



9312 Old Georgetown Road  
Bethesda, Maryland 20814  
P 301.581.9200 | F 301.571.4903  
www.cpme.org

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Authors: Eric Stamps, DPM; Accreditation Committee Chair  
Kieran Mahan, DPM; Council on Podiatric Medical Education Chair  
Heather Stagliano, DHSc; Director CPME

Subject: CPME Guidance on COVID-19 for Colleges

*Note: This document will be updated as new information becomes available.*

CPME continues to closely monitor the COVID-19 (Coronavirus) outbreak and guidance/updates issued by the Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO), and other sources. Most importantly, CPME wants to ensure that the health and safety of our students, faculty, staff, and patients is at the forefront of any decision made. CPME understands that each institution will be facing unique challenges influenced by individual school, clinical, or hospital policies; local, state, and federal regulations; and local public health agencies' recommendations. If a local outbreak occurs, local public health decisions must be followed, and schools will be obligated to follow the directives of the local authorities. CPME encourages you to think about how you might modify practices at your institution within the context of the current situation and to also consider potential issues that may arise as the virus spreads.

Colleges and clinical rotation sites must follow their institution's directives and make decisions that are best for them and their students. Colleges are encouraged to utilize innovative methods of delivering the curriculum and externship experiences. As alternatives to educational delivery are considered, it is important to be mindful of potential consequences for students in terms of finances and degree completion.

**Didactic Coursework:** Each college must make its own decisions about the best actions to take to ensure continued education for its students, while following all local, state, and federal regulations and recommendations. While it is imperative that colleges maintain compliance with the CPME Standards, CPME believes it is appropriate for podiatric medical colleges to use online, remote, or virtual technologies for delivery of coursework (even if those methods were not previously used by the college). Methods to provide the established curriculum are encouraged even if those methods vary from the traditional methods of providing instruction. If disruption in class and/or clinical schedules occurs, the flexibility allotted by the CPME can fill the gap on a temporary basis. CPME approval to use distance education *temporarily* will not be necessary. However, if a college determines that the use of distance education or other deviations from the approved method of curriculum delivery will continue after the pandemic, meaning - it was not previously approved by the Council - the college would need to

submit a substantive change to fully adopt this method of instruction.

**Clinical Rotations:** Given the rapidly changing public health impact the virus is having across the U.S., CPME acknowledges that flexibility with clinical rotations may be necessary to ensure the safety of students. This may include the need to temporarily suspend clinical rotations. College deans should make decisions concerning the continuation of clinical rotations, as appropriate, given the context of the local, state, and federal regulations and the recommendations provided by local public health agencies. CPME advises that in the interest of student safety, student direct contact of known or suspected cases of COVID-19 infection be avoided until better epidemiologic data are available. If the number of COVID-19 patients is very high for an extended period, it will be helpful to review the school's required clinical encounters and develop alternate ways for students to continue to meet these requirements (e.g., paper cases, simulations, independent study).

CPME encourages you to contact us if you anticipate significant changes in the structure, timing, duration, and/or location of the podiatric medical education program. All colleges will report through the fall annual report any modifications made to programming as a result of the pandemic. This will allow the Accreditation Committee and Council to understand the measures colleges took in the face of the virus. CPME expects the colleges to assess outcomes concerning the effectiveness of delivery of education and the ability to meet the needs of students (e.g., faculty effectiveness, access to student support services, board passage rates, student and faculty surveys, impact on budget, student safety) during the pandemic.

Ultimately, we anticipate that modifications to clinical education will be necessary for a short period of time, and that colleges can return to a "normal" status once the virus is no longer causing disruption. If modifications to the clinical rotations continue after the pandemic, a substantive change request must be submitted and approved. We encourage everyone to receive and review required training and refreshers on proactive measures, like hygiene practices and appropriate use of personal protective equipment, to ensure that everyone has accurate, current information on COVID-19 epidemiology.