



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.

<b>SPONSOR / INSTITUTION NAME:</b>	Ventura College		
<b>CoAEMSP PROGRAM NUMBER:</b>	600186	<b>DATE, TIME, + LOCATION OF MEETING:</b>	09DEC2022, 1300-1600, Ventura College HSC 211
<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)	Todd Larsen Daniel Shephard Ira Tilles	<input checked="" type="checkbox"/> <input 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 Jeremey Schumaker Joey Williams Jeff Winter	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	AMR Ventura/ Gold Coast Ambulance AMR Ventura/ Gold Coast Ambulance AMR Ventura/ Gold Coast Ambulance AMR Ventura/ Gold Coast Ambulance
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 type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	VCEMSA – EMS Administrator VCEMSA – Deputy Administrator VCEMSA - Coordinator VCEMSA – Coordinator SBEMSA – EMS Administrator SBEMSA - Coordinator
Police and Fire Services	Heather Ellis Joseph Williams Jaime Villa Robert Miner	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Ventura City Fire Department – EMS Coordinator Ventura County Fire Department - Captain Oxnard Fire Department - EMS Coordinator Ventura County Fire Department - Captain

<sup>1</sup> 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
Public Member(s)	Barbara Cogert Irene Ornelas	<input type="checkbox"/> <input type="checkbox"/>	
Hospital / Clinical Representative(s)	Kyle Blum Tom Gallegos Karen Magnani Meghan Shaner Kristen Shorts Kathy Triguero Debbie Wilkes Sharon Waechter Kelly Tu	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Saint John's Regional Medical Center Ventura County Medical Center St. John's Regional Medical Center Los Robles Medical Center Adventist Hospital Simi Valley Los Robles Hospital Community Memorial Hospital Ventura County Medical Center Los Robles Medical Center
Other	Karen Beatty John Everlove Matt Jewett Matt McElhenie Gerry Pantoja Preston Pipal Collin Stocke	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Oxnard College EMT Faculty Moorpark College Allied Health Coordinator/EMS Oxnard College Dean – Fire & EMT CEMSEA Director Ventura College Foundation Ventura College Biology Faculty Ventura College Biology Faculty
Faculty <sup>2</sup>	Melissa Corney Andrew Dowd Sophie Elliott Stephen McNaughten Jeremiah Glass Joy Reed John Terrusa	<input checked="" type="checkbox"/> <input 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 <sup>2</sup>	Kimberly Hoffmans Jennifer Kalfsbeek-Goetz Debbie Newcomb Beatriz Herrera Angelica Gonzales	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Ventura College President Ventura College Vice President of Academic Affairs Ventura College Dean, Career Education I Ventura College Academic Counselor Ventura College Academic Counselor
Student (current)	Alonso Calderon, part-time cohort Santiago Virto, full-time cohort	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Ventura College Paramedic Student, Class 26 (part-time) Ventura College Paramedic Student, Class 25 (full-time)

<sup>2</sup> 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	Jenna Blaker Melissa Corney Sophie Elliott	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Ventura College Paramedic Graduate Ventura College Paramedic Graduate Ventura College Paramedic Graduate
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
<sup>3</sup>			

Agenda Item		Discussion	Action Required	Lead	Goal Date
1.	Call to order	The meeting was called to order at 1305.	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 10DEC2021 Advisory Meeting were approved as written. Motion to approve by J. Terrusa. Seconded by T. Larsen.	No		
4.	<p><b>VCCCD EMS Program Reports</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Moorpark College EMT</li> <li><input type="checkbox"/> Oxnard College EMT</li> <li><input type="checkbox"/> Ventura College EMT</li> <li><input type="checkbox"/> Ventura College Paramedic</li> </ul>	<p><b>Moorpark College (MC) EMT</b></p> <ul style="list-style-type: none"> <li>• J. Everlove indicated that MC will offer an Emergency Medical Responder (EMR) course during the 2023 Spring Semester. EMT will continue to be scheduled the upcoming fall and spring semesters.</li> <li>• MC will partner with Agoura High School to offer a dual enrollment EMR course, with an anticipated enrollment of 24-25 high school students.</li> </ul> <p><b>Moorpark College Paramedic (PM) Program</b></p> <ul style="list-style-type: none"> <li>• J. Everlove reported that MC is getting ready to start a PM Program in 2023. MC is working with EMS partners to facilitate</li> </ul>	No		

<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	Discussion	Action Required	Lead	Goal Date
	<p>instructional, clinical, and field needs, and is working toward finalizing all paperwork. Dr. Andrew Laurence Bourgeois will serve as the MC Paramedic Program’s Medical Director. J, Everlove is grateful for the support of participating agencies and thanked T. O’Connor for his collaborative support.</p> <p><b>Oxnard College (OC) EMT</b></p> <ul style="list-style-type: none"> <li>• N/A</li> </ul> <p><b>Ventura College (VC) EMT</b></p> <ul style="list-style-type: none"> <li>• T. O’Connor reported that enrollment in the EMT Program has fluctuated over the past couple of years with Covid. During Academic Year (AY) 2021-2022, a total of 119 students completed the EMT Program. While this is a decrease in the total completion and success rate, there is an increase in first-time NREMT pass rates which have reached 75%.</li> </ul> <p><b>Ventura College Paramedic (PM) Studies Program</b></p> <ul style="list-style-type: none"> <li>• T. O’Connor reported that in AY 2021-2022, VC started a part-time paramedic program and increased overall program enrollment. There was a decrease in retention in the part-time cohort due to fire department hiring’s, withdraw to pursue other pathways, and others will repeat the course in the future. The program maintains the 75% passing threshold and is above the national average for NREMT pass rates.</li> </ul>			



		<p>K. Blum asked for a motion approving the expansion of the local scope of practice regarding the administration of medications, pending Dr. Shephard’s review and approval. S. Elliot approved, and T. Gallegos seconded.</p> <p><b>Recommendation to continue rotations at Grossman Burn Center:</b></p> <ul style="list-style-type: none"> <li>Attendees discussed whether the shifts at the Grossman Burn Center continue to be a beneficial rotation for students. Interns arrive at 5:45 am, train on burn victims, and have the opportunity to meet and talk with Dr. Grossman.</li> <li>M. Corney expressed this rotation to be highly beneficial due to the Grossman Burn Center’s level of expertise and specialization.</li> <li>J. Blaker indicated it’s informative and impactful to see the progression from the 911 call, to transport, arrival at Grossman, the procedure, and the recovery. There is a valuable affective component to this experience.</li> </ul> <p>K. Blum established advisory group consensus to keep the Burn Center shift.</p> <p><b>Recommendation to modify trauma rounds:</b></p> <ul style="list-style-type: none"> <li>Attendees discussed the efficacy of the trauma rounds.</li> <li>Program graduates explained that since VCMC is a teaching hospital with many Residents, there is little opportunity for interns to work on patients, resulting in interns often standing by the sidelines.</li> <li>J. Terrusa proposed shadowing the physician as a way to observe from a different diagnostic perspective.</li> <li>A. Casey and T. Gallegos expressed that differential diagnosis through physician shadowing will require facilitation and alignment with the hospital requirements.</li> </ul> <p>K. Blum established advisory group consensus to modify trauma shift and shadow the physician/trauma surgeon as way to make the Trauma Rounds more meaningful to interns.</p> <p><b>Recommendation to increase participation in the PM V95 Work Experience course for candidates who lack ambulance experience:</b></p>	<p>Yes</p>	<p>T. O’Connor will email VCMC Trauma Coordinator, Gina Ferrer, and cc T. Gallegos.</p> <p>T. Larsen will coordinate with Duncan.</p>	
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		<ul style="list-style-type: none"> <li>• J. Winters expressed the challenges when interns do not have ambulance experience in basic level knowledge, such as where to stand in an ambulance, how to use a gurney, locating monitors, equipment knowledge, how to load and unload, reporting, experience answering a call, and patient care and treatment. He believes students will need more than one shift to learn to navigate an ambulance and understand the unwritten rules.</li> <li>• J. Villa agrees there is a challenge when interns do not know how to navigate an ambulance. It creates extra stress for the student and preceptor.</li> <li>• T. O’Connor indicated that ambulance experience is listed on the paramedic application as a requirement, but he finds that it would preclude candidates with military, ER tech, or fire department backgrounds. From experience, these candidates bring a diversity of thought into the classroom. Mandating 911 experience will eliminate candidates from entering the program, and we need to be mindful of enrollment and that not every paramedic will end up in an ambulance.</li> <li>• M. Corney recommends taking one ER shift and turn it into an ambulance ride-along, even as an observational day, to mitigate the lack of 911 experience.</li> <li>• T. Larsen confirmed that ride-along within the scope of a paramedic require a preceptor.</li> <li>• J. Williams indicated that with UCLA and MC’s programs, it will be challenging to secure preceptors. For AMR, there are not enough preceptors.</li> <li>• Per T. O’Connor, an alternate option is to do ride-alongs within the EMT scope, which would not require a preceptor.</li> <li>• J. Winters is a big proponent of the PM V95 course. He indicates that it is evident when interns have or do not have ambulance experience. Lack thereof deters from the overall learning experience. He recommends VC make it a requirement or give it a big push. Either ten 12-hour shifts, or five 24-hours shifts will give students an advantage to be more fluid and successful during internship.</li> <li>• C. Rosa concurred it is beneficial to mandate or recommend students who do not have ambulance experience to take the PM V95 course. Even a minimum of 12 hours on an ambulance, with</li> </ul>			
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		<p>a structured format and checklist from T. O'Connor, will be beneficial.</p> <ul style="list-style-type: none"> <li>• T. Larsen does not believe potential students should be excluded due to lack of 911 experience, but agrees all students would benefit from a 12-hour shift/orientation.</li> <li>• T. O'Connor indicates challenge in requiring PM V95 as a pre-course is that some students were admitted 2-weeks prior to the start of the term and there was no time to have them participate in PM V95.</li> <li>• S. Elliott recommends a PM V95 during the didactic portion or before the clinical rotation would be more meaningful. It will help students utilize the knowledge learned, especially for people not working in Ventura County.</li> <li>• J. Villa indicated that space is a challenge, but barring any issues with the City Attorney, he can facilitate some of the ride-along with squad rounds on a 12-hour basis.</li> <li>• J. Williams suggests students spend time on both ambulance and fire to share. Ambulance can possibly do 10 shifts over a two-week break. 12-hour shifts are preferred over 24-hour shifts to avoid getting into a sleeping arrangement. Better to cap at 12.</li> <li>• A. Calderon shared that his participation in PM V95 was an eye opener and it cemented his desire to become a paramedic. He highly recommends it to incoming students.</li> <li>• S. Virto recommends students have opportunities to spend time in an ambulance during a winter break.</li> <li>• President, K. Hoffmans, asked the committee to look into self-test and digital models that students could complete to refresh ambulatory skills before entering clinical rotations.</li> </ul> <p>K. Blum asked for a motion to approve increasing participation in the PM V95 either as a pre-course, or, create a shortened PM V95 12-hour shift opportunity following didactic to increase 911 experience and to address the lack of FTO preceptors. S. Elliott and M. Corney motioned to approve. J. Terrusa seconded.</p>			
<p>6.</p>	<p><b>Endorse the Program's required minimum numbers of patient/skill contacts for each of the required patients and conditions</b> [CAAHEP Standard III.C.2. Curriculum]</p>	<p><b>FISDAP Tracking System</b></p> <ul style="list-style-type: none"> <li>• T. O'Connor indicated that the paramedic program submitted for a new competency tracker software, to take old</li> </ul>	<p>No</p>		

	<ul style="list-style-type: none"> <li><input type="checkbox"/> Student Minimum Competency (formerly known as the Appendix G)</li> <li><input type="checkbox"/> Review summary graduate tracking reports</li> </ul>	<p>information and move it to a new FISDAP tracking system. This goes into effect January 21, 2023-</p> <p><b>Recommendation to maintain minimum competencies:</b></p> <ul style="list-style-type: none"> <li>• Dr. Larsen recommends submitting for a minimum number of contacts. If there are deficiencies within a cohort, he would like to address the specific cohort, as opposed to raising the minimum contacts and making students struggle to achieve those minimums. The goal is to implement minimum contacts with the new cohorts beginning August 2023.</li> </ul> <p>K. Blum requested a motion to approve keeping the minimum amount of contacts. J. Terrusa motioned to approve. T. Larsen seconded.</p>			
<p>7.</p>	<p><b>Review the program’s annual report and outcomes</b>                  [CAAHEP Standard IV.B. Outcomes]</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Annual Report data</li> <li><input type="checkbox"/> Thresholds/Outcome data results</li> <li><input type="checkbox"/> Graduate Survey results</li> <li><input type="checkbox"/> Employer Survey results</li> <li><input type="checkbox"/> Resources Assessment Matrix results</li> <li><input type="checkbox"/> Other</li> </ul>	<p>All marks on the report were above the minimum 70% threshold.</p> <p><b>Graduate employer survey format:</b></p> <ul style="list-style-type: none"> <li>• T. O’Connor is looking at streamlining this survey and creating a Google form to collect the data.</li> <li>• President, K. Hoffmans, recommends working with the Ventura College Institutional Researcher, Phillip Briggs, to develop a survey and facilitate data entry into a spreadsheet.</li> </ul> <p><b>Annual Resource Assessment Matrix findings:</b></p> <ul style="list-style-type: none"> <li>• More classroom space is needed</li> <li>• Additional instructors are needed</li> <li>• Fix ongoing AC issues</li> <li>• Preceptor survey revealed all positive experiences except one.</li> </ul>	<p>Yes</p>	<p>T. O’Connor work with P. Briggs</p>	<p>2023 academic year</p>
<p>8.</p>	<p><b>Review the program’s other assessment results</b>                  [CAAHEP Standard III.D. Resource Assessment]</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Long-range planning</li> <li><input type="checkbox"/> Student evaluations of instruction and program</li> <li><input type="checkbox"/> Faculty evaluations of program</li> <li><input type="checkbox"/> Course/Program final evaluations</li> </ul>	<p><b>Current student feedback and recommendations:</b></p> <ul style="list-style-type: none"> <li>• Students recommend shortening the lunchtime and using the extra 30 minutes to arrive later in the morning, especially for students who commute from outside Ventura County.                         <ul style="list-style-type: none"> <li>○ T. O’Connor indicated that a previous cohort advocated for a longer lunch to get exercise in, and to allow faculty</li> </ul> </li> </ul>	<p>No</p>		

<p>☐ Other evaluation methods</p>	<p>to have time for lunch, office hours, and to reset to sustain an 8-hour teaching day. Starting at 0700 aligns with most clinical shifts and helps develop the habit of arriving on time, in uniform, and alert in preparation for clinical rotations. It also avoided high school and parking issues.</p> <ul style="list-style-type: none"> <li>○ The campus gym is expected to re-open in the 2023 Spring semester.</li> <li>○ J. Terrusa suggested a group exercise session during the 30-minute lunch such as Pilates, stretching, and others to further build camaraderie.</li> </ul> <ul style="list-style-type: none"> <li>• Students recommend adding more skills days.             <ul style="list-style-type: none"> <li>○ When there are limited skills instructors, students only get one rep to practice.</li> <li>○ T. O'Connor indicated that it's a challenge to secure skills instructors due to all of the mandates. We have 45 skills instructors hired, yet still struggle to fill 4 spots on Mondays and Fridays, especially on Fridays.</li> </ul> </li> <li>• Students recommend moving the part-time cohort from a Friday/Saturday schedule to a Thursday/Friday schedule.             <ul style="list-style-type: none"> <li>○ T. O'Connor considers this a practical option to ensure students are on campus during regular business hours from a safety standpoint, and for increased access to campus resources. It would require the use of two rooms on Thursdays and doubling staff.</li> </ul> </li> <li>• Students recommend to start IVs on each other.             <ul style="list-style-type: none"> <li>○ T. O'Connor indicated that state regulations allow the paramedic scope of practice to be active during emergency response and for people in need of this procedure. However, practice for practice's sake crosses the line of invasive and practice out of location.</li> <li>○ T. Larsen and C. Rosa confirmed that medics operate under a deliberately limited scope. The state policy and limitations are drawn intentionally due to interest groups.</li> <li>○ M. Corney helped the PM Program secure upgraded IV starter equipment which are close to real. Based on her</li> </ul> </li> </ul>			
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		<p>experience, interns will have ample IV-start opportunities in the hospitals.</p>			
<p>9.</p>	<p><b>Review program changes (possible changes)</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Course changes (schedule, organization, staffing, other)</li> <li><input type="checkbox"/> Preceptor changes</li> <li><input type="checkbox"/> 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><b>Ongoing Staffing Concerns:</b></p> <ul style="list-style-type: none"> <li>• T. O’Connor shared that one of the biggest struggles is hiring and retention of faculty. Most recently, the Department has had to hire 1-2 times per semester. This results in an overtaxed system with not enough faculty.</li> <li>• The Chancellor’s Office lists the minimum qualifications for teaching vocational programs as a Bachelor’s Degree with 2 years of experience of an Associate Degree with 6 years of experience. There are instructors with decades of experience, but no degree and they are no longer eligible to teach.</li> </ul> <p><b>Revisions to State Regulations due to ongoing challenges with preceptorship and faculty shortages.</b></p> <ul style="list-style-type: none"> <li>• At the November CEMSEA (state educators) meeting, state representatives were present and advised that regulations will be open in 2023 and they are open to input from CEMSEA.</li> <li>• C. Rosa hopes that the previous two years challenges and extreme staffing and preceptor shortages will show stakeholders that regulations and requirements as currently written are not working. He recommends that state Program Directors reach a consensus and work with Dr. McElhenie on drafting public comments, compiling supporting documentation, and provide significant justification to propose re-writing State regulations.</li> <li>• The Program feels they have done everything it can to support efforts to secure preceptors, including regular visits by program faculty to internship sites to support student and preceptor, 24-hour on call-availability to preceptors, hosting Simulation Days as a preceptor training opportunity, developing a 40-page packet on how to intercept and troubleshoot problems, and hosting preceptor trainings which had low to zero attendance.</li> <li>• Attendees discussed running the preceptor training through VCEMS rather than through the educational institutions to</li> </ul>	<p>Yes</p>	<p>CEMSEA must intervene in re-writing of State Reg opening 2023</p>	

		<p>maintain consistency, as opposed to VC and MC having different standards which are unfair to the preceptor.</p> <ul style="list-style-type: none"> <li>• J. Everlove affirmed that MC is not looking to operate independently, or to put duplicate or conflicting standards. MC is grateful to be part of the preceptor training in the interest of preparing students.</li> <li>• C. Rosa suggests working together between agencies and do a shared class. The standards for preceptors are set and clearly established in Policy 319. However, delivery and expanding preceptor training is up to this Advisory Committee and the agency representatives overseeing the Advisory Group.</li> <li>• T. O'Connor shared that he has discussed the concerns with Dr. Shephard and the need to look into out-of-county preceptor requests to avoid reducing class size to match local preceptor availability.</li> <li>• The program does not want to send interns to Fillmore because it will take too long to get patient contacts.</li> <li>• State requires preceptors have at least two years of experience. C. Rosa does not feel that reducing this to 1 or 1.5 years is the best solution, as it would require significant quality insurance to make VCEMS and Dr. Shephard comfortable. Even with a high call volume and patient contacts, one year of experience is not a long time.</li> <li>• J. Everlove assured that the MC PM program calendar would not interfere with the VC calendar for preceptorship. MC in looking to have students in the field in October/November range.</li> <li>• Even with allotted intervals, T. O'Connor recommends VC and MC have an alternate plan for situations when interns run past their time into the other school's allotted time.</li> </ul> <p><b>Possible changes to course scheduling and curriculum:</b></p> <ul style="list-style-type: none"> <li>• PM faculty are considering moving some portions of the class to a hybrid format to allow for decreased amount of time in the classroom.</li> <li>• PM faculty wish to significantly increase instruction in med math.</li> <li>• VCCCD is discussing the possibility of modifying the 18-week semester to a 16-week compressed calendar.</li> </ul>			
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<p>10.</p>	<p><b>Review substantive changes</b> (<i>possible changes</i>)                  [CAAHEP Standard V.E. Substantive Change]  <input type="checkbox"/> Program status  <input type="checkbox"/> Sponsorship  <input type="checkbox"/> Sponsor administrative personnel  <input type="checkbox"/> Program personnel: PD, Lead Instructor, other  <input type="checkbox"/> Addition of distance education component  <input type="checkbox"/> Addition of satellite program</p>	<p>No changes</p>	<p>No</p>		
<p>11.</p>	<p><b>Other identified strengths</b></p>	<p>J. Williams indicates that the Prism immersive simulator is a great tool and he commends the program for securing this technology.</p> <p>J. Williams indicates that everyone who has completed the VCCCD EM Programs has done a good job, and it ultimately comes down to the student, not always the school. J. Blaker concurred, that it doesn't matter where the training is obtained. Whether it's VC, MC, or UCLA, it all comes down to the effort put in by the student.</p> <p>A. Calderon is grateful VC is offering a part-time program, especially for students who have families. Although it takes longer to complete, it provides someone like him an opportunity to attend paramedic school. Due to his ER union, he works every other weekend. After a full-day of school, he goes straight to work.</p> <p>T. O'Connor shared that in the first PM part-time class, one student commuted 3.5 hours because it was the only program available that fit their schedule so that he could remain employed to support his family.</p> <p>S. Virto is grateful that some students are being sponsored by their employers.</p>	<p>No</p>		
<p>12.</p>	<p><b>Other identified weaknesses</b></p>	<p>Inter-rater reliability of preceptors, unequal call response volumes by unit, and transport vs. non-transport internship opportunities challenge the students and the program to find efficient and effective methods of completing the program within the allotted timeframe. The program has consistently issued incompletes for students to allow additional time to meet program exit requirements.</p>	<p>No</p>		

13.	<b>Identify action plans for improvement</b>	Continue to promote PM V95 for students without 911 experience. Add a 1-unit version of PM V95 to run concurrently with clinical rotations. Research alternative data tracking platforms to replace FISDAP.	Yes Yes Yes	Tom Tom Tom	Spring 2023 Summer 2023 Fall 2023
14.	<b>Other comments/recommendations</b>	<p><b>Additional comments about the new Moorpark College Paramedic Program</b></p> <ul style="list-style-type: none"> <li>• J. Everlove indicated that the new MC PM program follows a similar Course Outline of Record as VC's PM Theory and Clinical Practicum.</li> <li>• Program admission does not include an Anatomy and Physiology pre-requisite.</li> <li>• Program admission will not require 1,000 hours of prehospital experience, but experience is an advisory recommendation.</li> <li>• T. O'Connor offered to assist with the development of a PM V95 course.</li> <li>• The program will bridge multiple semesters starting in May through the end of the college calendar. T. O'Connor shared that, similarly, the VC part-time cohort bridges semesters which causes some headaches. From an A&amp;R perspective, it sets up the course to be a positive attendance class the entire semester. From a financial aid standpoint, it limits students' financial aid disbursements. J. Everlove shared that A&amp;R is part of their workgroup and is helping to solve some of those issues.</li> </ul>	No		
15.	<b>Staff/professional education</b>	Decreasing opportunities to travel to EMS Education related events due to CA AB 1887 travel ban. Grant funding also decreasing to support travel out of the area combined with increased costs of attending conferences are a considerable factor.	No		
16.	<b>CoAEMSP/CAAHEP updates</b>	COAEMSP and CAAHEP has an update to student competency requirements for cohorts starting after January 1, 2023. Next cohorts will start in August 2023 and will be under the new requirements. Current cohorts do not need to adjust.	No		
17.	<b>Next accreditation process</b> (i.e., self-study report, site visit, progress report)	T. O'Connor submitted the VC Paramedic Program's Self-Study in 2021. Accreditors have rescheduled the site visit to the 2023 Fall Semester because they are backlogged. The last accreditation visit was in 2015	No		

		with approval in 2016. The accreditation site visit is nearing 8 years this cycle.			
18.	Other business	None	No		
19.	Next meeting(s)	<p>In an effort to avoid duplication and to better utilize resources and time, T. O'Connor and J. Everlove agreed to merge both Paramedic Advisory Committee Meetings and alternate hosting each year. There was consensus for MC to host the 2023 Advisory Meeting. J. Everlove will have additional people to add to the Advisory Group.</p> <p><b>Next meeting:</b> Friday, December 1<sup>st</sup>, 2023 at Moorpark College.</p>	Yes	<p>MC will host the next Paramedic Advisory Meeting.</p> <p>T. O'Connor will email a save the date to the committee.</p>	December 2023
20.	Adjourn	Meeting adjourned at 4:43pm.			

Minutes prepared by Thomas O'Connor and Sabrina Canola-Sanchez

Date 12/15/2022

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.