

Appendix I (Part 1) (rev 8/2017)
Program/Discipline Assessment Results

**Program/Discipline Assessment Results Form for
 Paramedic – PAM 533.2 Associate Degree; 534.2 Certificate Program
 (program/discipline)
 Academic Year 2017-2018**

Specific Program/Discipline Objective to be Assessed	The graduate of the PAM Program will communicate effectively with patients, family members and other health care providers.
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Number of faculty who participated	2
Number of faculty who could have participated	2
Number of students participating	
Face-to-face sections	12
On-line sections	0

Results

	Direct Measure	Indirect (or second) Measure
Results Face-to-face sections	<p>Students were to complete appropriate assessments on medical and trauma patients during their clinical experience. The rating scale for student performance for Psychomotor Skills on the Shift Evaluation Form was determined by the program director, faculty, medical director and advisory board as follows:</p> <ol style="list-style-type: none"> 1. Unsatisfactory/ Requires Assistance – Needs more training 2. Tentative/ Needs Guidance 3. Competent/ Minimal Prompting – Entry level Paramedic 4. Good/ No prompting 5. Excellent – Experienced level Paramedic <p>The Skill Set scores were recorded and compiled for Professionalism/Attitude, Interview Skills and Physical Exam. Each student was required to attain a minimum point average of 3.0. The results were: Professional Attitude: 4.56 Phase/Shift Objectives: 4.37 Psychomotor: 4.25</p>	<p>Indirect measurement utilized an analysis of the paramedic preceptor’s evaluation of the students’ CACC Team Leader Evaluation Form. The student’s performance was to demonstrate competency in Interviewing Skills, Physical Exam, Field Impression, Therapeutic Plan and Leadership. Students were evaluated via the following standards:</p> <ol style="list-style-type: none"> 1. Interview - Completed Comprehensive Patient Assessment: Initiated/Not Initiated; Timely/Not Timely; Accurate/Inaccurate; Complete/Incomplete. 2. Physical Exam – Completed an appropriate head to toe and or focused physical exam: Initiated/Not Initiated; Timely/Not Timely; Accurate/Inaccurate; Complete/Incomplete. 3. Field Impression – Formulated an appropriate field impression and selected the proper protocol: Set Priorities/No Prioritization;

		<p>Timely/Not Timely; Accurate/Inaccurate; Complete/Incomplete. 4. Therapeutic Plan – Interventions performed were complete, satisfactory and timely: Set Priorities/No Prioritization; Timely/Not Timely; Accurate/Not Accurate; Complete/Incomplete.</p> <p>5. Leadership – Set priorities, directed team and adapted to evolving information: Organized/Disorganized; Adaptive/Rigid; Accurate/Inaccurate; Complete/Incomplete. The Skill Set scores were recorded and compiled, 1 point for a positive skill evaluation; 0 for a negative skill evaluation. Each student was required to attain a score of 4.0 on 90% or greater of their Team Leads. The results were: Professional Attitude – 4.7 Phase/Shift Objectives – 4.5 Psychomotor – 4.4</p>
On-line sections	N/A	N/A
According to your results, is the objective being achieved? (provide explanation)	Yes. Student average was above the minimum required score of 3.0.	Yes Student average was above the minimum required score of 4.0.
Strengths and Weaknesses of student learning uncovered during this assessment	<p>Strength - Students scored well above the expectation of an entry level paramedic. Classroom and laboratory experiences are providing a solid base for their clinical experiences.</p> <p>Weakness – None noted</p>	<p>Strength - Students scored well above the expectation of an entry level paramedic. Classroom and laboratory experiences are providing a solid base for their clinical experiences.</p> <p>Weakness – None noted</p>
Action(s) to be taken by faculty for improvement of learning	None indicated at this time.	None indicated at this time.

Submitted/prepared by: Neil R. Jones

Appendix I (Part 2) – Follow-ups After Taking Action

Evidence that assessment results were used to inform decisions regarding instruction, curriculum and resource allocation.

Actions Taken	Evidence of Improved Learning	Use of results
It is recommended that more time be dedicated to preparation of psychomotor skills to increase the overall average score to a 4.5. Although students scored higher than the threshold, there is always room for improvement. Perhaps clinical examples and everyday examples should be stressed.	<p>The benchmark for success was set at a value of 3.0. or more students correctly answering each question.</p> <p>Assessment results were analyzed to determined to be above the accepted threshold.</p>	<input checked="" type="checkbox"/> instruction <input checked="" type="checkbox"/> curriculum <input type="checkbox"/> resource allocation
Click here to enter text.	Click here to enter text.	<input type="checkbox"/> instruction <input type="checkbox"/> curriculum <input type="checkbox"/> resource allocation
Click here to enter text.	Click here to enter text.	<input type="checkbox"/> instruction <input type="checkbox"/> curriculum <input type="checkbox"/> resource allocation
Click here to enter text.	Click here to enter text.	<input type="checkbox"/> instruction <input type="checkbox"/> curriculum <input type="checkbox"/> resource allocation

Submitted/prepared by:

Examples for Actions and Use of Results

Instruction:

- Experiment with alternative teaching formats (e.g., problem-based learning)
- Provide additional in-class or out-of-class assignments
- Require an early non-graded first draft and provide feedback

Curriculum:

- Revamp departmental curriculum to require more oral and written communication
- Examine prerequisite courses, change course sequence
- Discuss assessment findings with colleagues in departments with similar goals

Resource Allocation

- Provide additional resources for students (DVD's, more lab time, reference materials)
- Require use of existing campus resources (Learning Commons, Job Placement & Career Services, etc.)
- Use assessment results to justify budget requests