

# EMT Academic Audit

SELF-STUDY REPORT MOTLOW STATE COMMUNITY COLLEGE

FALL 2016 – SPRING 2017 Submitted by Lucy Craig, Academic Audit Coordinator

## Introduction

In the Fall of 2012, Motlow State Community College implemented a new A.A.S. program entitled Emergency Medical Services, which was housed within the Nursing and Allied Health Department. In 2014, the program's curriculum was revised and the name changed to A.A.S. in Paramedic. Simultaneously, new technical certificate programs in Emergency Medical Technician (EMT) and Advanced Emergency Technician (AEMT) were created. Approval for these programs was granted by the Tennessee Board of Regents (TBR) and the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC). (see Appendix, Attachment 1) Emergency Medical Services remains as the descriptive title to all programs offered and continues to be housed within the Nursing and Allied Health Department. The overall program is designed as a step-by-step pathway to the A.A.S. Paramedic degree. This self-study concerns the Emergency Medical Technician (EMT) Technical Certificate program.

The EMT Technical Certificate is a one-semester, 16-hour program that has been offered in the 2014, 2015, and 2016 Fall semesters. Thus, this self-study covers three single-semester cohorts of students over a period of three academic years. The program is housed at MSCC's Fayetteville campus, and classes are offered at both the Fayetteville and McMinnville campuses.

The EMT 16 hour program of study includes lecture, lab, clinical, and field internship training. Upon successful completion of the program, graduates sit for the practical certification examination administered by the Tennessee Division of Emergency Medical Services and certified by the National Registry of Emergency Medical Technicians and for the written examination administered by the National Registry of Emergency Medical Technicians, in order to obtain certification and licensure. The newly-licensed and certified EMT may then choose to enter the workforce directly or may choose to continue on to the Advanced Emergency Medical Technician (AEMT) program. (see http://www.mscc.edu/programs/emtcertificate.aspx and http://www.mscc.edu/documents/ems/ems-handbook.pdf)

The three completed cohorts in the EMT program have had an average class size of 26, have been an average of 41% female and 59% male, and have been made up of an average of 22% of non-traditional students. (see Appendix, Attachment 2)

The Dean of Nursing and Allied Health, the Director of Emergency Medical Services Education, the EMT faculty, the Fall 2016 cohort of EMT students, the Director of Institutional Effectiveness and Research, the Academic Audit Coordinator, and the Vice President for Quality Assurance and Performance Funding were all involved in the self-study process. This involvement ranged from acting in advisory roles to gathering statistical information, to attending meetings, completing surveys, and brainstorming over pizza lunches. This self-study report was drafted by the Academic Audit Coordinator in consultation with all EMS Education stakeholders; and revised by the Director of Emergency Medical Services Education, the Dean of Nursing and Allied Health, and the Vice President for Quality Assurance and Performance Funding; and finalized by the Academic Audit Coordinator.

## **Overall Performance**

MSCC underwent an administrative reorganization beginning in the latter part of Academic Year 2015 – 2016, which was finalized in the Fall semester of 2016. Prior to this reorganization, the Vice President for Academic Affairs was responsible for academic audits, and delegated audit responsibility among faculty whose disciplines were undergoing the audit process. As a result of MSCC's reorganization, a new position entitled Vice President for Quality Assurance and Performance Funding was created. Responsibility for academic audits was transferred to this Vice President, who created a new position within the Quality Assurance and Performance Funding unit entitled Academic Audit Coordinator. The Academic Audit Coordinator works closely with faculty and staff across disciplines and programs that have been audited or are currently undergoing audit to ensure continuous quality improvement.

The EMS Education faculty and staff at MSCC are rightfully proud of the fact that the complicated EMT certificate program is so clearly and logically explained to prospective students through its expertly written and curated program materials, which are easily accessed online via MSCC's website.

The academic audit self-study process has enhanced the confidence of the stakeholders in the EMT program as it has highlighted the many positive aspects of the program. These include meticulous attention to detail in program materials, faculty training, choice and training of program preceptors, and instilling a sense of ethical professionalism in students.

The academic audit self-study process has highlighted not only the positive aspects of the EMT program but also some aspects that could use improvement, as well. Collaboration clearly needs to be enhanced, not only among the EMT faculty but also with the students. Faculty realize that they need to meet more frequently and to document their discussions formally in those meetings to begin to build a library of best practices. This realization and commitment has been formalized as an improvement initiative. Faculty also realize that the students themselves can offer valuable insight into what is working well for them in the program and what changes can be made to enhance the student learning experience. Immediate action has begun to enhance opportunities for collaboration via informal studentfaculty lunches and the creation of a formal student survey document.

During the course of the self-study, faculty discussed their desire to recruit specifically from a pool of potential students that already had shown an interest in and desire to pursue a career in the healthcare field. A plan to accomplish this goal is formalized in this report as an improvement initiative.

A final issue discussed by faculty during the self-study was their concern about their ability to continue to handle the logistical challenges of sharing laboratory simulation aids successfully with the nursing program as the EMT program grows and expands to additional campuses. It was decided that the final improvement initiative should be formalized as a commitment to seek funding actively for the needed equipment.

## Performance by Focal Area

## Focal Area 1: Learning Outcomes

The curriculum utilized in the EMT program is identical to the Tennessee Board of Regents common curriculum used at all community colleges in the state. This curriculum was developed by a statewide faculty curriculum committee, taking into consideration best practices emphasized by the Tennessee Department of Health, Division of Health Licensure and Regulation, Office of Emergency Medical Services, which is the state regulatory agency, as well as the National Registry of EMT's (NREMT), which tests and certifies qualified graduates. (see Appendix, Attachment 3)

## EMT Medical Emergencies and EMS Operations (EMSB 1601)

This is a six-credit-hour lecture course taken in the first half of the semester-long EMT program. Class meets twice a week for six hours. The Course Outline provided to students lists the common curriculum learning outcomes verbatim as "Student Learning Outcomes." Additionally, the Course Outline lists five "Program Learning Outcomes" and three "Course Objectives." These additional outcomes/objectives stress professionalism and ethics, topics not covered in the common curriculum learning outcomes but nevertheless important to the integrity and reputation of MSCC's EMS program and its graduates. Assessments in the course are continual and consist of quizzes, tests, homework and classwork assignments, a research project, and a final exam. (see Appendix, Attachments 4 and 5)

## EMT Medical Skills Lab (EMSB 1101)

This is a one-credit-hour hybrid lab course taken during the first half of the semesterlong EMT program. Class meets twice a week for one hour. The Course Outline provided to students lists the common curriculum learning outcomes verbatim as "Student Learning Outcomes." Additionally, the Course Outline lists five "Program Learning Outcomes" and three "Course Objectives." These additional outcomes/objectives stress professionalism and ethics, topics not covered in the common curriculum learning outcomes but nevertheless important to the integrity and reputation of MSCC's EMS program and its graduates. Assessments in the course are continual and consist of critical thinking exercises, research activities, completion of skills and paperwork, and participation in discussion boards. (see Appendix, Attachments 5 and 6)

## EMT Clinical (EMSB 1111)

This is a four-credit-hour clinical course taken during the first half of the semester-long EMT program. The clinical skills are practiced at various sites. The Course Outline provided to students lists the common curriculum learning outcomes verbatim as "Student Learning Outcomes." Additionally, the Course Outline lists five "Program Learning Outcomes" and three "Course Objectives." These additional outcomes/objectives stress professionalism and ethics, topics not covered in the common curriculum learning outcomes but nevertheless important to the integrity and reputation of MSCC's EMS program and its graduates. Assessments in the Clinical are continual and in addition to assessment of clinical skills, affective skills and paperwork presentation are evaluated. (see Appendix, Attachment 7)

## EMT Trauma and Medical Emergencies (EMSB 1602)

This is a six-credit-hour lecture course taken in the second half of the semester-long EMT program. Class meets twice a week for six hours. The Course Outline provided to students lists the common curriculum learning outcomes verbatim as "Student Learning Outcomes." Additionally, the Course Outline lists five "Program Learning Outcomes" and three "Course Objectives." These additional outcomes/objectives stress professionalism and ethics, topics not covered in the common curriculum learning outcomes but nevertheless important to the integrity and reputation of MSCC's EMS program and its graduates. Assessments in the course are continual and consist of quizzes, tests, homework and classwork assignments, a research project, and a final exam. (see Appendix, Attachments 4 and 5)

## EMT Trauma and Medical Skills Lab (EMSB 1102)

This is a one-credit-hour hybrid lab course taken during the second half of the semesterlong EMT program. Class meets twice a week for one hour. The Course Outline provided to students lists the common curriculum learning outcomes verbatim as "Student Learning Outcomes." Additionally, the Course Outline lists five "Program Learning Outcomes" and three "Course Objectives." These additional outcomes/objectives stress professionalism and ethics, topics not covered in the common curriculum learning outcomes but nevertheless important to the integrity and reputation of MSCC's EMS program and its graduates. Assessments in the course are continual and consist of critical thinking exercises, research activities, completion of skills and paperwork, and participation in discussion boards. (see Appendix, Attachments 5 and 6)

## EMT Field Internship (EMSB 1112)

This is a four-credit-hour clinical course taken during the second half of the semesterlong EMT program. The clinical skills are practiced at various sites. The Course Outline provided to students lists the common curriculum learning outcomes verbatim as "Student Learning Outcomes." Additionally, the Course Outline lists five "Program Learning Outcomes" and three "Course Objectives." These additional outcomes/objectives stress professionalism and ethics, topics not covered in the common curriculum learning outcomes but nevertheless important to the integrity and reputation of MSCC's EMS program and its graduates. Assessments in the Clinical are continual and in addition to assessment of clinical skills, affective skills and paperwork presentation are evaluated. (see Appendix, Attachment 7)

Each EMT student participating in a Clinical is evaluated on a daily basis via a "Daily Evaluation Form" by a Preceptor at the clinical site. (see Appendix, Attachment 8)

Instructors visit individual students at their Clinical sites on a random and as-needed basis and complete an Instructor Site Visit Form. Beginning in the Spring 2017 semester, each instructor will be required to make a minimum of two site visits each semester to each clinical site. (see Appendix, Attachment 9)

Each EMT student participating in a Simulation Lab is evaluated by the instructor via a "Simulation Lab Evaluation Form." (see Appendix, Attachment 10)

## Focal Area 2: Curriculum and Co-Curriculum

As stated in Focal Area 1, the curriculum utilized in the EMT program is identical to the Tennessee Board of Regents common curriculum used at all community colleges in the state. This curriculum was developed by a statewide faculty curriculum committee, taking into consideration best practices emphasized by the Tennessee Department of Health, Division of Health Licensure and Regulation, Office of Emergency Medical Services, which is the state regulatory agency, as well as the National Registry of EMT's (NREMT), which tests and certifies qualified graduates. Although MSCC faculty in the EMT program were involved in initial curriculum design at the state level, they do not have individual authority to alter that curriculum design, nor do they have leeway in determining the order in which courses are offered. A one-semester certificate program is unique in that the curriculum must follow a set pattern of presentation and instruction. However, Faculty do have the ability to design their content delivery within those parameters, to choose textbooks, and to use a variety of teaching methods to ensure that program learning outcomes are met. (see Appendix, Attachments 4,5,6, and 7)

MSCC's EMT faculty has broader capability to adapt the co-curricular aspects of the program, specifically in clinicals and field internships. Off-campus clinical sites and preceptors are chosen by the Director of EMS Education. (see

http://www.mscc.edu/nursing/ems/pdf/preceptor.pdf) In so doing, the Director of EMS Education relies not just upon professional judgment based on communication and observation, but upon the evaluations of students in the program (see Appendix, Attachment 11) and upon input from the MSCC EMS Education Advisory Committee. The Advisory Committee's membership includes representatives from EMS services from surrounding counties, representatives from medical centers/hospitals in surrounding counties, MSCC EMS program faculty, graduates of MSCC's EMS programs, a State of Tennessee EMS consultant, a public member, MSCC's Director of EMS Education, and MSCC's Dean of Nursing and Allied Health. (see Appendix, Attachment 12)

As stated in the introduction to this self-study, EMS Education is housed within the Department of Nursing and Allied Health. Departmental faculty meetings are held once per year for all staff and faculty, and twice per semester for full time faculty and staff. All departmental meetings are attended by the Director of EMS Education and the Paramedic Coordinator as faculty and administrative representatives of the division of EMS Education. (see Appendix, Attachment 13)

In response to an unacceptably low pass rate on the NREMT examination by the first (2014) cohort in the EMT program, MSCC's Department of Nursing and Allied Health drafted an Institutional Effectiveness (IE) Action Plan to address the issue. The Plan's stated goal is to maintain an NREMT pass rate within 10 points of the national average. The individuals tasked with the goal are the EMS program director and EMT faculty. In an effort to better the 57% pass rate by the 2014 EMT cohort, faculty altered the curriculum to allow for additional instruction in adaptive testing preparation, as well as increased emphasis on specific NREMT testing categories. This effort proved to be successful, as evidenced by the 75% pass rate on the NREMT by the 2015 cohort, a rate 5 percentage points higher than the national average. In careful analysis and interpretation of these 2015 scores, it was determined that students consistently scored the lowest on the In Trauma and Operations sections of the exam. This finding has resulted in a renewed push on the part of EMT faculty to revise their teaching methods in these areas, and to utilize additional resources and materials. Faculty plan to continue to monitor the NREMT outcomes and make necessary adaptations to the curriculum and their teaching methods to ensure a consistently high pass rate. (see Appendix, Attachment 14)

Curricular and co-curricular requirements are clearly explained to prospective and current students in the EMT program via a number of different venues. The MSCC website home page contains a link to the Department of Nursing and Allied Health. (see http://www.mscc.edu/nursing/index.aspx) From that page, students can link to the home page of EMS Education. (see http://www.mscc.edu/nursing/ems/index.aspx) A link to "EMT Certificate" on the EMS Education page takes the student to the home page of the EMT program. (see http://www.mscc.edu/programs/emt-certificate.aspx) This page offers an overview of the program and links to "Program Checklist,"(see

http://www.mscc.edu/nursing/ems/emt-certificate-checklist.aspx), "Application Procedure," (see http://www.mscc.edu/nursing/ems/emt-certificate-application.aspx), "EMS Program Application," (see https://www.emailmeform.com/builder/form/7d63O1T16s7), "Performance Criteria," (see http://www.mscc.edu/nursing/ems/emt-certificate-performance.aspx), "Clinical Agency Requirements," (see http://www.mscc.edu/nursing/ems/emt-certificate-clinicalrequirements.aspx), "Program Costs," (see http://www.mscc.edu/nursing/ems/emt-certificatecosts.aspx), "Course Checklist," (see http://www.mscc.edu/documents/programs/checklists/emt-certificate.pdf), and a 47-page-long "Student Handbook." (see http://www.mscc.edu/documents/ems-handbook.pdf)

## Focal Area 3: Teaching and Learning Methods

Potential instructors in the EMT program present a teaching demonstration to the Director of EMS Education as part of their application and interview process. Those with little or no teaching experience are initially placed as teaching assistants and/or skills instructors. All lead instructors have significant teaching experience. A student to instructor ratio is maintained at 8:1, which allows experienced instructors to mentor the less experienced teaching assistants. All full time and adjunct instructors are formally evaluated by the Director each year and are subject to unscheduled classroom observations each semester. The Director is evaluated yearly by the Dean of Nursing and Allied Health. (see Appendix, Attachment 15)

The EMS services and hospitals at which EMT students perform their clinicals and internships are known as "preceptors," and are provided with a "Paramedic Preceptor Handbook" for each specific department in which the students are working. Direct, personal training is first provided by EMS Education staff to the managers of each department. The department managers then provide training to their staff based on the handbook. (see http://www.mscc.edu/nursing/ems/pdf/preceptor.pdf)

EMS Education faculty meet each summer to discuss scheduling and curriculum issues, and EMT instructors meet informally with the Director before the commencement of each semester. In the past, no minutes were taken at these meetings. During the course of this self-study, faculty realized the importance of more frequent meetings and of documenting and keeping records of their discussions regarding teaching methods, best practices, and student success. Accordingly, faculty determined that an Improvement Initiative proposed by this self-study report should address this issue. (see Appendix, Attachment 16)

A wide variety of teaching methods are utilized in MSCC's EMT program. As stated earlier in this report, students take two lecture courses, two hybrid laboratory courses, and two clinicals in the one-semester program. In addition to a traditional textbook, students are exposed to training videos, laboratory simulation videos, "smart" simulated adult and pediatric dummies (amazingly similar to living, breathing humans), online discussion boards, ambulance ride-alongs, emergency room procedures, and a variety of instructors, mentors, and evaluators in each of those settings.

Each instructor is properly licensed and certified and maintains his/her credentialing via the continuing education requirements of the appropriate credentialing body.

The EMT program maintains a close association with MSCC's office of Institutional Effectiveness and Research to keep a current and reliable statistical analysis of the students in the program, their progress within the program, completion rates, and successful NREMT

certification rates. As stated earlier, an ongoing institutional effectiveness plan is in place to evaluate and adjust instructional methods based upon these analyses. (see Appendix, Attachment 14)

Instructors concerned with an individual student's academic progress during the course of the semester may complete a Student Status Report which reflects academic counseling session(s) with the student. (see Appendix, Attachment 17) Additionally, students who appear to be struggling with focus, self-discipline, and self-reflection may be asked to fill out a Student Goals form which asks the student to reflect upon 5 and 10 year goals and their own strengths and weaknesses. (see Appendix, Attachment 18) Students with professional behavioral issues are subject to a Behavioral Counseling Form. (see Appendix, Attachment 19) The utilization of any of these three documents may then be followed by a written Student Action Plan. (see Appendix, Attachment 20) The purpose of these actions is not only to maximize student success, but to ensure the integrity and reputation for excellence of the program itself.

Students in the EMT program have the opportunity to evaluate it both formally and informally. Informal input and evaluation have taken place since the advent of the program in 2014, via periodic lunches with faculty where students are encouraged to give feedback on various aspects of the EMT program. During the course of this self-study in the Fall of 2016, the faculty determined that it would be valuable to document the dialog that takes place at these evaluative lunches and, rather than wait to begin that documentation as part of an Initiative for Improvement in this report, began documentation immediately. (see Appendix, Attachment 21) Similarly, faculty determined that it would be desirable for students to begin formal evaluation of the program, rather than to make that process part of an Initiative for Improvement that would not become operational until after the audit process completed in Spring 2017. Accordingly, the Fall 2016 cohort participated in a formal evaluation at the end of the semester. (see Appendix, Attachment 11) Faculty agree that both of these processes should become a permanent aspect of the program to ensure continuous quality improvement.

## Focal Area 4: Student Learning Assessment

EMT students enrolled in the two required lecture courses (EMSB 1601 and 1602) are assessed throughout the one-semester program via homework assignments, quizzes, tests, a research project, and a final exam. These courses are taught by MSCC instructors in the EMS Education division of the Department of Nursing and Allied Heath. (see Appendix, Attachments 4 and 5)

EMT students enrolled in the two required laboratory courses (EMSB 1101 and 1102) are assessed throughout the one-semester program via participation in discussion boards, critical thinking exercises, research activities, and completion/mastery of skills and paperwork. These courses are taught by MSCC instructors in the EMS Education division of the Department of Nursing and Allied Health. (see Appendix, Attachments 5 and 6)

The EMS Education Student Handbook outlines the grading scales and evaluation procedures utilized in both lecture and laboratory/clinical courses in the EMT program. (see http://www.mscc.edu/documents/ems/ems-handbook.pdf page 30)

The EMS Education Student Handbook describes the student conferencing procedure. It states that instructors are encouraged to initiate a meeting at least once and perhaps twice with each student during the course of the one-semester program. The purpose of the conference from the instructor's point of view is to provide an evaluation of the student's classroom and clinical performance, to make recommendations for improvement, and to address student concerns. The purpose of the conference from the student's point of view is to discuss the instructor's evaluation and recommendations, to develop a plan for improvement if necessary, and to discuss concerns. Additionally, students are encouraged to initiate meetings with instructors at any point in the semester should they feel the need. (see http://www.mscc.edu/documents/ems/ems-handbook.pdf page 40)

EMT students enrolled in the two required clinical and field internship courses (EMSB 1111 and 1112) are assessed via demonstration of mastery of clinical skills, paperwork completion skills, and affective skills. These courses are taught both by MSCC instructors in the EMS Education division of the Department of Nursing and Allied Health and by "preceptors," who are licensed, working professionals in the field employed by local EMS services and health care facilities. The MSCC instructors make periodic visits to the clinical and field internship sites, completing a Site Visit Form assessing each student individually on topics such as the student/preceptor relationship, the student's professionalism/attitude/affect, the student's engagement, and the environment of the site itself. (see Appendix, Attachment 9) During the student's internship, a Simulation Lab Evaluation Form is completed daily by the preceptor. (see Appendix, Attachment 10) As the student participates in the required phases of ambulance training, the preceptor assesses the student via a specific form for each phase. (see http://www.mscc.edu/nursing/ems/pdf/preceptor.pdf, pages 30 -40) As stated earlier in this report, preceptors are provided with a "Paramedic Preceptor Handbook" and a trained in its use by EMT faculty. (see http://www.mscc.edu/nursing/ems/pdf/preceptor.pdf)

Faculty acknowledge the importance of working collaboratively to ensure that best practices are utilized regarding student assessment in all areas of the EMT program. Accordingly, the Improvement Initiative discussed in Focal Area 3 of this report will include a commitment to continuous quality improvement in the area of student assessment, as well as the areas of teaching methods and student success. This report previously referenced the ongoing institutional effectiveness (IE) plan put into place to address improvement issues raised by student performance on the NREMT exam and to ensure faculty's continuing commitment to the precepts of the plan. (see Appendix, Attachment 14)

### Focal Area 5: Support

MSCC maintains four campuses, which cover an eleven-county area of southern middle Tennessee. The EMT program is offered on two of those campuses, Fayetteville and McMinnville. There is student demand for an expansion of the program to the Smyrna campus, however, due to space limitations, that expansion will not be possible until the opening of a third academic building on the Smyrna campus, projected for 2019.

The EMT program is fortunate to be able to share sophisticated and expensive laboratory equipment with MSCC's well-established nursing program. The EMS Education budget is sufficient at this time, although there is a constant need to purchase new equipment and upgrade existing equipment and materials.

Enrollment has remained consistently strong since the inception of the program, and at this time there is no concern that demand will diminish. (see Appendix, Attachments 2 and 22) Many students in the EMT program consider it to be the first step in their academic progress toward an AAS in Paramedic. (see Appendix, Attachment 23)

Faculty have determined that there would be value in recruiting students from local high schools and have chosen that topic as an improvement initiative in this audit process.

## **Potential Improvement Initiatives**

In the course of this self-study, faculty identified three particular aspects of the EMT program that should be addressed to ensure continuous quality improvement.

1. The first of these initiatives deals with student recruitment. Although the EMT program is currently both competitive and selective in student admissions, faculty feel that early recruitment among high school students is lacking. Several of the public high schools in MSCC's service area have chapters of an international student organization known as "Future Health Professionals," known by the acronym "HOSA." MSCC's EMT faculty propose the development of a recruitment program to work in conjunction with local HOSA chapters in an effort to recruit quality students with a keen interest in the healthcare field. Such an initiative will require faculty members to coordinate with HOSA faculty sponsors on the high school campuses to determine the optimal times for MSCC EMS Education faculty and staff to make recruitment visits. Follow-up visits and communication with individual interested high school students will be necessary to build a sufficient relationship for successful enrollment into the EMT program to occur. Documents will be created to enable faculty and staff to keep clear and concise records of their progress in the initiative. MSCC's Office of Institutional Effectiveness and Research will aid in maintaining a database of HOSA recruited students who enter into the EMT program. This initiative will be carried out initially in conjunction with Lincoln County High School and Tullahoma High School

2. The second proposed initiative for improvement deals with the necessity of regular, documented EMT faculty meetings to ensure an ongoing collaborative effort toward continuous

quality improvement. As stated earlier in this report, faculty realized during the course of the self-study that there was a definite weakness that needed to be addressed in this area. If faculty are to utilize the most effective teaching methods, ensure that curricula remain current to meet students' learning objectives, and effectively assess students, establishment of a collaborative learning community among faculty is key. Accordingly, faculty are committed to hold formal, documented meetings twice per semester. The meetings will have a written agenda and minutes will be taken and transcribed for later dissemination. Teaching effectiveness, student progress/assessment, and curriculum will be agenda items for discussion at each meeting. At each subsequent meeting, faculty will discuss the effectiveness of the implementation of ideas from the previous meeting. The EMS Education division of the Department of Nursing and Allied Health will have the responsibility for maintaining a permanent record of each meeting and will serve the institutional memory role for this initiative. Gathering faculty from various campuses to meetings should not prove to be a difficulty, as each campus has a designated Skype meeting room, which may be utilized for this purpose.

3. The final proposed initiative for improvement recognizes the necessity to maintain sufficient equipment to ensure continuous quality improvement in the EMT program. It is the desire of the faculty that simulation aids be present and available for use by EMT students at all campus locations that host EMT courses. As stated earlier in this report, the EMT program is fortunate to be able to share state-of-the-art simulation aids with MSCC's nursing program. This sharing presents some logistical challenges that could be alleviated by an increase in the inventory of the simulation aids. The EMT faculty is committed to participate in the yearly MSCC budget process to articulate budget initiatives aimed at meeting this goal. Additionally, faculty is committed to looking to other sources such as grants from both the private and public sector. Faculty will discuss and address their simulation lab needs at each faculty meeting, and the Director of EMS Education will take the lead in discovering possible funding sources, drafting budget initiatives, and grant writing. The Dean of Nursing and Allied Health will aid the Director of EMS Education in this regard.

The Matrix of Improvement Initiatives is on the following page.

Matrix of Improvement Initiatives

Initiative	Objective	Who	Performance Indicator	When
1 Recruitment of High School Students	To recruit high school students from HOSA chapters into MSCC's EMT certificate program	EMT Director and faculty	Coordination of recruitment visits to HOSA chapters at Lincoln County and Tullahoma High School	Fall 2017 and ongoing
		EMT Director, faculty and staff	Creation of documents and forms for recruitment recordkeeping	Complete by Fall 2017
		MSCC Director of Institutional Effectiveness and Research	Maintenance of statistical database of HOSA students in EMT program	Ongoing
2 Formal EMT Faculty Meeting twice per	To create and maintain a collaborative learning community among faculty and to establish a catalog of best practices	EMT Director and staff	Schedule meetings, prepare agenda	Twice per semester, beginning Fall 2017
semester		EMT faculty	Attend and participate in meetings	Ongoing
		EMT staff	Take and preserve meeting minutes	Ongoing
3 Maintenance of Sim Lab inventory at	To maintain a sufficient inventory of sim lab equipment at each EMT teaching site	EMT Director and faculty	Participate in MSCC budget initiative process	Spring 2018 and ongoing
all EMT teaching sites		EMT Director and Dean of Nursing and Allied Health	Search for additional funding sources and write grants	Ongoing

### APPENDIX

- Attachment 1 TBR and SACSCOC letters
- Attachment 2 EMT student demographics, graduation rates, certificate award rates
- Attachment 3 TBR EMT common curriculum
- Attachment 4 Course outline EMSB 1601, 1602
- Attachment 5 EMT class schedule
- Attachment 6 Course outline EMSB 1101, 1102
- Attachment 7 Course outline EMSB 1111, 1112
- Attachment 8 EMT Daily Evaluation Form
- Attachment 9 EMT Instructor Site Visit Form
- Attachment 10 EMT Simulation Lab Form
- Attachment 11 EMT Student Survey Fall 2016
- Attachment 12 EMS Advisory Committee minutes
- Attachment 13 Departmental meeting minutes
- Attachment 14 EMT Institutional Effectiveness plan
- Attachment 15 EMS hiring statement, faculty evaluation forms
- Attachment 16 EMT faculty, staff meeting minutes
- Attachment 17 EMS Student Status Report
- Attachment 18 EMS Student Goals Form
- Attachment 19 EMS Student Behavior Counseling Form
- Attachment 20 EMS Student Action Plan
- Attachment 21 EMT student lunch meeting minutes
- Attachment 22 EMT Fall 2016 graduation confirmation
- Attachment 23 EMT AEMT progression document



# **Tennessee Board of**

(615) 366-4400

1415 Murfreesboro Road - Suite 350 - Nashville, Tennessee 37217-2833 FAX (615) 366-4464

July 23, 2012

Dr. Mary Lou Apple, President Motlow State Community College P.O. Box 8500 Lynchburg, TN 37352

Dear Dr. Apple:

The academic action listed below has been reviewed by TBR staff and approved by the Tennessee Board of Regents at the quarterly meeting on June 29, 2012, as required in TBR Policy: 2:01:01:00, Academic Program Approval. Since authorization from the Tennessee Higher Education Commission is not required, Motlow State Community College is approved to implement the academic action as proposed.

• Establish a new Associate of Applied Science (A.A.S.) in Emergency Medical Services (Effective: Fall 2012)

Should you have any questions concerning this Board action, please contact Dr. Kay Clark, Interim Vice Chancellor for Academic Affairs at 615-366-4482.

Sincerely,

John G. Morgan Chancellor

C: Dr. Kay Clark, TBR Dr. Richard Rhoda, THEC

Austin Peay State University - East Tennessee State University - Middle Tennessee State University - Tennessee State University Tennessee Tech University - University of Memphis - Chattanooga State Community College - Cleveland State Community College Columbia State Community College - Dyersburg State Community College - Jackson State Community College Motlow State Community College - Nashville State Community College - Northeast State Community College Pellissippi State Community College - Roane State Community College - Southwest Tennessee Community Volunteer State Community College - Walters State Community College - The Tennessee Technology Centers

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ATTACHMENT



### TENNESSEE BOARD OF REGENTS

1415 Murfreesboro Road, Suite 340 | Nashville, TN 37217-2835| Phone 615.366.4403 | Fax 615.366.3922 | www.tbr.edu

May 30, 2014

Dr. Mary Lou Apple, President Motlow State Community College P.O. Box 8500 Lynchburg, TN 37352

-Dear Dr. Apple:----

The academic actions listed below have been reviewed by TBR staff and approved by the Tennessee Board of Regents following a 30-day review period that ended on May 30, 2014, as required in TBR Policy: 2:01:01:00, *Academic Program Approval*. Since authorization from the Tennessee Higher Education Commission is not required, Motlow State Community College is approved to implement the academic actions as proposed.

• Revise the curriculum for the existing A.A.S. in Emergency Medical Services AND

Change the name from the A.A.S. in Emergency Medical Services to the A.A.S. in Paramedic (Effective: Fall 2014)

- Establish a new Technical Certificate (16 SCH) in Emergency Medical Technician (EMT) (Implementation: June 1, 2014)
- Establish a new Technical Certificate (16 SCH) in Advanced Emergency Medical Technician (AEMT) (Implementation: June 1, 2014)

Should you have any questions concerning this Board action, please contact Dr. Warren Nichols or Dr. Treva Berryman at 615-366-4482.

Sincerely, John G. Morgan Chancellor

JGM: tgb

cc: Dr. Tristan Denley, TBR

Aurulo Peay State University | East Tennessee State University | Middle Tunnessee State University | Tennessee Technological University | University of Memphis Chattanooga State Community Cellege | Cleveland State Community College | Columbia State Community College | Dyersburg State Community College | Leveland State Community College | Cleveland State Community College | Dyersburg State Community College | Leveland State Community College | Cleveland State Community College | Northeast State Community College | Pelliszippi State Community College | Reane State Community College | Southwest Tennessee Technology Centers

ATTACHMENT ( Dr. Kelley

#### **TENNESSEE BOARD OF REGENTS**

1415 Murfreesboro Road, Suite 340 | Nashville, TN 37217-2833 | Phone 615.366.4403 | Fax 615.366.3922 | www.tbr.edu

August 12, 2014

Dr. Mary Lou Apple, President Motlow State Community College P.O. Box 8500 Lynchburg, TN 37352

Dear Dr. Apple,

The academic action listed below has been reviewed by the TBR staff and approved by the Tennessee Board of Regents following a 30-day review period that ended on July 31, 2014. As required in TBR policy: 2:01:01:00, Academic Program Approval. Since authorization from the Tennessee Higher Education Commission is not required, Motiow State Community College is approved to implement the academic action as proposed.

Revise the curriculum for the existing Technical Certificate in Paramedic (changing from 32 to 43 SCH) to ٠ be embedded within the existing A.A.S. in Paramedic (Effective: Fall 2014)

Should you have any questions concerning this Board action, please contact Dr. Warren Nichols or Dr. Treva Berryman at 615-366-3937.

John G. Morgan

Chancellor

JGM: klh

cc: Dr. Warren Nichols, TBR Dr. Tristan Denley, TBR Dr. Richard Rhoda, THEC

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Austin Perry State University | East Teanever State University | Middle Teanever State University | Teanever State University | Teanever State University | Teanever Chattanuwgo State Community College | Claveland State Community College | Columbia State Community College | Dersburg State Community College | Jackson State Community College Motion State Community College | Naciville State Community College | Northeast State Community College | Pellissippi State Community College | Reare State Community College South on Tennessee Community College | Volunteer State Community College | Walters State Community College | Tennessee Colleges of Applied Technology



ACHMENT |

October 23, 2014

Dr. MaryLou Apple President Motlow State Community College P.O. Box 8500 Lynchburg, TN 37352-8500

Dear Dr. Apple:

Thank you for your letter of September 9, 2014, notifying the Commission of your plans to offer the Technical Certificate in Paramedic, effective fall 2014.

The new certificate is embedded in the A.A.S. in Paramedic and includes general education core courses and EMS training coursework that was previously approved and offered through the Nursing and Allied Health Department. No new faculty or resources are required for the new certificate program. The new certificate program has received approval from the Tennessee Board of Regents and does not represent a significant departure from the institution's approved curriculum.

#### We accept notification and request no further information.

Best regards,

Belle J. Wheelow

Belle S. Wheelan, Ph.D. President

BSW/JWS:efk

cc: Ms. Sylvia Collins, Director of Research, Planning, and Communication Dr. Nuria M. Cuevas

1866 Southern Lane • Decatur, Georgia 30033-4097 • Telephone 404/679-4500 • Fax 404/679-4558 www.sacscoc.org

ATTACHMENT 1



August 25, 2016

Dr. Anthony G. Kinkel President Motlow State Community College P.O. Box 8500 Lynchburg, TN 37352-8500

Dear Dr. Kinkel:

This letter will verify that Motlow State Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award Associate's degrees. The following certificate programs are included in the scope of that accreditation:

Emergency Medical Technician Certificate (16 credit hours) Emergency Medical Technician Advanced Certificate (16 credit hours) Paramedic Certificate (43 credit hours)

Sincerely,

Sauch amotion

Sarah L. Armstrong, Ph.D. Director of Substantive Change

SLA/efk

cc: Dr. Scott Cook, Vice President for Quality Assurance and Performance Funding Dr. Nuria M. Cuevas

1866 Southern Lane • Decatur, Georgia 30033-4097 • Telephone 404/679-4500 • Fax 404/679-4558

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### **Emergency Medical Technician Student Demographics**

		Gender													
									Tra	ditional					
	Beginning Cohort		Female		N	Male		Traditional (under age 25)		(age 25 or older)		Fayetteville Campus		McMinnville Campus	
	#		#	%	#	%	#	%	#	%	#	%	#	%	
Fall 2014		23	8	35%	15	65%	18	78%	5	22%	17	74%	6	26%	
Fall 2015		27	9	33%	18	67%	19	70%	8	30%	15	56%	12	44%	
Fall 2016		29	15	52%	14	48%	25	86%	4	14%	21	72%	8	28%	
Average		26	11	41%	16	59%	21	78%	6	22%	18	67%	9	33%	
*Designing Cohert	الممالميسم مغسمات بغرمم الممتألماء	-	100 110	4											

\*Beginning Cohort defined as students enrolled in EMSB 1101

#### **Emergency Medical Technician 1 Year Graduation Rate**

		* Beginning Cohort			Graduated w/ EMT C1			
			#		#	%		
Fall 2014				23	6	26%		
Fall 2015				27	20	74%		
Fall 2016				29				
** · ·	~ .							

\*Beginning Cohort defined as students enrolled in EMSB 1101

### Emergency Medical Technician Certificates Awarded

	2014-15	2015-16	
EMT Certificates	6	20	

# Technical Certificate Emergency Medical Technician [EMT] Course Summary

## College: TBR Community Colleges

Chattanooga State Community College Cleveland State Community College Columbia State Community College Dyersburg State Community College Jackson State Community College Motlow State Community College Northeast State Community College Southwest State Community College Volunteer State Community College Walters State Community College

## Academic Program Inventory Title: Emergency Medical Technician

## Program Prerequisites [if any]:

- Be admitted to the college
- Submit proof of medical malpractice insurance and health insurance as required.
- Complete a physical exam, along with all required vaccinations and/or titers.
- Meet other Admission requirements as stipulated in the Rules of the Tennessee Department of Health, Bureau of Health Licensure and Regulation, Office of Emergency Medical Services.

## **EMT Description:**

The EMT Program is delivered through a combination of classroom instruction (didactic and psychomotor) and clinical experience. Upon successful completion of the course, students are eligible to sit for the National Registry's written and practical examinations. Upon successful completions of examinations and other licensure requirements, the student will be eligible for the State of Tennessee EMT license. The EMT renders life support to patients at the scene of their injuries or illnesses and prepares these patients for transport to the hospital.

## Certificate:

		Semester Credit Hour Total	16
EMSB	1112	EMT Field Internship	1
EMSB	1111	EMT Clinical	1
EMSB	1102	EMT Trauma and Medical Skills Lab	1
EMSB	1101	EMT Medical Skills Lab	1
EMSB	1602	EMT Trauma and Medical Emergencies	6
EMSB	1601	EMT Medical Emergencies and EMS Operations	6

## **Professional Accrediting Body:**

Commission on Accreditation of Allied Health Education Programs (CAAHEP)

Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP)

## State Agency/Entity Oversight:

The Tennessee Department of Health, Division of Health Licensure and Regulation, Office of Emergency Medical Services

# Applicable Certifications/License or Industry-recognized Certificates [for each concentration]:

National EMS Certification is delivered by the National Registry of EMTs (NREMT) National Registry of EMTs (NREMT) written and practical examinations State of Tennessee Emergency Medical Technician license.

## **Translation Criteria for EMS clinical hours:**

48	96
97	144
145	192
193	240
241	288
289	336
	97 145 193 241

## **Architected Pathway**

The default sequence of courses, stated by semester, for this program of study is prescribed by the statewide faculty curriculum committee as the best model for the student to complete the academic award in an efficient and timely manner. To deviate from this sequence the student must request a waiver from the program director or appropriate designee. The student must be made aware by the program director or appropriate designee that deviation from this default pathway may result in a delay for completing the required courses for the academic award within the stated time frame.

(One semester Model) Semester I.

COURSE	TITLE	<u>Hrs</u>
EMSB 1601	EMT Medical Emergencies and EMS Operations	6
EMSB 1602	EMT Trauma and Medical Emergencies	6
EMSB 1101	EMT Medical Skills Lab	1
EMSB 1102	EMT Trauma and Medical Skills Lab	1
EMSB 1111	EMT Clinical	1
EMSB 1112	EMT Field Internship	1
	Semester Credit Hour Total	16

# Technical Certificate Emergency Medical Technician [EMT] Course Summary

## College: TBR Community Colleges

Chattanooga State Community College Cleveland State Community College Columbia State Community College Dyersburg State Community College Jackson State Community College Motlow State Community College Northeast State Community College Southwest State Community College Volunteer State Community College Walters State Community College

## Program(s) of study: Emergency Medical Technician

Course Title: EMSB 1601- EMT Medical Emergencies and EMS Operations

**Credit hours: 6** 

Lecture hours: 90

Contact/lab/clinical hours: 0

**Total contact hours: 90** 

Prerequisite: Admission to the EMT Program Corequisite: EMSB 1101, and EMSB 1111

Course Description: *EMT Medical Emergencies and EMS Operations* is the one of two lecture courses designed to provide the student with the knowledge of an entry-level Emergency Medical Technician (EMT). This course includes the following topics: Emergency Medical Responder-National Educational Standards competencies, roles and responsibilities of the EMT, workforce safety, wellness, public health, communications, documentation, EMS operations, medical/legal/ethical considerations, fundamental anatomy and physiology, life span development, fundamental pathophysiology, patient assessment, airway management, respiratory emergencies, cardiovascular emergencies, acute diabetic emergencies, abdominal

and gastrointestinal emergencies, urologic emergencies, anaphylactic reactions, and behavioral emergencies.

The outcomes presented in EMSB 1601, and EMSB 1602 may be taught in a coterminous format or in a two-semester format.

### **Learning Outcomes:**

Upon successful completion of this course, the student will demonstrate knowledge of:

Outcome 1: The student will apply fundamental knowledge relative to the multiple determinants of professional roles and responsibilities of the emergency medical services system as well as emergency medical services system operations as a pre-hospital emergency care provider.

Outcome 2: The student will demonstrate fundamental knowledge in EMS Systems, Research, Workforce Safety and Wellness, Documentation, Communication and Medical/Legal and Ethics.

Outcome 3: The student will identify the operational roles and responsibilities to ensure patient, public, and personnel safety in performing emergency care and operational aspects as a prehospital care provider.

Outcome 4: The student will apply a fundamental knowledge of anatomy and physiology, medical terminology, pathophysiology, and lifespan development relative to patient assessment in determining emergency medical care administration.

Outcome 5: The student will apply a fundamental knowledge in patient airway management including oxygen administration, airway adjunct application, and artificial ventilation.

Outcome 6: The student will demonstrate fundamental knowledge of pharmacology, medication administration, and emergency medications interventions available to treat patients as a prehospital care provider in the pre-hospital emergency care setting.

Outcome 7: The student will apply scene information to guide emergency management of patients by using scene size up information, patient findings related to primary and secondary assessment, patient history, and reassessment.

Outcome 8: The student will demonstrate a fundamental knowledge of age-related management of prehospital emergency care within the scope practice of a prehospital care provider caring for a medical patient including, but not limited to neurologic emergencies, gastrointestinal/urologic emergencies, immunologic emergencies, endocrine/hematologic emergencies, cardiovascular emergencies, respiratory emergencies, and toxicological emergencies.

Outcome 9: The student will apply fundamental knowledge to perform age-related management of shock and resuscitation.

Outcome 10: The student will demonstrate a fundamental knowledge of environmental emergencies, EMS operations, transport operations, lifting and moving patients, vehicle extrication, special rescue, incident management, and terrorism response.

Outcome 11: The student will demonstrate critical thinking skills to develop the ability to analyze and develop the most effective means of caring for age-related patient management of prehospital care for patients.

# Technical Certificate Emergency Medical Technician [EMT] Course Summary

### College: TBR Community Colleges

Chattanooga State Community College Cleveland State Community College Columbia State Community College Dyersburg State Community College Jackson State Community College Motlow State Community College Northeast State Community College Southwest State Community College Volunteer State Community College Walters State Community College

### Program(s) of study: Emergency Medical Technician

Course Title: EMSB 1602- EMT Trauma and Medical Emergencies

**Credit hours: 6** 

Lecture hours: 90

Contact/lab/clinical hours: 0

**Total contact hours: 90** 

Pre- or Co-requisite: EMSB 1601, EMSB 1101, EMSB 1111, and EMSB 1102 and EMSB 1112 depending on delivery schedule.

Course Description: *EMT Trauma and Medical Emergencies* is the one of two lecture courses designed to provide the student with the knowledge of an entry-level Emergency Medical Technician (EMT). This course includes the following topics: obstetrics and gynecology, neonatal care, pediatric emergencies, geriatric emergencies, environmental emergencies, patients with special challenges, trauma and shock. Trauma and shock will include the following topics: bleeding, soft tissue injuries, head & spine injuries, face & neck injuries, chest injuries, abdominal & genitourinary injuries, and orthopedic injuries. The outcomes presented in EMSB 1601 and EMSB 1602 may be taught in a coterminous format or in a two-semester format.

### **Learning Outcomes:**

Upon successful completion of this course, the student will demonstrate knowledge of:

Outcome 1: The student will apply fundamental knowledge relative to the multiple determinants of professional roles and responsibilities of the emergency medical services system as well as emergency medical services system operations as a pre-hospital emergency care provider.

Outcome 2: The student will demonstrate a fundamental knowledge of age-related management of prehospital emergency care within the scope practice of a prehospital care provider caring for a patient including, but not limited to bleeding, soft-tissue injuries, face and neck injuries, head and spine injuries, chest injuries, abdominal/genitourinary injuries, orthopedic injuries, and environmental emergencies.

Outcome 3: The student will apply fundamental knowledge to perform age-related management of shock and resuscitation.

Outcome 4: The student will apply fundamental knowledge in the care of special populations to include but not limited to psychiatric emergencies, gynecologic/obstetrical, neonatal care, pediatric patients, geriatric patients, and patients with special challenges.

Outcome 5: The student will demonstrate critical thinking skills to enhance the ability to analyze and develop the most effective means of caring for age-related patient management of prehospital care for patients.

## Technical Certificate Emergency Medical Technician [EMT] Course Summary

### College: TBR Community Colleges

Chattanooga State Community College Cleveland State Community College Columbia State Community College Dyersburg State Community College Jackson State Community College Motlow State Community College Northeast State Community College Southwest State Community College Volunteer State Community College Walters State Community College

### Program(s) of study: Emergency Medical Technician

Course Title: EMSB 1101- EMT Medical Skills Lab

Credit hours: 1

Lecture hours: 0

Contact/lab/clinical hours: 30

**Total contact hours: 30** 

Prerequisite: Admission to the EMT Program Corequisite: EMSB 1601 and EMSB 1111

Course Description: EMT Medical Skills Lab is a laboratory based course utilizing scenarios to emphasize EMS operations, communications, documentation, medical/legal/ethical considerations, airway management, respiratory emergencies, cardiovascular emergencies, acute diabetic emergencies, abdominal and gastrointestinal emergencies, urologic emergencies, anaphylactic reactions, behavioral emergencies, assisting with medication administration, and successful assessment of patients with a variety of medical concerns. This course includes application of principles and processes discussed in EMT Medical Emergencies.

# The outcomes presented in EMSB 1101 and EMSB 1102 may be taught in a coterminous format or in a two-semester format.

Learning Outcomes:

Upon successful completion of this course, the student will demonstrate knowledge of:

Outcome 1: The student will utilize appropriate techniques to perform a patient assessment of an injured person of multi-system trauma and formulate a treatment plan for all conditions and injuries discovered.

Outcome 2: The student will utilize the appropriate techniques to perform a patient assessment of a patient with a chief complaint of a medical problem and formulate a treatment plan for all conditions discovered.

Outcome 3: The student will utilize the appropriate techniques to obtain and document a medical history from a patient.

Outcome 4: The student will initiate basic interventions based on assessment findings.

Outcome 5: The student will demonstrate, safely and effectively, the psychomotor skills appropriate for use and care of all required equipment for age-related management of patients needing prehospital emergency care within the National scope of practice.

Outcome 6: The student will demonstrate professional behavior including but not limited to integrity, empathy, self-motivation, appearance/personal hygiene, self-confidence, communication, time management, teamwork, diplomacy, respect, patient advocacy, and careful delivery of service.

## Technical Certificate Emergency Medical Technician [EMT] Course Summary

### College: TBR Community Colleges

Chattanooga State Community College Cleveland State Community College Columbia State Community College Dyersburg State Community College Jackson State Community College Motlow State Community College Northeast State Community College Southwest State Community College Volunteer State Community College Walters State Community College

### Program(s) of study: Emergency Medical Technician

Course Title: EMSB 1102- EMT Trauma and Medical Skills Lab

Credit hours: 1

Lecture hours: 0

Contact/lab/clinical hours: 30

Total contact hours: 30

Pre- or Co-requisite: EMSB 1601, EMSB 1101, EMSB 1111, EMSB 2602, and EMSB 1112 depending on delivery schedule.

Course Description: EMT Trauma and Medical Skills Lab is a laboratory based course utilizing scenarios to emphasize obstetrics and gynecology, neonatal care, pediatric emergencies, geriatric emergencies, environmental emergencies, patients with special challenges, trauma and shock.

The outcomes presented in EMSB 1101 and EMSB 1102 may be taught in a coterminous format or in a two-semester format.

### **Learning Outcomes:**

Upon successful completion of this course, the student will demonstrate knowledge of:

Outcome 1: The student will utilize appropriate techniques to perform a patient assessment of an injured person of multi-system trauma and formulate a treatment plan for all conditions and injuries discovered.

Outcome 2: The student will utilize the appropriate techniques to perform a patient assessment of a patient with a chief complaint of a medical problem and formulate a treatment plan for all conditions discovered.

Outcome 3: The student will utilize the appropriate techniques to obtain and document a medical history from a patient.

Outcome 4: The student will initiate basic interventions based on assessment findings.

Outcome 5: The student will demonstrate, safely and effectively, the psychomotor skills appropriate for use and care of all required equipment for age-related management of patients needing prehospital emergency care within the National scope of practice.

Outcome 6: The student will demonstrate professional behavior including but not limited to integrity, empathy, self-motivation, appearance/personal hygiene, self-confidence, communication, time management, teamwork, diplomacy, respect, patient advocacy, and careful delivery of service.

## Technical Certificate Emergency Medical Technician [EMT] Course Summary

### College: TBR Community Colleges

Chattanooga State Community College Cleveland State Community College Columbia State Community College Dyersburg State Community College Jackson State Community College Motlow State Community College Northeast State Community College Southwest State Community College Volunteer State Community College Walters State Community College

### Program(s) of study: Emergency Medical Technician

Course Title: EMSB 1111-EMT Clinical

Credit hours: 1

Lecture hours:

Contact/lab/clinical hours: 48-96

**Total contact hours: 48-96** 

Prerequisite: Admission to the EMT Program Corequisite: EMSB 1601 and EMSB 1101

Course Description: *EMT Clinical* is the one of two clinical courses designed to allow the student to meet all psychomotor and affective outcomes for the clinical requirements of an EMT program and build upon the concepts and knowledge learned in EMT Medical Emergencies and EMS Operations.

The outcomes presented in EMSB 1111 and EMSB 1112 may be taught in a coterminous format or in a two-semester format.

### **Learning Outcomes:**

Upon successful completion of this course, the student will demonstrate knowledge of the following outcomes:

Outcome 1: The student will be able to demonstrate professional behavior including but not limited to: integrity, empathy, self-motivation, appearance/personal hygiene, self confidence, communication, time-management, teamwork, diplomacy, respect, patient advocacy, and careful delivery of service.

Outcome 2: The student will be able to initiate basic interventions based on assessment findings.

Outcome 3: The student will be able to report and document assessment data and interventions.

Outcome 4: The student will be able to perform a patient assessment and provide prehospital emergency care and prepare patient for transport based on patient complaint.

Outcome 5: The student will be able to serve as an EMS team member on an emergency call with more trained personnel in the lead role.

Outcome 6: The student will be able to ensure safety of the rescuer and others during an emergency.

# Technical Certificate Emergency Medical Technician [EMT] Course Summary

### College: TBR Community Colleges

Chattanooga State Community College Cleveland State Community College Columbia State Community College Dyersburg State Community College Jackson State Community College Motlow State Community College Northeast State Community College Southwest State Community College Volunteer State Community College Walters State Community College

### Program(s) of study: Emergency Medical Technician

Course Title: EMSB 1112- EMT Field Internship

Credit hours: 1

Lecture hours:

Contact/lab/clinical hours: 48-96

**Total contact hours: 48-96** 

Pre- or Co-requisite: EMSB 1601, EMSB 1101, EMSB 1111, EMSB 1602, and EMSB 1102 depending on delivery schedule.

Course Description: *EMT Field Internship* is the one of two clinical courses designed to allow the student to meet all psychomotor and affective outcomes for the clinical requirements of an EMT program and build upon the concepts and knowledge learned during prior and/or concurrent courses.

The outcomes presented in EMSB 1111 and EMSB 1112 may be taught in a coterminous format or in a two-semester format.

### **Learning Outcomes:**

Upon successful completion of this course, the student will demonstrate knowledge of the following outcomes:

Outcome 1: The student will be able to demonstrate professional behavior including but not limited to: integrity, empathy, self-motivation, appearance/personal hygiene, self confidence, communication, time-management, teamwork, diplomacy, respect, patient advocacy, and careful delivery of service.

Outcome 2: The student will be able to initiate basic interventions based on assessment findings.

Outcome 3: The student will be able to report and document assessment data and interventions.

Outcome 4: The student will be able to perform a patient assessment and provide prehospital emergency care and prepare patient for transport based on patient complaint.

Outcome 5: The student will be able to serve as an EMS team member on an emergency call with more trained personnel in the lead role.

Outcome 6: The student will be able to ensure safety of the rescuer and others during an emergency.

Motlow State Community College



*EMS Education This Course Outline is subject to change with notice.* 

### EMT Medical Emergencies and EMS Operations (EMSB 1601) EMT Trauma and Medical Emergencies (EMSB 1602) Semester I/Year I

Credit Hours: 12

<u>**Pre- or Co-requisite:**</u> Admission to the EMT program. EMSB 1601, EMSB 1101, EMSB 1111, and EMSB 1102 and EMSB 1112.

<u>Catalog Description</u>: *EMT Medical Emergencies and EMS Operations* is the one of two lecture courses designed to provide the student with the knowledge of an entry-level Emergency Medical Technician (EMT). This course includes the following topics: Emergency Medical Responder-National Educational Standards competencies, roles and responsibilities of the EMT, workforce safety, wellness, public health, communications, documentation, EMS operations, medical/legal/ethical considerations, fundamental anatomy and physiology, life span development, fundamental pathophysiology, patient assessment, airway management, respiratory emergencies, cardiovascular emergencies, acute diabetic emergencies, addominal and gastrointestinal emergencies, urologic emergencies, anaphylactic reactions, and behavioral emergencies.

*EMT Trauma and Medical Emergencies* is the one of two lecture courses designed to provide the student with the knowledge of an entry-level Emergency Medical Technician (EMT). This course includes the following topics: obstetrics and gynecology, neonatal care, pediatric emergencies, geriatric emergencies, environmental emergencies, patients with special challenges, trauma and shock. Trauma and shock will include the following topics: bleeding, soft tissue injuries, head & spine injuries, face & neck injuries, chest injuries, abdominal & genitourinary injuries, and orthopedic injuries

(Taught in a coterminous format)

#### Group for Whom the Class is Intended:

This course is intended for students pursuing the following programs of study: students attempting to obtain EMT basic certification in the state of Tennessee through Tennessee Department of Health- EMS Division.

#### **Instructor Information:**

Meghan Austin BS, NRP, CC-PM, FP-C, RN I/C Lead Instructor Fayetteville Campus Office Hours: Variable and by appointment email: maustin@mscc.edu

Chris Smith AAS, AS, NRP, I/C Lead Instructor Mcminnville Campus Office Hours: Variable and by appointment email: csmith@lightube.net

#### **Required Texts:**

Emergency Care, 13th Edition, Daniel Limmer, Michael F. O'Keefe

#### Supplemental Materials/Required Supplies:

Wristwatch with second hand Trauma Shears Penlight Safety Glasses **Must have these items by the 4<sup>th</sup> class session.** 

#### **Student Learning Outcomes:**

After completing the requirements of the EMT Program, students will be able to ...

- 1. The student will apply fundamental knowledge relative to the multiple determinants of professional roles and responsibilities of the emergency medical services system as well as emergency medical services system operations as a pre-hospital emergency care provider.
- 2. The student will demonstrate fundamental knowledge in EMS Systems, Research, Workforce Safety and Wellness, Documentation, Communication and Medical/Legal and Ethics.
- 3. The student will identify the operational roles and responsibilities to ensure patient, public, and personnel safety in performing emergency care and operational aspects as a prehospital care provider.
- 4. The student will apply a fundamental knowledge of anatomy and physiology, medical terminology, pathophysiology, and lifespan development relative to patient assessment in determining emergency medical care administration.
- 5. The student will apply a fundamental knowledge in patient airway management including oxygen administration, airway adjunct application, and artificial ventilation.
- 6. The student will demonstrate fundamental knowledge of pharmacology, medication administration, and emergency medications interventions available to treat patients as a prehospital care provider in the pre-hospital emergency care setting.
- 7. The student will apply scene information to guide emergency management of patients by using scene size up information, patient findings related to primary and secondary assessment, patient history, and reassessment.

- 8. The student will demonstrate a fundamental knowledge of age-related management of prehospital emergency care within the scope practice of a prehospital care provider caring for a medical patient including, but not limited to neurologic emergencies, gastrointestinal/urologic emergencies, immunologic emergencies, endocrine/hematologic emergencies, cardiovascular emergencies, respiratory emergencies, and toxicological emergencies.
- 9. The student will apply fundamental knowledge to perform age-related management of shock and resuscitation.
- 10. The student will demonstrate a fundamental knowledge of environmental emergencies, EMS operations, transport operations, lifting and moving patients, vehicle extrication, special rescue, incident management, and terrorism response.
- 11. The student will demonstrate critical thinking skills to develop the ability to analyze and develop the most effective means of caring for age-related patient management of prehospital care for patients.

#### **Program Learning Outcomes:**

By the end of the course, students will be able to . . .

- 1. Practice in the role of the Desired Level. (EMT-AEMT-Paramedic
- 2. Apply a body of knowledge to determine safe and effective treatment and transportation of the sick and injured.
- 3. Assess, implement and evaluate care based on acceptable standards.
- 4. Demonstrate ethical, legal and professional accountability.
- 5. Participate in activities which promote the advancement of Emergency Medical Services as well as the individual's practice as an EMS Professional.

#### **Course Objectives:**

- 1. Upon completion of the program, all students will demonstrate the ability to comprehend, apply, analyze, and evaluate information relevant to their role as entry level EMS Personnel.
- 2. Upon completion of the program, all students will demonstrate technical proficiency in all skills necessary to fulfill the role of entry level Personnel.
- 3. Upon completion of the program, all students will demonstrate personal behaviors consistent with professional and employer expectations for the entry level Personnel

#### Major Assignments and Method for Calculating the Final Grade:

Research project= 5% Homework/Classwork= 10% Affective= 15% Quizzes= 20% Tests= 25% Final exam= 25%

#### **Grading Scale:** A 94 – 100 B 87 – 93 C 80 – 86 F Below 80

The final exam will consist of any and all subject matter covered in lecture, reading assignments, handouts, and skills sessions.

<u>Make-Up Policy:</u> Tests can be made up only at the discretion of the program coordinator depending on if the coordinator determines that the reason for absence justifies a make-up test. A grade of 0 will be applied to any late homework/assignments. Students will be allowed to drop their lowest quiz grade.

#### **Course Policies:**

#### Academic Misconduct Policy:

Plagiarism, cheating, and other forms of academic dishonesty are prohibited. Students guilty of academic misconduct, either directly or indirectly, through participation or assistance, are immediately responsible to the instructor of the class. Based on their professional judgment, instructors have the authority to impose the following academic sanctions: (a) require the student to repeat the assignment for full or partial credit; (b) assign a zero, an F, or any other grade appropriate for the assignment or examination; (c) assign an F for the course. In addition, disciplinary sanctions may be imposed through the regular institutional procedures. For more information, see MSCC Policy 3:02:00:03.

#### **Classroom Misconduct Policy:**

The instructor has the primary responsibility for maintenance of academic integrity and controlling classroom behavior, and can order temporary removal or exclusion from the classroom of any student engaged in disruptive conduct or conduct that violates the general rules and regulations of the institution for each class session during which the conduct occurs. Extended or permanent exclusion from the classroom, beyond the session in which the conduct occurred, or further disciplinary action can be effected only through appropriate procedures of the institution.

Disruptive behavior in the classroom may be defined as, but not limited to, behavior that obstructs or disrupts the learning environment (e.g., offensive language, harassment of students and professors, repeated outbursts from a student which disrupt the flow of instruction or prevent concentration on the subject taught, failure to cooperate in maintaining classroom decorum, etc.), text messaging, and the continued use of any electronic or other noise or light emitting device which disturbs others (e.g., disturbing noises from beepers, cell phones, palm pilots, lap-top computers, games, etc.). For more information, see MSCC Policy 3:02:00:03.

#### **Class Cancelation Policy:**

Students are advised to take advantage of the Motlow Rave system in order to receive text messages when class is canceled. For more information, see <a href="https://www.getrave.com/login/mscc">https://www.getrave.com/login/mscc</a>."

#### **Emergency Procedures Policy:**

In case of a **medical emergency** we will immediately dial 9-911 and report the nature of the medical emergency to emergency response personnel. We will try to stay with the person(s) in need and maintain a calm atmosphere. We will talk to the person as much as possible until response personnel arrive on campus, and we will have someone go outside to meet emergency personnel and direct them to the appropriate location. In the event of an emergency (drill or actual), a signal will be sent. Based on that signal, students will follow the procedures below for that specific type of emergency:

#### Loud warbling sound throughout Building (FIRE)

Collect purses and coats and proceed immediately out of your room and exit through the closest emergency exit. Proceed to the Designated Assembly Area closing windows and doors as you exit. Remain there until the "All Clear" Signal is given by an Emergency Management Team member. (Instructors- Provide your Designated Assembly Area, and its location to students)

#### Tornado Siren (SEVERE WEATHER):

Proceed to the closest designated severe weather shelter on the 1st floor and proceed all the way into the shelter. Crouch down on the floor with your head between your knees facing away from the outside walls. Remain there until the "All Clear" Signal is given. (Instructors- Provide the recommended room number or hallway location to students)

<u>Air Horn (1 Long Blast) and Face to Face All Clear (INTRUDER/HOSTAGE):</u> Ensure door is closed, locked and lights turned off. If your door will not lock, move some tables and chairs in front of the door quickly. Move immediately to the rear of the room away from the door and sit on the floor- out of sight if possible. Remain calm and quiet and do not respond to any inquiries at the door unless you have been given the "All Clear" and a member of law enforcement or your campus Emergency Management Team member makes face-to-face contact at your door.

#### **Classroom Locked-door Policy:**

In order to adhere to MSCC Emergency Preparedness Policy and to facilitate effective classroom management, the classroom door will remain closed and locked for the duration of the class period.

#### **Educational Technology:**

Accessing Campus Computers or the MSCC Library from off Campus:

Your Username format is your First Initial, Last Name and Month and Day Birthday in the Format of MMDD. Example: Marcia Smith born on April 11, 1992 - Username: msmith0411. Your Pin will be the numeric pin you created when you initially applied to Motlow College.

#### Using D2L:

For help with D2L including how to submit materials to a Dropbox, see this page: <u>http://www.mscc.edu/techtube.aspx</u>

#### **Technical Support/Assistance:**

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#### Student Success:

#### **Planning Time:**

College coursework demands an additional 2-3 hours of study for every 1 hour of classroom instruction. This time includes studying, reading, researching, etc. A successful paramedic student will adhere to this formula and use it wisely.

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#### Academic Advisement:

MSCC Instructors can guide students to specific resources regarding Advisement. For additional help, see the Academic Advisement page: <u>http://www.mscc.edu/advisement/index.aspx</u>

#### **Class Schedule of Assignments:**

See schedule

		<u>2016 E</u>	MTB Sch	<u>nedule</u>	<u>McMinnville</u>				
	Shift	Month	Day	Didactic Chapter	Skills	Quiz	Test	Lead	Asst
DAY 1	А	August	24	Chapter 2,3,4				Meghan	
DAY 2	В	August	25	Chapter 6	26, 25, 24	1		Alana	Ben
DAY 3	А	August	30		1, 2, 3, 4, 5, 6			Meghan	
DAY 4	А	Sept.	2	Chapter 10	Medical Assessment	2	1	Meghan	Alana
DAY 5		Sept.	5	Labor Day Holiday	Labor Day Holiday				
DAY 6	А	Sept.	8	Chapter 5, 8	Terminology Game	3	2	Alana	
DAY 7	С	Sept.	14	Chapter 11, 12, 13	Anatomical Models			Meghan	
DAY 8	А	Sept.	15	Chapter 16, 17	27, 28, 29	4		Ben	Alana?
DAY 9	А	Sept.	20	Chapter 14, 15				Meghan	
DAY 10	А	Sept.	23	Chapter 18, 20		5	3	Meghan	Alana?
DAY 11	А	Sept.	26		Assessment Practice	6		Meghan	Alana
DAY 12	А	Sept.	29	Chapter 19, 21				Meghan	
DAY 13	А	Oct.	5		Skills Review/ Trauma Assessment	7		Meghan	Alana
DAY 14	В	Oct.	6	Chapter 22, 23, 24	Mid-Term Exams		4	Ben	
DAY 15		Oct.		Fall Break	Fall Break				
DAY 16	А	Oct.	14	Chapter 26, 30				Meghan	
DAY 17	А	Oct.	17	Chapter 28, 29		9		Meghan	Alana?
DAY 18	А	Oct.	20		15, 16, 17, 18, 19, 20, 21, 22, 23		5	Meghan	Alana
DAY 19	С	Oct.	26	Chapter 31, 32		10		Meghan	Alana
DAY 20	А	Oct.	27	Chapter 33			6	Alana	
DAY 21	А	Nov.	1	Chapter 34-35		11		Meghan	
DAY 22	А	Nov.	4		NREMT Skills Review		7	Meghan	Alana
DAY 23	А	Nov.	7	Chapter 36-37		12		Meghan	
DAY 24	А	Nov.	10	Chapter 38-39				Meghan	
DAY 25	А	Nov.	16					Meghan	
DAY 26	В	Nov.	17					Ben	Alana?
DAY 27	А	Nov.	22					Meghan	Alana
DAY 28		Nov.	25	Thanksgiving Break	Thanksgiving Break	Break	Break		
DAY 29	А	Nov.	28					Meghan	Alana
DAY 30	А	Dec.	1		NREMT prep		Final	Meghan	Alana?
DAY 31	С	Dec.	2	FINAL SKILLS TEST				Meghan	Ben

Motlow State Community College



This Course Outline is subject to change with notice.

### EMT Medical Skills Lab (EMSB 1101) EMT Trauma and Medical Skills Lab (EMSB 1102) Semester I/Year I

Credit Hours: 2

Contact/Clinical/Lab Hours: 60

**<u>Prerequisite</u>**: Admission to the EMT Program **<u>Corequisite</u>**: EMSB 1601 and EMSB 1111

<u>Catalog Description:</u> : EMT Medical Skills Lab is a hybrid based course utilizing scenarios, discussion boards, critical thinking exercises and research activities to emphasize EMS operations, communications, documentation, medical/legal/ethical considerations, airway management, respiratory emergencies, cardiovascular emergencies, acute diabetic emergencies, abdominal and gastrointestinal emergencies, urologic emergencies, anaphylactic reactions, behavioral emergencies, assisting with medication administration, and successful assessment of patients with a variety of medical concerns. This course includes application of principles and processes discussed in EMT Medical Emergencies.

EMT Trauma and Medical Skills Lab is a hybrid based course utilizing scenarios, discussion boards, critical thinking exercises and research activities to emphasize obstetrics and gynecology, neonatal care, pediatric emergencies, geriatric emergencies, environmental emergencies, patients with special challenges, trauma and shock.

(Taught in a coterminous format)

#### Group for Whom the Class is Intended:

This course is intended for students pursuing the following programs of study: students attempting to obtain paramedic certification in the state of Tennessee through Tennessee Department of Health- EMS Division.

#### **Instructor Information:**

Meghan Austin BS, NRP, CC-PM, FP-C, RN I/C Lead Instructor Fayetteville Campus Office Hours: Variable and by appointment email: <u>maustin@mscc.edu</u>

> Chris Smith AAS, AS, NRP, I/C Lead Instructor Mcminnville Campus Office Hours: Variable and by appointment email: csmith@lightube.net

#### **Required Texts:**

Same as EMSB 1601

#### Supplemental Materials/Required Supplies:

Wristwatch with second hand Trauma Shears Penlight Safety Glasses Must have these items by the 4<sup>th</sup> class session.

#### **Student Learning Outcomes:**

After completing the requirements of the EMT Program, students will be able to . . .

Outcome 1: The student will utilize appropriate techniques to perform a patient assessment of an injured person of multi-system trauma and formulate a treatment plan for all conditions and injuries discovered.

Outcome 2: The student will utilize the appropriate techniques to perform a patient assessment of a patient with a chief complaint of a medical problem and formulate a treatment plan for all conditions discovered.

Outcome 3: The student will utilize the appropriate techniques to obtain and document a medical history from a patient.

Outcome 4: The student will initiate basic interventions based on assessment findings. Outcome 5: The student will demonstrate, safely and effectively, the psychomotor skills appropriate for use and care of all required equipment for age-related management of patients needing prehospital emergency care within the National scope of practice.

Outcome 6: The student will demonstrate professional behavior including but not limited to integrity, empathy, self-motivation, appearance/personal hygiene, self-confidence,

communication, time management, teamwork, diplomacy, respect, patient advocacy, and careful delivery of service.

#### **Program Learning Outcomes:**

By the end of the course, students will be able to . . .

1. Practice in the role of the Desired Level. (EMT-AEMT-Paramedic

- 2. Apply a body of knowledge to determine safe and effective treatment and transportation of the sick and injured.
- 3. Assess, implement and evaluate care based on acceptable standards.
- 4. Demonstrate ethical, legal and professional accountability.
- 5. Participate in activities which promote the advancement of Emergency Medical Services as well as the individual's practice as an EMS Professional.

#### **Course Objectives:**

- 1. Upon completion of the program, all students will demonstrate the ability to comprehend, apply, analyze, and evaluate information relevant to their role as entry level EMS Personnel.
- 2. Upon completion of the program, all students will demonstrate technical proficiency in all skills necessary to fulfill the role of entry level Personnel.
- 3. Upon completion of the program, all students will demonstrate personal behaviors consistent with professional and employer expectations for the entry level Personnel

#### Major Assignments and Method for Calculating the Final Grade:

Discussion Boards: 20% Critical Thinking Exercises: 20% Research Activities: 20% Completion of skills and paperwork: 20% Terminal check offs: 20%

#### **Grading Policies:**

**Grading Scale:** A 94 – 100 B 87 – 93 C 80 – 86 F Below 80

#### **Course Policies:**

#### **Academic Misconduct Policy:**

Plagiarism, cheating, and other forms of academic dishonesty are prohibited. Students guilty of academic misconduct, either directly or indirectly, through participation or assistance, are immediately responsible to the instructor of the class. Based on their professional judgment, instructors have the authority to impose the following academic sanctions: (a) require the student to repeat the assignment for full or partial credit; (b)

assign a zero, an F, or any other grade appropriate for the assignment or examination; (c) assign an F for the course. In addition, disciplinary sanctions may be imposed through the regular institutional procedures. For more information, see MSCC Policy 3:02:00:03.

#### **Classroom Misconduct Policy:**

The instructor has the primary responsibility for maintenance of academic integrity and controlling classroom behavior, and can order temporary removal or exclusion from the classroom of any student engaged in disruptive conduct or conduct that violates the general rules and regulations of the institution for each class session during which the conduct occurs. Extended or permanent exclusion from the classroom, beyond the session in which the conduct occurred, or further disciplinary action can be effected only through appropriate procedures of the institution.

Disruptive behavior in the classroom may be defined as, but not limited to, behavior that obstructs or disrupts the learning environment (e.g., offensive language, harassment of students and professors, repeated outbursts from a student which disrupt the flow of instruction or prevent concentration on the subject taught, failure to cooperate in maintaining classroom decorum, etc.), text messaging, and the continued use of any electronic or other noise or light emitting device which disturbs others (e.g., disturbing noises from beepers, cell phones, palm pilots, lap-top computers, games, etc.). For more information, see MSCC Policy 3:02:00:03.

#### **Class Cancelation Policy:**

Students are advised to take advantage of the Motlow Rave system in order to receive text messages when class is canceled. For more information, see <a href="https://www.getrave.com/login/mscc">https://www.getrave.com/login/mscc</a>."

#### **Emergency Procedures Policy:**

In case of a **medical emergency** we will immediately dial 9-911 and report the nature of the medical emergency to emergency response personnel. We will try to stay with the person(s) in need and maintain a calm atmosphere. We will talk to the person as much as possible until response personnel arrive on campus, and we will have someone go outside to meet emergency personnel and direct them to the appropriate location. In the event of an emergency (drill or actual), a signal will be sent. Based on that signal, students will follow the procedures below for that specific type of emergency:

#### Loud warbling sound throughout Building (FIRE)

Collect purses and coats and proceed immediately out of your room and exit through the closest emergency exit. Proceed to the Designated Assembly Area closing windows and doors as you exit. Remain there until the "All Clear" Signal is given by an Emergency Management Team member. (Instructors- Provide your Designated Assembly Area, and its location to students)

Tornado Siren (SEVERE WEATHER):

Proceed to the closest designated severe weather shelter on the 1st floor and proceed all the way into the shelter. Crouch down on the floor with your head between your knees facing away from the outside walls. Remain there until the "All Clear" Signal is given. (Instructors- Provide the recommended room number or hallway location to students)

<u>Air Horn (1 Long Blast) and Face to Face All Clear (INTRUDER/HOSTAGE):</u> Ensure door is closed, locked and lights turned off. If your door will not lock, move some tables and chairs in front of the door quickly. Move immediately to the rear of the room away from the door and sit on the floor- out of sight if possible. Remain calm and quiet and do not respond to any inquiries at the door unless you have been given the "All Clear" and a member of law enforcement or your campus Emergency Management Team member makes face-to-face contact at your door.

#### **Classroom Locked-door Policy:**

In order to adhere to MSCC Emergency Preparedness Policy and to facilitate effective classroom management, the classroom door will remain closed and locked for the duration of the class period.

#### **Educational Technology:**

#### Accessing Campus Computers or the MSCC Library from off Campus:

Your Username format is your First Initial, Last Name and Month and Day Birthday in the Format of MMDD. Example: Marcia Smith born on April 11, 1992 - Username: msmith0411. Your Pin will be the numeric pin you created when you initially applied to Motlow College.

#### Using D2L:

For help with D2L including how to submit materials to a Dropbox, see this page: <u>http://www.mscc.edu/techtube.aspx</u>

#### **Technical Support/Assistance:**

Students having problems logging into a course, timing out of a course, using course web site tools, or any other technical problems, should contact the MSCC Technology Help Desk at 931-393-1510 or toll free 1-800-654-4877, Ext. #1510 (or d2lhelp@mscc.edu)

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#### Student Success:

#### **Planning Time:**

College coursework demands an additional 2-3 hours of study for every 1 hour of classroom instruction. This time includes studying, reading, researching, etc. A successful paramedic student will adhere to this formula and use it wisely.

#### **Tutoring:**

MSCC Instructors can guide students to specific resources regarding Tutoring in their discipline. In particular, students may find help with Math and Essay Writing via each campus' Learning Support labs. Students should contact the labs on their campus to schedule appointments for help. For additional help, see the Student Success page: http://www.mscc.edu/student\_success/index.aspx

#### Academic Advisement:

MSCC Instructors can guide students to specific resources regarding Advisement. For additional help, see the Academic Advisement page: <u>http://www.mscc.edu/advisement/index.aspx</u>

**Class Schedule of Assignments:** 

See schedule

#### Motlow State Community College



*EMS Education This Course Outline is subject to change with notice* 

EMT Clinical (EMSB 1111)/ EMT Field Internship (EMSB 1112) Semester I/Year I

Credit Hours: 8

<u>Clinical hours</u>: 96 <u>Total contact hours</u>: 96

**Prerequisite:** Admission to the EMT Program **Corequisite:** EMSB 1601 and EMSB 1101

<u>Catalog Description</u>: *EMT Clinical* is the one of two clinical courses designed to allow the student to meet all psychomotor and affective outcomes for the clinical requirements of an EMT program and build upon the concepts and knowledge learned in EMT Medical Emergencies and EMS Operations.

*EMT Field Internship* is the one of two clinical courses designed to allow the student to meet all psychomotor and affective outcomes for the clinical requirements of an EMT program and build upon the concepts and knowledge learned during prior and/or concurrent courses.

#### Group for Whom the Class is Intended:

This course is intended for students pursuing the following programs of study: students attempting to obtain paramedic certification in the state of Tennessee through Tennessee Department of Health- EMS Division.

#### **Instructor Information:**

Meghan Austin BS, NRP, CC-PM, FP-C, RN I/C Lead Instructor Fayetteville Campus Office Hours: Variable and by appointment email: <u>maustin@mscc.edu</u>

Chris Smith AAS, AS, NRP, I/C Lead Instructor Mcminnville Campus Office Hours: Variable and by appointment email: csmith@lightube.net

#### **Required Texts:**

Same as EMSB 1601

#### **Supplemental Materials/Required Supplies:**

Wristwatch with second hand Trauma Shears Penlight Safety Glasses Must have these items by the 4<sup>th</sup> class session.

#### **Student Learning Outcomes:**

After completing the requirements of the EMT Program, students will be able to . . .

Outcome 1: The student will be able to demonstrate professional behavior including but not limited to: integrity, empathy, self-motivation, appearance/personal hygiene, self confidence, communication, time-management, teamwork, diplomacy, respect, patient advocacy, and careful delivery of service.

Outcome 2: The student will be able to initiate basic interventions based on assessment findings.

Outcome 3: The student will be able to report and document assessment data and interventions.

Outcome 4: The student will be able to perform a patient assessment and provide prehospital emergency care and prepare patient for transport based on patient complaint.

Outcome 5: The student will be able to serve as an EMS team member on an emergency call with more trained personnel in the lead role.

Outcome 6: The student will be able to ensure safety of the rescuer and others during an emergency.

#### **Program Learning Outcomes:**

By the end of the course, students will be able to . . .

- 1. Practice in the role of the Desired Level. (EMT-AEMT-Paramedic
- 2. Apply a body of knowledge to determine safe and effective treatment and transportation of the sick and injured.
- 3. Assess, implement and evaluate care based on acceptable standards.
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- 5. Participate in activities which promote the advancement of Emergency Medical Services as well as the individual's practice as an EMS Professional.

#### **Course Objectives:**

- 1. Upon completion of the program, all students will demonstrate the ability to comprehend, apply, analyze, and evaluate information relevant to their role as entry level EMS Personnel.
- 2. Upon completion of the program, all students will demonstrate technical proficiency in all skills necessary to fulfill the role of entry level Personnel.
- 3. Upon completion of the program, all students will demonstrate personal behaviors consistent with professional and employer expectations for the entry level Personnel

#### Major Assignments and Method for Calculating the Final Grade:

Completion of clinical: 50% Paperwork: 25% Affective: 25%

#### **Grading Policies:**

**Grading Scale:** A 94 – 100 B 87 – 93 C 80 – 86 F Below 80

<u>Make-Up Policy</u>: Clinical hours can only be made up at the discretion of the program coordinator and only if the coordinator determines the reason for absence justifies a make-up clinical. It is the student's responsibility to notify the program coordinator immediately if the student cannot attend a clinical.

#### **Course Policies:**

#### **Academic Misconduct Policy:**

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Ensure door is closed, locked and lights turned off. If your door will not lock, move some tables and chairs in front of the door quickly. Move immediately to the rear of the room away from the door and sit on the floor- out of sight if possible. Remain calm and quiet and do not respond to any inquiries at the door unless you have been given the "All Clear" and a member of law enforcement or your campus Emergency Management Team member makes face-to-face contact at your door.

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#### Student Success:

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#### Academic Advisement:

MSCC Instructors can guide students to specific resources regarding Advisement. For additional help, see the Academic Advisement page: http://www.mscc.edu/advisement/index.aspx

#### **Class Schedule of Assignments:**

See schedule

#### **Daily Evaluation Form HOSPITAL or SERVICE:** All information above the bold double line is mandatory for all EMS incidents. Motlow State EMS Education STUDENT NAME: **PRECEPTOR NAME:** CLASS CAMPUS SHIFT ENTRY SEMESTER CLINICAL UNIT ED Date: □ Paramedic □ Semester 1 □ Fayetteville CCU/ICU EMS SERVICE Time: □ McMinnville □ AEMT □ Semester 2 PICU Total Hours: CATH LAB PEDS □ EMT □ Semester 3 □ Fire Academy-Total # of Patients: OB/L&D SURGERY ALS ADVANCED AIRWAY ALS IV ACCESS IV/IOATTEMPTS IV/IOSUCCESS **IVGAUGE** FUD SILE ATTEMPTS AIRWAY TYPE AIRWAY# SUCCESS ET SZE ATTEMPTS ATTEMPTS ALS ELECTRICAL THERAPY ALS MEDICATION ADMINSTRATION ROUTE ELECTRICAL THERAPY DRUG DOSE MANUAL DEFIBRILLATION AUTOMATED DEFIBRILLATION TRANSCUTANEOUS PACING SYNCHRONIZED CARDIOVERSION **BLS CARE** ALS CARE - OTHER DESCRIBE / # SKILLS PERFORMED BY STUDENT BY TEAM **DESCRIBE / # PERFORMED** BY STUDENT BY TEAM PHYSICIAN COMMUNICATION AUTOMATIC VENTILATOR BANDAGING/WOUND MANAGEMENT BLOOD GLUCOSE-GLUCOMETER TRACTION SPLINT CAPNOMETRY SUCTION CAROTID SINUS MASSAGE / VALSALVA MANEUVER CENTRAL IV LINE OROPHARYNGEAL AIRWAY CHEST TUBE NASOPHARYNGEAL AIRWAY VITAL SIGNS CHEST DECOMPRESSION / CRICOTHYROIDOTOMY HEMODYNAMIC WAVEFORMS AND MONITORING C-SPINE IMMOBILIZATION FOLEY CATHETER JOINT IMMOBILIZATION NG TUBE VENTILATE MOVEMENT OF PATIENT OTHER LONG BACKBOARD IMMOBILIZATION PULSE OXIMETRY BY STUDENT 12 LEAD ECG (DESCRIBE ANALYSIS) LONG BONE IMOBILIZATION CHEST COMPRESSIONS OXYGEN ASSESSMENTS LOG - \* Place a "0" in this column for an observed pt. exam and interview. Place a "P" for a performed examination and interview \*0/P Pt. Race **Primary Field Impression** EKG BP HR RR Age Sex (from assessment list) 1 2 3 4 5 6 7 8

9					
			•		

#### **STUDENT NAME:**

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#### **PRECEPTOR NAME:**

				<u> </u>
	Problem/Possible Diagnosis Field Impression	Brief Patient History Leading to Procedure/Treatment	LOC – AVPU	Student Comments
1				
2				
3				
4				
5				
6				
7				
8				
9				

Please evaluate the student in the following categories at the end of their hospital clinical rotation

#### GRADING SCALE

#### DEFINITION

- 4 Proficient Field Competent
- *Exceeds expectations at current level in the program.Functioning at level expected in the program (At the current level)*
- 3 Acceptable Appropriate for Experience
- 2 Needs Improvement (see comments)
- **1** Dangerous to Practice

### Needs further practice and education to improve

Hazard to patients and others

GRADE	DAILY AFFECTIVE APTITUDE EVALUATION
4 3 2 1	<b>Professionalism/Attitude</b> : The student's behavior demonstrated integrity, empathy, self-motivation, self-confidence, teamwork, diplomacy, respect, patient advocacy, careful delivery of service, appropriate time management, appropriate appearance and personal hygiene. Reported to clinical assignment on time and in full uniform COMMENT:
4 3 2 1	<b>Learner Characteristics</b> : Demonstrates attendance within the stated program policy, independently seeks out appropriate learning experiences, participates in a multi-skilled approach to patient care, practices required skills, and seeks advice to improve skills, demonstrates the superior delivery of patient care required of a paramedic student as stated within the program policy COMMENT:
4 3 2 1	<b><u>Communication Skills</u></b> : Performs and reports patient assessments, completely and proficiently. Interacts with patients and other Health Care Professionals on a "student role" appropriate level COMMENT:

#### **Preceptor Comments:**

#### Attachment 8

Preceptor Signature	Student Signature	Date
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Program Review  $\Box_{-}$ 



### MOTLOW COLLEGE EMS EDUCATION

INSTRUCTOR SITE VISIT FORM

Date of Visit	
Student Name:	Course
Preceptor Name:	
Service Name:	
Student/Preceptor Relationship	
ExcellentVery GoodSatisfac	toryDevelopment Opportunity
Student Engagement	
ExcellentVery GoodSatisfac	toryDevelopment Opportunity
Clinical Site Environment ExcellentVery GoodSatisfac	toryNeeds Review
Professionalism/Attitude/Affect ExcellentVery GoodSatisfac	toryDevelopment Opportunity
Comments:	
Faculty Signature	Date Program Review Drogram Director
racuity Signature	Date

ALOW C	Outre		otlow llege		S	im	ula	tior	n La	ał	o Evaluatio	n For	m			
		ion	Sc	ene	erio _											
STUDEN	Г NAME:									]	INSTRUCTOR NAME:					
Cup	RENT <b>P</b> H			CTT								Date:				
	emester				RESS L						IN FOCUS		CATION			
					High						Airway Mgmt		Outdoors			
	emester	- 2			Low S	Stres	SS				Pt Assessment					
D Se	emester	- 3			No St	ress	5				Remediation		Indoors			
									C		Specific Skill		Combinat	ion		
WACC.	EGG											XX7 A X7				
IV ACC	ESS IV/IOATI	EMPTS	IV/IOSu	ITTESS	SITE		Student	Team	ŀ	AL.	ARWAY TYPE	AIRWAY#	SUCCESS	SIZE	Student	Team
	10/10/111		10,1050		SIL							ATTEMPTS	beech	SEL		
IO ACC	FSS								B	et (	S AIRWAY					
IOACC	200															
ALS EK	G										ECG INTERP	PRETATI	ON		<u> </u>	
	Electri	CAL THI	ERAPY			NERGY Student Team PLEASE DOCUMENT				PLEASE DOCUMENT IF S	STUDENT INTERPRETED IT CORRECTLY				0	
MANUAL D	DEFIBRILLA	ATION			LEVE	LEVELS			OR INCORRECTLY           Image: Construction of the second							
AUTOMATH	ed Defibr	ILLATIC	N							]	Rhythm 2					
TRANSCUT	ANEOUS P.	ACING				Rhythm 3										
SYNCHRON	NIZED CAR	DIOVER	SION			Rhythm 4										
					T			T		CA	ATION					
	MEL	DICATIO	V		D	OSE		ROU	ΓE		MEDI	CATION		DOSE	RO	DUTE
BLS CA	RE										BLS CARE	1				
	SKILL		]	PERFOR	MED	СО	OMME	NTS			SKILL	PERFO	ORMED	COM	MENTS	S
PATIENT INTERVIEW/ HISTORY									Wn	INESSED ARREST						
PHYSICAL EXAM							1	RO	SC DURING TRANSPORT							
HOSPITAL NOTIFICATION							1	RO	SC AT RELEASE							
MEDICAL CONTROL CONSULT							1	No	ROSC AT ANY TIME							
VITAL SIGNS							S	SUC	CTION							
0 <sub>2</sub> ADMINIS	TRATION								(	Сні	EST COMPRESSIONS					
BANDAGIN	G								,	VEN	NTILATIONS					
TRACTION SPLINT									1	BL	S AIRWAY ADJUNCT					

C-SPINE IMMOBILIZATION		3 LEAD ECG	
LONG BACKBOARD		12 LEAD ECG	
LONG BONE IMMOBILIZATION		15 LEAD ECG	

### **STUDENT NAME:**

- 1. Did the student assess and correct airway complication in proper amount of time? (Assess within 30 sec of change and 1 min to correct the problem) YES NO COMMENTS:
- 2. Did the students properly manage the patient and address all life threats? (Assess within 30 sec of change and 1 min to address the problem) YES NO COMMENTS:
- **3.** Did the student address all medical/trauma complaints within proper amount of time? (Assess within 30 sec of change and 1 min to address the problem) **YES NO COMMENTS:**
- **4.** *Did the student properly complete an entire assessment?* **YES NO COMMENTS:**
- 5. Did student refrain from any dangerous or incorrect interventions or treatment? YES NO COMMENTS:

GRADING SCALE	DEFINITION
4 Field Competent	Exceeds expectations at current level in the program.
<b>3</b> Appropriate for Experience Level	Functioning at level expected in the program (At the current level)
2 Needs Improvement (see comments below)	Needs further practice and education to improve
1 Dangerous to Practice (see comments below)	Hazard to patients and others

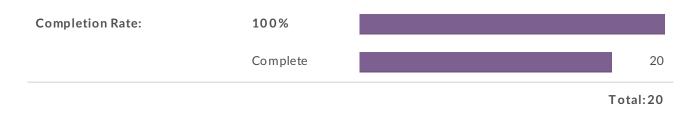
GRA	ADE	(СП	RCLE)	DAILY AFFECTIVE APTITUDE EVALUATION				
4	3	2	1	<b>Professionalism/Attitude</b> : The student's behavior demonstrated integrity, empathy, self motivation, self- confidence, team work, diplomacy, respect, patient advocacy, careful delivery of service, appropriate time management, appropriate appearance and personal hygiene.				
4	3	2	1	<b><u>Communication Skills</u></b> : Performs and reports patient assessments, completely and proficiently. Interacts with patients and other Health Care Professionals on a "student role" appropriate level				
				STUDENT PERFORMANCE				
4	3	2	1	<b><u>Phase Objectives:</u></b> Reviews current objectives and performs the tasks to standards outlined. Requests and accepts constructive criticism, takes personal responsibility for self-improvement.				
4	3	2	1	<b><u>Psychomotor skills</u></b> : Student can thoroughly describe all elements of applicable procedures and accomplishes psychomotor skills independently and proficiently.				
				TEAM LEADER EVALUATION (ONLY IF STUDENT FULLY LEAD THE TEAM)				
4	3	2	1	Interview: Completes comprehensive interviews. Demonstrated active listening				
4	3	2	1	Exam: Completes appropriate head-to-toe and/or focused physical exam				
4	3	2	1	<b>Treatment</b> : Formulates a field impression and implemented a treatment plan				
4	3	2	1	Skill: Interventions performed were complete. Satisfactory and timely				
4	3	2	1	Leadership: Set priorities, directed team, and adapted to evolving information				
Yes	Yes I No I       Student successfully lead the EMS team during patient encounters							
Instru	cto	r Co	omme	nts:				

Instructor Signature	Student Signature	Program Review $\Box$

Attachment 11, Report for EMS: Program Resource - Survey Completed by Students, follows this page.

# Report for EMS: Program Resource Survey Completed by Students

### **Response Counts**



### 1. A. Faculty teach effectively...

	5	4	3	2	1	N/A
1. In the classroom	16	3	0	1	0	0
	80.0%	15.0%	0.0%	5.0%	0.0%	0.0%
2. In the laboratory	12	3	2	3	0	0
	60.0%	15.0%	10.0%	15.0%	0.0%	0.0%
3. In the hospital clinical area	11	0	1	0	0	8
	55.0%	0.0%	5.0%	0.0%	0.0%	40.0%
4. In the field internship clinical area	14	3	1	0	0	2
	70.0%	15.0%	5.0%	0.0%	0.0%	10.0%

2. B. Faculty number is adequate...

	5	4	3	2	1	N/A
1. In the classroom	12	6	0	0	1	0
	63.2%	31.6%	0.0%	0.0%	5.3%	0.0%
2. In the laboratory	13	5	0	0	1	0
	68.4%	26.3%	0.0%	0.0%	5.3%	0.0%
3. In the hospital clinical area	9	2	0	0	0	8
	47.4%	10.5%	0.0%	0.0%	0.0%	42.1%
4. In the field internship clinical area	11	3	0	0	0	4
	61.1%	16.7%	0.0%	0.0%	0.0%	22.2%

### 3. Rate the statements about Faculty.

	5	4	3	2	1	N/A
C. Faculty have good rapport with students.	16	2	0	1	0	0
	84.2%	10.5%	0.0%	5.3%	0.0%	0.0%
D. Faculty help me with academic needs.	15	3	0	0	1	0
	78.9%	15.8%	0.0%	0.0%	5.3%	0.0%
E. Faculty ensure student representation on the program advisory committee.	15	3	0	0	0	1
	78.9%	15.8%	0.0%	0.0%	0.0%	5.3%

### 4. Rate the statements about Faculty. - comments

#### Count Response

1 Never heard of the program advisory committee. One instructor had good rapport with students, the other two and program director did not. Our instructor did not use classtime effectively (class time on unrelated music videos or youtube videos).

5. Rate the statements about Medical Director(s).

	5	4	3	2	1	N/A
A. I know who the Medical Director(s) is/are.	12	4	2	0	1	0
	63.2%	21.1%	10.5%	0.0%	5.3%	0.0%
B. The Medical Director(s) has/have provided instruction.	12	6	0	0	1	0
	63.2%	31.6%	0.0%	0.0%	5.3%	0.0%

### 6. Rate the statements about Medical Director(s). - comments

Count	Response
1	No idea who the Medical Director was.

### 7. Rate the statements about Support Personnel.

	5	4	3	2	1	N/A
A. Tutors assistme as needed.	9	4	1	0	0	5
	47.4%	21.1%	5.3%	0.0%	0.0%	26.3%
B. The admissions personnel assist me as needed.	13	5	0	0	1	0
	68.4%	26.3%	0.0%	0.0%	5.3%	0.0%
C. The financial aid personnel assist me as needed.	9	3	1	0	0	6
	47.4%	15.8%	5.3%	0.0%	0.0%	31.6%
D. The academic advisors assist me as needed.	13	3	0	0	0	3
	68.4%	15.8%	0.0%	0.0%	0.0%	15.8%
E. The librarians assist me as needed.	11	2	0	0	0	6
	57.9%	10.5%	0.0%	0.0%	0.0%	31.6%

### 8. Rate the statements about Support Personnel. - comments

Count	Response
1	l was unaware of these support personnel (except admissions).

### 9. Rate the statements about Curriculum.

	5	4	3	2	1	N/A
A. The curriculum covers the necessary lecture content for the entry-level Paramedic.	13	1	3	0	0	2
	68.4%	5.3%	15.8%	0.0%	0.0%	10.5%
B. The curriculum covers the necessary laboratory activities for the entry-level Paramedic.	10	3	1	1	0	3
	55.6%	16.7%	5.6%	5.6%	0.0%	16.7%
C. The curriculum includes necessary hospital/field internship experience for the entry-level Paramedic.	11	2	2	0	0	4
	57.9%	10.5%	10.5%	0.0%	0.0%	21.1%
D. The curriculum includes the necessary content in support courses (e.g. science, general education).	15	2	1	0	0	1
	78.9%	10.5%	5.3%	0.0%	0.0%	5.3%
E. The curriculum is an appropriate sequence of classroom, laboratory, clinical, and field internship activities.	14	4	1	0	0	0
	73.7%	21.1%	5.3%	0.0%	0.0%	0.0%

### 10. Rate the statements about Curriculum. - comments

#### Count Response

1

We were not adequately trained on skills, practicum.

### 11. Rate the statements about Financial Resources.

	5	4	3	2	1	N/A
A. There is financial support for special student instructional activities (e.g. field trips, meetings).	12	2	0	0	0	5
	63.2%	10.5%	0.0%	0.0%	0.0%	26.3%

### 12. Rate the statements about Financial Resources. - comments

Count	Response

### 13. A. Classrooms

	5	4	3	2	1	N/A
1. Are adequate in size.	16	3	0	0	0	0
	84.2%	15.8%	0.0%	0.0%	0.0%	0.0%
2. Have adequate lighting.	15	3	0	0	0	0
	83.3%	16.7%	0.0%	0.0%	0.0%	0.0%
3. Contain adequate seating.	11	5	1	0	0	0
	64.7%	29.4%	5.9%	0.0%	0.0%	0.0%
4. Have adequate ventilation (e.g., A/C, Heat).	14	3	0	0	0	0
	82.4%	17.6%	0.0%	0.0%	0.0%	0.0%
5. Have adequate instructional equipment (e.g., boards, projectors).	13	3	0	0	0	0
	81.3%	18.8%	0.0%	0.0%	0.0%	0.0%

### 14. B. Laboratory

	5	4	3	2	1	N/A
1. Is adequate in size.	14	2	1	0	1	0
	77.8%	11.1%	5.6%	0.0%	5.6%	0.0%
2. Have adequate lighting.	14	3	0	0	0	0
	82.4%	17.6%	0.0%	0.0%	0.0%	0.0%
3. Contains adequate seating.	14	2	0	0	0	0
	87.5%	12.5%	0.0%	0.0%	0.0%	0.0%
4. Has adequate ventilation (e.g., A/C, Heat).	14	2	0	0	0	0
	87.5%	12.5%	0.0%	0.0%	0.0%	0.0%
5. Activities prepare me to perform effectively in the hospital/field internship setting.	12	2	0	0	1	1
	75.0%	12.5%	0.0%	0.0%	6.3%	6.3%
6. Is accessible to students outside regularly scheduled class times.	13	1	0	0	1	1
	81.3%	6.3%	0.0%	0.0%	6.3%	6.3%
7. Is equipped with the amount of equipment necessary for student performance of required laboratory exercises.	13	2	1	0	0	0
	81.3%	12.5%	6.3%	0.0%	0.0%	0.0%
8. Is equipped with the variety of equipment necessary for student performance of required laboratory exercises.	14	1	1	0	0	0
	87.5%	6.3%	6.3%	0.0%	0.0%	0.0%
9. Is equipped with the amount of supplies necessary for student performance of required laboratory exercises.	14	2	1	0	0	0
	82.4%	11.8%	5.9%	0.0%	0.0%	0.0%
10. Is equipped with the variety of supplies necessary for student performance of required laboratory exercises.	15	2	0	0	0	0
	88.2%	11.8%	0.0%	0.0%	0.0%	0.0%

## 15. C. Ancillary Facilities

	5	4	3	2	1	N/A
1. Provide adequate quiet study area.	15	3	0	0	0	1
	78.9%	15.8%	0.0%	0.0%	0.0%	5.3%
2. Provide adequate secure storage for student personal items.	13	3	0	0	1	2
	68.4%	15.8%	0.0%	0.0%	5.3%	10.5%

### 16. C. Ancillary Facilities - comments

Count	Response
1	There was lots of gear in our class but our instructor didn't use it or couldn't find it when needed.

### 17. A-1. Clinical Rotations (Facilities)

	5	4	3	2	1	N/A
A. The hospital/field internship facilities offer an adequate number of procedures for me to meet clinical objectives.	17	1	0	1	0	0
	89.5%	5.3%	0.0%	5.3%	0.0%	0.0%
B. The hospital/field internship facilities offer an adequate variety of procedures for me to meet clinical objectives.	17	2	0	0	0	0
	89.5%	10.5%	0.0%	0.0%	0.0%	0.0%
C. The hospital/field internship facilities provide a variety of current equipment.	16	3	0	0	0	0
	84.2%	15.8%	0.0%	0.0%	0.0%	0.0%

### 18. A-2. Clinical Rotations (Experiences)

	5	4	3	2	1	N/A
A. Each hospital/field internship rotation is of sufficient	17	2	0	0	0	0
length to enable me to complete clinical objectives.	89.5%	10.5%	0.0%	0.0%	0.0%	0.0%
B. Overall, the hospital/field internship rotations provide similar competencies to all students.	18	1	0	0	0	0
	94.7%	5.3%	0.0%	0.0%	0.0%	0.0%

### 19. B. Clinical Instruction

	5	4	3	2	1	N/A
1. Ireceive adequate orientation to assigned hospital/field internship areas and procedures.	15	4	0	0	0	0
	78.9%	21.1%	0.0%	0.0%	0.0%	0.0%
2. Hospital/field internship instructors are sufficiently knowledgeable to provide instruction to me.	17	2	0	0	0	0
	89.5%	10.5%	0.0%	0.0%	0.0%	0.0%
3. Hospital/field internship instructors direct me in completing the assigned objectives.	16	2	1	0	0	0
	84.2%	10.5%	5.3%	0.0%	0.0%	0.0%
4. Clinical instructors are consistent in their evaluation of student performance.	18	1	0	0	0	0
	94.7%	5.3%	0.0%	0.0%	0.0%	0.0%
5. Hospital/field internship instructors are available to assist me, when needed.	16	2	0	0	0	1
	84.2%	10.5%	0.0%	0.0%	0.0%	5.3%
6. There are sufficient numbers of instructors for the number of assigned students.	16	3	0	0	0	0
	84.2%	15.8%	0.0%	0.0%	0.0%	0.0%

### 20. B. Clinical Instruction - comments

#### Count Response

1 All of my preceptors were great, taught me very well, feel very grateful to them. Instructor never let us know what "assigned objectives" were until internships were finished.

21. Rate the statements about Learning Resources (program and hospital/affiliate).

	5	4	3	2	1	N/A
A. Reference texts are adequate to support assignments	16	2	0	0	0	1
	84.2%	10.5%	0.0%	0.0%	0.0%	5.3%
B. Journals are adequate to support assignments	13	5	0	0	0	1
	68.4%	26.3%	0.0%	0.0%	0.0%	5.3%
C. Computer resources are adequate to support the curriculum.	16	1	1	0	0	0
	88.9%	5.6%	5.6%	0.0%	0.0%	0.0%
D. Internet access is adequate to support assignments.	16	2	0	0	0	0
	88.9%	11.1%	0.0%	0.0%	0.0%	0.0%
E. Databases are adequate to support assignments.	16	2	0	0	0	1
	84.2%	10.5%	0.0%	0.0%	0.0%	5.3%

# 22. Rate the statements about Learning Resources (program and hospital/affiliate). - comments

Count

Response

### 23. Rate the statements about Physician Interaction.

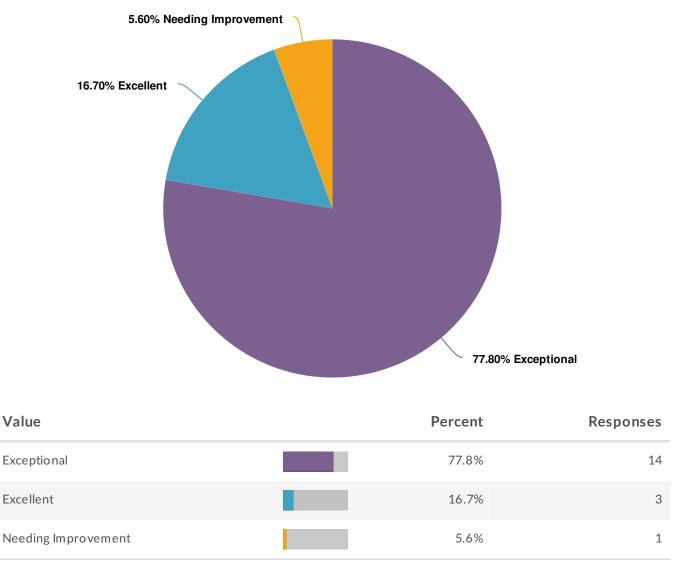
	5	4	3	2	1	N/A
A. Physician/student interaction facilitates the development of effective communication skills between me and physicians.	13	2	1	0	0	3
	68.4%	10.5%	5.3%	0.0%	0.0%	15.8%
B. Physician contact is sufficient to provide me with a physician perspective of patient care.	12	3	0	0	0	4
	63.2%	15.8%	0.0%	0.0%	0.0%	21.1%
C. Overall, my exposure to physicians in the program is adequate.	13	2	0	0	0	4
	68.4%	10.5%	0.0%	0.0%	0.0%	21.1%

24. Rate the statements about Physician Interaction. - comments

Count

Response

25. Please rate the OVERALL quality of the resources supporting the program.





# 26. Which resources are the strongest contributors to your learning? Why?

Count	Response
1	
1	All
1	Because
1	Classroom drawings. Excavators, buildings, buisy highways, and lungs.
1	Clinical
1	Hands on learning and visual
1	Hands on learning was the best way for learning.
1	Instructors
1	Lab because hands on
1	My instructors and clinical sights
1	My instructors, because they provide me with everything Ineed.
1	The teachers and scenarios
1	The textbook and the clinical sites and preceptors.
1	clear instruction, visual aids, interactive intructors
1	hands on

# 27. Which resources need improvement? Why?

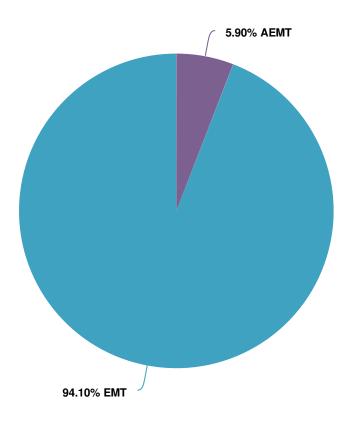
#### Count Response

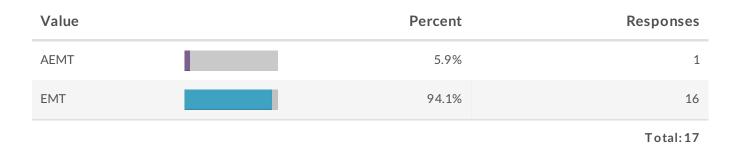
3	None
1	Better books
1	Better lab equipment
1	Giles
1	More lab time
1	N/a
1	Organization of equipment in classroom
1	Teachers with more teaching experience, and more 911 experience. Lots of class time was not used well, wasted on videos, etc. Instructor had never seen the slides he was lecturing from before.
1	The lecture
1	more instructors would be nice, able to get by, but would definatly improve learning
1	more skills time

# 28. Comments/suggestions to improve the program's overall resources?

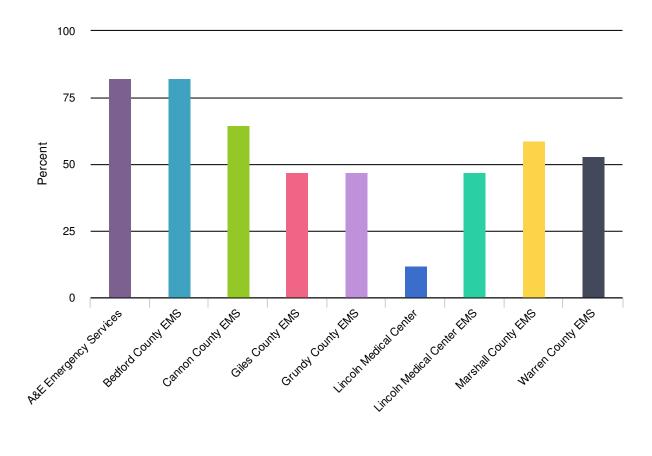
Count	Response
1	Adjusted attitude / way of approaching students. Felt very parental, bullying at times.
1	Allgood
1	lt was a great program
1	More clinical sites such as rutherford, williamson would be nice to do clinicals at
1	More hands on lab time
1	More hands on skills
1	Moreinformed
1	N/A
1	N/a
1	None

# 29. Which program are you currently in?





30. Select the location(s) where you completed your AEMT/EMT clinical(s). Check all that apply.



Value	Percent	Responses
A&E Emergency Services	82.4%	14
Bedford County EMS	82.4%	14
Cannon County EMS	64.7%	11
Giles County EMS	47.1%	8
Grundy County EMS	47.1%	8
Linco In Medical Center	11.8%	2
Linco In Medical Center EMS	47.1%	8
Marshall County EMS	58.8%	10
Warren County EMS	52.9%	9

# 31. A&E Emergency Services

	Strongly Agree	Agree	Disagree	Strongly disagree
I benefited from clinical time at this agency.	9	4	1	0
	64.3%	28.6%	7.1%	0.0%
My time at this agency contributed to my ability to provide quality patient care.	10	2	2	0
	71.4%	14.3%	14.3%	0.0%
If given a choice, I would return to this facility for clinical time.	9	4	0	1
	64.3%	28.6%	0.0%	7.1%

# 32. A&E Emergency Services - comments

Count	Response
1	Boring site
1	Convalescent services not as useful as 911 services.
1	Enjo yed the staff
1	Good
1	Goodone
1	Goodsight
1	Great
1	l enjo yed the clinical
1	Loved it. Extremely helpful
1	None
1	They were very helpful and let me participate more than any place else I went
1	Yes
1	great company with great people

# 33. Cannon County EMS

	Strongly Agree	Agree	Disagree	Strongly disagree
I benefited from clinical time at this agency.	8	3	0	0
	72.7%	27.3%	0.0%	0.0%
My time at this agency contributed to my ability to provide quality patient care.	10	1	0	0
	90.9%	9.1%	0.0%	0.0%
If given a choice, I would return to this facility for clinical time.	8	3	0	0
	72.7%	27.3%	0.0%	0.0%

# 34. Cannon County EMS - comments

Count	Response
1	Enjoyed the clinical
1	Good calls but not a lot of volume
1	Good site
1	Good site!
1	Great
1	Great
1	It was a fun site
1	Really took me under their wing, showed me and explained to me lots of things.
1	Staff enjo yed having me there
1	Yes
1	no

## 35. Dekalb County EMS

Strongly Agree	Agree	Disagree	Strongly disagree	
----------------	-------	----------	-------------------	--

### 36. Dekalb County EMS - comments

Count

Response

# 37. Giles County EMS

	Strongly Agree	Agree	Disagree	Strongly disagree
I benefited from clinical time at this agency.	4	2	2	0
	50.0%	25.0%	25.0%	0.0%
My time at this agency contributed to my ability to provide quality patient care.	4	2	2	0
	50.0%	25.0%	25.0%	0.0%
If given a choice, I would return to this facility for clinical time.	5	2	1	0
	62.5%	25.0%	12.5%	0.0%

# 38. Giles County EMS - comments

Count	Response
1	Didn't like it
1	Goodone
1	Goodone
1	Goodsight
1	No
1	None
1	Very friendly.
1	Very helpful. Good

# 39. Grundy County EMS

	Strongly Agree	Agree	Disagree	Strongly disagree
I benefited from clinical time at this agency.	6	0	0	2
	75.0%	0.0%	0.0%	25.0%
My time at this agency contributed to my ability to provide quality patient care.	6	0	0	2
	75.0%	0.0%	0.0%	25.0%
If given a choice, I would return to this facility for clinical time.	6	0	0	2
	75.0%	0.0%	0.0%	25.0%

# 40. Grundy County EMS - comments

Count	Response
1	Close to home enjoyed the crazy calls
1	Enjo yed the clinical
1	Goodsight
1	No patients, the people working were rude
1	No pts
1	Very supportive, showed me the ropes very well on my first clinical.
1	Yes
1	no

# 41. Marshall County EMS

	Strongly Agree	Agree	Disagree	Strongly disagree
I benefited from clinical time at this agency.	8	2	0	0
	80.0%	20.0%	0.0%	0.0%
My time at this agency contributed to my ability to provide quality patient care.	8	2	0	0
	80.0%	20.0%	0.0%	0.0%
If given a choice, I would return to this facility for clinical time.	7	2	0	0
	77.8%	22.2%	0.0%	0.0%

# 42. Marshall County EMS - comments

Count	Response
1	Good friendly.
1	Goodone
1	Good quality teachers
1	Good site
1	Good. Very helpful
1	Great
1	Loved it
1	Nice staff.
1	None
1	Yes

# 43. Warren County EMS

	Strongly Agree	Agree	Disagree	Strongly disagree
I benefited from clinical time at this agency.	9	0	0	0
	100.0%	0.0%	0.0%	0.0%
My time at this agency contributed to my ability to provide quality patient care.	9	0	0	0
	100.0%	0.0%	0.0%	0.0%
If given a choice, I would return to this facility for clinical time.	9	0	0	0
	100.0%	0.0%	0.0%	0.0%

# 44. Warren County EMS - comments

Count	Response
1	Enjoyed the clinical
1	Good
1	Good site
1	Great
1	Great calls
1	Loved it
1	Wentout of their way to train and explain things to me.
1	Yes

# 45. River Park Hospital

Strongly Agree	Agree	Disagree	Strongly disagree	

### 46. River Park Hospital - comments

Count	Re	sponse			
47. Unity Medical	Center				
Strongly Agree	Agree	Disagree	Strongly disagree		
48. Unity Medical Center - comments					
Count	Re	sponse			

49. Select the location(s) where you completed your Paramedic clinical(s). Check all that apply.

Percent

No data to display

# 50. Bedford County EMS

	Strongly Agree	Agree	Disagree	Strongly disagree
I benefited from clinical time at this agency.	10	4	0	0
	71.4%	28.6%	0.0%	0.0%
My time at this agency contributed to my ability to provide quality patient care.	10	4	0	0
	71.4%	28.6%	0.0%	0.0%
If given a choice, I would return to this facility for clinical time.	9	5	0	0
	64.3%	35.7%	0.0%	0.0%

# 51. Bedford County EMS - comments

Count	Response
2	Good site
2	Great
1	Enjo yed the clinical
1	Explained everything .
1	Goodone
1	Good teachers
1	Good. Nice and friendly
1	None
1	The employees here weren't as generous with their time as the other sites, but no issues
1	Veryhelpful
1	Yes
1	no

# 52. Lincoln Medical Center EMS

	Strongly Agree	Agree	Disagree	Strongly disagree
I benefited from clinical time at this agency.	7	1	0	0
	87.5%	12.5%	0.0%	0.0%
My time at this agency contributed to my ability to provide quality patient care.	7	1	0	0
	87.5%	12.5%	0.0%	0.0%
If given a choice, I would return to this facility for clinical time.	7	1	0	0
	87.5%	12.5%	0.0%	0.0%

# 53. Lincoln Medical Center EMS - comments

Count	Response
1	Fun place to ride
1	Good
1	Goodone
1	Goodsite
1	Great
1	Loved it. Friendly. Extremely helpful
1	Very nice staff.
1	Yes

### 54. Centennial Medical Center

Strongly Agree	Agree	Disagree	Strongly disagree

### 55. Centennial Medical Center - comments

Count	Response

### 56. Nashville Fire Department

Disagree

### 57. Nashville Fire Department - comments

Count

Response

### 58. Williamson Medical Center EMS

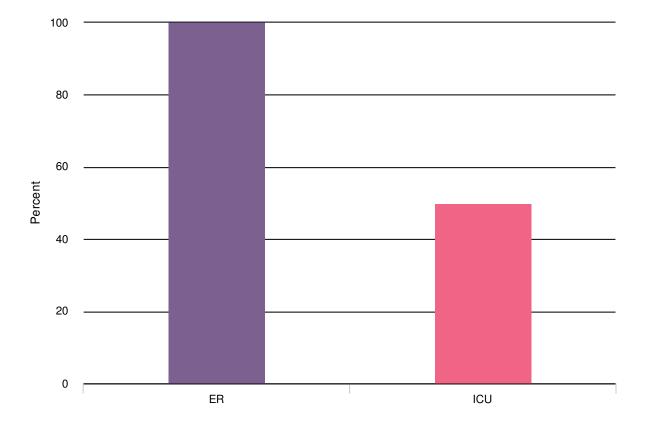
Strongly Agree	Agree	Disagree	Strongly disagree

### 59. Williamson Medical Center EMS - comments

Count

Response

## 60. Which unit did you visit? (Check all that apply).



Value	Percent	Responses
ER	100.0%	2
ICU	50.0%	1

# 61. Rate the statements about the facility.

	Strongly Agree	Agree	Disagree	Strongly disagree
I benefited from clinical time at this facility.	2	0	0	0
	100.0%	0.0%	0.0%	0.0%
My time at this facility contributed to my ability to provide quality patient care.	2	0	0	0
	100.0%	0.0%	0.0%	0.0%
If given a choice, I would return to this facility for clinical time.	2	0	0	0
	100.0%	0.0%	0.0%	0.0%

### 62. Lincoln Medical Center - comments

Count

63. Which unit did you visit? (Check all that apply.)



### 64. Rate the statements about the facility.

Strongly Agree	Agree	Disagree	Strongly disagree

### 65. Tennova Harton - comments

Count

66. Which unit did you visit? (Check all that apply)



No data to display

### 67. Rate the statements about the facility.

Strongly Agree A	Agree	Disagree	Strongly disagree
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## 68. Tennova Shelbyville - comments

Count	Response			
69. St. Thomas Ruthe	erford			
Strongly Agree	Agree	Disagree	Strongly disagree	
70. St. Thomas Ruthe	erford - con	nments		
Count	Re	esponse		
71. Vanderbilt Child	ren's Hospi	ital		
Strongly Agree	Agree	Disagree	Strongly disagree	

## 72. Vanderbilt Children's Hospital - comments

Count

Response

# 73. Williamson Medical Center

Strongly Agree	Agree	Disagree	Strongly disagree

## 74. Williamson Medical Center - comments

Count

Response



#### MOTLOW STATE COMMUNITY COLLEGE EMS EDUCATION ADVISORY COMMITTEE AGENDA JAN 27, 2014

#### I. WELCOME

Drew started the meeting at 10:04 with passing out a packet with agenda and assorted materials.

#### II. INTRODUCTIONS

Each member present introduced themselves and the following people were present: Pat Hendrix- Motlow Nursing Director LeeAnne Boeringer- State EMS Consultant **Brett Young- EMS Faculty** Elaine Middleton- IDB Fayetteville Laura Monks- Moltow Administration Debbie Yorba- Lincoln Medical Center Jake Thomas-Graduate of EMT-IV Drew Hooker- EMS Program Director Amber Bryant- Graduate of EMT-IV Sarah Mac Young- Public Member Absent: Richard Shasteen- Tullahoma Fire Chief **Richard Wright-Lincoln County EMS** Michael Bagby- Fayetteville EMT Team leader Dylan Blair-McMinnville EMT Team leader

#### III. 5 YEAR PLAN

Drew introduced the programs 5 Year goals. The list was attached in the packet presented to members. Packet attached to the minutes.

#### IV. NEW INSTRUCTOR

Drew laid out his plans for the current instructors and the plans for hiring new instructors.

- a. Fayetteville
  - i. Brett Young- Bedford EMS

- ii. Justus Smith Tullahoma Fire
- b. McMinnville
  - i. Shirley Prater- Nursing and Paramedic for 23 years
- c. Plan for Instructors

Drew expressed the plan to request two additional full time positions for preparation for the paramedic program and to add an EMT Coordinator.

- i. 2 FT Instructors
  - 1. Paramedic Coordinator
  - 2. EMT Coordinator
- ii. 2 Adjunct Instructors
  - 1. Paramedic Program and EMT

#### V. BUDGET

Drew expressed concern about the current budget and stated he plans to request a significantly larger budget to fully fund all necessary needs in the program. The budget will include the below items.

- a. 2 FT Instructors
- b. Increased Budget progressing over 5 years
- c. New Equipment Purchases

#### VI. CAMPUSES

- a. Fayetteville
  - i. New Skills Lab
  - ii. New Simulation Lab

Drew informed the group about the new skills lab and simulation lab that included the METI man-Adult, Child and Infant. Pat Hendrix elaborated on the mannequins and the abilities of each. Pat also included that EMS can use the nursing NOEL mannequin and Drew stated that nursing planned to use the METI Man mannequins as well.

- b. McMinnville
  - i. New Classroom

Drew informed the group about the status of McMinnville. Doug Peacock-lead instructor New classroom- smaller but more efficient. 9 students currently

#### VII. PARAMEDIC PROGRAM

Drew explained the uniqueness about EMS program with having to balance four distinct groups.

- a. State Status
  - i. Application- The application has been filed with the state.

- ii. Site Visit- Leeanne stated that a tentative date of Feb 26 will be state site visit. Drew stated they would need to get the appropriate equipment purchased.
- iii. Board Approval- Will be in march, following successful site visit.
- b. Curriculum Status

Drew gave a brief rundown about the whole process for the state TBR process.

- Jan 23, 2014 Meeting Drew explained about the breakdown of 43 hours for concentration and 17 hours for general education. AAS will be offered at Motlow. All state program directors present. Will also be a 43 hour technical certificate. Hours will be 1000-1300 hours.
- ii. Finalizing Curriculum this week
- iii. Academic Affairs Approval
- iv. TBR Board Approval- Awaiting the groups finalization of curriculum.
- c. College Status
  - i. Academic Affairs- Pat expressed that she would assist with that process.
  - ii. Budget Approval- Drew explained that the budget is currently low, would request additional funding in this budget cycle.
  - iii. Equipment purchase- Needing equipment for Paramedic school.
- d. CoAEMSP

Drew explained the process of CoAEMSP. He explained the necessity of accreditation.

- i. Initial Application- Drew explained that the application has been sent and awaiting finalization of state approval before we continue to next step.
- ii. LSSR Survey- Awaiting state approval. Drew will send LSSR on Aug 1, 2014.
- iii. Letter Of Review- Leeanne stated process of Letter of review. Must have Letter of review in hand prior to end of first class.

Drew stated he would then need to complete ISSR then would get final approval with site visit.

#### VIII. PROGRAM

- a. Paramedic
  - i. 12-15 Students admitted first year- Drew explained the need to limit in the first year to assist with additional paperwork. Leeane explained the changes from EMT to Paramedic according to paperwork. Brett Spoke about the need for preparation in first year so number being lower assists with that process.
  - ii. MAR-APR Applications

- iii. Start in AUG
- iv. Grey Uniforms-
- v. Looking to expand Clinical sites- Drew explained the need for additional sites. Heritage Medical Center
   Williamson Medical Center
   Rutherford EMS

Laura was concerned about entering another colleges footprint. Drew stated he would request permission and make sure they were ok before moving forward. Leeanne expressed the need for Program to request each site from other programs to make sure they were aware and state notification as well.

Explained AEMT would stretch the current sites.

- b. EMT
  - i. 19 current students

Drew explained that the goal is 36 students in the fall and has had 24 current interested students.

ii. Pass rates Still low

Drew explained that the rates were 53% and estimated national average around 72%. Brett stated he had plans to increase that number.

- iii. Lesson Plans for Instructors- Instructors expected to complete lesson plans the night before.
- iv. New Lead Instructor- Fayetteville

Drew explained he appointed Brett Young the new Lead instructor for Fayetteville. Brett stated he had two good classes so far and looks to build upon that to increase pass rates.

v. Green Uniforms

#### IX. SURVEYS

Drew presented the attached surveys. Wanted to show the group how they would collect data to improve the program.

- a. Employer Survey
- b. Students Survey
- c. Graduate Survey
- X. LOGO

#### XI. APPOINTING A CHAIRPERSON

Laura volunteered to be chairperson. No one in the group objected. Laura assumed that role going forward.

Meeting adjourned at 11:16



#### MOTLOW STATE COMMUNITY COLLEGE EMS EDUCATION ADVISORY COMMITTEE MINUTES SEPT 8, 2014

#### I. WELCOME

Chairwoman Laura Monks called the meeting to order at 10:04am.

#### II. ROLL CALL

She commenced a Roll call with the following present:

Debbie Yorba

Richard Wright

Chris Smith

**Richard Shasteen** 

Roy Griggs

Brett Young

Leeanne Boeringer

Elaine Middleton

Sarah Mac Young

Drew Hooker

Justus Smith

Laura Monks- Chairwoman

Michael Bonner- Late Arrival

Drew Hooker

Absent: Pat Hendrix Ben Cottrell Jake Thomas

#### III. APPROVAL OF MINUTES

Debbie Yorba made a motion to approve the minutes from January Meeting Elaine Middleton Second All approved

#### IV. OLD BUISNESS

Laura Monks allowed Drew to have the floor for old business

#### a. INSTRUCTORS

Drew Hooker explained the current state of instructors

Brett Young Promoted at BCEMS and due to schedule change has left as instructor. Stacy Johnson and Matt Ulrich has left due to nursing school. Barry Jones has left due to accepting a new position at MTSU. Alana Brown New lead EMT instructor at Fayetteville. Meaghan Austin New EMT instructor at Fayetteville Ben Smith New EMT ASST Instructor Fayetteville

#### b. BUDGET

2,300 previous Increased to 23,500 annual Budget Lump sum 20,000 to purchase new Paramedic Equipment Two positions requested. Only one new FT position Travel Budget has been added.

#### c. NEW EQUIPMENT

All budget money has been spent on new equipment. See Budget Notes

#### d. STATE VISIT

State visit in Feb- Donna Tidwell, Leanne Boeringer and Chip Cook present. Passed without infraction Donna gave great information to assist with accreditation

#### e. STATE BOARD APPROVAL

Unanimous approval from board on program. Initial approval. Will get another site visit after we graduate out first class.

#### f. CURRICULUM

Curriculum has been finalized showing 43 hours of credit. Still working on path for current paramedic to AAS Three classes per semester. Two days per week. Clinical have been increased. Different Hospitals, Different ambulances= different insight.

One change to curriculum at Motlow. Capstone class in summer is online/Hybrid.

#### g. COAEMSP UPDATE

Awaiting approval from VP to send ISSR Site visit after our graduation of first class.

#### h. CLINICAL SITE UPDATE

New clinical sites of Baptist, STMC, A&E, NFD Still working to get RCEMS, Heritage, Sleep Lab Expanded @ Harton Regional, LMC and Sothern Tennessee MC Ambulance Services have been very beneficial.

#### i. STUDENT NUMBERS

Enrollment doubled in first year. 25 EMT students and 10 Paramedic Students. Interviewed 22

Accepted 12 with 2 alternates

Unfortunately had two drop out and were not able to attend or accepted into another program.

Working with students to be critical thinkers, making emotional decisions vs. Research based decisions.

#### j. PASS RATES

Pass rates for last year 79% 50-55% previous 5 years Drew stated "We are going to do it right or back-up and re-do."

New inventive teaching methods. Case Studies, scenarios...etc.

Want to be at 85% pass rates which are higher than NREMT averages.

#### k.

v.

#### **NEW BUISNESS**

With no more discussion Laura Monks opened the floor to Drew Hooker for New business

#### a. PARAMEDIC SCHOOL UPDATE

10 STUDENTS Great first two weeks Great participation Many local services Seem to be a good group Already have been studying together and creating online study groups

Our main target area is our service area, but also work to benefit the region.

#### b. SEPT STATE BOARD MEETING

AEMT approval for both campuses at State Board Meeting.

#### c. PARAMEDIC SKILL NUMBERS

After review of the attached skill sheet the committee called for motion to approve the skill minimums. Richard Shasteen made the motion to approve Elaine Middleton Second.

All approved

#### d. EXPIRED EQUIPMENT/EXPIRED DRUGS

No longer accept expired drugs

We will still accept and are very appreciative to get expired equipment

#### e. PARAMEDIC CLINICAL HOURS

Significantly higher Semester 1- 152 hours Semester 2- 208 hours

Semester three not yet been determined, But will likely be 280 hours.

#### f. **PROTOCOL MANUAL**

State protocols Approved by Medical Director

#### g. LAB MANUAL

Skills sheets broken down in similar fashion to NREMT Group in categories similar to lab manual Proper checks and balances in the lab.

#### h. CLINICAL SITE MANUAL

Starting to be distributed to all sites. Will be located at all clinical sites. Gives the staff objectives, what each student can do, and dress code for clinical.

#### i. SKILLS MANUAL

covers all skills in the skill sheets.

#### j. PARAMEDIC PRECEPTOR PACKET

Contact directors to establish proper preceptors. This is to ensure well rounded paramedics. Will distribute packet to preceptors following a phone interview with paramedic coordinator.

Minimum requirements for preceptors. 5 years EMS 2 years Medic.

#### k. TAACCT GRANT

1.25 million Budget Ambulances Personnel Equipment

#### VI. ADJOURNMENT

Laura Monks called for a motion to adjourn. Richard wright made the motion. Roy Griggs Second.

Next meeting in December or January.



#### MOTLOW STATE COMMUNITY COLLEGE EMS EDUCATION ADVISORY COMMITTEE ADGENDA NOV 19, 2015

- I. Working Lunch Starting at 11:00am
- II. WELCOME
- III. ROLL CALL
  - a. Brett Young
  - b. Leeanne Boringer
  - c. Chris Smith
  - d. Tim Stubblefield (In place of Richard Shasteen)
  - e. Debra Smith (In place of Laura Monks)
  - f. Drew Hooker
  - g. Justus Smith

Absent- Ben Cottrell, Roy Griggs, Debbie Yorba, Elaine Middleton, Richard Wright, Jake Thomas, Sarah Mac Young

#### IV. APPROVAL OF MINUTES

- a. Brett Motioned to approve
- b. Chris seconed
- c. Motion carried
- V. UPDATES
  - a. INSTRUCTORS (Drew Gave Report)
    - i. LOSING DOUG PEACOCK IN MCMINNVILLE
      - 1. DISCUSSING WITH A POTENTIAL INSTRUCTOR
      - 2. WILL DO A PLAQUE FOR HIM
    - ii. BO PHILLIPS NOW HELPING JUSTUS WITH MEDIC
      - 1. ALANA BROWN PULLING DOUBLE DUTY REVIEWING PCR'S
  - b. BUDGET ( Drew Gave Report)
    - i. 30,500 OPERATING BUDGET UP ABOUT 20% FROM LAST YEAR
      - 1. MAINTAINING WELL AT THAT FIGURE

- c. NEW EQUIPMENT ( Drew Gave Report)
  - i. MILO RESPONSE HAS ARRIVED
  - ii. NEW JUMP BAG SYSTEM FOR PEDIATRICS
  - iii. NEW JUMP BAGS FOR ADULTS
  - iv. NEW AMBULANCE HOUSED AT FA
- d. CURRICULUM (Justus Gave Report)
  - i. Three days in Fall and 3 days in Spring working with Fire recruits
    - 1. Extrication
    - 2. Haz-mat
    - 3. Fire ground ops
  - ii. Moved OB totally to First Semester due to clinical space
- e. COAEMSP UPDATE (Drew Gave Report)
  - i. LOR IN HAND, WILL SUBMIT LSSR SOON, SITE VISIT TO FOLLOW
- f. CLINICAL SITE UPDATE (Justus Gave Report)
  - i. ADDED LIFEFLIGHT AND VANDY PEDS
  - ii. Continue looking for additional sites
- g. STUDENT NUMBERS (Justus Gave Report)
  - i. 10 students
  - ii. Applications up from last year
  - iii. BRANCHING INTO OTHER REGIONS for applicants
    - 1. Leeanne stated that there needs to be access to all aspects of the college. Drew insured that that access is available and talked about through the course.
    - 2. Drew Added that there is new completion coaches to help the students.
- h. PARAMEDIC SKILL NUMBERS (Justus Gave Report)
  - i. AVERAGE SKILLS NUMBERS SHEET
- VI. OLD BUISNESS
  - a. Handbook changes
    - i. HANDBOOK CHANGES FOR EARINGS
    - ii. UPDATED HADBOOK FOR ATTENDANCE POLICY
    - iii. UPDATED TATTOO POLICY
- VII. NEW BUISNESS
  - a. PARAMEDIC SCHOOL UPDATE
  - b. DEGREE COMMITTEE UPDATE
  - c. CLINICAL SITE DROP
  - d. APPLICATIONS BEGIN DECEMBER 1

#### VIII. ADJOURNMENT

- a. Tim motion to adjourn
- b. Second by Debra
- c. Motion carried.

#### IX. FACILITY TOUR

Our 2016 Meeting was cancelled due to to many cancellations. We are planning one in Early 2017

Drew Hooker M.P.A, CCPM, I/C EMS Director Motlow State EMS Education

Fayetteville Office:Fire Academy Office:1802 Winchester Hwy2161 Unionville-Deason RdFayetteville TN, 37034Bell Buckle, TN 37020

Fire Academy Office: 931-294-4192 Fayetteville Office: 931-438-0028 Fax: 931-393-1879 Email: <u>dhooker@mscc.edu</u> Website: www.mscc.edu/ems

### Faculty Mosting Minutes

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Date/ Time	August 18, 2014 - 12:05pm Fall Accembly Department Meeting			Ninifar -1	
Members Present	Pat Hendrix, Allison Barton, Anny Holder, Melissa Pineda, Teresa Boyer, Margaret Hale, Cathy Simpson, Winifred Howell, Kimberly Hackney, Drew Hooker, and Justus Smith				
Members Absont	Megan Green, Eric Norton, Michelle Pierce	·			
Report					
Agenda Topis	Discussion/ Action Taken	Follow Up if Needed Target Date	Responsible Person(s)	ACEN Standard	
Introductions	All faculty and staff introduced themselves to the group.				
Update RxTN Grant	The RxTN grant will end on September 30, 2015. Money is still available through the grant that needs to be spent on the program. Resommendation was made to purchase pediatric simulators and/or offer a tutoring/remediation service to students.	Fall 2014	Eric Norton/Pat Hendrix	Resources	
Update EMS Program	The paramedic program has hired Justus Smith to be their full-time paramedic Instructor. Paramedic Program will begin this Fall 2014 with10 students selected to begin the program. The student selection included an entrance test and an interview. Enrollment for EMT and AEMT has doubled from past years. The EMT-IV pass rate has increased				
	trom past years at 53% to currently 83%. The EMS Program will begin application for accreditation. Program goals for this academic year: -Continue to expand the program -Ramp up our con-ed -graduate flist class of the paramedic program -Continue to improve pass rate to at least 90% or				

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# Faculty Mosting Minutes

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Yndale Nursing Program	Patiklandhix will continue the Academic Year 2014-2015 as the Interim Director of Nursing. Class of 2014's pass rate for the NCLEX-RN is expected to be around \$5%. Allison Barton and Allen Sanders will begin to offer Information Sessions for the Nursing program. The information sessions will be offered at Moone, Smyrna, McMinnville, and Fayetteville. Suggestions: have the nursing program "utilize the information sessions" by making the session's mandatory; record the session for students that are unable to attend; have a way for reservations to be made to ensure adequate room and materials. Teresa Boyer is no longer the Advisement Coordinator, she felt her focus needed to be on second level.		
80mmittees	Fall 2014 Committees:         International Education: Cathy Simpson         Library Committee: JoAnne Mullins         Student Success: Kimberty Hackney         TAF: Drew Hooker         Academic Affairs: Any Holder         Cultural Affairs: Margaret Hale         Faculty Council: Winifred Howell         Faculty & Staff Development: Stefanie Brown         Student Affairs: Teresa Boyer         Both Teresa Boyer and Melissa Pinedia will rotate         off of the Curriculum committee next year.         Curriently serving: Teresa Boyer, Mallissa Pinedia,		
Acciection for both EMS and Nursing	Anny Holder, Maigaret Hale, and JoAnne Mullins. Accreditation year for both EMS and Nunsing programs. Both teams need to partmer together and work under the same guidelines.		

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# Faculty Mosting Minutos

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Thoughts from the Vice President of Academic Affairs- Dr. Gindy Kelly	Faculty will be required to provide at 6 hours off advisement during the week of August 18-22. Thoughts from Vice President of Academic Affairs- Dr. Cindy Kelly: -Requests that faculty complete attendance in a timely manner. All faculty and adjunct faculty must report. - Faculty need to use the Early Alert system for students who are not attending class. -Engage faculty in the QEP process- faculty need to understand the impact on performance funding. -Continue to work on advising more students and completing GPS plans for students. -Faculty and staff are asked to be more engaged with students so that students can learn your face. Faculty requested feedback from Dr. Kelly regarding "when do they submit the Early Alert, how many days into the semester?" Clarification is needed.	
Goals for AY 2014- 2015	Pat Hendrix has requested that each level of the nursing program and the EMS program to work on specific goals for this academic year. And answer the question: Where do you want your program to be 5 years from now?	
College Training Medules	All faculty and staff should complete the training modules for the College. The modules must be completed before a date in October.	
Next Meeting Date		ang
Upcoming Topics		
Upcoming Dates	8/20/14-QEP Meeting	
Adjournment	1:40 pm	

Allison Barton, Nursing Secretary, Scribe

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Date/ Time	August 17, 2015 Meeting called to order at 1:38 prm			
Nombors Present	Mike Beavers, Justus Smith, Drew Hooker, Marga Cathy Simpson, Patty Catlin, Karen Bucher, Teres	net Hale, Amiy Holder, Nan sa Boyer and Winfred How	cy Inby, Pat Hendri H	x, Kimberly Hackney,
Members Absent	N/A			
Report				
Agenda Topis	Discussion/ Action Taken	Follow Up if Needed Target Date	Responsible Person(s)	ACEN Standard
Welcome Introductions New Employees, Patty Catlin and Mike Beavers	Pat asked we go around the room introduce ourselves and tell a little about themselves	<b>N/A</b>	N/A	
Faculty & Staff	Faculty position posted on HR Need more help on Level II Megan Partin has agreed to help with lectures We have been cleared for 2 positions Faculty Manual revisions are ongoing and up for discussion Discussion about working on Smyrna campus after hours			Standard 2
Communication with students	Please be careful of email correspondence. Always model the professional image you want students to see. Be careful and represent the college well.			
Accessibility- training/course review	TBR will be pushing through more initiatives to be more aware. If you have an interest, courses to review per ADA guidelines and training will be available.	Accessibility-meeting ADA requirements-This is on the radar		Standard 3
Simon Hall	Has been renovated this summer.			
Faculty Absence Reporting Tool	Pat showed this on the screen and answered any questions that faculty had. This is something beneficial to administrators and students. This does not replace a sick leave form.	· ·		

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# Department Meeting Minutes

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Grade Change Form	Pat showed the form on the screen and answered questions. Pat sent the guidelines on this.
Hiring Practices	Changes have occurred from the new President. President will be involved. Every position will be reviewed and administration will decide what positions are filled. College has positions-not departments When job is posted-salary will be posted. Faculty will interview applicants. The department will identify strength and weakness of the candidates. 2 <sup>nd</sup> interview will be with VP and President. President will call and offer position. Pat said the department will fight for salary recognition. We don't want to be impacted as we want the BEST. Pat noted that graduation students make more than instructors and she also has
ITV	concerns about the timeline for hiring.           Mark Landrum is the new ITV contact person-will coordinate at all campuses
Committee Appointments	Faculty Council-Winfred Howell, Teresa Boyer and Kimberly Hackney Faculty Staff Development-Margaret Hale International Education-Cathy Simpson TAF-Drew Hooker Academic Affairs-Amy Holder Cultural Affairs-Margaret Student Affairs-Teresa Boyer
Other notes and comments:	<ul> <li>Guests-Library-Deborah Logan and Nancy Jones</li> <li>1. Extra credit for library orientation-notify library if interested</li> <li>2. Nursing Textbooks on reserve-faculty can check with library to be sure up to date textbooks available</li> <li>3. Do students use textbooks?</li> <li>4. Do they have text in E-books</li> <li>5. Motlow library subscribes to EPSCO, Gayle</li> <li>6. Motlow nursing students need 2 ID's</li> <li>7. Also please remember to check out books for pleasure</li> <li>Guest-Dr. Cindy Kelley</li> <li>1. Brought pens for each Motlow employee</li> <li>2. Talked about Smyrna and McMinnville parking issues</li> </ul>

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Attachment 3

# Department Meeting Minutes

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	<ol> <li>SACS Reaffirmation Committee-Dr. Kelley and Sid Hill</li> <li>Performance Funding</li> <li>Enrollment growth at Smyrna</li> <li>No more main campus- we are Smyrna campus, McMinnville campus, Moore campus &amp; Fayetteville campus</li> <li>Advising will be done through Coaches</li> <li>Workforce Development-Chancellor wants more</li> <li>6-month Academic Leadership structure</li> <li>Amazon is the largest retailer in the world</li> <li>Future is Beacons instead of Apps (video games for autistic children)</li> </ol>
Upsoming Topics Upsoming Dates Adjournment	Define Previous learned skill and when is it considered as a previous learned skill Next meeting, September 23, 2015 @ 12:00 noon 4:12 pm

Nancy Irby, Nursing Secretary, Scribe

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ılırattenslance-were: Part-Lenstrix, MikeeBeavers, TeresaaBoyer, Margareti Hala Anny, Hobker, Maraan Stewart, Minifeed-Howerl, Lor i Fisher, MilicentRobison, Cattly Sinnsson, Justus Smith, Marcy, Irby and Andeen Lanchum

Absent: KimbenlyHackney, DrewHooker

Wakome and Introductions - Each person present was asked to share about what they did over the allower the

NHY sing faculty who attended the nursing conference hosted by MTSU shared materials covering NCLEX htem Writing Rules, 2016 NCLEX RV Client Needs Categories, NCLEX Test Plan (copies on file).

Cathy Simpson and Winfred Stewart attended an Examsoft Conference over the summer and are excited about the benefits that will be coming from Examsoft.

Teresa Bover attended a Simulation Conference over the summer and will share more about that later.

Justus Smith shared his honor of being the recipient of the TEMSEA New Horizons Excellence in Teach Award: Brew Hooker and Justus have presented at National Simulation Conference and at the TEMSEA state conference:

#### Committees for 2016=2017

New committees may be coming - information will be shared as it is available.

Academic Affairs = Amy Holder - expires summer 2016 - Cathy nominated Marian Stewart, Teresa seconded nomination. There were no further nominations and Marian was elected by acclamation.

Faculty Council – Teresa Boyer – expires 2018; Winifred Howell – expires 2017; Karen Bucher currently serving; Kimberly, Hackney – expires 2016 (completed Melissa Pineda's term) – Amy Holder nominated Margaret Hale, Marian seconded nomination. There were no further nominations and Margaret Was elected by acclamation.

FAF - Drew. Hooker-expires summer 2006 - Cathy nominated Mike Beavers, Winifred seconded normalized mile by acclamation.

Paramedicacceditation: Justus reported all documents submitted for accreditation. Site visit will be November 7, 2016.

Mastrow three for infitme year: SACS restfirmation, digital first learning, and new program development

SACEs reaffirmation will be biggemphasis striks accubernic year.

#### PBatwillbacoppoppingenactoppogenaction in in Colobbert coDDr Kinkteel.

Our current the cus:

NHISTING TROWCOMPTIONNUM

ENVS-Paramedicaccreentisation

It want hap every one if you will

 Atknowledge contract - Notouty et as of 8/18/166 -- will be online and emails hould be sent when they are available

Attachment 13

- Coordinate final exam schedules
- Boattendance report
- Make sure course/program policies are clear and fainly applied in the spring Nursing had no appeals for the 1<sup>st</sup> time in a long time. EMS had a some student issues. Make sure we follow policy.
- Sign a TR-1 and leave with Nancy we will investigate and clarify semester travel guidelines

#### Ear decals - everyone must have the new 2016-2017 decal

Syllabi - Nancy needs a copy of each syllabi so she can keep them in a folder.

ABA coming - There will be many issues to clarify and discuss regarding the application of this requirement:

**1st week of classes** = attendance, welcome students - Please put forth a renewed effort to be welcoming to all students.

**Travel** = use of college vehicles = this is not a mandate but use of a college vehicle saves money from our budget and it saves the wear and tear on your vehicle.

#### NYAFEST FROM THE CONTRACT OF THE CONTRACT. THE CONTRACT OF THE CONTRACT OF THE CONTRACT OF THE CONTRACT. THE CONTRACT OF THE CONTRACT. THE CONTRACT OF T

#### 117/139/133

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For the paramentic students, constituention is boing given to get ing accontract with Hasteon fasr in tubations (students must do 20) and ODB (cone dint th))

EMT/AEMT courses do need to go to Academic affeirs on December 6th. Also, cetel Reinfrom to habblit the EMS courses needs to be revised.

Simulations: in the spring, the nursing department is asking for use of the Red Weti and the Baby Weti. This will require some movement of these mannequins between the Payetteville and Wain Campus.

The dates that will need to be worked out are:

February 28 - suggest that Baby Meti be on main campus

March 21 - suggest that Baby Meti be on main campus

April 11- suggest that Pedi Meti be on main campus

The nursing department faculty will be running simulations on the following Fridays: February 21 (Baby Meti); February 28 (Baby Meti); March 7 (Baby Meti); March 21 (Pedi Meti); March 28 (Pedi Meti); April 4 (Pedi Meti); April 11 (Pedi Meti); April 25 (Pedi Meti)

Some of these dates may change once the faculty have developed a course calendar.

Smyfna plans: for nursing and EMS, plan to have a sim lab. EMS will need at least one classfoom: Drew commented that he gets 18-20 calls each month asking about EMS at Smyfna.

Brew expects an initial accreditation meeting for the paramedic program in February.

Notestrommeenting with Dean Hoake and Jucous Smithh

#### JHHRE330,28935

I WASS REAWY RESERVING SOME TRANSPORTED FOR THE OFFICIES STANDED THE SAME THE SAME THE THE

The following items were discussed at our meeting:

boorschedules: because Drew and Justus are 112 month contract feedby, they need to show 37.5 hours on their door schedule and do not follow feedby time off - fall and spring break, etc.

Pat plans to follow up and see how other 112 month contract faculty show their hours.

Histiss should show 15 hours of teaching load with sufficient office time to prepare and grade his classes. It was identified that the credit hours for alinical need to be reviewed because currently they put Histis in overload. It was noted that alinical experiences are precepted. It was discussed to have Drew do the coordinating paramedic clinicals and Justus do site visits with grading to be completed within the 37.5 work week. However, this plan was not finalized.

Brew should show 7 hows each semester of teaching load with release time for the remaining 8 hours of teaching load to coordinate the program within the 37.5 work week.

Adjunct faculty: if an adjunct is teaching a lecture course, she/he either teaches all of it or, if the teaching is shared, the hours paid do not exceed the credit hours for the course. The state requires that skill labs have a faculty/student ratio of 1:12.

Faculty, including adjuncts, who are teaching will have their names listed in Banner. Faculty who are teaching will have an ETC evaluation completed each semester, except summer. Program evaluations completed using standardized forms will be shared with department director.

Campus use: EMT and AEMT courses will be taught on the McMinnville and Fayetteville campuses: Paramedic lecture courses will be taught at MTech and skills labs will be at the Fire Academy. It is understood that credit hours at the Fine Academy will be no more that 24.9% of credit hours in the EMS program. It has been understood that no more than 49% of the credit hours can be at MTech. However, the number of 24.9% of credit hours has recently been used. Clinical hours for paramedic will be credited to Fayetteville and clinical onientation will be held at Fayetteville campus: Drew, will send the distribution//percentage of students/credithours at all sites to ensure clear communication for fallsemester. It is understood that for the remainder of the summer, MTech and Fire Academy. will be utilized.

Both/Usitus-and-Drew.voiced-understanding:thatiFayetteville is the home base for the EWS program. The need for Drew.t comminterin regular contant at the compus was communicated!

Drewspoketectheopossikilikvofmonoov/doinggrameeltthroughHealthcorecCoalition/whichcould/benefit thecellage. Thisideeoissunderdevelopmeent. EAVES COULSES ENDERING SINBARTER TEORES AND SERVICE AND A COMPOSITION OF A COMPOSITICA C

Projected student numbers for fails comester:

EMTFAXettexille=18 EMTMAMinnville=12 Paramedic=12

Faculty evaluations completed. Both Drew and Lustus were thanked for their hard work and commitment to move the program forward.

Goals for AV 2015-2016

Improve pass rate on state certification for BMIT and ABMIT. This is a statewide problem with WANOW actually being ranked 2<sup>nd</sup> in the state for ABMT pass rate.

Prepare and obtain accreditation for the paramedic program.

# Motlow State Community College Action Plan & Outcome Assessment Report for Institutional Effectiveness Assessing Year: July 1, 2015 – June 30, 2016 Planning Year: July 1, 2016 – June 30, 2017

Unit: Nursing

**Related Strategic Goal:** 3.1 MSCC will monitor and improve the effectiveness of educational programs and services.

Action Plan #: NURS-08

Action Plan Title: EMT and AEMT Exit Exams/Field Tests

**Desired Outcome:** Maintain a NREMT pass rate within 10 points of the national average on cognitive exam within the first three attempts. Maintain an 80% or higher pass rate on psychomotor exam.

#### **Description of Action Plan and Related Activities:**

- Monitor the results of NREMT results annually.
- Analysis of each course exam will be completed and reviewed with faculty.
- Maintain qualified faculty.
- Emphasize psychomotor practice of skills.

Team Members: EMS program coordinator and EMT instructors

Timeline: To be reviewed each summer

**Est. Cost:** \$0

Budgeted: Included in current budget

**Evidence of Success:** NREMT reports will show that MSCC EMT and AEMT students achieve pass rates within 10 points of the national average on cognitive exam within the first three attempts and maintain an 80% or higher pass rate on psychomotor exam.

#### Complete the following when assessing a plan

Current Status: On Schedule

#### Describe Progress Below

#### <u>2015-16</u>

EMT – of the 24 students who completed the certificate, 18 (75%) passed the NREMT exam. The national state pass rate was 70%. The desired outcome was met. 100% of the students completed the psychomotor exam.

YEAR	NUMBER TAKING TEST	NREMT # PASSED	MSCC % PASS RATE	NAT'L % PASS RATE	Psychomotor Exam # Passed	Psychomotor Exam % Pass Rate
2015	24	18	75%	70%	22	100%

**MSCC EMT NREMT Scores** 

AEMT – of the 16 students who completed the certificate, 13 passed (81%) passed the NREMT exam. The national pass rate was 65%. The desired outcome was met. 100% of the students passed the psychomotor exam.

						Psychomotor	Psychomotor
		NUMBER	NREMT	MSCC	NAT'L	Exam	Exam
	YEAR	TAKING TEST	# PASSED	% PASS RATE	% PASS RATE	# Passed	% Pass Rate
F	2016	16	13	81%	65%	18	100%

#### MSCC AFMT NRFMT Scores

EMT – of the 23 students who completed the certificate, 13 (57%) passed the NREMT exam. The national state pass rate was 68%. The desired outcome was not met. 100% of the students completed the psychomotor exam.

#### 2014-15

_	MSCC EMI NREMI Scores						
I						Psychomotor	Psychomotor
		NUMBER	NREMT	MSCC	NAT'L	Exam	Exam
	YEAR	TAKING TEST	# PASSED	% PASS RATE	% PASS RATE	# Passed	% Pass Rate
	2014	23	13	57	68	23	100%

#### 

AEMT – of the nine students who completed the certificate, 6 passed (67%) passed the NREMT exam. The national pass rate was 70%. The desired outcome was met. 100% of the students passed the psychomotor exam.

#### **MSCC AEMT NREMT Scores**

YEAR	NUMBER TAKING TEST	NREMT # PASSED	MSCC % PASS RATE	NAT'L % PASS RATE	Psychomotor Exam # Passed	Psychomotor Exam % Pass Rate
2015	9	6	67	70	9	100%

#### **Describe Needed Changes:**

#### Changes to be in 2016-17

With the NREMT statistics, we determined that the Trauma and Operations sections had decreased scores without students. We plan to elevate our instruction in trauma and operations by including new methods and additional resources and materials.

#### Changes made in 2015-16

More requirements in adaptive testing preparation and more focus on NREMT testing categories.

#### List of Supporting Documentation: NREMT exam results are included in document

Date Last Updated: May 20, 2016

Attachment 15, Faculty Evaluation Forms, follows.



#### MOTLOW COLLEGE EMS EDUCATION ADJUNCT FACULTY EVALUATION

Academic Year: Semester:

Initial Evaluation Semester Evaluation Yearly Evaluation Other:

Adjunct Name:

**Evaluator Name:** 

EVALUATION OF TEACHING EFFECTIVENESS:

1. Presented information in an organized way that promoted student learning

2. Presented new information not covered in the textbook

3. Connected topics of their courses to other areas of knowledge and interest

4. Increased students' interest in the subject matter and responded to students' questions regarding subject being taught

5. Integrated different ways of presenting course information

6. Was interested in student achievement

7. Was responsive to students' needs and requests

8. Evaluated assignments and exams in a timely manner

9. Adhered to a stated policy on grading, and established university policies and procedures

10. Demonstrated command of subject and maintains knowledge of current developments in discipline

11. Covered material planned for the course

12. Used available technology appropriate for the course

Below Expectations	Meets Expectations	Above Expectations

13. Performance of overall duties

SUGGESTIONS FOR IMPROVING PROFESSIONAL OR DISCIPLINE COMPETENCY AND CURRENCY:

Continued Employment Recommendation
Recommend continued employment. Do not recommend continued employment.
Supervisor's Signature
Date
I certify that I have reviewed this Evaluation and have been counseled
Adjunct Signature
Date



Academic Year: Semester:

Initial Evaluation Semester Evaluation Yearly Evaluation Other:

Faculty Name:

**Evaluator Name:** 

EVALUATION OF TEACHING EFFECTIVENESS:

1. Presented information in an organized way that promoted student learning

2. Presented new information not covered in the textbook

3. Connected topics of their courses to other areas of knowledge and interest

4. Increased students' interest in the subject matter and responded to students' questions regarding subject being taught

5. Integrated different ways of presenting course information

6. Was interested in student achievement

7. Was responsive to students' needs and requests

8. Evaluated assignments and exams in a timely manner

9. Adhered to a stated policy on grading, and established university policies and procedures

10. Demonstrated command of subject and maintains knowledge of current developments in discipline

11. Covered material planned for the course

12. Used available technology appropriate for the course

Below Expectations	Meets Expectations	Above Expectations

13. Performance of overall duties

SUGGESTIONS FOR IMPROVING PROFESSIONAL OR DISCIPLINE COMPETENCY AND CURRENCY:

Continued Employment Recommendation		
Recommend continued employment. Do not recommend continued employment		
Supervisor's Signature		
Date		
I certify that I have reviewed this Evaluation and have been counseled		
Faculty Signature		
Date		
Date		

Instructors Hiring and maintain plan consists of bringing them in for a teaching demonstration when they apply. They have to have the ability to gain a state IC or IA license. I bring in instructors with little to no experience in as Skills instructors or assistants. My lead instructors either have significant instructor experience with me or in previous employment. We run a 1:8 ration to provide the best care to the students and allow for my less experienced instructors to have a mentor instructor to teach. I do a written evaluation each instructor each year and many times do a pop-in evaluation each semester. I work to hire instructors that match our creative outside the box style that meets national standards.

Drew Hooker M.P.A, CCPM, I/C EMS Director Motlow State EMS Education

Fayetteville Office:Fire Academy Office:1802 Winchester Hwy2161 Unionville-Deason RdFayetteville TN, 37034Bell Buckle, TN 37020

Fire Academy Office: 931-294-4192 Fayetteville Office: 931-438-0028 Fax: 931-393-1879 Email: <u>dhooker@mscc.edu</u> Website: www.mscc.edu/ems



# MOTLOW STATE COMMUNITY COLLEGE EMS EDUCATION

# 2014 STAFF MEETING AUGUST 4, 2014

- 1. Class Schedules
  - Create Skills Schedule
  - Schedule Adjunct Time
  - Clear up discrepancies
- 2. Class Syllabi
  - Review syllabi for changes
  - Review grading procedure
  - Review college changes
- 3. Review Fisdap and EMS Testing
  - Review Clinical schedules
  - Review testing procedures
- 4. Additional info

STAFF PRESENT: DREW HOOKER, JUSTUS SMITH, MEGHAN AUSTIN, DOUG PEACOCK, SHIRLEY PRATER



# MOTLOW STATE COMMUNITY COLLEGE EMS EDUCATION

# 2015 STAFF MEETING AUGUST 10, 2015

- 1. Class Schedules
  - Create Skills Schedule
  - Schedule Adjunct Time
  - Clear up discrepancies
- 2. Class Syllabi
  - Review syllabi for changes
  - Review grading procedure
  - Review college changes
- 3. Review Fisdap and EMS Testing
  - Review Clinical schedules
  - Review testing procedures
- 4. Review Handbook Changes
  - Review new rules and regulations
- 5. Additional info

STAFF PRESENT: DREW HOOKER, JUSTUS SMITH, MEGHAN AUSTIN, CHRIS SMITH, ALANA BROWN,



### **Student Status Report**

# Date of Review \_\_\_\_\_

This form is used for recording academic counseling sessions with students that are performed. Check the appropriate purpose(s) for each session.

Student Name:	Course
Unexcused absences Cumulative Written C	Grade Average%
Practical Skills Performance ExcellentVery GoodSatisf	factoryDevelopment Opportunity
Professionalism/Attitude ExcellentVery GoodSatisf	factoryDevelopment Opportunity
Identify Development Opportunities and Create an Practice skills in	L L
Attend academic and practical learning class	
Complete more practical skills experiences i	n:
Disciplinary Probation, Suspension, or Dism	nissal (explain in comments)
Test taking abilities, see comments for expla	anation
Other:	
Comments:	
Student Signature	Date Program Review
Faculty Signature	Date Program Director



# **Motlow State Community College EMS Education Program Student Goals**

What is my 5 year Goals:

What is my 10 year Goals:

What are my strengths?

What are my weaknesses?

Name:\_\_\_\_\_ Signature:\_\_\_\_\_

# Motlow State Community College

EMS Education

# **Behavioral Counseling Form**

Name of student	Instructor	Date of infraction
Nature of infraction:	Description of infraction:	
Integrity Time Management Self-Motivation Appearance/Hygiene Empathy Teamwork Respect Patient advocacy		
Reviewed and placed in file: Date:		
Director:		
Follow up plan:		
Student Signature:	Instructor Signat	ture:

# MOTLOW STATE COMMUNITY COLLEGE



EMS EDUCATION STUDENT ACTION PLAN

Student:	Date:	
Reason for plan:		
Course of action:		
Student Signature	Date	Program Review
Faculty Signature	Date	Program Director
Faculty Signature	Date	



# MOTLOW STATE COMMUNITY COLLEGE EMS EDUCATION

# MINUTES INFORMAL LUNCH WITH EMT STUDENTS

12-5-16 2:15pm

Met with 23 out of 26 EMT students following their NREMT exam.

Several questions were asked to the students:

- 1. What could we improve to make the experience better?
  - More integration between campuses
  - TFACA was great experience
  - Update some of the equipment
- 2. What equipment improvements could be made?
  - Update some of the older supplies
- 3. Did they have any issues with clinical sites?
  - None (they stated the clinical sites were "great")
- 4. Any issues with instructors?
  - None stated.

(side note: I informed them if they were nervous saying it out loud they could put their remarks on the survey)

I opened it up to questions.

• Students did not have any questions and then filled out our class survey.

# Attachment 22

Lucy Craig [LCraig@mscc.edu] Sent: Sunday, January 22, 2017 10:58 AM To: Craig, Edward Attachments:image001.png (5 KB) ; image004.png (243 B) ; image005.png (8 KB) ; image006.png (15 KB)

From: Shawn Gilbreath Sent: Thursday, January 05, 2017 1:13 PM To: Lucy Craig Cc: Drew Hooker; Sylvia Collins; Scott Cook Subject: RE: EMT Audit Info

Dr. Craig,

We have 20 Emergency Medical Technician Certificates for Fall 2016. I apologize for the delayed response.

Best regards,

[cid:image001.png@01D15CD6.A2E3A640] Shawn Gilbreath, Assistant Director Admissions and Records Motlow State Community College PO Box 8500, Department 520 Lynchburg, TN 37352-8500 931.393.1597 | 931.393.1818 Fax sgilbreath@mscc.edu<<u>mailto:sgilbreath@mscc.edu</u>> www.mscc.edu<<u>http://www.mscc.edu/</u>>

Member of

[cid:image003.png@01D1A7AB.2F5FD1B0]
<UrlBlockedError.aspx>

[cid:image005.png@01D0C9F1.FA8F21D0]

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ID	EMT CR1	AEMT CR1
A00074074	Fall 2015	Spring 2016
A00108089	Fall 2015	Spring 2016
A00117194	Fall 2015	Spring 2016
A00119055	Fall 2015	Spring 2016
A00122880		Spring 2016
A00138389	Fall 2015	
A00139098		Spring 2016
A00142392	Fall 2014	Spring 2015
A00142715	Fall 2015	Spring 2016
A00145474	Fall 2014	Spring 2015
A00146460	Fall 2015	Spring 2016
A00146659	Fall 2015	Spring 2016
A00150088	Fall 2014	Spring 2015
A00150532	Fall 2015	Spring 2016
A00152638	Fall 2015	
A00155032	Fall 2014	Spring 2015
A00155465	Fall 2015	
A00157097	Fall 2015	Spring 2016
A00159433	Fall 2015	
A00159557	Fall 2014	Spring 2015
A00159925	Fall 2015	Spring 2016
A00160665	Fall 2014	Spring 2015
A00161252		Spring 2015
A00161273		Spring 2015
A00164375	Fall 2015	Spring 2016
A00168759	Fall 2015	Spring 2016
A00168870		Spring 2015
A00172718	Fall 2015	Spring 2016
A00173550	Fall 2015	Spring 2016
A00174419	Fall 2015	Spring 2016
A00174581	Fall 2015	Spring 2016