



Committee on Accreditation for the Emergency Medical Services Professions (CoAEMSP)

**Advisory Committee Agenda and Checklist**

<b>SPONSORING INSTITUTION:</b>	<b>Northwest Community Healthcare</b>		
<b>CoAEMSP PROGRAM NUMBER:</b>	<b>600790</b>	<b>DATE, TIME, + LOCATION OF MEETING:</b>	<b>September 8, 2016; 9 AM; NCH LC 3&amp;4</b>
<b>ATTENDANCE</b>			
<b>Community of Interest</b>	<b>Name(s) – List all in attendance. It is acceptable to have multiple members in a category.</b>	<b>Agency/Organization</b>	
<input type="checkbox"/> Current Student	No students currently in class		
<input type="checkbox"/> Graduate	Aharon Losoff, EMT-P	Mount Prospect Fire Dept.	
<input type="checkbox"/> Physician(s) (may be fulfilled by Medical Director)	Fulfilled by EMS MD		
<input type="checkbox"/> Employer(s) of Graduates Representative	Chief David Schumann Chief Alan Wax BC Michael Sharp, EMT-P DC Ed Rogers, EMT-P	Schaumburg FD Des Plaines FD Elk Grove FD; Provider EMS Coordinator Des Plaines FD, EMSC	
<input type="checkbox"/> Key Governmental Official(s)	Jack Fleeharty (excused)	Illinois Department of Public Health	
<input type="checkbox"/> Police and Fire Services	Nathan Gac, EMT-P Kristine Provenzano Douglas Schubert, EMT-P Jeff Hall, EMT-P Ron Swidler, EMT-P	Elk Grove Village FD (Officer paramedic) Schaumburg Police Department Schaumburg FD (non-officer paramedic) Lake Zurich Fire Rescue (non-officer paramedic) Lincolnshire Riverwoods FPD (non-officer paramedic)	
<input type="checkbox"/> Public Member	Larry Lincoln	Retired high school principal	
<input type="checkbox"/> Hospital / Clinical Representative(s)	Georgene Fabsits, RN Julie Sloncen, RN	Alexian Brothers Medical Center; EMS Coord. ABMC; ED Director	
<input type="checkbox"/> Other	Jason Brizzell, EMT-P Patrick O'Brien Markus Rill, EMT-P	Schaumburg FD; QI Committee chair Private EMS Providers Prospect Heights FPD – CARS Committee chair	
<input type="checkbox"/> Faculty (ex officio)	Julie D'Agostino	Harper College (representing Kim Chavis)	
<input type="checkbox"/> Medical Director (ex officio)	John M. Ortinau, MD	NCH	
<input type="checkbox"/> Program Director (ex officio)	Connie J. Mattera	NCH	
<input type="checkbox"/> Sponsor Administration (ex officio)	Kim Nagy (excused)	NCH	

	Agenda Item	Reviewed	Discussion	Action Required	Lead	Goal Date
1.	Program Goals & Learning Objectives	✓	Members reviewed program goals and objectives as written into Student handbook.	Adopted as written.		

	Agenda Item	Reviewed	Discussion	Action Required	Lead	Goal Date
2.	<b>Annual Report and Outcomes</b> <input checked="" type="checkbox"/> Graduate Surveys <input checked="" type="checkbox"/> Employer Surveys <input checked="" type="checkbox"/> Resources Assessment Matrix <input checked="" type="checkbox"/> Thresholds	✓	<p>Members reviewed the <b>graduate surveys</b> and the attached comments. They were very pleased with the 4.8 average ratings across all three domains of learning. <b>Opportunity:</b> While labs had a new coordinator who did a good job of designing rotations and working with equipment officers to have them set up on time, it was discovered late in the program that they did not always have the full number of preceptors needed nor did they flow as anticipated. Some students did not believe that practice revolutions always mirrored real-life performance of select skills.</p> <p><b>Employer surveys</b> will not go out until November. Will review results when they are received.</p> <p>Members reviewed the <b>Resources Assessment Matrix</b> and determined that the program has adequate resources devoted to the program.</p> <p>Members reviewed the <b>thresholds</b> of patient care contacts. Given the very good results experienced by the last class, they approved the same thresholds for the incoming class.</p>	<p>The program will look at all labs and take steps to address student comments.</p> <p>Employer surveys will go out in November for return in December.</p> <p>Report approved.</p> <p>Thresholds confirmed in incoming student handbook.</p>	<p>Mike Gentile</p> <p>Dara Sordo</p> <p>C. Mattera</p>	<p>Fall labs</p> <p>Nov. 30. 2016</p>
3.	<b>Other Assessment Results</b> <input checked="" type="checkbox"/> Student <input type="checkbox"/> Faculty <input checked="" type="checkbox"/> Program <input type="checkbox"/> Other	✓	<p>The members were given a summation of student outcomes and faculty feedback from the last class. Cumulative GPA: 91.41%. Recommended changes are outlined below.</p> <p>Members were given the outcome results on the NREMT written exams and those results have been posted to the System website.</p> <p>1<sup>st</sup> attempt pass 21/25 (84%)          Cum pass within 3 attempts: 24/25 (96%)          All candidates eligible to test the NREMT practical exam passed the exam (25/25).</p>	<p>Report accepted with congratulations on the stellar results.</p>		

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4.	<b>Program Changes (possible changes)</b> <input checked="" type="checkbox"/> Course changes <input type="checkbox"/> Preceptor changes <input checked="" type="checkbox"/> Clinical and field <input checked="" type="checkbox"/> Curriculum <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Content               <ul style="list-style-type: none"> <li>o Sequencing</li> <li>o Required minimums reviewed &amp; approved</li> <li>o Competencies</li> </ul> </li> </ul>	✓	<p>Preceptor course was updated to include an expansion on expected documentation of patient care reports (PCRs) and student comments show the enhancements put into place were very successful.</p> <p>The <b>seminar agenda</b> was enhanced to include active student engagement activities in creating scenarios, role playing the patients and responders, and peer evaluation. Labs were offered every afternoon to help prepare them for the class final practical exam and the National Registry Practical Exam. Seminar content was specifically designed to also serve as a NREMT refresher course for those already licensed System members wanting to pursue national registration.</p> <p><b>Quizzes and exams:</b> All modular exams and the final written exam were blueprinted to objectives and balanced in a table of specifications that aligned questions into A&amp;P/pathophysiology/facts (10-15% of questions); Assessment and interpretation of data to form a conclusion (40%), Interventions (40%); and Ongoing assessment (5-10%). Items were updated by the Program Director and reviewed in advance by at least four subject matter experts and the EMS MD for item construction, accurate keyed responses, and rated for item difficulty. The EMS MD approved every major evaluation instrument in advance. All exams performed reliably with measures of central tendency within statistically allowable variation. Students performed well and passed the Final Written exam on first attempt. All candidates passed the Class Final Practical exam. Only 3 had to retest one station and all passed the retest.</p>	<p><b>Changes made for F16/S17:</b> Schedule redone to meet Harper Semesters (Higher Learning Commission requirement) so students do not lose financial aid. Program will start one month earlier to allow for semester break. The new course agenda was provided to the members and approved. Health prerequisite requirements were modified based on industry standards and approved by the EMS MD. Hospital clinical instruction plans were updated with revised evaluation forms to meet CoA recommendations. Field Internship was modified slightly to place emphasis on phase 2 (team leadership) in compliance with CoA requirement for capstone experience. Student handbook was revised to better reflect essential aspects of the paramedic profession and ADA criteria; update health requirements section and clarify credentialing exam options. All changes approved.</p>	No further action to be taken.	

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5.	<b>Substantive Change</b> ( <i>possible changes</i> ) <input type="checkbox"/> Program Status <input type="checkbox"/> Sponsorship <input type="checkbox"/> Sponsor Administrator Personnel <input checked="" type="checkbox"/> Program Personnel <input type="checkbox"/> Addition of Distance Education <input type="checkbox"/> Addition of Satellite Program	✓	Michael Gentile, EMT-P was hired as a new full-time paramedic program educator to assist the program director. He started work in May and will rework the labs, update curricular materials, and be mentored as he takes on a more active teaching role.	Report accepted.	C. Mattera will mentor Mike and evaluate his performance	Ongoing
6.	<b>Other Identified Strengths</b>	✓	Several educators must sign off on summative criteria for a student to graduate without restriction (academic grades, all homework submitted, simulated runs submitted and approved, Field Internship complete and all signed paperwork submitted, and all patient care contacts completed and entered into FISDAP). A dashboard was created so all EMS staff could enter their approvals and see where students were in the completion process. This worked extremely well and all but 5 students were done with everything by graduation and two of those were signed off prior to the first NREMT practical exam. Much better timely completion rate than in the past.	Report accepted with congratulations to the team.		
7.	<b>Other Identified Weaknesses</b>	<input type="checkbox"/>	None identified.			
8.	<b>Action Plan for Improvement</b>	<input type="checkbox"/>	None identified at this time.			
9.	<b>Other Business</b>	✓	30 students accepted (jointly with Harper College) into the incoming class starting 09/12/2016 based on field internship availability. Initial and ongoing correspondence has been sent to each student with instructions regarding requirements to complete before class begins.			
10.	<b>Future Meetings</b>	✓	Next meeting: November 10, 2016.			