



Credible education
through accreditation

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		
CoAEMSP PROGRAM NUMBER:	600186	DATE, TIME, + LOCATION OF MEETING:	10DEC2021, 1300-1600, Ventura College HSC 211
CHAIR OF THE ADVISORY COMMITTEE:¹	Heather Ellis		

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 Daniel Shepherd Ira Tilles Kyle Brooks	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Ventura College Medical Director; SJRMC/PVH VCMESSA Medical Director Adventist Hospital Simi Valley
Employer(s) of Graduates Representative	Mike Sanders Daniel Gougen Jeremey Schumaker Weston J. Williams Jeff Winter James Rosolek Dustin Blom April Lim Chris Schumaker	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	AMR Ventura/ Gold Coast Ambulance AMR Ventura/ Gold Coast Ambulance AMR Ventura/ Gold Coast Ambulance LifeLine Medical Transport LifeLine Medical Transport
Key Governmental Official(s)	Steve Carroll Chris Rosa Adrian Gil-Stefansen Andrew Casey Nick Clay Darryl McClanahan	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	VCEMSA – EMS Administrator VCEMSA – Deputy Administrator VCEMSA - Coordinator VCEMSA – Coordinator SBEMSA – EMS Administrator SBEMSA –

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

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
Police and Fire Services	Heather Ellis Joseph Williams Jaime Villa	<input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Ventura City Fire Department Ventura County Fire Department Oxnard Fire EMS Coordinator
Public Member(s)	Barbara Cogert Irene Ornelas	<input type="checkbox"/>	
Hospital / Clinical Representative(s)	Kyle Blum Tom Gallegos Meghan Shaner Kristen Shorts Kathy Triguero Debbie Wilkes Sharon Waechter Karen Magnani	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Saint John's Regional Medical Center Ventura County Medical Center Los Robles Medical Center Adventist Hospital Simi Valley
Other	Gerry Pantoja John Everlove Karen Beatty Preston Pipal Collin Stocke Matt Jewett	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Ventura College Foundation Moorpark College EMT Coordinator Oxnard College EMT Faculty Ventura College Biology Faculty
Faculty ²	John Terrusa Jeremiah Glass Matt McElhenie Andrew Dowd Joy Reed Stephen McNaughten	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Ventura College, EMS Faculty Ventura College, EMS Faculty
Sponsor Administration ²	Kim Hoffmans Jennifer Kalfsbeek Goetz Debbie Newcomb Bea Herrera Angelica Gonzales	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Ventura College Dean, Career Education I
Student (current)	Jenna Blaker John Fitzgerald Samantha Wigg	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Ventura College Paramedic Student, Class 23 Ventura College Paramedic Student, Class 24 Ventura College Paramedic Student Class 24

² Additional faculty and administration are ex-officio members.

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
Graduate	Melissa Corney Sophie Elliott Steven Keller	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Program Director, <i>ex officio</i> , non-voting member	Thomas O’Connor	<input checked="" type="checkbox"/>	Ventura College School of Prehospital and Emergency Medicine, Program Director
Medical Director, <i>ex officio</i> , non-voting member	Todd Larsen	<input checked="" type="checkbox"/>	Ventura College Medical Director; SJRMC/PVH

Agenda Item		Discussion	Action Required	Lead	Goal Date
1.	Call to order	Meeting commenced at 1308	No		
2.	Roll call	Introductions of all in-person and virtual attendees.	No		
3.	Review and approval of meeting minutes	Members reviewed the prior Minutes. The Minutes of the 10DEC2020 were approved as written. Motion to approve by Heather Ellis. Seconded by Paramedic faculty, John Terrusa and Jeremiah Glass.	No		
4.	<p>VCCCD EMS Program Reports</p> <p><input type="checkbox"/> Moorpark College EMT</p> <p><input type="checkbox"/> Oxnard College EMT</p> <p><input type="checkbox"/> Ventura College EMT & Paramedic</p>	<p>Moorpark College (MC) EMT</p> <ul style="list-style-type: none"> Faculty, Kristen Shorts, indicated that during Fall 2021, MC offered four sections of EMT, with simulation in place of clinicals. MC is looking forward to resuming clinical rotations next semester. Coordinator/EMT Director, John Everlove, reported that MC saw a change in the Spring 2020 semester numbers when the District transitioned quickly to a closed campus and the only way to salvage the EMT Program was to transition to a hybrid mode. MC returned entirely in-person for lecture and skills during the Spring 2021 semester. Successful completions are increasing, and this aligns with the transition to the textbook <i>Prehospital Emergency Care</i> by Mistovich. This textbook, along with supplemental materials, is working well. <p>Oxnard College (OC) EMT</p>	No		

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	<ul style="list-style-type: none"> Faculty, Karen Beatty, indicated that during Fall 2021, OC offered five classes with a total of 80 students. Clinicals resumed during the fall semester following two years without clinicals. OC is appreciative of the clinical facilities for allowing students to return. <p>Ventura College (VC) EMT</p> <ul style="list-style-type: none"> Program Director (PD), Tom O'Connor, indicated that VC reviewed data from a span of about five years to identify patterns. In 2016, the overall success rate of the EMT program was 80%. Students had a 10-11.5th grade reading level. In 2017-2019, the pass rates dropped, although still higher than 70% of the national average. The spring 2020 class was canceled due to Covid and lack of PPE, and this negatively affected the success rate down to a 50% attrition rate. In the Fall 2021 semester, students were given \$1,000 to enroll at VC. The department paid for physical exams, screenings, and background checks, and yet the program still had a 50% pass rate. Being given things freely, did not improve the success rates. The faculty are restructuring some of the instructional components to restore high pass rates, including returning to the previous <i>Emergency Medical Care</i> by Limmer which aligns with the reading level of the students served. A consistent pattern that was identified is that if a student fails their first NREMT attempt, they often do not continue or retest. PD had witnessed students enter the program with military experience but no ambulance experience who did excellent, while others with lots of EMT experience did not perform well. He's also learned age is not a factor. It comes down to personal motivation. <p>Ventura College Paramedic (PM) Studies Program</p> <ul style="list-style-type: none"> In 2017, the PM program admitted a larger cohort at the same time it switched to the AAOS emergency service textbooks. The NREMT is written at a 10th-grade reading level, and the AAOS book is at a 12th-grade reading level. In the previous five years, 			

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	<p>the PM program had about a 91% first-time pass rate using the new textbooks. The PM program will continue with this textbook because the complexity and depth translated into better pass rates.</p> <ul style="list-style-type: none"> • There is an increase in the number of Paramedic students receiving an Associate in Science Degree (A.S.) alongside their Paramedic training. The majority of students complete the paramedic license training while simultaneously earning a state-approved Certificate of Achievement (COA) or A.S. Degree. • The pre-requisites of Anatomy and Physiology help the retention rates. Retention is above 70%, and the program works diligently to reach 100% retention as much as possible. <p>NREMT Skills Testing Transitioning to Local Level</p> <ul style="list-style-type: none"> • EMS Administrator, Steve Carroll, indicated that with the NREMT’s transition of skills testing to the local level, it’s an ideal time and opportunity to align testing with the State Recertification Skills Sheet which is used for renewals. • The EMS Education Committee is scheduled in January 2022 and members would like to clarify points on existing policy related to program expectations and the approval process. The goal is to connect with the EMT and Paramedic Programs, following the disturbances caused by Covid, and to get back on track. <p>Provider Concerns Regarding Student Preparedness:</p> <ul style="list-style-type: none"> • Providers expressed concerns about EMT students being generally less prepared. There is a disconnect whereby students are not meeting the expectations of providers. This may be due to the hybrid courses, student perception, cultural shifts, limitations due to Covid, generational differences, lack of understanding, lack of preparedness, and/or other factors. • Steve indicated that this observation applies to both EMTs and Paramedics, and it may be more foundational for Paramedics. The concern is that some candidates do not have significant EMT experience which translates into knowledge of how to act, 			

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	<p>where to sit, what to do, and other items they would learn as an EMT; They're behind the curve. He recommends there be opportunities to instill these values before students and interns go into the field.</p> <ul style="list-style-type: none"> Faculty member, John, relayed that given the state exemption process, students were not in the field for clinical practicums. Simple tasks and operational objectives are complex challenges for EMT students, especially when certain scenarios could not be duplicated in the classroom environment. The colleges ask that providers embrace adapting to this new learning environment, and invest longer into the orientation for new employees. The lack of a ride-along process due to Covid affected preparedness, but it will hopefully be a temporary condition <p>Recommendations for Clinical Rotation Readiness:</p> <ul style="list-style-type: none"> Steve asked schools to find ways to prioritize vocational education that will prepare the student for the job, not just to pass National Registry. Skills are a component where students have not had the opportunity to be with patients in the field, and their first time is a shock, which often translates into employers viewing recent graduates as unprepared employees. He asks schools to re-focus on being vocational educators that prepare students to go to work, rather than only teaching to the test. Ventura Fire EMS Coordinator, Heather Ellis, noticed that clinicals take place afterward, rather than as a learn-apply-learn-apply approach. It may be beneficial to run clinicals ongoing with didactic, where students learn a skill and then go into the field to use the skill. The PD indicated that during a lack of clinical rotations, the program used ReelDx simulation. Faculty member, Karen, indicated that OC offers a pretty good clinical orientation. They arrange an ambulance visit to show students how the ambulance works. There was a consensus on the need for a career or orientation day, to have AMR/GC/Lifeline come out to talk about requirements, share 			

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	<p>expectations, and orient students about what they will encounter in an ER or ambulance.</p> <ul style="list-style-type: none"> • Karen gave a reminder that there are always a handful of students who do not wish to become a paramedic or firefighter, and who are not military. Some students only want to learn basic first aid. Expectations are high when students go to the station, but stations need to remember that students have never been in an ambulance and need to be taught. <p>Concerns at the Paramedic Level:</p> <ul style="list-style-type: none"> • PD indicates that the National Registry does not teach students who come from IFT. Perhaps the three EMT Programs in the county should revise the curriculum to incorporate the California-heavy IFT. • Oxnard Fire EMS Coordinator, Jaime Villa, inquired about ride-alongs to acclimate Paramedic students. PD indicated that the Summer Work Experience opportunity of 10, 12-hour shifts was shut down for two years during Covid. • John stated that cultural issues are endemic to any issue and that faculty and providers are dealing with cultural competency versus professional competency. To fix cultural competency issues, providers should allow more time to let students get their feet wet. Faculty and providers must be very careful talking about which “seat we sit in” to avoid getting into an area of harassment, which the college takes very seriously how students are treated. Addressing the affective domain is a big deal. It’s important to be careful of blurring the line between cultural competency and professional competency. • Heather acknowledges that some of this fallout is due to volume, overtime, burnout. EMS is busy. When students are missing the professional component, the FTO rep must introduce and set the expectations. • Dr. Todd Larsen agrees there is a true cultural shift, and generations do not grow up with the same expectations, and some know the cultural expectations and others don’t. The responsibility lies on everybody; the school and the employers. 			

Agenda Item		Discussion	Action Required	Lead	Goal Date
5.	<p>Endorse the Program’s minimum expectation [CAAHEP Standard II.C. Minimum Expectation]</p> <ul style="list-style-type: none"> <input type="checkbox"/> “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.” <input type="checkbox"/> Establish / review additional program goals³ 	<p>Program Outcomes and Objectives on pages 19-20, and the Clinical Department Objectives on pages 21-28 were reviewed. Heather inquired if it’s complicated for students to assess at least two neonates. PD says it can range from 2 to 19 and is based on luck. Dr. Larsen suggests leaving the minimum expectations.</p> <p>Heather motioned to approve the goal language for continued use, without establishing additional program goals. Dr. Larsen seconded.</p> <p>Heather suggests programs consider opportunities to talk about death and dying using hospice agencies, establish clinical agreements to visit at home and nursing facilities, and engage students in death and dying conversations with families.</p>	<p>No</p> <p>No</p> <p>Yes</p>	<p>Program faculty</p>	<p>Implement 2022-2023</p>
6.	<p>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]</p> <ul style="list-style-type: none"> <input type="checkbox"/> Student Minimum Competency (formerly known as the Appendix G) <input type="checkbox"/> Review summary graduate tracking reports 	<p>Student Minimum Competency (SMC) Matrix on pages 29-36, and the Grad Report on pages 37-42 were reviewed. John motioned to approve the SMCs without modifications. Fire Dept. Rep seconded.</p> <p>The PM Program scheduled 216 hours in clinical and students averaged 236 hours. Students are evaluated individually on isolated skills with at least one instructor sign-off, followed by exposure to scenarios. Each student completes all SMCs on Tables 1, 2, and 3, at which point they are cleared to take the National Registry Exam. All items must be checked off, except for cardiac arrest.</p> <p>During the previous PM cohort, as a result of Covid restrictions, VCEMSA Medical Director, Dr. Daniel Shephard, gave approval to pass students with simulation intubations. Dr. Larsen oversaw two days of intubations.</p>	<p>No</p>		
7.	<p>Review the program’s annual report and outcomes [CAAHEP Standard IV.B. Outcomes]</p> <ul style="list-style-type: none"> <input type="checkbox"/> Annual Report data 	<p>The committee reviewed the Annual Report on pages 43-56, the Grad surveys on pages 57-58, the Employer survey on pages 43-56, and the Resource Assessment Matrix (RAM) on pages 61 to end.</p>	<p>Yes</p>	<p>Tom</p>	<p>Dec 2021</p>

³ Additional program goals are not required by the CAAHEP Standards. If additional program goals are established, then the program must measure them.

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<ul style="list-style-type: none"> <input type="checkbox"/> Thresholds/Outcome data results <input type="checkbox"/> Graduate Survey results <input type="checkbox"/> Employer Survey results <input type="checkbox"/> Resources Assessment Matrix results <input type="checkbox"/> Other 	<p>All marks on the report were above the threshold. The Paramedic Program continues to work to reach 100%.</p> <p>Annual Report and Survey Findings:</p> <ul style="list-style-type: none"> • Extensive mandates to shifts and deployments of adjunct instructors created a difficult subbing situation with no time to prep. • There is a challenge to secure skills instructors to maintain the EMT 10-1 ratio and Paramedic 6-1 ratio. • The EMT volunteer program was reinstated due to a shortage of skills instructors – train/mentor future skills instructors. • The Program attempted to offer NAEMSE certification on campus but it was withdrawn due to Covid. • The Annual Accreditation Conference in Kentucky is on the banned list for residents of California. The conference was online the previous year, and the PD and faculty were able to participate, but the Conference has since resumed in-person. • Virtual learning posed a challenge to students resulting in decreased confidence levels, reduced interaction with classmates, lack of instant instructor/student feedback, and learning in an unnatural clinical and field environment. • Students requested more in-person hours and elimination of online coursework, however, they acknowledged that faculty were bending over backward during the challenging year • PD will email the Resource Assessment Matrix to the committee 			
<p>8. Review the program’s other assessment results [CAAHEP Standard III.D. Resource Assessment]</p> <ul style="list-style-type: none"> <input type="checkbox"/> Long-range planning <input type="checkbox"/> Student evaluations of instruction and program 	<p>Comments on Preceptorship:</p>			

Agenda Item	Discussion	Action Required	Lead	Goal Date
<ul style="list-style-type: none"> <input type="checkbox"/> Faculty evaluations of program <input type="checkbox"/> Course/Program final evaluations <input type="checkbox"/> Other evaluation methods 	<ul style="list-style-type: none"> • During the previous academic year, 4-5 interns had to switch preceptors. Due to this adjustment and time limitations, two interns did not complete the program. • Dr. Larsen confirmed that one of the biggest challenges is pairing students consistently with preceptors. • The Preceptor survey of students revealed issues due to a lack of 911 experience. • Student surveys of preceptors revealed many complaints of a demoralizing process going on. • John works one-to-one with preceptors to help them rethink the process of what “right” looks like. He teaches the preceptor that they need to look for 1. Safe; 2. Competent; and 3. Consistent. • John urges the preceptor to contact him early if issues arise so that they can work collaboratively, rather than going at it alone. 95% of preceptors are excellent. There are a few outliers who don’t stay, don’t mentor, and don’t teach. Some preceptors mistakenly focus on evaluating vs mentoring. • As an opportunity to close the gap, Steve suggests sending feedback to the employer, other than only being presented at the Advisory. He suggests reading the preceptor survey comments, following up, and reaching out to high-performing preceptors to work on building up the preceptorship program. • Heather suggests regular, monthly meetings with preceptors, even virtually, to maintain a professional component for the preceptor. • Darryl – suggests exploring preceptorship to be a designation by the provider, implementing new protocols and integrating quality metrics associated with teaching. • The time dedicated to teaching preceptors includes the initial FISDAP and PM faculty meetings with each preceptor. Each preceptor is also invited to a two-day Simulation Day to come and work with students. Continued effort is needed to ensure that preceptor and college work collaboratively. • Oxnard Fire EMS Coordinator, Jaime Villa, inquired if the PM Program uses an agency-level rep, similar to UCLA. PD indicates that the PM program does not have an agency-level rep, but rather the faculty connects with each agency. Faculty observes 	<p style="text-align: center;">Yes Ongoing revision to the preceptor training</p>	<p style="text-align: center;">Tom/ John</p>	<p style="text-align: center;">March 2022</p>

Agenda Item		Discussion	Action Required	Lead	Goal Date
		<ul style="list-style-type: none"> John shared that faculty have been looking at a Paramedic pre-course to help fill the gap, similar to UCLA's. This would require re-writing the curriculum. PD recommends VC, OC, and MC revise the curriculum together and align to meet all criteria. If MC can accommodate a Paramedic pre-course, it would be great. 	Yes	Tom/John	2022/2023
10.	<p>Review substantive changes (possible changes) [CAAHEP Standard V.E. Substantive Change]</p> <ul style="list-style-type: none"> Program status Sponsorship Sponsor administrative personnel Program personnel: PD, Lead Instructor, other Addition of distance education component Addition of satellite program 	<p>Program Personnel:</p> <ul style="list-style-type: none"> PD was initially assigned a 1.8 load plus 100 hours, but the actual output was a 2.1 Full-Time Faculty load, which is equivalent to two full-time faculty with overload. Jeremiah Glass was hired as VC Temporary Full-Time Paramedic Instructor which is a one-year contract, ending May 2022. OC also hired a Temporary Full-Time EMT faculty. Per VCCCD HR policy, the two candidates cannot be hired in that capacity for another three years. Three new adjunct instructors were hired, but they are constantly mandated. Funding requests for two full-time faculty were submitted through the college's yearly Program Review Process. The Staffing Priorities committee ranked the positions at #4 and #8. Much of the teaching loads will fall on adjunct faculty, and the challenge will be mandates from primary employers. There is a shortage of educators. Applicant pools are small. There are not a lot of people looking to teach. Continue recruitment and resource requests for FT faculty 	Yes	Tom	2022/2023
11.	Other identified strengths	An identified strength is the availability of EMS learning opportunities in Ventura County.	No		
12.	Other identified weaknesses	An identified weakness is preceptorship. PD will send Program Resource Survey and student survey results about preceptorship to the Advisory members for review.	Yes	Tom	Dec 2021
13.	Identify action plans for improvement	To address concerns about preceptors and the readiness of new paramedic hires, advisory members discussed the potential to offer a quarterly leadership academy. John recommends that new	Yes	Agencies	2022/2023

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		paramedics gain about two years of experience before they become preceptors. The goals of the academy could be for training of preceptors, and global training of all paramedics for leadership and affective training. Dr. Shepherd agreed with the goal for medics to gain broader educational training, especially during their first two years.			
14.	Other comments/recommendations	The program recommends VC allocate funds to hire full-time faculty and full-time clerical support. VCEMSA Deputy Administrator, Chris Rosa, suggested for future consideration, to involve all agencies and schools on how to develop a system-wide CE opportunity.	No Yes	Tom	2022/2023
15.	Staff/professional education	Out of state training is increasingly difficult to attend due to CA AB1887 travel policies. Many of the EMS related courses are in travel banned states. CA and other approved states are not hosting these events.	No		
16.	CoAEMSP/CAAHEP updates		No		
17.	Next accreditation process (i.e., self-study report, site visit, progress report)	PD completed the Accreditation Self-Study Report. The report was approved without any problems. An in-person Accreditation site visit is scheduled for the Fall 2022 semester, date TBA.	No		
18.	Other business	The Paramedic Program received grant funds to purchase a Prism interactive system which includes three projection touch screens. With a GoPro, moving images of real locations and associated sounds can be projected onto the screens to create a simulated, protected environment. This will take classroom simulation to the next level.	No		
19.	Next meeting(s)	Friday December 9 th 1300-1600, Ventura College HSC-211 or Hybrid option.	Yes	Tom/Sabrina	2022

Agenda Item		Discussion	Action Required	Lead	Goal Date
20.	Adjourn	1621	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 Student Minimum Competency (formerly known as the 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.