



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

SPONSORING INSTITUTION:		Ventura College	
CoAEMSP PROGRAM NUMBER:	600186	DATE, TIME, + LOCATION OF MEETING:	August 17, 2015 1600-1830
ATTENDANCE			
Community of Interest	Name(s) – List all in attendance. It is acceptable to have multiple members in a category.		Agency/Organization
<input type="checkbox"/> Current Student	SB Tucker Ben Sayet Sue Eselin		Ventura College Student 2015-2016 Ventura College Student 2015-2016 Ventura College Student 2015-2016
<input type="checkbox"/> Graduate	Ethan Miller		Ventura College Student 2014-2015
<input type="checkbox"/> Physician(s) <i>(may be fulfilled by Medical Director)</i>	Todd Larsen Betsy Patterson		Saint John's Regional Medical Center & Ventura College Ojai Valley Hospital
<input type="checkbox"/> Employer(s) of Graduates Representative	Adriane Stefansen James Rosolek Jeff Winter Scott Zeller		AMR & Gold Coast Ambulance LifeLine Medical Transport LifeLine Medical Transport Ventura County Fire Protection District
<input type="checkbox"/> Key Governmental Official(s)	<i>unable to attend</i>		Ventura County EMS Agency
<input type="checkbox"/> Police and Fire Services	Scott Zeller		Ventura County Fire Protection District
<input type="checkbox"/> Public Member	Barbara Cogert		Ventura County Resident
<input type="checkbox"/> Hospital / Clinical Representative(s)	Kathy McShea Elaina Hall Tom Gallegos Debbie Licht Amy Querol		Saint John's Regional Medical Center Saint John's Pleasant Valley Hospital Ventura County Medical Center Los Robles Regional Medical Center Community Memorial Hospital
<input type="checkbox"/> Other			
<input type="checkbox"/> Faculty <i>(ex officio)</i>	James Rosolek		Ventura College
<input type="checkbox"/> Medical Director <i>(ex officio)</i>	Todd Larsen		Saint John's Regional Medical Center & Ventura College
<input type="checkbox"/> Program Director <i>(ex officio)</i>	Tom O'Connor		Ventura College
<input type="checkbox"/> Sponsor Administration <i>(ex officio)</i>	Kathleen Schrader Sandra Melton		Ventura College 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
2.	<p>Annual Report and Outcomes</p> <ul style="list-style-type: none"> <input type="checkbox"/> Graduate Surveys <input type="checkbox"/> Employer Surveys <input type="checkbox"/> Resources Assessment Matrix <input type="checkbox"/> Thresholds 	<p><input type="checkbox"/></p>	<p>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 4.3-5.0 in all categories. Resources Assessment Matrix – taken from the 2014 self-study report (data still being collected for 2015 RAM). Reviewed student resource survey data with discussion. Average scores for student resource survey results ranged from 4.25-5.0 with several single ratings of 2 given in several categories. Discussion of the number of students that failed to complete successfully fit the frequency of low scorers. Plans to improve perception of performance in those categories. Action plan/ follow-up detailed in 2015 RAM including restructuring of the faculty coverage during clinical practicum and field internship rotations. Thresholds – See 2014 annual report, pages 5-6. 2015 Annual report to be completed in December. 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.</p> <p>Preceptor Items –</p> <ul style="list-style-type: none"> • Use of two preceptors as the standard was presented – J. Winter suggested working on the preceptor training to improve inter rater reliability before changing the way preceptors are scheduled. A. Stefansen saw the benefits of dual preceptors and continuously seeing progress by a single preceptor for continuity purposes. • 1-3 rating system was discussed to add 4 & 5 – reliability of various raters was the source of the issue and suggested redesigning the preceptor training to improve scoring reliability. • Add "prompting" category to daily logs and build rubric to quantify successful vs. unsuccessful call handling. • FSDAP preceptor course available online. College to purchase accounts for access as a core training course. • Annual preceptor training – • Issues with preceptors not showing up for the meeting; agency representatives not passing along information effectively; follow-up with program staff on an individual basis to complete takes time from students; preceptors still function as they experienced the internship process, not as they are instructed; • J Winter suggested following up with EMS if agencies and preceptors are non-compliant • Start recruiting of preceptors earlier and involve them in the classroom/lab portion of the program on campus. Students could participate in observational shifts during clinical rotations to become familiar with the crews, ambulance, response areas, and scene management techniques. • K Schrader suggested the use of Perkins funding for creation of training materials. Video recording of training for online use by preceptors. 	<p>None</p> <p>None</p> <p>Additional staff to follow-students through clinicals</p> <p>Clinical rotations provide similar competencies for all students – Revise clinical site preceptor training</p> <p>Develop a committee to review the preceptor training and work to revise expectations. Tom O'Connor and Dr. Larsen to work with agency representatives and anyone else interested in participating. Follow-up email to be sent in September requesting participants.</p>	<p>Tom</p> <p>Tom</p> <p>Tom</p>	<p>Spring 2016</p> <p>Spring 2016 implementation</p> <p>SEPT 2015 – determine group & set meeting</p> <p>OCT 2015 – Revise entry level to reflect community needs</p> <p>NOV 2015 – revisions to training course rubrics</p> <p>DEC 2015- revise preceptor course content</p> <p>JAN 2016 – Offer training session with new revisions</p> <p>FEB 2016 – follow-up on training</p> <p>MAY 2016 – follow-up on field application</p>

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3.	Other Assessment Results <input type="checkbox"/> Student <input type="checkbox"/> Faculty <input type="checkbox"/> Program <input type="checkbox"/> Other	<input type="checkbox"/>	<p>Student – Average scores around 4 for all categories. Several marks below a 3 for students not successful in completing the internship.</p> <p>Faculty & Program – 2015 Program Resource Surveys to be completed at this meeting. 2014 data reviewed at the prior advisory meeting in December 2014.</p> <p>Other (preceptors) – Average scores were great for the preceptors and sites (4.25-4.9 out of 5). There were multiple low scores recorded in several areas with comments provided.</p>	<p>None needed – for review only</p> <p>None needed – for review only</p> <p>None needed – for review only</p>		
4.	Program Changes (possible changes) <input type="checkbox"/> Course changes <input type="checkbox"/> Preceptor changes <input type="checkbox"/> Clinical and field <input type="checkbox"/> Curriculum <ul style="list-style-type: none"> o Content o Sequencing o Required minimums reviewed & approved o Competencies 	<input type="checkbox"/>	<p>Course changes – Curriculum changes below cover these items.</p> <p>Preceptor changes – Preceptor core course and refresher training at Ventura College in January 2016. Current preceptors must attend a refresher training to get all preceptors on the same page. During the last cohort, refresher was completed by one-on-one communication reviewing changes since the last cohort going to the field. Continued to correspond via email or phone after each segment to remind them of the support system we have in place for educating the interns and to spot check for issues. Survey data from Preceptors: all preceptors responded. Several scores were below a rating of 3 and reflected the students that were not successful in completing the internship given the time allotted. See additional comments above in section 2 for Preceptor Items. Ventura College Nursing program shared their clinical preceptor manual as a reference.</p> <p>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. Returning students data carry-over from prior attempt. Students will repeat all minimum contacts in order to move forward.</p> <p>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. STATUS UPDATE – still pending completion at the state level. Will move forward with revision of curriculum at the college and move PM to EMS discipline and combine with EMT and EMR. Course naming revision will prepare for splitting each semester's course load in half to create a part-time program option. Clinical space has been retained for the paramedic students at SJRMC/PVH and VCMC/SPH for the summer months through regional planning meeting requests. Dr. Larsen to communicate with SJRMC/PVH anesthesiologist groups to inquire about additional intubation opportunities.</p>	<p>Continue annual preceptor course offering at Ventura College in months prior to internship.</p> <p>Annual refresher for any preceptor accepting a student that year if they had not trained an intern within the last year.</p> <p>Included updated items per Preceptor Training committee recommendations established during fall 2015</p> <p>None needed</p> <p>Continue working to initiate a part-time program following curriculum revision</p> <p>Revisit the summer month availability of the clinical sites and early fall options for field internships</p>	<p>Tom</p> <p>Tom/ Dr. Larsen Preceptor Training Development Committee</p> <p>Tom</p> <p>Tom</p>	<p>January 2016 2 months prior to internship</p> <p>Fall 2015</p> <p>2017 or 2018 start date</p> <p>Prior to fall 2015 regional planning meeting</p>

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5.	<p>Substantive Change <i>(possible changes)</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Program Status <input type="checkbox"/> Sponsorship <input type="checkbox"/> Sponsor Administrator Personnel <input type="checkbox"/> Program Personnel <input type="checkbox"/> Addition of Distance Education <input type="checkbox"/> Addition of Satellite Program 	<input type="checkbox"/>	<p>Program Status – accreditation self-study report submitted Oct 2014 response received in January. Site visit conducted in May 2015. Two items were missing or not up to standards – 2013 RAM unavailable data & newborn contact minimum was 1 and needed to be at least 2 contacts.</p> <ul style="list-style-type: none"> • Survey data collected at this meeting to be used to complete 2015 RAM. • Approved changes in minimum newborn contacts from 1 to 2 as a minimum <p>Program Personnel – Todd Larsen, MD assumes role as the new medical director effective today with the first day of classes. Three new part–time instructors are being added later this semester to instruct during the didactic and clinical portions of the program. Estimated star date October.</p> <p>No changes in the other categories.</p>	<p>Adjust FISDAP minimums for newborn Complete RAM and electronically save data from surveys.</p> <p>None needed - information only</p>	<p>Tom</p> <p>Tom</p>	<p>Sept 2015</p> <p>Sept 2015</p>
6.	<p>Other Identified Strengths</p> <p>Are we meeting expectations?</p>	<input type="checkbox"/>	<p>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 10 years prior to this cohort. Current graduates are 14/15 successful within two attempts. One student still pending second attempt as of this meeting.</p> <p>Summer work experience – Summer 2015 had nine (9) students participate in the work experience program. Positive feedback from the participants on the professionalism seen throughout the county. Students were placed with multiple observers at multiple locations throughout the county to gain perspective on the variety of the county’s populations, prehospital providers, and hospitals.</p> <p>Validated Testing – ParScore Scantron tools will be utilized to combine several cohorts’ data to improve the validity rating of the exams. The test item review process is entering its second year using this process. Exam reliability scores and point bi-serial numbers for each question are being calculated. Items meeting criteria are reviewed for editing and then processed back for a future cohort. One additional data set from the next cohort will be needed to fully determine the validity and reliability of the exams in place.</p> <p>Simulation – Attended the NAEMSE Symposium for training in simulation related items including debriefing, standardized patients, moulage, and building a simulation center. College has made a trailer available to the program for the use during the fall semester as a simulated home environment. Grant money used for video recording equipment to document and playback scenarios to students.</p> <p>Site Visit Report listed the following items as program strengths:</p> <ul style="list-style-type: none"> • Excellent classroom and laboratory facilities • College and administrative support • Support from an active local EMS community • Involved medical director 	<p>None needed – information only</p>		
7.	<p>Other Identified Weaknesses</p>	<input type="checkbox"/>	<p>Refer to program resource survey comments. Nothing added during the evaluation review.</p>	<p>None needed</p>		

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8.	Action Plan for Improvement	<input type="checkbox"/>	<p>Clinical Experience not equal at all sites – survey data and comments regarding physician interaction at the clinical sites were scored low and commented upon frequently.</p> <p>Student Equality of preceptor/ field experience – improve preceptor training and clarify milestone requirements with use of a committee comprised of the program director, medical director, and field internship agency representatives.</p>	<p>The clinical site listed was provided with the information submitted to take back to their administration. Follow-up prior to clinical rotations needed.</p> <p>As listed in section 2 above under preceptor items & section 4.</p>	<p>Tom / D Licht</p> <p>Tom/ Dr. Larsen Preceptor Training Development Committee</p>	<p>December 2015</p> <p>Fall 2015</p>
9.	Other Business	<input type="checkbox"/>	<p>Major equipment changes coming soon. LP15 are on the horizon for AMR/GCA and Ventura County Fire.</p>	<p>Include LP15 in 2015-2016 budget requests for 2016-2017 fiscal year(Perkins)</p>	<p>Tom</p>	<p>Program review fall 2015 & April/May 2016 budget review</p>
10.	Future Meetings	<input type="checkbox"/>	<p>Next meeting date first week of August 2016</p>			