



2018-19

Instructional Program
Review

Emergency Medical Technician

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1. PROGRAM/DISCIPLINE MISSION/GOALS AND LINK TO STRATEGIC PLAN

1A. DESCRIBE PROGRESS TOWARD GOALS SET IN PREVIOUS REVIEW, ANNUAL BUDGET PRESENTATIONS, AND/OR STRATEGIC BUDGET PLANNING.

Goals of the EMT program include:

- Improving community partnerships by building lasting relationships. Engaging regional public safety departments in development in delivering professional training and education in emergency response and operations. By:
 - Increasing partnership participation with a resulting increased instructor pool.
 - Increasing collaborative training courses with partners.
 - Developing technologies that will facilitate training delivery for our remote partners.
 - Cooperating and coordinating with partners to establish comprehensive training facilities, equipment and access to apparatus and specialized equipment.
 - Establishing, coordinating, and maintaining partnerships between the Klamath Basin Public Safety Training Center and public safety agencies.
 - Providing a clear credit process for prior learning certificates.
- Improving the success of the Emergency Response Operation students that leads to retention/recruitment/completion. By:
 - Making sure, the curriculum is aligned with program outcomes, sequence of course, fun, rigorous opportunities that retain students. By:
 - Continued program assessment, scenario-based learning, review and update pathway and AAS degree to look for strategies to increase completions.
 - As a result of the efforts, the program will see:
 - Student retention.
 - Full courses.
 - Quality classroom instruction with quality instructors.
 - Large graduating class of 2020.
 - More course offerings.
- Increasing student access and enrollment into ERO degrees, certificates, and emphasis by:
 - Providing more synchronous offerings and pathways that clearly define and identify potential credit for prior learning experience and continuing education unit credits.
 - Providing a comprehensive review of marketing materials. Develop materials and resources that link the EMT academic program to workforce employment opportunities. Develop pathways to program completion for professionals in the field that want to receive continuing education.
 - Creating course offerings during the College Now hour that promote guided pathways.
 - As a result of the efforts, the program will see:
 - The ability to market the programs using different methods (i.e., handouts and promotional items).
 - The establishment of program of study for local and regional high schools.
- Becoming the premier training provider for emergency response teaching in the Klamath Basin by:
 - Reviewing each program to ensure comprehensive offerings that address collaborative needs, not just those for traditional students.
 - Conducting internal and external needs analysis for Klamath Basin potential trainings.
 - Identifying and applying for alternative and additional funding sources.
 - Determining equipment needs to support all ERO degrees and partner needed trainings.
 - As a result of the efforts, the program will see:
 - The building of state-of-the art training facilities
 - Increased FTE
 - Increased enrollment/retention

- An established budget for facility and for the four emphasis areas in the ERO program (emergency medical technician, wildland fire and structure fire and criminal justice)

1B. HAVE YOU MET YOUR PREVIOUSLY SET GOALS? IF NOT, HOW DO YOU PLAN TO MEET THEM?

☒ Yes

☐ No

2. PROGRAM/DISCIPLINE DESCRIPTION AND OVERVIEW

2A. PROVIDE THE CATALOG DESCRIPTION OF THE PROGRAM.

One-Year Certificate of Completion (Under *Emergency Response and Operations*)

The Emergency Medical Technician (EMT) Certificate of Completion program is designed to train and educate emergency medical service professionals to excel in meeting the needs of the community. Emergency medical service professionals respond to medical emergencies by providing immediate care and transportation to the ill and injured.

EMTs conduct basic, noninvasive interventions to reduce morbidity and mortality in acute out-of-hospital emergencies. All EMTs have emergency medical responder (EMR) capabilities along with additional skills associated with patient transport. In many places, EMTs provide the majority of out-of-hospital care, and in some places, the highest level of care. Licensure as an EMT requires completion of an accredited course of study. After successful completion of all requirements for the EMT Certificate of Basic or Intermediate Completion, students are eligible to apply to take the respective state licensure exams.

The basic and intermediate coursework in this program provide for a gradual increase in the depth and breadth of students' emergency medical services knowledge. An individual may begin at either the emergency medical responder/first responder or the emergency medical technician level. Each higher-level program reinforces basic skills and adds specific additional lifesaving techniques.

Less-Than-One-Year Certificate of Completion (Under *Emergency Response and Operations*)

The Emergency Medical Technician (EMT) Career Pathways Certificate is designed to train and educate emergency medical service professionals to excel in meeting the needs of the community. Emergency medical service professionals respond to medical emergencies by providing immediate care and transportation to the ill and injured.

EMTs conduct basic, noninvasive interventions to reduce morbidity and mortality in acute out-of-hospital emergencies. All EMTs have emergency medical responder (EMR) capabilities along with additional skills associated with patient transport. In many places, EMTs provide most out-of-hospital care, and in some places, the highest level of care. Licensure as an EMT requires completion of an accredited course of study. After successful completion of all requirements for the EMT Certificate of Basic or Intermediate Completion, students are eligible to apply to take the respective state licensure exams.

2B. DESCRIBE HOW AND TO WHAT DEGREE THE PROGRAM DESCRIPTION REFLECTS THE PROGRAM'S OVERALL GOALS. IF IT DOES NOT, REVISE PROGRAM DESCRIPTION.

For both one-year certificates, there are some areas that need to be revised. For example, there are three EMT levels: EMT, Advanced EMT, and EMT Intermediate. That should be stated in the course descriptions. Also, the text "All EMTs have emergency medical responder (EMR) capabilities also with additional skills associated with patient transport" should be eliminated.

2C. COMMUNITY LABOR MARKET NEED ANALYSIS AND PROJECTION

2C.I. HAS THE DEMAND FOR GRADUATES CHANGED IN THE PAST FIVE YEARS? IF SO HOW AND TO WHAT DEGREE?

☒ Yes

☐ No

Statistics are not available for the past five years. Appendix A.1 includes Oregon data for 2014 and projections for 2024. Appendix A.2 includes national data for 2017 and projections for 2026.

2C.II. WHAT IS THE EXPECTED MARKET DEMAND FOR THE FUTURE? HOW MIGHT THE PROGRAM ADJUST TO THESE PROJECTIONS?

- According to the community labor market demand, nationally there is an expected increase in EMT jobs of over 15%. In Oregon there is an expected increase of EMT jobs of over 18%. Regionally there is expected an increase of 4%. The potential earnings for an EMT is an average of \$38,483 annually in our region. Because of this, there is a possibility of developing ties to create a paramedic program offered through KCC.
- To meet the demand, the use of synchronous technology has increased to meet the needs of not just Klamath County but Lake and Harney Counties as well. The challenge for these classes is the need for training versus earning college credit. In smaller organizations, the need for training outweighs the need for college credit. If there were a paramedic program at KCC, it would increase the enrollment and encourage those who were not degree seeking to obtain an associate degree to meet the requirements at the state and national levels.

2D. DESCRIBE THE SPECIFIC CURRICULAR, INSTRUCTIONAL, OR OTHER CHANGES MADE IN THE PREVIOUS FIVE YEARS.

- In 2015, the EMT program was audited at the state level; after this audit came many changes adding a full-time program lead, who was given the task to redesign the program, including offering classes that had not been offered on campus for years. Some of these classes were EMT Rescue, Patient Transportation, Patient Communication and Documentation, and Crisis Intervention.
- There were also classes that had requirements change at the state level. Some classes were deactivated, including a first responder class and refresher classes.

3. RESOURCES

3A. DESCRIBE FACULTY COMPOSITION, QUALIFICATIONS, AND PROFESSIONAL DEVELOPMENT.

3A.I. WHAT PERCENT OF FACULTY ARE FULL-TIME? PART-TIME?

- One full-time program lead
- One part-time adjunct skills instructor whose qualifications include EMT certification, BLS instructor certification, field experience, and DPSST Instructor 1 certification.
- One part-time student worker whose qualifications include previous classroom experience.

3A.II. WHAT ARE THE MINIMUM DEGREE QUALIFICATIONS? WHAT PERCENT OF FACULTY EXCEED MINIMUM DEGREE QUALIFICATIONS?

1. Currently the lead is an Oregon state EMT Intermediate. The lead also holds other certifications such as BLS Instructor through the American Heart Association, Advanced Cardiac Life Support, Pediatric Cardiac Life Support, Prehospital Trauma Life Support, Department of Public Safety and Standards Firefighter 1 and Fire Instructor 1, National Incident Management System ICS 700, 800, 100, 200, 300, & 400. The lead has attended many certifying courses such as HAZMAT Awareness and Operations, GPS and Navigation, Advanced Vehicle Extrication, Basic Rope Rescue, Firefighter 2, Training Operations in Small Departments, Skid Avoidance Training, Flammable Liquids and Gas, Wildland Firefighting S-130 and S-190. The lead is also working on obtaining an associate degree in both emergency response and operations and general studies as well as toward national Advanced EMT certification.
2. As per OAR 333-265-0014, an Oregon educational institution conducting EMT, AEMT or paramedic courses must have program faculty consisting of a designated program administrator, course EMS medical director, course directors, and may have optional guest instructors. The number of persons carrying out the responsibilities of conducting an EMT, AEMT, or paramedic course may vary from program to program. One person, if qualified, may serve in multiple roles.

An Oregon educational institution or authority approved non-educational institution conducting EMT-Intermediate courses must have program faculty consisting of a designated program administrator, course EMS medical director and course directors, and may have guest instructors. The number of persons carrying out the responsibilities of conducting an EMT-Intermediate course may vary from program to program. One person, if qualified may serve in multiple roles.

Per OAR 333-265-0018-0022: The course director must have appropriate training and experience to fulfill the role and have the credentials that demonstrate such training and experience. The director must be currently licensed as an EMT Intermediate or higher, have a minimum of three years of prehospital care experience and be in good standing with the Authority or be an EMS medical director.

He or she must also have a current basic life support (BLS) instructor card or certificate of course completion that meets or exceeds the 2015 American Heart Association ECC guidelines or equivalent, unless this requirement is waived by the authority.

In addition, he or she must have successfully completed one of the following:

- The National Association of EMS Educators Instructor 1 Course
- DPSST Fire Instructor 1 Course
- Have at least 40 hours of Instructor Development Program offered by DPSST
- Have completed a minimum of three college credits in adult education theory and practice or vocational educational theory and practice from accredited institution of higher learning.
- A minimum of three years working as a full time EMT or higher with a license ambulance service and has experience conducting training or
- Other instructor course approved by the Authority.

The instructor of the course must teach at least 50% of the didactic sessions, unless this requirement is waived by the Authority.

<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1357>

3A.III. LIST THE SPECIFIC PROFESSIONAL DEVELOPMENT PROGRAM FACULTY ATTENDED INCLUDING BOTH ON-SITE AND OFF-SITE TRAININGS; HOW DID THE PROFESSIONAL DEVELOPMENT IMPACT INSTRUCTION, DESIGN, AND DELIVERY?

1. The program lead is working toward a degree in emergency response and operations as well as a degree in general studies. Plans include enrolling into a paramedic program. He/she is looking for other classes that will help benefit instruction and training such as continuing education on advanced cardiac life support, pediatric cardiac life support, and prehospital trauma life support. Other classes that the lead plans on attending include pediatric emergency training, advanced airways, EKG classes, and others.
2. By attending EMS consortium meetings, the lead is gaining knowledge of other college's requirements, resources, challenges, and successes. This in turn can help in overall state strategies for teaching high quality classes. The lead is also involved in subcommittees within the consortium to help determine the course of action that can be a standard across the state and also representing rural Oregon.

3A.IV. ARE FACULTY COMPOSITION, QUALIFICATIONS, AND PROFESSIONAL DEVELOPMENT MEETING INSTRUCTIONAL NEEDS? IF NOT, DESCRIBE ANY PLANS THAT WILL ADDRESS THIS.

☐ Yes

☒ No

☐ Somewhat

It is difficult obtaining coverage for classes and continuing education. There are not enough people interested in teaching courses. Therefore, there is no coverage for the lead to attend continuing education classes. Also, the skills portion of the class is a full day, and there is a national requirement of a ratio of 10 students to one instructor. There is no plan in the future to address this.

3B. DESCRIBE THE SPECIFIC FACILITIES, EQUIPMENT, AND MATERIALS USED BY THE PROGRAM.

3B.I. ARE FACILITIES MEETING INSTRUCTIONAL NEEDS? IF NOT, DESCRIBE ANY PLANS THAT WILL ADDRESS THIS.

☐ Yes

☒ No

☐ Somewhat

- There is a need for proper storage for supplies used for the EMS program. There is temperature-sensitive equipment that needs to be in a temperature-controlled environment. Current storage facilities have no lighting or proper shelving. There are no security cameras dedicated to the Connex. All costs of lighting and shelving would have to come out of the ERO budget, which was not included into the plan to move equipment into the Connex. Classes are offered at night, and there is no safe way to remove equipment used for instruction and return the equipment to the storage area due to inadequate lighting and lack of security cameras.

- There is a need to find a parking area for the new ambulance that will soon be delivered. There is inadequate space in areas that currently house vehicles. The ambulance needs to be plugged in at night in a temperature-controlled environment to protect supplies stored in the ambulance.
- Phase III and the addition of a new building will address these issues.

3B.II. IS EQUIPMENT MEETING INSTRUCTIONAL NEEDS? IF NOT, DESCRIBE ANY PLANS THAT WILL ADDRESS THIS.

☐Yes

☐No

☒Somewhat

- Most equipment is adequate. However, additional equipment would greatly benefit the program. For example, an adult-sized, full-body mannequin is needed to simulate patient rescue, treatment, and transport. Currently, the program uses the adult-sized mannequin dedicated to the CNA lab. The program must schedule time in the SIM lab for nursing students and others to further enhance learning.
- Obtaining a cardiac monitor dedicated to the EMS program would be very helpful for instruction. The current monitor does not have the ability to change in response to treatment. Having a monitor that can be adjusted will help students understand the cause and effect of their choice in treatment options.
- The items listed above are expensive additions into the program and will need to be budgeted.
 - A simulation mannequin can cost hundreds or thousands of dollars. Unfortunately, in order to get an exact quote, the lead will have to create an account with the vendor.
 - A cardiac monitor that the program has looked at in purchasing is approximately \$4,000 for startup. Updates can cost hundreds or thousands of dollars.
 - These items are expensive, and the budget is shared with the fire program. Much of the budget is going to start-up materials for the fire program, leaving the EMT program with little funding to purchase new items.
 - In order to address this, there have been meetings scheduled about the budget.

3B.III. ARE INSTRUCTIONAL MATERIALS MEETING PROGRAM NEEDS? IF NOT, DESCRIBE ANY PLANS THAT WILL ADDRESS THIS.

☐Yes

☐No

☒Somewhat

Current instructional materials include synchronous technology and Canvas. These two mediums have done an amazing job in providing classes to our most rural partners. However, there are still challenges. Some locations do not have adequate internet speeds, which leads to students in those courses not being able to access files or live streams. To address this, the lead has recorded lectures. This has worked, though it does require a little extra work on the instructor's part.

3C. DESCRIBE THE INSTRUCTIONAL SUPPORT SERVICES THE PROGRAM USES.

3C.I. REVIEW LRC HOLDINGS FOR RELEVANCY AND CURRENCY TO PROGRAM.

The KCC Library's holdings of and access to information resources are sufficient to support the Emergency Medical Technician program and the needs of students in the program. The Library's print and digital collections and online subscriptions are continually developing according to library best practices to serve these changing needs.

As of Spring 2018, the Library houses a total of nearly 7,000 books and videos. The KCC LRC collection includes 22 titles specifically focused on emergency medical services. Of these items, 15 were added since 2015. This collection includes textbooks, handbooks, and manuals. The Library also manages a collection of textbooks provided by high schools for checkout by high schools offering KCC courses, and some of these are texts for EMT courses. As a member of the Sage Library Consortium, KCC shares a catalog with other Sage libraries. This provides KCC students, faculty, and staff with interlibrary loan access to books in 77 libraries in Eastern and Central Oregon.

Access to e-books, reports, videos, and full-text articles in medical magazines and journals is provided via Library subscriptions to online databases, including CINAHL Plus and Health Source (Nursing and Consumer Editions) from EBSCOhost, and Nursing and Allied Health Collection and Health Reference Center Academic from Gale Cengage. In combination, these databases, in addition to others containing full text of popular/consumer publications with significant medical content, provide full-text access to approximately 5,000 current medical periodicals. These titles include some focused on emergency medical services, including EMS Magazine, EMS World, Emergency Medicine Journal, Emergency Nurse, and Emergency Medicine International.

3C.II. REVIEW PROGRAM STUDENT USE OF TUTORING AND E-TUTORING.

The LRC Tutoring Center provides supplemental instruction on a drop-in basis for individual students and study groups. Tutors provide help with coursework for classes commonly taken by EMT students including mathematics, writing, and computer skills, although tutors are not currently available for EMT or ERO classes. Online tutoring in medical and other subject areas is available 24 hours a day, seven days a week, free of charge to KCC students through TutorMe.

Data is not currently available to specifically show the extent of EMT student use of tutoring and e-tutoring, but in calendar year 2017, the Tutoring Center and TutorMe logs did not indicate any students receiving tutoring in EMT or ERO classes. For both modes of tutoring delivery, some EMT students may have received tutoring in math, writing, or other subjects.

3C.III. REVIEW PROGRAM STUDENT USE OF TESTING SERVICES.

Proctoring KCC course exams in the Testing Center frees up class time for instructional activities and offers scheduling flexibility for students taking the tests. In addition to proctoring KCC class tests, the Testing Center provides placement testing, exams for college credit, and EMT-related licensing and certification exams, such as the NREMT.

Data are not currently available to specifically show the extent of EMT student use of Testing Center services, but the Testing Center log shows that in calendar year 2017 five tests were administered and proctored for EMT instructors. These were make-up tests for students unable to test in class. EMT students may have taken tests for other KCC classes or placement, college credit, or licensing exams.

3C.IV. REVIEW OTHER INSTRUCTIONAL SUPPORT SERVICES (STUDENT CLUBS, ADVISING, TRIO, VETERANS SERVICES, ETC.) IF APPLICABLE.

For EMT 151 and EMT 152, the program offers open labs for the students who need hands-on practice or clarification on written tests or material learned throughout the course.

3D. DESCRIBE TO WHAT DEGREE THE PROGRAM USES THE COLLEGE'S LEARNING MANAGEMENT SYSTEM (CANVAS) FOR ALL METHODS OF DELIVERY (FACE-TO-FACE, ONLINE, SYNCHRONOUS, HYBRID).

The EMS program uses the College's learning platform (Canvas) for all methods of delivery for every class offered. In face-to-face classes, Canvas is used to provide information for classroom instruction and study materials. Canvas is also used to provide information and discussions allowing the student to learn the material. Synchronous and hybrid classes are set up very similarly to the face-to-face courses.

Canvas is used extensively by credit-seeking students. However, the EMS program also has non-credit students. These non-credit students are not formally trained to use Canvas. Explaining the use of Canvas on the first day of the course is time consuming and can lead to other issues including not being able to turn in assignments, emailing the instructor, making comments, and much more. Also, many students do not know their student ID number, which the instructor must provide via email or phone.

The EMS program uses classroom technology to provide synchronous classes to Lakeview, Paisley, North Lake, Chiloquin, Crescent, and Crater Lake. Using synchronous technology has been a challenge. To overcome technology issues, the lead had to bring a laptop into the class and use "Go-To-Meeting" in order to provide classes to our distant groups. Luckily, this challenge was overcome, and the lead no longer uses a laptop to provide classes to some of our rural partners.

Another challenge with this Internet-based technology is that power outages make the class inaccessible. To address this, the program instructor records lectures and provides a link for students so they do not miss class in the event of an Internet outage.

4. EFFECTIVENESS

4A. STUDENT LEARNING OUTCOMES ASSESSMENT

4A.I. COURSE LEARNING OUTCOMES (CLO)

4A.I.1 DESCRIBE EVIDENCE OF STUDENT PROFICIENCY IN CLOS. IF THERE IS NO EVIDENCE, DESCRIBE PLANS TO ADDRESS THIS.

There is no evidence of student proficiency in CLOs for EMT courses. CLO assessment will begin in the 2018-19 academic year. One challenge is that the program lead is the primary instructor and also conducts assessment at the PLO level.

4A.I.2 WHICH COURSES HAD LEARNING OUTCOMES REVISED/UPDATED AND WHY?

EMT 151 and EMT 152 had outcomes and CCOGs revised to be fewer in number and to be more specific/relevant/measurable.

4A.I.3 IDENTIFY AND GIVE EXAMPLES OF CHANGES MADE IN INSTRUCTION THAT OCCURRED AS THE RESULT OF CLO ASSESSMENT. IF THIS HAS NOT OCCURRED, DESCRIBE PLANS TO ADDRESS THIS.

This has not yet occurred, but CLO assessment in EMT 151 and EMT 152 will occur in the 2018-19 academic year.

4A.II PROGRAM LEARNING OUTCOMES (PLO)

4A.II.1 DESCRIBE EVIDENCE OF STUDENT PROFICIENCY IN PLOS. IF THERE IS NO EVIDENCE, DESCRIBE PLANS TO ADDRESS THIS.

EMT has one program learning outcome, and results of this assessment will be reported at the end of Spring 2019. At the time of this review, no data was available.

4A.II.2 IDENTIFY AND GIVE EXAMPLES OF CHANGES MADE IN INSTRUCTION THAT OCCURRED AS THE RESULT OF PLO ASSESSMENT. IF THIS HAS NOT OCCURRED, DESCRIBE PLANS TO ADDRESS THIS.

This has not yet occurred due to the fact that PLO assessment is underway and results have not yet been reported.

4B. STUDENT SUCCESS

4B.I. DESCRIBE ENROLLMENT TRENDS AND PLANS TO ADDRESS THEM.

[See Appendix E]

4B.II. DESCRIBE DEGREE AWARDED TRENDS AND PLANS TO ADDRESS THEM.

[See Appendix E]

4B.III. REVIEW TRANSFERABILITY OF PROGRAM.

The EMS program offers classes in which high school students can participate in and complete before entering the EMS program. Classes include EMT 177, EMT 176, ERO 115, and ERO 100. Once students are enrolled, they can complete the rest of the certificate or degree.

Once students complete the EMS emphasis associate degree, they can transfer to Eastern Oregon University to complete a bachelor's degree in emergency response.

If students complete a one-year certificate in emergency medical services, they have the availability with the articulation agreement with Oregon Institute of Technology to enroll into the paramedic program on OIT's Wilsonville campus. Additionally, the one-year certificate is widely accepted across the State of Oregon as a stepping-stone into a paramedic program.

- a. EOU transfer option
- b. OIT articulation (percentage of credits that transfer)
- c. Future: RCC (include also in goals)
- d. Sisters High School

4B.III.2 HAS THIS CHANGED OVER THE LAST FIVE YEARS? IF SO, WHY? WHAT ARE THE IMPACTS ON STUDENTS AND THE PROGRAM?

☒ Yes

☐ No

This is still a new program. This program has just started to offer the classes needed for degrees about three year ago. With the additions of these classes, it has offered the student more opportunities to complete their degree and start working out in the emergency services field.

4C. STUDENT ENGAGEMENT AND SATISFACTION

4C.I. COURSE EVALUATIONS DATA AND ANALYSIS

4C.I.1 DESCRIBE CHANGES MADE IN INSTRUCTIONAL METHODS BASED ON STUDENT COURSE EVALUATION DATA. IF THIS HAS NOT OCCURRED, DESCRIBE PLANS TO ADDRESS THIS.

These courses are taught in both lecture and lab formats. Student engagement is high in both types of classes. No changes have been identified.

4C.I.2 DESCRIBE CHANGES MADE TO THE COURSE BASED ON STUDENT COURSE EVALUATION DATA.

Course evaluations are consistently very high. Courses receiving rates from 4.0-5.0 in student self-evaluations areas, course evaluation areas and instructor evaluation areas.

4C.II JOB PLACEMENT DATA AND ANALYSIS (IF AVAILABLE)

Right now, the college is not systematically collecting this data.

5. BUDGET

5A. PROVIDE FIVE-YEAR COST MARGIN DATA AND ANALYSIS.

Upon review of the cost margin analysis numbers for EMT for the last five years, several trends can be identified. Unduplicated headcount has not varied significantly. The duplicated headcount had a high of 236 the low was 225. Reimbursable FTE has fluctuated from a high 18 to a low of 15. Adjunct pay has varied from \$12,756 to \$27,088. The overall margin has always been in the red and the current margin is at -30,000. It will be difficult for this program to have a positive margin due to restrictions on class sizes that are required to meet state guidelines through the Oregon Health Authority.

5B. EXPLAIN ANY BUDGETARY CHALLENGES AND ANY PLANS TO ADDRESS THEM.

Historically, budgeting challenges have included staffing challenges. Securing a full time faculty to teach EMT courses has added continuity and stability to course offerings but has also added increased expenditures. Part time support funds are need to pay for subliminal instruction for skills labs. Community education should be paying for the supports needed for CE instruction and disposable supplies.

6. CONCLUSION

6A. DESCRIBE PROGRAM STRENGTHS.

EMT's are in demand, especially in the Klamath Basin area. They have great potential for both learning capabilities and high rates of return. More EMT's in the program would mean increased overall FTE for the college as well as a potential increase in students attending KCC to receive an Associate's. All of these reasons combine to ensure continued success for KCC and its future.

6B. DESCRIBE PROGRAM WEAKNESSES.

The issues we've determined stem from needed supplies, equipment, facilities, and storage areas. There is also a need for different or more accessible technology for those who are non-credit seeking and those who are taking courses remotely.

6C. DESCRIBE SUPPORT NEEDED.

Need for part-time faculty

6D. CREATE NEW GOALS AND LINK THEM TO THE STRATEGIC PLAN.

1. Increase the retention/recruitment/completion of students in the program by increasing faculty, improving facilities and materials, and overall experience.
 - a. Linked to Goal 2: Improve the success of the ERO students that leads to retention/recruitment of students to completion.
2. Provide more synchronous offerings and pathways that identify potential credit by increasing marketing material distribution and variety.
 - a. Linked to Goal 3: Increase student access and enrollment into ERO degree, certificate, and emphasis.
3. Develop the program to be the most sought after and well respected program in the Klamath Basin by identifying outside funding resources, creating state-of-the-art facilities and ensuring the region is aware of the improvements and what they mean.
 - a. Linked to Goal 4: Become the premier training provider for Emergency Response training in the Klamath Basin.



The Occupation Profiles tool is located on QualityInfo.org, a website of the Oregon Employment Department

Emergency Medical Technicians and Paramedics (292041)

Oregon (All Counties)

Description

Assess injuries, administer emergency medical care, and extricate trapped individuals. Transport injured or sick persons to medical facilities.

Wage Range

for Emergency Medical Technicians and Paramedics

Area	10th Percentile	25th Percentile	50th Percentile (Median)	75th Percentile	90th Percentile	Average Hourly	Average Annual
Oregon	\$11.00	\$13.29	\$17.86	\$23.74	\$29.55	\$19.16	\$39,841
Central Oregon	15.70	16.59	18.09	20.63	23.98	19.04	39,597
Clackamas	13.92	16.17	19.29	24.92	29.40	21.21	44,126
East Cascades	15.24	16.23	17.85	20.17	23.75	18.50	38,483
Eastern Oregon	10.86	11.93	17.02	22.90	29.56	18.45	38,366
Mid-Valley	10.47	10.88	11.54	13.55	21.17	13.82	28,741
Northwest Oregon	12.94	15.70	18.40	26.53	30.20	20.53	42,693
Portland Tri-County	14.08	16.81	21.13	26.16	30.34	21.95	45,673
Portland-Metro	14.19	17.31	21.88	26.80	30.72	22.33	46,450
South Coast	10.63	15.37	19.15	26.61	30.87	20.72	43,098
Southwestern Oregon	10.91	12.97	16.80	22.60	28.43	18.18	37,818

Employment Outlook

for Emergency Medical Technicians and Paramedics

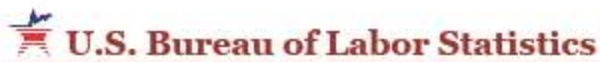
Statewide Employment Analysis	<p>Employment in this occupation in 2014 was somewhat larger than the statewide average for all occupations. The total number of job openings is projected to be somewhat higher than the statewide average number of job openings for all occupations through 2024. This occupation is expected to grow at a somewhat faster rate than the statewide average growth rate for all occupations through 2024.</p> <p>Reasonable employment opportunities exist largely due to the significant number of job openings projected for this occupation.</p>
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Area Employment Projections

for Emergency Medical Technicians and Paramedics

Replacement openings are caused by existing workers permanently leaving their occupation. Many additional job openings occur due to job changes within occupations.

Area	2014 Employment	2024 Employment	Change	Percent Change	Annual Growth Openings	Annual Replacement Openings	Total Annual Openings
Oregon	2,064	2,448	384	18.6%	38	34	72
Central Oregon	55	59	4	7.3%	0	1	1
Clackamas	259	315	56	21.6%	6	4	10
Columbia Basin	89	97	8	9.0%	1	2	3
Douglas	151	155	4	2.6%	0	2	2
East Cascades	86	90	4	4.7%	0	1	1
Eastern Oregon	123	130	7	5.7%	1	2	3
Mid-Valley	330	374	44	13.3%	4	5	9
Northwest Oregon	153	188	35	22.9%	4	2	6
Portland Tri-County	885	1,052	167	18.9%	17	14	31
Portland-Metro	599	710	111	18.5%	11	10	21



EMTs and Paramedics

Summary



EMTs and paramedics transport patients to medical facilities.

Quick Facts: EMTs and Paramedics	
2017 Median Pay	\$33,380 per year \$16.05 per hour
Typical Entry-Level Education	Postsecondary nondegree award
Work Experience in a Related Occupation	None
On-the-job Training	None
Number of Jobs, 2016	248,000
Job Outlook, 2016-26	15% (Much faster than average)
Employment Change, 2016-26	37,400

What EMTs and Paramedics Do

Emergency medical technicians (EMTs) and paramedics care for the sick or injured in emergency medical settings. People's lives often depend on the quick reaction and competent care provided by these workers. EMTs and paramedics respond to emergency calls, performing medical services and transporting patients to medical facilities.

Work Environment

Most EMTs and paramedics work full time. Their work can be physically strenuous and stressful, sometimes involving life-or-death situations.

How to Become an EMT or Paramedic

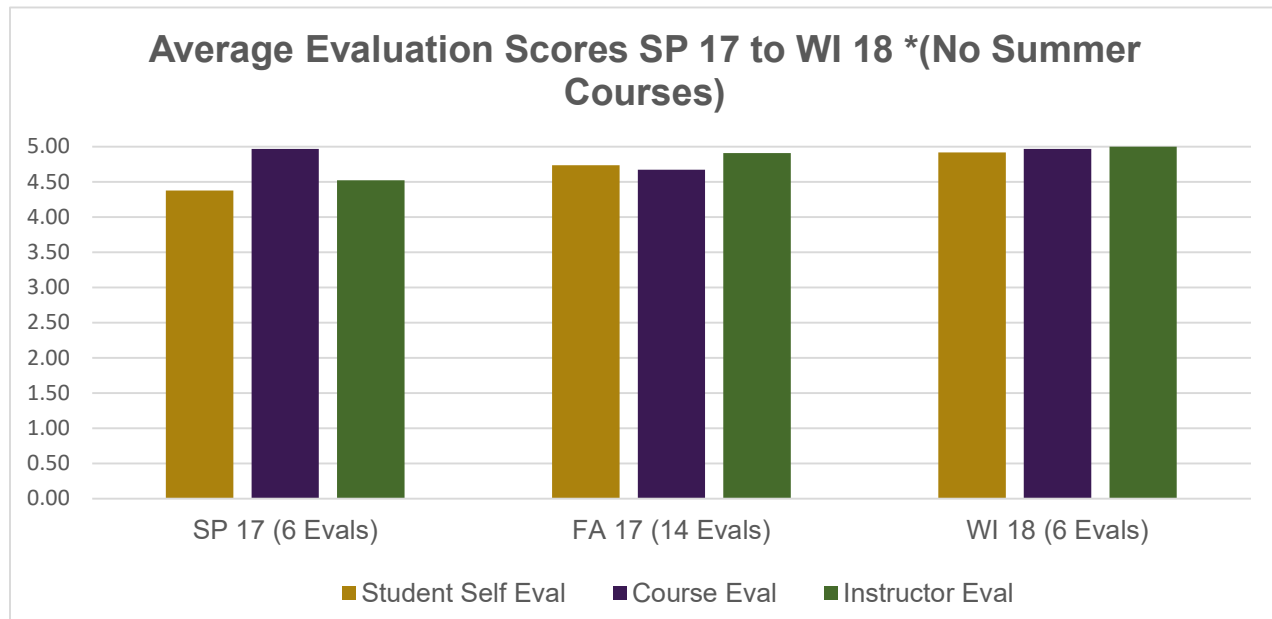
Emergency medical technicians (EMTs) and paramedics typically complete a postsecondary educational program. All states require EMTs and paramedics to be licensed; requirements vary by state.

Pay

The median annual wage for EMTs and paramedics was \$33,380 in May 2017.

Job Outlook

Employment of emergency medical technicians (EMTs) and paramedics is projected to grow 15 percent from 2016 to 2026, much faster than the average for all occupations. Emergencies, such as car crashes, natural disasters, and acts of violence, will continue to require the skills of EMTs and paramedics.



- i. Standard Classroom Instructional Technology
 - 1. 75-inch HD interactive display or HD projector
 - 2. Interactive whiteboard
 - 3. Sharelink content sharing/collaboration system
 - 4. Computer
 - 5. 22-inch interactive pen monitor
 - 6. HD document camera
 - 7. Blu-ray/DVD player
 - 8. Room audio system
 - 9. 5-inch LCD touch panel user interface or MLC input selection interface
 - 10. Presentation switcher
- ii. Synchronous Classroom Instructional Technology
 - 1. 75-inch HD interactive display
 - 2. Interactive whiteboard
 - 3. Two 70-inch HD displays
 - 4. Two HD PTZ video conferencing cameras
 - 5. Sharelink content sharing/collaboration system
 - 6. Computer
 - 7. 22-inch interactive pen monitor
 - 8. Document camera
 - 9. Room audio system
 - 10. 5-inch LCD touch panel user interface or MLC input selection interface
 - 11. Video conference server
 - 12. Presentation switcher

Course: EMT 151 and 151L Basic EMT Part I

EMT 152 AND 152L Basic EMT Part 2

Apparatus

1- Ambulance

Equipment

Anatomy models

6-stethoscopes

6-Blood Pressure Cuffs (Adult, Infant, Child)

1-Wheeled Stretcher

1-Stair Chair

1-Scoop Stretcher

1-Flexible Stretcher

1-Long Backboard w/restraints

1-KED Extrication Device

1-Short Backboard w/restraints

1-Flow restricted oxygen powered ventilation device

1-Oral airway set

1-Bag valve mask

1-nasal airway set

1-Suction unit

1-Oxygen Tank w/regulator

4-Airway Management Trainer

4-Portable Radios

1-Childbirth Kit

1-Childbirth trainer

4-CPR Manikins (adult, infant)

4-Artificial Ventilation Manikin

4-Automated External Defibrillator (trainer)

4-Defibrillation manikins

4-Epinephrine auto-injector trainer

4-Synthetic skin mannequin for injection

Splints (sam, air splints, cardboard, ladder, pillow, improvised splinting materials – magazines)

12-Blankets

1-Pneumatic antishock garment

1-Hare Traction Splint

1-Thomas Half ring splint

1-Sager traction splint

Burn sheets

Spinal immobilization collars (various sizes)

Helmet

Head immobilization device

1-Adult, Infant, child intubation manikins

Laryngoscope blades (0-4)

Laryngoscope handles

Endotracheal tubes

Adult, infant and child throat anatomical models

Syringes of varying sizes

-1, 3, 5, 10, 20, 30, & 60ml

Consumable Supplies

12- sets of eye protection

Klamath Community College Instructional Program Review:

12-gowns

3 boxes in each size- Disposable examination Gloves

12- exposure masks

12-penlights

12-Pocket mask

Suction catheters

Nonrebreather masks

Nasal cannulas

Tongue blades

Lubricant

Reporting forms

Sterile dressings

Bandages

Triangular bandages

Universal dressing

Occlusive dressing

4x4 gauze pads

Self adherent bandages

Roller bandages

Sterile water or saline

2 inch tape

Triage tags

C batteries

Expired Medications

- Normal Saline (500 & 1000 ml bags)

- Oral Glucose 15g tube

- Epinephrine 1:1000 1mg ampules

- Albuterol 2.5mg/3ml solution

- Ipratropium Bromide 0.5mg/3ml solution

- Naloxone 2mg

- Nitroglycerin 0.4mg tablets and/or SL spray

- Oxygen- size D bottle

Sharps Container

Course: EMT 169 EMT Rescue

Apparatus

1- Ambulance

Equipment

Ropes of varying sizes

Carabiners

Brakes

8 plates

Harness

Pulleys

Hydraulic cutters

Hydraulic spreaders

Hydraulic Jam

Window punch

Sawzall

Rescue Air bags

Cribbing

Rescue Struts

Klamath Community College Instructional Program Review:

Long backboard

Kendrick's Extrication device

Wheeled Gurney

Cardboard Splints

Sam Splints

10- Webbing at least 10ft in length

Course: EMT 176 Emergency Response – Patient Transportation

Apparatus

1- Ambulance

Equipment

Driving simulator/could use ambulance

Driving cones

High visibility vests

2-way communication radio

Course: EMT 177 Emergency Response – Communications/Documentation

Apparatus

1- Ambulance

Equipment

4-Radios

Computer access for report writing

Consumable Supplies

Copies of fillable PCRs

**Course: EMT 251 Advanced EMT Part 1
EMT 252 Advanced EMT Part 2**

Apparatus

1- Ambulance

Equipment (See EMT 151 list and add the following)

1-IV arm

1-IV hand

1-IO Mannikin

2-IO Needles

2-Extension Tubing

2-3-way Stopcocks

1-Micro drip set

Syringes of varying sizes

-1, 3, 5, 10, 20, 30, & 60ml

Consumable Supplies

IO Bone replacements

IV administration sets

IV catheters

Klamath Community College Instructional Program Review:

- 18Gauge
- 20Gauge
- 22Gauge
- 24Gauge

Expired Medications

- Dextrose (D-50) 25G/50ml
- Normal Saline (500 & 1000 ml bags)
- Glucagon 1mg
- Oral Glucose 15g tube
- Epinephrine 1:1000 1mg ampules
- Albuterol 2.5mg/3ml solution
- Ipratropium Bromide 0.5mg/3ml solution
- Naloxone 2mg
- Nitroglycerin 0.4mg tablets and/or SL spray
- 2% Lidocaine 100mg/5ml syringe
- Oxygen- size D bottle

Sharps Container

Nebulizer mask and pipe

IV Start kits

Various tapes

- Plastic
- Paper
- Coban

Course: EMT 111 EMT Intermediate

Apparatus

1- Ambulance

Equipment (See EMT 151 list and add the following)

ALS Manikin

1-IV arm

1-IV hand

1-IO Mannikin

2-IO Needles

2-Extension Tubing

2-3-way Stopcocks

1-Micro drip set

Cardiac Monitor

Syringes of varying sizes

- 1, 3, 5, 10, 20, 30, & 60ml

Consumable Supplies

Disposable gloves

IO Bone replacements

IV administration sets

IV catheters

- 18Gauge
- 20Gauge
- 22Gauge
- 24Gauge

Expired Medications

- Dextrose (D-50) 25G/50ml
- Normal Saline (500 & 1000 ml bags)

Klamath Community College Instructional Program Review:

- Glucagon 1mg
- Oral Glucose 15g tube
- Epinephrine 1:1000 1mg ampules
- Epinephrine 1:10000 1mg prefilled syringes
- Atropine 1mg
- Diphenhydramine 50mg/1ml vial or prefilled syringe
- Amiodarone 150mg/3ml vial or prefilled syringe
- Albuterol 2.5mg/3ml solution
- Ipratropium Bromide 0.5mg/3ml solution
- Naloxone 2mg
- Activated Charcoal 25-50 gram bottles
- Nitroglycerin 0.4mg tablets and/or SL spray
- 2% Lidocaine 100mg/5ml syringe
- Oxygen- size D bottle
- Ondansetron 4mg vials
- 10 mg/1 ml ampule, vial, pre-filled syringe or Tubex of normal saline Simulation for controlled medications

Sharps Container

Nebulizer mask and pipe

IV Start kits

Various tapes

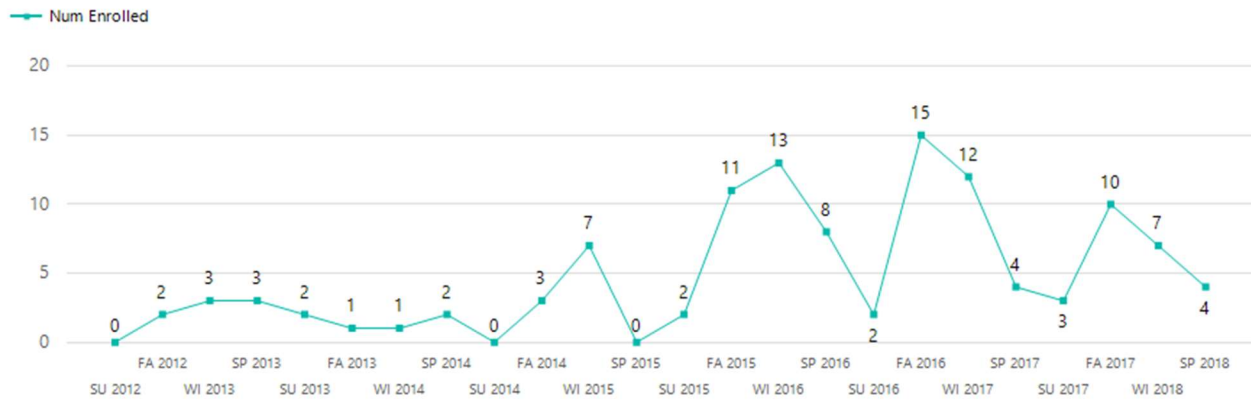
- Plastic
- Paper
- Coban

EKG paper

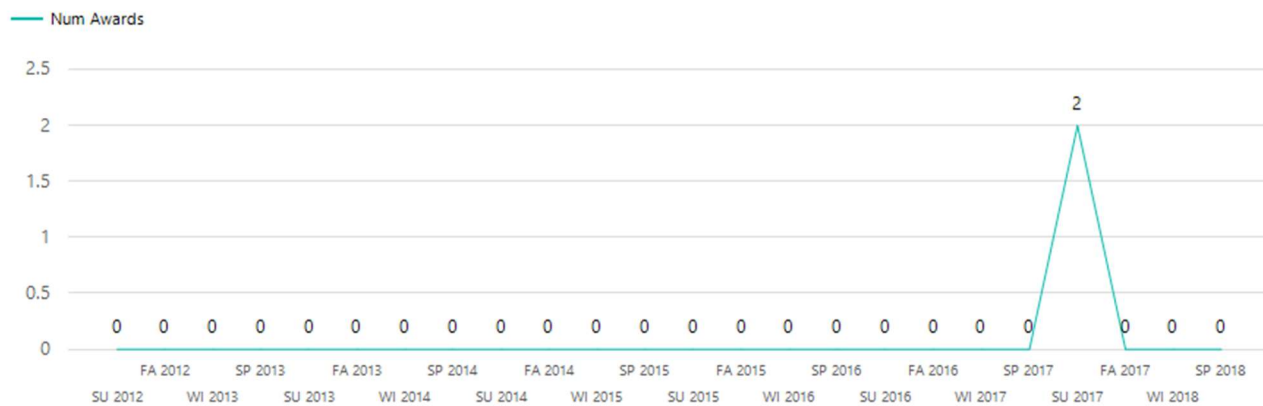
EKG Electrodes

Klamath Community College Instructional Program Review: Appendix E: Enrollment and Awards by Term

Number of unduplicated students declaring this degree by term enrolled. Snapshot date for count is last day of the term.



Number of Awards



INSTRUCTIONAL PROGRAM REVIEW RUBRIC				
	Highly Developed	Developed	Emerging	Initial
1—Accomplishments in Achieving Goals	Exhibits ongoing and systematic evidence of goal achievement.	Exhibits evidence of goal achievement.	Exhibits some evidence that some goals have been achieved.	Minimal evidence that progress has been made toward achieving goals..
2—Labor Market Projection	Thoroughly explains projected market demand and potential effects on program; presents highly developed plan to address projection.	Explains projected market demand and discusses several possible actions to address projection.	Minimally explains projected market demand and lists one or two actions to address projection.	Presents labor market demand without analysis/explanation and fails to list possible actions to address projection.
3—Resources				
Professional Development	Exhibits ongoing and systematic support of professional development opportunities.	Exhibits support of regular professional development opportunities.	Evidence of intermittent professional development opportunities.	Minimal evidence of professional development opportunities.
Faculty Meeting Instructional Needs	Employs a sufficient number of highly qualified faculty to meet instructional needs.	Employs an adequate number of qualified faculty to meet instructional needs.	Has a plan to employ an adequate number of qualified faculty to meet instructional needs.	Faculty numbers and/or qualifications are insufficient to meet instructional needs.
Facilities and Equipment	Facilities and resources meet current and future needs.	Facilities and resources meet current needs.	Evidence of a plan to have facilities and resources meet current and future needs.	Minimal evidence that facilities and resources meet current and future needs.
4—Effectiveness				

Student Learning Outcomes Assessment	Exhibits ongoing and systematic SLO assessment to adjust instruction.	Exhibits student learning outcomes assessment and uses results to change instruction.	Has a plan to engage in ongoing and systematic SLO assessment, including using results to change instruction.	Minimal evidence of SLO assessment.
Student Success	Thoroughly analyzes trends in enrollment, degrees awarded, time-to-completion rates, and formulates comprehensive plans to address them.	Describes trends in enrollment, degrees awarded, time-to-completion rates, and formulates plans to address them.	Describes trends in enrollment, degrees awarded, time-to-completion rates, and makes an attempt to plan to address them.	Minimal description of trends and/or fails to formulate plan to address them.
5—Budget	Financial resources meet current needs and are projected to meet future needs.	Financial resources meet current needs.	Evidence of a plan to acquire financial resources to meet current needs.	Minimal evidence that financial resources meet current needs.
6—Strengths and Weaknesses	Strengths and weaknesses are described accurately and thoroughly.	Most strengths and weaknesses are described accurately and thoroughly.	Some strengths and weaknesses are described accurately and thoroughly.	Minimal evidence that strengths and weaknesses are described accurately and thoroughly.
7—New Goals and Plan	Multiyear planning process with evidence of use of assessment data in planning.	Multiyear planning process with some assessment data.	Short-term planning process recently implemented.	Minimal evidence of planning process.
8—Overall Evaluation	Evidence of ongoing systematic use of planning in selection of programs and services.	Exhibits evidence that planning guides program and services selection that supports the college.	There is evidence that planning intermittently informs some selection of services to support the college.	Minimal evidence that plans inform selection the of services to support the college.
	Highly Developed	Developed	Emerging	Initial