Date: 06/03/2019			Time: 1030-1230	Location: CAH
Leader: John Pinks	ster		Recorder: Terri McDonal	d
Members:	Present:	М	Absent:	Guests:
	5	/ Murray	Patti Henning	
	5	Abendshein	Moriya Hurst	
		Chris Milligan (phone)	Chris Stoven	
	-	William Fales (phone)	Salina Shubik	
	Susan Kay Ryan		Bethel Menzwe	
	Robert Lohrberg			
	Craig Dieringer			
AGENDA ITEM	DISCUSS	SION	CONCLUSIONS/	FOLLOW UP/
			RECOMMENDATIONS	RESP. PARTY
Call to Order	• Called to Order at 1030		N/A	N/A
Minutes	Review of Previous Minut	tes: no changes or corrections	Motion to approve by	
	to the previous meeting m	inutes	Robert & seconded by	
			Craig.	
Advisory Board	Introduction: Bethel Men:	zwe	Student representative (Bethel)	
Open Positions			could not attend because employer	
			had her travelling to Houston.	
			Salina is the previous	
			representative but was in clinic	
			today and she will stay on as a	
			graduate representative	
Accreditation	Surveys		Assessment / self-study for re-	
Issues:	◦ RAM		accreditation - self assessment	
	Survey Monkey; Employe	er Surveys	matrix to help determine if	

		program is sufficient with resources. Watch question wording with what is asking. Hoping to submit self-study early study due 9/1 and recent cohort graduates 8/24. Can be submitted between Aug 1 – Sep 1.	
Classes and Enrollments:	Enrollment by Level: Review of Analytics Dashboard	 Fall 18 example 1700 all of health and public safety 55 EMS program Fall term up a little bit – biggest increase in EMT programs from 16 to 21 summer looks good – 15 applications for fall with others applying to other programs – lots of interest. Work needed on program guide because students are a little confused between EMT and Medic. Improvement needed to better understand the differences. Eliminated certificate program and now degree only option Seeing an increased enrollment with HS students dual enroll. Encouragement needed for HS 	Amy Murray working on the updated program guide.

	students to continue with	
	paramedic program	
	parametre program	
	4	
	Age profiles: younger population	
	because of HS students 20 -24	
	year olds.	
	Racial diversity 80% Caucasian	
	compared to the college overall	
	<i>at</i>	
	Work needed for recruiting	
	minority populations looking at	
	grants to help this population.	
	This was also mentioned at last	
	advisory board meeting.	
	davisory bourd meeting.	
	Are we passing students that	
	should not pass? How does this	
	affect board exams? Compare grade	
	breakdown vs board exam results.	
Satellite Location: Niles, SMCAS	Contract in progress with Lakeland	Robert will bring up at
,	to include EMS, nursing, and	Berrien County medical
	respiratory as a clinical venue	control moving forward
		with certification and
	Zoom contract with college for	programs & clinical
	streaming in real time with	contract
	students. Important to get	
	Lakeland contract in place before	
	Spectrum takes over.	
	Spectrum takes ever.	

		Inviting representative to advisory board when site has been approved.
CLINICAL	Contract and Clinical Requirements: specialty unit concerns	Shift pediatrics and OB clinical from summer to winter term – find time to schedule students from OB to PICU. Lakeland has OB services that can be used too Pediatric office via WMed clinic on Mall Drive in Portage (follow up Dan)
	Medical Director Review and Approval of Appendix G requirements	Medical director review: Previously Dr. Fales looks at guidelines and recommends approve min co amps Motion: made by Fales to approve min CoA for appendix G Supported by Robert APPROVED

	Needs proof about the number of trauma patients related to pediatrics – difficult in PICU because census is down Infant/toddler age ranges struggling with needs
W-Med Donor Lab Experience	On June 25 taking paramedic class to donor lab at med school. Cadavers will be pliable for students to intubate, needle decompression, and maybe external jugular probe. Cost about \$3,300.
	Patti H working on funding with hopes for a routine part of paramedic class with donor lab. Thanks to Bethany McGuffin.
	Motion presented for advisory board advisory to support continued funding that experience. Motion John & Craig seconded

National Registry or MDHHS Issues:	Pass Rates	Through institutional research access via database by entrance scores and prerequisites. How to add pass rates into that database with GPA - that will be forthcoming only have aggregate data today Pass rates for fall 2016 – current term 133 student MFR 27 have taken
		national registry – vast majority are transfer students historically – in fall 2018 first semester 40 MFR students most went through EMT and did not test MFR level – technical everyone tests out – first time attempt pass rate 69% - accumulative pass rate 85% within 3 attempts – currently have 3 eligible to re-test. 1 person did not complete
		EMT same time frame 139 EMT grads – 120 attempted exam – 65% first time pass rate – cumulative 79% a little bit of

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		work needed to increase numbers –	
		continue to tell students they can	
		still be successful as a paramedic	
		exam — new curriculum should	
		help with the testing – 9 credit	
		class in 12 weeks now doing over	
		24 weeks – no data yet on first	
		cohorts testing hopeful for increase	
		in pass rates	
		Paramedic pass rate first attempt	
		fell from $86 - 81\%$ cumulative at	
		94% within 3 years 32 grads 31	
		attempted	
		2017 grads 10 grads practical	
		exam 9 passed 1 passed again	
		1 1 0	
		2018 5 grads pass out of 6	
		0 1 5	
		EMT in line with state averages	
		ð	
		Concerned about MFR low pass	
		rates	
	New Practical Exam Licensing Process for Paramedics	New exam registration with new	
		vendor via EMS website. Change	
		in procedure for testing in MI with	
		new time frames in place. It's	
		important to be familiar with dates	
		ingorodite to be familiar with dates	
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	Infant Warmers with Training Memo	State released a training memo for infant warmers for uniform way to keep baby warm while transporting to hospital no skin to skin contact. Infant warmers are here.
Curriculum:	Curriculum Approval/Review	Almost completed review and approval — first year with new structure — paramedic this fall Dr. Fales and Chris sent information for their feedback related to curriculum specific to suction baby during birth — deviating from national registry mandated forms
	BDLS Incorporated into EMT	BDLS is now an EMT course
	Prerequisite Courses	Prerequisite courses implemented some changes students were getting counseling that bio 110 and 210 were needed w/o psych and comm classes - college procedure updated did not need to go through board approval
	AAS degree approved changes	AAS degree approved changes see above

	Online Pharmacology Course, change hybrid model	Online pharm course – 8 students took class (5/6 this summer) per students 100% online no face to face and students wanted some face to face opportunities – no one met with learning assistants – students would like hybrid model – will now be hybrid model – winter of 2020
Capital Equipment Purchases and Budget:	Review of Leaning Assistant Program	Review LA Program – reapplied for grant via Perkins – continue program – instructor recommend, self-referral – 3 tutors offered 65 sessions – open labs most utilized – EMS has competency requirement cohorts experienced less failed initial attempts other session included unit exams midterms & finals – students feel this is important and reason to continueFaculty commented on improved student performance-LA provide time on tasks to help with continued success of students
	Review of Budget	Language for Perkins funding for cadaver lab experience

		Received stair chair via perkins &
	Recommendations	simulate vest
Future Directions of EMS Program: Program Goals and Objectives:	 CSSR due 09/01/2019 Site Visit: February or March of 2020 	Self-study due 9/1 will be getting info about patients seen, etc & call volumes, etc. Advisory board will meet with CoA
		site team February or March next year
Other:		MFR testing Program guide Amy students having positive comments about OB clinical
Next Meeting:	• Date and Time TBD	Meeting adjourned at 1230

Respectfully Submitted,