



**EMSCC Education Subcommittee
Meeting Minutes
February 17, 2023
9 a.m.**

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Attendees:

Members:

K. Wilkinson-chair, A. Steeby, C. Patrello, S. Pochik, D. Pratt, E. Unger, B. Jennison, M. Bentley, Dr. G. Smith, T. Newton, L. Bowen, N. Ishioka.

Absent: J. Hockman

Guests: Angela Madden, Carol Robinet, John Theut

Staff: Terrie Goode, Amanda Kinney, Nicole Babb, Emily Bergquist, Rob Rudzki, Kallie Piette, Emily Baker

1. Call to Order

- The meeting was called to order at 9:01 a.m. by Kevin Wilkinson.

2. Roll Call – see above.

3. Approval of Agenda and Minutes – not done today

4. Old Business

- Implementing BLS portfolio and psychomotor exams, discuss webinars held– Terrie Godde and Amanda Kinney:
 - Amanda Kinney went over the webinars, providing a chart of attendees, and discussed an annual meeting for program directors and instructors. Kevin Wilkinson asked if there is a video available, Amanda explained it is available on MI Train for credit or they can attend one of the webinars and make their own video with the information they received from attending a webinar. Kevin Wilkinson suggested consistency for recruitment and retention purposes and Amanda explained they have asked for feedback due to the process being new for everyone.
- Paramedic Preparedness Program – Terrie Godde:
 - Terrie Godde provided information and explained it is nearly done, there will be a meeting with the Emily Bergquist and Emily Baker on Tuesday for finalization. She discussed what the content will be for the program and is meant for people that need a refresher course. When the course is taken, the provider will be eligible for NREMT testing. Ed Unger asked if this counts for CE. This will be discussed on Tuesday. This topic will remain on the agenda for the next meeting for updates.
- CE for skill performance – Emily Bergquist:
 - Emily Bergquist presented her suggestions for CE credit document and the group discussed. Emily explains there is no evidence the process for receiving continuing education credits now is entirely successful. There would be a cap for credits for a few

of them. Trauma, Preparatory and Advanced Airway (intubation) are ready to be developed now to be released in March. The document reviewed is the last page.

- **Motion to approve these CEs and send to EMSCC (Unger, Pochik). Motion approved.**

5. New Business

- STEPS – Amanda Kinney
 - Amanda Kinney explains the document: Strategies to enhance program success, developed for site visit deficiencies, to provide feedback to the programs and give them an opportunity to make changes as needed. She will start using this document.

6. Additional Items from Attendees

- Sexual assault training update- Terrie Godde
 - Terrie Godde explained that every licensed provider will go through this training and is working with subject matter experts towards one course for every program level, finalization is set for next week and should be ready by March. A second training that will be for community paramedics only is also in the works.

7. Adjournment

- **Motion to adjourn at 9:52 a.m. (Steeby, Jennison). Adjourned.**

Suggested Data Pulls for Further CE Credits

Preparatory – IV starts

- Should we count signed records for other levels? Some Criteria for those?
- Medication Admin-all levels

Assessment

- Pt. Assessment

Airway – Airway Interventions

- Should we just add ALS skills into this and then Paramedics could theoretically have more counted? Or do something different for ALS skills?
 - Intubation

Trauma

- 911 Calls
- Procedure counts, marked as successful (by license number)
 - Immobilization skills (splinting)
 - Bandaging/bleeding control
 - Spinal Motion Restriction
 - Needle Decompression

Medical

- Procedure counts (successful)
 - CPR Performed
 - 12 lead
 - Electrical therapy

Special Considerations

- Pediatric patients where the individual signed the report (Trauma, Medical, Airway)
- Patients with medical history that indicates special considerations?

Operations?

- Documentation?
- MCI?
- Open to suggestions, but would like to get the simpler ones in play first.