Paramedic Advisory Committee Thursday, October 13, 2011 Minutes

Members Present

Bernie Horak, Chair – San Bernardino City Fire Department, Public Agency Representative Terry Flores, Vice-Chair – American Medical Response, Private Agency Representative Grant Malinowski, Cal Fire, Yuciapa, Public Agency Representative Noelle Drazin, American Medical Response, Former Student (Class 72)

June Yamamoto, Crafton Hills College, College Administration Representative Terry Koeper, Crafton Hills College, Department Chair, Public Safety and Services Bryttany Ferguson, American Medical Response, Former Student (Class 75)

Bob Tyson, Redlands Community Hospital, Hospital Representative Kathy Crow, Crafton Hills College, Paramedic Program Faculty

Naomi Lara, Crafton Hills College, Paramedic Program Classified Staff

John Mueller, Inland Counties Emergency Medical Services Agency, Governmental Representative Kevin Chao, KR Chao & Associates, Community Representative

Dan Word, Crafton Hills College, Director of Paramedic Education

Members Absent

Phong Nguyen, Redlands Community Hospital, Paramedic Program Medical Director

Guests Present

None

Call to Order

Meeting called to order by Bernie Horak at 12:40 p.m.

Minutes

The March, 2011 minutes were approved by consensus.

Paramedic Program Updates

Results of Assessment Testing: Data sent to Office of Research & Planning, because of time constraints data has not been analyzed. Will bring results to next meeting.

Program Entrance Process: The paramedic program staff are currently reviewing the entrance requirements to identify need for possible revisions.

• Current requirement for experience – 6 months full-time experience or 1000 hour part-time experience as an EMT-Basic. No requirement for where experience is acquired – can be with a public or private agency, ALS or BLS; can be in a 911 system or on an inter-facility unit; can be pre-hospital or hospital based.

Committee discussion:

- Can experience be pro-rated based on type of experience?
- Is there any data on success rates in the program versus the type of experience?
- Entrance process includes an EMT-Basic and Anatomy & Physiology comprehensive written exam. Candidates must score 80% or higher to advance in entrance process. Candidates must also complete the college's placement examination (Accuplacer) which tests math; reading comprehension; grammer/sentence structure.

Committee discussion:

- Are the results on the exams indicative of success in the program?
- Program staff are looking at HOBET as an alternative testing process
- Possible advantages to transitioning to HOBET would test the same areas that the Accuplacer tests plus has a general science section which could eliminate the need to for Anatomy & Physiology exam.
- Downside to HOBET additional cost to student
- Second phase of the entrance process is a Oral Judgment test. Candidates are expected to demonstrate the ability to assess, treat and manage 5 different types of patients at an EMT-Basic level.

Committee discussion:

- Can this process be changed to a simulation based scenario and include skills testing?
- Historically the department has offered EMS 105 Physical Assessment which was developed as a "bridge" course between completion of EMT-Basic and entrance to the paramedic program. Designed to develop the advanced assessment skills and critical thinking.

Committee discussion:

- Why was EMS 105 cancelled?
- Allowed those students who had self-identified that their experience had not adequately prepared them for the paramedic program to enhance those skills
- Provided students who were not successful in the entrance process an opportunity to strengthen those weaknesses similar to the model used by the Air Force Academy
- If EMS 105 is brought back, can it be geared to focus on assessment and management of patients rather than ALS prep and additional certifications?

Summary of discussion on entrance process:

- Review both the A & P and EMT-Basic exams for currency and relevancy. At a minimum, exams will be revised to address concerns regarding exam security.
- Program staff will investigate possibility of converting exam to computer based which will provide additional exam security
- Will continue to investigate HOBET
- Seek administrative support to re-instate EMS 105

Exit Interviews:

Committee members provided with a copy of the synopsis of Oral Exit Interviews which includes graduate comments on the program entrance process; individual courses and faculty in program; program resources; clinical and field externship providers; field preceptors and the overall paramedic program.

National Registry Written Exam:

During the period from January, 2010 through present, 62 students attempted the written exam. 84% pass rate on 1st attempt; 97% pass rate on second or subsequent attempts.

As this is a drop in our previous pass rate, program staff are reviewing exam results and program curriculum to identify possible modifications needed.

National average on 1st attempt is 71%.

Critical Care Transport:

The program was approached by a local organization to see if we were interested in creating and offering a Critical Care Transport-Paramedic course.

- There is a draft Scope of Practice for CCT-P out for comment from the State EMS Authority.
- Currently investigating whether course should be offered as a regular (FTES) college course or a community service (fee-based) course or both.
- Working with Grants Office to explore possibility of grant funding to develop the course.
- Looking for feedback from Advisory Committee: community need; are proposed minimum hours sufficient to cover Scope of Practice; impact on Clinical Training Sites; impact on relationship between Nurses and Pre-Hospital providers; LEMSA's position on this.

Committee Discussion:

- ICEMA Medical Director has concern that minimum number of hours for curriculum is insufficient; will probably not mandate that agencies pursue this; may allow individual paramedics to complete training and request they be granted status as a CCT-Medic in the county (Much like Trauma Medic historically)
- Strict experience criteria is critical as course pre-requisite
- Concerns about patient acuity did curriculum covers the pathophysiology, disease processes, medications, etc. at the level that a nursing program would cover?

Summary:

Committee feels that for the program to remain "cutting edge" this course must be offered.

Clinical and Field Tracking Requirements:

During last site visit by CoAEMSP, site visitors expressed concern that the program had not established minimums for all patient categories and skills.

- Should minimums be established for all categories?
- What happens when students do not meet the minimums?

Committee Discussion:

- Difficult to control what types of calls interns are exposed to
- Field internship is teaching you how to run calls in general, not necessarily how to run every specific type of call
- Would minimums require demonstration on live patients or could simulation be used?

Summary:

 Committee sees no need to create additional boxes to be checked off, established State minimums are sufficient.

Round Table:

Dan Word – appreciate attendance and continued passion of committee members for the program **Kevin Chao** – appreciate being allowed to participate

John Mueller – appreciate that committee members share love of EMS and wanting to push it forward

Kathy Crow - nothing

Bob Tyson – nothing

Bryttany Ferguson – want to see program continue to hold to high standards

Terry Flores – would be willing to look into forming subcommittee to host a golf tournament as a fundraiser for the program. Needs alumni list.

Terry Koeper – appreciate being here, nice to hear feedback about how we are doing as a college. Also has national contacts that he can reach out to if beneficial to advisory committee.

Noelle Drazin – glad to be here, like to see how we are going to push scene management and assessment to help get students ready for program.

Grant Malinowksi – would like to see improvements made not just in student development but also preceptor development. Perhaps a toolbox where ideas could be shared (NAEMSE Trading Post)

Bernie Horak: Anything we can do to help preceptors be successful is a good idea – very difficult position – on the fly with a real patient while trying to help students learn and develop tools to be successful.

Next Meeting:

March, 2012

Meeting Adjourned:

Bernie Horak adjourned the meeting at 2:40 p.m.

Kathy Crow, Recorder