

KAPI'OLANI COMMUNITY COLLEGE

**COMPREHENSIVE INSTRUCTIONAL
PROGRAM REVIEW**

2016-2019

EMT Training Program – Certificate of Competency

**Kapi'olani Community College
Mission Statement
2015-2021**

Mission Statement: Kapi'olani Community College provides students from Hawai'i's diverse communities open access to higher education opportunities in pursuit of academic, career, and lifelong learning goals. The College, guided by shared vision and values, and commitment to engagement, learning, and achievement, offers high quality certificate, associate degree, and transfer programs that prepare students for productive futures.

Part I. Executive Summary of CPR and Response to previous Tactical Plans and ARPD initiatives

The program's goals supported the College's Strategic Plan for 2008-2015 through four outcomes: 1) Outcome A, Position Kapi'olani Community College and the University of Hawaii as leading indigenous- serving higher education, 2) Outcome C, Contribute to the state's economy and provide a solid return on its investments in higher education through research and training, 3) Outcome D, address critical workforce shortages, and 4) Outcome E, Resources and Stewardship.

This report shows the number of students who completed and graduated with their EMT certificate of competence. In addition, it will describe the corroborative nature of the work with clinical training sites to provide meaningful experiential learning opportunities. Those efforts include the coordination of personnel schedules, the development of preceptors from the employee populations of the clinical sites, and concurrent observation of the preceptor student interactions during the clinical site experiences. In addition to providing the initial EMT training courses the EMT program also provides the requisite 24 hr EMT refresher courses for EMTs currently working for the state's EMS agencies.

The employment needs for EMT certified personnel continues to be met by the EMT program's initial and refresher programs. In part the employment needs extend to the MICT program as the state-wide shortage of MICT personnel cannot be addressed until sufficient numbers of EMT certified personnel gain the required field experience needed to be admitted to one of the MICT programs.

Student skills development with EMS equipment currently used in the field is a critical component of the program. The budget for the program has facilitated the replacement of

outdated equipment allowing the students to have a classroom experience that more closely resembles a clinical experience.

The program cohort sizes were as follows:

2013 Fall Oahu (18) Hilo (0) Maui (15) Kauai (0)

2014 Spring Oahu (18) Fall Oahu (18) Summer Oahu (15) Hilo (16) Maui (0) Kauai (8)

2015 Spring Oahu (42) Fall Oahu (13) Hilo (21) Maui (0) Kauai (10)

2016 Spring Oahu (14) Hilo (26) Maui (14) Kauai (11)

Part II. Program Description

The Emergency Medical Technician (EMT) provides basic and advanced life support to patients in the pre-hospital emergency setting. Specific EMT functions include: establishment and maintenance of airway; administration of cardiopulmonary resuscitation (CPR); control of hemorrhage; treatment of shock; immobilization of fractures; bandaging of wounds; assisting in childbirth; management of patients with behavioral disorders; and initiation of treatment for poisoned and burned victims. Graduates are qualified to take the National Registry Examination for certification as an EMT- Basic and Graduates are qualified to take the National Registry Examination for certification as an EMT- Basic, and may apply for work with an ambulance service.

History

The Kapi`olani Community College EMT program, in its modern form, came into being as the result of state legislation established in 1978. Specifically, *Hawaii Revised Statutes Volume 6 Title 19 Health Chapter 321 Department of Health Part XVIII. State Comprehensive Emergency Medical Services System*. The legislation states in part, "The system shall provide for personnel, personnel training, communications, emergency transportation, facilities, coordination with emergency medical and critical care services, coordination and use of available public safety agencies, promotion of consumer participation, accessibility to care, mandatory standard medical recordkeeping, consumer information and education, independent review and evaluation, disaster linkage, mutual aid agreements, and other components necessary to meet the purposes of this part." [L 1978, c 148, pt of §1; am L 1981, c 93, §1; am L 1994, c 242, §1] This system requires a close working relationship exist between the Hawaii Department of Health and EMT program to assure that the state funds are effectively and appropriately used for EMT training.

Program Goals (2013 - 16)

The EMT Program aligns the program goals with the performance measures of the College Strategic Plan.

Goal One: Strategic Outcome A: Native Hawaiian Educational Attainment. The EMT program courses on Oahu, Maui, Hawaii, and Kauai draw students primarily from their own communities. This is due to the logistical considerations and unique nature of each of the EMS provider systems on each island. Familial support and familiarity with local cultures are advantages to students enrolled in the KCC EMT program and these characteristics position the EMT program to support KCC as a leading indigenous serving institution.

Goal Two: Strategic Outcome C: Economic Contribution. The EMT program trains people to respond to and manage acute medical emergencies that occur outside a hospital. The provision of this essential community service decreases morbidity and mortality rates associated with traumatic injury, cardiac arrest, diabetic emergencies etc.. This has a direct positive impact on economic indicators such as, but not limited to, lost workdays and state healthcare cost.

Goal Three: Strategic Outcome D: Globally Competitive and Collaborative Workforce. The EMT program provides state credentialed personnel to the EMS providers in the State of Hawaii. As employees of the EMS providers they are capable of obtaining the requisite experience to be qualified to attend the MICT training and thus addressing the state wide shortage of MICT certified personnel. Additionally, the experiential portion of the EMT training provides students with real time patient interactions with the diverse patient population living in and visiting Hawaii. The interactions provide opportunities for the EMT student to effectively work through language and cultural challenges while providing emergency care.

Goal Four: Outcome E: Resources and Stewardship. The budget for the program has facilitated the replacement of outdated equipment allowing the students to have a classroom experience that more closely resemble a clinical experience. Focusing on the acquisition of equipment that reflects the current equipment used in the field provides the largest possible return on the investment as it relates to the students educational experience. When possible the EMT program works to obtain re-conditioned equipment, such as the Ferno ambulance cot purchased for the Hilo operation. All equipment is secured in classrooms or office facilities and the faculty closely supervises the use of equipment.

Program Student Learning Outcomes (SLOs) for EMT 100:

Upon successful completion of the EMT course the student should be able to:

1. Define the role and scope of an EMT, AEMT, and a paramedic in the State of Hawai`i and nationally and define medical trauma, and pediatric emergencies.
2. Explain and demonstrate assessing the emergency situation, which includes obtaining a basic history and physical examination, establishing rapport with the patient and others, and managing emergency care, including extricating the patient.
3. Explain and demonstrate the initiation and continuation of emergency medical care including the recognition of presenting conditions and initiation of appropriate non-invasive and invasive treatments for: respiratory emergencies, cardiovascular emergencies, neurological emergencies, musculoskeletal emergencies, obstetrical emergencies, trauma and shock, and psychiatric emergencies.
4. Safely and accurately perform basic life support procedures as prescribed by the State Department of Health and the EMT National Standard Curriculum as well as the following skills: cardiopulmonary resuscitation, obtain and monitor vital signs, establish and maintain airways (basic), administer free-flow 100% oxygen, ventilate with bag-valve mask, control hemorrhage, apply bandages, immobilize or splint fractures and dislocations / sprains, immobilize suspected and known spinal injury patients, light rescue and triage, emergency delivery of a baby, provide newborn care, operate medical

communication systems, operate an emergency vehicle, application of 12-lead electrocardiogram, provide necessary basic pharmacological interventions and perform intravenous cannulation.

5. Establish rapport with the patient in a manner designed to decrease their state of crisis and explain the assignment of priorities of emergency treatment to a patient or group of patients
6. Explain how an Emergency Medical Technician would participate as a team member with another EMT, under the direction of an Advanced Emergency Medical Technician or Paramedic to ensure the safety and care of a patient.
7. Conduct the pre-check and preparation of the ambulance, including its equipment and supplies
8. Communicate with the medical care facility about the patient's condition status and arrival and document in writing and on the electronic patient care record the details related to the patient's emergency care and the incident.
9. Explain the coordination of transport of the patient by selecting the best available method(s) in conjunction with medical authority / /protocol.
10. Use a sequential and critical thinking process to gather the appropriate data, appraise its significance, take action, and evaluate the effects of that action upon the patient.

Program Student Learning Outcomes (SLOs) for EMT 101:

1. Perform within the state national scope of practice for a basic Emergency Medical Technician
2. Define medical, trauma, behavioral, pediatric, obstetric, and geriatric emergencies in the clinical environment
3. Assess the emergency situations, which includes obtaining a basic history and physical examination, establishing rapport with the patient and others, and managing emergency care, including extricating and transporting the patient.
4. Initiate and continue emergency medical care including the recognition of presenting conditions and initiation of appropriate treatments for all medical and traumatic conditions including but not necessarily limited to: respiratory emergencies, cardiovascular emergencies, neurological emergencies, endocrine emergencies, infectious disease, allergic reactions, poisoning/overdose, obstetrical and/or gynecological emergencies, traumatic injuries, shock, and psychiatric emergencies.
5. Safely and accurately perform basic life support procedures as prescribed by the State Department of Health and the National EMS Education Standards for an Emergency Medical Technician.
6. Safely and accurately perform skills including the following: cardiopulmonary resuscitation, obtain patient history and perform physical examination, obtain and monitor vital signs, establish and maintain basic airway adjuncts, administer free-flow 100% oxygen, ventilate with bag-valve mask, control hemorrhage, apply bandages, immobilize or splint fractures and dislocations/sprains, externally stabilize pelvic fractures, immobilize suspected and known spinal injury patients, light rescue and triage, emergency delivery of a baby, provide newborn care, initiate IV therapy, apply 12 lead EKG leads, operate medical communication systems, operate an emergency vehicle, assist with necessary pharmacological intervention in the scope of a basic EMT.
7. Establish rapport with the patient in a manner designed to decrease their state of crisis.
8. Participate as a team member with another EMT or under the direction of a paramedic to ensure the safety and care of the patient.

9. Explain the assignment of priorities of emergency treatment to patient or group of patients in a clinical environment
10. Conduct the pre-check and preparation of the ambulance, including its equipment and supplies.
11. Communicate with the medical care facility about the patient's condition status and arrival.
12. Document in writing and on the electronic patient care record the details related to the patient's emergency care and the incident
13. Explain the coordination of transport of the patient by selecting the best available method(s) in conjunction with medical authority / protocol in the clinical environment.
14. Use a sequential and critical thinking process to gather the appropriate data, appraise its significance, and take action, and evaluation the effects of the action upon the patient.

Admission Requirements:

- Complete prerequisite courses prior to application
- Attend a Program Information session.
- Submit the application form to the applicable training site office.
- Submit Star reports or transcripts specific to prerequisite courses
- Submit drivers abstract from Hawaii Judiciary Department
- Submit current AHA Health Care Provider CPR and First Aid cards
- Applications and all materials (transcripts etc.) must be received prior to announced deadlines.

Selection to the Program:

- Age 18 or older.
- Overall GPA of 2.0 or higher for prerequisite courses.
- Selection is based on a factoring system in which points are given in the following categories:
 - Prerequisite course grades
 - Interview scores
 - Extent of patient interactions through work or volunteer experience in the health field.

Applicants are ranked in numerical order by the total of the factors assigned in the selection criteria. Up to 20 applicants will be notified of their admission acceptability and will be asked to:

1. Confirm their intention to enroll in the program.
2. Purchase liability insurance prior to registering.
3. Attend the program orientation sessions.

Credentials, licensure and career pathways

The career pathway begins with successful completion of the 13 credit hour program where graduates will earn a Certificate of Competence and are eligible to take the National Registry of EMTs exam. After passing the National Registry of EMTs exam, graduates will be awarded the National Registry EMT Basic credential. Upon earning the National Registry EMT Basic credential, graduates are issued a Hawaii State EMT Basic license from the Department of Commerce and Consumer Affairs. The CRT and RRT credentials are recognized in the United

States and several other countries. The State of Hawaii EMT Basic license credential is required to work as an EMT in the state of Hawaii.

As a graduate of the KCC EMT program, graduates through the successful completion of the KCC MICT course can obtain additional advanced credentials:

Faculty and Staff

There are three, 11 month faculty teaching the EMT program:

David Kingdon – Professor

Andrew Akana, MICT – Instructor

Craig Dieringer MICT - Instructor

Jillian Kelecoma MICT - Staff

Resources, including Student Support Services:

The Emergency Medical Service programs are located on Oahu at the Kapi`olani Community College campus, on Maui at the Maui College campus, on Hawaii at the Hawaii Community College campus, and on Kauai at the Kauai Community College campus. The EMT program has one classroom dedicated to the EMT courses at each of the locations listed above. The classroom for each islands courses provides a lecture/laboratory space along with storage of equipment and supplies needed for the programs.

Community Connections:

Clinical Experiences and Internships

Students earning a Certificate of Competence from the KCC EMT program are required to complete 40 hours of clinical experience in an emergency department and obstetric setting. They also complete a 120-hour internship on an ambulance. This clinical and internship experience allows the students to apply the knowledge and skills learned in the didactic part of the EMT class. The clinical and internship settings are set in the actual work environment providing the student with the experience of working in real emergency situations. The Internships take place at the facilities listed below.

Clinical and Internship Facilities

EMT Instructor	EMS Training Site	Facilities
David Kingdon	Maui College Campus	AMR Ambulance and Maui Medical Center
Andrew Akana	Kapi`olani Community College Campus	City and County of Honolulu EMS, AMR Ambulance, Queens Medical Center
Craig Dieringer	Hawaii Community College Campus	Hawaii County Fire Department, AMR Ambulance, Hilo Medical Center, Kona Hospital
Jillian Kelecoma	Kauai Community College	AMR Ambulance, Wilcox Medical Center

Part III. Curriculum Revision and Review

Program curriculum is going to be reviewed this year. KCC EMS Department Medical Director, Dr. Dale Oda, David Kingdon KCC EMS Assistant Professor, Andrew Akana KCC EMS Instructor, Craig Dieringer KCC EMS Instructor, and Jillian Kelecoma KCC EMS Staff will be conducting the review for the purpose of aligning the EMT course delivery.

Courses Assessed: EMT 100 and EMT 101 SP 2015

Course Competency	Assessment Method	Expected Level of Achievement	Results of Assessment	Next Steps
1. Define the role and scope of an EMT, AEMT, and a paramedic in the State of Hawai'i and nationally and define medical, trauma, and pediatric emergencies.	<p>What: Participation in facilitated discussion, quiz, and exam.</p> <p>Who: Instructor</p> <p>When: Facilitated discussion during chapter presentations, quizzes after chapter presentations, and exams after each week of class.</p>	Expected: 100% of students at 80% (average for every student)	<p>Results:</p> <p>94.31% Class average</p> <p>21 out of 21 students achieved this SLO</p>	<p>Action: Continue to monitor student pass rates</p> <p>Date: next semester.</p>
2. Explain and demonstrate assessing the emergency situation, which includes obtaining a basic history and physical examination, establishing rapport with the patient and others, and managing emergency care, including extricating the patient.	What, Who and When: Same as above	Expected: same as above	Results: Same as above	Action: Same as above
3. Explain and demonstrate the initiation and continuation of emergency medical care including the recognition of presenting conditions and initiation of appropriate non-invasive and invasive treatments for emergencies in respiratory, cardiovascular, neurological, musculoskeletal, obstetrical, trauma, shock, and psychiatric.	What, Who and When: Same as above	Expected: same as above	<p>Results:</p> <p>90.73% Class average</p> <p>21 out of 21 students achieved this SLO</p>	Action: : Same as above

<p>4. Safely and accurately perform basic life support procedures as prescribed by the State DOH and the EMT National Standard Curriculum as well as the following skills: cardiopulmonary resuscitation, obtain patient history and perform physical examination, obtain and monitor vital signs, establish and maintain airways (basic), administer free-flow 100% oxygen, ventilate with bag-mask, control hemorrhage, apply bandages, immobilize or splint fractures and dislocations /sprains, immobilize suspected and known spinal injury patients, light rescue and triage, emergency delivery of a baby, provide newborn care, apply pneumatic anti-shock garment, operate medical communication systems, operate and emergency vehicle, application of 12-lead electrocardiogram, provide necessary basic pharmacological interventions and perform intravenous cannulation.</p>	<p>What, Who and When: Same as above.</p>	<p>Expected: Same as above</p>	<p>Results: Same as above</p>	<p>Action: Same as above</p>
<p>5. Establish rapport with the patient in a manner designed to decrease their state of crisis and explain the assignment of priorities of emergency treatment to a patient or group of patients.</p>	<p>What, Who and When: Same as above.</p>	<p>Expected: Same as above</p>	<p>Results: Same as above</p>	<p>Action: Same as above</p>
<p>6. Explain how an Emergency Medical Technician would participate as a team member with another EMT, under the direction of an Advanced Emergency Medical Technician or Paramedic to ensure the safety and care of a patient.</p>	<p>What, Who and When: Same as above.</p>	<p>Expected: Same as above</p>	<p>Results: Same as above</p>	<p>Action: Same as above</p>
<p>7. Conduct the pre-check and preparation of the ambulance, including its equipment and supplies.</p>	<p>What, Who and When: Same as above.</p>	<p>Expected: Same as above</p>	<p>Results: Same as above</p>	<p>Action: Same as above</p>
<p>8. Communicate with the medical care facility about the patient's condition status and arrival and document in writing and on the electronic patient care record the details related to the patient's emergency care and the incident.</p>	<p>What, Who and When: Same as above.</p>	<p>Expected: Same as above</p>	<p>Results: Same as above</p>	<p>Action: Same as above</p>
<p>9. Explain the coordination of transport of the patient by selecting the best available method(s) in conjunction with medical authority/protocol.</p>	<p>What, Who and When: Same as above.</p>	<p>Expected: Same as above</p>	<p>Results: Same as above</p>	<p>Action: Same as above</p>

10. . Use a sequential and critical thinking process to gather the appropriate data, appraise its significance, take action, and evaluate the effects of that action upon the patient.	What, Who and When: Same as above.	Expected: Same as above	Results: Same as above	Action: Same as above
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Course Learning Report

Course: EMT 101

Date: F15 - Sp 16

Author: Craig Dieringer

Competency	Assessment Method	Expected Level of Achievement	Results of Assessment	Next Steps
1. Perform within the state and national scope of practice for a basic Emergency Medical Technician.	<p>What: Documentation of satisfactory performance by a preceptor during patient interactions to include assessments, treatments, the transfer of care and an exam.</p> <p>Who: Preceptor and Instructor</p> <p>When: Participation during the scheduled clinical experiences and the exam at the end of the course.</p>	<p>Expected: 100% of clinical experience evaluation forms indicate satisfaction of the preceptors regarding student performance of the competency, and score $\geq 80\%$ on the exam at the end of the course.</p>	<p>100% of clinical experience evaluation forms indicate satisfaction of the preceptors regarding student performance of the competency.</p> <p>97% Class average for exam</p> <p>21 out of 21 students achieved this SLO</p>	<p>Action: Continue to monitor student pass rates</p> <p>Date: next semester</p>
2. Define medical, trauma, behavioral, pediatric, obstetric, and geriatric emergencies in the clinical environment.	<p>What: Participation in patient interactions to include assessments, treatments, the transfer of care and an exam.</p> <p>Who: Preceptor and Instructor</p> <p>When: Same as PSLO #1</p>	<p>Expected: 80% of clinical experience evaluation forms as in PSLO #1</p>	<p>Same results as PSLO #1</p>	<p>Action: Same as above</p>
3. Assess the emergency situations, which includes obtaining a basic history and physical examination, establishing rapport with the patient and others, and managing emergency care, including extricating and transporting the patient.	<p>What: Same as PSLO 2</p> <p>Who: Preceptor and Instructor</p> <p>When: Same as PSLO #1</p>	<p>Expected: 80% of clinical experience evaluation forms as in PSLO # 1</p>	<p>Same results as PSLO #1</p>	<p>Action: Same as above.</p>

<p>4. Initiate and continue emergency medical care including the recognition of presenting conditions and initiation of appropriate treatments for all medical and traumatic conditions including but not necessarily limited to: respiratory emergencies, cardiovascular emergencies, neurological emergencies, endocrine emergencies, infectious disease, allergic reactions, poisoning/overdose, obstetrical and/or gynecological emergencies, traumatic injuries, shock, and psychiatric emergencies.</p>	<p>What: Same as PSLO 2 and 3 Who: Preceptor and Instructor When: Same as PSLO 1</p>	<p>Expected: 80% of clinical experience evaluation forms as for PSLOs' 1</p>	<p>99% of clinical experience evaluation forms indicate satisfaction of the preceptors regarding student performance of the competency. 97% Class average for exam 21 out of 21 students achieved this SLO.</p>	<p>Action: Same as above</p>
<p>5. Safely and accurately perform basic life support procedures as prescribed by the State DOH and National EMS Education Standards for an Emergency Medical Technician.</p>	<p>What: Same as PSLO 2 and 3 Who: Preceptor and Instructor When: Same as PSLO 1</p>	<p>Expected: Same as above.</p>	<p>Same as above</p>	<p>Action: Same as above</p>
<p>6. Safely and accurately perform skills including the following: cardiopulmonary resuscitation, obtain patient history and perform physical examination, obtain and monitor vital signs, establish and maintain basic airway adjuncts, administer free-flow 100% oxygen, ventilate with bag-mask, control hemorrhage, apply bandages, immobilize or splint fractures and dislocations/sprains, externally stabilize pelvic fractures, immobilize suspected and known spinal injury patients, light rescue and triage, emergency delivery of a baby, provide newborn care, initiate IV therapy, apply 12 lead EKG leads, operate medical communication systems, operate an emergency vehicle, assist with necessary pharmacological intervention in the scope of a basic EMT.</p>	<p>Same results as PSLO #1</p>	<p>Action: Same as above</p>	<p>Same as above</p>	<p>Action: Same as above</p>

7. Establish rapport with the patient in a manner designed to decrease their state of crisis.	What: Same as PSLO 2 and 3 Who: Preceptor and Instructor When: Same as PSLO 1	Expected: Same as above	Same results as PSLO #1	Action: Same as above
8. Participate as a team member with another EMT or under the direction of a Paramedic to ensure the safety and care of patient.	What: Same as PSLO 2 and 3 Who: Preceptor and Instructor When: Same as PSLO 1	Expected: Same as above	Same results as PSLO #1	Action: Same as above
9. Explain the assignment of priorities of emergency treatment to a patient or group of patients in the clinical environment.	What: Participation in-patient care of patients with wounds and burns in the out of hospital as well as the hospital setting and an exam. Who: Preceptor and Instructor When: Same as PSLO 1	Expected: 80% of clinical experience evaluation forms as for PSLOs' 1	Same results as PSLO #1	Action: Same as above
10. Conduct the pre-check and preparation of the ambulance, including its equipment and supplies.	What: Participation in patient interactions to include assessments, treatments, the transfer of care and an exam. Who: Preceptor and Instructor When: Same as PSLO 1	Expected: Same as PSLO 1	Same results as PSLO #1	Action: Same as above
11. Communicate with the medical care facility about the patient's condition status and arrival.	What: Participation in-patient and family interactions experiencing serious illness or injury. Who: Preceptor and Instructor When: Same as PSLO 1	Expected: 80% of clinical experience evaluation forms as for PSLOs' 1	Same results as PSLO #1	Action: Same as above
12. Document in writing and on the electronic patient care record the details related to the patient's emergency care and the incident.	What: Participation in patient interactions to include assessments, treatments, the transfer of care and an exam. Who: Preceptor and Instructor When: Same as PSLO 1	Expected: 80% of clinical experience evaluation forms as for PSLOs' 1	Same results as PSLO #1	Action: Same as above
13. Explain the coordination of transport of the patient by selecting the best available method(s) in conjunction with medical authority/protocol in the clinical environment.	What: Same as PSLO 12 Who: Preceptor and Instructor When: Same as PSLO 1	Expected: 80% of clinical experience evaluation forms as for PSLOs' 1	Same results as PSLO #1	Action: Same as above

14. Use a sequential and critical thinking process to gather the appropriate data, appraise its significance, take action, and evaluate the effects of the action upon the patient.	What: Same as PSLO 12 Who: Preceptor and Instructor When: Same as PSLO 1	Expected: 80% of clinical experience evaluation forms as for PSLOs' 1	Same results as PSLO #1	Action: Same as above
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Part IV. Survey Results

- NREMT Credentialing Exam: 2013 Outcome 90% first time pass rate 2014 Outcome 84% first time pass rate 2015 Outcome 94% first time pass rate.
<https://www.nremt.org/nremt/downloads/2015-First-Pass-Rate.pdf>

Part V. Quantitative Indicators for Program Review

University of Hawaii 3 years of ARPD Report

Link to 2013 ARPD DATA

<https://www.hawaii.edu/offices/cc/arpd/instructional.php?action=analysis&year=2013&college=KAP&program=65>

Link to 2014 ARPD Data

<https://www.hawaii.edu/offices/cc/arpd/instructional.php?action=analysis&year=2014&college=KAP&program=65>

Link to 2015 ARPD DATA

<https://www.hawaii.edu/offices/cc/arpd/instructional.php?action=analysis&year=2015&college=KAP&program=65>

Part VI. Analysis of the Program

1. Current Situation - **Internal**

A. Demand Indicators

The program remained unhealthy in the 2012–2013, 2013-2014, and 2014-2015 reports due to the shortage of EMS providers, mostly consisting of MICT certified providers, within the health care community of the State.

- The number of students accepted into the program is limited by the ability of instructors to manage students in the lecture/lab and clinical settings.

Data from the US department of Labor (<http://www.bls.gov/ooh/healthcare/emts-and-paramedics.htm>) for years 2014-2024 outlook for EMTs and paramedics shows a 10-year national job growth rate of 24%.

The Hawaii Health Careers site indicates 20 annual openings each year from 2008 through 2018 <http://dlir.state.hi.us/labor/healthcare/occdetail.cfm?onet=29-2041.00>. This figure does not appear accurate as site list only statewide and Honolulu projections. Call volumes are increasing across the state and as with all states Hawaii's population is aging. These two factors along with expected attrition rates among the states EMS providers are leading

reasons KCC EMT program graduates consistently find employment with the state's EMS providers.

B. Efficiency and Effectiveness Indicators

The program efficiency and effectiveness indicators show the program to be "cautionary." The average class size has doubled from the 2012-2013 period to the 2014-2015 period. However the successful completion percentage has decreased 5% between these same two periods.

C. Perkins Core Indicators

Five of six core indicator goals were met showing that the program is graduating students, but not functioning to meet the labor force demand. This figure is incongruent with the knowledge instructors have of students successfully completing the EMT course being placed in jobs.

D. External Review:

There has been no external review of the EMT program

Part VII. Tactical Action Plan

Program Action Plan

1. Improvement Strategies

Review program with KCC EMS Department Medical Director and EMT instructors

- Align the delivery of EMT course material
- Develop external review mechanisms such as employer and graduate surveys

2. Performance Measures

The current action plan is to create and maintain two main performance measures:

1. Articulate the consistency between EMT courses being delivered at different training sites
2. Provide a mechanism, by which, accurate post course data can be obtained.

Part VIII. Resource and Budget Implications

- Professional Developments – All full time faculty pending funding should attend the following events:
 - National Association of Emergency Medical Service Educators Simulation Workshop
 - National Association of Emergency Medical Services Educators EMS Instructor Course
 - Queens Trauma Symposium or NAEMT National Trauma Symposium
- Technology Infrastructure - Obtain funding for high definition manikins and develop multi-perspective video recording of scenario training sessions.

2016-2019 - three years strategies:

To meet the demand of workforce training, the current cadre of EMT instructors will need to have sufficient adjunct support. This will require financial support from the DOH for skills

practice sessions where the instructor student ratio is 1:4 optimal to a maximum of 1:6. This support assures the students will receive sufficient direction and repetition of skills practice. Maintaining these ratios is the best way to prepare students for the National Registry skills evaluation.

Financial support for the EMT program includes:

1. Replacing outdated equipment
2. Improvement to storage capacity at all training sites
3. Integration of smart classroom technology at all training sites

Currently, the program is fully staffed with three full time faculty and one staff instructor, and does utilize additional adjunct and preceptor support from local EMS agencies to support the need for skills practice and evaluation.