



Advisory Committee Meeting Minutes

See last page for the purpose of the program's Advisory Committee, including a description and list of responsibilities.

SPONSOR / INSTITUTION NAME:	Ventura College So	chool of Prehospital and Emergency Medicine	
CoAEMSP PROGRAM NUMBER:	600186	DATE, TIME, + LOCATION OF MEETING:	10DEC2020, 1500-1730, Zoom Session (COVID)
CHAIR OF THE ADVISORY COMMITTEE:1	Kathy McShea		

	ATTENDANCE		
Community of Interest	Name(s) – List all members. Multiple members may be listed in the same category.	Present – Place an 'x' for each person present	Agency/Organization
Physician(s) (may be fulfilled by Medical Director)	Todd Larsen	\boxtimes	Ventura College Medical Director; SJRMC/PVH
	Daniel Shepherd		VCMESA Medical Director
	Ira Tilles		Adventist Hospital Simi Valley
Employer(s) of Graduates Representative	Mike Sanders		AMR Ventura/ Gold Coast Ambulance
	Daniel Gougen	\boxtimes	AMR Ventura/ Gold Coast Ambulance
	Jeremey Schumaker	\boxtimes	AMR Ventura/ Gold Coast Ambulance
	Weston J. Williams	\boxtimes	LifeLine Medical Transport
	Jeff Winter		LifeLine Medical Transport
Key Governmental Official(s)	Steve Carroll		VCEMSA - EMS Administrator
	Chris Rosa		VCEMSA - Deputy Administrator
	Andrew Casey		EMS – Coordinator
Police and Fire Services	Heather Ellis		Ventura City Fire Department
	Joseph Williams	\boxtimes	Ventura County Fire Department
	Jaime Villa	\boxtimes	Oxnard Fire EMS Coordinator
	Joe Williams VCFD EMS Division;		Ventura County Fire Department, EMS division
Public Member(s)	Irene Ornelas	\boxtimes	South Central Coast Regional Consortium HWI
	Barbara Cogert		Community member
Hospital / Clinical Representative(s)	Kathy McShea		Saint John's Regional Medical Center

 $^{^{1}}$ The best practice is that the chair is not the Program Director. The Advisory Committee is *advising* the program.

2019.03

Community of Interest	Name(s) – List all members. Multiple members may be listed in the same category. Karen Magnani Tom Gallegos Meghan Shaner Kristen Shorts	Present – Place an 'x' for each person present	Agency/Organization Saint John's Regional Medical Center Ventura County Medical Center Los Robles Medical Center Adventist Hospital Simi Valley
Other	Gerry Pantoja John Everlove Matthew Jewett Dana Sullivan Matthew McElhenie Preston Pipal Collin Stocke		Ventura College Foundation Moorpark College EMT Coordinator Oxnard College Assistant Dean Oxnard College EMT Program Oxnard College EMT Program Ventura College Biology Faculty Ventura College Biology Faculty
Faculty ²	Mark Rock John Terrusa Justin Johnson Andrew Dowd		Ventura College, EMS Faculty Ventura College, EMS Faculty Ventura College, EMS Faculty Ventura College, EMS Faculty
Sponsor Administration ²	Jennifer Kalfsbeek-Goetz Debbie Newcomb		Ventura College, Vice-President of Academic Affairs Ventura College Dean, Career Education
Student (current)	Charles Arevalo Melissa Corney Nancy Fontanel Michael Maldonado	X	Ventura College Paramedic Student, Class 23
Graduate	Sophie Elliott Steven Keller		Ventura College Paramedic Program Graduate, Class 20 Ventura College Paramedic Program Graduate, Class 21
Program Director, ex officio, non-voting member	Tom O'Connor		Ventura College School of Prehospital and Emergency Medicine, Program Director
Medical Director, ex officio, non-voting member	Todd Larsen		Ventura College Medical Director; SJRMC/PVH

² Additional faculty and administration are ex-officio members.

³ Add rows for multiple members of the same community of interest

If the program has additional named communities of interest, list the community of interest and the name(s) that represent each.

	Agenda Item	Discussion	Action Required	Lead	Goal Date
1.	Call to order	Kathy McShea called the meeting to order at 1506.	No		
2.	Roll call	Members are present via Zoom session due to COVID in-person meeting restrictions.	No		
3.	Review and approval of meeting minutes	Members reviewed the prior minutes pg 2-19. The minutes of the 13DEC2019 meeting were approved as written. Motion to approve by Joey Williams. Second by Andrew Dowd.	No		
4.	VCCCD EMS Program Reports	 Coordinator/EMT Director, John Everlove, shared that the educational program has been hit hard by COVID, especially programs trying to complete clinical hours in patient contact and caregiver roles. Considering this challenge, he has continued the EMT Program. 22 students completed the Spring 2020 semester, despite gaps and time off, and all successfully passed the NREMT in their first attempt and have all obtained employment. Moorpark College continued the hybrid mode (online lecture/inperson lab) in the Fall 2020 semester and will continue this model in Spring 2021. Students have been given job opportunities with the Health Department as screeners. John indicated that he is not seeing any decrease in the number of students. In fact, there is an increase of people eager to enter the EMS field. He is advocating to get students back into the clinical environments. Despite the uptrend in COVID cases, the Nursing and Rad Tech Programs have access to clinical facilities, and he's hopeful for the same for the EMT Program. He thanked Tom for his collaborative efforts, and thanked hospital and ambulance providers for opening doors to place students. 	No		

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	 Oxnard College EMT The Oxnard College EMT Director is on leave. Dr. Matt McElhenie is currently serving as the Interim Director. He teaches the Oxnard College EMT Program and is an adjunct faculty for the Ventura College Paramedic Program. He is also President of the California EMS Educators Association. Matt shared there are four cohorts moving forward during the Fall 2020 semester. There has been some attrition as a result of COVID, and he is trying to manage the difficulty of the lack of placing students in the field, and therefore is doing classroom simulation. Oxnard College applied to be part of the EMS Virtual Reality Pilot Program being led by American River College. Oxnard College is moving forward using ReeIDX (a patient video system) and other programs to augment lack of field experience, and to help students move forward and complete the course. During the Spring 2021 semester, Oxnard College will continue to use high-fidelity simulation instruction, however, for Fall 2021 semester they are targeted to get back into the field. 	No		
	 PD reported that when COVID hit, Ventura College lacked PPE, therefore, all students were granted an excused withdrawal in the Spring 2020 semester and 0 students completed. The Fall 2020 hybrid course resulted in better retention rates than in the past, however, many of these students were returning from spring semester to complete their EMT training. During the Spring 2021 semester, Ventura College will continue the hybrid mode of instruction and on-campus simulation, but PD is hopeful to return to the field in Fall 2021. Other Feedback about EMT Programs Dr. Todd Larsen informed John, Matt, and Tom, that he may be able to assist, from a Chief Medical Officer side, to push for 	No		

	Agenda Item	Discussion	Action Required	Lead	Goal Date
		hospitals to allow students back into the clinical environments. This is important for the community, and he would like to assist in making this happen. Jeremey Schumaker, Regional Director for AMR indicates there is a conversation happening from national perspective to get EMT students employed. Though there is a priority for paramedics, if employers do not help EMT students, there could be a shortage in the long-term. Ventura College Bio Dept	Only if EMTs are not permitted in clinical sites	Dr. Larsen/ Tom O'Connor	Sept 2021
		 Preston Pipal, VC Biology Department, shared that an 8-week summer section of Anatomy/Physiology will resume at Ventura College as an entirely online course beginning Summer 2021, comprised of one lecture and two labs. The ANPH curriculum was revamped and will be taught in an online asynchronous format to fit student's work schedules. The online labs will include imaging with videos that provide 3D dimensionality; student labs with pre-recorded physiology data; online electromyographs, respiratory, pulmonary function tests with analysis of data; and aerobic exercise lab to be completed at home. Though in-person labs are preferable, the Biology Department is prepared to offer this course in the online format. The course will be part of the zero-textbook-cost program, and all materials will be provided; Students will only pay tuition. Preston introduced Collin Stocke, faculty of record. Collin was a former EMT and has three years of medical school experience. The goal is to provide students a good foundation, including pathophysiology so that they hit the ground running in paramedic school. 	No		
5.	Endorse the Program's minimum expectation [CAAHEP Standard II.C. Minimum Expectation] "To prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains with or without exit points	Program Outcomes and Objectives pg 20-21 Clinical Department Objectives pg 22-29 The required goal language was reviewed and was approved for continued use. No additional goals were identified.	No		

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	at the Advanced Emergency Medical Technician and/or Emergency Medical Technician, and/or Emergency Medical Responder levels." ✓ Establish / review additional program goals⁴✓	The minimum expectation is located in the Student Handbook Trauma rounds were modified slightly due to current state of COVID. An additional ER shift was added so that all students could pick a shift at VCMC. To decrease head counts in the trauma department, the program established an ER shift/trauma round.			
6.	Endorse the Program's required minimum numbers of patient/skill contacts for each of the required patients and conditions [CAAHEP Standard III.C.2. Curriculum] □ NEW Appendix G: Student Minimum Competency Matrix (effective July 1, 2019) □ Review summary graduate tracking reports ✓	 Student Minimum Competency Matrix pg 30-37 Summary graduate tracking reports pg 38-43 The minimum numbers of patient/skills contacts were reviewed and were to remain the same. Use of the COVID data from 2021 will be used to determine minimum goal for non-pandemic times. In 2018, the committee agreed to use to use minimum requirements. Any course that started July 1st, 2019 were required to meet these minimum requirements. The 2018-year class data in FISDAP did not align with report, and this has been corrected. 2019 was the first year where data aligns. Table 1 has the CoAEMSP numbers and the program matched those numbers. Currently, there are 23 students represented, and two are almost done, so the numbers will be adjusted a bit more. Every student met the minimum requirements. Due to COVID, it is anticipated that data from this year's cohort will be the minimum set of requirements the program experiences. There is more time built into the procedures to simply enter and leave a room due to the donning and doffing process. Most students currently are struggling with FISDAP. Having everything on Canvas, listing the goals for the day has helped 	No		

⁴ Additional program goals are not required by the CAAHEP *Standards*. If additional program goals are established, then the program must measure them.

	Agenda Item	Discussion	Action Required	Lead	Goal Date
		students. PD and faculty work with skills instructors to ensure they stay aligned with the goals of the day.			
7.	Review the program's annual report and outcomes CAAHEP Standard IV.B. Outcomes] Annual Report data Thresholds/Outcome data results Graduate Survey results Employer Survey results Resources Assessment Matrix results Other	Annual report pg 44-53 Grad survey results pg 54-55 Employer survey results pg 55-56 RAM summary pg 57-60 RAM student Program survey pg 61-66 RAM preceptor eval of student pg 67-74 RAM student eval of preceptor pg 75-78 2018 Annual report Data Each spring, we report out and place a data matrix. NREMT: 14 attempted (plus one from prior cohort) 12 (plus one from prior cohort) successful first attempt 1 student was successful on second attempt 1 student was successful on fourth attempt First attempt success for this cohort 86% (with prior student 87%) Success within three attempts 93% (with prior student 93%) Success within six attempts 100% Retention rate: 78.9% Positive Placement: 100% National Registry in Spring 2020 Having the National Registry toward the end of the program, after internships, helped students receive the benefit of internship to help pass the skills portion, but due to COVID, VC could not offer the skills exam. Students drove to Orange County to complete the registry exam. The exam was \$75-\$80 more expensive plus mileage to Orange County. Last year's class passed on the first attempt. Tom provided everyone a refresher before skills exam. Within two-three weeks upon completing exit exam, students were receiving their paramedic license. Grad Surveys	No		

	Agenda Item	Discussion	Action Required	Lead	Goal Date
		 Graduates indicate many students were disappointed with the full-time faculty member who left in the middle of the program. There was room for improvement with the skills labs. Preceptor Comments Preceptors noted some students lacked IV skills. PD believes it's a transition issue, where students struggled translating the skills learned in the classroom to real life. Preceptors noted students need more 911 experience. PD indicates a program pre-requisite is for applicants to have 1000 hours of 911 experience, but this is not realistic. Many EMT's do not do assessments and have a tandem role where they facilitate the paramedic and often assume a scribe role. PD notices that EMT's who were longer in the system, have built some bad habits. There is more success in students who enter paramedic school quickly after becoming an EMT and academically perform better. PD indicates that after COVID hit, it took about 4-5 weeks to phase into internship, and the skills momentum students had achieved was diminished. 			
8.	Review the program's other assessment results [CAAHEP Standard III.D. Resource Assessment] □ Long-range planning ✓ □ Student evaluations of instruction and program ✓ □ Faculty evaluations of program ✓ □ Course/Program final evaluations ✓ □ Other evaluation methods ✓	 Success in long range planning The program acquired LifePak 15 and Zoll monitors through the program review process this year. Delivery was made last week for the final monitor. These are the mirror image of what is in the field. Currently exploring an Immersive Interactive Simulator with Irene Ornelas from the Healthcare Workforce Initiative to transform the learning space into any location. Short throw projectors that are touch-enabled allow for students to interact with images to highlight hazards or activate images to open a refrigerator, turn off TV, turn on light, etc. It becomes a way to elevate some of the simulations to provide students with other situations and environments. Attempting to work out funding as a collaborative effort with Forensics and looking at additional ways the immersive room could be used with other programs on campus. 	Interactive Simulator	Tom	2021 Fall

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		 Student Evaluations of instructors The Spring 2020 student evaluations of faculty were not completed. Unable to collect data due to COVID. The Fall 2020 student evaluations were completed, and results will be provided to the Department upon completion of the semester. Budget for Supplies Budget increase in supplies for COVID were made to create a package for students to take home for skills practice via Zoom if we went back to lockdown. Quarantined students have been able to continue with skills via Zoom with this skills-kit. Skills instructors and hours were increased to maintain low head counts as the program spread out to multiple spaces on campus. CARES funding was planned for these additional costs. The state requirement is 10-1 in EMT and 6-1 in paramedic studies. Supply costs increased this year due to COVID demands on the system. Some items (like gloves) are being sold to direct patient contact sites only. N-95 masks were obtained through the EMS System Disaster Cache for the paramedics to work with the field providers. Additional masks will be needed for this coming internship. We were able to acquire a supply of surgical masks for the paramedic students which the program is required to provide for each student by most clinical sites. Department is working with CARES on campus to augment programs and get additional masks, extra cleaning equipment to disinfect simulation skills labs. 			
9.	Review program changes (possible changes) □ Course changes (schedule, organization, staffing, other) □ Preceptor changes (Clinical and field affiliation changes (Curriculum changes (Content (Sequencing))	Paramedic students request additional skills lab time. Current hours are approximately 480 hours of didactic and skills instruction. For 2020, the skill lab components held just over 100 hours of time with focused skill development. There are additional hours of demonstration and simulation that were available on a limited basis due to COVID restrictions designed to minimize time on campus.	Add 2 nd Cohort	College/ Tom	2021 Fall

	Agenda Item	Discussion	Action Required	Lead	Goal Date
		 Preceptors PD will need list of available preceptors early. Anyone interested in precepting will need to complete the FISDAP online training course which the program can provide. Contact PD for details. List of preceptors requested by 1/6/21 to allow time for processing, verification, and assignment to intern. Anticipated start date for internship is the last week of February/ first week of March Clinical and field changes The program added AMR Santa Barbara as a field site. Santa Paula High Hospital added OR privileges for students. Curriculum The National Paramedic Education Standards are in their final public comment phase with release of the revised standards anticipated in early 2021. Course curriculum will be adjusted to meet the revised standards. The big take-away was a move to competency-based completion and not an hours-based system, although guidelines were given for each of the levels. 			
10.	Review substantive changes (possible changes) [CAAHEP Standard V.E. Substantive Change] □ Program status ✓ □ Sponsorship ✓ □ Sponsor administrative personnel ✓ □ Program personnel: PD, Lead Instructor, other ✓ □ Addition of distance education component ✓ □ Addition of satellite program ✓	 Personnel Changes No changes to college administration The full-time faculty that was hired last fall resigned. A temporary full-time faculty was hired in the Spring 2020 term and Fall 2020 utilized adjunct faculty to fill the gap. Currently, no additional full-time hiring is anticipated to replace the position due to COVID and potential funding issues across the community college system in the coming year(s). Addition of cohort/ modification of FT format to PT The full-time course offering has been in existence for 22 years. Employers have requested a part-time course to allow for employees to remain active in their field. Additional cohort requests have been made at each advisory committee meeting and in separate requests to Ventura College administration over 	FT Faculty hire – Out of cycle request	Tom	2021 Fall

Agenda Item	Discussion	Action Required	Lead	Goal Date
	the years. The topic of needing an additional paramedic cohort has come up in Strong Workforce and work-based learning meetings. The push has been to keep a condensed program and explore ways to accelerate the process to meet the requests of the fire departments. Educationally speaking, we don't have enough time to get everything on a solid foundation for all students (approx. 20% attrition rate) to be successful. Accelerating the program to meet a 6-7-month window may increase the attrition rate. Slowing down to allow time to process the material with a part-time program (15-16 months) may fit well. Jeremey has been involved in Strong Workforce meetings, the Regional Consortium, and other committees to advocate for program growth. Ventura College and Cuesta College do not meet the local needs. Demand is so great, that AMR is starting an in-house class in Santa Barbara, yet the cost is greater than offering the program through Ventura College. He guarantees that second cohort will fill, and he cannot emphasis enough how important this is. The lack of a part-time program drives people to programs out of the county. Overwhelmingly, the place where students do internships is where they end of up working, so it's important to keep students local. A part-time model helps students retain employment while they attend school. Dean, Debbie Newcomb, indicates there are currently budget unknowns at the state and local levels. The college hears the need loud and clear from employers and clinical partners. Should a second cohort materialize, another area of concern will be to secure adjunct faculty to fill the positions. She encourages interested applicants to submit applications to the college, because adding another section includes hiring faculty for this growth. Vice President, Dr. Jennifer Kalfsbeek-Goetz, indicates that the college's goal is to graduate students into the workforce, however, the college district is expecting a 10% cut district-wide, and one of those cuts are in faculty by reducing the number of ele			

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		 Dr. Larsen encourages the college to consider this strongly, from the standpoint of both private industry and fire department, as it will be a huge benefit to our local community. All paramedics obtain a job afterwards, have a livable wage, and it will double the number of EMS employees. Gerry Pantoja, Director of Major and Planned Giving at the Ventura College Foundation, indicated that the Foundation is available to discuss funding for a second cohort through outside sources. Overlap clinical with didactic portion Other potential changes would be to overlap clinical experiences with classroom learning. This creates additional issues with college calendars and course curriculum (PMV02 components being built into PMV01, possibly not having enough access to complete the goals in a short period of time.) One additional downside to spreading out the clinical experiences would be loss of momentum in skills practice. Kathy's initial thought is to leave it as is. Dr. Larsen agrees to leave it for now. 			
11.	Other identified strengths	 Completion and Success Rates The paramedic program has a 70-80% completion rate. National Registry 86% passing rate on first attempt, indicate we are meeting National goals. Significant Improvement in Preceptor/Student Feedback Kathy McShea thanked and commended Dr. Larsen, the PD, and John Terrusa for striving to improve the preceptorship experience. There are fewer negative comments from students about their preceptors, which demonstrate they are making great strides to make improvements in training and student-preceptor matching. They deserve a lot of credit for what they've accomplished. 	No		

Agenda Item		Discussion	Action Required	Lead	Goal Date
12.	Other identified weaknesses	 Patient experiences may be impacted by wait times for COVID clearance. Donning/Doffing procedures will slow down the student progression through assessments. IV starts may be impacted. ET placement in the ED may decrease. Time will tell. Attrition Equity-based approach to improving attrition Student Selection Process Selection process is based on first-come first-served – should we modify the process, increase requirements? For 22 years, admittance into the paramedic program has been based on a first come basis. We don't award points. Some programs have gone to selection criteria. Some preceptors have commented that we need a better a mix of students coming in. The military background students with experience have been given overrides to enter the program. The waiting list is impacted. Currently, there is a full list to fill the 2021-2022 class and the 2022-2023 class. There will be an additional 20-30 students who will be submitting applications. Joey Williams, Operations Supervisor with Lifeline, proposes giving incentives to local residents to be admitted into the paramedic program. He has about 10 employees who have applied, and must wait a year to get in, and sometimes he loses them. Companies rely on the college to support them locally, otherwise, they need to need to hire from outside the area. It would be beneficial to give local students preferential status. Dr. Larsen said that we do not have enough students graduating to meet the local need. Feedback from current students This year's paramedic group has been vocal about needing more skills hours. The program consists of 480 hours of class time, of which 100 are dedicated to skills practice, and the other is lecture/lab components. 20% of time is spent on skills. 	Resume pre- COVID program style	Faculty/ College	2021 Fall

	Agenda Item	Discussion	Action Required	Lead	Goal Date
		 Paramedic student, Melissa Corney, understands there were many challenges this semester, but she would advocate for more general availability, as much skills practice as possible, and more real-life experiences. Paramedic student, Mike Maldonado, indicates that the face-to-face interactions are very helpful. Live zoom sessions for lectures, rather than asynchronous lessons, are preferable. Many students had trouble with the pharmacology essays, and the class would have preferred a more traditional testing approach. Paramedic student, Charles Arevalo, agrees that more live Zoom sessions would have been beneficial for students who have questions, rather than texting, emailing, or waiting for live/inperson classes to ask questions. Paramedic student, Nancy Fontanel, realizes a lot goes on behind the scenes, and COVID took a toll. She chose to attend VC because of its hand-on instruction method, so going online was challenging; the recorded zooms were difficulty as she would have liked to ask more questions; otherwise, she feel confident all around. 			
13.	Identify action plans for improvement	 Preceptorship PD will send an email looking for preceptor availability, to get FISDAP training out them by early January, set up a sit-down to look at goals, address preceptor comments, and give preceptor a background on the student. Faculty, John Terrusa, indicates that setting up preceptor training early, will be a significant improvement. Having preceptors lined up early, will permit preceptor and students to develop a mentorship role. PD and faculty try to match students in different ways, such as by personalities, geographically, and learning styles. One of the challenges for newer preceptor is often they will have notion that this is a new hire, but these are not new hires, they are new students and have zero experience as a paramedic. PD and faculty would like to eliminate misunderstandings about what a is preceptor; it's about teaching and mentorship. The challenge is changing the cultural mind set – and remembering 	Preceptor Training update	John/Tom	Trail 2021 and refine for 2022

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		"this was done for me when I became a paramedic, and now I want to pay it forward for the next generation." The goal is to develop mentorship roles.			
		 Employee Mandates (Skills Instructors) The EMT and paramedic programs rely on skills instructors to assist with skills labs, yet there is an increase in mandates by primary employers, resulting in skills labs being left at the last moment without instructors to meet regulatory policies. Jeremey indicated it might help to know what the skills labs schedules are, but it's difficult because employers need more paramedics. If we could put more paramedics in the field, it would help reduce the mandates. 			
14.	Other comments/recommendations	OVID Exposure During the Fall 2020 semester, about a dozen EMT students were quarantined. Fortunately, there was no transmission from a COVID positive student to another student on campus. EMS Scholarships by the Ventura College Foundation Gerry shared that in this year's paramedic scholarship cycle, 11 paramedic students have been awarded scholarships through the Ventura College Foundation. In addition, three EMT scholarships will be awarded next year.	No		
15.	Staff/professional education	 Virtual Conferences PD is attending CoAEMSP workshop in January 2021. Faculty attended the virtual EMS World virtual conference in September and the NAEMSE Symposium in October. PD attended the IMSH simulation conference prior to COVID and virtually in 2021 JSPAC Faculty have been noting how conferences host virtual sessions and simulation and have been incorporating ideas into instruction. 	No		

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16.	CoAEMSP/CAAHEP updates	 CoAEMSP periodically adds documentation to their website that is often unnoticed for more than a year. The program sets documents prior to the start of a cohort and there may be changes that are implemented within a month that would not be caught until the next program cycle. The monthly newsletters do not typically bring attention to these changes. Recently recommended that the PD and faculty attend CoAEMSP workshops. Most have been in states that are travel banned by CA AB1887. 	Attend CoAEMSP Workshop	Tom	Spring 2021
17.	Next accreditation process (i.e., self-study report, site visit, progress report)	Reaccreditation is set for next year 2021. Self-Study report will be due Spring 2021 with a site visit possible for Fall 2021. This was pushed back due to COVID and may experience additional changes to the schedule.	Prepare Self- Study	Tom	2021
18.	Other business	PD will at a later date email surveys to attendees.	Send/collect Program Resource Survey	Tom	Early 2021
19.	Next meeting(s)	Friday, December 10, 2021, 1300.	No		
20.	Adjourn	1719	No		

Minutes prepared by Thomas O'Connor and Sabrina Canola-Sanchez	Date
Minutes approved by	Date
If item #5 above was acted on, then:	
Medical Director's signature	Date

Attach **Appendix G > Table 1** to verify which required minimum numbers were reviewed and endorsed (*if item #4 above was acted on*)

PURPOSE OF THE ADVISORY COMMITTEE

The Advisory Committee must be designated and charged with the responsibility of meeting at least annually to assist program and sponsor personnel in formulating and periodically revising appropriate goals and learning domains, monitoring needs and expectations, and ensuring program responsiveness to change, and to review and endorse the program required minimum numbers of patient contacts. [CAAHEP Standard II.B. Appropriate of Goals and Learning Domains]

Additionally, program-specific statements of goals and learning domains provide the basis for program planning, implementation, and evaluation. Such goals and learning domains must be compatible with the mission of the sponsoring institution(s), the expectations of the communities of interest, and nationally accepted standards of roles and functions. Goals and learning domains are based upon the substantiated needs of health care providers and employers, and the educational needs of the students served by the educational program. [CAAHEP Standard II.A.]

Responsibilities of the Advisory Committee

- Review and endorse the minimum program goal.
- Review and endorse the required minimum numbers of patient/skill contacts for each of the required patients and conditions.
- Verify that the Paramedic program is adhering to the National Emergency Medical Services Education Standards.
- Review Program performance based on outcomes thresholds and other metrics (at a minimum credentialing success, retention, and job placement).
- Provide feedback to the Program on the performance of graduates as competent entry level Paramedics (for employers).
- Provide feedback to the Program regarding clinical and field opportunities and feedback on students in those areas.
- Provide recommendations for curricula enhancements based on local needs and scope of practice.
- Assist with long range planning regarding workforce needs, scheduling options, cohort size, and other future needs.
- Complete an annual resource assessment of the program.