



## Advisory Committee Meeting Minutes

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

<b>SPONSOR / INSTITUTION NAME:</b>	Ventura College		
<b>CoAEMSP PROGRAM NUMBER:</b>	600186	<b>DATE, TIME, + LOCATION OF MEETING:</b>	December 12, 2023; 1230-1530; VC HSC-211 & Zoom
<b>CHAIR OF THE ADVISORY COMMITTEE:<sup>1</sup></b>	Kyle Blum		

### 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)	Neil Canby		Ventura County Fire Medical Director
	Todd Larsen	X	VC Paramedic Program, Ventura City and Oxnard Fire
	Daniel Shepherd		SB & VC EMSA Medical Director
Employer(s) of Graduates Representative	Ira Tilles	X	AMR Ventura Medical Director
	Mike Sanders		AMR SB, AMR Ventura, & Gold Coast Ambulance
	Jeff Schultz		AMR Ventura
	Jeff Winter		Gold Coast Ambulance
	Dave Schierman		AMR Santa Barbara
	Joey Williams	X	AMR Ventura & Gold Coast Ambulance
	April Lim		AMR Santa Barbara
	Helen Faithful		AMR Santa Barbara
	Jaime Villa	X	Oxnard Fire Department
	Heather Ellis	X	Ventura City Fire Department
	Joe Dullam		Ventura County Fire Department
	Robert Miner		Ventura County Fire Department
	Jason Swann		Dignity Health Shasta County
	Amory Langmo		Berkeley Fire Department

<sup>1</sup> The chair should not be employed by the sponsor of the program. The Advisory Committee is *advising* the program.

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	Todd Tucker		Glendale Fire Department
	Leigh Overton		San Bernardino Fire Department
	Jakub Jagielinski		San Diego Fire Department
	Kris Strommen		San Luis Ambulance
	Jennie Simon		Santa Barbara County Fire
Public Member(s)	Becky Perry		Ojai Unified School District
	Naiyma Houston		Ojai Unified School District
	Monica Phillippe		Oxnard Union High School District
	Hunter Taylor	X	Oxnard Union High School District
	Ingrid Brennan	X	Oxnard Union High School District
	Tera Creech	X	Oxnard Union High School District
	Irene Ornelas	X	Santa Paula Unified School District
	Natasha Nordquist		Santa Paula Unified School District
	Rene Rickard		Ventura Unified School District
	Joseph Bova		Ventura Unified School District
	Mika Anderson		Ventura Unified School District
Hospital / Clinical Representative(s)	Dominique Heller		Adventist Health Simi Valley
	Julia Merich		Adventist Health Simi Valley
	Kristen Shorts		Adventist Health Simi Valley
	Athena Kahler		Community Memorial Hospital
	Bret McClure		Community Memorial Hospital
	Mary Grace Ortiz		Community Memorial Hospital
	Amy Querol		Community Memorial Hospital
	Debbie Wilkes		Community Memorial Hospital
	Katelyn Yanes		St. John’s Hospital Camarillo
	Kyle Blum	X	St. John’s Regional Medical Center
	Denise Richardson	X	St. John’s Regional Medical Center
	Michelle Barry		Los Robles Medical Center
	Erica Rosa		Los Robles Medical Center
	Meghan Shaner		Los Robles Medical Center
	Kelli Tu		Los Robles Medical Center

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	Melanie Cross	X	Ventura County Medical Center
	Tom Gallegos	X	Ventura County Medical Center
	Claire Hartley	X	Ventura County Medical Center
	Sharon Waechter		Ventura County Medical Center
Other	Nick Clay		SBEMSA – EMS Administrator
	Gabriela Modglin		SBEMSA – Coordinator
	Steve Carroll		VCEMSA – EMS Administrator
	Andrew Casey		VCEMSA – Coordinator
	Adriane Gil-Stefansen		VCEMSA – Coordinator
	Chris Rosa	X	VCEMSA – Deputy Administrator
	Steve Hall	X	Oxnard College Dean of Public Safety
	Carl Schwab	X	Oxnard College EMT Faculty
	Angelica Gonzales		Ventura College – Academic Counselor
	Bea Herrera		Ventura College – Academic Counselor
	Collin Stocke		Ventura College – Biology Department
	Kammy Algiers		
	Dan Clark		
	Gerry Pantoja		Ventura College Foundation
	Anne King		Ventura College Foundation
	Sara Escobar	X	Office Assistant
Faculty <sup>2</sup>	Melissa Corney	X	Ventura College Paramedic Program – Adjunct Faculty
	Davit Karaoglanian		Ventura College Paramedic Program – Adjunct Faculty
	Jonathan Mercer		Ventura College Paramedic Program – Adjunct Faculty
	Jake Modglin		Ventura College Paramedic Program – Adjunct Faculty
	Marina Proektor		Ventura College Paramedic Program – Adjunct Faculty
	John Terrusa	X	Ventura College Paramedic Program – Adjunct Faculty
Sponsor Administration <sup>2</sup>	Kim Hoffmans	X	Ventura College – President

<sup>2</sup> Faculty and administration are ex-officio members.

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	Jennifer Kalfsbeek-Goetz	X	Ventura College – VP Academic Affairs & Student Learning
	Debbie Newcomb	X	Ventura College – Dean of Career Education I
Student (current)			
	Anthony Caron	X	PM Class 27
	Christian Garcia	X	PM Class 27
	Joshua Galanti	X	PM Class 27
	Nathanial McCourt	X	PM Class 27
	Colin Murphy	X	PM Class 27
	Cody Paul	X	PM Class 27
	Linden Wolf	X	PM Class 27
	Kimmy Neal	X	PM Class 28
Graduate	Adrian Munoz	X	PM Class 24
	Russell Kelly	X	PM Class 24
	Cordray Crabbe	X	PM Class 25
	Jordan Klarenbeek	X	PM Class 26
Program Director, <i>ex officio, non-voting member</i>	Tom O'Connor	X	Ventura College Paramedic Program
Medical Director, <i>ex officio, non-voting member</i>	Todd Larsen	X	Ventura College Paramedic Program
<sup>3</sup>			

<sup>3</sup> 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 Please Note: Do not leave columns blank, otherwise that topic will be considered not reviewed or discussed		Completed/ Discussed (Yes/No)	Discussion (include key details of the discussion)	Actions Taken
1.	<b>Call to order</b>	Yes	The meeting was called to order at 1239.	No
2.	<b>Roll call</b>	Yes	Introductions of all in-person and virtual attendees.	No
3.	<b>Review and approval of meeting minutes</b>	Yes	Members reviewed the prior Minutes. Minutes of the 09DEC2022 Advisory Meeting approved as written. Motion to approve by T. Larsen. Second by C. Rosa.	Approval of 2022 Advisory Minutes
4.	<p><b>Review the Program’s minimum expectations</b> [2023 CAAHEP Standard II.A. Minimum Expectations]</p> <ul style="list-style-type: none"> <li>“To prepare Paramedics who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.”</li> <li>Establish / review additional program goals<sup>4</sup></li> </ul>	Yes	<p><b>Attendees reviewed Program Outcomes and Objectives.</b></p> <ul style="list-style-type: none"> <li>T. O’Connor indicated that it’s a CAAHEP requirement to include the minimum expectations statement in the Paramedic Program’s Handbook.</li> <li>Student Learning Outcomes (SLOs) on page 19 and Objectives for Clinical Sites on Pages 20-27 were reviewed. The last revision of SLOs was in 2019. Advisory does not recommend changes at this time.</li> <li>T. O’Connor reported that the Ventura College Paramedic Program (VC PM) has transitioned from FISDAP to the Platinum Education Planner platform. This new system is more stable with a larger capacity for tracking and reporting.</li> <li>Student Minimum Competencies Matrix on page 28 were reviewed, which are the benchmarks for graduating from the VC PM Program. Dr. Larsen highlighted that due to the switch to the new Platinum Education Planner system, competencies were kept at minimum. However, the expectation remains that students will exceed the minimum standard.</li> </ul>	
5.	<p><b>Support the Program’s required minimum numbers of patient/skill contacts for each of the required patients and conditions</b> [2023 CAAHEP Standard III.C. Curriculum]</p> <ul style="list-style-type: none"> <li>Student Minimum Competency (SMC) Recommendations (<i>effective January 1, 2023</i>)</li> </ul>	Yes	<p><b>Attendees reviewed the Program’s Minimum Expectations.</b> Continue with current numbers per Dr. Larsen recommendations.</p> <p>Student data demonstrates increased experiences and patient counts from the 70<sup>th</sup> percentile to 80<sup>th</sup> and 90<sup>th</sup> percentile. The lowest was pediatrics, however, overall, VC PM student numbers have far exceeded the minimum.</p> <p><b>Student Minimum Competency Recommendations:</b></p> <p><b>1. Enhance consistency in Trauma Rounds:</b></p>	

<sup>4</sup> Additional program goals are not required by the CAAHEP *Standards*. Programs that adopt educational goals beyond the minimum expectations statement must provide evidence that all students have achieved those goals prior to the entry into the field.

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	<ul style="list-style-type: none"> <li>Review summary graduate tracking reports</li> </ul>		<p>VC PM faculty report that some students had the chance to shadow a physician during their clinical rounds, while others did not. Faculty propose allowing all students to shadow and follow the physician bedside to create a more uniform experience.</p> <p><b>2. Expand PM V95 Paramedic Internship:</b></p> <ul style="list-style-type: none"> <li>There was consensus to continue and expand PM V95 Paramedic Internship opportunities to assist students who have limited 911 prehospital experience with knowledge of ambulance operations, a review EMT skills, and exposure to various parts of the county, diverse socio-economic delivery methods, hospital systems, and local policies. It is suitable for students with work experience in inter-facility transfers (IFT), Emergency Department (ED), military service, wildfire, lifeguard, and other systems.</li> <li>PM V95 is offered as a 1-unit (60 hours) or 2-unit (120 hours) course during summer session and from January to March. Dates do not interfere with EMS student ride-outs. Dr. Larsen notes the benefit that PM V95 does not require a preceptor.</li> <li>J. Williams accommodated over 10 PM V95 placements over the 2023 summer session, and it was doable. J. Villa indicates that a consideration is training fatigue at the stations.</li> <li>Class 27 students, C.Garcia and N.McCourt, worked on an ambulance while incoming students completed the PM V95 course. They emphasized the benefit for both interns and employees. They recommend ride-outs during winter break between didactic and clinical phases.</li> <li>Class 28 student, K.Neel, shared her positive experience with PM V95, especially the value in debriefing and reviewing policies after each call.</li> <li>H. Taylor proposed making PM V95 a requirement with an appeal option, which was supported Dr. Larsen and J. Williams.</li> </ul>	<p>C. Hartley will communicate this matter with the VCMC team.</p> <p>VC PM Program will continue to strategically schedule PM V95 opportunities.</p>
6.	<p><b>Review the program’s annual report and outcomes</b> [2023 CAAHEP Standard IV.B. Outcomes]</p>	Yes	<p><b>The Advisory reviewed and discussed the program’s annual report and outcomes.</b></p>	

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<ul style="list-style-type: none"> <li>• Annual Report data</li> <li>• Thresholds/Outcome data results</li> <li>• Graduate Survey results</li> <li>• Employer Survey results</li> <li>• Resources Assessment Matrix (RAM)results</li> <li>• Other</li> </ul>		<ul style="list-style-type: none"> <li>• Current tracking Data Arc system is scheduled to sunset in May 2024. VC PM Program is testing Platinum Education and Google Forms as potential replacements.</li> <li>• Platinum Education Planner’s advantages include a feature for students to update their contact information before they graduate the program. Scheduled survey reminders can be enabled to address issues of declining response rates from graduates.</li> <li>• The Resources Assessment Matrix on pages 51-63 were reviewed. Data included figures from the previous two cohorts. The VC PM Program met all thresholds, achieving approximately about 70% across the board.</li> <li>• Program Resource Surveys on pages 73-96 were reviewed. Surveys include student feedback on various aspects of the program including faculty, medical director, support personnel, curriculum, facilities, clinical and field internship resources, among others. Interns provide feedback on preceptors and preceptors provide feedback on interns.</li> </ul>	
<p><b>7. Review the program’s other assessment results</b> [2023 CAAHEP Standard III.D. Resource Assessment]</p> <ul style="list-style-type: none"> <li>• Long-range planning</li> <li>• Student evaluations of instruction and program</li> <li>• Faculty evaluations of program</li> <li>• Course/Program final evaluations</li> <li>• Other evaluation methods</li> </ul>	<p>Yes</p>	<p><b>Accreditation Site Visit and Reaffirmation of Accreditation:</b></p> <ul style="list-style-type: none"> <li>• The VC PM Program recently concluded a comprehensive two-day CoAEMSP Accreditation Site Visit. The accreditation of the VC PM Program was successfully re-affirmed.</li> <li>• Accreditors examined the Resource Assessment Matrix, evaluations, high stakes exam analysis, success rates, clinical evaluations of both students and faculty, and program surveys.</li> <li>• Numerous meetings took place between Accreditors and students, faculty, administrators, employers, and key stakeholders.</li> <li>• Accreditors provided positive feedback, and affirmed that students within the VC PM Program were achieving learning objectives, and they noted high national registry pass rates.</li> <li>• The accreditation team issued zero citations for the VC PM Program. Their only suggestion focused on succession planning for continued success of the program.</li> <li>• President Hoffmans acknowledged T. O’Connor for his excellent performance, emphasizing his leadership which garnered praise from the accreditation committee</li> </ul>	

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		<ul style="list-style-type: none"> <li>• Dean, D. Newcomb echoes the positive sentiments of the accreditation team of the program’s effectiveness in ensuring student success.</li> </ul> <p><b>Ventura College Program Review:</b></p> <ul style="list-style-type: none"> <li>• VC conducts an Annual Program Review, comprised of either a mini or comprehensive review. This process is a self-evaluation for departments to review data, identify initiatives, justify resource requests, and facilitate strategic planning and ongoing improvement. In 2023, the VC PM Program did a mini review, which included a persistent request for additional full-time faculty.</li> </ul>	
<p><b>8.</b></p> <p><b>Review program changes (possible changes)</b></p> <ul style="list-style-type: none"> <li>• Course changes (schedule, organization, staffing, other)</li> <li>• Preceptor changes</li> <li>• Clinical and field affiliation changes</li> <li>• Curriculum changes                             <ul style="list-style-type: none"> <li>○ Content</li> <li>○ Sequencing</li> </ul> </li> </ul>	<p style="text-align: center;">Yes</p>	<p><b>Student Enrollment Update:</b></p> <ul style="list-style-type: none"> <li>• Program interest exceeds available seats in each cohort.</li> <li>• Program sustainability relies on preceptor availability. While program enrollment should not exceed preceptor capacity, there is a challenge in running courses with low enrollment.</li> <li>• Presently, the program enrolls 24 students in each cohort.</li> </ul> <p><b>Faculty and Staffing Issues:</b></p> <ul style="list-style-type: none"> <li>• There is continuous recruitment and hiring of adjunct faculty.</li> <li>• The full-time faculty position is not filled. The program is actively recruiting.</li> <li>• T. O’Connor stressed the program’s current staffing challenges, especially in filling the vacant full-time position.</li> <li>• T. O’Connor has 1.53+ workload, contributing 50-70 hours of extra time per week. Part-time faculty are also maxed out.</li> </ul> <p><b>Critical Preceptor Shortage:</b></p> <ul style="list-style-type: none"> <li>• President Hoffmans shared a prevailing concern in the VC PM Program’s Annual Program Review, citing the challenge of securing preceptors. Students enter the program expecting to finish at the end of the semester, but many extend into the summer and beyond, with some students even seeking preceptor opportunities outside of the county and</li> </ul>	



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		<p>state. It is problematic that the college struggles to keep its promise to students.</p> <ul style="list-style-type: none"> <li>• VC introduced a part-time paramedic cohort per the community’s request, but the shortage of preceptor placements jeopardizes the sustainability of the program. This is an area of need where President Hoffmans calls for support from community and industry partners.</li> <li>• D. Newcomb echoed President Hoffman’s sentiment of struggling to get students through program due to scarcity of preceptors. Students are finding out-of-state agencies. She implored everyone to help.</li> <li>• T. O’Connor noted the pinch effect of the pandemic contributing to the shortage across the US, plus the two-year requirement before becoming a preceptor, and now a majority are hired by the fire departments. This is coupled with student feedback highlighting issues with EMS culture in Ventura County, leading some to choose to work outside of the area, all which contributes to preceptor burnout and unpleasant learning experiences.</li> <li>• Agencies have committed 10 preceptors from AMR, 2-3 from Ventura County Fire, 2-3 from Oxnard Fire, and Ventura City Fire is unknown. It was noted that 14 – 16 preceptor placements are not a sustainable number for a class. A recent student waited up to 120 days before being placed with a preceptor, which is over the 90-day limit.</li> <li>• T. O’Connor detailed ongoing challenges with course extensions, incomplete grades, and competition with NCTI and UCLA for preceptor spots that should have gone to VC students.</li> <li>• Programs must report preceptor assignments to the Ventura County EMS Agency (VCEMSA) at least one month in advance, per regulations.</li> <li>• C. Rosa acknowledged that early reporting will help highlight placement issues and bring attention to where students are being assigned.</li> </ul> <p><b>Expansion of Clinical and Field Affiliation Agreements:</b></p> <ul style="list-style-type: none"> <li>• In a proactive effort to increase preceptor opportunities for students, the VC PM Program is actively expanding field internship contracts beyond Ventura County.</li> <li>• New fully-executed field internship contracts have been established with: <ul style="list-style-type: none"> <li>○ Dignity Health Shasta County (Operates an ambulance)</li> </ul> </li> </ul>	

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		<ul style="list-style-type: none"> <li>○ Gold Cross (Utah)</li> <li>○ Oxnard Fire Department</li> <li>○ San Luis Ambulance</li> <li>○ San Diego County Fire Protection District</li> <li>● Pending Approval Stage:                             <ul style="list-style-type: none"> <li>○ AMR Corporate (statewide AMR &amp; Las Vegas)</li> <li>○ Berkeley Fire Department</li> <li>○ Glendale Fire Department</li> <li>○ San Bernardino County Fire Protection District</li> <li>○ Santa Barbara Fire Department</li> </ul> </li> <li>● Most out-of-county agencies emphasize they will address the needs of their local PM programs, before accepting VC students. Their policy is to prioritize local need; however, they are willing to assist where they can.</li> </ul> <p><b>Curriculum Changes:</b></p> <ul style="list-style-type: none"> <li>● The Advisory discussed potential curriculum changes to help reduce barriers to entry.</li> <li>● J. Villa indicated that his agency is competing with operational need and he urges the college to reduce barriers both academic and socio-economic. A significant challenge lies in enrolling his staff in a PM Program within Ventura County. Students unable to secure a seat at the VC PM Program are directed to schools outside of county. It is a substantial investment of nearly \$100,000 to send students to institutions such as UCLA and backfill staff to maintain the Fire Department and EMS Programs.</li> <li>● If all his employees enroll in the VC PM Program, there's an understanding that we are effectively preserving and nurturing local talent.</li> </ul> <p><b>Uniformity Across County Programs:</b></p> <ul style="list-style-type: none"> <li>● The Advisory unanimously supported the idea that requirements for both MC and VC PM Programs should align to ensure consistency.</li> <li>● C. Rosa supported the call for consistency, and suggested that it should be implemented at the district level.</li> </ul>	

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		<p><b>Motion to Remove the Anatomy and Physiology (A&amp;P) prerequisite:</b></p> <p>The VC PM Program, having removed the Math and English prerequisites seven years ago, reviewed the request to remove the A&amp;P prerequisites from both admission into the program, and from eligibility for the Certificate of Achievement (CoA) and Associate in Science (AS) Degree in EMS: Paramedic Studies.</p> <p><b>Discussion of Benefits and Risks of Removing the A&amp;P Prerequisite:</b></p> <ul style="list-style-type: none"> <li>• In the absence of a recency requirement, J. Villa questioned the relevance of A&amp;P taken 20 years ago.</li> <li>• Institutions near VC, such as UCLA, Bakersfield, Cuesta College, Moorpark College, and Allan Hancock do not require A&amp;P, and offer a paramedic prep course instead.</li> <li>• N. McCourt agreed that while some form of surface level A&amp;P is helpful, there was a shared sentiment among peers that the summer A&amp;P courses was so accelerated, it was challenging to absorb the information.</li> <li>• T. Creech inquired about a baseline test that would exempt students from having to enroll in A&amp;P.</li> <li>• Dr. Larsen would like to know that everyone has the same background for a more unified experience.</li> <li>• Program graduate, C. Crabbe, understands that unless A&amp;P becomes a state requirement, it makes sense to eliminate the pre-req and integrate A&amp;P into the curriculum in order for the VC PM program to be competitive with other programs.</li> <li>• Program graduate, J. Klarenbeek expressed concern about lowering standards in particular for students who may not be ready. Completing A&amp;P shows a level of dedication for the program. J. Villa agreed and inquired about correlations between A&amp;P and successful completion.</li> <li>• T. O'Connor indicated that the biggest predictor of success is motivation over prior knowledge. He has observed that success rates tend to drop when students spend too much time in the field because they are less adaptable and more set in their ways, compared to new EMTs.</li> <li>• C. Rosa agreed that eliminating A&amp;P prerequisite will break down barriers to get more paramedics out there.</li> </ul>	<p>J. Villa motioned to initiate the process of eliminating the A&amp;P pre-req and replace it with a pre-course option. J. Terrusa seconded the motion, and there were no objections.</p> <p>T. O'Connor will initiate the removal of A&amp;P with the VC Curriculum committee.</p>

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		<p><b>Motion to replace A&amp;P Prerequisite with a Pre-Course Option:</b></p> <ul style="list-style-type: none"> <li>J. Villa shared that UCLA's prep course is mandatory, and covers A&amp;P, drugs, and paramedic basics. It is offered one to two months before the program, three days per week, eight hours per day via Zoom, costing approximately \$2,000 per student. This schedule helps the employer's duty schedule, and students can remain active duty.</li> <li>M. Corney recommended an A&amp;P instructor supplement class time to ensure students learn from a subject area expert.</li> <li>Dr. Hoffmans suggested concurrent enrollment with a course that has the minimum qualifications in biology and paramedicine, or a team-taught component.</li> <li>T. O'Connor noted a 20-23% attrition between PM V01 and PM V02. The pre-course could start with a higher number to account for attrition.</li> <li>Dr. Tillis inquired about the class format. T. O'Connor proposed a one-unit, four-week online course, approximately 24 hours per week. Course content to include A&amp;P, EMS application, and introduction to policies.</li> <li>J. Villa recommended live Zoom sessions for interactive engagement.</li> <li>There was consensus that VC and MC Programs should collaborate on creating curriculum. Approval of a new course is a process that can take 1.5 years to implement.</li> </ul> <p><b>Motion to Align Prehospital Experience Requirement:</b></p> <ul style="list-style-type: none"> <li>T. Larsen reminded that this Advisory body is for both the VC and MC Programs. VC requires 1,000 hours of prehospital experience which is approximately one year of experience, while MC does not.</li> <li>J. Villa agreed that the inconsistency of having two programs within the same county with different requirements is problematic.</li> <li>In discussing the type of EMT experience to require, the Advisory noted that Allan Hancock requires 1,000 prehospital experience and accept standby medic EMT experience; UCLA has a six-month requirement; Bakersfield College has no requirement; Cuesta College requires 1,000 hours of 911 experience and a specific number of patient contacts.</li> </ul>	<p>VC and MC will collaborate to build curriculum for a new PM prep course and initiate this process with campus Curriculum Committees.</p> <p>K. Blum motioned that MC and VC PM programs align the 1,000-hour prehospital experience requirement for admission, with VCCCD implementing this requirement. M. Corney and J. Villa seconded.</p>

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		<ul style="list-style-type: none"> <li>• Dr. Larsen would like to see 1,000 hours of experience stay with exceptions for IFT, military based EMT, hospital based EMT experience, lifeguard and state park EMT.</li> <li>• C. Rosa indicated that sports programs have standby EMTs who have legitimate emergency contacts, and meet same training thresholds.</li> </ul> <p><b>Preceptor Training:</b></p> <ul style="list-style-type: none"> <li>• Discussion ensued regarding enhancing Preceptor training. Faculty observed instances where some preceptors resist utilizing the evaluation tools, leading to inconsistencies and potential biased evaluations. It was noted that the rubric is an official State of CA EMS Agency Form, not a VC template. Due to word of mouth among interns, there are instances of preceptor “shopping.”</li> <li>• J. Williams indicated, alternatively, there is preceptor sentiment of subjectivity, mentioning that UCLA and NCTI promptly removes the student if preceptor reports issues. Following remediation, intern returns with noticeable improvements. This reassures the preceptor and creates a sense of synergy. He clarified that occasional incidents may give the impression of personal bias, but this is not the case. There is an occasional preference among preceptors to work with familiar cohorts.</li> <li>• J. Terrusa stressed the need for preceptor to be trained as both teachers and evaluators. He suggested adopting the LA County’s preceptor training model, involving an in-person, 8-hour class, offering Continuing Education (CE) credit, and overseen by the LA EMS Agency.</li> <li>• J. Villa shared that his preceptors completed the eight-hour UCLA course. He agreed in-person is most effective and expressed that adding eight hours of payroll time is manageable for his agency.</li> <li>• J. Terrusa recommended VCEMSA take over preceptor training as the governing body, as opposed to the institutions. He would like the course to address topics such as toxic work environments, hazing, and harassment. The course should also cover FERPA guidelines. Additionally, training should help equip preceptors with the tools to effectually articulate areas and plans for improvement.</li> <li>• C. Rosa clarified that VCEMSA can update guidelines but lacks the bandwidth to deliver a preceptor course. Agencies currently meet</li> </ul>	<p>T. O’Connor will inform J. Everlove of the Advisory Committee’s recommendation for both PM Programs to require 1,000 of EMT experience.</p>

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		<p>regulatory standards for preceptor training. He suggested proposing policy changes to the Prehospital Services Committee (PSC), considering the upcoming opening of regulations. The restart of the EMS committee is an opportunity for detailed policy discussions.</p> <ul style="list-style-type: none"> <li>M. Corney proposed adopting the UCLA model, run by VC. Additionally, she suggested making this training mandatory for EMT and Paramedic skills instructors to help set a standard for skills instructor expectations.</li> </ul>	
<p>9. <b>Review substantive changes</b> (<i>possible changes</i>) [2023 CAAHEP Standard V.E. Substantive Change]</p> <ul style="list-style-type: none"> <li>Program status</li> <li>Sponsorship</li> <li>Location</li> <li>Sponsor administrative personnel</li> <li>Program personnel: PD, MD, other</li> <li>Addition of distance education component</li> <li>Addition of satellite program</li> <li>Addition of alternate location(s)</li> </ul>	<p style="text-align: center;">Yes</p>	<p><b>Administrative Personnel Update:</b></p> <p>VC President, Dr. Hoffmans, has announced her retirement. To maintain stability in leadership and to give the VCCCD time to seek her replacement, Dr. Hoffmans gave an academic year’s notice and will retire on June 30, 2024. VCCCD has begun the search for the next President of Ventura College.</p> <p><b>Programming Status: Repositioning Start Date and Condensing PM V02 Clinical Rotation and Field Internship:</b></p> <ul style="list-style-type: none"> <li>T. O’Connor shared that he is considering shifting the VC PM Program’s full-time cohort from a fall semester start date to a spring semester start date. For the part-time cohort, he is considering splitting PM V02 into A and B sections to address challenges related to extended courses that span across semesters, which affect student’s financial aid, GI Bill, grading with A&amp;R, etc.</li> <li>The Advisory reviewed the request to decrease clinical hours from 216 to 160 to reduce clinical rotation time and increase efficiency. State regulations mandate 160 hours. A suggestion was made to eliminate eight hours from the Grossman Burn Center, but members opposed it, considering it a highlight of the program. K. Blum and J. Williams strongly recommend keeping it. T. O’Connor is looking into a condensed PM V01 course model of 12 weeks, plus 3 weeks of clinical rotation, increasing weekly hours from 32 to 40, and adding a distance education component.</li> <li>UCLA’s program is 40-hours per week, and they are now increasing to three cohorts. J. Villa and J. Williams indicated that their employees appreciate the faster completion of training at UCLA.</li> </ul>	

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			<ul style="list-style-type: none"> <li>Another option is the creation of a non-credit course for instances where students need field capstone extensions.</li> </ul> <p><b>Satellite or Alternative Locations:</b></p> <ul style="list-style-type: none"> <li>There is growing sentiment among faculty and staff that the VC PM Program is outgrowing the HSC building. VC is going to construct new buildings over the next 20 years. The PM program could potentially remain in its current location, move to an alternate location on campus, or to an alternate site such as the VC East Campus in Santa Paula, or the Oxnard College Fire Academy in Camarillo.</li> </ul>	
<p>10.</p>	<p><b>Other identified strengths</b></p>	<p>Yes</p>	<p>T. O'Connor presented the strengths identified by the accreditors during the accreditation site visit:</p> <ul style="list-style-type: none"> <li>VC PM Program has excellent instructional equipment and its facilities are current and feature the advanced Prism Immersive Simulator.</li> <li>The Program acquired the LUCAS device to align with the county.</li> <li>Successful coordination of Simulation Day events involves industry partners, skills instructors, paramedic students, and EMT and high school volunteers.</li> <li>Growing partnerships and established pipelines with local High School Health Academies and Pathways.</li> <li>The program is well-supported by grant funding from sources such as Perkins, Strong Workforce, Swift Memorial Grant funds, and donations.</li> </ul>	
<p>11.</p>	<p><b>Other identified weaknesses</b></p>	<p>Yes</p>	<ul style="list-style-type: none"> <li>Misalignment of program requirements between MC and VC.</li> <li>Preceptor shortages</li> <li>Limited class sizes</li> <li>Faculty availability</li> </ul>	
<p>12.</p>	<p><b>Identify action plans for improvement</b></p>		<ul style="list-style-type: none"> <li>Align district PM Program requirements with VC removing A&amp;P pre-requisite, and recommendation for MC to add the 1,000-hour prehospital requirement. Collaborate to develop curriculum for a pre-course.</li> <li>VC PM Program will condense PM V02 for faster completion.</li> <li>Work with EMS Committee to propose a preceptor training through PSE.</li> </ul>	

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			<ul style="list-style-type: none"> <li>Continue to secure field internship agreements with agencies outside of Ventura County.</li> </ul>	
13.	Other comments/recommendations	Yes	<p><b>Recommendations for VCEMSA:</b></p> <p><b>1. Live Scans for Paramedic Interns:</b></p> <ul style="list-style-type: none"> <li>T. O’Connor inquired about live scans for out-of-county interns, who despite holding a national and CA license, may undergo PM training Ventura County without being on the local VCEMSA radar. He proposed making live scanning with VCEMSA mandatory for all students to establish a continuous Department of Justice (DOJ) feed.</li> <li>J. Villa inquired about making VCEMSA EMT accreditation mandatory for paramedic applicants. C. Rosa confirmed the feasibility, but the downside are associated application fee and live scan costs for the student.</li> <li>T. O’Connor indicated that students currently spend \$75 for a background check, but utilizing the VCEMSA at a similar cost, would meet the requirement of the program while provide a more seamless and continued monitoring feed.</li> </ul> <p><b>2. Align VCEMSA Renewal with Accreditation:</b></p> <ul style="list-style-type: none"> <li>T. O’Connor proposed that VCEMSA align their Program Renewal with the long-range planning document for the accreditation, so that questions and reports are synchronized.</li> </ul>	C. Rosa will look into these matters with VCEMSA and provide further information.
14.	Staff/professional education	Yes	<p><b>Educator Training Course:</b></p> <ul style="list-style-type: none"> <li>T. O’Connor reported that he is in the early stages of developing an educator training for new EMS faculty. The course could be NAEMSE, Fire Marshall, or any 40 hours adult teaching methodology. S. Hall expressed interest in partnering with T. O’Connor to develop this course for new and existing instructors. C. Schwab emphasized the importance of resource-sharing among the colleges. There is a gap in EMS education that can be addressed through collaborative efforts.</li> </ul> <p><b>Professional Development for New Instructors:</b></p>	



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			<ul style="list-style-type: none"> <li>VC is looking into a professional development training course for the new six instructors, which could be a shared project across district EMT programs. The course would cover topics such as building lesson plans, creating engaging PowerPoints, and ADA compliance.</li> </ul>	
15.	<b>CoAEMSP/CAAHEP updates</b>	No	Not discussed	
16.	<b>Next accreditation process</b> (i.e., self-study report, site visit, progress report)	Yes	<b>Accreditation Timeline:</b> <ul style="list-style-type: none"> <li>The VC PM Program’s Accreditation Site Visit was completed in September 2023 with no citations.</li> <li>CoAEMSP Review will take place at the February 2024 meeting, followed by recommendation submitted to CAAHEP.</li> <li>The CAAHEP review and issue letter will be sent to VC PM program May to August 2024.</li> </ul>	
17.	<b>Other business</b>  <b>VCCCD EMS Program Reports</b> <input type="checkbox"/> Moorpark College EMT <input type="checkbox"/> Oxnard College EMT <input type="checkbox"/> Ventura College EMT	Yes	<b>Moorpark College:</b> <ul style="list-style-type: none"> <li>Not in attendance</li> </ul> <b>Oxnard College (OC):</b> <ul style="list-style-type: none"> <li>OC EMT Instructor C. Schwab addressed similar operational challenges, including the search for qualified EMT instructors. Due to upcoming retirements and instructor shortages. He inquired with VCEMSA about guidelines for primary instructors. C. Rosa confirmed that guidelines are State of CA EMS Agency guidelines.</li> <li>OC enrolls approximately 220 EMT students per year, with a 65% NREMT pass rate within three attempts - a 2-3% increase from the prior year. OC aims for an 80% pass rate, and has no plans to expand or shrink the EMT Program at this time.</li> <li>C. Schwab stressed the importance of students taking the NREMT exam within two weeks of course completion to avoid degradation of knowledge. Recognizing that students who fail their first attempt often get discouraged and don’t continue, he focuses on individual student support to encourage persistence and address weak areas.</li> </ul>	

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		<ul style="list-style-type: none"> <li>• C. Schwab conducted a NREMT review course pro-bono. S. Hall reported that from this pilot, 10 out of 12 who took exam immediately passed. He is considering offering this review course as non-credit.</li> <li>• College of the Canyons’ approach is to allow students one week to take the NREMT exam.</li> <li>• C. Schwab’s emphasis is ensuring that the quality of education is high. The OC EMT Program is well-equipped with resources, space, and an immersive simulator.</li> <li>• S. Hall indicated that OC was a Pearson Vue site for the EMT exam, but due to IT related issues, Pearson Vue relocated to the local library and the exam opened to the community. C. Schwab works with Pearson Vue to coordinate early scheduling. The next testing site within proximity is in Westlake Village.</li> <li>• C. Rosa commended OC’s commitment toward student success and competence, and thanked OC for their efforts. He looks forward to the reinstatement of the workgroup to explore best practices.</li> <li>• C. Schwab shared in fall semester, OC did not get ride-alongs in Oxnard; All students rode out with AMR Moorpark and Camarillo. He would like to provide Oxnard spots to his students. T. O’Connor clarified that VC students had ride-outs in Oxnard with Gold Coast Ambulance, not AMR.</li> <li>• J. Williams proposed a standardized ride-along procedure of 12-hour shifts. OC, MC, and Conejo Valley Adult School do 12-hour shifts, and he encourages VC to align with this model.</li> <li>• He streamlined the EMT ride-outs process using QR codes. Students receive a QR code the day before their clinical sign-up which confirms the assigned station. This helped close the loop on communication. He introduced Saturday ride-alongs, excluding Sundays to give crews a day off. The AMR team will also visit the EMT classes to give students an orientation, complete orientation paperwork, and share best practices.</li> </ul> <p><b>Ventura College EMT:</b></p> <ul style="list-style-type: none"> <li>• T. O’Connor reported that The VC EMT program had an 81% pass rate in for the 2022-2023 academic year.</li> <li>• VC modified the EMT schedule for spring semester to allow concurrent lectures, with two cohorts meeting simultaneously, each having their</li> </ul>	

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		<p>dedicated skills day. This adjustment reduced faculty need and availability. The HSC building has a lecture hall with a capacity of 81 students which allowed the program to run two classes of 40 simultaneously. There are six new adjunct faculty who are quickly adapting to their teaching role.</p> <p><b>Final comments from VCEMSA:</b></p> <ul style="list-style-type: none"> <li>• C. Rosa acknowledged the challenges faced by community colleges, and recognized their incredible work despite being under-resourced and overworked. When he engages with students, he hears overwhelming positive feedback from those who have completed the EMT program at community colleges. He highlighted the positive impact of feeder programs from high schools, emphasizing that exposure to EMR, CPR, medical awareness, and other components will contribute towards student’s confidence.</li> <li>• H. Taylor inquired about areas of emphasis he could implement at the high school level. Committee members recommended medical terminology, and components of A&amp;P, and EMR.</li> <li>• C. Rosa pointed out that OC and MC offer EMR. It serves as valuable EMT preparation for pathway into fire service, or high school work experience. It’s a great opportunity. Students over 18 can sit for the NREMT.</li> </ul>	
<p><b>18.</b></p>		<p>The Advisory Committee agreed to move the annual meeting to the first week of August. T. O’Connor will coordinate with the OC and MC Directors to schedule the meeting date</p>	<p>T. O’Connor will email the survey and asks for everyone’s participation.</p>
<p><b>19.</b></p>	<p>Yes</p>	<p>Meeting adjourned at 1548.</p>	

Minutes prepared by Sabrina Canola-Sanchez Tom O’Connor

Date 12/12/23

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

Date \_\_\_\_\_

Medical Director’s signature (for item #5 above) \_\_\_\_\_

Date \_\_\_\_\_

Attach program’s required **Student Minimum Competency** numbers (Summary Tracking tab) to verify which required minimum numbers were reviewed and supported (*item #5 above*)

**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. Program Advisory Committee]

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 of an emergency medical services professional. 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. Program goals must be written referencing one or more of the learning domains. [CAAHEP Standard II.A. Program Goals and Minimum Expectations]

**Responsibilities of the Advisory Committee**

- Review the minimum program goal.
- Review and support 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.