



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.

Present: Craig Dieringer, Dr. William Fales, Moriya Hurst, Amy Murray, Faith Bentley, Tanya McFadden, Diane Fort, Dr. Chris Milligen, Michael Bentley, Ana Abendschein, Kylie Werner, Jess Hanley, Julianna Frye

SPONSOR / INSTITUTION NAME:	Kalamazoo Valley Community College		
CoAEMSP PROGRAM NUMBER:	600276	DATE, TIME, + LOCATION OF MEETING:	December 9, 2022 @ 1300, CAH Private Dining Zoom option
CHAIR OF THE ADVISORY COMMITTEE:¹	John Pinkster		

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)			
Employer(s) of Graduates Representative	John Pinkster Robert Lohrberg Brian Scribner	A Kylie Werner A	Life EMS Pride Care SMCAS
Key Governmental Official(s)	Craig Dieringer	P	5 th District Medical Response Coalition
Police and Fire Services			
Public Member(s)	Lee Adams	A	UpJohn Foundation
Hospital / Clinical Representative(s)	Spenser Bogdan Jess Hanley	Z	Borgess/Ascension Bronson Health Group
Other	Mike Bentley Diane Fort Marilyn Hess	P P A	Kalamazoo MCA, 5 th District Regional MCA KRESA Plainwell Public Schools
Faculty ²	Moriya Hurst	P	KVCC
Sponsor Administration ²	Tanya McFadden Amy Murray Ana Abendschein	P P Ben Herbert	Dean, KVCC Health Careers Admissions, KVCC Pathway Advisor, KVCC

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

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
	Chris Stroven	A	Counseling, KVCC
Student (current)	Julie Frye	P	
Graduate	Jackson Couch Jared Birman	A A	Class of 22 Class of 21
Program Director, <i>ex officio</i> , non-voting member	Daniel Benard	P	KVCC
Medical Director, <i>ex officio</i> , non-voting member	William Fales, MD Christopher Milligan, DO	P P	Medical Director, Stryker School of Medicine Associate Medical Director, Envision Health (EMPG)
Satellite Representative	Max Kulpinski	A	Tri-Township Fire
³			

Agenda Item		Discussion	Motions, Action Required	Lead	Goal Date
1.	Call to order				
2.	Review and approval of meeting minutes		Mike Bentley motioned, Dan Benard seconded.		
3.	<p>Endorse the Program’s minimum expectation: Fall Agenda Item; [CAAHEP Standard II.C. Minimum Expectation]</p> <p><input type="checkbox"/> Adopted verbatim (see last page)</p> <p><input type="checkbox"/> Establish / review additional goals⁴</p>	tabled			
4.	<p>Endorse the Program’s required minimum numbers of patient/skill contacts for each of the required patients and conditions: Spring Agenda Item [CAAHEP Standard III.C.2. Curriculum]</p> <p><input type="checkbox"/> Student Minimum Competency</p> <p><input type="checkbox"/> Review summary graduate tracking reports</p>	<p>Dan read the mission.</p> <p>Update from the student competency matrix for most recently graduated class. 2023 SMC Implemented with current class. Adopted all at minimums excepting team lead of 40 at last meeting.</p>	Motion to adopt by Dr. Milligan and seconded by Dr. Fales. All in favor.		

³ Add rows for multiple members of the same community of interest. If the program has additional named communities of interest, list name(s) that represent each community of interest.

⁴ Additional program goals are not required by the CAAHEP Standards. If additional program goals are established, then the program must measure them.

Agenda Item		Discussion	Motions, Action Required	Lead	Goal Date
5.	Review the program's annual report and outcomes [CAAHEP Standard IV.B. Outcomes] <ul style="list-style-type: none"> <input type="checkbox"/> Annual Report data <input type="checkbox"/> Thresholds/Outcome data results <input type="checkbox"/> Graduate Survey results: <input type="checkbox"/> Employer Survey results: <input type="checkbox"/> Other 	2020 standards fell slightly below threshold: Attrition, Pass Rates and Employment. 3 graduates; 2 are currently registered, one employed, one deported although technically working in EMS. CoA accepted annual report. MDHHS required PIP.	Update webpage with new data	Benard	
6.	Review the program's other assessment results [CAAHEP Standard III.D. Resource Assessment] <ul style="list-style-type: none"> • Resources Assessment Matrix: <ul style="list-style-type: none"> ○ distribute 2022 survey • Course/Program final evaluations • Enrollment data by level and location (Amy) • Other evaluation methods 	<ul style="list-style-type: none"> • Performed very well on assessment matrix. • Amy shared program enrollment data <ul style="list-style-type: none"> ○ Get with Amy on data • Will be moving the information sessions to the CAH 	<ul style="list-style-type: none"> • Dan shared results of student resource survey. • Dan asked the advisory board to fill out Program Surveys. To date, only 3 responses. • Kylie suggested that KVCC reach out to Fire Departments to discuss EMT matriculations. <ul style="list-style-type: none"> ○ Marketing needs to provide specific sheets to fire department ○ Perhaps present at the Chief's meeting. ○ Reach out to Pfizer. 	<ul style="list-style-type: none"> ○ Moriya ○ Dan ○ 	
7.	CoAEMSP/CAAHEP updates				
8.	Next accreditation process (i.e., self-study report, site visit, progress report)	State sponsored renewal through November 30, 2025. Annual reports will be due May 15 2023 and July 30, 2023			
9.	Perkins Core Performance Indicators (Spring Agenda Only) <ul style="list-style-type: none"> • Satisfaction with student placement • Satisfaction with skill level of graduates • Gaps in skills • Gaps in the program 	N/A			

Agenda Item		Discussion	Motions, Action Required	Lead	Goal Date
	<ul style="list-style-type: none"> Suggestions for improving student/graduate success 				
10.	<p>Review program changes (possible changes)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Course changes <input type="checkbox"/> Preceptor changes <input type="checkbox"/> Clinical and field affiliation changes <input type="checkbox"/> Curriculum changes <ul style="list-style-type: none"> o Content: o Sequencing: 	<ul style="list-style-type: none"> o Looking at separating out matriculation course sequence because the change to the term from 8 weeks to 7 weeks reduces lab time. May change part of term to 12 week or a full 14 week term. This would require separating out the MFR, EMT 105 from the EMT course sequence and restoring the inactive classes of EMT 108 and EMT 109 for the EMT process. This would eliminate the progression from MFR to EMT and require separate cohorts for matriculation students. There was discussion on the matriculation course options and that this runs counter to what Fire wants in a short/concise course. 	<p>Dan and Moriya will continue to collaborate on scheduling options. This will be a topic for next board meeting.</p>	Benard	
11.	<p>Review substantive changes (possible changes) [CAAHEP Standard V.E. Substantive Change]</p> <ul style="list-style-type: none"> • Program status: Sponsorship <ul style="list-style-type: none"> o Satellite • FERPA guideline changes • Advanced Placement Policy RN • Health Careers Handbook • Holistic Admissions process • Personnel Changes • Distance Education 	<ul style="list-style-type: none"> • FERPA guidelines changed; students may not switch CRNs. A way around is to cross-list classes. Currently this ends interdisciplinary and team simulations. • Nursing piloted a Holistic Admissions process. This process opens up enrollment to the best students, not the best GPA. The move to this process is planned for fall of 2023. • RN Completion program has been opened up to advanced placement, this will include EMT, RCP, MAT. <ul style="list-style-type: none"> ▪ Nursing pre-req will need to be met (within 7 years.) • The College would like the Health Careers to adopt one handbook for all programs. • Dan would like to recommend Ryan Davis as subject matter expert. 	<ul style="list-style-type: none"> • Diane Fort suggested that Health Science student within KRESA are offered points. • Explorer programs should be considered as well. • Dr. Milligen motioned Davis approval, Amy Murray seconded. All approved. 	Benard, file SME paperwork with MDHHS	
12.	Upcoming Courses				
13.	Staff/professional education				

Agenda Item		Discussion	Motions, Action Required	Lead	Goal Date
14.	Long Range Planning [Future Directions of the EMS Program: New and Emerging Trends]				
15.	Registration and Licensing Issues <ul style="list-style-type: none"> • New MDHHS EMT portfolio and final exam testing process • NREMT TEI on exam • NREMT discontinuing practical exam 	BLS Competency Portfolio: 20 skills prior to scenario testing for licensure. 3 12-min scenarios: medical, trauma, peds. Lead instructors cannot participate in testing. PD must act as exam coordinator. PMD recommended to be on site. Will require hiring standardized patients and clinicians who act specifically as exam proctors.			
16.	Capital Equipment Purchases and Budget <ul style="list-style-type: none"> • Review Budget (review ops budget) • Recommendations 	Still awaiting Perkins approval for stop the bleed and video laryngoscope that were requested for FY23.			
17.	Strengths				
18.	Weaknesses				
19.	Opportunities	<ul style="list-style-type: none"> • Dan is going to write for a grant for EMS students. Paramedic only however prerequisite courses may be applied for since we are a degree program. EMS Workforce Grant: \$30M through FY2026 in state budget, current is \$9M through end of fiscal year. • Reimbursement to EMT students for winter and summer; covers all costs including incidental • Daycare 	<ul style="list-style-type: none"> • Dan asked the board to submit specific workforce needs • Admin support will look at creating Facebook page • Dan/Moriya will connect with Faith/Dawn about posters 		
20.	Others: other business, open comment				
21.	Next meeting(s)	March 3, 2023; TTC; Noon [Lunch Provided]			
22.	Adjourn				

Minutes prepared by _____

Date _____

Minutes approved by _____

Date _____

If item #4 above [**Endorse the Program's required minimum numbers of patient/skill contacts for each of the required patients and conditions**] 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 #5 above was acted on*)

Endorse the Program's minimum expectation

[CAAHEP Standard II.C. Minimum Expectation]

- "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."

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.