

Career Technical Education Advisory Committee Meetings

CTE Program: Paramedic Department Chair: Dory Rincon
Name of person completing this form: Megan Corry Date completed: 7/3/18

Section 1. Overview

All Career Technical Education (CTE) programs are required to:

1. **Ensure the CTE Advisory Committee is comprised of a diverse group of individuals:**
 - a. representatives from within the program (faculty, classified, students); and
 - b. individuals external to the college who are actively involved in a variety of segments related to the workforce industry (e.g. local business leaders, compliance and licensing, industry employment agencies and associations).
2. **Meet with the CTE Advisory Committee** at least once per year;
3. **Document the meeting** by following sections 2 and 3 included in this template; and
4. **Submit the signed documentation** to Academic Affairs through the CCSF Office of Workforce and Economic Development (Cloud Hall 308) within 30 days of the meeting.

All CTE programs are encouraged to use a variety of approaches to engage with industry partners, as regularly as possible, to engage in robust and on-going conversations for continuous program improvement. Failure to meet these requirements may impact a program's ability to qualify for college funding (for example, Strong Workforce Program and Perkins funds).

How to meet the requirement:

1. Confirm Members and Membership on the Advisory Committee (http://www.ccsf.edu/en/educational-programs/cte/cte_advisory_committees.html);
 - a. if updates are needed on the webpage, send details to Emelina Santos esantos@ccsf.edu 415.452.7104;
2. Communicate, confirm, and record below your meeting date, time, and location:

Date: 5/10/18 Time: 12-1³⁰ p Location: John Adams Center 47 D

3. Create your meeting agenda to address the required areas in Section 3;
4. Disseminate meeting materials (for example: Agenda, Program Review, SLO assessment data, Perkins Core Indicators, Labor Market Information, Certification Passage Rates);
5. Conduct the meeting, keeping minutes/notes of the discussion, using Section 2 to account for meeting participation by both internal and external attendees;
6. Document your meeting in the following way:
 - a. Record attendance and contact information using Section 2 form, feel free to use more than one page;
 - b. Synthesize the outcomes of the meeting discussion, completely filling out Section 3 of this template (CTE Advisory Committee Meeting Minutes);
 - c. Submit this completed form, sections 1, 2, and 3 with a Department Chair signature, along with a copy of the meeting agenda, within 30 days to your Dean.
 - d. Deans need to sign and then forward to the Office of Workforce and Economic Development to the attention of Emelina Santos esantos@ccsf.edu 415.452.7104.

Faculty resources, including templates and suggested best practices, are available http://www.ccsf.edu/en/educational-programs/cte/cte_advisory_committees.html

Section 2. Advisory Committee Members in Attendance Meeting Date 5/10/18 CTE Program: Paramedic

(External Members) Employers, Industry Associations, Professionals employed in the field

Name	Position	Business Name Address	Phone	Email	Signature
	See attached				

(Internal Members) Faculty, Administrators, Classified Staff, Students

Name	Position	Faculty/Administrators/Classified/Student	Email	Signature

Section 3. CTE Advisory Committee Meeting Minutes

CTE Program: Paramedic Meeting Date: 5/10/18

(see attached)

1. Program Review review and feedback

See attached required template from CoAEMSP

2. Student Learning Outcomes addressing Program Requirements and Course Content review and feedback

3. Perkins Core Indicators including Class Pass Rates, Persistence, Completion and Employment Outcomes; and where applicable, Licensure and State Certification Pass Rates review and feedback

4. Labor Market Information demonstrating program continues to meet Labor Market Demand and doesn't represent unnecessary duplication with other programs in the region, review and feedback

5. Overall Recommendations for the program

6. Planned Action Steps based on feedback

Next Meeting Date 5/10/18 Time NOON - 1:30p Location JAD

Signatures: Department Chair: Mary P. Rincon

Date: 8/8/18

School Dean: [Signature]

Date: 10/22/18

Associate Vice Chancellor: _____

Date: _____



Credible education
through accreditation

Advisory Committee Meeting Minutes

SPONSOR / INSTITUTION NAME:	City College of San Francisco	DATE, TIME, + LOCATION OF MEETING:	May 10, 2018 Noon-1:30pm
COAEMSP PROGRAM NUMBER:	600218		
CHAIR OF THE ADVISORY COMMITTEE:	Dr. John Brown		

ATTENDANCE			
Community of Interest	Name(s) – List all members. Multiple members may be listed in a single category.	Present	Agency/Organization
Physician(s) <i>may be fulfilled by Medical Director</i>	Jimmy Choi, MD	X	Medical Director, CCSF Paramedic Program Kaiser SF ED
Employer(s) of Graduates Representative	Captain Judy Klostad Owen Beere, Paramedic Roger Riley, Paramedic Supervisor	X X X	San Francisco Fire Department, EMS Training King American Ambulance American Medical Response
Key Governmental Official(s)	John Brown, MD	X	San Francisco Dept of Public Health, EMS Agency
Police and Fire Services	Captain Britney Smith, EMTP	X	San Francisco Fire Department
Public Member(s)	Kat Villasenor	X	Public
Hospital / Clinical Representative(s)	Theresa Sandholdt	absent	San Francisco General Hospital
Other	Captain Chris Bonn	X	SFFD QI and Investigations
Faculty <i>ex officio, non-voting member,</i>	Jim Fazackerley, MPP, EMTP Megan Byrne, EMTP	X X	CCSF faculty EMT Program faculty (also graduate, preceptor)
Sponsor Administration, <i>ex officio, non-voting member</i>	Robert Frost, Dean Dory Rincon, Department Chair	X X	CCSF Administration
Current Student	Michael Budner	X	Class of 2018 (in progress)
Graduate	Sam Schow, EMTP Anne Sullivan, EMTP	X	Class of 2017 Class of 2016
Program Director <i>ex officio, non-voting member</i>	Megan Corry, EdD, EMTP	X	CCSF
Medical Director	Jimmy Choi, MD	X	CCSF

ex officio, non-voting member					
Agenda Item	Acted	Discussion	Action Required	Lead	Goal Date
1. Call to Order	X	Dr Brown agreed to continue as Chair	Minutes distributed by June 1, 2018 for email approval of committee	M. Corry	6/1/2018
2. Review and Approval of Meeting Minutes		Minutes for May 2017 approved in June 2017; Today's Minutes will be distributed in 2 weeks by email for review and approval; must be signed by CCSF Administration			
3. Program Goals & Learning outcomes [CAAHEP Standard II.C. Minimum Expectation]	X	Advisory committee review and approve of goals – Program goals can be found in the CCSF website for paramedic; CoAEMSP standards interpretations language inserted verbatim. Student learning outcomes for the program (separate from individual class SLO's) reviewed. Program SLO's reviewed. Dr. Brown calls for motion to approve. Moved /seconded Passed without objection.			
4. Curriculum Update and Review; Appendix G update [CAAHEP Standard III.C.2. Curriculum] <input type="checkbox"/> Appendix G: Student Minimum Competency Matrix (effective July 1, 2019)		Prerequisites are under revision to clarify and update new numbering system for Biology Dept. Prerequisites: EMTP 120 or BIO 106; and EMT 104. Reviewed current graduation requirements and minimum competencies with no changes from last year's approved list; HOWEVER, new Appendix G and CoAEMSP recommendations will require revisions to CCSF minimum competencies. Revisions to course outlines of record to incorporate Appendix G: EMTP 121, 122, 123, 124, and 125 in curriculum revision process to incorporate addition of lab hours and enhance instructional time. Applied courses in Spring (EMTP 126, 127,	Complete revisions to courses through curriculum process	M. Corry	October 2018 according to curriculum committee deadlines

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		<p>128, 129) already revised and approved with lab and clinical time. MC would like to see field clinical time inserted into second semester. EMTP 130 is currently a 12 unit mega course (lec/lab/work experience all in one) with final didactic, psychomotor, and clinical competencies plus capstone field internship. Students have to be verified after internship through final exit exam and psychomotor evaluation. Currently in draft form: EMTP 130 split into three separate courses: A, B, and C. EMTP 130A: Didactic, psychomotor and clinical competency evaluations EMTP 130B: Capstone Field Internship EMTP 130C: Assessment based management (terminal competency evaluations)</p> <p>Certificate and Major (A.S. degree) also under revision to better structure a pathway for students toward a degree.</p> <p>APPENDIX G: new competencies and review minimums. (e.g. 60 medical assessments,) The program must document individual student progression from skill to scenario application to live patient application. This will pose challenge in <i>tracking</i>. Appendix G is much more specific and proscribed. Will require program to examine instructional time, equipment, and supplies. Dr.B suggested that 3 may be too low for 12 Lead reviews by students. Dr. B. cited multiple instances in the field of failure to properly document on 12 Leads. MC notes the difficulty (cost) in procuring</p>	<p>M. Corry, Dr Choi, and program faculty to draft new minimum competencies for review by Advisory committee in special November 2018 meeting. Cohort starting in Fall 2018 will begin with current but pilot data will drive change.</p>	<p>M. Corry</p>	<p>Draft of competencies to Advisory committee by October 1st</p>

Agenda Item	Acted	Discussion	Action Required	Lead	Goal Date
		<p>cardiac monitors for program, but secured funding for monitors from Program review and Perkins for 2018-2019. D. Rincon also reminded of combined program Clinical Skills Lab. Kat Villaseñor suggested collaboration to combine resources among other health programs. Will likely increase 12L numbers. Anne S. noted importance of student assertiveness in obtaining needed skills and competencies, especially in clinical areas. Dr. Brown mentioned that UCSF sport participant exams can be an opportunity to gain practice. MC reiterated importance of documentation. Dr. B reviewed other Appendix G categories that appeared to need additional reviews: increasing the number of live supraglottic airways, psychiatric patient encounters, and EKG reviews.</p>			
<p>5. Annual Report and Outcomes [CAAHEP Standard IV.B. Outcomes]</p> <ul style="list-style-type: none"> <input type="checkbox"/> Resources Assessment Matrix <input type="checkbox"/> Thresholds/Outcomes 		<p>Reviewed returns on the Resource Assessment Survey (n=5 for personnel and n=7 for students) Dr. Brown & Kat V. asked about perennial low scores in assessing adequacy of clerical support. MC agreed. Ongoing issue of need for help with tracking competencies. R. Frost noted that existing clerical resources are off-site from EMS offices so may go unnoticed despite productivity. Student feedback suggests need for more lab supplies. S. Schow noted low response rate and effect on ability to draw conclusions on program resources. M Corry noted that this feedback is consistent with previous surveys; will continue to collect data. S.Schow suggested requiring return of Resource</p>	<p>Increase response rate on resource surveys by distributing survey to cohort 2018 as complete capstone field internship; return as condition for receiving completion certificate.</p>	<p>M. Corry</p>	<p>Dec 2018</p>

Agenda Item	Acted	Discussion	Action Required	Lead	Goal Date
		<p>survey as condition for receiving course completion certificate. This works with resource survey but not graduate survey, which must be distributed 6 months to one year after completion.</p> <p>College and CoAEMSP perform multiple assessments on student outcomes. MC reviewed the change process: Curriculum changes are based upon course and SLO review each semester, annual college program review and alignment with CAAHEP accreditation standards.</p> <p>MC reported 2017 100% first time pass rate on NREMT; 74.2 % retention. Generally lose students to other hiring opportunities. 1 case of general overload of life events.</p>			
<p>6.</p> <p>Other Items:</p> <p>Field Clinical rotations with MD's</p> <p>QRV (quick response vehicle)</p> <p>EMS 6</p> <p>Documentation</p>		<p>Dr. Brown proposed including PM students into field shifts attended by EMS Fellowship physicians /Attending physicians to co-respond to selected calls.</p> <p>Another possible field placement could be the SFFD Quick Response Vehicle to gain higher volume of patient contacts for assessment experience.</p> <p>Sam Schow described the outreach program of the SFFD focusing upon superusers of EMS in San Francisco. Currently CCSF incorporates this rotation as a course requirement in EMTP 129.</p> <p>Dr Brown noted that the EMS agency is</p>			

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		<p>seeing a problem with poor PCR documentation in the field. Will be providing a medical legal training opportunity and would like to extend to initial training program.</p> <p>JF noted the importance of additional exposure to documentation practice in initial training. MC noted the integration of the new iSimulate with documentation on electronic PCR's and in past C. Bonn (SFFD) offered to collaborate using SF EMS system e-PCR. This is an opportunity to develop baseline competencies in documentation.</p>			
<p>7. Announcements</p>		<p>EMS Day: May 23rd Wednesday 10a-5pm; Exhibits 11-3p at Civic Center and awards 3-4p at DPH.</p> <p>Dr. Brown announced an event being planned for military / EMS and possibly student participants in October 2018.</p>			
<p>8. Next Meeting: November 2018</p>		<p>Another meeting in November 2018 (date TBD) to finalize Appendix G minimum competencies, with an option online (Zoom) for those who cannot attend meeting in person.</p>			
<p>9. Adjourn</p>	<p>X</p>	<p>Dr. Brown adjourned the meeting without objection</p>			

Minutes prepared by Megan D. Corry, EdD, EMTP Date 5/20/18 Minutes approved by Advisory committee on: 6/10/18
 Medical Director signature: [Signature] Date 6/10/18
 Department Chair signature: [Signature] Date 10/23/18
 Dean signature: [Signature] Date 10/23/18