

# **TAMIU Training Center**

Policies and Procedures



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- 1. All responsibilities as stated in the American Heart Association corresponding Instructor Manual.
- 2. Responsible to review "Forms and Additional Information" in Instructor Manual for length of time for each section covered in class; review Agendas.
- 3. Have a strong working knowledge and skills of the current provider course materials, which is maintained by teaching on a regular basis and attending/completing instructor updates.
- 4. Instruct students concerning the objectives of the entire program and evaluate students' progress toward objectives.
- 5. Train provider candidates according to American Heart Association guidelines.
- 6. Up-to-date knowledge of program discipline in accordance with current Instructor Manual and American Heart Association requirements.
- 7. Must teach at least 4 provider courses in 2 years.
- 8. If instructor assisted in a training for another Training Center, instructor is responsible for submitting rosters to their respective Training Center.
- 9. Instructors will submit complete and accurate rosters, with appropriate fees, to the Training Center within 10 business days after the completion of the course.a. Rosters must be legible, neat, and clean.
- 10. Ensure all courses are taught in accordance to American Heart Association standards, including appropriate instructor to student ratio and student to manikin ratio.
- 11. Ensure that the course location is safe, has an environment which is non hostile, and is free of intimidation.
- 12. The instructor must successfully complete an Instructor Renewal Course prior to certification expiring to maintain Instructor Status; must contact Training Center at least 60 days in advance.
- 13. ACLS instructors must have an in depth knowledge of adult ECC.
- 14. The instructor must keep personal contact information up-to-date in the AHA Instructor Network. Instructors will receive important e-mail messages about AHA updates and ECC Beat. All Instructors MUST stay current with the Training Center. This will assist with getting information out to instructors.
- 15. Responsible for viewing newsletters throughout the year. Newsletters are posted on the American Heart Association instructor website.

- 1. Course rosters must be properly completed when submitted, or they will be returned to the lead instructor. If rosters are incomplete, they will be returned to lead instructor.
- 2. The Training Center affiliation of **ALL** assisting instructors must be on all course rosters. It is the responsibility of the lead instructor to ensure that assisting instructors hold a valid certification with the American Heart Association.
- 3. Course Rosters must be submitted within 10 business days after course end date.
- 4. All Health Care Providers, which includes BLS and ACLS, **must** take the final written exam and this score must be recorded on the rosters. Note: Passing score is 85%. Refer to score card.
- 5. All course rosters must list legible full names and e-mail addresses of participants.
- 6. The roster must reflect the course instructed with optional modules completed.
- 7. Course rosters **must** include information demonstrating appropriate instructor/ student, student/manikin ratios, and adequate time frames.
- 8. eCards will be issued only after completing and submitting required coursework. Paperwork will be reviewed first for compliance with all American Heart Association guidelines.
- 9. Course completion eCards are issued to the students personal e-mail after successful completion of a course.
- 10. Complements and Complaints about instructors, Training Center Faculty or the Training Center should be in writing and directed to the Training Center Coordinator. Quality Scores will be reviewed on the AHA Instructor Network for instructors and Training Sites.
- 11. Course fees, disclaimer, and advertising must be in accordance with current American Heart Association guidelines. *A disclaimer must be put in the pre-course material if charging for the course*.
- 12. Replacement course completion eCards are issued upon request to persons who successfully completed a course with the TAMIU-Training Center, and whose record can be found on either at the TAMIU-Training Center or Instructor. A fee will be assessed.
- 13. Training Center Faculty must notify Training Center at least 4 weeks in advance of a planned new instructor course.
- 14. In order to be a lead instructor for ACLS, you must have assisted with at least four classes and then be re-monitored for this position. This is to ensure quality of program courses.

- 1. Only active instructors aligned with the TAMIU- Training Center and in compliance with all AHA policies can purchase eCards.
- 2. Payment for eCards is expected upon submission of roster.
- 3. Certification eCards can only be ordered by Instructors or Training Sites under the TAMIU-Training Center.
- 4. eCards will only be issued out after completion and submission of correct and compliant course documents.
- 5. All provider certification cards will be eCards. Instructor cards will be print until AHA releases a new product.
- 6. Providers may request replacement cards from instructors or TAMIU- Training Center only for students who:
  - a. Have Initial or renewal training for by a TAMIU-Training Center Instructor, and
  - b. Have complete documentation on file with Instructor or TAMIU- Training Center.
- 7. No certification cards will be issued for expired certifications.
- 8. The original dates of certification will appear on replacement certification cards; not the replacement date.
- 9. All American Heart Association certification cards are valid for two (2) years. TAMIU-Training Center and Training Sites will not indicate a recommended renewal date less than or more than two (2) years.
- 10. Certification cards will be stored in a locked and secured location. eCards will only be accessed by authorized individuals.
- 11. Training Center will issue out eCards to participants that successfully completed the course after 10 business days of reviewed submitted rosters at TAMIU-Training Center.

It is the responsibility of each instructor to maintain his or her instructor status in accordance with American Heart Association and TAMIU- Training Center guidelines. An American Heart Association instructor must demonstrate understanding of the most recent American Heart Association guidelines by successfully completing all AHA requirements on Renewal Checklist. The following requirements must be completed:

- 1. Complete the Instructor and Training Center Faculty Renewal Checklist found in the AHA Instructor Network. Complete the Information section only. Submit the form via email/fax/in person.
  - a. The Renewal Checklist will be completed by the American Heart Association TAMIU Training Center Faculty on the course day.
- 2. Complete the Discipline Specific Instructor Essentials Course (if applicable) and submit the Certificate of Completion to the Training Center.
- 3. Confirm that a minimum of four (4) course rosters have been submitted within the last (24) months,
  - a. Upon approval of TAMIU- Training Center Coordinator, the 4 course rosters can be "waived" if you have been:
    - i. Called to active military duty
    - ii. Illness or injury that has caused the Instructor to take a significant leave from employment or teaching duties. Provide some sort of documentation to the Training Center Coordinator.
    - iii. A limited number of courses offered in an area because of lack of audience.
- 4. Submit a copy of your current Instructor Card (front and back).
- 5. Schedule course monitoring and pay applicable fees which also include file review and completion card.
- 6. Instructor will need to bring the instructor materials they use for their respective discipline, DVD, Instructor Manual and Student Workbook.

Training Center Faculty status is a Training Center appointment and is an internal position to that Training Center only. Training Center Faculty status does not transfer. When a Training Center Faculty member transfers to another Training Center, it is as an instructor, not as Training Center Faculty. The following are the responsibilities associated with appointment:

- 1. Serve as quality assurance and educational leadership for the Training Center.
- 2. Conduct Instructor courses and monitor, update, and coach instructors.
- 3. Ensure that the Training Center is capable of conducting quality instructor courses, course monitoring, and instructor updates within the Training Center.
- 4. Complete all appropriate documentation for Instructor Courses.
- 5. Coordinate and teach at least 1 Instructor Course per year.
- 6. Training Center Faculty will coordinate and instruct an Instructor Course, and be monitored by an approved Training Center Faculty, Regional Faculty, or National Faculty.
- 7. Complete orientation with Training Center Staff; this will cover the Program Administration Manual, TAMIU's Policy and Procedures, and all subsequent paperwork.

The following does not replace Training Site Agreements. Those wanting to be training sites must contact the Training Center to discuss future opportunities.

- 1. All Training Sites must have access to the Internet and email. On occasion you will be asked to download information and distribute to instructors. This will be the responsibility of the coordinator or appointed person.
- 2. The Training Site is responsible for keeping track of instructor documentation, course rosters, and completion cards.
- 3. Training Sites must submit rosters and reports on a monthly basis; no later than the first Wednesday of a complete week of the month.

# **Securing Rentals**

Rentals will only be taken with a valid credit card. Rentals can be made by aligned CPR Instructors in person at the Office of Continuing Education or by e-mail to <u>cpr@tamiu.edu</u>. Equipment may be rented the same day, but to ensure availability instructors may secure a reservation any day before the desired pick up day.

# Pick Up

Equipment can only be picked up on the day the rental period begins. If the instructor needs to pick up the equipment any earlier, he/she must pay for those extra days.

# What Can Be Rented

Only equipment listed on the TAMIU-TC equipment rental sheet may be rented.

# **Cancellation Policy**

Rentals must be cancelled one day prior to the pick-up date to receive a full refund of the deposit. Cancellations received after this will be charged the full rental amount. *No refunds are issued due to inclement weather or changing plans unless the cancellation is one day prior to pick up (in accordance with above policy).* 

# Late Fees

If equipment is returned late, the instructor will be charged the specific daily rate for each day it is past due, up to the original cost of the equipment.

# Lost or Broken Equipment Fees

If equipment is lost or broken beyond repair, member will pay original price, plus freight and handling.

# **Cleaning and Repair Fees**

Instructors will be charged for cleaning or minor repairs, up to the original cost of the equipment.

# **Rental Periods**

- *Daily*: Equipment can be returned same day or next day.
- *Weekend*: Equipment picked up Friday and returned Monday. Holiday weekends count as regular weekends, so instructors will not be charged the extra day.
- *Week*: Equipment may be out a maximum of seven days, including pick up and return days.
- You can keep something longer than seven days at different rates.

# Grievance Process/ Internal Dispute Resolution Policy

The following procedures are for grievances made by students, instructors, or community members against other instructors, students, or staff associated with the TAMIU- Training Center. It is the intent of this Training Center to allow for two-way communication with all students, instructors and community members involved in any grievance.

Most educational and interpersonal problems are best handled between the parties involved. It is the intent of the program to make sincere efforts to listen to any grievance or concern from any student or instructor associated with TAMIU-Training Center. The TAMIU-Training Center will serve as a mediator when needed.

It is the responsibility of the Training Center to manage and resolve any disputes, complaints, or problems that arise from activities conducted by a Training Center's staff, Training Sites, and/or aligned instructors. Any complaints or problems brought to the Training Center by the American Heart Association will require the Training Center Coordinator to develop a plan of action and a timeline for repair in consultation with the Account Manager.

Process:

- 1. The student or instructor shall first openly discuss the grievance with the parties involved.
- 2. If a resolution cannot be reached by the parties, a written complaint is to be submitted to the Training Center Coordinator. Documentation will be reviewed by Training Center's Quality Assurance Committee. A response to the grievance will be made within 10 business days.
- 3. The Training Center will serve as medium to resolve the grievance or complain.
- 4. If a resolution is not achieved, the complaint will be forwarded to the appropriate American Heart Association contact for the discipline involved.

**Note:** Complements and Complaints about instructors, Training Center Faculty or the Training Center should be in writing and directed to the Training Center Coordinator. All information will be reviewed by Training Center Coordinator and Training Center's Quality Assurance Committee to resolve issue and improve quality of program.

Fees can be paid online or in office by credit card, cash, or check payable to TAMIU. Fees subject to updates based on AHA policy changes.

# **Course Completion Cards**

BLS Provider eCar Heartsaver Provide ACLS Provider eCa Instructor Cards	r eCard ard	\$5.00 each \$20.00 each \$10.00 each \$20.00 each	
Replacement Cards BLS Provider eCard Heartsaver Provider ACLS Provider eCa Instructor Cards	d r eCard	\$10.00 each \$25.00 each \$15.00 each \$25.00 each	
Course Materials			
BLS Provider Man Heartsaver Provider ACLS Provider Ma Practi-Valve Traini Face Shield	r Manual nual	\$15.00 each \$10.00 each \$40.00 each \$1.50 each \$0.50 each	
Heartsaver Courses: Provider Course Fin	rst Aid CPR AED (0	Offered at TAMIU)	\$75 per participant
Maximum 9	•	)	the Le Lee Lee Lee
Provider Course CF Maximum 9	PR AED (Offered at	TAMIU)	\$45 per participant
Instructor Initial Ce	ertification		\$600 per participant
Maximum 9 Instructor Renewal Maximum 9	Certification		\$200 per participant
<b>BLS Courses:</b>			
Provider Course (O Maximum 9			\$65 per participant
Instructor Initial Ce	ertification		\$600 per participant
Maximum 9 Instructor Renewal Maximum 9	Certification		\$200 per participant
ACLS Courses:			
Provider Course (O	5		\$350 per participant
Instructor Initial Ce			\$TBA per participant
Instructor Renewal	TBA trainees Certification TBA trainees		\$TBA per participant

#### **Equipment Rental Fees:**

BLS Instructor Package Laerdal Adult Pocket Mask Infant Resusitator Mask AED Practi-Trainer Essentials Little Anne CPR Training Manikin (Adult) Little Junior CPR Training Manikin (Child) Baby Anne CPR Training Manikin (Infant) Adult Bag-Valve Mask Trainer Child Bag-Valve Mask Trainer Infant Bag-Valve Mask Trainer Heartsaver Instructor Package First Aid Training Pack

Late Rental Fee (if applicable): BLS Instructor Package Laerdal Adult Pocket Mask Infant Resusitator Mask AED Practi-Trainer Essentials Little Anne CPR Training Manikin (Adult) Little Junior CPR Training Manikin (Child) Baby Anne CPR Training Manikin (Infant) Adult Bag-Valve Mask Trainer Child Bag-Valve Mask Trainer Infant Bag-Valve Mask Trainer Heartsaver Instructor Package First Aid Training Pack \$11.00 per day \$1.50 per day \$0.25 per day \$7.00 per day \$24.00 per day \$21.00 per day \$12.00 per day \$2.00 per day \$2.00 per day \$2.50 per day \$11.00 per day \$11.00 per day \$11.00 per day

\$16.50 per day \$2.00 per day \$0.50 per day \$10.50 per day \$35.00 per day \$31.50 per day \$17.50 per day \$2.50 per day \$2.50 per day \$3.25 per day \$39.75 per day \$1.25 per day

# Equipment/ Manikin Maintenance and Decontamination

The purpose of this document is to update the American Heart Association's equipment decontamination guidelines for CPR training. These guidelines may reduce the risk of potential disease transmission from inadequate equipment decontamination. A wide variety of manikins are commercially available, and **it is strongly recommended that instructors follow manufacturers' recommendations for manikin use and maintenance**. In the absence of manufacturer's recommendations, the guidelines below may be used during and after courses.

- 1. Instructors should practice good hygiene with proper hand-washing techniques.
- 2. Students should be told in advance that CPR training sessions involve close physical contact with other students.
- 3. When individual protective face shields are used, all decontamination recommendations listed for cleaning manikins during and after a course should still be followed. In addition, to reduce the risks to each user for exposure to contaminants, the instructor must ensure that all students consistently place the same side of the face shield on the manikin during use.
- 4. If no face shields are used during the course, manikins should be cleaned after use by each student with a manikin wipe that has an antiseptic with 70% ethyl alcohol.
  - a. Tear the foil packet open, and take out and unfold the manikin wipe.
  - b. Rub the manikin's mouth and nose vigorously with the wipe
  - c. Wrap the wipe snugly over the mouth and nose
  - d. Keep the wipe in place for 30 seconds
  - e. Dry the manikin's face with a clean paper towel or something similar
  - f. Continue with the ventilation practice
- 5. Manikins should be taken apart as directed by the manufacturer. Anyone taking apart and decontaminating manikins should wear protective gloves and wash his or her hands when finished.
- 6. Any part of the manikin that came in contact with potentially infectious body fluids during training should be cleaned as soon as possible at the end of each class to prevent contaminants from drying on manikin surfaces.
- 7. If manikins are stored for more than 24 hours, clean the manikins as follows:
  - a. All surfaces, reusable protective face shields, and face masks should be washed thoroughly with warm, soapy water and brushes.
  - b. All surfaces should be moistened with a sodium hypochlorite solution having at least 500 ppm free available chlorine (1/4 up of liquid household bleach per gallon of tap water) for 10 minutes. This solution must be made fresh for each class and discarded after each use. Using a concentration higher than ¼ cup has not been proven to be more effective and may discolor the manikins.
  - c. All surfaces should be rinsed with fresh water and allowed to air dry before storing.
  - d. Some manufacturers have recommendations for cleaning manikin parts in a dishwasher. Check with the manufacturer of the manikins being used to determine if this is an acceptable method. Some manikin materials could be damaged in a dishwasher.
- 8. Disposable airway equipment must be disposed at the end of each day of class.
- 9. Manikin clothing and the manikin carrying case should be cleaned periodically or when soiled.

The American Heart Association, its Affiliates and Components, and all Officers, Directors, Delegates, Council and Committee members scrupulously shall avoid any conflict between their respective personal, professional or business interests and the interests of the Association, in any and all actions taken by them on behalf of the Association in their respective capacities.

If any Officer, Director, Delegate, Council or Committee member of the Association has any direct or indirect interest in, or relationship with, any individual or organization that proposes to enter into any transaction with the Association, including but not limited to transactions involving:

- 1. the sale, purchase, lease or rental of any property or other asset;
- 2. employment, or rendition of services, personal or otherwise;
- 3. the award of any grant, contract, or subcontract;
- 4. the investment or deposit of any funds of the Association;

Such person shall give notice of such interest or relationship and shall thereafter refrain from discussing or voting on the particular transaction in which he or she has an interest, or otherwise attempting to exert any influence on the Association, or its components to affect a decision to participate or not participate in such transaction.

Regional Application of the Statement of Conflict of Interest:

The expectation is that ECC leaders will conduct themselves with impartiality while performing AHA ECC tasks. When this is not possible, a statement of conflict of interest must be made and recorded into appropriate venue minutes, and there may be a need for the leader to excuse himself or herself from the decision-making process.

The AHA has established an Ethics Policy that applies to all AHA leaders, TCs, and instructors. These positions hold a responsibility to exhibit a high standard of conduct.

The American Heart Association Ethics Policy reflects the high standard of business conduct representing what is the hallmark of our organization. Our Ethics Policy helps define our commitment to support a culture of openness, trust and integrity in all we do.

We are committed to conducting all of the American Heart Association's affairs and activities with the highest standards of ethical conduct. All of us have an obligation to adhere to this policy and encourage others to do the same.

As volunteers and staff, we are passionate about working with all of our customers. We must dedicate ourselves to pursuing our mission with honesty, fairness and respect for the individual, ever mindful that there is no "right way" to do the "wrong thing."

The Ethics Policy helps clarify our standard of conduct. It makes clear that the American Heart Association expects volunteers and employees to understand the ethical considerations associated with their actions. Our Ethics Policy affirms our long standing commitment to not merely obey the law, but also to conduct our business with integrity and without deception.

The American Heart Association's reputation for integrity and honesty is more important today than ever before. As we think of "what we do" at the American Heart Association and "how we do it," always remember our responsibility to ask ourselves: "Am I doing the 'right thing' for the 'right reason'?"

# **Code of Ethics**

The summary code of ethics includes the following provisions: American Heart Association employees and volunteers must:

- Proactively promote ethical behavior as a responsible partner among peers in the work environment.
- Deal fairly with AHA Customers, suppliers, competitors, volunteers, and employees.
- Provide constituents with information that is accurate, completely objective, relevant, timely, and understandable.
- Comply with applicable government laws, rules and regulations.
- Maintain the confidentiality of information entrusted to them by the AHA or its Customers except when authorized or otherwise legally obligated to disclose.
- Accept responsibility for preventing, detecting, and reporting all manner of fraud.
- Be honest and ethical in their conduct, including ethical handling of actual or apparent conflicts of interest between personal and professional relationships.
- Protect and ensure the proper use of company assets.
- Prohibit improper or fraudulent influence over the External Auditor.

The purpose for this ethics policy is to support a culture of openness, trust, and integrity in all American Heart Association management and business practices. A well understood ethics policy requires the participation and support of every AHA volunteer and employee.

At the American Heart Association, we are dedicated to working with our volunteers, employees, partners, vendors and customers to reduce disability and death from cardiovascular diseases and stroke. We are committed to conducting all of the AHA's affairs and activities with the highest standards of ethical conduct. The AHA Code of Conduct in the Human Resources Policy Manual

provides guidance for decisions and actions during our daily work.

We are committed to the responsible use of AHA assets; to provide accurate, complete and objective information; to respect the confidentiality of financial and other information; to act in good faith and exercise due care in all we do; to comply with all rules and regulations, and to proactively promote ethical behavior.

The AHA's Ethics are built on the AHA's Guiding Values. As such, we acknowledge our individual responsibility to ensure our collective success by practicing and promoting the following values which reflect a shared view of how we want to operate and be seen by others.

#### **Our Values**

- Improving and Extending People's Lives
- Bringing Science to Life
- Speaking with a Trustworthy Voice
- Building Powerful Partnerships
- Inspiring Passionate Commitment
- Meeting People Where They Are
- Making an Extraordinary Impact
- Ensuring Equitable Health for All

#### **Our People**

The AHA is committed to provide a work environment that values diversity among its volunteers and employees. All Human Resource policies and activities are intended to create a respectful workplace where every individual has the opportunity to reach their highest potential.

Employees are provided opportunities regardless of race, color, national origin, religion, sex, sexual orientation, marital status, age, veteran status or disability. These policies apply to both applicants and employees in all phases of employment including, recruiting, hiring, placement, training, development, transfer, promotion, demotion, performance reviews, compensation, benefits and separation from employment.

We will evaluate how we are living up to our code of ethics by requesting feedback on a regular basis from our employees, volunteers and customers. We will provide all of our stakeholders a mechanism to report unethical conduct. We will begin with employee orientation and regularly communicate all of these expectations to employees and volunteers.

AHA volunteers, employees, contractors and suppliers are expected to report any practices or actions believed to be inappropriate to their supervisor, another AHA leader, the Human Resources department, or via the AHA ethics hotline.

#### **Our Customers**

We are dedicated to 100% customer satisfaction. We are devoted to developing "customer enthusiasm" and are passionate about exceeding customer expectations. We dedicate ourselves to anticipating the changing needs of customers and creating timely, innovative and superior programs, products and services.

# Fraud

Fraud is defined as any intentional act or omission designed to deceive others, resulting in the victim suffering a loss and/or the perpetrator achieving a gain. The AHA Board of Directors and Senior Management have adopted a "no fraud tolerance" attitude. In addition to the Board, volunteers, management and staff at all levels of the Association have responsibility for preventing, detecting and reporting fraud.

In addition to the definition of fraud set out above, this policy covers any dishonest or fraudulent act, including but not limited to:

- Misappropriation of funds, securities, supplies or other assets.
- Impropriety in the handling or reporting of money or financial transactions.
- Profiteering as a result of insider knowledge of company plans or activities.
- Disclosing confidential and proprietary information to outside parties.
- Intentional, false representation or concealment of a material fact for the purpose of inducing another to act upon it to procure an advantage, benefit or gain.
- Accepting or seeking anything of material value from contractors, vendors or persons providing services/materials to AHA, unless pursuant to the Acceptance of Gifts Policy.
- Destruction, removal, or unauthorized use of records, furniture, fixtures, and equipment.
- Any similar or related irregularity.

Each member of management will be familiar with the types of improprieties that might occur within his or her area of responsibility and be alert for any indication of irregularity. An employee, volunteer, consultant, vendor, contractor, or outside agency doing business with AHA shall immediately report any irregularity that is detected or suspected, as instructed below under 'Reporting Ethics Violations.' Any employee or person who suspects or reports dishonest or fraudulent activity shall not attempt to personally conduct investigations or interviews related to any suspected fraudulent act. Investigations will be coordinated with the Legal Department and other affected groups, both internal and external. For additional information regarding fraudulent activities, refer to the AHA Fraud Risk Management Program.

# **Conflict of Interest Standards Relationship Disclosure and Conflict Resolution Policy**

# A. Introduction

As a science-based non-profit organization, public trust in the integrity and independence of the American Heart Association's (AHA's) scientific review and decision-making processes as well as AHA's adherence to high standards for the conduct of its charitable activities is essential. It is also acknowledged and desired that volunteers, employees and others working on behalf of AHA (AHA Representatives) have myriad relationships, interests, and memberships that support and benefit the mission of AHA. However there are times when these multiple relationships may give rise to or give the appearance of an actual or potential conflict of interest. To protect both AHA and AHA Representative, this Policy requires disclosure of relationships by AHA Representatives and resolution of any conflicts by AHA to ensure that actions taken are in the best interest of AHA. This protects AHA's and AHA Representatives' decision-making from the appearance of bias or improper influence by individual personal or business interests, family or close associates in AHA.

# **B. AHA Representatives**

Representatives include, but are not limited to: AHA's volunteer Board of Directors, Officers, committee members, council members, key employees, certain contracted parties or agents, and other designated individuals in decision-making roles.

**C. Principles Disclosure:** AHA Representatives are to fully disclose financial and non-financial relationships, including their employment, ownership interests, memberships, arrangements, investments and holdings, including those held by family members, as required on the AHA Relationship Disclosure Questionnaire.

- 1. Reporting is to occur before appointment or election and annually thereafter.
- 2. An AHA Representative is expected to update his or her Disclosure Questionnaire also whenever any material change occurs in his or her relationships.

3. In the course of AHA meetings or activities, the AHA Representative is to disclose any direct or indirect interests in a transaction or decision that potentially could be a conflict of interest

**Evaluation:** Reporting these personal and other business relationships generally does not prevent an individual from working with or volunteering for the AHA. AHA will evaluate non-financial and financial relationships for actual or perceived conflicts based on the nature of AHA Representative's position(s) and scope of decision making authority, the substantiality of the relationships, the pervasiveness of the conflict and whether additional measures are needed to protect the integrity and reputation of the AHA Representative and the AHA.

**Resolution:** Conflicts may be resolved by having the AHA Representative refrain from deliberating and/or voting on the particular transaction or matter in which he or she has an interest; and otherwise refrain from exerting any influence on AHA to affect a decision. However, other measures may be required by AHA, depending on the nature of and the ability to reasonably manage the conflict. Resolution will be based on the facts and circumstances of each individual situation, but may in some cases require action up to and including the withdrawal of the individual from the conflicting relationship or from the AHA position.

# **D.** Requirements for Certain Positions

Because of the diversity of AHA's activities and operations, different volunteer and staff positions in AHA require specific and distinct procedures for addressing conflicts of interest All procedures must be consistent with applicable law, this Policy and approved by the Conflict of Interest Review Committee (COIRC) or the Audit Committee, as applicable.

# E. Confidentiality

When a volunteer is a director, committee member, or other active participant in another organization, the volunteer will not disclose or use confidential or proprietary information of AHA or otherwise make disclosures that could be injurious or disadvantageous to AHA.

Last updated October 11, 2016

# **Association's Property and Information**

Employees and volunteers are expected to protect the AHA's property at all times; including cash, equipment, records, employee, and customer information. This also requires employees and volunteers to maintain confidentiality regarding AHA records, and employee and customer information.

# **Nondiscrimination Policy**

It is AHA policy that the volunteer membership and staff structures and all programs and activities of the American Heart Association, its Affiliates and components shall be designed and conducted without regard to race, religion, national origin, sex, age, disability or other non-merit criteria.

# **Reporting Violations**

If you have questions or concerns about compliance with any of the policies listed above, or are unsure about what is the "right thing" to do, we **strongly encourage** you to first talk with your supervisor, program leader, another AHA Leader or the Human Resources department. If for any reason you are uncomfortable talking to any of these individuals, contact the **AHA ethics hotline at 866-293-2427** or <u>www.ethicspoint.com</u> to report your concerns. Your calls will be handled in confidence. No director, trustee, officer, employee or volunteer who in good faith reports an action or suspected action taken by or within the AHA that is illegal, fraudulent, or in violation of any adopted policy will suffer intimidation, harassment, discrimination or other retaliation. The AHA treats complaints about and reports of possible discrimination seriously and investigates them as

required by our procedures and any applicable laws.

Last updated March 2, 2016

- 1. TAMIU- Training Center has a Quality Assurance Committee that meets to discuss program administration and any issues that may arise.
- 2. Training Site Coordinators are contacted monthly for an update.
- 3. Instructors are sent important updates and ECC Beats by e-mail.
- 4. Training Center will conduct a yearly self-evaluation in October for the previous Fiscal Year.
- 5. TAMIU Training Sites must follow Memorandum of Understanding documentation during term and all policies and procedures provided by AHA. Renewal of Training Site is subject upon compliance.
- 6. Instructors are required to submit course rosters and any required instructor documentation. Instructors must retain a copy for at least 3 years.
- 7. Student Course Evaluations are reviewed. The Training Center Coordinator will provide appropriate follow up when needed.
- 8. Current American Heart Association exams are used in all courses that require testing for issuance of a course completion card.
- 9. The Training Center Instructors must ensure that each student has the current appropriate textbook readily available for use before, during, and after the course.
- 10. Every American Heart Association course conducted by the Training Center uses the American Heart Association core content and American Heart Association developed materials.
- 11. Course completion cards and written exams are stored securely in a locked location. Access to these materials must be only by authorized individuals.
- 12. The Training Center has adequate resources to complete the contracted program requirements, including staff, equipment, etc.
- 13. The appropriate course completion card is issued to every student that successfully completes a course.
- 14. The Training Center will use course monitoring documentation provided by AHA to evaluate courses.
- 15. Training Center records are complete and filed properly.

The Training Center, Regional Faculty, and/or Training Center Faculty have the right to attend any course taught by an American Heart Association Instructor aligned with the Texas A&M International University- Training Center. This is for the purpose of monitoring instructors, course content and student evaluations to ensure that the above guidelines are being followed. The Training Center will allow access to the American Heart Association and Regional Faculty to conduct course and administrative reviews as requested.

# Contact Information TAMIU- Training Center Office of Continuing Education 5201 University Blvd, STC 118 Laredo, Texas 78041 Office: 956-326-2829 Fax: 956-326-2838 <u>cpr@tamiu.edu</u>

Disclaimer: Policies and Procedures are subject to change without warning to remain in compliance with AHA program administration. Revised editions will be available at the Training Center and will be e-mailed out to actively aligned instructors.