

## PROGRAM OUTCOMES & ASSESSMENT

**DIVISION: Nursing and Allied Health**

**PROGRAM: C.A. Paramedic**

**COURSES IN PROGRAM: EMS 105, EMS 105L, EMS 106, EMS 107, EMS 107L, EMS 106, EMS 107A, EMS 108A, EMS 108B**

**DATE: evaluation of spring 2012 program outcomes used for 2012-2013 planning**

**FACULTY & STAFF INVOLVED IN ASSESSMENT & ANALYSIS: Dennis Rowley, Douglas Brim, Tim Hallmark, Kris Strommen, Pamela Peachey, Lisa Wearda**

Course-to-program outcome mapping document\*\* is completed: **Yes\_\_X\_\_ No\_\_\_\_\_**

Goals of the Paramedic Program:

1. Students will obtain licensure/certification and be qualified to pursue a career as an EMS provider.
2. Student will demonstrate the ability to provide optimal care for pre-hospital needs for individuals, families and groups.

Upon completion of the Paramedic program, the student will demonstrate:

OUTCOME	MAPPING Course # that correlates to the outcome	METHOD OF ASSESSMENT	RESULTS OF ASSESSMENT(S)	EVALUATE THE NEED FOR CHANGE
<b>COMPREHENSIVE EMS KNOWLEDGE:</b> a. Comprehend EMS knowledge necessary to function in a healthcare setting. b. Comprehend general medical knowledge necessary to function in a healthcare setting. c. Be a strong entry level paramedic by giving me sufficient knowledge of current practice.	EMS 105/L EMS 106 EMS 107A EMS 107L EMS 108A EMS 108B	a. Student self-assessment (DataArc survey). Benchmark: 80%.  b. NREMT-P Benchmark-stay above the national average and to have all students pass by 2 <sup>nd</sup> attempt  c. Program Student Survey	a. 15 students completed survey a) 100% b) 100%  b. 100% of the 22 graduates passed the NREMT-P  c. none	a. Met the benchmarks – no need for change at this time  b. Met the benchmarks – no need for change at this time.  a. Will implement summer 2012 by administering survey at time of student exit interview with the Paramedic Director.

OUTCOME	MAPPING Course # that correlates to the outcome	METHOD OF ASSESSMENT	RESULTS OF ASSESSMENT(S)	EVALUATE THE NEED FOR CHANGE
				<p><i>FACULTY/Paramedic Director/Associate Director of N&amp;AH DISCUSSION:</i></p> <p>Revise results to include breakdown of number of attempts needed to pass NREMT-P.</p>
<p><b>LEADERSHIP:</b></p> <p>a. Be responsible and accountable for my paramedic practice.</p> <p>b. Conduct myself in an ethical and professional manner when practicing paramedicine.</p> <p>c. Demonstrate an interest in continued professional development.</p> <p>d. Know the need to follow agencies and regulatory policies and procedures.</p> <p>e. Make appropriate decisions while functioning in a stressful prehospital/EMS condition.</p> <p>f. Integrate entry level paramedic critical thinking to patient situations.</p> <p>g. Consult with appropriate healthcare professional as needed for decision making.</p> <p>h. Value the use of evidence based practice and apply it to my practice.</p> <p>i. Consider physiologic, psychosocial, and spiritual needs of the patient when</p>	<p>EMS 105/10 5L EMS 106 EMS 107A EMS 107L EMS 108A EMS 108B</p>	<p>a. Student self-assessment (DataArc survey) Benchmark is 80%</p> <p>b. Final field (major) preceptor evaluation – Benchmark is 100% Students cannot graduate until they meet this</p>	<p>a. 15 students completed survey a) 93% b) 100% c) 86% d) 79%</p> <p>b. 22 grads a) 100% b) 100% c) 100% d) 100%</p>	<p>b. Met the Benchmark for ‘sound judgment’, ‘ethical’/‘professional’ and ‘effective communication’ Barely met the Benchmark for ‘managing time efficiently’.</p> <p><i>FACULTY/Paramedic Director/Associate Director of N&amp;AH DISCUSSION:</i></p> <p>Provide students with more exposure to “life scenarios” to better use “multi-tasking” skills in an attempt to better manage time.</p> <p>c. Met the benchmark</p>

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making decision. j. Coordinate care as being a team leader. k. Perform effective professional communication with the EMS team. l. Perform effective written/electronic documentation (PCR) that meets policies of the prehospital healthcare setting m. Apply expected legal guidelines to documentation and patient care. n. Effectively teach and evaluate patient learning.		benchmark.             c. Program Student Survey	c. none	d. Will implement summer 2012
<b>PATIENT ASSESSMENT:</b>  a. Perform effective therapeutic communication with patients. b. Collect data from charts and patients. c. Interpret patient data. d. Recommend appropriate diagnostic and therapeutic procedures. e. Perform patient assessment systematically and thoroughly.	EMS 105/L EMS 106 EMS 107A EMS 107L EMS 108A EMS 108B	a. Student self-assessment (Data Arc) Benchmark is 80% (1-5) scale of students agree (4) or strongly agree (5).  b. Final field (major) preceptor evaluation Benchmark is 100% (3 on a 1-3 grading scale). Students cannot graduate until they have met this benchmark  c. Program Student Survey	a. 15 students completed survey a) 86% b) 92% c) 86% d) 99%  b. 22 grads a) 100% b) 100% c) 100% d) 100%  c. none	a. Met the benchmarks – no need for change at this time.       b. Met the benchmarks – no need for change at this time.      c. Will implement Summer 2012
<b>TREATMENT:</b>  a. Follow the local protocols of a given EMS	EMS 105/105L	a. Student self-assessment (DataArc survey) Benchmark is 80% (1-5) scale	a. 15 students completed survey a) 99%	a. Met the benchmarks – no need for change at this time

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area. b. Plan, prioritize, and implement patient care. c. Organize my time and work efficiently in a triage type method. d. Perform approved therapeutic procedures and modalities safely and with confidence. e. Assess accurately and recognize change from patient baseline and make adjustments accordingly. f. Utilize behaviors of prevention, maintenance, and restorative interventions when providing care. g. Administer medications using an organized system, within time requirements. h. Follow the seven rights of patient safety when administering medications. i. Perform and interpret diagnostic procedures safely and accurately. j. Provide non-judgmental care to diverse populations. k. Consider cultural sensitivity when providing patient care. l. Apply age appropriate patient care.	EMS 106 EMS 107A EMS 107L EMS 108A EMS 108B	of students agree (4) or strongly agree (5).  b. Final field (major) preceptor evaluation – Benchmark is 100% (3 on a 1-3 grading scale). Students cannot graduate until they have met this benchmark  c. Program Student Surveys	b) 99% c) 100%  b. 22 grads a) 100% b) 100% c) 100%  c. none	b. Met the benchmarks – no need for change at this time  c. Will implement in Summer 2012
<b>FIELD INTERNSHIP FINAL COMPETENCY:</b>  Competently demonstrate: a. Scene Management	EMS 108A EMS 108B	a. Preceptor evaluation of student: Preceptor rates his/her student at the end of his/her	FIELD INTERNSHIP FINAL COMPETENCY: a. 100% of the 22 graduates passed	a. Met the benchmarks – no need for change at this time

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b. Assessment/Treatment c. Communication d. Leadership e. Equipment f. Airway g. Circulation h. Musculoskeletal Skills i. Pharmacology		internship - evaluation on a grading scale of 1-3 Benchmark 90% A rating of "3" which is passing  b. Advisory committee input/minutes          c. Program Student Surveys	their internships with 3's as a final evaluation for internship     b. Advisory committee feedback –more equipment was needed for the cert classes: ACLS, PALS, PHTLS; seek out more experiences during internship     c. none	b. Needed equipment will be purchased with grant or foundation funds or outside donations          c. Will implement Summer 2012  <i>FACULTY/Paramedic Director/Associate Director of N&amp;AH DISCUSSION:</i> Ask pertinent questions during Advisory to address program needs: equipment, content, experiences etc.
<p><b>DISCUSSION OF ASSESSMENT PROCEDURE &amp; RESULTS &amp; PLANS:</b> Program SLO Presentation/Faculty Dialogue took place at the Paramedic faculty meeting on May 4, 2012 meeting. 4 paramedic faculty/1 associate director attended the 30 minute presentation.</p> <p><b>RECOMMENDATIONS FOR CHANGE:</b> Dialogue took place on program needs based on SLO results – see above. Need to develop student program survey and methods to increase responses for Program, Grads and Employers. Need to establish calendar for assessment cycle.</p>				