

EMS/Paramedic 2022-23 PUR Self-Study

EMS/Paramedic:

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- EMS/Paramedic 2022-23 PUR Self-Study

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1.A. Program or Unit Description

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Briefly describe (1 paragraph) the program/unit, including but not limited to the following: academic division that the program/unit belongs to, the academic area(s) represented, degrees/certificates offered, average student enrollment, number of full-time faculty, type of curriculum or pedagogical approaches, and any other pertinent aspect of the program/unit.

The Emergency Medical Services (EMS) program includes Paramedic, Advanced, and EMT. The EMS program resides in the Public Safety Department as part of Life Science, Allied Health, and Public Safety Division. The academic areas represented are Skills Certificates in EMT and AEMT, C of A in Paramedic, and AAS in Prehospital Emergency Medicine. EMS curriculum or pedagogical approaches emphasize the integration of EMS within the overall health care system. In addition to acute emergency care, and all EMS educational programs teach illness and injury prevention, risk modification, the treatment of chronic conditions, as well as community and public health.

This program has a unique and beneficial relationship between program staff and faculty, in that all were or remain local providers. This local knowledge helps the program with its relationships, and clinical and internship placements, in the region. This allows for uncomplicated and productive collaboration that may not be found in other programs.

Average student enrollment is 169.44 students per year enrolled of the last 5 years per fiscal year in EMS prefix classes. The growth in EMS has been continual and substantial, even throughout Covid. In Fall, EMS enrollment increased 27% in 2022 compared to 2021, and for Spring, EMS enrollment increased another 9% in 2023 compared to 2022.

1.B. Program or Unit Mission

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State the department's or unit's mission. Describe how it aligns to the College's Mission, and how program learning outcomes (PLOs) for degrees and certificates offered, or for the unit, align to the department/unit mission. If your department or unit does not currently have a mission statement, please discuss among your colleagues and develop one.

The department's mission of inspiring educational excellence and developing faculty and students with loyalty, respect, and evidence-based practice aligns with the College's mission of providing accessible, innovative educational opportunities.

The program learning outcomes (PLOs) for the EMS program align with the department's mission by focusing on developing students with the necessary knowledge and skills to excel in emergency medical services. The PLOs also emphasize the importance of integrity, innovation, leadership, collaboration, inclusion, and trust, which all align with the department's values.

The program also aligns with the college's mission by providing online delivery and accessible options for students, as well as up-to-date and relevant teaching with experienced instructors who work or have recently retired from the field.

Additionally, the program also focuses on ensuring that students are prepared pass their exams and to meet the workforce needs of the Northern Nevada region by providing training that meets industry standards and the latest trends in emergency medical services. This alignment with workforce needs further supports the College's mission of creating future students will love by preparing them for successful careers in their chosen field.

Furthermore, the program emphasizes the importance of evidence-based practice, which aligns with the College's mission of providing innovative and up-to-date education. This focus on evidence-based practice ensures that students are being trained using the most current and effective methods and techniques in the field of emergency medical services.

1.C. Program Learning Outcomes

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Program Learning Outcomes (PSLOs or PLOs)
EMS/Paramedic
PSLO
AAS Prehospital Emergency Medicine
PSLO1: Describe, interpret, and apply EMS and general medical knowledge necessary to function in a healthcare setting by demonstrating competency in all areas outlined in the National Registry of Emergency Medical Technician's cognitive and psychomotor examinations. (Active from Fall 2021)
PSLO2: Formulate treatment plans for diverse patient populations using principles in pathophysiology and pharmacology, patient assessment techniques, and scene management in both medical and trauma patients. (Active from Fall 2021)
PSLO3: Conduct oneself in an ethical and professional manner and show proficiency in interpersonal relations, communication, and documentation with diverse patient populations, peers, and other professionals amongst different agencies. (Active from Fall 2021)
PSLO4: Applying leadership principles to manage various types of scenes and transport patients using appropriate techniques that are safe and timely. (Active from Spring 2022)
Emergency Medical Technician Advanced Skills Certificate
PSLO1: Demonstrate the ability to understand the roles and responsibilities of an AEMT within an EMS system methods to stay healthy and to prevent job-related injuries in the field, basic legal and ethical issues as well as learn how to effectively communicate with patients of all ages, cultures, gender, race, and disabilities in the prehospital environment. (Active from Fall 2021)
PSLO2: Demonstrate how to provide basic and selected advanced assessment, development, and treatment to patients of all ages utilizing fundamental knowledge of anatomy, physiology, and pathophysiology of injuries and illnesses while providing selected advanced emergent care of airway, breathing, and circulation. (Active from Fall 2021)
PSLO 3: Demonstrate knowledge of operational roles and responsibilities to ensure safe patient, public, and personal safety. (Active from Fall 2021)
PSLO4: Demonstrate the ability to effectively document the essential elements of a patient assessment and follow an accepted format for dissemination of the patient information in verbal form, either in person or on the radio. (Active from Fall 2021)
Emergency Medical Technician Skills Certificate
PSLO1: Demonstrate the ability to understand the roles and responsibilities within an EMS system, methods to stay healthy and to prevent job related injuries in the field. (Active from Fall 2021)
PSLO2: Demonstrate the ability to gain knowledge of basic legal issues that impact decisions made in the field and the importance of ethics when making these decisions. (Active from Fall 2021)
PSLO3: Demonstrate the ability to effectively communicate psychologically and sociologically with all ages and cultures of patients in the prehospital environment. (Active from Fall 2021)
Certificate of Achievement, Paramedic
PSLO 1: Explain and demonstrate the role and responsibilities of an EMS provider within an EMS system, effectively communicate with patients, peers, and other healthcare professionals, and manage a scene of an emergency, safely, with the understanding of the emergency medical system. (Active from Fall 2010)
PSLO 2: Assess and demonstrate how to manage the airway of a diverse population including how to maintain proper ventilation judgment, and oxygenation of each of those patients in both a medical and trauma condition. (Active from Fall 2010)
PSLO 3: Determine and manage a diverse patient population based on their presenting clinical signs and symptoms using appropriate patient assessment techniques, by formulating impressions and implementing a treatment plan in both a medical and trauma situation. (Active from Spring 2021)
PSLO 4: Analyze patient medical and trauma conditions and manage those patients using pathophysiological principles

Program Learning Outcomes (PSLOs or PLOs)

and pharmacological interventions. (Active from Spring 2021)

PSLO 5: Identify and demonstrate how to safely drive an emergency vehicle, identify and apply an incident command system in a disaster, and recognize the concepts of rescuing a patient, hazardous materials, and crime scene management. (Active from Spring 2021)

2.A. Progress on Previous Findings and Recommendations

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Describe your progress on the major findings and recommendations for the program/unit from the last PUR, any annual progress reports (APRs), and if applicable, external reviews, (e.g. advisory boards, articulation committees, and program accreditors).

- **Which findings and recommendations have the program/unit addressed?**
- **Which have yet to be accomplished? Which are no longer relevant, and why?**
- **Has the program/unit undergone any major changes as a result or that would impact the findings and recommendations since the last PUR?**

In reviewing the last PUR from 2015-2016, we have found that many findings and recommendations have been overwhelmingly exceeded, and others that have remained the same but have the same need to be adjusted:

Internal Funding- As noted in the "2015-2016 PUR"- *"as the program grows, funding for faculty, full and part-time, is expected to become an issue. The program currently depends heavily on part-time faculty, particularly skills instructors. The primary teaching part-time faculty is reliable and committed to what they do for our students. However, skills instructors commonly referred to as work shop instructors or instructional assistants are critical to the program and students' success. The program gave these instructors a raise approximately 3 years ago. Paramedic skills instructors were raised from \$15 per hour to \$25 per hour. However, this is substantially lower than these practitioners make overtime at their regular jobs. Hence, the program takes a back seat, and students and faculty suffer when we are unable to have enough instructors to students during the skills portion of their training. This is also the most important aspect of the application of the students' knowledge."* The lack of competitive pay leads to the same difficulties and relevance as noted in the 2015-2016 pay scale. Instructors are still (and even more so with the current job market) able to schedule overtime and make significant amounts more than we offer. The low pay and opportunities that are elsewhere keep only those who are "committed to the program and students" around to teach. This will simply not do. To remain competitive, pay needs to be seriously addressed.

1. **Full-time faculty** - Although we have had 2 extra slots for full-time tenure track faculty added to the department over the last year, we still need two more state lines for full-time faculty, one full-time state line for a full-time clinical and field coordinator, and a state line for a lab and equipment coordinator.

2. **Clinical Field Coordinator**- As noted in the previous PUR, *"This position is critical to the success of all EMS programs. It works with our regional hospital partners primarily to maintain good relations and contractual agreements for all levels of EMS students to participate in their required clinical hospital and field time. Perkins grant funds have funded this position for several years, and that funding mechanism is at its allowable tenure for this position. The program will need to secure regular funding for this position in the future. This is a critical position for the program and must be funded."* This position is imperative at this juncture in the program, as it was in 2016. With the growth of going from 1 paramedic cohort to having 6 cohorts in the program and 6 full classes of EMT and Advanced classes, the clinical and field arrangements have become an exceptionally complicated process because of the difficulty getting contracts not only initially but in a timely fashion.

It appears that the program has addressed some of the findings and recommendations from the last performance review (PUR) from 2015-2016, but some issues still remain, particularly related to funding for faculty and staff positions. Specifically, the program has identified that internal funding for part-time skills instructors, full-time faculty, and a clinical and field coordinator. These are all areas that still need to be addressed to remain competitive and support the program's growth. The issue of low pay for skilled instructors has been acknowledged as an ongoing problem, as they can earn more in overtime at their regular jobs. Additionally, the program is still in need of more state funding for full-time tenure track faculty and a full-time clinical and field coordinator. The PUR notes that funding for the clinical and field coordinator position has been through a grant mechanism, but that it will need to be secured through regular funding in the future. Overall, it seems that the program has made progress in addressing some of the findings and recommendations from the 2015-2016 PUR, but that ongoing funding challenges remain to be addressed.

The program has made some progress in addressing the need for more full-time faculty, as mentioned in the last Performance Review (PUR) from 2015-2016, by adding an additional full-time faculty member. However, it also appears that with the recent growth of the program, the need for more full-time slots for the clinical and field coordinators has become even more critical. The previous PUR had noted the importance of this position in maintaining good relationships with regional hospital partners and arranging clinical and field experiences for students. It seems that with the increased number of students, the workload for this position has increased significantly. Therefore, it is suggested that the program needs to secure more full-time slots for the clinical/field coordinator position to effectively manage the growth of the program and ensure that students receive adequate clinical and field experiences.

2.B. Workforce Needs (AAS degrees and certificates; allied health programs only)

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Describe how your program(s) is/are meeting workforce needs, especially in the Northern Nevada region, by answering the accompanying questions. The following are potential resources for labor market data, though other sources may be referenced.

Nevada Department of Employment Training and Rehabilitation (DETR) (<https://detr.nv.gov/>)

Economic Development Authority of Western Nevada (EDAWN) (<http://edawn.org/>)

U.S. Bureau of Labor Statistics (<http://www.bls.gov/>)

- **What is the evidence for the regional need for the program (DETR and EDawn data)?**
- **What is the evidence that program curriculum meets the latest industry trends or workforce needs?**

According to the Nevada Department of Employment, Training and Rehabilitation (DETR), the demand for paramedics is projected to grow by 19.2% from 2016-2026 (<https://www.onetonline.org/link/summary/29-2041.00>). This growth rate is much higher than the average for all occupations, indicating a significant need for highly trained paramedics in the state of Nevada. Furthermore, the Economic Development Authority of Western Nevada (EDAWN) also confirms a high need for paramedics in the region with an occupation profile that states that "Paramedics are in high demand in the region, with an expected 11% job growth in the occupation through 2026" (<http://edawn.org/wp-content/uploads/2019/09/Paramedic-Occupation-Profile.pdf>).

In order to meet this growing demand, the program has had to adapt and evolve to the increasing need by increasing the number of paramedic students graduating. Traditionally, the program has only graduated one paramedic cohort per year, however, in recent years the program has grown to now graduating 5 cohorts of paramedics students annually. This demonstrates the programs willingness to adapt to the changing needs of the workforce.

To ensure that our program curriculum meets the latest industry trends or workforce needs, we align our educational standards with National Highway Traffic Safety Administration (NHTSA) and the Commission on Accreditation of Allied Health Education Programs (CAAHEP). These are the two main governing bodies for paramedic education, and by adhering to their standards we can ensure that our program is up-to-date with the latest industry trends and advancements in patient care. Additionally, the program also conducts regular reviews and updates of the curriculum to ensure that it stays current with the latest technology and changes in patient care guidelines.

2.C. Accessibility and Cost of Instructional Materials

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- **What are faculty in the department/unit currently doing or planning to help ensure that instructional materials are accessible to students with disabilities? Examples include attending Professional Development accessibility sessions, running accessibility checkers on materials, and completing the “Creating Accessible Content” workshop.**

- **What are faculty in the department/unit currently doing or planning to offer affordable instructional materials to students? Examples would include internal development of educational materials or utilization of open educational resources (OER).**

Currently, full-time faculty members are encouraged to attend professional development courses at the beginning of the semester and then review their emails for any updated information. We also work closely with the Disability Resource Center, specifically Olga Messina to make sure that students have what they need. Our instructors discuss with students the resources and point them out in their syllabi.

Due to our profession and having state and accreditation requirements, we must utilize outside resources and do not have access to OERs as this would be copyright infringement. We try and work with the publisher and the bookstore to provide affordable books as best that we can. Our program also utilizes specialized resources to keep track of required information per the state and accreditation.

2.D. Catalog Review

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- **Is the program information in the catalog correct, including descriptions, PLOs, course descriptions, and course offerings, accurate?**
- **Does the program's suggested course sequence in the catalog allow for completion of degrees within 2 years and/or certificates within 2 semesters for full-time students?**
- **Are there any courses that the department has not offered in 4 or more years? Please indicate whether you plan to update and offer, or deactivate the(se) course(s) in the next academic year.**

The current course catalog is correct for this catalog year, however, the PLOs and course offerings will be changing in the 2023-2024 catalog and have been submitted and approved by the CRC this last Fall. There are also changes in certain course descriptions and names that will be effective for the 2023-2024 catalog year. We have embedded math and science into the paramedic program which has reduced the number of credits required for the program. We have

also allowed the certificate and associate's degree to be non-prescriptive in general education requirements.

The current and new degree allows for the students to complete the degree within two years. The current certificate requires the students to complete the program in four semesters because of the general education requirements, but the new catalog will allow them to complete it in three semesters due to being able to embed math and human relations.

We offer and require all of the courses in our catalog. We had to reactivate an EMS 113 course to teach it in high schools to promote diversity and increased interest in our program. We have updated SLOs, course descriptions, and course names to better reflect what we are teaching in the EMS program.

3.B. Evidence of Program Learning Outcomes Assessment

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Summarize the most significant program assessment results since your last PUR. These will come from past CARS, APRs, and Action Plans and assessment data within eLumen. Please discuss course assessment findings as they apply to the program and program learning outcomes.

Keeping in mind that student learning outcomes and the program learning outcomes have been updated since the Fall of 2021, there has not been enough information to determine, statistically, what changes have occurred within the program. However, as seeing the students and passing, we have been decreasing the number of repeat students (those who do not meet expectations) in the following cohort. Historically, there have been one to two repeat students in cohorts due to the inability to meet expectations in the program. We are now to the point where we are catching students earlier in the semester when they are not meeting the outcomes of the course.

Due to the last program director completing the PUR, there has not been any specific information given on how the information was assessed and obtained. According to accreditation, we are required to submit self-study reports annually. We keep track of attrition and retention rates. There was a 6% attrition rate in 2019 and it increased to 24% in 2020, and 33% in 2021. Our current cohort is at 6%. We have established clear expectations in this current cohort that started in August of 2022. The previous attrition rates were contributed to students who have repeated, the job market change, and COVID deterring students who did not want to get their COVID vaccines. In our hybrid cohorts, attrition rates have steadily decreased as students have been able to understand their expectations and instructors are more clear on how to assess students' knowledge. Students in the traditional cohorts have been completing their programs and then passing their National Registry exam. In 2019, 100% of the completed students passed their national test for the first time. In 2020, there were 85% passed on their first try. In 2021, of all that have taken the national test, 100% have passed on their first attempt. We contribute the slight decline in 2020 to be because of the change from online back to in-person, and there was a lot of adjustment between the two modalities of learning.

Describe how department faculty implemented plans to improve students' achievement of program learning outcomes. What changes did you make to the program based on assessment results and improvement plans?

This semester, there has been an active push by the Director and Coordinator, to make sure that all full-time faculty understand how to use student learning outcomes in their courses including on exams and quizzes. There will be training on how to assess the student's performance and how to document that in eLumen. This will give the program the ability to utilize tangible evidence of student performance. We will continue to monitor the national tests for first-time pass rates, as this tells our program that students have gained the required knowledge to complete the national outcomes to receive certification as a paramedic.

3.C. General Education Outcomes Assessment (if applicable)

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- **Describe which general education learning outcomes (GELOs) you assessed in your department/unit and summarize the most significant assessment results.**
- **Describe how department faculty implemented plans to improve students' achievement of GE learning outcomes. What changes did you make to general education based on assessment results and improvement plans? Do any CLOs need to be changed to align with GELOs?**

Currently we do not have any GELOS to assess in the EMS Program.

3A. Curriculum Mapping

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PSLO-

AAS Paramedic Emergency Medicine		2022-2023	
Standard	Competency	Self-Study	Assessment
1.1.1.1	1.1.1.1.1		
1.1.1.1	1.1.1.1.2		
1.1.1.1	1.1.1.1.3		
1.1.1.1	1.1.1.1.4		
1.1.1.1	1.1.1.1.5		
1.1.1.1	1.1.1.1.6		
1.1.1.1	1.1.1.1.7		
1.1.1.1	1.1.1.1.8		
1.1.1.1	1.1.1.1.9		
1.1.1.1	1.1.1.1.10		
1.1.1.1	1.1.1.1.11		
1.1.1.1	1.1.1.1.12		
1.1.1.1	1.1.1.1.13		
1.1.1.1	1.1.1.1.14		
1.1.1.1	1.1.1.1.15		
1.1.1.1	1.1.1.1.16		
1.1.1.1	1.1.1.1.17		
1.1.1.1	1.1.1.1.18		
1.1.1.1	1.1.1.1.19		
1.1.1.1	1.1.1.1.20		
1.1.1.1	1.1.1.1.21		
1.1.1.1	1.1.1.1.22		
1.1.1.1	1.1.1.1.23		
1.1.1.1	1.1.1.1.24		
1.1.1.1	1.1.1.1.25		
1.1.1.1	1.1.1.1.26		
1.1.1.1	1.1.1.1.27		
1.1.1.1	1.1.1.1.28		
1.1.1.1	1.1.1.1.29		
1.1.1.1	1.1.1.1.30		
1.1.1.1	1.1.1.1.31		
1.1.1.1	1.1.1.1.32		
1.1.1.1	1.1.1.1.33		
1.1.1.1	1.1.1.1.34		
1.1.1.1	1.1.1.1.35		
1.1.1.1	1.1.1.1.36		
1.1.1.1	1.1.1.1.37		
1.1.1.1	1.1.1.1.38		
1.1.1.1	1.1.1.1.39		
1.1.1.1	1.1.1.1.40		
1.1.1.1	1.1.1.1.41		
1.1.1.1	1.1.1.1.42		
1.1.1.1	1.1.1.1.43		
1.1.1.1	1.1.1.1.44		
1.1.1.1	1.1.1.1.45		
1.1.1.1	1.1.1.1.46		
1.1.1.1	1.1.1.1.47		
1.1.1.1	1.1.1.1.48		
1.1.1.1	1.1.1.1.49		
1.1.1.1	1.1.1.1.50		
1.1.1.1	1.1.1.1.51		
1.1.1.1	1.1.1.1.52		
1.1.1.1	1.1.1.1.53		
1.1.1.1	1.1.1.1.54		
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1.1.1.1	1.1.1.1.61		
1.1.1.1	1.1.1.1.62		
1.1.1.1	1.1.1.1.63		
1.1.1.1	1.1.1.1.64		
1.1.1.1	1.1.1.1.65		
1.1.1.1	1.1.1.1.66		
1.1.1.1	1.1.1.1.67		
1.1.1.1	1.1.1.1.68		
1.1.1.1	1.1.1.1.69		
1.1.1.1	1.1.1.1.70		
1.1.1.1	1.1.1.1.71		
1.1.1.1	1.1.1.1.72		
1.1.1.1	1.1.1.1.73		
1.1.1.1	1.1.1.1.74		
1.1.1.1	1.1.1.1.75		
1.1.1.1	1.1.1.1.76		
1.1.1.1	1.1.1.1.77		
1.1.1.1	1.1.1.1.78		
1.1.1.1	1.1.1.1.79		
1.1.1.1	1.1.1.1.80		
1.1.1.1	1.1.1.1.81		
1.1.1.1	1.1.1.1.82		
1.1.1.1	1.1.1.1.83		
1.1.1.1	1.1.1.1.84		
1.1.1.1	1.1.1.1.85		
1.1.1.1	1.1.1.1.86		
1.1.1.1	1.1.1.1.87		
1.1.1.1	1.1.1.1.88		
1.1.1.1	1.1.1.1.89		
1.1.1.1	1.1.1.1.90		
1.1.1.1	1.1.1.1.91		
1.1.1.1	1.1.1.1.92		
1.1.1.1	1.1.1.1.93		
1.1.1.1	1.1.1.1.94		
1.1.1.1	1.1.1.1.95		
1.1.1.1	1.1.1.1.96		
1.1.1.1	1.1.1.1.97		
1.1.1.1	1.1.1.1.98		
1.1.1.1	1.1.1.1.99		
1.1.1.1	1.1.1.1.100		

EMT Advanced Skills Certificate				
Map Origin: Emergency Medical Technician Advanced Skills Certificate				
Map Target: Emergency Medical Technician Advanced Skills Certificate				
Emergency Medical Technician Advanced Skills Certificate				
CSLOs	PSLO1: Demonstrate the ability to understand the roles and responsibilities of an AEMT within an EMS system methods to stay healthy and to prevent job-related injuries in the field, basic legal and ethical issues as well as learn how to effectively communicate with patients of all ages, cultures, gender, race, and disabilities in the prehospital environment.	PSLO2: Demonstrate how to provide basic and selected advanced assessment, development, and treatment to patients of all ages utilizing fundamental knowledge of anatomy, physiology, and pathophysiology of injuries and illnesses while providing selected advanced emergent care of airway, breathing, and circulation.	PSLO 3: Demonstrate knowledge of operational roles and responsibilities to ensure safe patient, public, and personal safety.	PSLO4: Demonstrate the ability to effectively document the essential elements of a patient assessment and follow an accepted format for dissemination of the patient information in verbal form, either in person or on the radio.
EMS115				
1. Describe the role and responsibilities of AEMTs as professionals in emergency medical services.				X (R)
2. Demonstrate the steps of conducting patient assessments on patients who are sick or injured in all age levels.	X (PD)			
3. Recognize the signs and symptoms, determine the treatment plan, and apply those interventions for COPD, CHF, diabetes, chest pain, aortic aneurysms, cardiac arrest, cardiogenic shock, seizures, stroke, acute abdomen, chronic inflammatory abdominal conditions, gynecological conditions, sickle cell disease, allergic reactions, overdoses, psychiatric emergencies within 15 minutes.	X (PD)	X (PD)		
4. Describe the principles and practices for organizing and managing an accident scene and when an ambulance is required.	X (PD)			
5. Recognize signs and symptoms of the head, back, chest, abdominal, genitourinary, environmental, and extremity injuries and manage these injuries effectively within 10 minutes.	X (PD)	X (PD)		
6. Identify the differences between geriatric, adult, pediatric, and special population patients, and manage those patients using appropriate assessment techniques.	X (PD)	X (PD)		
7. Describe and demonstrate how to manage airway and breathing effectively using basic and advanced level techniques.	X (PD)			
8. Describe all the medications in the AEMT scope of practice and demonstrate how to give these medications in scenarios.	X (PD)			
9. Demonstrate how to perform intravenous therapy and evaluate how to effectively manage the perfusion of all patient populations.	X (PD)			
10. demonstrate how to perform a scene size-up, an initial impression, a primary assessment, a focused or detailed assessment, and reassessment of all patient populations.	X (PD)			
11. Describe the process of birth and demonstrate how to assist a pregnant female in delivering a neonate and be able to assess and treat the neonate when they are healthy or in distress.	X (PD)			
12. Describe how to manage a mass casualty incident.	X (PD)			
13. Describe the operation of an ambulance, using helicopter EMS, and understanding when to activate specialized resources for HAZMAT, extrication, and rescue scenarios.	X (PD)			
14. Describe what acts of terrorism are, recognize signs and symptoms and manage diseases/injuries related to weapons of mass destruction, understand syndromic surveillance and reporting procedures for acts of terrorism.	X (PD)			

EMT Skills Certificate			
Map Origin: Emergency Medical Technician Skills Certificate			
Map Target: Emergency Medical Technician Skills Certificate			
	Emergency Medical Technician Skills Certificate		
	PSLO1: Demonstrate the ability to understand the roles and responsibilities within an EMS system, methods to stay healthy and to prevent job related injuries in the field.	PSLO2: Demonstrate the ability to gain knowledge of basic legal issues that impact decisions made in the field and the importance of ethics when making these decisions.	PSLO3: Demonstrate the ability to effectively communicate psychologically and sociologically with all ages and cultures of patients in the prehospital environment.
CSLOs			
EMS108			
1. Describe the role and responsibilities of EMTs as professionals in emergency medical services.	X (IP)		
2. Demonstrate the steps of conducting patient assessments by effective communication with patients who are sick or injured in different age groups and cultures.			X (IP)
3. Recognize the signs and symptoms, determine a treatment plan, and apply those interventions for COPD, CHF, diabetes, chest pain, aortic aneurysms, cardiac arrest, cardiogenic shock, seizures, stroke, acute abdomen, chronic inflammatory abdominal conditions, gynecological conditions, sickle cell disease, allergic reactions, overdoses, psychiatric emergencies within 15 minutes using critical thinking skills.		X (IP)	X (IP)
4. Describe the principles and practices for organizing and managing an accident scene and when an ambulance is required.		X (IP)	X (IP)
5. Recognize signs and symptoms of head, back, chest, abdominal, genitourinary, environmental, and extremity injuries and manage these injuries effectively within 10 minutes.			
6. Identify the differences between geriatric, adult, pediatric, and special population patients, and manage those patients using appropriate assessment techniques.			
7. Describe and demonstrate how to manage airway and breathing effectively using basic techniques.			
8. Describe all the medications in the EMT scope of practice and demonstrate how to give these medications in scenarios.			
9. Demonstrate how to perform a scene size up, an initial impression, a primary assessment, a focused or detailed assessment, and reassessment of all patient populations.			
10. Describe the process of birth and demonstrate how to assist a pregnant female in delivering a neonate and be able to assess and treat the neonate when they are healthy or in distress.			
11. Describe how to manage a mass casualty incident.	X (IP)		
12. Describe the operation of an ambulance, using helicopter EMS, and understanding when to activate specialized resources for HAZMAT, extrication, and rescue scenarios.	X (IP)		
13. Describe what acts of terrorism are, recognize signs and symptoms and manage diseases/injuries related to weapons of mass destruction, understand syndromic surveillance and reporting procedures for acts of terrorism.	X (IP)		

Please analyze the following. Remember to paste a copy of your curriculum map.

- **PLOs: Do all PLOs reflect what you want students to demonstrate once they complete the program? Are there any PLOs that need to be updated?**
- **Potential gaps and redundancies: Are there any PLOs that are not addressed in the curriculum? Are there any unwanted redundancies of PLOs in the curriculum?**
- **CLO alignment: Is there a need to modify any course learning outcomes so that courses better support PLOs?**
- **Course sequencing: Is there a need to modify the course sequencing so that learning is scaffolded throughout the program? In other words, courses taken earlier in the program sequence should introduce PLOs, and courses taken later in the sequence should reinforce PLOs by offering students additional opportunities to practice.**
- **Curriculum and learning opportunities: Is it necessary to introduce new learning opportunities to reinforce learning in specific courses? These could be modules or assignments in courses, additional courses, and/or co-curricular opportunities that would be required of all students in the program.**
- **Do you need to make any changes to the curriculum map after this analysis?**
- **Other?**

We recently updated the PLOs to better map our courses and general education requirements. This also better represents what our students are learning and achieving when they are completing our certificates and degrees. This was to also be slightly more specific to what they need to have when they leave our program, reduce redundancies, and incorporate our EMS courses, otherwise, there were courses that didn't match up with our PLOs. Since our program is required to match the National EMS education standards, CoAEMSP/CAAHEP accreditation, and state of Nevada EMS NRS statutes, we are required to have students complete certain courses and those objectives are tailored to those courses and may not directly align with every PLO. We have attempted to modify as much as we could and since our paramedic program is 200-level courses, there is no scaffolding needed for the PLO.

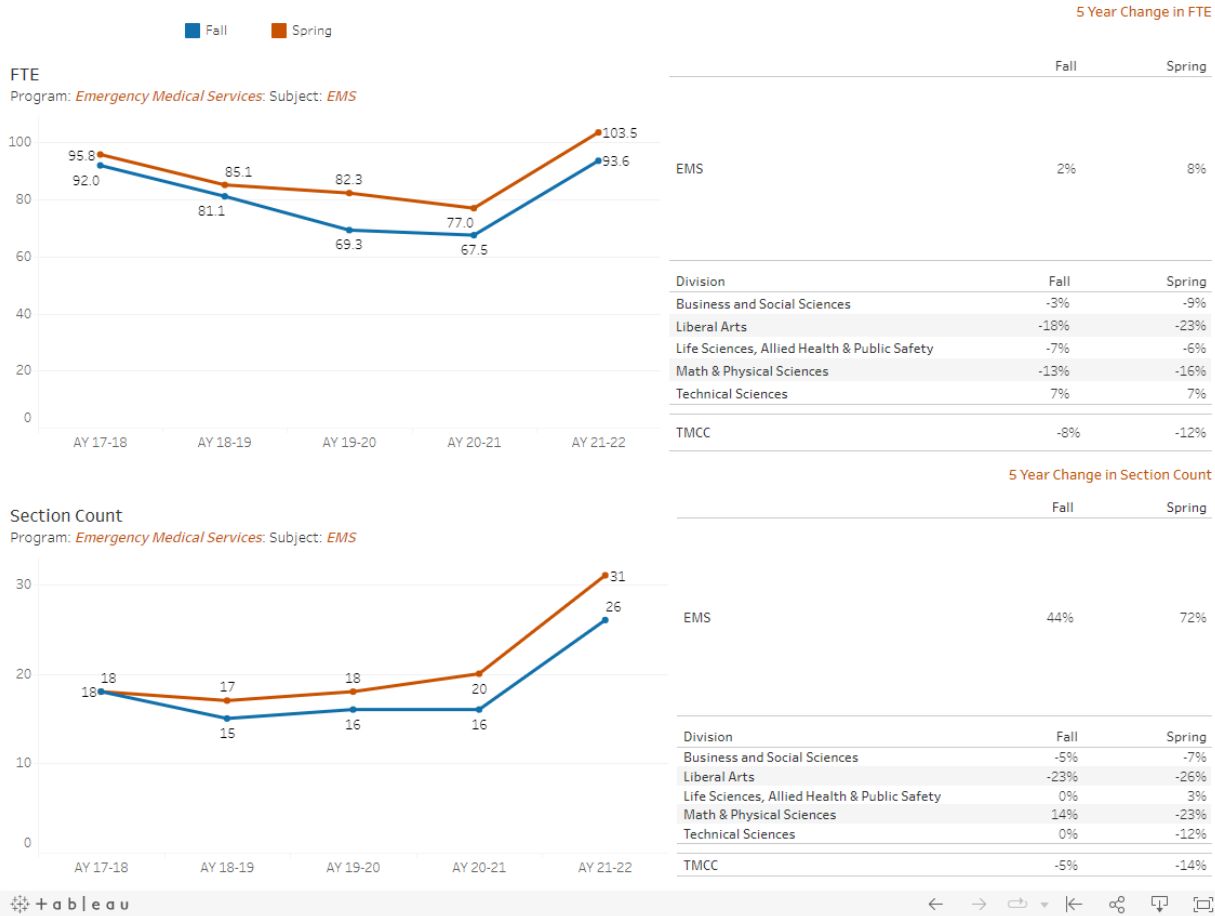
In the paramedic program, there are learning opportunities that we can add including adding certain clinical rotations in psychiatric, job experience, and homeless camps to show diverse populations. Examples include more mental health education (which may require an additional course in the future) and interface with different agencies.

There are no further changes required, however, we will continually work to evolve learning to allow our students to feel better prepared in the field, as necessary.

4.A. FTE and Section Count

EMS/Paramedic

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Please analyze the trends in FTE and course section counts. Discuss what these trends suggest about the viability of program enrollment.

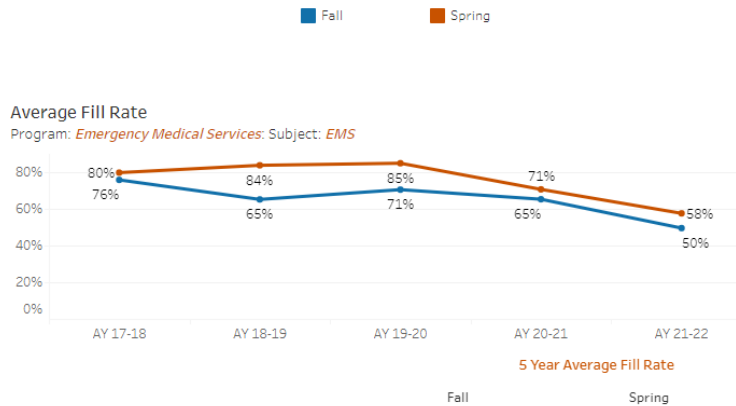
Overall, it appears that the FTE count has trended down until FY 20-21. From this point, the trend sharply increased to above pre-pandemic numbers. This may be because of increased funding for those who want to attend college, the appeal of coming into the healthcare workforce, and that we provided classes in person. The section count has been steadily increasing within the last five years. Last year there was a sharp incline in the number of students. This may be similar to the reasons given above. With both trends increasing, the viability of the EMS program is good. The job market also dictates that there is a need for EMS providers and fire departments are continuously hiring due to retirements of the baby boomers. This has created a response to

needing EMS providers at a remarkable pace.

4.B. Course Fill Rates and Unsuccessful Enrollment Attempts

EMS/Paramedic

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5 Yr Avg Course Level Fill Rate

Program: *Emergency Medical Services*; Subject: *EMS*

	Fall	Spring
EMS 101	51%	60%
EMS 108	97%	95%
EMS 113	54%	
EMS 115	68%	84%
EMS 198	57%	82%
EMS 200	66%	41%
EMS 201	64%	33%
EMS 202	23%	69%
EMS 203	71%	50%
EMS 205	61%	28%
EMS 206	61%	28%
EMS 207	63%	63%
EMS 209	47%	
EMS 210	62%	
EMS 211	23%	71%
EMS 212	23%	71%
EMS 214	23%	71%
EMS 215	23%	73%
EMS 216		71%
EMS 217		71%

EMS 64% 73%

5 Yr Average Unsuccessful Enrollment Attempts

An enrollment attempt is considered unsuccessful if the student tried to enroll in one or more sections of a course but could not because the section was full, and who ultimately did not take the course that term. If they eventually enrolled in another section, they are not counted as unsuccessful. And a student is only counted once per course no matter how many section-level attempts they had.

Course Level

Program: *Emergency Medical Services*

EMS 101	1.00
EMS 108	4.80
EMS 115	2.00

Division & College Wide

Business and Social Sciences	4.41
Liberal Arts	8.57
Life Sciences, Allied Health & Public Safety	7.80
Math & Physical Sciences	21.56
Technical Sciences	3.14
TMCC	7.73

Please analyze the trends in course fill rates and unsuccessful enrollment attempts. Discuss what these trends suggest about meeting student demand.

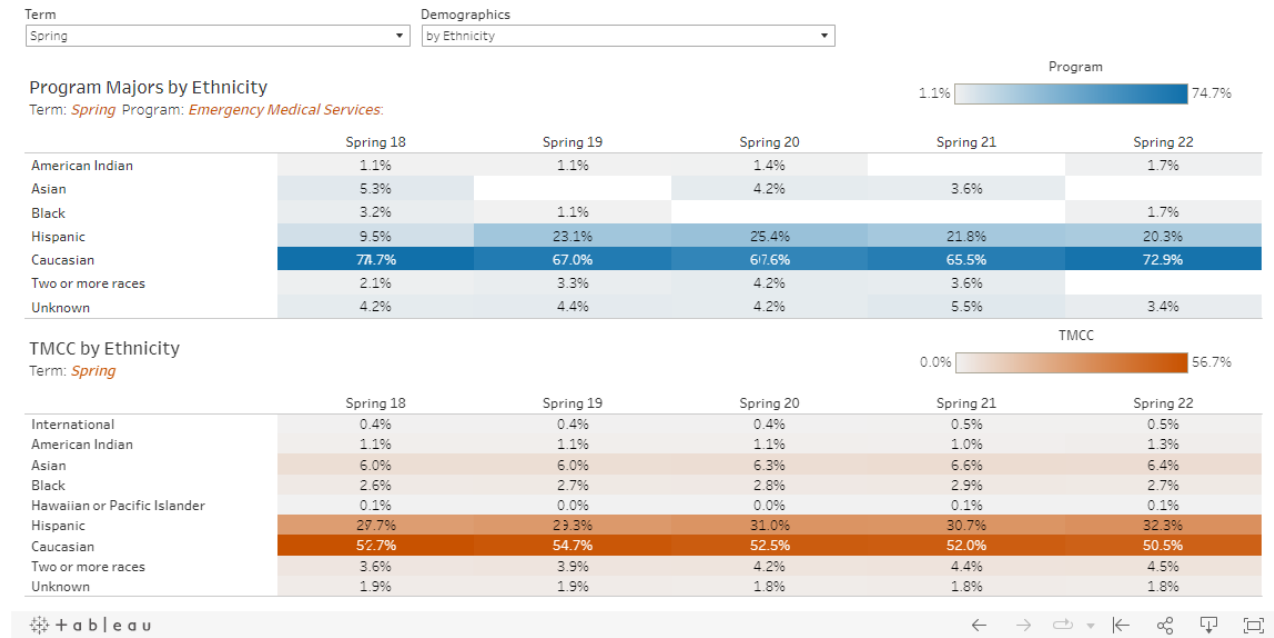
The overall average fill rate has decreased over the five-year period. The numbers have been from the courses that are EMS 200 and above that have affected this number when compared to EMS 108 and EMS 115. These courses have been relatively the same. Also, there are some discrepancies as some courses are only generally offered in the fall vs the spring. We have the appropriate amount of courses needed for the demand for each semester. In fact, due to the declining need for EMS 115, we have cut a course so that courses can fill to capacity.

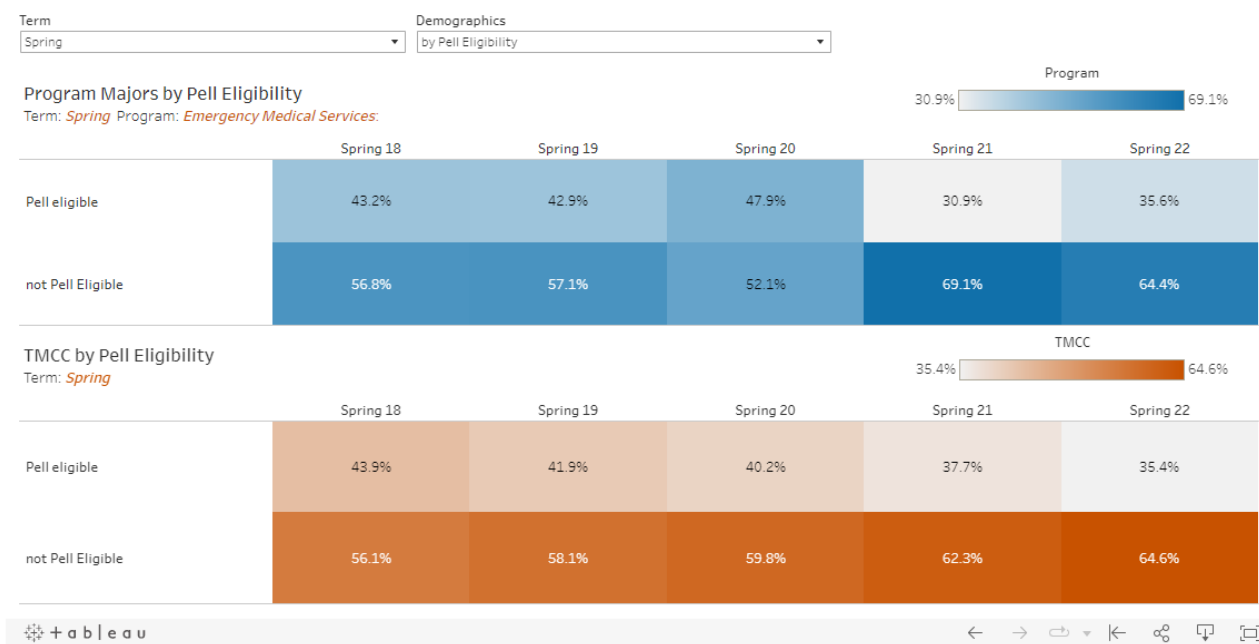
The unsuccessful enrollment attempts are low, but we are still working on improving the process to enroll in the program. We require prerequisites of CPR, immunizations, drug testing, and a background check which requires us to give permission to students to enroll. We have the steps listed online and its generally due to those who do not know where to start that attempt to enroll and cannot. There are many who enroll and often will not want to complete the entry requirements.

4.C. Student Demographics: Ethnicity, Gender, Credit Load, Student Status, and Age Range

EMS/Paramedic

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Briefly describe the typical student profile in terms of ethnicity, gender, credit load, student status, and age range in your program/unit, including how they compare to demographics of the college. Please note any potentially underserved student populations and discuss ideas for closing potential equity gaps. An equity gap is where there is a significant and persistent disparity in access or achievement between different groups of students.

Does the program’s teaching staff look like its student population? If not, discuss ideas for how faculty can use more inclusive teaching methods.

The typical students in our program are Caucasian and male. This is similar if not higher than the average of what TMCC has on the whole. This is current with national trends in this particular job market in EMS. Our credit loads are generally higher as the courses themselves are more credits (for example, EMS 108 is 6 credits). In the paramedic program, students take approximately 28-32 credits a semester, to complete in two semesters. The age range is also consistent with the college. We are currently working with the diversity office and the jumpstart office to increase diversity in the Hispanic population as there is a need for providers in the field who speak Spanish. We will be marketing in more high schools and hopefully bringing courses into the CTE programs. We are also working with the scholarships and grants office to provide funding for students who want to pursue EMS so they have the ability to pay for their books and their uniforms with tuition.

The program director is half Latino, and is active in the latin-x community, and the rest of the staff is mostly female and Caucasian. We provide guest lectures for those to come in that look more like Hispanic students, but due to the lack of diversity in EMS as a whole, this is a difficult process. EMS books, from the publisher we use, have made a better effort to make sure there is

no bias in pictures and that all ethnicities are represented.

5.A. Course Completion Rates

EMS/Paramedic

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Please describe any substantial trends or shifts that you see in the overall course completion rate and successful completion (C or better). What might these trends or shifts mean? Next, disaggregate the data by student demographics. Discuss any potential equity gaps and ideas for closing these gaps. An educational equity gap is where there is a significant and persistent disparity in educational attainment between different groups of students.

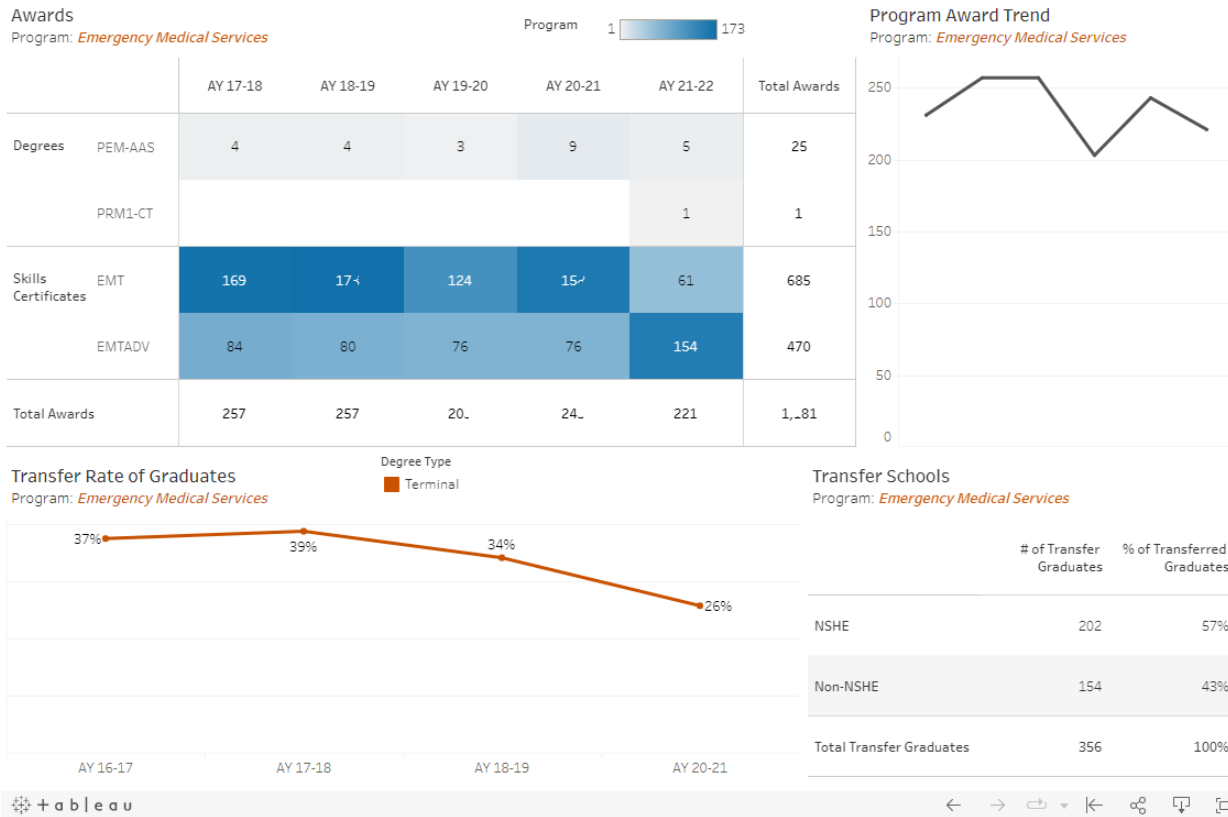
Overall, there are no substantial changes in the completion rate and the successful completion. There was a slight decline in the rates between 20-21 and 21-22, however, the five-year average is 92% for completion rates and 82% for successful completion. This is above the average for the college. This is because our program gains national certification and placement directly into a career. Also, our program has a minimum 80% passing standard that students are required to meet.

There is a potential for gaps between Caucasian and Hispanic completion and success rates. This may be due to ESL and misperception of the qualifications and time commitment to the program. Most ethnic groups have a lower completion rate and successful completion when compared to Caucasian students. At this time, making sure that assignments are easy to understand and that instructors are making sure to communicate and work with students by meeting with them more during the semester and providing resources to help will be important. There is also a small but not substantial gap between first-generation students and those who are pell grant eligible. Again, making sure that students understand the resources available to them through the college may help. Our program is located at the Health Sciences Campus which separates students from commonly seen departments at the main campus and so bringing the resources to talk with the students will be helpful.

5.B. Graduation and Transfer

EMS/Paramedic

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Please discuss any trends or shifts that you see in the number of graduates and graduates who have transferred in the past 5 years.

Next, disaggregate the data by student demographics, and discuss any potential equity gaps: Which student populations are earning degrees or certificates compared to the demographic makeup of the program? Do graduates resemble the student demographics of the program? If not, discuss ideas to mitigate potential equity gaps.

There has been a slight increase in the AAS-PEM degree and only one certificate given to paramedic students. We have trained one of our full-time faculty members to be a faculty advisor, which will increase the number of students who graduate with their degrees by contacting those who have left the program in previous cohorts and working with the current cohort of students to see how we can get them to completion. This was only added in the Spring of 2022 which means it will take some time to capture students into the degrees and complete them. The skills certificate programs are popular and are completed within one semester to allow students to enter the job market immediately after receiving their certification.

After looking further into the demographics of the students, it appears that males obtain their degrees more than females, Caucasians receive their degrees and certificates more than other ethnic groups, and those who are non-first generational and non-pell grant eligible receive more than the other groups. Graduates of our program do mimic our student demographics of the

program. It does seem that students of other ethnic groups, first-generational, and pell eligible are in the program, but as there are still a lower amount of students within these groups overall, the statistics reflect proportionally to the graduation of these students. Our program, again, is special as we provide certifications into the workforce directly and as a result, students do not believe they need to continue their education with general education courses.

Our degrees and certificates do not transfer within NSHE as other programs and institutions do not use the same degree course sequence we use. Universities do not offer degrees in EMS.

6.A. Faculty Achievement

EMS/Paramedic

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Describe the program/unit's full-time (FT) faculty credentials, experience, and highlights of significant activities and/or contributions to TMCC. Please use the format below for each FT faculty member.

- **Faculty Name, FTE**
- **Degree(s) or professional certification(s) awarded, discipline, awarding institution**
- **Substantial accomplishments or contributions to the community, especially those related to education or your discipline (e.g. mentoring, community service) (Please limit to 3)**
- **Number of years teaching at TMCC**
- **Total number of years in academia**
- **Primary courses taught**
- **Significant activities or contributions made to TMCC (Please limit to 3)**

Jeff Hirschmann

Degree(s) or professional certification(s) awarded, discipline, awarding institution- Bachelors Degree from San Diego State University; Paramedic certification from University of California Los Angeles; Nevada Paramedic; ACLS; PALS; ITLS; BLS

Substantial accomplishments or contributions to the community, especially those related to education or your discipline (e.g. mentoring, community service) (Please limit to 3)

o Participated in Career Fair, along with my students, at Hug High School

o Met with many students on various career options within Public Safety

o Starting up EMS Club to showcase EMS department involvement within the Truckee Meadows. EMS Club will be focusing on a new program to go into grade schools to do "Reading with Heroes." Students from various Public Safety disciplines will engage in community service at local schools to promote their discipline and read books to grade schoolers to illustrate the excitement of reading and encourage the importance of education.

Number of years teaching at TMCC- about 5 years part-time; 6 months full-time

Total number of years in academia- 1

Primary courses taught- EMS 108 and FT 106

Significant activities or contributions made to TMCC (Please limit to 3)

o Took on a last minute additional assignment as the Co-Commander of the fire academy to ensure the class would not be cancelled, so students wouldn't miss out on the opportunity to fulfill their class.

o Start up of EMS Club

o Wrote syllabus for a new proposed course that was approved in Public Safety Dispatching.

Cassandra Fox

AAS Paramedicine from GBC

Paramedic Mentor. Multiple awards from Banner EMS for life saving events.

Three years at TMCC

6 years at GBC, WNC and TMCC

EMS Classes

Assisted in the creation of Hybrid Paramedic Program. Career Champion

Faculty Name, FTE : Lauren Miller

Degree(s) or professional certification(s) awarded, discipline, awarding institution : BS in Exercise Science from University of Delaware

Substantial accomplishments or contributions to the community, especially those related to education or your discipline (e.g. mentoring, community service) : Built hybrid paramedic program, built relationships with local fire departments, mentoring/trauma-informed coaching

Number of years teaching at TMCC : 3 years

Total number of years in academia : 3 years

Primary courses taught : EMS200, EMS201, EMS209, EMS214, EMS216, EMS212, EMS203

Significant activities or contributions made to TMCC (Please limit to 3) : Hybrid Paramedic Program, Trauma-informed coaching program in development

Michael Schulz

Northern Nevada Medical Center January 2018 – Jan 2019

Paramedic – EMT

Truckee Meadows Community College, Reno, NV

January 2014 – Present

Program Director (August 2020 – Present)

- **Responsible for administering, organizing, and supervising all educational programs to ensure course compliance**
- **Lead, mentor, and train faculty, conducting continuous quality reviews and improvement of educational programs**
- **Successfully advanced new first responder course program, offering course to underserved high schools in Reno**
- **Program supports minority and female students to become successful in an emergency services related program**
- **Developed hybrid program for paramedics including two new full-time grant-funded instructors, hybrid paramedic program for students who are unable to leave work to attend full-time paramedic certifications programs**
- **Established online video recording for remote alternative learning to accommodate Covid restrictions on learning**
- **Procured learning trailer through grants to assist northern Nevada communities with continuing education**
- **Appointed staff to oversee continuing education accreditation coursework and program to ensure skills alignment**
- **Liaised and developed key relationships with local stakeholders, fire agencies, and private ambulance companies**

- Envisioned and established paramedic bridge program, to increase EMS department enrollment and retention
 - Increased program applications from 8 applications for 30 spots to more 50 plus applications this past semester
 - Defined program pathway for EMS fire and safety professionals to continue to Bachelor emergency management
 - Assessed and ensured programs fulfill student learning outcomes, planning and implementing program schedules
 - Monitored and oversaw long range plans while managing program budget, engaging with vendors in procurement
 - Directed faculty assignments to align student needs, program outcomes, and identified program requirements
 - Evaluated curriculum and programs for compliance with collective bargaining agreements and accreditation
 - Maintained and updated curriculum design and content to catalog and have web content updated to reflect goals
 - Engaged college administration, faculty, students, and affiliates to support internships to support student training
- Full Time Faculty, Instructor (January 2014 – Present)

- Responsible for instructing EMT Paramedic students in clear lectures, practical applications, and clinical instruction
 - Participated in curriculum development and special projects, while supporting college programs and committees
 - Developed recruitment programs and oversaw student programs and clubs to support student engagement
 - Created and validated training tools to support student training and ensure practical hands-on effectiveness
 - Oversaw course schedules, ordered supplies and equipment, and consistently trained new instructional staff
 - Coordinated course development assignments in collaboration with senior internal and external personnel
 - Planned, scheduled, and aligned resources and personnel to ensure programs are defined, taught, and successful
- Riverside Community College, Moreno Valley, CA June 2004 – December 2013
- Lead – Core Faculty, Instructor (June 2005 – December 2013)

- Instructed EMT Paramedic students through detailed lectures, practical application, and clinical instruction
- Participated in curriculum development and special projects to maintain consistent and relevant practices

Experience – Riverside Community College – Continued...
 Community Education Coordinator (June 2004 – December 2013)

- Coordinated and delegated daily classes and assignments on correctly performing CPR, ACLS, PALS, and PHTLS
- Planned, coordinated, administered, and instructed 4, 16-hour classes from Campus and throughout community
- Tested written and practical knowledge to ensure students are consistently taught through hands-on participation
- Trained staff to maintain consistent instruction for multiple program priorities and to

ensure student engagement

**Idyllwild Fire Protection District, Idyllwild, CA
Paramedic**

January 2004 – December 2013

- Cared for patients within scope of practice in collaboration with Firefighters for emergent situations, as required

**American Medical Response, Rancho Cucamonga, CA August 2001 – June 2004
Paramedic – EMT**

- Responsible for treating patients within scope of practice to preserve life, safety, and operations as required

Education

University of Nevada, Reno, NV Graduation Spring 2021

Master of Science – Higher Education Administration GPA: 4.0

Azusa Pacific University, Azusa, CA 2010

Bachelor of Science – Organizational Leadership

Riverside Community College, Moreno Valley, CA 2006

Associate of Science – Emergency Medical Services (EMS)

Certifications and Training

Certified International Trauma Life Support Instructor – ITLS Current

Certified Advanced Cardiac Life Support Instructor – ACLS Current

Certified Pediatric Advanced Life Support Instructor – PALS Current

National Association of EMS Educators Instructor – NAEMSE Instructor 1 Current

Certified Nevada State Instructor Current

Certified Nevada State Licensed Paramedic Current

Active Shooter Training Seminar Current

Sexual Harassment Training Seminar Current

Riverside Community College, Moreno Valley, CA 2000

Certificate – Emergency Medical Technician (EMT) Basic

Associations and Community Involvement

EMS Club Current

Advisor

American Heart Association Instructor Club Current

National Association of EMS Educators Current

Pyramid Lake Fire Protection Service Current

Volunteer Paramedic

References

References Will Be Provided Upon Request

6.B. FT/PT Faculty and Student Credit Hours Taught

EMS/Paramedic

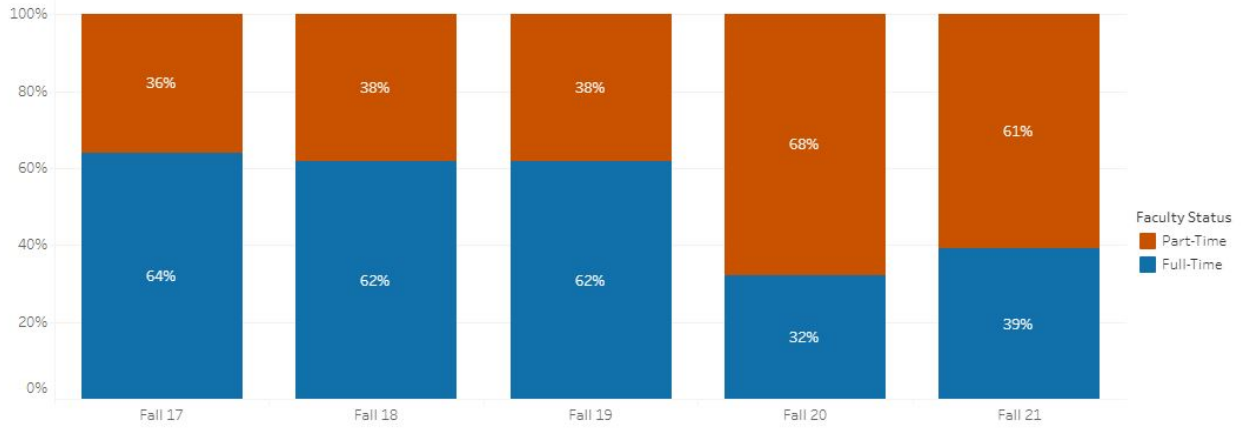
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Faculty Workload

Program: Term:

Student Credit Hours

Program: *Emergency Medical Services*



The above section shows the percent of student credit hours that were taught by Full-Time vs Part-Time faculty within your program's subject area. These student credit hours are not necessarily enrollments of your declared majors, they are enrollments by all students taking your courses. Student credit hours are defined as the sum of (enrolled students x units).

Headcount & FTE

Program: *Emergency Medical Services*

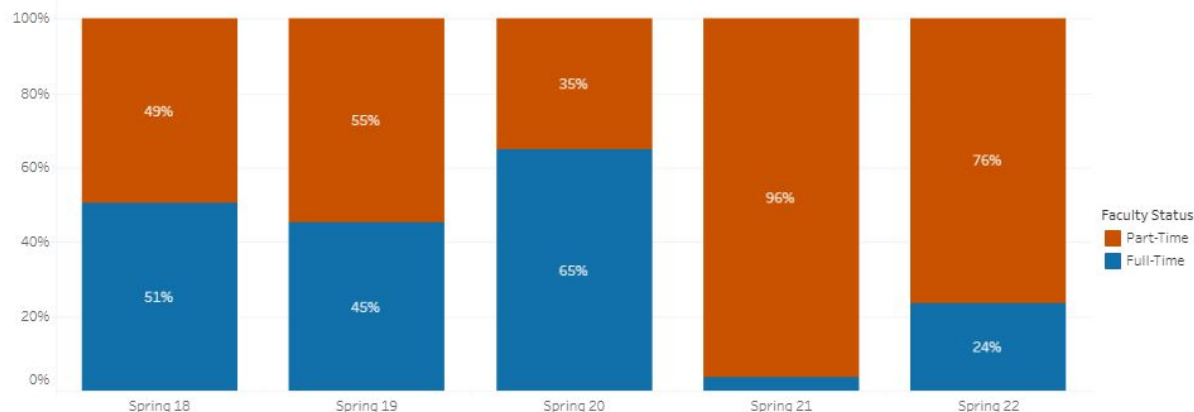
	Full-Time		Part-Time	
	Headcount	FTE	Headcount	FTE
Fall 17	2	2.8	5	1.4
Fall 18	2	2.7	3	1.3
Fall 19	2	2.4	3	1.5
Fall 20	1	1.5	5	2.4
Fall 21	2	2.5	8	4.2

Faculty Workload

Program Term

Student Credit Hours

Program: *Emergency Medical Services*



The above section shows the percent of student credit hours that were taught by Full-Time vs Part-Time faculty within your program's subject area. These student credit hours are not necessarily enrollments of your declared majors, they are enrollments by all students taking your courses. Student credit hours are defined as the sum of (enrolled students x units).

Headcount & FTE

Program: *Emergency Medical Services*

	Full-Time		Part-Time	
	Headcount	FTE	Headcount	FTE
Spring 18	2	2.7	5	1.9
Spring 19	2	2.8	4	1.8
Spring 20	2	3.3	5	1.3
Spring 21	1	0.2	7	5.0
Spring 22	2	2.9	8	5.2

Describe the trends or shifts in the number of full-time (FT) and part-time (PT) faculty, and the number of student credit hours (SCH) taught by FT and PT faculty since the last program/unit review. What Impact, if any, have these trends or shifts had on the program/unit?

The department has observed several trends and shifts in the number of full-time (FT) and part-time (PT) faculty, as well as the number of student credit hours (SCH) taught by each category of faculty. According to the recent program/unit review, the headcount for Fall 21 was 14 for full-time faculty and 13 for part-time faculty. The corresponding full-time equivalent (FTE) figures were 11.5 and 3.1 respectively.

Additionally, the total student credit hours taught by full-time faculty accounted for 79% of the total, while part-time faculty accounted for 21%. These trends and shifts have had a significant impact on the program/unit and its operations.

One of the key impacts of these trends is the increased reliance on part-time faculty to teach student credit hours. The growing demand for flexible course scheduling and cost-effective education options has led to an increase in the use of part-time faculty to meet these needs.

However, this has also led to a decrease in the overall stability and continuity of the program/unit. Part-time faculty often have high turnover rates and as new part-time faculty come in, we are consistently having to retrain them, which takes an exorbitant amount of time and resources. This is neither sustainable nor effective.

Another impact is the need to allocate resources and support more efficiently for both full-time and part-time faculty. With the increasing reliance on part-time faculty, it is essential to provide them with the necessary resources and support to ensure that they can effectively deliver high-quality education to students. This includes providing adequate support for professional development and ensuring that they have access to the same resources and facilities as full-time faculty.

In conclusion, the trends and shifts in the number of full-time and part-time faculty and the student credit hours taught by each have had a significant impact on the program/unit. It is essential to continue monitoring these trends and making appropriate adjustments to ensure that the program remains effective, efficient, and responsive to the changing needs of students and the region.

Additional Notes-

The figures and trends mentioned in the program/unit review only provide a partial picture of the contributions made by part-time faculty and instructional assistants (IA) to the program/unit. It is important to note that many part-time faculty and IA's spend countless hours working with students in labs and other hands-on learning environments, providing valuable support and guidance to students as they gain practical experience and develop the skills needed for their future careers.

These individuals play a critical role in the success of the program and contribute greatly to the overall student experience. However, their contributions are often not fully reflected in the figures and trends mentioned in the program/unit review, highlighting the need for a more comprehensive evaluation of the contributions made by all faculty and staff to the program/units.

In conclusion, while the trends and shifts in the number of full-time and part-time faculty and the student credit hours taught provide valuable insights into the program/unit, they do not capture the full scope of the contributions made by all faculty and staff. It is important to recognize and acknowledge the valuable contributions made by all individuals, including part-time faculty and IA's, to the success of the program/unit.

6.C. Support Staff

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Describe the program/unit's support staff, including their FTE, major duties, and any specialized credentials necessary to carry out their duties. Is the number of staff adequate to support the program/unit? Explain.

Currently, the support staff of the Public Safety Department consists of only two full-time (FTE 100%) staff. The staff supports the department Director with the day-to-day administration of the department, which includes the Emergency Medical Services, Fire Technology, EMT & Paramedic Programs, Hybrid Paramedic Program under the CoAEMSP accreditation standards, oversight of a

Bachelor of Applied Science in Emergency Management, American Heart Association (CTC accreditation for CPR), Continuing Education Program (under CAPCE accreditation), Structure Fire Academy under Nevada State Fire Marshal's accreditation standards, Wildland Fire Academy, and the new oversight of a Criminal Justice Program and a new Dispatch program, and a first responder at a low SES High School and also responsible for maintaining data for all programs maintaining the necessary accreditation standards and Emergency Management/Homeland Security programs. The staff assists students with limited advising, registration, and program-specific entrance requirements. Other duties include regular contact with the public, department, and program payroll compliance and budget reconciliation, room scheduling, event planning, graduations, purchasing, course, and facility scheduling, book orders, assisting faculty, and assisting with student orientations. The staff also provides clerical support for Wildland, CPR, and EMS continuing education programs, along with the logistical needs for the Fire Academy and Wildland program. Additionally, the staff tracks accounts payable and invoices agencies/organizations for student fees for the program, and works closely with the executive assistant of the Dean of Life Sciences and Allied Health.

6.D. Facilities and Technology

EMS/Paramedic

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Describe the facilities and technology used by the program/unit, and discuss any unique requirements. These may include labs, studios, off-campus sites, computer classrooms, specialized equipment, etc. Are program/unit facilities and technology adequate to support the program? Explain.

Currently, we are housed on the Health Science Campus at Redfield. We occupy one hallway with three classrooms for all of our EMS courses. We have designed our schedule to try and make sure that there is not as much overlap, however, due to the expansion of our program, we have run into issues of sharing space, especially with fire and wildland fire courses. We have taken HSC 128 and converted it into lab space by creating a mock apartment and two simulation ambulances and a lab room for equipment and supplies. We are attempting to get simulation manikins, however, we do not have appropriate space to store and lock the manikins which are unfortunate as they are expensive to repair. The classrooms we use are smart classrooms and we have installed an AppleTV in HSC 130 so that we can use that with tablets that have a special anatomy app on them for use in the EMS 204 and paramedic courses. We have two computer labs on campus and typically need to use these for high-stakes exams, however, the nursing program uses those rooms the majority of the time, requiring us to use the laptop cart. We have resulted in asking students to bring their laptops and tablets to class.

Currently, there is construction on campus that is extending our hallway and adding two classrooms to our space which will hopefully marginally alleviate the crowding issue of courses. Our classes practice all over the building, outside of the classrooms, and unfortunately, with other programs, it can get loud for them. We also utilize ambulances to drive around and having reduces access to the back of the building has made it difficult to get the ambulances out to use, and we end up not using them.

As we are expanding our program, we are also increasing full-time faculty members, who require office space. We have many faculty members sharing office space with our other staff which can make it difficult to complete tasks when it is too loud. We have two faculty members that teach

hybrid and would prefer to work at home since they cannot record their online lectures in a specific time frame with others around.

7.A. Five-Year Plan

EMS/Paramedic

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Using your analyses from previous sections, develop a 5-year plan for the program(s). Include an estimated timeline of goal completion. Please address the following questions:

- **Using the most significant curriculum and assessment-driven findings, describe strategies to sustain or improve student learning. This may include deactivating existing courses or introducing new courses or programs to meet current trends in the discipline or industry.**
- **After considering the most significant enrollment findings, discuss strategies, if needed, to improve enrollment and address these factors. These may include more efficient scheduling, streamlining pathways to completion, outreach to underserved students, internal or external factors anticipated to impact future enrollment, etc.**
- **With respect to course completion rate, graduation, and transfer, discuss strategies to enhance student success and close equity gaps. These may include curriculum changes, pedagogical changes, streamlining pathways to completion, improving advising, mentoring, retention efforts, etc.**

Considering the above strategies, what are the major goals that the department/unit hopes to accomplish in the next 5 years? Include an estimated timeline of goal completion. How does the department or unit plan align with the Academic Affairs Strategic Plan or the College's Strategic Master Plan?

Based on the findings and data from previous sections, we propose the following 5-year plan for the program to sustain and improve student learning, improve enrollment and address equity gaps, and enhance student success:

Curriculum and Assessment:

In order to sustain or improve student learning, we will conduct a comprehensive review of the program's curriculum and assessments. This will include analyzing the data on student learning outcomes, and identifying areas where students are not meeting expectations.

Based on this analysis, we will make strategic changes to the curriculum by deactivating existing

courses that are no longer meeting students' needs or introducing new courses or programs to meet current trends in the discipline or industry.

We will also revise our assessments to ensure that they are aligned with the curriculum and assess the intended learning outcomes.

Estimate timeline: We plan to complete this process within the next 2 years, with goal completion by the end of the third year.

Enrollment:

To improve enrollment, we will increase our outreach efforts to underserved students by partnering with local schools and organizations to promote our program.

We will also explore more efficient scheduling options to help attract working students who may have more flexible schedules.

Additionally, we will review the pathways to completion and streamline them to make it easier for students to understand and navigate through the program requirements.

Estimate timeline: We plan to begin implementing these strategies within the first year, with goal completion by the end of the second year.

Student Success:

To enhance student success, we will make changes to the curriculum by introducing more hands-on learning opportunities and real-world scenarios to better prepare students for the workforce.

We will also focus on improving advising and mentoring to provide students with more individualized support and guidance throughout the program.

We will also review our retention efforts and make changes as necessary to better support students who may be at risk of not completing the program.

Estimate timeline: We plan to begin implementing these strategies within the first year, with goal completion by the end of the third year.

Overall Goals:

In the next 5 years, our major goal is to improve student learning and student success by revising our curriculum and assessments and introducing new programs and courses to meet the current industry trends.

Our second goal is to improve enrollment by increasing outreach efforts to underserved students and streamlining pathways to completion.

Our final goal is to close equity gaps by focusing on improving advising and mentoring, and retention efforts.

Estimate timeline: we plan to have all these goals completed by the end of the 5th year.

This plan aligns with the Academic Affairs Strategic Plan and the College's Strategic Master Plan by focusing on improving student learning and success, increasing enrollment, and addressing equity gaps. Furthermore, the plan also aligns with the College's mission of providing students with a high-quality education that prepares them for success in the workforce and community.

8.A. Resource Requests

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Identify any resource requests. For each request, please indicate whether the request is for an additional faculty and/or staff position, capital improvements (facilities), technology or specialized instructional resources, or professional development. Address the following items:

- **Request (Additional faculty/staff, capital improvements, technology or other specialized instructional resources, or professional development)**
 - **Estimated time to hire or time the request will be made.**
 - **Projected measurable outcomes. Which PLOs and/or student success metrics does the department hope to improve as a result of the request?**
 - **Alignment to the Academic Affairs or College's Strategic Plan**

According to the National Registry of Emergency Medical Technicians (NREMT) "Paramedics are critical in the nation's emergency medical services (EMS) system, providing life-saving interventions and transport for the sick and injured" (<https://www.nremt.org/rwd/public/document/ems-practice-analysis-2019-paramedic>). This highlights the importance of highly trained paramedics in the healthcare system and the need for programs that provide quality education in this field. Furthermore, the Bureau of Labor Statistics (BLS) states that "employment of paramedics and EMTs is projected to grow 6 percent from 2020 to 2030, faster than the average for all occupations" (<https://www.bls.gov/ooh/healthcare/emts-and-paramedics.htm>). This shows that there is an increasing demand for paramedics and an opportunity for programs to meet this need by providing well-trained graduates.

1. Request: Additional Faculty and Staff Position

- **Estimated time to hire:** We plan to request the additional position within the next 12 months and anticipate the hiring process to take approximately 6-9 months.
- **Projected measurable outcomes:** By hiring an additional full-time faculty member and clinical/field coordinator, we expect to improve student learning outcomes, increase enrollment, and enhance student success. Specifically, we expect to see improvements in PLOs related to patient care, critical thinking and problem-solving, and clinical skills. We also anticipate an increase in graduation rates and transfer rates.
- **Alignment to the Academic Affairs and College's Strategic Plan:** This request aligns with the College's Strategic Plan by focusing on improving student learning and success, increasing enrollment, and addressing equity gaps. Furthermore, by addressing the need for more full-time faculty and clinical/field coordinators, it supports the academic Affairs plan to improve and expand the curriculum to better prepare students for the workforce.

1. Request: Capital Improvements (Facilities)

- **Estimated time to hire:** We plan to request these capital improvements within the next 12 months, and anticipate the process of acquiring these improvements to take approximately 12-18 months.
- **Projected measurable outcomes:** By making capital improvements to our facilities, we expect to improve the overall student experience and better prepare students for the workforce. Specifically, we anticipate an increase in patient care simulation training, better equipment and technology, and improved safety.
- **Alignment to the Academic Affairs and College's Strategic Plan:** These capital improvements align with the College's Strategic Plan by providing students with a high-quality education that prepares them for success in the workforce and community. Additionally, it aligns with the academic Affairs plan to improve the teaching and learning facilities to provide students with the necessary skills to meet industry demands.

1. Request: Technology or Specialized Instructional Resources

- Estimated time to hire: We plan to request these resources within the next 6 months and anticipate the process of acquiring these resources to take approximately 6-9 months.
 - Projected measurable outcomes: By acquiring technology and specialized instructional resources, we expect to improve student learning outcomes, increase enrollment, and enhance student success. Specifically, we expect to see improvements in PL Os related to patient care, critical thinking and problem-solving, and clinical skills. We also anticipate an increase in graduation rates and transfer rates. Additionally, these resources will enhance the simulation training, provide access to the latest technology, and improve the student's ability to retain the knowledge acquired.
 - Alignment to the Academic Affairs and College's Strategic Plan: These resources align with the College's Strategic Plan by providing students with a high-quality education that prepares them for success in the workforce and the community. Additionally, the use of the latest technology and specialized instructional resources aligns with the academic Affairs plan on improving and expanding the curriculum to better prepare students for the workforce.
 - Request: Professional Development
 - Estimated time to hire: We plan to request funding for professional development within the next 12 months, and anticipate the process of acquiring these resources to take approximately 6-9 months.
 - Projected measurable outcomes: By providing professional development opportunities for our faculty and staff, we expect to see an improvement in student learning outcomes, an increase in retention and graduation rates, and a reduction of equity gaps.
 - Alignment to the Academic Affairs and College's Strategic Plan: This request aligns with the College's Strategic Plan by providing the faculty and staff with the resources they need to improve student learning and success. Additionally, it aligns with the academic affairs plan to invest in professional development to improve the student's experience and outcomes.
- It's important to note that resource request alone may not be sufficient to accomplish goals, but rather a combination of resource allocation, course delivery, data analysis, and continuous improvement. Additionally, it's crucial to continually involve the stakeholders, such as students, faculty, staff and industry representatives, to ensure the relevance and effectiveness of the proposed initiatives. It's also important to have a detailed budget plan, a monitoring and assessment plan to evaluate the effectiveness of the initiatives, and a means to adjust and make improvements if needed.

Academic Standards and Assessment Committee Findings and Recommendations

EMS/Paramedic

EMS/Paramedic 2022-23 PUR Self-Study

EMS/Paramedic 2022-2023 Self Study

ASA review date: 3/31/23

Self-Study meeting Date: 4/24/23

Academic Standards and Assessment Committee's Findings:

The EMS/Paramedic programs are an asset to TMCC and the community. There is excellent job growth projected and the programs have continued to grow. Director Schulz has built strong partnerships within the community. There is a concrete plan with timelines to begin curriculum assessment. There is concern about an apparent lack of self-engaged collaboration with the DRC to ensure that instructional materials are accessible. There is also concern that the program is primarily supported by PT faculty who are undertaking FT faculty responsibilities. The committee

supports the dean's request of unfreezing positions and making contingency-funded positions permanent. We cannot support the other resource requests without more information.

Program Strengths:

- EMS programs have seen significant growth, even through the pandemic. The programs have made creative use of Perkins funds and grants to support this growth and hire needed personnel.
- The director has built strong relationships and partnerships within the community.
- Regional job demand and projected growth is strong.
- The program has recently revised its PLOs and CSLOs to improve student learning and success.
- The area has awarded a robust number of EMT and Advanced EMT skills certificates over the past 5 years.
- There are concrete plans with timelines to begin curriculum assessment for student success in the program.
- There are clear implementation strategies to improve student success metrics including early meetings with students.
- The five-year plan is concrete, actionable, and feasible; the plan will require annual monitoring.

Areas of Concern or Improvement:

- Although pass rates are monitored and reported annually, there was no evidence presented of PLO assessment being conducted across the program curriculum.
- The program works as needed with the DRC but has not actively self-engaged in ensuring that instructional materials are accessible.
- The program is primarily supported by PT faculty doing FT faculty responsibilities, which jeopardizes the stability of the program.
- Resources are not sufficient for program growth; the data supports the need for increased resources.
- The resource requests made are vague (e.g., facility improvements) making it difficult to support them.

Recommendations:

- There is significant data to support the need for additional FT faculty to support program growth and advancement. These will be hard to find and hard to fill positions.
- Per the dean, unfreezing positions and making contingency-funded positions permanent are needed to maintain stability of the current program; the committee supports this.
- Recommendations from the previous PUR still need to be addressed.
- Develop an active relationship with the DRC, make use of professional development opportunities, and utilize accessibility self checkers (e.g., MS Word, PowerPoint) to ensure accessibility of instructional materials.
- Implement the self-identified plan to show evidence of assessment use to improve the program and plans to mitigate equity gaps in enrollment and completion.
- Be clear with resource requests as we cannot support requests that are non-specific.

Other comments:

- Are decreased fill rates in some EMS classes (particularly EMS 200 and above) due to students leaving with jobs prior to completing the AAS Prehospital Emergency Medicine?
- Showing the data sets for equity gap analysis for graduation rates supports the narrative and improves the reader's ability to understand the narrative.

Dean's Findings and Recommendations

EMS/Paramedic

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Academic Dean's Findings:

The EMS/Paramedic program is under new leadership and has grown substantially since the 2015-2016 PUR. Mike Schulz became Director less than two years ago and his position is over EMS/Paramedic, CPR, Fire Suppression/Technology, Wildland Fire, EMS Continuing Education, and the EMHS BAS program. The Public Safety Department will be adding Criminal Justice and Law Enforcement to that list in Fall 2023. This is a large scope of responsibility. This report is just on the EMS/Paramedic component of the Public Safety Department. EMS/Paramedic is composed of two one-semester Skills Certificates, EMT Basic and EMT Advanced, which are 6 and 7 credits respectively. There is also a Certificate of Achievement in Paramedic that can step-stone to the AAS degree in Pre-Hospital Emergency Medicine. The Paramedic training also comes in two forms, the traditional in-person full-time Paramedic Academy (60+ credits) and the newer Hybrid Paramedic Program that is designed for working firefighters with experience to be able to complete Paramedic school while working for a fire agency (50+ credits). The need for EMT professionals and the need to upskill firefighters to full Paramedics has fueled significant growth in the EMS/Paramedic program. The program historically has offered one traditional Paramedic Academy per year, and now the program has up to five cohorts progressing through the curriculum in a year.

Strengths:

Program growth during the toughest of times is a major accomplishment of the EMS/Paramedic program and should be commended. Like many of the health care programs, EMS/Paramedic did not go remote during Covid, they just masked up and kept teaching. EMS/Paramedic is the only health related area that significantly increased enrollment during the pandemic. The program is very adaptable and finds a way to keep expanding offerings to try to meet the workforce needs in the community. Since state positions were frozen and budgets were tight, the program did this by applying for grants and finding other sources of support. The program was awarded competitive Perkins funding for two three-year full time-temp positions to build, launch, coordinate and teach the Hybrid Paramedic Program. It was awarded ARP Federal Rescue funds to support a full time EMS Skills Lab Coordinator for two years, and justified support for three Additional Assignments, for an EMT Coordinator, a Paramedic Coordinator, and a Field and Clinic Coordinator. The Director, the three full-time tenure/tenure-track EMS/Paramedic/Fire faculty and the faculty filling these temporary positions are the true strength of the program. They are the ones who educate and prepare the students and are responsible for the impressive student pass rates. The program has also built strong partnerships with other health care and public safety entities in the community, including running apprenticeships with Renown and collaboration with the fire

agencies that need paramedics and provide equipment support and their personnel who serve as advisory board members, trainers and part-time instructors.

Areas for Improvement:

The program has continued to make strides in closing the enrollment and completion gap among women and minoritized populations in the EMS/Paramedic pathway. There has been a concerted effort, which I applaud, and I encourage continual engagement to address this issue. The program has been recruiting through Summer Bridge, attending high school college fairs, and running a Jump Start First Responders course at Hug High to recruit more students to the program from low-income, first-generation, underrepresented populations. Two of the three full-time tenure/tenure-track faculty are women, which shows role models for other females interested in the field, and the program connects low-income students with scholarship opportunities including through SANDI, NAYA, Pennington Foundation, and the Renown Apprenticeships.

Summary Action Recommended (Continue program(s), significantly revise, discontinue, etc. followed by explanation):

Continue the EMT Basic and Advanced programs, and prepare to curtail the number of Advanced offerings (and expand spaces in the traditional Paramedic program) if the Nevada State rules are changed to allow students to go directly from EMT Basic to Paramedic school. Continue both the traditional and Hybrid Paramedic programs, and roll out the new Emergency Dispatch Skills Certificate to meet the needs of the community and provide a career option for students interested in emergency response, but who cannot or do not want to do the physicality of working in the field or on an ambulance.

Recommendations and Implementation Timeline:

All of the following are recommendations in the 2-5 year timeline range:

1. Finish the curriculum realignment of the traditional and Hybrid paramedic programs and institute systematic programmatic assessment based on the registry.
2. Once the new construction at HSC is complete move as many faculty and coordinators as possible into individual offices.
3. Offer EMT and Paramedic schedules that are sustainable and are off set as needed to prevent clinical and internship.
4. Hire new full-time members to the instructional support team of faculty, coordinators, and staff.
5. Continue outreach to underserved student communities and focus on retention efforts to increase student certificate and degree completion.
6. Continue to expand partnerships in the community, including with Washoe County, Remsa, local hospitals, and regional fire agencies.
7. Provide professional development opportunities for staff, faculty, and coordinators to maximize their effectiveness.
8. Continue to improve registry exam outcomes and maintain external accreditation

Resources Necessary for Implementation of Recommendations:

Budget restoration and the unfreezing of positions are required to make the contingency-funded positions permanent. Without more full-time permanent faculty the stability of the overall program is in jeopardy. It is also difficult to recruit and retain because of wages being so much lower than industry wages.

Impact of Recommendations on Division Planning:

Even with unfreezing and filling vacant positions, the potential growth in the EMS/Paramedic program, the Public Safety Department, and the LAP Division cannot all simultaneously reach their enrollment potentials without new positions allocated to the College and the Division. Currently the only way growth can occur is by taking positions from other departments. The LAP Division overall has had steady or growing enrollment, as has the Public Safety Department and the EMS/Paramedic Program. The Division will need to reallocate vacant positions from other departments to maintain the trajectory of Public Safety. Although there are currently additions being added to the HSC building, that space will quickly fill and the Division needs to consider if three majors programs can co-exist at HSC for the long term.

Impact of Recommendations on Program/Unit Faculty:

The addition of more full-time faculty will bring stability to the program and will provide the existing faculty with the support they need to sustain the growth they have worked so hard to build. If more space is needed for Public Safety (and Nursing), remodeled space for other HSC programs may need to be found to make space (as was previously done with the moving of Veterinary Nursing from HSC to MDWN).

Vice President of Academic Affairs' Findings and Recommendations

EMS/Paramedic

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VPAA's Findings and Conclusions:

(Include which of the ASA Committee's and Dean's findings and recommendations were upheld or not upheld.)

The EMS/Paramedic program is vital to our college and our wider community, and its staff and leadership performed remarkably during the pandemic to keep student learning progressing and thus supply this workforce sector with essential graduates. Like most areas of the college, budget cuts left lines unfilled and this program has had to rely upon PT instructors and temp faculty in order to maintain operations. With the new budget biennium, we look forward to two new FT tenure-track faculty searches and an array of new teaching and learning spaces at the Pennington Health Science Center.

Strengths:

The EMS/Paramedic program relies upon the hard work of a core number of FT faculty and PT instructors who do a remarkable job of delivering instruction for our regional agencies. The Director, Mike Schulz, is a dedicated leader who mended several frayed relationships with these groups during 2021-22, and has maintained them very well since. Recent missteps by one of the newer FT faculty have been brought to his attention by one of the agencies, and he is moving swiftly to address those concerns and redirect the faculty member's instruction. This feedback is evidence of trust and of an open communication channel between the agency and our program, and I am confident that the Director can remedy their concerns.

The program places great emphasis on active simulation and FT faculty work closely with students to ensure that they are mastering the learning outcomes. In just one example, Professor

Stephanie Mead has played an important role in delivering our Emergency Medical Responder Course, a dual credit class given in partnership between our EMS program and Hug High. This course helps students to determine whether a first-responder or healthcare career might be a good fit for them, which is an excellent means of recruiting future students.

The program has also done great work to adopt instructional technology like the iSimulate, which mimics several types of field equipment interfaces using an iPad Pro mounted in a carrying case. This effort, together with the adoption of iPads in other EMS courses, enables equipment cost-savings and also digital literacy for our students.

Unsurprisingly, the EMS/Paramedic program was selected by our Leadership Team to be profiled during the September 2023 Board of Regents meeting at TMCC. We look forward to showcasing for our Regents and visiting dignitaries the caliber of this program and the accomplishments of its students and graduates.

Areas for Improvement:

I will only reiterate the findings of the Dean with regard to need to assess program learning outcomes, as well as the need to increase the number of Hispanic students and Spanish-speaking instructors. All of the efforts made to increase representation in our programs are noteworthy, and these efforts must continue. Spanish-language marketing efforts and recruiting materials may help as well.

Recommendations and Next Steps for the Program Based on the PUR:

(Include whether the program should be continued, significantly revised, or discontinued, followed by a rationale.)

- Fortunately, the Leadership Team approved two new, FT tenure-track faculty searches in EMS in recent months, which offers opportunities to hopefully increase the diversity of their faculty ranks.
- The program's decision to hire Stephanie Mead as the Academic Program Coordinator is a great step forward, and it will offer a path toward recruiting two new faculty members who need not be tasked with coordinator duties during their probationary periods. I find that our TMCC-NFA contract includes a terrible double-standard when it requires Department Chairs to be tenured Professors, but it will give the same scope of duties (and more) as an APC to a brand-new tenure-track hire in a CTE program immediately upon hire. Out of urgent necessity, such a hire may need to perform some coordinator duties, but it should not be a job expectation on day one if that faculty member is to have an equal shot at earning tenure through the performance of excellent teaching and solid service. Given our now growing FT faculty ranks, new hires should be afforded every opportunity to develop effective teaching before they are given administrative duties.
- In July 2023, at my request, the LAP Division Dean, Dr. Julie Ellsworth-Baker, agreed to rewrite the Director's position description together with him in order to fully document his responsibilities and duties. This will help the HR team to better understand the scope of his work as Director, which will better distinguish his role from that of the various program, clinical, and equipment coordinators needed by the EMS/Paramedic program -- whose responsibilities and duties also require clear documentation. Developing this org chart and corresponding duties will give the HR team a greater understanding of the work performed by each position, and how the roles fit together, which will facilitate smoother Personnel Requisitions if these positions must be searched anew in future.

Resources Needed to Implement Recommendations Towards Program Improvement or Enhancement:

- The EMS/Paramedic program will search one of the two new FT tenure-track positions during 2023-24, and the other in the following year. NFA has given its support for this plan. The program should aim to advertise these positions via outlets and sources that can reach a diverse audience, in hopes of hiring diverse team members. MCO may be able to assist with raising the profile of these positions in area media.