MEETING NOTES

EMS Department Meeting

June 13th, 2025

10:00 AM - 11:30 AM

Topics:

- EMS Support Specialist position changes
- 2025-26 Paramedic Lee 22, N. Collier 24
- Fall 2025 EMT Lee 36, Collier 24
- Current National Registry Pass Rates
 - Paramedic 2023-24 (61% first-attempt, 88.8% within 3 attempts, 91.6% overall pass)
 - Spring 2025 EMT (Collier: 14/15 93% first-attempt, 15/15 100% overall) (Lee: 13/19 first-attempt) Spring EMT Overall 79% first attempt and 82% within 3 attempts.
- Preparation/ Discussion Advisory Board Meeting
 - Student Minimum Competency Progress
 - Student formative exposures that are not listed as simulated permitted are significantly behind the minimum requirements.
 - Pediatric patients Dr. Abo approved simulation.
 - Cardiac dysrhythmias
 - Medical Neurologic pathologies or complaints
 - Students have been provided with several opportunities to discuss/understand SMC report minimum requirements/expectations, and FISDAP yet, are still documenting incorrectly and/or expressing concern.
 - SMC Guide has been available to the students since the first semester and was explicitly explained prior to the start of the second semester.
 - Consideration of additional methods to communicate information – video guide
 - Lead medic instructors to be given SMC/FISDAP overview to assist with answering questions and reviewing reports.

- Averages to be reviewed with Medical Director and Advisory Board to have more realistic numbers approved for 2025-26 cohort.
- Review alternative platforms Scheduling Demo with Platinum Planner – July 10th at 9, 10,11, or 12?
- Ride-time locations contributing to lack of patient encounters.

RAM Feedback

 Lee Campus feedback for improvement was related to negative hospital experiences (OR), confusion with SMC and FISDAP, pediatric airway supplies, 72-hour lock on FISDAP, SMC # requirements.

High-Stakes Exam Analysis

- Unit exams and course finals currently would not be considered "high-stakes" because failing does not result in dismissal from the program.
- Data to be used to calculate cut scores and develop high-stakes examination policy on how many failures are permitted, and/or option to retest.

Program Summary Report

- Survey data reviewed and discussed from Fall 2024 to Spring 2025.
 - Scenario times are adjusted to accommodate level of difficulty of the material being covered, student's overall needs (outcomes, level of focus or attention), and CA availability.
 - Updated Manikins several new manikins have been purchased (Geriatric, Trauma, Megacode Kelly Advanced, hemorrhage control, neonatal, pediatric/newborns, Pericardiocentesis simulator, pediatric airway manikins, 2- combat challenge kids, and crash kellys).
 - In alignment with curriculum changes related to pharmacology, students are now given an average of 2-3 medications to learn.
 - Program is planning to revise and streamline Paramedic Drug Guideline Book which would allow more focus on the core components of each medication.
 - We discussed partnering with local fire departments and Arthrex to collaborate on funding and opportunities to utilize cadavers.
 - N. Collier instructors to review props and request additional if needed.

- Instructors are providing more detailed instructions to the CA's with resources prior to their lab shift. This includes more specific information related to the expectations of their scenarios and attachments with pertinent resources. Future discussions will occur on how to utilize CA Canvas for additional support.
- Live patient options will be explored in addition to CA training on MegaCode Kelly.
- Annual Long-Range Planning
 - Strengths
 - Dedicated instructors with extensive field experience.
 - Instructors maintain relevance with evolving industry standards and protocols.
 - Programs foster an environment where feedback is welcomed and encouraged.
 - Strong collaborative culture among all staff members.
 - Instructors consistently work together to challenge and improve each other.
 - Commitment to continuous improvement and program enhancement.
 - Significant improvements in Canvas LMS utilization for student learning and feedback.
 - Progressive approach to lab equipment and supplies. Evidenced in recent investment in new manikins and equipment.
 - Strategic accommodation of students who secure employment mid-program.
 - Demonstrated ability to maintain educational continuity while adapting to student schedules and unanticipated events.
 - Proactive approach to student retention challenges.
 - Weaknesses
 - Difficulty recruiting and retaining quality CA's.
 - Current hourly compensation rates are not competitive. Proposed salary increases pending board approval.
 - First-time National Registry pass rates below the national average.
 - Limited access to National Registry professional development resources for instructors and students.

- Institutional funding constraints are preventing attendance at distance conferences.
- Lack of control over clinical site preceptor quality and engagement. Students encounter preceptors with negative attitudes.
- Scheduling Demo with Platinum Planner July 10th at 9, 10,11, or 12?
- o Pediatric Midterms All staff to assist on 6/12 and 6/17
- Questions, Concerns, Feedback
 - o None

Reminders/ Action Items:

- Medical Director Student Review (Paramedics)
- Advisory Board Meeting 6/27 at 10 AM
- Monday, August 18th Convocation
- Annual Training Reminder
- What additional resources can we provide to CAs for training and onboarding? What tools or resources would be valuable to add to the CA Canvas?
- N. Collier What additional props can you use to make scenarios more realistic?
- Scheduling Demo with Platinum Planner July 10th at 9, 10,11, or 12?

High Stakes Exam Analysis

| 2023-24 | | 2022 | 2-23 | 2023 | 2021-22 | | | |
|----------|----------|----------|----------|----------|----------|--|--|--|
| 64.72727 | Fail 3rd | 72.18182 | Pass 2nd | 73.54545 | Pass 5th | | | |
| 67.90909 | Pass 4th | 67.09091 | Pass 2nd | 73.63636 | Pass 4th | | | |
| 69.81818 | Fail 2nd | 70.81818 | Pass 2nd | 73.72727 | Pass 4th | | | |
| 70.36364 | Fail 2nd | 71.18182 | Pass 3 | 74.18182 | Fail 6th | | | |
| 72.09091 | Pass 3 | 71.72727 | Pass 1st | 74.27273 | Fail 6th | | | |
| 73.36364 | Pass 1 | 71.90909 | Pass 3 | 75.36364 | Pass 1st | | | |
| 73.72727 | Pass 2 | 72.18182 | Pass 1st | 76.81818 | Pass 1st | | | |
| 73.90909 | Pass 1 | 72.81818 | Pass 1st | 77.63636 | Pass 1st | | | |
| 74.36364 | Pass 3 | 72.90909 | Pass 1st | 78.45455 | Pass 1st | | | |
| 74.90909 | Pass 1 | 73 | Fail 3 | 80.09091 | Pass 1st | | | |
| 76.09091 | Pass 2 | 73.27273 | Pass 1st | 80.27273 | Pass 1st | | | |
| 76.36364 | Pass 2 | 73.27273 | Pass 3 | 80.90909 | Pass 1st | | | |
| 76.90909 | Pass 1 | 73.72727 | Pass 2 | 81.18182 | Pass 1st | | | |
| 77.18182 | Pass 2 | 75 | Pass 1st | 82.27273 | Pass 1st | | | |
| 77.45455 | Pass 1 | 75.45455 | Pass 2nd | 82.36364 | Pass 1st | | | |
| 77.90909 | Pass 1 | 75.63636 | Pass 2nd | 82.63636 | Pass 1st | | | |
| 78 | Pass 2 | 76.27273 | Pass 2nd | 87.18182 | Pass 1st | | | |
| 78.36364 | Pass 1 | 76.36364 | Pass 1 | | | | | |
| 82.27273 | Pass 1 | 77.09091 | Pass 1 | | | | | |
| 82.81818 | Pass 1 | 77.09091 | Pass 2 | | | | | |
| 84.09091 | Pass 1 | 77.54545 | Pass 1 | | | | | |
| | | 77.90909 | Pass 1st | | | | | |
| 71.81818 | Pass 3 | 78.63636 | Pass 1 | | | | | |
| 72.27273 | Pass 1 | 79.27273 | Pass 1 | | | | | |
| 74.72727 | Pass 1 | 79.45455 | Pass 1st | | | | | |
| 75.63636 | Pass 1 | 80.27273 | Pass 1 | | | | | |
| 75.63636 | Pass 3 | 80.90909 | Pass 1st | | | | | |
| 75.90909 | Pass 1 | 82 | Pass 1 | | | | | |
| 76.63636 | Pass 1 | 84.72727 | Pass 1st | | | | | |
| 77.18182 | Pass 2 | 86.09091 | Pass 1 | | | | | |
| 77.18182 | Pass 1 | 86.54545 | Pass 1 | | | | | |
| 77.54545 | Pass 1 | 86.81818 | Pass 1 | | | | | |
| 79 | Pass 1 | 88 | Pass 1 | | | | | |
| 79.27273 | Pass 1 | | | | | | | |
| 80.54545 | Pass 1 | | | | | | | |
| 81.63636 | Pass 1 | | | | | | | |
| 82.09091 | Pass 1 | | | | | | | |

SMC Report Progress – Formative Exposures

| | Adult (F) | Geriatri c (F)- 9 | Trauma - (F) - 18 | Psyc (F)- 12 | Cardiac (F)- 12 | C. Arrest (F)- 2 | C. Dysrhythmia s (F) - 10 | Medical neuro (F) -8 | Resp (F) | Other Medical (F) - 12 |
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| 0 | 3 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 0 | 3 | 4 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | |
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| 2 | 5 | 5 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 2 | 5 | 5 | 1 | 0 | 0 | | 0 | 1 | 0 | |
| 2 | 7 | 7 | 1 | 0 | 0 | _ | 0 | 1 | 0 | |
| 2 | 7 | 7 | 2 | 0 | 0 | 0 | 0 | 1 | 0 | |
| 2 | 7 | 7 | 2 | 0 | 0 | _ | 0 | 1 | 1 | |
| 3 | 8 | 8 | 2 | 0 | 0 | _ | 0 | 1 | 1 | |
| 3 | 9 | 8 | 2 | 0 | 0 | | 0 | 1 | | |
| 5 | 9 | 8 | 3 | 0 | 0 | 0 | 1 | 1 | 1 | : |
| 5 | 9 | 8 | 3 | 0 | 0 | _ | 1 | 1 | 1 | |
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| 6 | 11 | 10 | 3 | 0 | 0 | 1 | 1 | 2 | 1 | |
| 7 | 11 | 10 | 4 | 0 | 1 | 1 | 1 | 2 | 2 | 1 |
| 7 | 11 | 10 | 4 | 0 | 1 | 1 | 1 | 2 | | 1 |
| 8 | 11 | 10 | 4 | 0 | 1 | 1 | 1 | 2 | | 1 |
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