proficiency in provider-level cognitive and psychomotor skills; fulfills requirements for initial or renewal instructor certification

- Demonstrates proficiency in provider-level skills
- Teaches at least the minimum number of classes per cycle
- Is aligned on the Instructor Network
- Completes the required provider and instructor updates
- Provides precourse instructions and resources to students before the course
- Uses student and Faculty feedback to improve teaching performance
- Ensures equipment is in working order and is available in sufficient quantity, as recommended
- Secures and protects testing materials
- Decontaminates/cleans equipment according to the manufacturer's instructions

***Program Administration:*** Successfully manages available resources, including time, materials, space, and budget, to deliver high-quality training in accordance with AHA guidelines

- Completes postcourse records, including an accurate roster, grade report, and summary evaluation
- Complies with the current, appropriate version of the *Program Administration Manual*
- Ensures that AHA course completion cards are issued in a timely manner

Overall comments from TC Coordinator:



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**Instructor/Training Faculty Renewal Checklist**

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Overall comments from instructor/TF:

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Review of Renewal Checklist is acknowledged by instructor/TF:

TCC name: \_\_\_\_\_ Instructor/TF name: \_\_\_\_\_

TCC signature: \_\_\_\_\_ Instructor/TF signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

New instructor card issued                      Date: \_\_\_\_\_

TF status maintained                              Date: \_\_\_\_\_

## American Heart Association Emergency Cardiovascular Care Program

### Instructor Monitor Tool

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**Instructions:** Training Faculty (TF) should use this form to assess the competencies of instructor candidates and renewing instructors. For each competency, there are several indicators or behaviors that the instructor may exhibit to demonstrate competency.

**To be used in conjunction with the Instructor/TF Renewal Checklist.**

#### Role of the TF Observer:

The role of the TF observer for this monitoring is to observe only. Debriefing or correcting the instructor during the course should be avoided. If critical components are not being completed, contact the TC Coordinator or Course Director outside the classroom setting immediately.

#### Evaluating the Critical Actions:

The following questions are critical actions required for a successful course. Each item is written to maximize the objectivity and minimize the subjectivity of the evaluator. For each item, mark one of the following:

- Yes** for items present or completed if there are no required changes for improvement. There may be recommendations for improvement and comments but no required changes.
- Yes with req.** (Yes with requirements) for items that were completed but changes are required for full compliance. Fill in the comment box with the required change and rationale.
- No** if the required action was not done or was done incorrectly.
- Not Observed** for items the observer did not witness during monitoring.

#### SECTION 1: General information for the individual and course being observed.

Instructor or instructor candidate name: \_\_\_\_\_

Instructor ID #: \_\_\_\_\_ Instructor card expiration date: \_\_\_\_\_

Course reviewed:  Heartsaver®  BLS  ACLS  ACLS EP  PALS  PEARS®

ASLS

Purpose of review:  Initial application  Instructor renewal  Remediation

## Instructor Monitor Tool

**SECTION 2: Instructor competencies and indicators. Observed by TF in a class setting.**

**Course Delivery:** Presents AHA course content as intended by using AHA course curricula and materials

- 2.1 Delivers all core content consistent with AHA published guidelines, Instructor Manual, Lesson Plans, and agenda

Yes

Yes with req

No

Not observed

Reviewer's comments:

- 2.2 Uses videos, checklists, equipment, and other tools as directed in the Instructor Manual

Yes

Yes with req

No

Not observed

Reviewer's comments:

- 2.3 Allows adequate time for content delivery, skills practice, and debriefing

Yes

Yes with req

No

Not observed

Reviewer's comments:



## Instructor Monitor Tool

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2.4 Promotes retention by reinforcing key points

Yes

Yes with req

No

Not observed

Reviewer's comments:

2.5 Delivers course in a safe and nonthreatening manner

Yes

Yes with req

No

Not observed

Reviewer's comments:

2.6 Relates course material to audience (prehospital or in-facility)

Yes

Yes with req

No

Not observed

Reviewer's comments:

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## Instructor Monitor Tool

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2.7 Effectively operates technology used in the course

Yes

Yes with req

No

Not observed

Reviewer's comments:

2.8 Adapts terminology appropriate to location, audience, and culture

Yes

Yes with req

No

Not observed

Reviewer's comments:

2.9 Accommodates students who have disabilities and other special needs

Yes

Yes with req

No

Not observed

Reviewer's comments:

## Instructor Monitor Tool

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2.10 Provides timely and appropriate feedback to students

Yes

Yes with req

No

Not observed

Reviewer's comments:

2.11 Uses principles of effective team dynamics during small group activities

Yes

Yes with req

No

Not observed

Reviewer's comments:

2.12 Facilitates debriefings after scenarios to improve individual and team performance

Yes

Yes with req

No

Not observed

Reviewer's comments:

## Instructor Monitor Tool

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**Testing and Remediation:** Measures students' skills and knowledge against performance guidelines and provides remediation when needed to consolidate learning

2.13 Tests students by using AHA course materials according to instructions in the Instructor Manual

Yes

Yes with req

No

Not observed

Reviewer's comments:

2.14 Provides feedback to students in a private and confidential manner

Yes

Yes with req

No

Not observed

Reviewer's comments:

2.15 Provides remediation by directing students to reference material and by providing additional practice opportunities

Yes

Yes with req

No

Not observed

Reviewer's comments:

## Instructor Monitor Tool

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2.16 Retests students when indicated

Yes

Yes with req

No

Not observed

Reviewer's comments:

**Professionalism:** Maintains a high standard of ethics and professionalism when representing the AHA

2.17 Demonstrates professional behavior in physical presentation and teaching, including enthusiasm, honesty, integrity, commitment, compassion, and respect

Yes

Yes with req

No

Not observed

Reviewer's comments:

2.18 Follows HIPAA, FERPA, and/or local guidelines maintaining confidentiality

Yes

Yes with req

No

Not observed

Reviewer's comments:

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## Instructor Monitor Tool

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2.19 Recognizes and appropriately responds to ethical issues encountered in training

Yes

Yes with req

No

Not observed

Reviewer's comments:

2.20 Maintains student confidentiality when appropriate

Yes

Yes with req

No

Not observed

Reviewer's comments:

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Overall comments from TF observer:

Review completed:

Successful

Comment:

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American Heart Association Emergency Cardiovascular Care Program

## Instructor Monitor Tool

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Remediation needed

Comment:

Unsuccessful

Comment:

TF name: \_\_\_\_\_

TF signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## Instructor Monitor Tool

**SECTION 3: Review of candidate or instructor. To be completed by TC Coordinator.**

I have reviewed the Instructor Monitor Tool with my TC Coordinator, and my instructor status has been reviewed with me. Overall comments from monitored candidate or instructor:

Candidate or instructor name: \_\_\_\_\_

Candidate or instructor signature: \_\_\_\_\_ Date: \_\_\_\_\_

TC Coordinator name: \_\_\_\_\_

TC Coordinator signature: \_\_\_\_\_ Date: \_\_\_\_\_