



## American Heart Association

# Training Center Faculty Candidate Evaluation Tool

**Instructions:** Regional Faculty (RF) or Training Center Coordinator (TCC) should use this form to evaluate the competencies of potential Training Center Faculty (TCF) candidates and renewing TCF. For each competency, there are several indicators or behaviors that a TCF candidate should exhibit to demonstrate his or her aptitude and capability to become qualified TCF.

**Role of the RF:** The role of the RF is to evaluate and identify potential TCF candidates and renew TCF.

**Evaluating the critical actions:** The questions in Sections 2 and 3 are critical requirements for TCF candidates and specific criteria for effective teaching that should be observed when evaluating potential and renewing TCF candidates. Each item is written to maximize the objectivity and minimize the subjectivity of the evaluator. The potential or renewing TCF candidate must positively complete 100% of the TCF Candidate Requirements items (**Section 2**) and 90% of the Teaching Skills Evaluation Tool items (**Section 3**) to be eligible for TCF status.

**For each item in Sections 2 and 3, mark *Yes* or *No* (or *N/A* for renewing TCF, where applicable in Section 2).**

### Section 1: General Information for the Potential or Renewing TCF Candidate and Course Observed

Instructor name: \_\_\_\_\_

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

Purpose of evaluation:  Initial application  TCF renewal  Remediation

Instructor course observed:  Heartsaver®  BLS  ACLS  ACLS EP  PALS  PEARS®

### Section 2: TCF Candidate Requirements

Is the instructor at least 21 years old? (Renewing TCF: select N/A.)  N/A  Yes  No

Has the instructor completed the Instructor Essentials online course? (Renewing TCF: select N/A.)  N/A  Yes  No

Does the instructor have a current instructor card?  Yes  No

Is the instructor aligned with the International Training Center for which he or she is training to be a TCF?  Yes  No

Has the instructor taught at least 8 courses as Lead Instructor in the discipline for which he or she is training to be a TCF?  Yes  No

Has the instructor completed a TCF Candidate Application? (Renewing TCF: select N/A.)  N/A  Yes  No

### Section 3: Teaching Skills Evaluation Tool

Does the instructor have strong knowledge of the content, facilitate learning and comprehension of the discipline's general principles, and adapt instruction to help students succeed?  Yes  No

Does the instructor teach in a fair and unbiased manner?  Yes  No

Does the instructor reassess and reevaluate situations?  Yes  No

Has the instructor demonstrated a continuum of development from novice to expert instructor?  Yes  No

Does the instructor demonstrate appropriate nontechnical skills?  Yes  No

To evaluate this factor, consider how well the instructor does each of the following:

- Works well in a team
- Has time management skills
- Has leadership skills
- Has a desire to share interests, ignites those interests in others, and motivates students to learn
- Incorporates creativity into teaching and imaginative thinking into teaching
- Is organized and patient
- Shows self-motivation in keeping his or her knowledge and skills up-to-date

Does the instructor use a range of teaching strategies that offer opportunities for students with different learning styles?  Yes  No



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- Does the instructor clearly communicate the course expectations for learning to students?  Yes  No
- Is the instructor's disposition respectful and ethical to students of all demographic variables, including those from diverse educational and ethnic backgrounds?  Yes  No
- Does the instructor possess sufficient knowledge to answer most students' questions or know how to help students find appropriate information?  Yes  No
- Does the instructor communicate clearly, encourage input, and interact with students using verbal and nonverbal communication?  Yes  No

**Section 4: Recommendation**

*Recommend as TCF candidate?*  Yes  No

RF/TCC Instructor ID# \_\_\_\_\_ Instructor card expiration date: \_\_\_\_\_

RF/TCC name: \_\_\_\_\_ Date: \_\_\_\_\_

RF/TCC signature: \_\_\_\_\_ Date: \_\_\_\_\_