

# Emergency Medical Technologies Program Review

## 2012-2013

### 1. Program/Department Description

#### 1A. Description

For clarification: Emergency Medical Technologies (EMTs) includes the Emergency Medical Technician (EMT) program and the Paramedic Studies Program (PM). The budget for both is combined.

#### **A. Description** (Emergency Medical Technician (EMT) and Paramedic Studies (PM))

A community depends on an emergency medical system that responds quickly with well-educated and competent EMTs. Successful completion of this one semester EMT program and the National Registry certifying examination presents the EMT with exciting employment opportunities with private ambulance companies, fire departments and hospitals who utilize basic life support skills. They may also find employment with companies providing basic medical care at concerts, sporting events and amusement parks. Successful completion of the EMT program is a prerequisite for most Paramedic Programs throughout the United States.

The Ventura College Paramedic Studies program is the only program fully accredited by the Commission on Accreditation of Allied Health Education Programs in Ventura County. Successful completion of this two semester program will allow students to sit for the National Registry licensing examination and then gain employment in the wide range of public and private agencies who incorporate the advanced life support skills of a paramedic into their needs.

#### Degrees/Certificates

PM – Certificate with courses leading to AS in Emergency Medical Services

#### **1B. 2012-2013 Estimated Costs (Certificate of Achievement ONLY)**

*Required for Gainful Employment regulations.*

Paramedic Studies	Cost
Enrollment Fees	1702.00
Books/Supplies	700.00
Total	2402.00

# Emergency Medical Technologies Program Review

## 2012-2013

### **1C. Criteria Used for Admission**

EMT –

- Health Screening and Physical Exam
- Drug, alcohol and criminal background clearance
- Current CPR certification

PM –

- Health Screening and Physical Exam
- Drug, alcohol and criminal background clearance
- Current CPR Certification
- EMT Certification
- Meet English, math, anatomy and physiology and work experience prerequisites

### **1D. College Vision**

Ventura College will be a model community college known for enhancing the lives and economic futures of its students and the community.

### **1E. College Mission**

Ventura College, one of the oldest comprehensive community colleges in California, provides a positive and accessible learning environment that is responsive to the needs of a highly diverse student body through a varied selection of disciplines, learning approaches and teaching methods including traditional classroom instruction, distance education, experiential learning, and co-curricular activities. It offers courses in basic skills; programs for students seeking an associate degree, certificate or license for job placement and advancement; curricula for students planning to transfer; and training programs to meet worker and employee needs. It is a leader in providing instruction and support for students with disabilities. With its commitment to workforce development in support of the State and region's economic viability, Ventura College takes pride in creating transfer, career technical and continuing education opportunities that promote success, develop students to their full potential, create lifelong learners, enhance personal growth and life enrichment and foster positive values for successful living and membership in a multicultural society. The College is committed to continual assessment of learning outcomes in order to maintain high quality courses and programs. Originally landscaped to be an arboretum, the College has a beautiful, park-like campus that serves as a vital community resource.

# Emergency Medical Technologies Program Review

## 2012-2013

### 1F. College Core Commitments

Ventura College is dedicated to following a set of enduring Core Commitments that shall guide it through changing times and give rise to its Vision, Mission and Goals.

- Student Success
- Respect
- Integrity
- Quality
- Collegiality
- Access
- Innovation
- Diversity
- Service
- Collaboration
- Sustainability
- Continuous Improvement

### 1G. Program/Department Significant Events (Strengths and Successes)

- Our program is the only fully accredited program in Ventura County (original accreditation July 2003)
- Even though the Ventura College Paramedic Program was established just 12 years ago, our graduates now account for **one third** of the paramedics working in Ventura County.
- National Registry (Licensure exam for paramedics)
  - National Registry (Licensure exam for paramedics) last 6 year average – 100% success rate
  - National Registry (Licensure exam for paramedics) 13 year average – 98% success rate
  - National Registry for the Nation – 7 year average 83% success rate
- National Registry (Certification exam for EMTs)
  - 2 year average – 83% success rate (National statistics are 78%)
- Many of our graduates have received individual awards within the local Emergency Medical Service community.
- Both faculty and alumni continue to be involved in all aspects of the Ventura County EMS Community. Most of our faculty remains involved in the Ventura County EMS Committees and all but one of our skills instructors are graduates of our program. In addition, members of the Ventura County Prehospital Care System have been actively involved with our program – most guest speakers offer their time as a way to support our program. They continue to support and provide necessary input as members of our Paramedic Studies Advisory Committee.
- Our program continues to work well with other departments and faculty members. It appears that we are meeting or exceeding all employer and graduate expectations. Supportive data is voluminous and would be available for review.

**Emergency Medical Technologies Program Review**  
**2012-2013**

K. Organizational Structure

President: Robin Calote

Executive Vice President: Ramiro Sanchez

Dean: Kathleen Schrader

Department Chair: (Program Director) Meredith Mundell

Instructors and Staff

Name	Meredith Mundell
Classification	Professor
Year Hired	1999
Years of Work-Related Experience	37
Degrees/Credentials	B.S.N.

# Emergency Medical Technologies Program Review 2012-2013

## 2. Performance Expectations

### 2A. Student Learning Outcomes

#### 2A1. **2012-2013** - Institutional Student Learning Outcomes

1. Communication - written, oral and visual
2. Reasoning - scientific and quantitative
3. Critical thinking and problem solving
4. Information literacy
5. Personal/community awareness and academic/career responsibilities

#### 2A2. EMT **2012-2013** - Program Level Student Learning Outcomes *For programs/departments offering degrees and/or certificates*

Successful students in the program are able to:

1. Function within the Emergency Medical Technician scope of practice to apply scientific knowledge as well as the skills necessary in providing emergency medical care.
2. Provide competent and safe care in a variety of settings to a group of patient with diverse needs across the life span.
3. Seek certification as EMTs and meet the expectations of the Emergency Medical Services community.

#### 2A2. PM **2012-2013** - Program Level Student Learning Outcomes *For programs/departments offering degrees and/or certificates*

Successful students in the program are able to:

1. Function within the paramedic scope of practice to provide professional, competent and safe care while applying scientific knowledge and demonstrating mastery of skills, management and leadership to a group of patients with complex and diverse needs.
2. Utilize effective communication and interpersonal skills with patients and the health care team while providing education to individuals and groups.
3. Understand and observe the concept of lifelong learning, including the pursuit of advanced degrees and practice in the health field.
4. Seek licensure as a paramedic and meet the expectations of the Emergency Medical Services community

#### 2A3. **2012-2013** - Course Level Student Learning Outcomes *Attached to program review (See appendices).*

## **Emergency Medical Technologies Program Review** **2012-2013**

### **2B. EMT 2012-2013 Student SUCCESS Outcomes**

1. The program will maintain its retention rate from the average of the program's prior three-year retention rate. The retention rate is the number of students who finish a term with any grade other than W or DR divided by the number of students at census.
2. The program will maintain the student success rates from the average of the program's prior three-year success rates. The student success rate is the percentage of students who receive a grade of c or better.
3. The program will increase its pass rate on the National Registry Certification examination.

### **2B. PM 2012-2013 Student SUCCESS Outcomes**

1. The Paramedic program will maintain its retention rate above 90% and/or the college's prior three year retention rate. The retention rate is the number of students who finish a term with any grade other than W or DR divided by the number of students at census.
2. The program will maintain the student success rates from the average of the program's prior three-year success rates. The student success rate is the percentage of students who receive a grade of C or better.
3. The program will maintain a pass rate on the National Registry Licensure examination greater than 90%.

### **2C. 2012-2013 Program OPERATING Outcomes**

1. The EMT program will maintain WSCH/FTEF above the 525 goal set by the district.
2. Inventory of EMT and Paramedic instructional equipment is functional, current, and otherwise adequate to maintain a quality-learning environment. Inventory of all equipment over \$200 will be maintained and a replacement schedule will be developed. Service contracts for equipment over \$5,000. Will be budgeted if funds are available.
3. The Commission on Accreditation of Allied Health Education Programs (CAAHEP), our accrediting agency, requires that adequate clerical support be provided the program.

### **2D. Mapping of Student Learning Outcomes - Refer to TracDat**

## Emergency Medical Technologies Program Review 2012-2013

### 3. Operating Information

#### 3A. Productivity Terminology Table

<b>Sections</b>	A credit or non-credit class. Does not include not-for-credit classes (community education).
<b>Census</b>	Number of students enrolled at census (typically the 4 <sup>th</sup> week of class for fall and spring).
<b>FTES</b>	Full Time Equivalent Students A student in the classroom 15 hours/week for 35 weeks (or two semesters) = 525 student contact hours. 525 student contact hours = 1 FTES. Example: 400 student contact hours = $400/525 = 0.762$ FTES. The State apportionment process and District allocation model both use FTES as the primary funding criterion.
<b>FTEF</b>	Full Time Equivalent Faculty A faculty member teaching 15 units for two semesters (30 units for the year) = 1 FTE. Example: a 6 unit assignment = $6/30 = 0.20$ FTEF (annual). The college also computes semester FTEF by changing the denominator to 15 units. However, in the program review data, all FTE is annual. FTEF includes both Full-Time Faculty and Part-Time Faculty. FTEF in this program review includes faculty assigned to teach extra large sections (XL Faculty). This deviates from the prior practice of not including these assignments as part of FTEF. However, it is necessary to account for these assignments to properly represent faculty productivity and associated costs.
<b>Cross Listed FTEF</b>	FTEF is assigned to all faculty teaching cross-listed sections. The FTEF assignment is proportional to the number of students enrolled at census. This deviates from the practice of assigning load only to the primary section. It is necessary to account for these cross-listed assignments to properly represent faculty productivity and associated costs.
<b>XL FTE</b>	Extra Large FTE: This is the calculated assignment for faculty assigned to extra large sections (greater than 60 census enrollments). The current practice is not to assign FTE. Example: if census > 60, 50% of the section FTE assignment for each additional group of 25 (additional tiers).
<b>WSCH</b>	Weekly Student Contact Hours The term "WSCH" is used as a total for weekly student contact hours AND as the ratio of the total WSCH divided by assigned FTEF. Example: 20 sections of 40 students at census enrolled for 3 hours per week taught by 4.00 FTEF faculty. $(20 \times 40 \times 3) = 2,400$ WSCH / 4.00 FTEF = 600 WSCH/FTEF.
<b>WSCH to FTES</b>	Using the example above: $2,400$ WSCH x 35 weeks = 84,000 student contact hours = $84,000 / 525 = 160$ FTES (see FTES definition). Simplified Formulas: $FTES = WSCH/15$ or $WSCH = FTES \times 15$
<b>District Goal</b>	Program WSCH ratio goal. WSCH/FTEF The District goal was set in 2006 to recognize the differences in program productivity.

## Emergency Medical Technologies Program Review 2012-2013

### 3B: Student Success Terminology

<b>Census</b>	Number of students enrolled at Census (typically the 4 <sup>th</sup> week of class for fall and spring). Census enrollment is used to compute WSCH and FTES for funding purposes.
<b>Retain</b>	Students completing the class with any grade other than W or DR divided by Census Example: 40 students enrolled, 5 students dropped prior to census, 35 students were enrolled at census, 25 students completed the class with a grade other than W or DR: Retention Rate = $25/35 = 71\%$
<b>Success</b>	Students completing the class with grades A, B, C, CR or P divided by Census Excludes students with grades D, F, or NC.

Program specific data was provided in Section 3 for all programs last year. This year, please refer to the data sources available at

[http://www.venturacollege.edu/faculty\\_staff/academic\\_resources/program\\_review.shtml](http://www.venturacollege.edu/faculty_staff/academic_resources/program_review.shtml)

In addition, the 2011-2012 program review documents will provide examples of last year's data and interpretations.

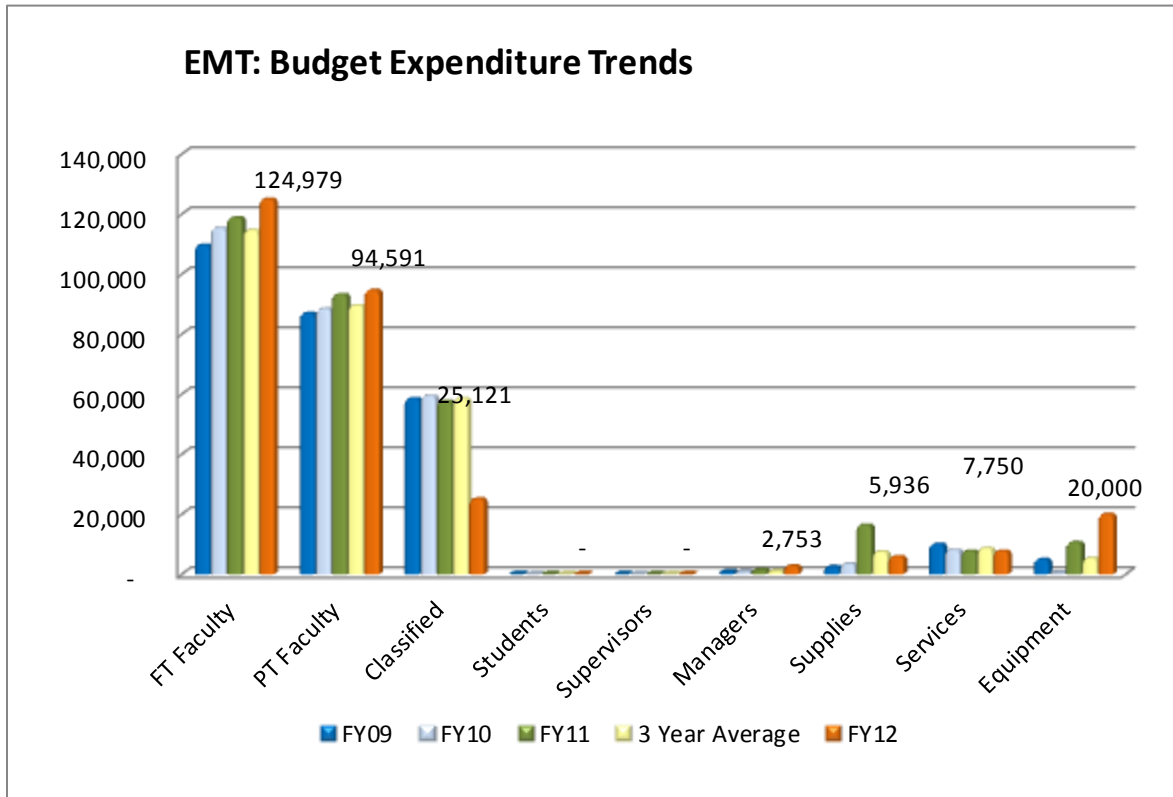
3C: **2012 - 2013** Please provide program interpretation for the following:

### 3C1: Program Budget Information

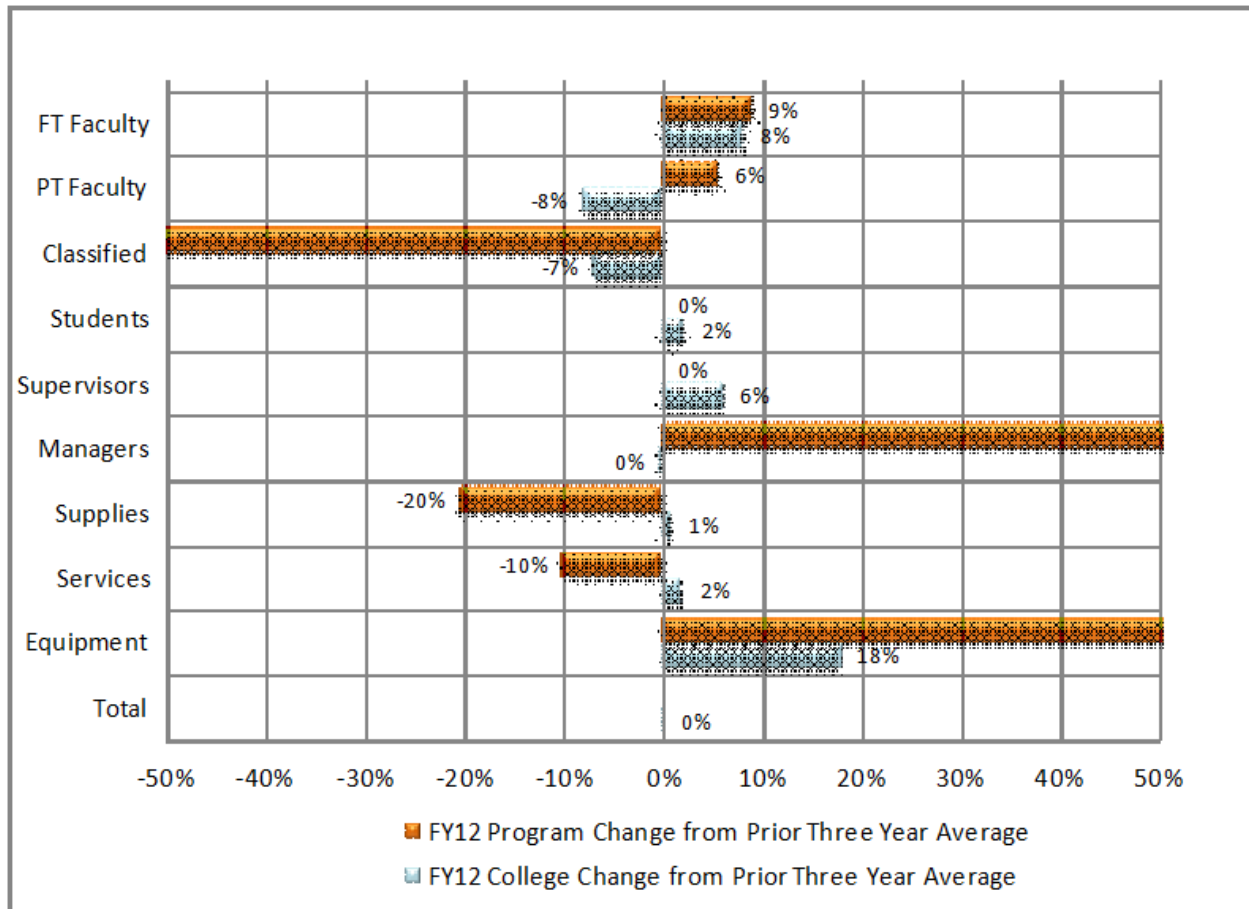
Category	Title	FY09	FY10	FY11	3 Year Average	FY12	Program Change from Prior Three Year Average	College Change from Prior Three Year Average
1	FT Faculty	109,705	115,345	118,774	114,608	124,979	9%	8%
2	PT Faculty	86,956	88,422	93,229	89,536	94,591	6%	-8%
3	Classified	58,554	59,399	57,727	58,560	25,121	-57%	-7%
4	Students	-	-	-	-	-	0%	2%
5	Supervisors	-	-	-	-	-	0%	6%
6	Managers	859	982	1,434	1,092	2,753	152%	0%
7	Supplies	2,504	3,456	16,424	7,461	5,936	-20%	1%
8	Services	10,027	8,077	7,756	8,620	7,750	-10%	2%
9	Equipment	4,971	372	10,610	5,318	20,000	276%	18%
	<b>Total</b>	<b>273,576</b>	<b>276,053</b>	<b>305,954</b>	<b>285,194</b>	<b>281,130</b>		<b>0%</b>



## Emergency Medical Technologies Program Review 2012-2013



## Emergency Medical Technologies Program Review 2012-2013



### **3C1: Interpretation of the Program Budget Information**

Classified: The classified position was eliminated in January 2012.

Managers: We do not have managers. When discussing with David Keebler on 10/12/12 his research found that someone's benefits were coded incorrectly to our general fund.

Equipment: Perkins funds equipment purchases are now incorporated into the operating budget. Prior to this year they were not. The 276% increase reflects this budget inclusion.

## Emergency Medical Technologies Program Review 2012-2013

### **3C2: Interpretation of the Program Inventory Information**

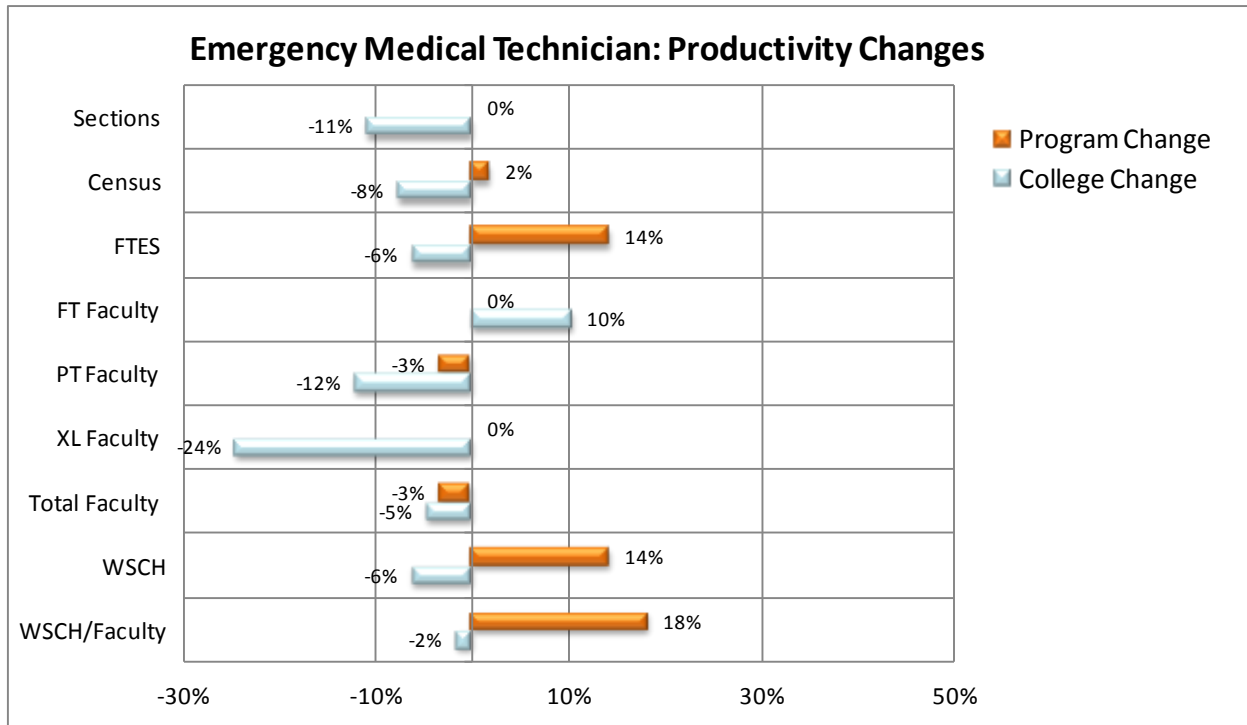
The college is in the process of completing an accurate and updated inventory list. When this is complete, a budget for equipment maintenance and replacement will be discussed. Currently the program's equipment is adequate but will need a maintenance and replacement budget to meet the requirements of the programs.

[http://www.venturacollege.edu/assets/pdf/program\\_review/2012-2013/3C2a%20Inventory%20by%20Program.pdf](http://www.venturacollege.edu/assets/pdf/program_review/2012-2013/3C2a%20Inventory%20by%20Program.pdf)

## Emergency Medical Technologies Program Review 2012-2013

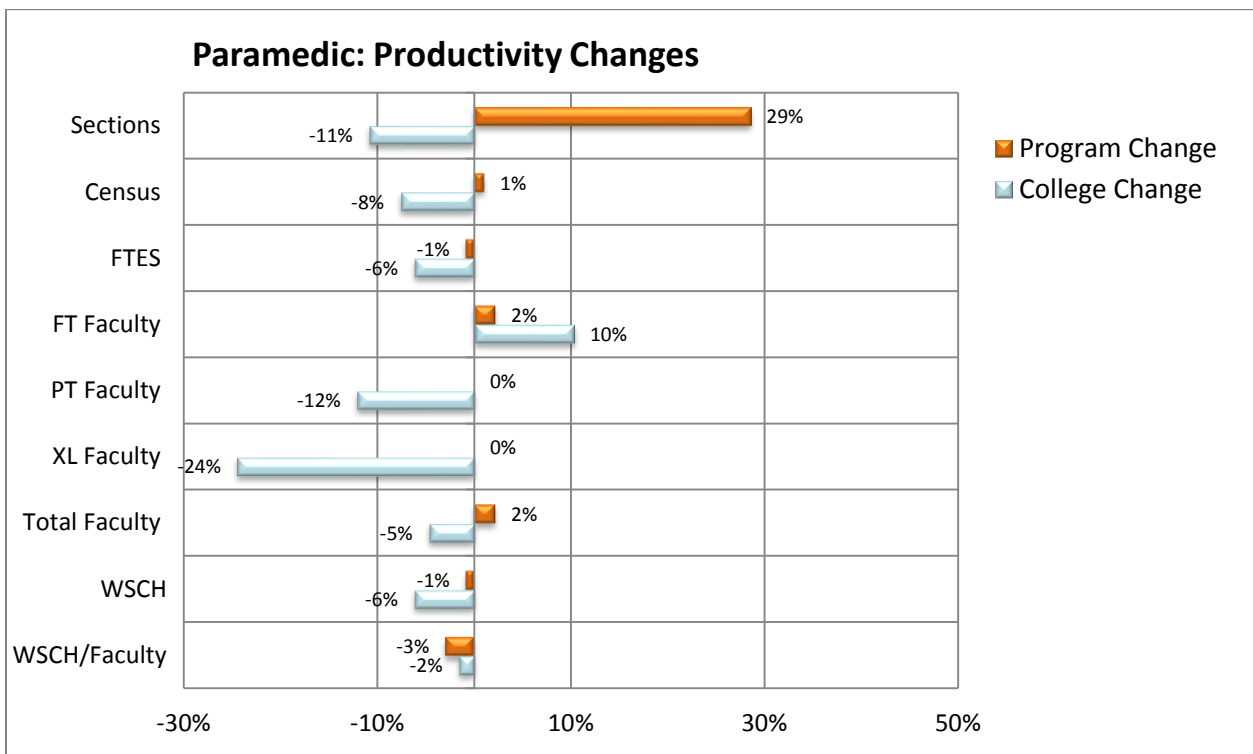
### 3C3: Program Productivity Information

Emergency Medical Technician: Productivity Changes							
Title	FY09	FY10	FY11	3 Year Average	FY12	Program Change	College Change
Sections	4	4	4	4	4	0%	-11%
Census	109	108	107	108	110	2%	-8%
FTES	27	27	30	28	32	14%	-6%
FT Faculty	-	-	-	-	-	0%	10%
PT Faculty	0.85	0.73	0.81	1	0.77	-3%	-12%
XL Faculty	-	-	-	-	-	0%	-24%
Total Faculty	0.85	0.73	0.81	1	0.77	-3%	-5%
WSCH	405	405	450	420	480	14%	-6%
WSCH/Faculty	476	555	556	527	623	18%	-2%



## Emergency Medical Technologies Program Review 2012-2013

Paramedic: Productivity Changes							
Title	FY09	FY10	FY11	3 Year Average	FY12	Program Change	College Change
Sections	2	2	3	2	3	29%	-11%
Census	30	37	28	32	32	1%	-8%
FTES	38	46	34	39	39	-1%	-6%
FT Faculty	1.83	1.83	1.83	2	1.87	2%	10%
PT Faculty	-	-	-	-	-	0%	-12%
XL Faculty	-	-	-	-	-	0%	-24%
Total Faculty	1.83	1.83	1.83	2	1.87	2%	-5%
WSCH	570	690	510	590	585	-1%	-6%
WSCH/Faculty	311	377	279	322	313	-3%	-2%



# Emergency Medical Technologies Program Review

## 2012-2013

### 3C3: Interpretation of the Program Productivity Information

#### EMT

During fiscal year 09 class structure was changed to reduce operating expense. The number of students per semester was decreased from 90 to 60. This was done so that the lecture component could be delivered by one part time faculty and would not exceed the extra-large class limits.

#### Paramedics

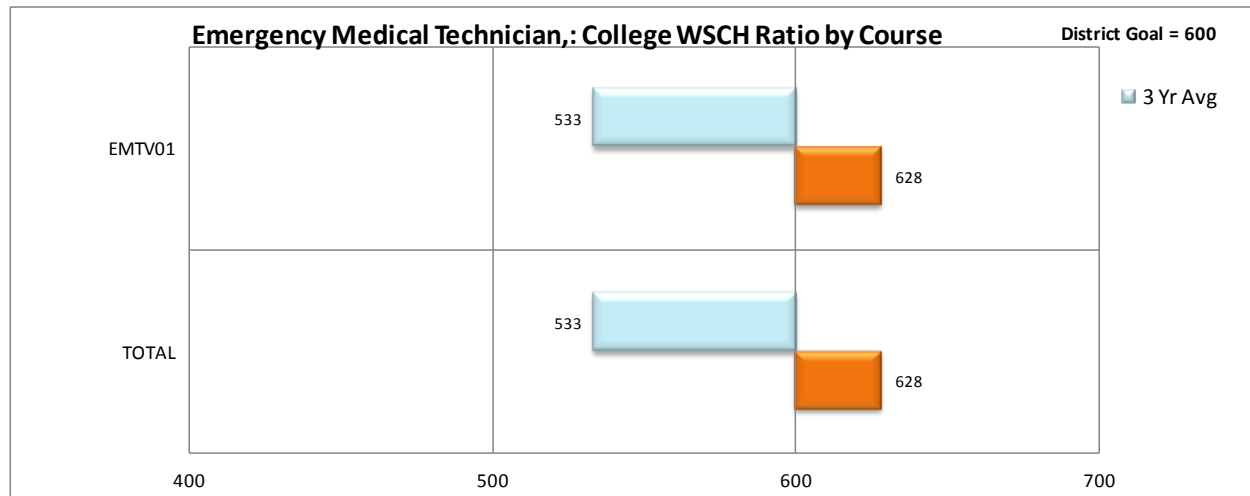
Section: One summer section of work experience was added to increase the number of students meeting the work experience prerequisites for admission to the paramedic studies program for both FY 11 and 12.

Census: A slight increase in census was realized in FY12 but the overall census remains down as a result of the poor economy. Students working full time are unable to release full time employment to attend our full time program. It is expected that when the economy improves, student numbers will improve.

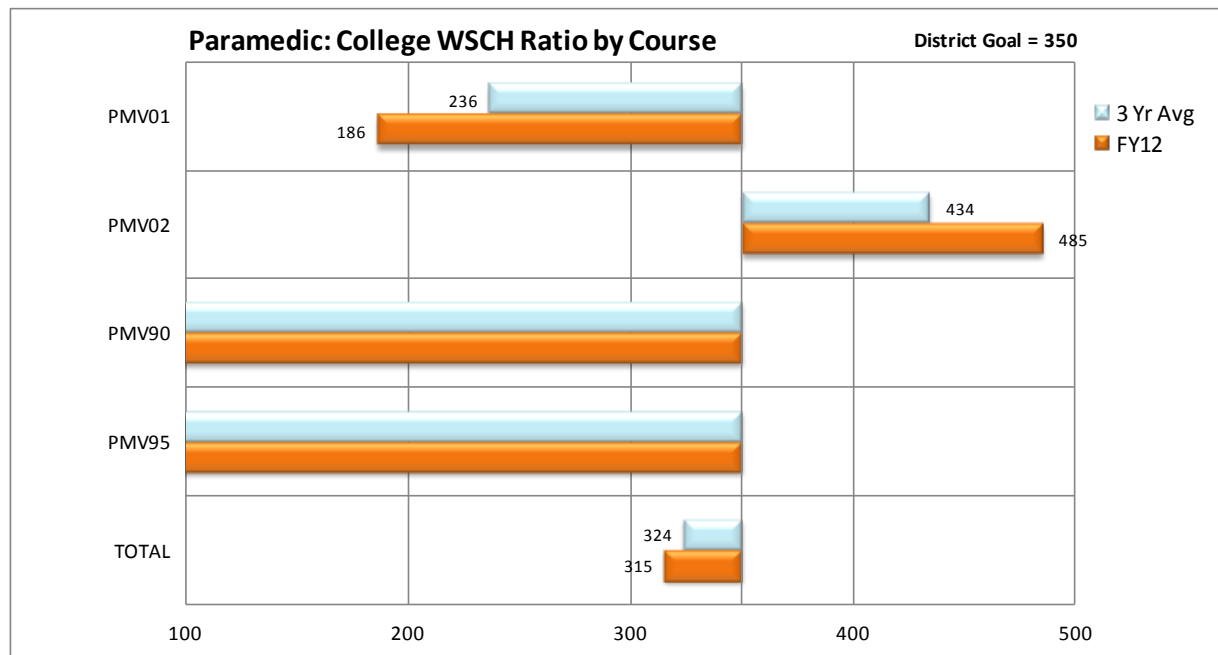
## Emergency Medical Technologies Program Review 2012-2013

### 3C4: Program Course Productivity Information

College WSCH Ratio: Weekly Student Contact Hours/(FT FTE + PT FTE + XL FTE)									
Course	Title	FY09	FY10	FY11	3 Yr Avg	FY12	Change	Dist Goal	% Goal
EMTV01	Emergency Medical Technician	481	556	563	533	628	95	600	105%
<b>TOTAL</b>	<b>Annual College WSCH Ratio</b>	481	556	563	533	628	95	600	105%



College WSCH Ratio: Weekly Student Contact Hours/(FT FTE + PT FTE + XL FTE)									
Course	Title	FY09	FY10	FY11	3 Yr Avg	FY12	Change	Dist Goal	% Goal
PMV01	Paramedic Theory	222	292	195	236	186	(50)	350	53%
PMV02	Paramedic Clinical Laboratory	424	485	394	434	485	51	350	139%
PMV90	Directed Study: Paramedic Serv	-	-	-	-	-	-	350	0%
PMV95	Paramedic Internship	-	-	-	-	-	-	350	0%
<b>TOTAL</b>	<b>Annual College WSCH Ratio</b>	311	377	283	324	315	(9)	350	90%



# Emergency Medical Technologies Program Review

## 2012-2013

### **3C4: Interpretation of the Program Course Productivity Information**

#### **EMT**

The EMT chart shows WSCH/FTEF ratios with a three year average of 533 with a college goal of 600. The WSCH number decreased in the FY09 as a result of the decreased number of students allowed to enroll (reference table page 12 and interpretation page 13).

#### **Paramedic**

The chart on page 14 shows WSCH/FTEF ratios with a three year average of 324 with a district goal of 350. The paramedic program is a two semester program in which the same number of students progress from PMV01 to PMV02. The WSCH ratio cannot apply to this program since:

1. The number of FTEF to FTES decreases from PMV01 to PMV02 each year
2. The state mandate of 1:6 skills instructor-student ratio

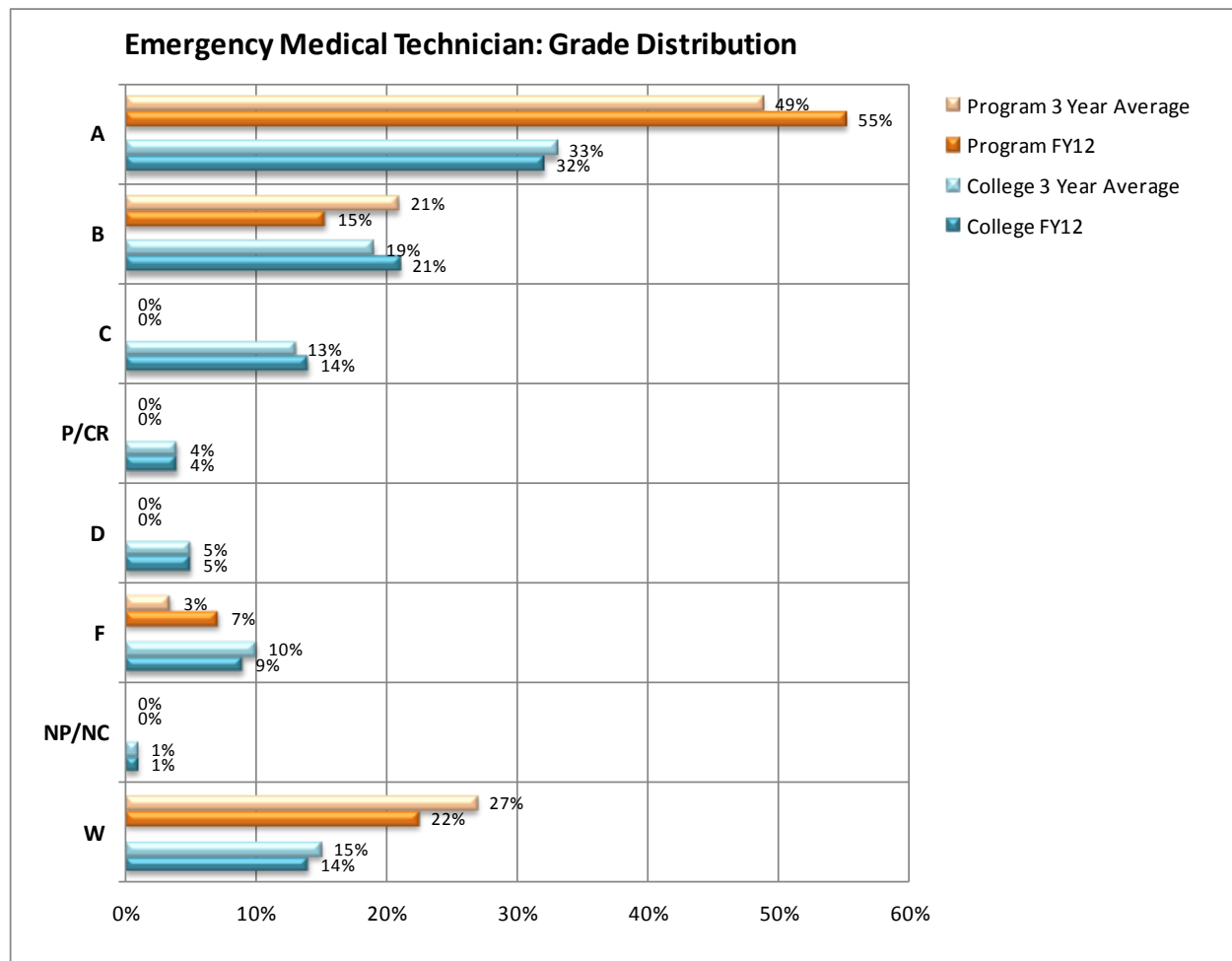


## Emergency Medical Technologies Program Review 2012-2013

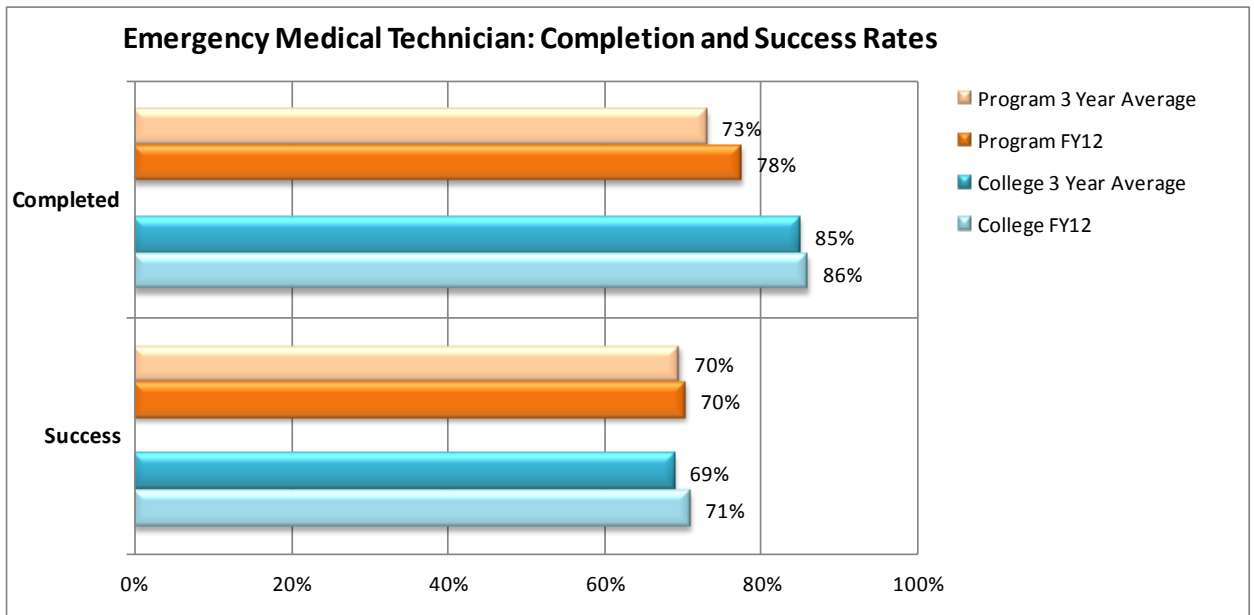
### 3C5: Program Retention, Student Success, and Grade Distribution

Subject	Fiscal Year	A	B	C	P/CR	D	F	NP/NC	W	Graded	Completed	Success
EMT	FY09	41	31	-	-	-	5	-	30	107	77	72
EMT	FY10	52	19	-	-	-	6	-	31	108	77	71
EMT	FY11	61	16	-	-	-	-	-	24	101	77	77
EMT	3 Year Avg	51	22	-	-	-	4	-	28	105	77	73
EMT	FY12	54	15	-	-	-	7	-	22	98	76	69

Subject	Fiscal Year	A	B	C	P/CR	D	F	NP/NC	W	Graded	Completed	Success
EMT	FY09	38%	29%	0%	0%	0%	5%	0%	28%	100%	72%	67%
EMT	FY10	48%	18%	0%	0%	0%	6%	0%	29%	100%	71%	66%
EMT	FY11	60%	16%	0%	0%	0%	0%	0%	24%	100%	76%	76%
EMT	3 Year Avg	49%	21%	0%	0%	0%	3%	0%	27%	100%	73%	70%
EMT	FY12	55%	15%	0%	0%	0%	7%	0%	22%	100%	78%	70%
College	3 Year Avg	33%	19%	13%	4%	5%	10%	1%	15%	100%	85%	69%
College	FY12	32%	21%	14%	4%	5%	9%	1%	14%	100%	86%	71%



## Emergency Medical Technologies Program Review 2012-2013

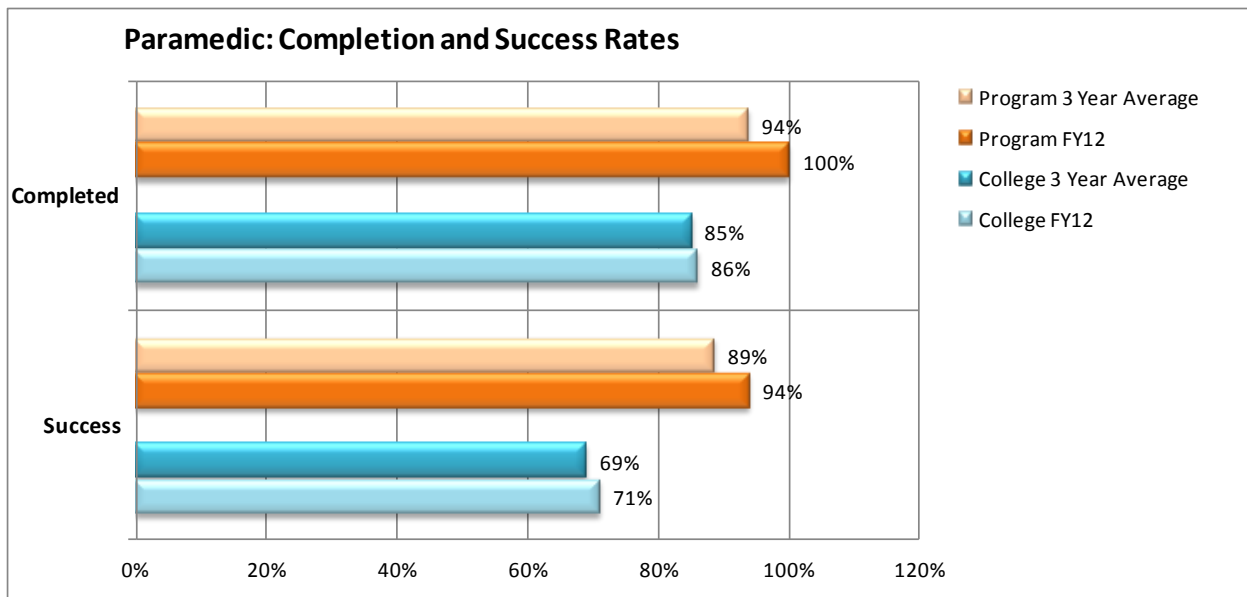
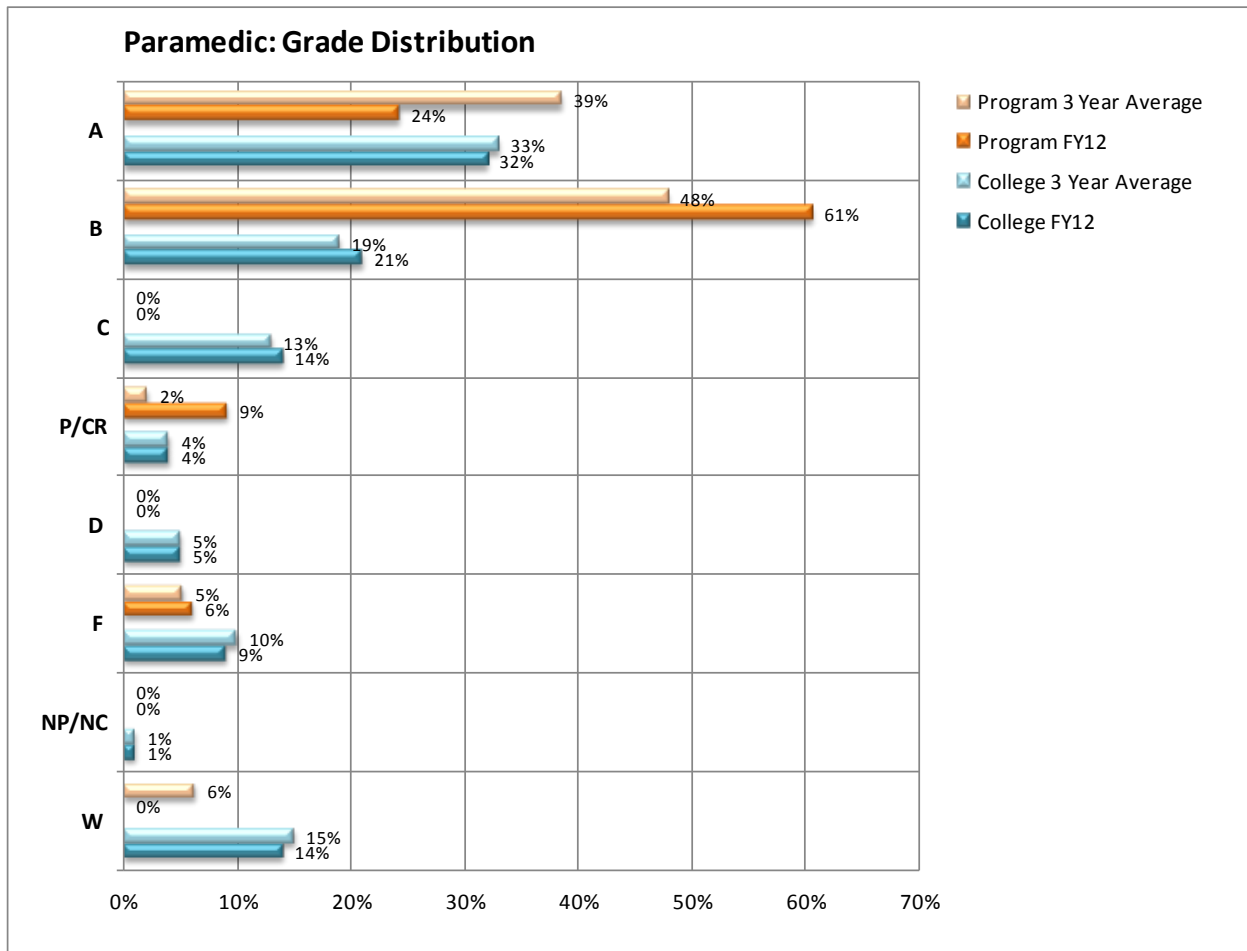


Subject	Fiscal Year	A	B	C	P/CR	D	F	NP/NC	W	Graded	Completed	Success
PM	FY09	14	14	-	-	-	1	-	1	30	29	28
PM	FY10	9	23	-	-	-	1	-	4	37	33	32
PM	FY11	14	9	-	2	-	3	-	1	29	28	25
PM	3 Year Avg	12	15	-	1	-	2	-	2	32	30	28
PM	FY12	8	20	-	3	-	2	-	-	33	33	31

Subject	Fiscal Year	A	B	C	P/CR	D	F	NP/NC	W	Graded	Completed	Success
PM	FY09	47%	47%	0%	0%	0%	3%	0%	3%	100%	97%	93%
PM	FY10	24%	62%	0%	0%	0%	3%	0%	11%	100%	89%	86%
PM	FY11	48%	31%	0%	7%	0%	10%	0%	3%	100%	97%	86%
PM	3 Year Avg	39%	48%	0%	2%	0%	5%	0%	6%	100%	94%	89%
PM	FY12	24%	61%	0%	9%	0%	6%	0%	0%	100%	100%	94%
<b>College</b>	<b>3 Year Avg</b>	<b>33%</b>	<b>19%</b>	<b>13%</b>	<b>4%</b>	<b>5%</b>	<b>10%</b>	<b>1%</b>	<b>15%</b>	<b>100%</b>	<b>85%</b>	<b>69%</b>
College	FY12	32%	21%	14%	4%	5%	9%	1%	14%	100%	86%	71%

## Emergency Medical Technologies Program Review 2012-2013



# Emergency Medical Technologies Program Review

## 2012-2013

### 3C5: Interpretation of Program Retention, Student Success, and Grade Distribution

#### EMT

Student success rates are higher than the prior three year average of the program and the college. Grade distribution is difficult to compare as students receiving less than 80% are dismissed from the program at the midterm, however, our rates of A's and B's are collectively higher than both the program and college three year averages.

Due to regulation changes students now are subject to a criminal background clearance which has resulted in a slightly lower "completed" 3 year average. In 2011 implemented registration changes which improved our FY 12 "completed" rate.

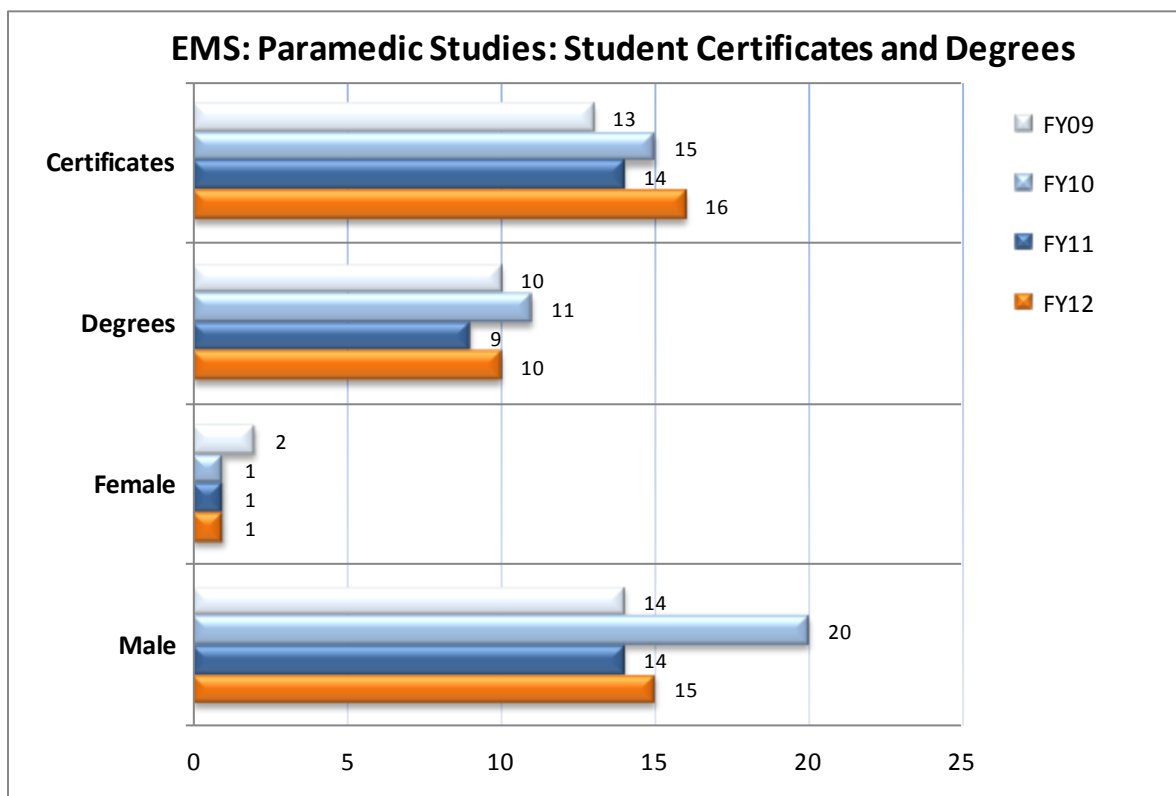
#### Paramedic

Student success rates are higher than the prior three year average of the program and the college. Student retention rates are equal to the prior three year average of the program and higher than the college. Grade distribution is difficult to compare as students receiving less than 80% are dismissed from the program at the midterm however our rates of A's and B's are collectively higher than the three year program and college averages.

## Emergency Medical Technologies Program Review 2012-2013

### **3C6: Program Completion Information**

EMS: Paramedic Studies: Student Certificates and Degrees					
Program	FY	Certificates	Degrees	Female	Male
EMS: Paramedic Studies	FY09	13	10	2	14
EMS: Paramedic Studies	FY10	15	11	1	20
EMS: Paramedic Studies	FY11	14	9	1	14
EMS: Paramedic Studies	FY12	16	10	1	15
<b>Total Awards in 4 Years</b>		<b>58</b>	<b>40</b>	<b>5</b>	<b>63</b>



### **3C6: Interpretation of the Program Completion Information**

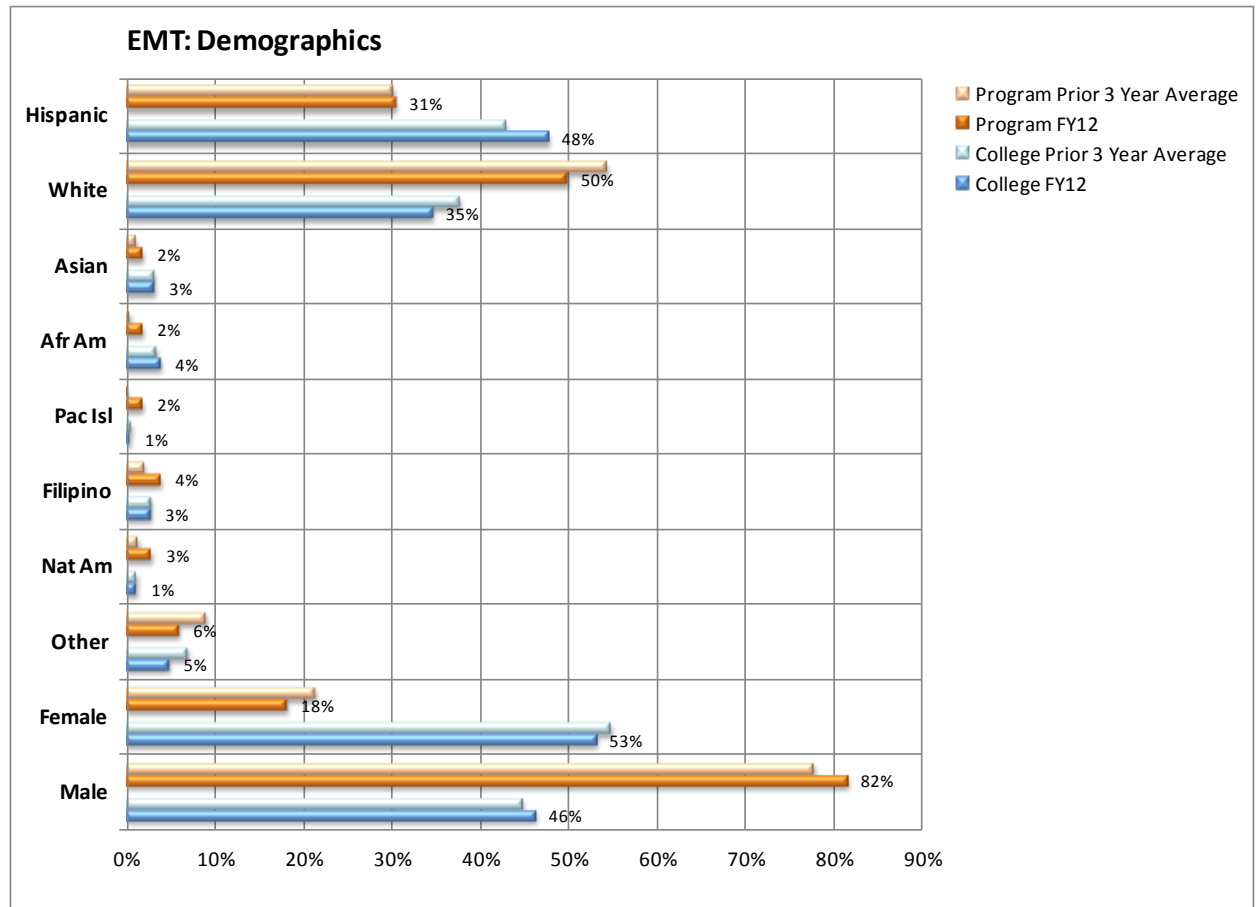
Out of the 68 students recorded 58 students completed the program. Of those, 100% received certificates and 59% received degrees (up 11% from last year). Since State licensure does not require students to obtain a degree these numbers exceed our expectations at this time.

# Emergency Medical Technologies Program Review 2012-2013

## 3C7: Program Demographic Information

Subject	FY	Hispanic	White	Asian	Afr Am	Pac Isl	Filipino	Nat Am	Other	Female	Male	Other	Avg Age
EMT	FY09	29	58	3	2	-	3	1	11	24	82	1	26
EMT	FY10	29	63	1	-	1	-	1	13	21	86	1	26
EMT	FY11	38	51	-	-	-	4	3	5	23	78	-	25
<b>EMT</b>	<b>3 Year Avg</b>	<b>32</b>	<b>57</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>10</b>	<b>23</b>	<b>82</b>	<b>1</b>	<b>26</b>
EMT	FY12	30	49	2	2	2	4	3	6	18	80	-	26
<b>College</b>	<b>3 Year Avg</b>	<b>12,714</b>	<b>11,174</b>	<b>990</b>	<b>1,074</b>	<b>223</b>	<b>880</b>	<b>414</b>	<b>2,110</b>	<b>16,221</b>	<b>13,261</b>	<b>97</b>	<b>27</b>
College	FY12	13,598	9,875	966	1,157	183	842	390	1,424	15,137	13,183	115	25

Subject	FY	Hispanic	White	Asian	Afr Am	Pac Isl	Filipino	Nat Am	Other	Female	Male	Other	Avg Age
EMT	FY09	27%	54%	3%	2%	0%	3%	1%	10%	22%	77%	1%	26
EMT	FY10	27%	58%	1%	0%	1%	0%	1%	12%	19%	80%	1%	26
EMT	FY11	38%	50%	0%	0%	0%	4%	3%	5%	23%	77%	0%	25
<b>EMT</b>	<b>3 Year Avg</b>	<b>30%</b>	<b>54%</b>	<b>1%</b>	<b>1%</b>	<b>0%</b>	<b>2%</b>	<b>2%</b>	<b>9%</b>	<b>22%</b>	<b>78%</b>	<b>1%</b>	<b>26</b>
EMT	FY12	31%	50%	2%	2%	2%	4%	3%	6%	18%	82%	0%	26
<b>College</b>	<b>3 Year Avg</b>	<b>43%</b>	<b>38%</b>	<b>3%</b>	<b>4%</b>	<b>1%</b>	<b>3%</b>	<b>1%</b>	<b>7%</b>	<b>55%</b>	<b>45%</b>	<b>0%</b>	<b>27</b>
College	FY12	48%	35%	3%	4%	1%	3%	1%	5%	53%	46%	0%	24

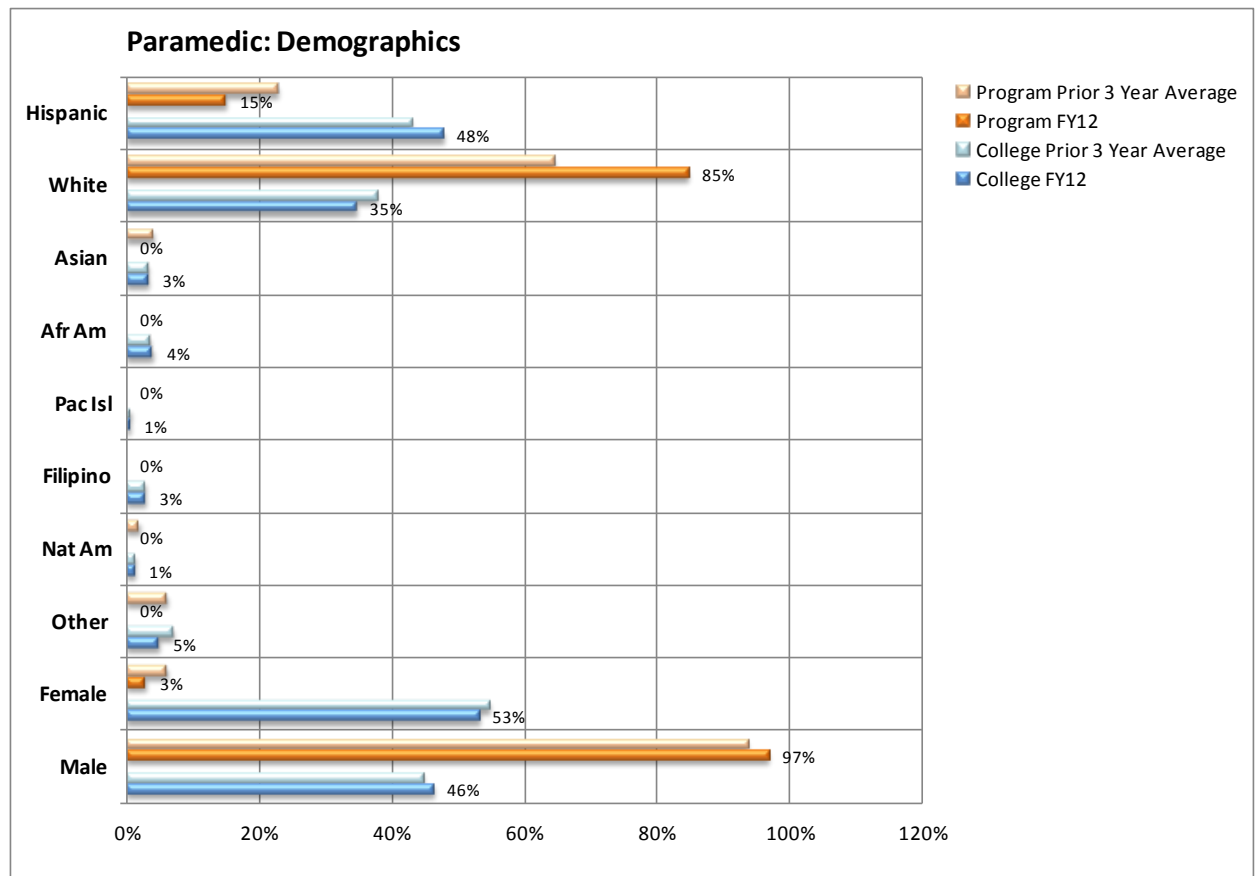


## Emergency Medical Technologies Program Review 2012-2013

Subject	FY	Hispanic	White	Asian	Afr Am	Pac Isl	Filipino	Nat Am	Other	Female	Male	Other	Avg Age
PM	FY09	8	20	-	-	-	-	-	2	3	27	-	30
PM	FY10	8	23	2	-	-	-	-	4	1	36	-	30
PM	FY11	6	19	2	-	-	-	2	-	2	27	-	28
<b>PM</b>	<b>3 Year Avg</b>	<b>7</b>	<b>21</b>	<b>1</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>30</b>	<b>-</b>	<b>29</b>
PM	FY12	5	28	-	-	-	-	-	-	1	32	-	28
<b>College</b>	<b>3 Year Avg</b>	<b>12,714</b>	<b>11,174</b>	<b>990</b>	<b>1,074</b>	<b>223</b>	<b>880</b>	<b>414</b>	<b>2,110</b>	<b>16,221</b>	<b>13,261</b>	<b>97</b>	<b>27</b>
College	FY12	13,598	9,875	966	1,157	183	842	390	1,424	15,137	13,183	115	25

Subject	FY	Hispanic	White	Asian	Afr Am	Pac Isl	Filipino	Nat Am	Other	Female	Male	Other	Avg Age
PM	FY09	27%	67%	0%	0%	0%	0%	0%	7%	10%	90%	0%	30
PM	FY10	22%	62%	5%	0%	0%	0%	0%	11%	3%	97%	0%	30
PM	FY11	21%	66%	7%	0%	0%	0%	7%	0%	7%	93%	0%	28
<b>PM</b>	<b>3 Year Avg</b>	<b>23%</b>	<b>65%</b>	<b>4%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>2%</b>	<b>6%</b>	<b>6%</b>	<b>94%</b>	<b>0%</b>	<b>28</b>
PM	FY12	15%	85%	0%	0%	0%	0%	0%	0%	3%	97%	0%	28
<b>College</b>	<b>3 Year Avg</b>	<b>43%</b>	<b>38%</b>	<b>3%</b>	<b>4%</b>	<b>1%</b>	<b>3%</b>	<b>1%</b>	<b>7%</b>	<b>55%</b>	<b>45%</b>	<b>0%</b>	<b>27</b>
College	FY12	48%	35%	3%	4%	1%	3%	1%	5%	53%	46%	0%	24



### **3C8: Interpretation of the Program Demographic Information**

The Emergency Medical Technician and the Paramedic program's demographics reflect industry demographics. This industry is dominated by young males. The emergency medical services industry overall is not a widely diverse work force, accordingly our demographic numbers are reflective of that makeup.

# Emergency Medical Technologies Program Review 2012-2013

## 4. Performance Assessment

### 4A1: 2012-2013 Institutional Level Student Learning Outcomes

EMT and PM

Institutional Level Student Learning Outcome 1	Performance Indicators
Communication	90% of students will reach a satisfactory or higher level according to the institutional communication rubric for oral communication
<b>Operating Information</b>	
This ISLO will be assessed completely in the 2012-13 academic year in the following courses: EMT V01, PM V01	
<b>Analysis – Assessment</b>	
PM Program – 100% of the students passed at the good/pass level or higher. EMT Program – assessment tool will be completed later in the semester and will be reported on TrakDat.	

Institutional Level Student Learning Outcome 2	Performance Indicators
Reasoning – Scientific and Quantitative	This ISLO will not be assessed by EMT or PM
<b>Operating Information</b>	
<b>Analysis – Assessment</b>	

Institutional Level Student Learning Outcome 3	Performance Indicators
Critical Thinking and problem solving	This ISLO will be assess by EMT and PM in Fall 2013 and Spring 2014 per the ISLO institutional calendar
<b>Operating Information</b>	
<b>Analysis – Assessment</b>	



**Emergency Medical Technologies Program Review**  
**2012-2013**

Institutional Level Student Learning Outcome 4	Performance Indicators
Information Literacy	This ISLO will not be assessed by EMT or PM
<b>Operating Information</b>	
<b>Analysis – Assessment</b>	

Institutional Level Student Learning Outcome 5	Performance Indicators
Personal/community awareness and academic / career responsibilities	This ISLO will be assessed by EMT and PM in Fall of 2014 and Spring of 2015 per the institutional ISLO calendar
<b>Operating Information</b>	
<b>Analysis – Assessment</b>	

## Emergency Medical Technologies Program Review 2012-2013

### 4A2: 2012-2013 Program Level Student Learning Outcomes - *For programs/departments offering degrees and/or certificates*

#### EMT

Program-Level Student Learning Outcome 1	Performance Indicators
Function within the Emergency Medical Technician scope of practice to apply scientific knowledge as well as the skills necessary in providing emergency medical care.	Oral Communication will be assessed during a student presentation. The expectation is that 100% of students will perform at the “good/pass” level or higher utilizing the student education presentation rubric.
<b>Operating Information</b>	
EMT Program – assessment tool will be completed later in the semester and will be reported on TrakDat.	
<b>Analysis – Assessment</b>	
Insufficient data at this time. Will be assessed later in the semester.	

Program-Level Student Learning Outcome 2	Performance Indicators
Provide competent and safe care in a variety of settings to a group of patient with diverse needs across the life span.	This PSLO will be assessed in the 2013-14 academic year when practical skills will be assessed
<b>Operating Information</b>	
<b>Analysis – Assessment</b>	

Program-Level Student Learning Outcome 3	Performance Indicators
Seek certification as EMTs and meet the expectations of the Emergency Medical Services community.	This PSLO will be assessed by EMT in the 2014-15 academic year when the ISLO Personal/community awareness and academic/career responsibilities will be assessed.
<b>Operating Information</b>	
<b>Analysis – Assessment</b>	

## Emergency Medical Technologies Program Review 2012-2013

**PM**

Program-Level Student Learning Outcome 1	Performance Indicators
Function within the paramedic scope of practice to provide professional, competent and safe care while applying scientific knowledge and demonstrating mastery of skills, management and leadership to a group of patients with complex and diverse needs.	This PSLO will be assessed by EMT in the 2013-14 academic year when critical thinking as an ISLO will be assessed.
<b>Operating Information</b>	
<b>Analysis – Assessment</b>	

Program-Level Student Learning Outcome 2	Performance Indicators
Utilize effective communication and interpersonal skills with patients and the health care team while providing education to individuals and groups.	100 % or more students will perform at the good/pass level or higher.
<b>Operating Information</b>	
17 students performed at or above the achievement level while 0 students performed below. While we have a second project that we would be able to score if students fell below the achievement level, we will not have to use it since all students were very successful in the communications portion of the project.	
<b>Analysis – Assessment</b>	
The outcome was met	

**Emergency Medical Technologies Program Review**  
**2012-2013**

Program-Level Student Learning Outcome 3	Performance Indicators
Understand and observe the concept of lifelong learning, including the pursuit of advanced degrees and practice in the health field.	This PSLO will be assessed by PM in the 2014-15 academic year when the ISLO Personal/community awareness and academic/career responsibilities will be assessed.
<b>Operating Information</b>	
<b>Analysis – Assessment</b>	

Program-Level Student Learning Outcome 4	Performance Indicators
Seek licensure as a paramedic and meet the expectations of the Emergency Medical Services community	This PSLO will be assessed by PM in the 2014-15 academic year when the ISLO Personal/community awareness and academic/career responsibilities will be assessed.
<b>Operating Information</b>	
<b>Analysis – Assessment</b>	

**4A3:** 2012-2013 Course Level Student Learning Outcomes - Refer to TracDat

## Emergency Medical Technologies Program Review 2012-2013

### 4B: 2012-2013 Student Success Outcomes

Student Success Outcome 1	Performance Indicators
The EMT program will maintain its retention rate from the average of the program's prior three-year retention rate. The retention rate is the number of students who finish a term with any grade other than W or DR divided by the number of students at census.	The EMT program will maintain the success rate by 5% or more above the average of the program's success rate for the prior three years.
<b>Operating Information</b>	
In FY 12 the EMT success rate was 70%. For the prior three year average the success rate was 70%	
<b>Analysis – Assessment</b>	
In FY 12 the EMT success rate was 70% over the prior three year average. The performance indicator was met even though the retention rate for the FY12 decreased by 6%	

Student Success Outcome 2	Performance Indicators
The paramedic program will maintain its retention rate from the average of the college's prior three-year retention rate. The retention rate is the number of students who finish a term with any grade other than W or DR divided by the number of students at census.	The paramedic program will increase the retention rate by 5% or more above the average of the college retention rate for the prior three years.
<b>Operating Information</b>	
In FY 12 the paramedic program retention was 100%. The college retention rate for the prior 3 years was 85%	
<b>Analysis – Assessment</b>	
The paramedic program retention rate of 100% during FY 12 was 15% above the college retention rate. The performance indicator was exceeded.	

Student Success Outcome 3	Performance Indicators
The paramedic program will maintain the student success rates from the average of the college's prior three-year success rates. The student success rate is the percentage of students at census who receive a grade of C or better.	The paramedic program will maintain a rate that is equal to or above that of the college. .
<b>Operating Information</b>	
In FY 12 the paramedic program success rate was at 94%. The college FY 11 retention rate was at 69%.	
<b>Analysis – Assessment</b>	
In FY 12 the paramedic program exceeded the college success rate by 25%. Performance indicator was exceeded.	

## Emergency Medical Technologies Program Review 2012-2013

### 4C. 2012-2013 Program Operating Outcomes

Program Operating Outcome 1	Performance Indicators
The EMT program will maintain WSCH/FTEF above the 600 goal set by the district.	The EMT program will exceed the efficiency goal of 600 set by the district by 5%.
<b>Operating Information</b>	
The EMT program for FY 12 WSCH/FTEF number is 628. The 3 year EMT program average was 533.	
<b>Analysis – Assessment</b>	
The EMT program did meet the districts WSCH number of 600 but did not meet it for the three year average. The program recommends negotiating the college goal to accommodate for reduction in class size that was established in 2009.	

Program Operating Outcome 2	Performance Indicators
Inventory of EMT and paramedic instructional equipment is functional, current, and otherwise adequate to maintain a quality-learning environment. Inventory of all equipment over \$200 will be maintained and a replacement schedule will be developed. Service contracts for equipment over \$5000 will be budgeted if funds are available.	A comprehensive, updated inventory of equipment in the program(s) will be created. A schedule for service life and replacement of outdated equipment will reflect the total cost of ownership and will need to be created.
<b>Operating Information</b>	
A preliminary list has been created	
<b>Analysis – Assessment</b>	
The list will have to be validated and then a schedule for the total cost of ownership will be created.	

Program Operating Outcome 3	Performance Indicators
The Commission on Accreditation of Allied Health Education Programs (CAAHEP), our accrediting agency, requires that adequate clerical support be provided the program.	Both the EMT and Paramedic programs must have clerical support
<b>Operating Information</b>	
The programs will need at minimum a 12 month 60% clerical position restored. This can be through a shared position with the Health Science department or a dedicated clerical position.	
<b>Analysis – Assessment</b>	
The list will have to be validated and then a schedule for the replacement of outdated equipment as well as well as a total cost of ownership will be created.	

## Emergency Medical Technologies Program Review 2012-2013

### 4D. Program Review Rubrics for Instructional Programs

#### CTE Programs

#### EMT

Point Value	Element	Score
Up to 6	Enrollment demand	6
Up to 6	Sufficient resources to support the program (ability to find qualified instructors; financial resources; equipment; space)	4
Up to 6	Program success (degree / certificate / proficiency award completion over 4 year period)	6
Up to 4	Agreed-upon productivity rate	4
Up to 4	Retention rate	3
Up to 4	Employment outlook for graduates / job market relevance	4
Up to 3	Success rate (passing with C or higher)	3
Up to 3	Ongoing and active participation in SLO assessment process	3
<b>Total Points</b>	<b>Interpretation</b>	<b>33</b>
31 - 36	Program is current and vibrant with no further action recommendation	
25 - 30	Recommendation to attempt to strengthen the program	
Below 25	Recommendation to consider discontinuation of the program	

#### PM

Point Value	Element	Score
Up to 6	Enrollment demand	6
Up to 6	Sufficient resources to support the program (ability to find qualified instructors; financial resources; equipment; space)	4
Up to 6	Program success (degree / certificate / proficiency award completion over 4 year period)	6
Up to 4	Agreed-upon productivity rate	4
Up to 4	Retention rate	4
Up to 4	Employment outlook for graduates / job market relevance	4
Up to 3	Success rate (passing with C or higher)	3
Up to 3	Ongoing and active participation in SLO assessment process	3
<b>Total Points</b>	<b>Interpretation</b>	<b>34</b>
31 - 36	Program is current and vibrant with no further action recommendation	
25 - 30	Recommendation to attempt to strengthen the program	
Below 25	Recommendation to consider discontinuation of the program	

**While both EMT and PM programs are current and vibrant they will need clerical assistance to continue.**

# Emergency Medical Technologies Program Review

## 2012-2013

### 5. Findings

#### **2012-2013** - FINDINGS

##### **Finding 1:**

Due to regulation changes students now are subject to a criminal background clearance. We have recently implemented registration changes that should improve our current retention rate (Finding link 3C5 [p.19] and 4D. [p.30] ).

These new changes will also require clerical support.

##### **Finding 2:**

This inventory list is not complete. A result of developing a complete and accurate inventory list is to provide an adequate budget for equipment maintenance and replacement (total-cost-of-ownership).

The program needs to establish a current inventory and replacement schedule. (See 3C2: Interpretation of the Program Inventory Information [p.10])

##### **Finding 3:**

Since FY09 the EMT program has performed below the District WSCH goal of 600 with a 3 year average of 533. Although the FY12 reflects a WSCH of 628 this was due to a one time reduction in part time faculty for one semester only (Refer to table 3C4 [p. 14] and interpretation [p. 15].

##### **Finding 4:**

In order for our paramedic program to remain in compliance with the mandates of our accrediting agency we will need to have the clerical position restored.

##### **Finding 5:**

Although EMT retention rate increased 2% from FY 11 and 5% from the 3 year average, it remains 8% lower than the College FY12, and 12% lower than the College 3 year average. (Refer to tables 3C5 [p17].

##### **Finding 6:**

Students are required to take Computer Based Licensing Examination offered through the National Registry of Emergency Medical Technicians. Allowing the students to take some of their classroom examinations on computers will strengthen their skills and improve the scores and pass rates on the licensing examination.



# Emergency Medical Technologies Program Review 2012-2013

## 6. Initiatives

### 6A: 2011-2012 Initiatives

**Initiative:** Improve retention rate by improving the criminal background clearance procedure.

**Initiative ID:** EMTs12-01

#### **Links to Finding 1:**

Recent regulation changes by our clinical and field site providers now mandate that all students obtain criminal background clearance along with drug and alcohol testing. We found that students were entering the program without a clear understanding of what the background procedure involved and therefore an unnecessary number of students were forced to drop mid-semester simply based on a negative background investigation. This issue was having a negative effect on our student retention rate.

New procedures have been put into place to deal on a proactive basis so that clearance can be received prior to registration, thereby reducing the number of students dropping solely due to their background. This process, however, has resulted in a significant increase in clerical time and coverage.

Historically, the paramedic program started in 1999 and was given a budget and clerical staff to support a maximum of 24 students / year. Three years later the State of California mandated that all paramedic programs become accredited through Commission on Accreditation of Allied Health Education Programs (CAAHEP). This requires the preparation of self-studies and site visits every four years as well as extensive annual reports. Approximately six years ago the EMT program was removed from Nursing and added to the Emergency Medical Technologies; however there was no increase in clerical support to assist with the addition of 180 students/year or the increase in work load to support accreditation. This has had a negative impact on the paramedic program and EMT programs. Refer to E6 [p.26]).

**Benefits:** Higher retention rates for EMT program

#### **Request for Resources:**

Presently we are supported by a clerical II position 10month, 60%. In order to accommodate all of the needs of the department as well as the increased workload from the new registration process we would like to request a clerical III, 12month, 70%.

#### **Funding Sources**

Please check one or more of the following funding sources.

No new resources are required (use existing resources)	
Requires additional general funds for personnel, supplies or services (includes maintenance contracts)	X
Requires computer equipment funds (hardware and software)	
Requires college equipment funds (other than computer related)	
Requires college facilities funds	
Requires other resources (grants, etc.)	

# Emergency Medical Technologies Program Review

## 2012-2013

### Initiative:

Create an up-to-date equipment inventory with a replacement schedule for all items over \$1,000.00 for both EMT and Paramedic programs

**Initiative ID:** EMTs12-02

### Links to Finding 2:

The inventory list in Banner is not complete. The program needs to establish a current inventory and replacement schedule. (See B1: Program Inventory Table, B2: Interpretation of the Program Inventory Information [p.10])

### Benefits:

A result of developing a complete and accurate inventory list is to provide an adequate budget for equipment maintenance and replacement (total-cost-of-ownership). This would allow students to train with the most current equipment and better prepare them to be successful in today's work environment. This will also allow us to identify future equipment needs of the programs.

### Request for Resources:

None

### Funding Sources:

Please check one or more of the following funding sources.

No new resources are required (use existing resources)	X
Requires additional general funds for personnel, supplies or services (includes maintenance contracts)	
Requires computer equipment funds (hardware and software)	
Requires college equipment funds (other than computer related)	
Requires college facilities funds	
Requires other resources (grants, etc.)	

# Emergency Medical Technologies Program Review

## 2012-2013

**Initiative:**

Renegotiate WSCH for EMT program

**Initiative ID:** EMTs12-03

**Links to Finding 3:**

Fiscal year 09 class structure was changed to reduce operating expense. The number of students per semester was decreased from 90 to 60. This was done so that the lecture component could be delivered by one part time faculty and would not exceed the extra-large class limits.

It would appear by this finding that the WSCH goal of 600 is inappropriate for the EMT program and needs to be renegotiated. (Refer to tables C2a [p.12], D1a [p.15], D3a [p.17], and interpretations C4 [p.14], D6 EMT [p.19])

**Benefits:**

A more realistic representation of WSCH for the EMT program

**Request for Resources:**

None

**Funding Sources:**

Please check one or more of the following funding sources.

No new resources are required (use existing resources)	X
Requires additional general funds for personnel, supplies or services (includes maintenance contracts)	
Requires computer equipment funds (hardware and software)	
Requires college equipment funds (other than computer related)	
Requires college facilities funds	
Requires other resources (grants, etc.)	

## Emergency Medical Technologies Program Review 2012-2013

### 2011-2012 - FINAL Program Initiative Priority Ratings

Category	Program Priority (0, 1, 2, 3...)	Division Priority (R, H, M, L)	Committee Priority (R, H, M, L)	College Priority (R, H, M, L)	Initiative ID	Initiative Title	Resource Description	Estimated Cost	Adjusted Cost	Accumulated Costs	Full Time or Part Time
None	0	H			EMT1203	Renegotiate District WSCH Goal	Renegotiate District WSCH Goal for EMT program	-		-	
None	0	L			EMT1202	Program equipment inventory	Create and Maintain a current equipment inventory list and replacement schedule.	-		-	
Personnel	1	R		M	EMT1201	Additional Clerical Support	Seek approval infunding for additional clerical support	14,000	14,000	14,000	

# Emergency Medical Technologies Program Review

## 2012-2013

### 6B: 2012-2013 INITIATIVES

#### Initiative 1

**Initiative:** Improve retention rate by improving the criminal background clearance procedure.

**Initiative ID:** EMTs13-01

#### Links to Finding 1 and 4:

Recent regulation changes by our clinical and field site providers now mandate that all students obtain criminal background clearance along with drug and alcohol testing. We found that students were entering the program without a clear understanding of what the background procedure involved and therefore an unnecessary number of students were forced to drop mid-semester simply based on a negative background investigation. This issue was having a negative effect on our student retention rate.

New, proactive procedures have been put into place so that clearance can be received prior to registration, thereby reducing the number of students dropping solely due to their background. This process, however, requires clerical time and coverage.

Historically, the paramedic program started in 1999 and was given a budget and clerical staff to support a maximum of 24 students / year. Three years later the State of California mandated that all paramedic programs become accredited through Commission on Accreditation of Allied Health Education Programs (CAAHEP). This requires the preparation of self-studies and site visits every four years as well as extensive annual reports. Approximately six years ago the EMT program was removed from Nursing and added to the Emergency Medical Technologies; however there was no increase in clerical support to assist with the addition of 180 students/year or the increase in work load to support accreditation. In the beginning of the Spring Semester FY12 the EMT and PM clerical position was eliminated. Restoration of at least a 60% position is mandatory for both the EMT and PM programs. Refer to 3C5 [p.19]).

#### Benefits:

1. Increased retention rates for EMT program
2. Maintain compliance with our accrediting agency

#### Request for Resources:

Clerical Support is a requirement of our accrediting body, Commission on Accreditation of Allied Health Education Programs (CAAHEP), and mandatory for the function and success of the EMT programs. At the beginning of the Spring Semester FY 12 our clerical position eliminated. We had been supported by a clerical II position 10month, 60%. In order to accommodate all of the needs of the department as well as the increased workload from the new registration process we are requesting the return of a clerical position at a minimum of a 12 month 60%

#### Funding Sources

Please check one or more of the following funding sources.

No new resources are required (use existing resources)	
Requires additional general funds for personnel, supplies or services (includes maintenance contracts)	X
Requires computer equipment funds (hardware and software)	
Requires college equipment funds (other than computer related)	
Requires college facilities funds	
Requires other resources (grants, etc.)	

# Emergency Medical Technologies Program Review

## 2012-2013

**Initiative 2:**

Create an up-to-date equipment inventory with a replacement schedule for all items over \$1,000.00 for both EMT and Paramedic programs

**Initiative ID:** EMTs13-02

**Links to Finding 2:**

The inventory list in Banner is not complete. The program needs to establish a current inventory and replacement schedule. (See 3C2: Interpretation of the Program Inventory Information [p10]).

**Benefits:**

A result of developing a complete and accurate inventory list is to provide an adequate budget for equipment maintenance and replacement (total-cost-of-ownership). This would allow students to train with the most current equipment and better prepare them to be successful in today's work environment. This will also allow us to identify future equipment needs of the programs.

**Request for Resources:**

None

**Funding Sources:**

Please check one or more of the following funding sources.

No new resources are required (use existing resources)	X
Requires additional general funds for personnel, supplies or services (includes maintenance contracts)	
Requires computer equipment funds (hardware and software)	
Requires college equipment funds (other than computer related)	
Requires college facilities funds	
Requires other resources (grants, etc.)	

# Emergency Medical Technologies Program Review

## 2012-2013

**Initiative 3:**

Renegotiate WSCH for EMT program

**Initiative ID:** EMTs13-03

**Links to Finding 3:**

Fiscal year 09 class structure was changed to reduce operating expense. The number of students per semester was decreased from 90 to 60. This was done so that the lecture component could be delivered by one part time faculty and would not exceed the extra-large class limits. It would appear by this finding that the WSCH goal of 600 is inappropriate for the EMT program and needs to be renegotiated.

**Benefits:**

A more realistic representation of WSCH for the EMT program

**Request for Resources:**

None

**Funding Sources:**

Please check one or more of the following funding sources.

No new resources are required (use existing resources)	X
Requires additional general funds for personnel, supplies or services (includes maintenance contracts)	
Requires computer equipment funds (hardware and software))	
Requires college equipment funds (other than computer related)	
Requires college facilities funds	
Requires other resources (grants, etc.)	

## Emergency Medical Technologies Program Review 2012-2013

**Initiative 4:**

Meet Perkins Core Indicators in regards to student recruitment, retention, completion and workforce employment, especially for special population and non-traditional students.

**Initiative ID:** EMTs13-04

**Links to Finding 5:**

Although EMT retention rate increased 2% from FY 11 and 5% from the 3 year average, it remains 8% lower than the College FY12, and 12% lower than the College 3 year average. (Refer to tables 3C5 [p17]).

**Benefits:**

EMT student retention is based on many factors some controllable and some not. Perkins funds may allow for increased student contact with counselors and improved recruitment especially to non-traditional students.

**Request for Resources:**

None

**Funding Sources:**

Please check one or more of the following funding sources.

No new resources are required (use existing resources)	X
Requires additional general funds for personnel, supplies or services (includes maintenance contracts)	
Requires computer equipment funds (hardware and software))	
Requires college equipment funds (other than computer related)	
Requires college facilities funds	
Requires other resources (grants, etc.)	



# Emergency Medical Technologies Program Review

## 2012-2013

### Initiative 5

Prepare students to take computer based National Registry Text (Licensing Exam), improve student retention rate

**Initiative ID** EMTs13-05

### Links to Finding 5,6

The licensing examination, which is taken upon successful completion of the Paramedic Studies Program and EMT Program, must be taken at a recognized computer center (Pearson VUE) and is a computer based test. This year we have been able to have the paramedic students take some of their exams on computers but are having difficulty finding enough computers for the students to use during the times of their testing.

### Benefits

Allowing the students to take some of their classroom examinations on computers will strengthen their skills and improve the scores and pass rates on the licensing examination.

### Requests for Resources (to be shared with the Nursing Program)

**8 laptop computers - \$7,200**

**1 instructor laptop - \$942**

**Security cart for laptops - \$1,732**

### Funding Sources

**Please check one or more of the following funding sources. Meets Perkins Core Indicators in regards to student recruitment, retention, completion and workforce employment, especially for special population and non-traditional students.**

<b>No new resources are required (use existing resources)</b>	
<b>Requires additional general funds for personnel, supplies or services (includes maintenance contracts)</b>	
<b>Requires computer equipment funds (hardware and software)</b>	
<b>Requires college equipment funds (other than computer related)</b>	
<b>Requires college facilities funds</b>	
<b>Requires other resources (grants, etc.)</b>	<b>X</b>

## Emergency Medical Technologies Program Review 2012-2013

### 6C: 2012-2013 Program Initiative Priority Ratings

Program	Finding Number	Category	Program Priority (R, H, M, L)	Division Priority (R,H,M,L)	Committee Priority (R, H, M, L)	College Priority (H, M, L)	Initiative ID	Initiative Title	Resource Description	Estimated Cost
EMT &PM	1,4	Staff	R				EMTs13-01	Improve EMT retention rate by improving background investigation. Maintain compliance with accrediting agency	Seek approval in funding for additional clerical support	\$29,985
EMT &PM	2	Equip.	M				EMTs13-02	Program Inventory Equipment	Create and Maintain a current equipment inventory list and replacement schedule	00.00
EMT &PM	3	None	M				EMTs13-03	Renegotiate District WSCH goal	Renegotiate District WSCH goal for the EMT program	00.00
EMT	5	Student Retention	H				EMTs13-04	Improve EMT retention rate by providing increased student contact with counselors and improved recruitment especially to non-traditional students.	Meet Perkins Core Indicators in regards to student recruitment, retention, completion and workforce employment, especially for special population and non-traditional students.	00.00

## Emergency Medical Technologies Program Review 2012-2013

EMT, PM & Nursing	5,6	Equip.	H				EMTs13-05	Improve licensing exam scores and pass rates	8 - laptop computers = \$7,200 1 - instructor laptop = \$942  Security cart for laptops = \$1,732	\$8,142 - SB 70 funds  \$1,732 - College funds
-------------------	-----	--------	---	--	--	--	-----------	--	--	--

### 6D: PRIORITIZATIONS OF INITIATIVES WILL TAKE PLACE AT THE PROGRAM, DIVISION, COMMITTEE, AND COLLEGE LEVELS:

#### Program/Department Level Initiative Prioritization

All initiatives will first be prioritized by the program/department staff. Prioritize the initiatives using the **RHML** priority levels defined below.

#### Division Level Initiative Prioritization

The program initiatives within a division will be consolidated into division spreadsheets. The dean may include additional division-wide initiatives. All initiatives will then be prioritized using the **RHML** priority levels defined below.

#### Committee Level Initiative Prioritization

The division's spreadsheets will be prioritized by the appropriate college-wide committees (staffing, technology, equipment, facilities) using the **RHML** priority levels defined below.

#### College Level Initiative Prioritization

Dean's will present the consolidated prioritized initiatives to the College Planning Council. The College Planning Council will then prioritize the initiatives using the **RHML** priority levels defined below.

**R:** Required – mandated or unavoidable needs (litigation, contracts, unsafe to operate conditions, etc.).

**H:** High – approximately 1/3 of the total program/department/division's initiatives by resource category (personnel, equipment, etc.)

**M:** Medium – approximately 1/3 of the total program/department/division's initiatives by resource category (personnel, equipment, etc.)

**Emergency Medical Technologies Program Review**  
**2012-2013**

**L:** Low – approximately 1/3 of the total program/department/division’s initiatives by resource category (personnel, equipment, etc.)

# Emergency Medical Technologies Program Review 2012-2013

## 7. Process Assessment and Appeal

### 7A. Purpose of Process Assessment

The purpose of program review assessment is to evaluate the process for continual improvement. The process is required for accreditation and your input is very important to us as we strive to improve.

### 7B. 2012 - 2013 ASSESSMENT QUESTIONS

1. Did you complete the program review process last year, and if so, did you identify program initiatives? **Yes**

2a. Were the identified initiatives implemented? **No**

2b. Did the initiatives make a difference? **Not applicable**

3. If you appealed or presented a minority opinion for the program review process last year, what was the result?

**Initiative ID EMTs12-01 (increased clerical time) was ranked number 1 for the "personnel" category in the CTE division. After receiving the list of initiatives that were approved, and finding that Initiative EMTs12-01 did not appear on the list, the request was taken to the "Appeals Committee". The Program Review Appeals Committee's decision was, while they agreed with the need, they would have to forward the request to the "Classified Staffing Priorities Committee". After several months of not hearing from the committee I found that it was never sent forward. No explanation offered.**

4. How have the changes in the program review process worked for your area? **Not Applicable**

5. How would you improve the program review process based on this experience?

**If the appeals Committee is charged with the responsibility of making decisions and dispositions, then the committee, along with the college administration, should see that it makes it through the proper channels or clarifies why that decision was overturned.**

## Emergency Medical Technologies Program Review 2012-2013

### **7C. Appeals**

After the program review process is complete, your program has the right to appeal the ranking of initiatives.

If you choose to appeal, please complete the appropriate form that explains and supports your position. Forms are located at the Program Review VC website.

The appeal will be handled at the next higher level of the program review process.

# Emergency Medical Technologies Program Review

## 2012-2013

### Course Level SLOs

#### EMT Course SLOs

1. Explain the EMT scope of practice and demonstrate ability to use treatment guidelines and procedures in providing prehospital care in a safe and competent manner.
2. Demonstrate the ability to perform all patient care skills in a safe and competent manner.
3. Select and demonstrate effective communication techniques with patients, peers and members of the healthcare team.

#### PM Course SLOs

##### Paramedic Theory (PMV01)

1. Explain the paramedic scope of practice and demonstrate ability to use treatment guidelines and procedures in providing prehospital care in a safe and competent manner.
2. Demonstrate characteristics of professional and ethical behavior.
3. Select and demonstrate effective communication techniques with patients, peers and members of the healthcare team.

##### Paramedic Clinical Lab (PM V02)

1. Describe the pathophysiology, signs and symptoms, and appropriate prehospital care for any disorders discussed during the didactic phase or as described in assigned texts.
2. Perform an initial assessment, focused history and physical and on-going assessment on patients of various age groups, pathologies and chief complaints.
3. Demonstrate team leadership skills by acting as a patient advocate, respecting privacy, autonomy and intervening to ensure appropriate care while utilizing appropriate communication techniques.