

Advisory Board Meeting

Zoom

09/16/2021

9:00-11:00am

<https://lrccd.zoom.us/j/94277979860>

Attendees: Sharon Arase, Dignity Health; Kelly Banford, FLC; Natalie Cherok-Fenner, FLC; Jose Cobar, FLC; Julie Holt, Health Workforce Initiative; Laura Laakso, Tahoe Forest; David Luong, Kaiser; Vicky Maryatt, FLC; Erica Padilla, Sutter Health; Jason Pedro, FLC; Ashpreet Singh, LRCCD; Andy McGaffic, FLC/notes

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Agenda: 09/16/2021

1. Welcome & Introductions
2. Approve Previous Minutes 09/18/2020
3. Review of Impact on Outcomes due to COVID-19
 - a. Largely inconclusive. Movement to a fully online modality showed some technical skills were lacking, however exam scores remained higher than the national average.
4. Rotation/Exam Update: Cohort 8
 - a. ASCP scores still at 790s, 800s
 - b. Practical skills could be improved hence hybrid labs Hematology and Microbiology in Fall 2021. Natalie and Jason will work together, compare notes and report back at the end of semester.
5. Cohort 9 update
 - a. Hybrid Labs: Heading this direction is good. If Pre-CLS takes off, potential to offer 2 sections of lab.
 - i. In-person experience is preferable. Faculty gains higher level of understanding about students. Easier to spot potential issues. Intercommunication can be observed. Faculty gains better sense of the whole student, including areas of strength, and which areas need work in terms of functioning in lab/healthcare environment.

6. Rotations in 2022/2023

- a. Recently the program has run with fewer than 10 students, but can no longer do so.
- b. Need commitment from everyone here, and new places.
- c. Dignity, Kaiser and Sutter agreed to rotate 3 students right away. 6 for Jan 2022.
- d. Need everyone to take a student. Split the workload up, need to engage new people. Travis AFB to take 1 student, possibly 2 in 2023. David Luong at Kaiser and UC Davis instrumental to Micro rotations.
- e. When students have worked multiple sites, this expands their ability to get hired. Sell it as such. Sell themselves, different types of labs.

7. Other updates

- a. Pre-CLS track is picking up steam. Pre-CLS students have jobs, 80 – 90% work full-time.
- b. Staffing in hospital labs remains dire. Many are leaving. No travelers to be found. Budgets are tight, so it's hard to find staff to hire.
- c. Training sites beginning to catch up with needs. Students hired within month; we hope need translates to more sites. Our students get hired by training sites or at least in their systems.

8. Perkins/Strongworkforce update

- a. In maintenance mode. Didn't make major purchases.
- b. Equipment purchased: Mini PCR, locker, tube warmer.
- c. Some subscriptions:
 - i. Bought MediaLab. MedTraining.org has limitations.
 - ii. Using Phlebotomy.com videos since we had limited opportunities to meet. Gold standard.

9. Curriculum update

- d. Outcome/learning objectives evaluated every 6 years.
- e. Reviewed courses/curriculum, no big changes.

10. Other Questions/Concerns

- f. We want students to be motivated and successful. Let's investigate how those who succeed in the program get motivated.
 - i. HLWI activities internalize behaviors of professional skills. We use New World of Work modules during rotations. Perhaps start earlier in program?
 - ii. Awareness of profession is key. Can partners talk to people who they've recently hired, get what they liked about being student and/or what their first year of MLT/CLS is like? Students need to hear from their own age group/culture. Guest speaker, video, email?
- g. Should we stiffen up selection criteria for MLT program acceptance? Ideas for smaller pool of stronger candidates. Ideas discussed:
 - i. Selection criteria cannot be merit-based (Title 5 requirement) so we will continue random lottery.

- ii. To make prerequisites higher, we must first demonstrate that students under 2.8 GPA more likely to fail. Vicky: Reach out to Research/Amelia, ask her to find out GPA of students who succeed.
 - iii. Make healthcare workplace experience a prerequisite? Healthcare culture is best acquired “boots on the ground.” Having healthcare workplace experience ensures that students know what they are getting into.
- h. Donations: We need the following: Phlebotomy tubes, immunology kits, panel/screening cells. Blood Bank, blood plates, blood agar. EMB, any major plates; MRSA plates are good for streaking. We are willing to come by and pick up.

11. Confirm Next Advisory Board Meeting

6 months. March or April.