

Committee on Accreditation for the Emergency Medical Services Professions (CoAEMSP) Advisory Committee Agenda and Checklist

SPONSORING INSTITUTION:			Ventura College	9	
COAEMSP PROGRAM NUMBER: 60018		86 DATE, TIME, + LOCATION OF MEETING:		December 5, 2014 0900-1100	
				ATTENDANCE	
Comm	unity of Interest		• •	all in attendance. It is acceptable to nembers in a category.	Agency/Organization
	Current Student		Andrew Scott – Taylor Youngfle	did not appear esh – did not appear	
	Graduate		Chris Rosa James Rosolek		Ventura County EMS Agency LifeLine Medical Transport
	Physician(s) (may be fulfilled b	by Medical Director)	Todd Larsen		Saint John's Regional Medical Center
			Mike Taigman Chad Panke James Rosolek Mark Komins Dede Utley		AMR & Gold Coast Ambulance AMR & Gold Coast Ambulance LifeLine Medical Transport Ventura County Fire Protection District Ventura City Fire Department
	Key Governmental Official(s)		Chris Rosa		Ventura County EMS Agency
	Police and Fire Services		Dede Utley Mark Komins		Ventura City Fire Department Ventura County Fire Protection District
	Public Member		Meredith Munde	ell	n/a
	Hospital / Clinical Representative(s)		Kathy McShea Cheryl Cobb		Saint John's Regional Medical Center Community Memorial Hospital
	Other				
	Faculty (ex officio)		James Rosolek		Ventura College
	Medical Director (ex officio)		Todd Larsen (future)		
	Program Director (ex officio)		Tom O'Connor		Ventura College
			Claudia Peter		Ventura College

	Agenda Item	Reviewed	Previous Discussion	Action Required	Lead	Goal Date
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	Agenda Item	Reviewed	Discussion	Action Required	Lead	Goal Date
1.	Agenda Item Program Goals & Learning Objectives	Reviewed	 Previous year's minutes were reviews and approved. <u>Program Philosophy</u> Reviewed – no changes to be made at this time. <u>Program Learning Outcomes</u> Reviewed – no changes to be made at this time. <u>Student Learning Outcomes</u> Additions from prior meeting request were reviewed – items 10, 11, 18, and 19. Reviewed – no changes to be made at this time. <u>Clinical Goals and Objectives:</u> Number of contact types and skills are still appropriate and available within the facilities contracted with the program Endotracheal Intubation: Ventura County Medical Center offers most opportunities. Nurses at Los Robles Hospital advocate for interns in the ED to allow for additional opportunities. Will student be able to participate in the upcoming Air-Q SP trial study? Labor and Delivery – opportunity for students to access newborns for assessment Pediatrics – limited to access at VCMC Monday mornings and Friday afternoons based on regional planning scheduling. Other facilities do not have the patient population to support the students. Consider a rotation involving a pediatric clinic. Sepsis should be a category listed for student objectives: <u>Surgery</u> emphasize infection control for use in the field as an offshoot from the sterile techniques used in this setting – stress universal precautions – Ebola in the news and students must be comfortable with infection issues Remove nasotracheal intubation and replace with Supraglottic and Laryngeal Airway devices as the nasotracheal intubations are no longer utilized locally Emergence Department Replaced "Perform" with "Observe" for blood glucose determination based on recent hospital requirement changes Add CPAP and ETCO₂ to the list of procedures for this area Respiratory Therapy Add terminology	Action Required Program Philosophy – none Program Learning Outcomes – none Student Learning Outcomes – none Clinical Goals and Objectives – Follow-up with Dr. Salvucci Look to utilize the pediatric clinics currently contracted with the district and request access/follow-up with regional planning Contact FISDAP to see about adding the sepsis category to the item list. Revise student objectives as discussed	Lead Tom Tom Tom Tom	Goal Date Dec 2014 March 2015 Regional Planning Meeting Dec 2014 Dec 2014
			Trauma Rounds Request via email for removal of M&M attendance as this is a closed door meeting at the trauma center Burn Unit Include pain management discussion for prehospital care			

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2.	 Annual Report and Outcomes Graduate Surveys Employer Surveys Resources Assessment Matrix Thresholds 		 Graduate Surveys – found in the annual report. All scores 4.5 and above in all categories. Employer Surveys – found in the annual report. All scores 3.8-4.0 in all categories. Resources Assessment Matrix – taken from the recent self-study report. Supporting data in section 3 discussion. Scores below a 3 by one student in <i>faculty number is adequate in clinical area, clinical rotations provide similar competencies for all students, and reference texts adequate to support assignments</i>. Increasing staffing for clinicals, working with the agencies to provide more uniform training, reference texts are available in the library with substantial purchases made this year. Additional reference materials were acquired for use in the classroom. The campus library has online access to over 100,000 technical ebooks available to all students. Brady Lab did not work, using workbook only now and research materials in classroom. Thresholds – See annual report, pages 5-6. All thresholds are set by the Commission on Accreditation of Allied Health Programs. All categories meet the minimum thresholds using the CAAHEP 3 year trailing window. Employer and graduate survey return rates have increased through continued communications with the graduates as they enter the work force and they have helped get their employers to respond in a timely manner. 	None None Additional staff to follow-students through clinicals Clinical rotations provide similar competencies for all students – Revise clinical site preceptor training Reference texts are available in class and at the campus library (purchased summer 2014)	Tom Tom Tom	Spring 2016 Spring 2017 implementation Already completed
3.	Other Assessment Results Student Faculty Program Other 		 Student – Average scores around 4 for all categories. Several marks below a 3 for students not successful in completing the internship. Faculty & Program – thank you for completing the recent surveys for the self-study. Appendix K for SSR and the annual advisory committee survey. Other (preceptors) – Average scores were great for the preceptors and sites, but there were multiple low scores recorded. Comments provided with survey results. 	None needed – for review only None needed – for review only None needed – for review only		

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4.	 Program Changes (possible changes) Course changes Preceptor changes Clinical and field Curriculum Content Sequencing Required minimums reviewed & approved 		Course changes – Curriculum changes below cover these items. Preceptor changes – Preceptor course at Ventura College February 5 th & 6 th . Attend either day. Spoke with each preceptor about current items prior to the last cohort going to the field. Requested email or phone communications after each segment to remind them of the support system we have in place for educating the interns. Survey data from Preceptors: all preceptors responded (attached). Preceptors hard on the subjects they were/are weak on. Minimize travel time, match-up personalities.	Annual preceptor course offering at Ventura College prior to internship. Annual refresher for any preceptor accepting a student that year if they had not trained an intern within the last year.	Tom	February 2015
	 Competencies 		Clinical and Field – utilizing 12 hour cars for internship placement in addition to the 24 hour shifts. Require the same minimum number of contact hours.	None needed		
			Curriculum – revisions being made at the state academic senate to align the paramedic program with the course identification numbering system. Initial submissions were submitted and reviewed with revisions being submitted today for the statewide vetting process. Once completed, the local curriculum will be updated to mirror the terminology used and allow for the C-ID numbering system to be attached to the program here at Ventura College. This will prepare for splitting each semester's course load in half to create a part-time program option. Some clinical space has been retained for the paramedic students at SJRMC/PVH and VCMC/SPH for the summer months through regional planning meeting requests. We hope to gain additional placements as construction projects are completed and clinical spaces open. With the availability currently presented, we can handle a maximum of 12 students. (CMH – not willing to accept new clinical placements, Los Robles – concerns being discussed, and Simi – waiting on construction completion)	Looking to initial 18 month program-2 groups in class.		2017 or 2018 start date
5.	Substantive Change (possible changes)Program StatusSponsorshipSponsor Administrator PersonnelProgram PersonnelAddition of Distance EducationAddition of Satellite Program		 Program Status – accreditation self-study report submitted Oct 2014. Awaiting site visit. Will need to schedule appointments during that a short window to accommodate the site visitors. Clinical books have been delivered yearly to each site and must be available when the site visitors arrive. Please let me know if they are not available and we can replace them Program Personnel – We have a new medical director beginning with the next academic year. Todd Larsen has agreed to take this position and we look forward to working with him. A transition will occur during the spring semester. No changes in the other categories. 	None needed – information only Designated support staff needed for program.	Tom	2015

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6.	Other Identified Strengths Are we meeting expectations?		 Program statistics – 70% of grads have worked in Ventura County with 30% of current county paramedics are program graduates. NREMT pass rate 100% for the last 4 years on the first attempt and 100 for the last 10 years with a second attempt needed six times. Summer work experience – Summer 2014 had six students participate in the work experience program. One as a remediation to his internship. One was terminated from the program for academic reasons. The remaining 5 will be entering clinicals soon. Validated Testing – ParScore Scantron tools have improved our test item review process. We recently hosted a test item development workshop here at the college bringing in FISDAP and Dave Page to present. Combining Oxnard College and Ventura College EMT/PM programs has increased the footprint we have with FISDAP test item submissions (earn points to decrease cost to students for access to nationally validated exams). Simulation – added a Laerdal ALS simulator and SimPad controller to the resources. Instructors have been getting up to speed on its use in the classroom. Recently held a six hour scenario day with the students using the manikins. Good feedback from the experience. Utilized field scenarios written into FISDAP during the prior cohort's filed experience. 	None needed – information only		
7.	Other Identified Weaknesses		Refer to program resource survey comments. Nothing added during the evaluation review.	None needed		
8.	Action Plan for Improvement		2013 survey – clinical site visibility/involvement less than prior program leadership: Instructors were at clinical sites 1-2 times per week during spring 2014 meeting with the students and staff Adding additional staff to cover students during the 2015 clinical season (three instructors) will allow for continued clinical presence and for field internship evaluations Student Equality of preceptor/ field experience – survey results 2014 – preceptor training and communication have been improved in 2014 with instructors reaching out to the preceptors to get feedback and open lines of communication. One student felt that the opportunities between preceptors and stations were vastly different after being moved several times. A station survey was given to each student after the first shift to see if the location met the accommodation requirements. Continued work with the preceptors planned for the coming year to review changes in the education/training process in a one-on-one basis. Preceptor folders were given out last year at the agency orientation with guides to correcting common errors	Update EMS changes Simulation-lab space expansion overlapping nursing, forensics. More hands-on opportunities.		

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9.	Other Business		We will be having 18 students entering the clinical/internship portion of the program and will need to know how many each agency can take for internship as well as the names of the preceptors. We will be holding a preceptor course February 5 th and 6 th here at the college. Single day course held twice. RSVP required. Specific times will be sent in January. Any changes in major equipment coming soon? LP15 or Zoll X- Series? LP15 are on the horizon for AMR/GCA (90% of internship clinical capacity) Tom explained how class is using both classroom simulation and site set-up with Criminal Justice. Use of a trailer as home simulation, James Rosolek explained ambulance simulation \$57,000 for ambulance with duel cameras, pre-plumbed walls on Left side of model, equipped with 110 power. Module for water science will include space for "real" ambulance in parking lot. EMT & PM will share as they are currently doing. 279 enrolled 76% retention rate	Follow-up to verify the number of students each agency can take can take AMR - 14 flexible Gold Coast – as part of AMR number LifeLine - 1 VCity Fire – 1 VCounty Fire – 4 Include LP15 in 2015-2016 budget requests (Perkins)	Tom	Jan 2015 April/May 2015 budget review
10.	Future Meetings		Next meeting date first week of August 2015			