



Advisory Committee Meeting Minutes

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

SPONSOR / INSTITUTION NAME:	Kalamazoo Valley	lamazoo Valley Community College						
COAEMSP PROGRAM NUMBER:	600276	DATE, TIME, + LOCATION OF MEETING:	Friday, March 3, 2023 1130-1400 TTC 4240 for opening session and lunch, breakout room					
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)	John Pinkster Robert Lohrberg Brian Scribner	X Kylee Werner Absent	Life EMS Pride Care SMCAS					
Key Governmental Official(s)	Craig Dieringer	Absent	5 th District Medical Response Coalition					
Police and Fire Services								
Public Member(s)	Lee Adams	absent	UpJohn Foundation					
Hospital / Clinical Representative(s)	Spenser Bogdan Jess Hanley	Absent absent	Borgess/Ascension Bronson Health Group					
Other	Mike Bentley Diane Fort	Absent absent	Kalamazoo MCA, 5 th District Regional MCA KRESA					
Faculty ²	Moriya Hurst	Х	KVCC					
Sponsor Administration ²	Tanya McFadden Amy Murray Ben Herbert Chris Stroven	X X Absent absent	Dean, KVCC Health Careers Admissions, KVCC Pathway Advisor, KVCC Counseling, KVCC					
Student (current)	Juli Frye	Х	Class of 23					
Graduate	Jackson Couch	Х	Class of 22					

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

2019.03

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		
	Jared Birman		Class of 21		
Program Director, ex officio, non-voting member	Daniel Benard	X	KVCC		
Medical Director, ex officio, non-voting member	William Fales, MD	X	Medical Director, Stryker School of Medicine		
	Christopher Milligan, DO	absent	Associate Medical Director, Envision Health (EMPG)		
Satellite Representative	Max Kulpinski	Absent	Tri-Township Fire		
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	Agenda Item	Discussion	Motions, Action Required	Lead	Goal Date
1.	Call to order				
2.	Review and approval of meeting minutes				
3.	Endorse the Program's minimum expectation: Fall Agenda Item; [CAAHEP Standard II.C. Minimum Expectation] Adopted verbatim (see last page) Establish / review additional goals ⁴				
4.	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] Student Minimum Competency Review summary graduate tracking reports		Put forth the recommendation that the September 7 th 2023 class, graduating in August 20 th 2024, meets the minimum COA recommendations	Motion moved by Pinkster Seconded by Murray	
5.	Review the program's annual report and outcomes: Fall Agenda Item; [CAAHEP Standard IV.B. Outcomes] Resources Assessment Matrix				

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
	 □ Graduate Survey results: □ Employer Survey results: □ Annual Report data □ Thresholds/Outcome data results □ Other 				
6.	Review the program's other assessment results [CAAHEP Standard III.D. Resource Assessment] Course/Program final evaluations Enrollment data by level and location (Amy) Other evaluation methods				
7.	CoAEMSP/CAAHEP updates				
8.	Next accreditation process (i.e., self-study report, site visit, progress report)				
9.	Perkins Core Performance Indicators: Spring Agenda Item; Satisfaction with student placement Satisfaction with skill level of graduates Gaps in skills Gaps in the program Suggestions for improving student/graduate success				
10.	Review (possible) program changes Schedule Changes Course changes Preceptor changes Clinical and field affiliation changes Curriculum content or sequencing changes	 Moved the pharmacology course from Hybrid to Traditional In-Person BIO 110 and 210 Instead of being Anatomy and Physiology it will be split into Anatomy and Physiology I & II Current BIO 110 and 210 will still be acceptable for the next few years during this transition period 			

	Agenda Item	Discussion	Motions, Action Required	Lead	Goal Date
11.	Review (possible) substantive changes [CAAHEP Standard V.E. Substantive Change] Program status: Sponsorship Satellite FERPA guideline changes Advanced Placement Policy RN Health Careers Handbook Holistic Admissions process Drug Screening Personnel Changes Distance Education	 The new Anatomy and Physiology I & II will be labeled as BIO 115 and 215 respectively We are accredited through 2028 – KHAP is raising their annual fees from \$450 to \$500 Holistic Admissions Process The grade point average carries half the admission points Students will receive a series of questions on life values, perspectives on leadership, morals, etc. 100 word maximum answer in each category (Worth 40 points) 10 points for other admissions criteria Other questions applicable to the Paramedic level only – not EMT Are you in or out of district, do you hold additional license, did you take your prerequisites at KVCC, are you a KVAAP student, did you come to us through KRESA, previous degree experience, etc. Students will be unidentifiable – attempting to make changes so that the person doing the reviewing may only review 1 anonymous application at a time as to remain unbiased 			
12.	Upcoming Courses				
13.	Staff/professional education	Currently pursuing PERKINS funding to be able to hire new learning assistants in order to be able to hold open labs for students again			

	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 • New MDHHS EMT portfolio and final exam testing process • NREMT TEI on exam • NREMT discontinuing practical exam	 A different style of testing for Medical First Responder and Basic EMT classes are now mandated to use a different style of final practical testing for the state Required to use new portfolio and final practical testing after January 1st, 2023 Potential to have an additional separate day just for testing Benefits: fewer people to test overall Negatives: A student will have to wait until the end of that semesters term if they change their mind about wanting to take the exam KVCC is pushing to have students pay for testing if it's held on a separate day (The state does not charge for MFR licensing) Having to wait 2 weeks to retest Practical test and issues with questions The scenario questions are inconsistent Instructors who were substantially involved in teaching the course are not allowed to administer the exam National registry made changes to the exam by adding new questions New exam launches July 1st, 2024 After June 30th 2025 there will no longer be a psycho motor exam Potential to collect the exam fee as part of the overall KVCC tuition – this would allow students to just register for the exam Potential to get state dollars to cover the fee in order to remove barriers from students who can't pay for it after the course has been completed 			

	\$192,000 grant approval (Begins February 1 st 2023) – should include the second half of winter courses					
Capital Equipment Purchases and Budget EMSW-2023 Grant Opportunity Review Budget (review ops budget) Recommendations	 Begin to look at reimbursements after the Federal Financial Aid count (March 6th 2023) Students summer courses will be paid for through the grant Next year's paramedic class will have all their Fall courses paid for Drug testing will be paid for Students will also be given a \$250 uniform stipend Went over budget this year \$2600 deficit in the Lab budget – taking from the Classroom Supply budget \$6000 is on reserve 					
Strengths						
Weaknesses						
Opportunities						
Others: other business, open comment						
Next meeting(s)						
Adjourn	Adjourned at 2:25pm					
Minutes prepared by Tiffany Kuriata Date						
	Review Budget (review ops budget) Recommendations Strengths Weaknesses Opportunities Others: other business, open comment Next meeting(s) Adjourn utes prepared by Tiffany Kuriata	Review Budget (review ops budget) Recommendations Recomm	Review Budget (review ops budget) Recommendations Courses paid for Drug testing will be paid for Students will also be given a \$250 uniform stipend Went over budget this year \$2600 deficit in the Lab budget — taking from the Classroom Supply budget \$5000 is on reserve Strengths Weaknesses Opportunities Others: other business, open comment Next meeting(s) Adjourned at 2:25pm Date	Review Dudget (review ops budget) Recommendations Recommendations Recommendations Recommendations Recommendations Purg testing will be paid for Students will also be given a \$250 uniform stipend Went over budget this year \$5000 deficit in the Lab budget — taking from the Classroom Supply budget \$5000 is on reserve Strengths Weaknesses Opportunities Others: other business, open comment Next meeting(s) Adjourned at 2:25pm Date		

I	f item #4 above i	Endorse the Prog	aram's red	auired minimum	numbers of	f patient	/skill contacts	for each o	f the reau	uired i	patients and	conditions	1 was acted or	າ. ther

Me	edical Director's signature _				Date	
•	Attach Student Minimun	n Competency (formerly known as th	e Appendix G) > Table 1 to veri	y which required minimum	numbers were reviewed a	nd 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.