



## Advisory Committee Meeting Minutes

<b>SPONSOR INSTITUTION NAME:</b>	<b>Ventura College</b>		
<b>CoAEMSP PROGRAM NUMBER:</b>	600186	<b>DATE, TIME, + LOCATION OF MEETING:</b>	December 6, 2016; 0900-1100
<b>CHAIR OF THE ADVISORY COMMITTEE:</b>	Tom O'Connor		

### ATTENDANCE

Community of Interest	Name(s) – <i>List all members. Multiple members may be listed in a single category.</i>	Present	Agency/Organization
Physician(s) <i>(may be fulfilled by Medical Director)</i>	Todd Larsen Barry Swerdlow - not present Daniel Shepperd - not present	<input checked="" type="checkbox"/>	Ventura College Medical Director; SJRMC/PVH Los Robles Anesthesiology VCMESA Medical Director
Employer(s) of Graduates Representative	Chad Panke - not present Adriane Stefansen James Rosolek - not present Jeff Winter - not present Morgan Burch	<input checked="" type="checkbox"/>	AMR Ventura/ Gold Coast Ambulance AMR Ventura/ Gold Coast Ambulance LifeLine Medical Transport LifeLine Medical Transport McCormick Ambulance
Key Governmental Official(s)	Chris Rosa - not present Steve Carroll - not present	<input type="checkbox"/>	VCEMSA - Deputy Administrator VCEMSA - EMS Administrator
Police and Fire Services	Heather Ellis VCFD Mark Kommins VCFPD Scott Zeller VCFPD - not present	<input checked="" type="checkbox"/>	Ventura City Fire Department Ventura County Fire Department Ventura County Fire Department
Public Member(s)	Barbara Cogert Su-lin Rubicalva	<input checked="" type="checkbox"/>	
Hospital / Clinical Representative(s)	Kathy McShea Tom Gallegos Debbie Licht - not present Nicole Vorzimer - not present	<input checked="" type="checkbox"/>	Saint John's Regional Medical Center Ventura County Medical Center Los Robles Medical Center Simi Valley Hospital
Other	Jessie Ellis	<input checked="" type="checkbox"/>	Simi Valley High School - EMR Instructor - EMS Pathway
Faculty	Emmanuel Godinez - not present John Terrusa - not present	<input type="checkbox"/>	Ventura College Ventura College
Medical Director	Todd Larsen	<input checked="" type="checkbox"/>	Ventura College; Saint John's Regional Medical Center

Agenda Item	Acted	Discussion	Action Required	Lead	Goal Date
Program Director	Tom O'Connor	<input checked="" type="checkbox"/>	Ventura College		
Sponsor Administration	Kim Hoffmans Kathy Schrader - not present Sandy Melton	<input checked="" type="checkbox"/>	Vice President of Academic Affairs and Student Learning Ventura College Dean of Workforce and Economic Development; Ventura College Director School of Nursing & Allied Health; Ventura College		
Current Student	Tom Ferber Laura Lingeman Ryan Robinett	<input checked="" type="checkbox"/>			
Graduate	SB Tucker - not present Andrew Scott - not present Shaun Hemphill - not present Morgan Burch	<input checked="" type="checkbox"/>			
		<input type="checkbox"/>			
		<input type="checkbox"/>			
		<input type="checkbox"/>			
		<input type="checkbox"/>			

	Agenda Item	Acted	Discussion	Action Required	Lead	Goal Date
1.	Call to Order	<input checked="" type="checkbox"/>	Advisory committee participants were welcomed and the meeting began at 0900.			

	Agenda Item	Acted	Discussion	Action Required	Lead	Goal Date
2.	<p><b>Program Goals &amp; Learning Objectives</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Reviewed the verbatim language required in the CAAHEP Standard II.C. Program Goals – Minimum Expectations<sup>1</sup></li> <li><input type="checkbox"/> Established or reviewed additional goals<sup>2</sup></li> </ul>	<p style="text-align: center;"><input checked="" type="checkbox"/></p> <p style="text-align: center;"><input checked="" type="checkbox"/></p>	<p>Prior meeting's minutes were reviewed and approved on a motion by Dr. Todd Larsen.</p> <p>Program Philosophy (inclusive of the CAAHEP Standard II.C. Program Goals - Minimum Expectations), learning outcomes, and objectives were reviewed. Revisions made last meeting continue to meet the needs at this time.</p> <p>Intubation opportunities decreasing for students within the OR rotations due to LMA placement. Relayed Dr. Barry Swerdlow's comments on the increased use of fiberoptic devices for intubation which decreased the direct laryngoscopy opportunities. Reticence on the part of some anesthesiologists to allow student performance of a potentially injurious procedure as another item that results in few opportunities. Former paramedic graduate now working in CMH OR as a nurse has provided contact information for the department in hopes of bringing paramedic students to that site.</p>	<p>Follow-up meeting with program medical director Dr. Todd Larsen and the head of anesthesiology Dr. Barry Swedlow will be scheduled for January 2017.</p> <p>Initial meeting with the head of anesthesiology from Community Memorial Hospital to be set for spring 2017. Program medical director and program director to attend.</p> <p>Dr. Larsen to reach out to the anesthesia group at SJRMC/PVH to inquire about additional opportunities for students.</p>	<p>Tom/ Dr. Larsen</p> <p>Tom/ Dr. Larsen</p> <p>Dr. Larsen</p>	<p>January 2017</p> <p>Spring 2017</p> <p>Spring 2017</p>

<sup>1</sup> CAAHEP Standard II.C. Program Goals - Minimum Expectations states:

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The program must have the following goal defining minimum expectations:

Paramedic: "To prepare competent entry-level Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains with or without exit points at the Advanced Emergency Medical Technician and/or Emergency Medical Technician, and/or Emergency Medical Responder levels."

<sup>2</sup> Additional program goals are not required by the CAAHEP *Standards*. If additional program goals are established, then the program must measure them.

	Agenda Item	Acted	Discussion	Action Required	Lead	Goal Date
3.	<p><b>Annual Report and Outcomes</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Graduate Surveys</li> <li><input type="checkbox"/> Employer Surveys</li> <li><input type="checkbox"/> Resources Assessment Matrix</li> <li><input type="checkbox"/> Thresholds</li> </ul>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<p>All surveys were reviewed. Overall impression of the past cohort has shown an improved overall tone over prior years. Student concerns about of the past were replaced with positive remarks on a majority of preceptors and agency accommodations.</p> <p>Current data in the RAM was reviewed (advisory committee data to be added following the meeting).</p> <p>Thresholds for the annual report were reviewed and all were at or above the levels designated by CoAEMSP.</p> <p>Preceptor training implemented in Jan 2016 appeared to be successful and will continue using the online format. Existing preceptors will need refresher training if they have not had an intern since last cohort. Opportunities for refresher training will involve participation in simulation events with students during the clinical practicum.</p>	<p>Verify all preceptor participants by January 15<sup>th</sup> 2017. Agencies to report available preceptros by that date. Email reminder to agencies before the end of the year.</p>	<p>Tom</p>	<p>January 15, 2017</p>

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4.	<p><b>Other Assessment Results</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Student</li> <li><input type="checkbox"/> Faculty</li> <li><input type="checkbox"/> Program</li> <li><input type="checkbox"/> Other</li> </ul>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<p>Student - Average scores increased from 4 to 4.35 when compared to prior year on preceptor surveys of students.</p> <p>Reviewed resource survey with advisory committee for clarification on various items.</p> <p>Faculty and Program survey data would be collected at the end of the meeting to be included in the annual RAM. Prior data reviewed.</p> <p>Other (preceptors) - Average scores by students were around 4.75 for all areas measured.</p>			

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5.	<p><b>Program Changes</b> (<i>possible changes</i>)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Course changes</li> <li><input type="checkbox"/> Preceptor changes</li> <li><input type="checkbox"/> Clinical and field                             <ul style="list-style-type: none"> <li>o Reviewed &amp; endorsed minimum patient encounters</li> </ul> </li> <li><input type="checkbox"/> Curriculum                             <ul style="list-style-type: none"> <li>o Content</li> <li>o Sequencing</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/></li> <li><input checked="" type="checkbox"/></li> <li><input checked="" type="checkbox"/></li> <li><input checked="" type="checkbox"/></li> <li><input checked="" type="checkbox"/></li> <li><input checked="" type="checkbox"/></li> </ul>	<p>Course changes: NREMT requirements for a paramedic portfolio to become eligible to sit for the exam.</p> <p>Preceptor changes - will continue with the online preceptor training. Will need all new preceptors to complete. Existing trained preceptors that have not had an additional intern since last cohort will need to attend a refresher course - a hands on workshop with the current paramedic students during their skills lab simulations in January and February. Clinical and Field - reviewed and endorsed minimum patient encounters: Supplement internships with simulation at the college for each preceptor/intern pair? Low frequency high acuity items can be simulated to allow the preceptors an opportunity to assess the intern. Not designed to replace any clinical contacts. Curriculum: Additional time was secured at the clinical sites during the summer months with the Regional Planning Committee. Public comments were supposed to be open for the paramedics earlier this year,</p>	<p>FISDAP tracking of all skills required implemented in August 2017</p>		



	Agenda Item	Acted	Discussion	Action Required	Lead	Goal Date
			<p>but have been delayed. Substantial changes were proposed in a pre-public comment period over the summer.</p>			
6.	<p><b>Substantive Change</b> <i>(possible changes)</i></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Program Status</li> <li><input type="checkbox"/> Sponsorship</li> <li><input type="checkbox"/> Sponsor Administrator Personnel</li> <li><input type="checkbox"/> Program Personnel</li> <li><input type="checkbox"/> Addition of Distance Education</li> <li><input type="checkbox"/> Addition of Satellite Program</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/></li> <li><input checked="" type="checkbox"/></li> <li><input checked="" type="checkbox"/></li> <li><input checked="" type="checkbox"/></li> <li><input type="checkbox"/></li> <li><input type="checkbox"/></li> </ul>	<p>Program status update - 2016 January received accreditation renewal through 2021 anticipated review date</p> <p>Program personnel - added some new part-time instructors to replace outgoing personnel. It has been difficult to find and hire candidates. Similar issues with skills instructors needed to maintain the CA Title 22 requirement of 6:1 student to teacher ration in the paramedic skills lab.</p>	None needed - information only		

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7.	<b>Other Identified Strengths</b>	<input checked="" type="checkbox"/>	<p>Program has grown from 12 to 18 to 24 to 29 over the last four cohorts to help meet agency demands for paramedics in the region.</p> <p>AMR/ GCA has been hiring 8 paramedics a month and expects the hiring to continue at this pace for a while. McCormick currently has 8 open paramedic and 40 EMT positions. LifeLine reported 40% turnover in staff in the last 6 months. All agencies are looking to hire more paramedics than the program is capable of producing annually. Requested a second cohort to help meet the demand with students completing around December. 100% of graduates have been employed or continued their education from the last 5 cohorts. Fire agencies report that the hiring need on their end is expected to continue for at least the next 5 years which will put the ambulance companies in this hiring mode for a long time.</p>	<p>Regional Planning has granted access to the clinical sites needed for a second cohort to run offset to the current cohort and utilize the summer months for clinical practicum. Work with Ventura College Administration about allowing a second cohort.</p> <p>Curriculum redesign to accommodate a part time program split over two semesters.</p>	<p>Tom</p> <p>Tom</p>	<p>Spring 2017</p> <p>Spring 2017</p>

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8.	Other Identified Weaknesses	<input type="checkbox"/>	<p>Student loss of skills while awaiting paramedic licensure from the state.</p> <p>Discussion of minimizing the lag time between program completion exit process, taking the NREMT exam, and getting an application submitted to and processed by the state. Then apply for employment following receipt of the paramedic card to be put on a hiring list and meet further delays with processing into a company.</p>	<p>Continue inviting agencies to interview current students as they near the end of internship.</p> <p>Complete the exit process for each student within a short timeframe to have them cleared for the NREMT exam.</p> <p>Work with the students to have all items prepared for the state licensure packet.</p> <p>Check <a href="http://www.centralregistry.ca.gov">www.centralregistry.ca.gov</a> for clearance at the state EMS office and issuance of a P-number.</p>	Tom	Spring 2017

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9.	<b>Action Plan for Improvement</b>	☒	<p>Clinical Experience not equal at all sites per student survey data in 2015. 2016 data showed an improved perception by students, however, data suggests that not all sites are equal in the number or types of opportunities available.</p> <p>Last year we spoke of student equality of preceptor/ field experience. We implemented an online 4 hr preceptor training course that all preceptors completed prior to working with an intern. 2016 Data showed improvement in this area from the student comments. Increased access to instructors for the student and preceptor has had an influence on this area.</p>	<p>Using the FISDAP scheduler, students will be allowed to select their clinical sites instead of being assigned to the most geographically convenient location. Review by instructors will help guide students to more balanced opportunities.</p> <p>Continue with plans to utilize hands-on refresher training for existing preceptors and online training for new preceptors.</p>	<p>Tom</p> <p>Tom</p>	<p>DEC 2016</p> <p>Jan/Feb 2017</p>

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10.	Other Business	<input type="checkbox"/>	<p>Agencies were asked about any major equipment changes planned that the program would need to incorporate. Upgrades to the LP15 defibrillators were discussed, but an answer could not be made publically on the decision at this time. Spring 2017 rollout of new equipment is anticipated. When asked if the college could be a part of the purchasing group for these, it was suggested that the agency purchases include one or two training models for the college students to work with it on a daily basis.</p> <p>Recruitment interviews prior to course completion are to be continued this year by AMR/GCA.</p> <p>Is there a need for a post program course to maintain PM skills sets until state licensing is acquired following graduation? Agencies were interested in a way to maintain student skills while they waited for state licensure to begin working. Completion to employment average time is 3.5 months. Discussed ways of decreasing time further, but need a stop gap for skills loss.</p>	<p>Agency follow-up on the request for training devices for local educational institutions to be included in the purchase agreements.</p> <p>Arrange interviews for late field internship with each agency interested in pre-hiring.</p> <p>Use of experimental course could trial the item sooner than the curriculum process allows. Meet with LEMSA to discuss and gain approval.</p>	<p>Tom</p> <p>Tom</p> <p>Tom/ Dr. Larsen</p>	<p>Dec 2016</p> <p>April 2017</p> <p>Spring 2017</p>

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11.	Next Meeting(s)	☒	Scheduled next meeting for Friday August 4 <sup>th</sup> 2017 0900-1100	Save the Date invites to be sent. Agenda and information to be sent with periodic reminders two weeks prior to the meeting date. .	Tom	Dec 2016

Minutes prepared by Tom O'Connor Date 12/18/2016

Minutes approved by \_\_\_\_\_ Date \_\_\_\_\_