

VICTOR VALLEY COLLEGE Department: EMS	MINUTES MEETING TOPIC: Paramedic Academy Advisory Committee	DATE/TIME Wednesday September 25th, 2024 Start: 10:00 hours
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ADVISORY BOARD LEADER: John Pinkerton, former Trustee VVC Board of Trustees

EMS FT FACULTY ATTENDING: Dave Oleson, Jenilynn Pendergraft, Bradley Reddall, Scott Jones

EMS PT FACULTY ATTENDING: Kenneth Fox (EMS), Stephanie Arredondo (PT Faculty EMS/AVHS), Dale Lintner (EMS),

EMS MEDICAL DIRECTOR ATTENDING: Dr. John Stroh

VVC Guests attending: Richard Radcliff (Dean of Instruction PSIT), Lilia Aguirre (Program Manager School of PSIT), Jose Arredondo (Director of Fire Technology), Lupe Gutierrez (CJ FT Faculty/Department Chair), Melanie Dube-Price (Counseling), Kristen Anderson (PT Faculty Emergency Telecommunication), Valerie Trujillo (VVC RPSTC), Victor Torres (MDCP), Susanne Pinto (ILT EMS)

Guests attending: Tiffany Gaudin (Chaplain, Community Engagement Specialist), Sharon Pinkerton (former Trustee VVC Board of Trustees), Shelby Clark (Community Rep), Kim Mesen (SB County First District Supervisor Paul Cook Representative), Sonia Miranda (Congressman Jay Obernolte Representative), Joshua Stapleton (Rancho Cucamonga Fire/Confire), Sandy Griffin (Rancho Cucamonga Fire District), Michael O’Bier (SBCoFD), Mulhall Miranda (SBCoFD), Craig Bell (Morongo Basin Ambulance), Dave Loomis (Ontario FD), Tonya Loret (Ontario FD), Grant Malinowski (Yucaipa/CalFire), Buddy Peratt (AV FD), Dowland Matthew (AV FD), Travis Espinoza (Victorville FD), Carly Cripe (Redlands FD), Shawn Reynolds (Loma Linda University Medical Center), Kara Kubicek (VVGMC), Jamie Acosta (VVGMC), Brian Fischle (Operations Manager AMR, Victorville)

Current Paramedic Student attending:
Academy 49: Michael Hernandez
Academy 50: Hannah Lupa
Former Paramedic Academy Student (Academy 47): Sydney Anderson (Morongo Basin Ambulance)

TOPIC	DISCUSSION	PLAN OF ACTION	OUTCOME	FOLLOW-UP (PERSONS RESPONSIBLE)
1. Welcome, pledge of allegiance and Introduction of Committee Members	Welcome – thank you to our members, new and seasoned; 2024 advisory chair – John Pinkerton, faculty and staff – restroom locations, refreshments and food (restaurant management – Tyler Busch) John Pinkerton the Advisory Board Leader for the day, expressed his pleasure to be here, attended countless Paramedic Graduation and feels privileged to be today’s lead. Chaplain Tiffany Gaudin said the opening prayer for the meeting. Dave Oleson guided through the Pledge of Allegiance Sign in, Program Resource Survey (please return to Susanne at the conclusion) – remember to fill out all	,		

	sections and comment where you feel it needs to be done..			
<p>2. EMS Director’s “State of the Program”</p>	<p>Health check - STATE OF THE PROGRAM</p> <p>Retrospective: the Hybrid Program was a result from this Advisory Board, that’s why our program needs the input & support from outside. Class 49 is the 8th Hybrid Class and currently ending their field internship with Graduation coming up 10/12/2024. Hybrid Academy 52 will be having their entrance interviews in 2 weeks. Applicants pool is steady with no decline in the foresight.</p> <p>Highlights:</p> <ul style="list-style-type: none"> • 2023/2024 Site Visit CoAEMSP (October 2023) & reaffirmation from CAAHEP • Hiring of Full-time Faculty – Brad Reddall as replacement for Brian Hendrickson who retired in June of 2023. • EMS program enrolled over 904 students total in the 23/24 schoolyear across 30 sections of EMS courses (EMR/EMT/Paramedic) – that’s up 70% from 5 years ago. <ul style="list-style-type: none"> ○ On pace to exceed that # this current year through the expansion of the EMT/EMR programs • FTES growth is up 67% from 5 years ago (all semesters for the 23/24 schoolyear), which will bring us to the need of a 5th Fulltime Hire • Student success is at 79% (winter being consistently the highest performing semester per year at 85-92%) – exceeding the ISS%. • Articulation w/ 6 different HS Districts – serving over 150 students annually in Dual Enrollment and / or CCAP (career and college pathways) – <p>23/24 data only</p> <ul style="list-style-type: none"> ○ EMS 50 – 8 different HS’s (plus no age restrictions) 			

- EMS 60 – 1 HS (successful, but needs support from VVC in regards of skills which will be held at the RPSTC, also attendees must be 18 by the end of the course)

We identified HS with more needs and planned more support/outreach for new HS to create EMS 50 classes in their schools which would feed into our EMS 60 classes.

- **Demographics:**

- 5 year trends – ISS exceeded
 - Gender: more male than female
Interesting fact is success rate with 70% by male, 80% by female
 - Age: 21-40 highest success rate
Age 26-35 largest group
Age 18-20 second largest group
Age 18 and younger our 5th largest group
 - Ethnicity: Hispanic & White are the biggest groups followed by African Americans, 5% are multi ethnic, followed by a small percentage of Asians and unknown ethnicity groups

- **Paramedic Program:**

- 48 – 53% in county applicants / 47% out of county
- 49 – 28 % in county applicants / 72% out of county
- 50-51% in county applicants/49% out of county applicants

- **Current Staff:** 4 full time faculty / 43 part time faculty / 6 professional experts

	<ul style="list-style-type: none"> ○ 3 paramedic cohorts ○ 5 EMR cohorts ○ 12 EMT cohorts ○ NC – EMT Refresher (Spring 2024 rollout) ● In House Training Center: AHA TC, NAEMT TC under the lead of PT Faculty Kenneth Fox & Zachary Keough. As of present we are only able to serve VVC students but are looking into more possibilities to open up non-credit classes for the community ● Counseling: Melanie Dube Price is our inhouse counselor and serves all 3 departments. This has helped us tremendously to help with Education Plans for all our students, so they don't have to travel to main campus. ● Admission Records, Financial Aid assist us on Orientation Days with incoming students, so they don't have to go to main campus either. <p>STRENGTHS:</p> <ul style="list-style-type: none"> ○ Personnel ○ Student Services ○ Mental Health Counselors – on site ○ Food Pantry – on site thanks to the initiative from Valerie Trujillo, Melanie Dube-Price & Susanne Pinto. In the past months we supported over 500 snacks/meals to students in need. ○ Batch enrollment / Ed Plans / auto-generation of certificates ??? ▪ Scholarships, that help with National Registry & Program costs: <ul style="list-style-type: none"> - EWYL – AMR - Bashaw Servant Heart since - Chavez Foundation since ○ Outreach 			
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- Social Media presence
- Chaplain addition to program
 - Part time faculty in process to support Mental Health with students
- Ability to flex to community and industry needs with adding 2 more classes in SP 2025
- Personnel involvement in industry
 - Brad – EMS Officers Education Committee
 - Jenilynn – EMS Officers – Educational Rep
 - Ken Fox
 - EMS Officers / MAC / CQI Comm.
 - Dave –
 - EMS Officers – Educational Rep
 - EMCC – Paramedic Training institution representative
 - CEMSEA – Member - Governmental Affairs Subcommittee
 - CoAEMSP – Site Visitor

WEAKNESSES

- Demand outpaces responsible growth ability
- New laws threatening outcome by shortening most needed hours to student success

OPPORTUNITIES

- BLS expansion into high schools w/ no pre-existing articulation (Barstow / Lucerne / Oak Hills)
- Moving to EMS 50 (EMR) pre-requisite for EMS 60 (EMT) to get students better prepared for

EMS 60 and the fast, sometimes overwhelming learning pace in these classes

THREATS

- 100% instructional gap in paramedic programs – continued 3 cohorts annually beyond 2025
- Clinical sites for EMT students
- Hospital and Field
- Field spots – Brad to discuss further in his report
- Out of county programs – impact to system
 - 1080 - may not reserve for any specific program
- Title IV – Federal Financial Aid Programs for post-secondary students (DOE)
- Align hours to state-mandated minimum
 - 1094 currently for paramedic / 170 for EMT
- Impacts ANY student receiving Fed Fin Aid
 - VVC EMS programs
 - EMT – between 30-80%
 - Paramedic – between 39-43%
- Where are we at:
 - Local interpretation – college (AS degree linked)
 - Implementation date pushed to 2026
 - State level legal challenges (2)
 - CalEMSA hour revision
 - Brought up at June meeting – State EMS Commission
 - Possible State EMS Commission meeting in December - presentation
- What changes are a possibility:
 - Worst case scenario
 - reduce hours across EMT and Paramedic programs
- EMT – didactic reduction (212 hours currently)

	<ul style="list-style-type: none"> ○ Paramedic – didactic/clinical/field reduction (1387 hrs currently necessitating approx. 293 hrs reduction) <ul style="list-style-type: none"> ▪ 56 hrs clinical ▪ -181 hrs field ● change to non-credit ○ negating the AS degree <ul style="list-style-type: none"> ▪ Outcome desired ● State places hour minimum review into public comment and takes advisement from CEMSEA Subcommittee ○ State program numbers being assessed from all 37 paramedic programs and numerous more EMT programs in for-credit institutions <ul style="list-style-type: none"> ● State changes hour minimums to state – making any local changes minimal 			
a. Medical Director	Dr. John Stroh: lucky to see students in ER & in Clinical & towards the ends. Some of them do intubation with Dr. Stroh, who is our Medical Director since 2009.			
b. Student input	<p>Hannah Lupa, Academy 50, didactic: unsuccessful in 48 during spring, had high stress levels, learnt that this is not uncommon. She can see the difference now, having lower stress level, more confidence, which helps while studying. It was incredible how everyone came together to help her to move forward with Academy 50, not just faculty but also staff working at RPSTC.</p> <p>Mike Hernandez, Academy 49, Field: Hybrid, Firefighter, good prospective what it means to be a successful paramedic in community. No regrets, to have started this program, was highly recommended by colleagues.</p> <p>Sydney Anderson, former Academy 47: Since June, so for last 4 month is now a paramedic by herself. Program made her feel very prepared, did have</p>			

	<p>opportunity to work with past and current student. Support is great, only critic would be that students need consistency in instructors. Due to different experiences some instructors say different things about skills thought, which can make it difficult to absorb. Which brings higher stress level during testing but hopes program to get skills more streamlined. Cutting hours would not be beneficial, especially in field it's difficult to get the requirements in. Cutting hours would be discouraging for students & their success.</p>			
<p>3. Didactic Lab</p>	<p>Jenilynn Pendergraft: Constant feedback is asked from current and past students, especially since there is a lot to deal with local, state & national requirements, and our goal has always been to bring in more structure so all FT/PT faculty is on the same page. Especially in the simulation part where we are currently building scenarios to build up in regards of National Registry Exam, and also student success. We try to keep instructors in same skills stations to get more consistency. Part-time Faculty still works in the Field full time which can be challenging in the fire season. With Scott moving over to EMS 60 will bring more structure to EMR/EMT classes as well.</p> <p>Graduate Data Overview:</p> <p>1. Recent Trends in Graduate Outcomes</p> <p>Academy A45T: Started: 25, Graduated: 18 5 left due to skill final failures.</p> <p>Academy 46 H: Started: 21, Graduated: 27 3 left before program started; 3 left during the field</p> <p>Academy 47 T: Started: 36, Graduated: 27 6 academic failures; 3 left during the field</p> <p>Academy 48 T:</p>			

Started: 35; currently in field with 18 remaining after some dropped out for family reasons or prior to course completion.

Academy 49 H:

Started: 30, currently at 25, expecting to graduate most.

3 academic failures in coursework

National Registry Outcomes

1. Recent Changes in Testing

- Elimination of the psychomotor portion; focus on scenario-based questions.
- Introduction of a critical decision component noted as challenging by students.

2. National Registry Pass Rates

Academy 45T:

50% pass rate on the first attempt;

94% within 3 attempts.

Academy 46H:

55% pass rate on the first attempt;

94% within 3 attempts.

Academy 47T:

70% pass rate on the first attempt;

96% within 3 attempts, with only 2 needing 3 attempts.

Academy 49H:

83% pass rate among tested students thus far.

3. Improvements Made

- Increased focus on national information in the curriculum.

Implementation of **Pocket Prep** as a study tool, which has positively impacted pass rates, particularly noticeable from Academy A47 onwards.

EMS Nurse Conference All students from Paramedic Academy 50 attended, which provided them with a great inside into environmental, animal poisons as well legal insight of EMS.

<p>4. Clinical Coordinator</p>	<p>Bradley Reddall, new FT Faculty & Clinical Coordinator: Took over 1 year before Brian left. Points out that he still learns, especially how difficult it is to get students into hospitals. Hospitals have different requirements in regards of paperwork, training, drug testing, background checks. Kaiser dropped us during COVID, but now we're able to get students in again. The approval process takes hours and days of paperwork, training, and orientation. We are limited to a certain number of students. We have found new site in Redlands, but most of our Clinical Sites are right here in the High Desert. As for Field sites – we need preceptors. We have a good pool for preceptors but with increasing student numbers we need more. In addition, more outside agencies are reaching out to our preceptors to get their students in as well. There are state counties where students wait 3-4 months for a field internship. We have great support with Rancho, Ontario Fire, and some local Fire Departments in our High Desert. The threat from outside agencies is real and our biggest fear is that we can't get students to finish their Field Internship on time.</p>			
<p>5. Program Goals:</p>				
<p>A. “to prepare competent entry-level Emergency Medical Technician – Paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) Learning domains, “ with or without exit points at the Emergency Medical Technician-Intermediate, and/or</p>	<p>Discussion was asked for, why or why not to accept, but everyone was silent, had no questions or input, and the motion was initiated.</p>	<p>Motion: Dr. John Stroh Second: Tiffany Gaudin Everyone was in favor and accepted.</p>		

<p>Emergency Medical Technician-Basic, and/or First Responder levels. <u>Standard II.C.</u></p>				
<p>B. Material Fees – revisions / updates (see handout for breakdown a. EMS 60 b. EMS 80-84</p>	<p>All the cost is broken up into unit fees \$ 46.00/unit for last 5 years and Material fees for our programs. Material fees were assessed for the last 10 years. Current costs are on webpage. The Advisory board approved these fees. Student Material fees include something that they keep when they leave the program, like e-books that are more affordable than hard cover books. Pearson gives us a great deal. Material cost in last 10 years have changed and some of our predicted costs were outdated. We’d like to implement Pocket Prep, which helps students to prep better for tests in general and National Registry Exam. Pocket Prep offered us a lifetime subscription for each student in EMS 60 & Paramedic Academies for \$ 65.00/each. We did a trial and have seen that students enjoyed it and they have improved their testing result significantly. A 20% increase to cover costs for the next 5 years were added to the spreadsheet/costs. EMMAT Fees for 80/81 starts one month before class as it includes uniforms & books for incoming students. 82-83 ACLS, drug testing before getting into clinicals & field, and 84 includes the “death communications” workshop and PALS. Our current/past student recommend pocket prep and the benefits of the program with helping them to be successful in the National Registry testing. Pocket prep was also ahead of time with the updates on the National Registry and students come well prepared. It’s an asset as the best tool in test preparation seen so far. We started using e-books vs hard cover books as they are more cost effective. Life expansion is usually 12 months, while students are in the program. They are able to still read the book after but tools for testing and research access need to be renewed, which impacts returning students. The same for drug screening and</p>	<p>EMS 60: Motion: Dave Loomis Second: Travis Espinoza Everyone was in favor and accepted.</p> <p>EMS 80-84: Motion: Grant Malinowski Second: Travis Espinoza Everyone was in favor and accepted.</p>		

	<p>background checks which need to be renewed by returners. Students are responsible for their student material fees. Pocket prep costs came down because of high student numbers instead of paying \$ 47.99/quarter we can offer a lifetime subscription for \$ 65.00</p> <p>New total for EMS 60: \$ 157.53</p> <p>New total for EMS 80-84 (paramedics): \$ 2,174.56</p>			
<p>C. Expansion Position – Classified</p> <p>a) Second Instructional Lab Technician</p> <p>i. Split shift coverage</p>	<p>Consideration that the program expanded, classes were added, tasks were added to the ILT work load we do need a second ILT to cover evening classes. We’re thinking of creating a split shift, covering times on a Union supported 5days/8-hour shift (exception will be the classified summer hours) from 6:00 am – 2:30 pm and 1:00 pm – 9:30 pm (with exception of Friday 9:00 am – 5:30 pm, as we have no evening classes Friday). Travis Espinoza mentioned that he saw, valued the work and witnessed also the workload and therefore supports the need of the second ILT and made the motion to accept the expansion.</p>	<p>Motion: Travis Espinoza</p> <p>Second: Shawn Reynolds</p> <p>Everyone was in favor and motion was accepted.</p>		
<p>D. Expansion Position – Faculty</p> <p>a. 5th Full Time Position – Paramedic</p> <p>i. 100% Contract gap in paramedic program (SU 24-present)</p>	<p>Input on program expansion was given earlier, HS support & expansion are in the works, therefore we are looking into a 5th Fulltime position. Currently we have 4 FT instructors working in addition is Ken Fox, PT faculty working overload equal to a FT position. He can only work in overload until SP 2025. If not given staff support we can’t guarantee the quality of the program, and full support for our Hybrid program and therefor would be having to close down the 2nd paramedic cohort.</p>	<p>Motion: Carly Cripe</p> <p>Second: Brian Fischle</p> <p>Everyone was in favor and motion was accepted.</p>		
<p>E. EMS 60 prerequisite discussion</p> <p>a. EMS 50</p>	<p>There is a recommendation for any students in our catalogs that students take EMS 50. Current prerequisites for EMS 60 are AHA BLS card (online portion & skills test). This is offered in EMS 50 with a broad range of basic knowledge as an EMR, therefor we like to make EMS 50 a prerequisite. Hoping to have this also affect the EMT students National Registry success, and boost outcomes. Adding more EMS 50 classes beforehand would push into our feeder</p>	<p>Motion: Dave Loomis</p> <p>Second: Travis Espinoza</p> <p>Everyone was in favor and motion was accepted.</p>		

	<p>HS, so that students from there can jump into our EMT classes. A few other colleges make EMS 50 as a prerequisite as well. We can prove positive input with Stephanie Arredondo class EMS 50 & EMS 60. Stephanie has a remarkable success rate and lost only 1 student last semester and 2 the previous year. Not typical for any EMT class on campus but pointing out AVHS EMS 60 class success proves how successful an EMS 60 program can be. All instructors for EMR/EMS 50 at HS are very dedicated. Reaffirmation with HS start early next month. EMS 60 is very hard to pull off in HS, as they require a lot more faculty members for skills. Space, room, equipment are currently provided by college, but we need responsible growth. AV HS is going into their 5th year, but adding more needs to be responsible in regards of staffing and space here at the RPSTC or the HS providing the course. It's a difficult task to find qualified staff at a HS to be hired at VVC to be a PT faculty with all the requirements. It's a challenge but needs to be considered for the future as demand is here.</p> <p>Melanie Dube-Price, Counselor states that she sees first hand the input from students that going to EMS 50 first, and being successful in EMS 60. Many came back to her to thank for the suggestion, say they would never have passed EMS 60 in the first attempt otherwise.</p> <p>Confire, JP college has an EMR/ Explorer program 73-74 % come to EMT programs. Great way for students to get an idea if they want to come into the field. The EMS 60 class helps students to get good input, learn the medical terminology, the basics, and helped them to go through the 6/8 week EMT program. Also covers the prerequisite of BLS card, students are better prepared. Further into consideration comes that a lot of EMT students come out of HS, numbers are unknown but that is another challenge into their success, where EMS 50 would be a better change to be successful and getting to know the field. Also in regards of financial</p>			
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	<p>help/costs EMS 50 with 2.5 units is a great solution to EMS 60: 9.5 units.</p> <p>This plan will help to jump success for EMS 60, as well give student a better understanding for class & the field/career path students are entering.</p>			
<p>F. Clinical Coordinator a. Reassign Time continuance (.5 Fall/Spring)</p>	<p>He is responsible for liaison with Castle Branch, Hospitals, Clinical & Field Agreements asking to confirm reassign time to continue, as the workload including paperwork (vaccinations, background checks, drug screening), clinical contracts between VVC EMS & hospitals, training & orientation information is enormous and time consuming.</p>	<p>Motion: Dr. John Stroh Second: Tiffany Gaudin Everyone was in favor and motion was accepted.</p>		
<p>6. Program Resource Survey – Grad Data Results for 202/2021 NREMT Demographics</p>	<p>Jenilynn Pendergraft explains that every graduate gets the program resource survey, it's a generated resource survey from co-ed, and is reported to our accreditation body. 1 big item is the current classroom environment, AC/Heating not working. This summer we lost AC in 3 more rooms, makes 7 rooms without AC. Last 4 deans had to deal with this issue. This survey helps me to push that agenda. Please mention this problem. Due to the change in National Registry as of July 1st, we did implement Pocket Prep with current academy.</p>			
<p>7. Emergency telecommunicator Non-Credit Program Updates a. Kristen Anderson</p>	<p>Kristen Anderson is excited to say, that they are now officially in their third cohort. Including the current class, they had 60 students that went through program. Hired 1 in her department and had several in other agencies placed. They had a few issues with confire and sheriff's departments but are working on it and hope to get students working there soon. Recently added was a new software program so students practice now with live scenarios on new laptops and radios. She is still struggling with getting internships spaces in area. The biggest problem is the legal aspect for agency, HIPPO law and background checks. Spend last couple years to look for a good test book and finally found a great book with great overview including new input/aspects that came up in the agencies. Participated new in MDD and will continue</p>			

	<p>to do so. It helped to understand the daily routine of a dispatcher and the understanding the work/career path they go into. No associated costs with it, as it is a non-credit class. Currently there are 80 open positions between 2 counties, there is a dire need. This program will give them solid skills and helps them understand the environment. She is working to get approved for more dispatch centers, but right now has to stay close to college. AMR is interested, HQ are in Rancho. Trying to get the prerequisites done with this course, so that dispatch agencies test done, won't fail students out in job requirements, and they can go straight to work. Also this ETC program came out of this Advisory Board.</p>			
8. Roundtable	<p>Attendees thank the college for all their work, as they have an interest in current and former students to find applicants for their job opportunities. Also thanked for invitation and will support students in the future, offer support in regards for clinical & field sites if needed.</p>			
Adjourned 12:22 pm				