



## **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:	Northland Community and Technical College						
CoAEMSP PROGRAM NUMBER:	600089	DATE, TIME, + LOCATION OF MEETING: Oct. 22 <sup>nd</sup> , 2019, 17:00, 17:00 Room 715					
CHAIR OF THE ADVISORY COMMITTEE:1	Mark Jones						

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)	Dr. Andrew Gasparini		Altru Family Residency			
Hospital Administrator	Mark Jones (Chair)	х	North Valley Health Center, Operations Director			
Employer(s) of Graduates Representative	Tim Nesdahl, NRP	х	Supervisor, Altru Ambulance Services			
Employer	Patricia Sturt		Altru Health system			
Key Governmental Official(s)	Gary Larson		Emergency Manager, City of East Grand Forks, MN			
Fire Service/Faculty	Charles Marcott, EMT/FF		NCTC, Fire Technology Program Director			
Law Enforcement	Mike Ruit, LEO, NRP		Officer, GF PD; Paramedic, Altru Health System			
Public Member(s)	Stephanie Johnson	х	Lawyer EERC			
Hospital / Clinical Representative(s)	Lorina Weymier, NRP	х	EMS Education Coordinator, Altru Health Systems			
Faculty	Dan Sponsler, BS, NRP	х	Flight Paramedic, Adjunct NCTC, Altru Health System			
Sponsor Administration <sup>2</sup>	Jodi Stassen, MS		NCTC, Dean of Health, Nursing & Public Services			
Student (current)	McKenzie Fuglestad	х	NCTC Student			
Graduate	Kim Nelson, NRP, RN		Altru Health System			
Graduate	Breeon Schmietz, NRP	х	Altru Health System			
Graduate	Andrew Lundstrom, NRP		UND School of Medicine Simulation Lab			
Graduate	Kirsten Medicaraft, NRP	х	Altru Health System			
Program Director, ex officio, non-voting member	Kelly Mikkelsen BA, NRP	х	NCTC, Altru Health System			
Program Clinical Coordinator	Dennis Labahn, NRP	х	NCTC, Altru Health Sysytem			

<sup>&</sup>lt;sup>1</sup> The best practice is that the chair is not the Program Director. The Advisory Committee is *advising* the program.

2019.03

Agenda Item		Discussion	Action Required	Lead	Goal Date
1.	Call to order	Why we are here and the importance of the advisory board	Yes / <mark>No</mark>	Dan/Kelly	
2.	Roll call	Everyone introduced themselves and why they are involved.	Yes / <mark>No</mark>	Kelly/Dan	
3.	Review and approval of meeting minutes	Discussed the last advisory meeting and how Appendix G is working with our students.	Yes <mark>/ No</mark>	Kelly	
4.	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."  □ Establish / review additional program goals²	Reviewed, no recommendations or actions required.	Yes <mark>/ No</mark>		
5.	Endorse the Program's required minimum numbers of patient/skill contacts for each of the required patients and conditions  [CAAHEP Standard III.C.2. Curriculum]  NEW Appendix G: Student Minimum Competency Matrix (effective July 1, 2019)  Review summary graduate tracking reports	Review/Discussion Discussion on difficulties achieving the requirements of appendix G due to the tracking system through fisdap being "down" from August, 2019 until Oct. 1st, 2019. The one alone student was able to achieve all of the requirements before her capstone.	Yes / <mark>No</mark>	Kelly	
6.	Review the program's annual report and outcomes  [CAAHEP Standard IV.B. Outcomes]  Annual Report data Thresholds/Outcome data results Graduate Survey results Employer Survey results	n/a	Yes / No		

<sup>&</sup>lt;sup>2</sup> 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	Action Required	Lead	Goal Date
	<ul><li>□ Resources Assessment Matrix results</li><li>□ Other</li></ul>				
7.	Review the program's other assessment results  [CAAHEP Standard III.D. Resource Assessment]  Long-range planning Student evaluations of instruction and program Faculty evaluations of program Course/Program final evaluations Other evaluation methods	For long range planning, it was a recommendation by the advisory committee to investigate the program dynamics changing to a hybrid program as soon as possible. The board discussed the possibility of the outside consults coming into the program to evaluate the feasibility of that possibility.	<mark>Yes</mark> / No	Kelly	As soon as possible
8.	1. Discussion and approval of the removal of the BLS Clinical requirement for EMT students which is 1 credit through the college. This will be replaced by 48 hours of "observation" on any ambulance or 10 ambulance patient contacts. Dennis the clinical coordinator discussed how other programs have similar forms available for the observation hours. The hours will need to be completed before the Paramedics enter their Capstone Internship.  2. Possibility of the credit from the BLS clinical being shifted to somewhere else in the program. More discussion is required. Possible that Paramedic Assessment 2 go from 3 to 4 credits to help aid in fulfilling appendix G with more students.		<mark>Yes</mark> / No	Kelly/Dan/Dennis	1.Date TBD  2.More discussion required
9.	Review substantive changes (possible changes)  [CAAHEP Standard V.E. Substantive Change]  Program status  Sponsorship Sponsor administrative personnel Program personnel: PD, Lead Instructor, other Addition of distance education component Addition of satellite program	Change in program director to Kelly Mikkelsen. Dan Sponsler was the past director and still very involved.	Yes / No	Kelly	
10.	Other identified strengths		Yes / No		

Agenda Item		Discussion	Action Required	Lead	Goal Date
11.	Other identified weaknesses		Yes / No		
12.	Identify action plans for improvement		Yes / No		
13.	Other comments/recommendations		Yes / No		
14.	Staff/professional education		Yes / No		
15.	CoAEMSP/CAAHEP updates		Yes / No		
16.	Next accreditation process (i.e., self-study report, site visit, progress report)		Yes / No		
17.	Other business	<ol> <li>The Fall 2019 cohort started with 2 students and one had to drop due to personal reasons. 1 student plans to graduate in December 2019 and she is on track to do so.</li> <li>Prospects for next year, potential for approx. 10 pending that they pass EMT final and all of the prerequisites.</li> </ol>	Yes / No	Kelly	
18.	Next meeting(s)	March 17, 2020	Yes / No	Kelly	
19.	Adjourn		Yes / No		

Minutes prepared by	Kelly Mikkelsen BA, NRP				Date	e <u>10/22/2019</u>
Minutes approved by	Mark Jones sign X	M	Date _	10/29/19	<u></u>	

**NCTC EMS Advisory Committee Chair** 

## 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.