Oregon TECH

2016-17 Program Assessment Report

Paramedic A.A.S.

Mission, Objectives & Learning Outcomes

Oregon Tech Mission
Oregon Institute of Technology, an Oregon public university, offers innovative and rigorous applied degree programs in the areas of engineering, engineering technologies, health technologies, management, and the arts and sciences. To foster student and graduate success, the university provides an intimate, hands-on learning environment, focusing on application of theory to practice. Oregon Tech offers statewide educational opportunities for the emerging needs of Oregonians and provides information and technical expertise to state, national and international constituents.

Core Theme 1: Applied Degree Programs
Oregon Tech offers innovative and rigorous applied degree programs. The teaching and learning model at Oregon Tech prepares students to apply the knowledge gained in the classroom to the workplace.

Core Theme 2: Student and Graduate Success
Oregon Tech fosters student and graduate success by providing an intimate, hands-on learning environment, which focuses on application of theory to practice. The teaching and support services facilitate students' personal and academic development.

Core Theme 3: Statewide Educational Opportunities
Oregon Tech offers statewide educational opportunities for the emerging needs of Oregon's citizens. To accomplish this, Oregon Tech provides innovative and rigorous applied degree programs to students across the state of Oregon, including high-school programs, online degree programs, and partnership agreements with community colleges and universities.

Core Theme 4: Public Service
Oregon Tech will share information and technical expertise to state, national, and international constituents.

Program Alignment to Oregon Tech Mission and Core Themes
The EMS department supports Oregon Tech's mission to offer innovative and rigorous applied degree programs in health technologies and management, and to foster student success with hands-on learning environments, focusing on application of theory to practice. The faculty and alumni of the EMS department have a strong history of partnering with local and national constituents to provide technical expertise and leadership.

Core Theme 1: Applied Degree Programs: We are dedicated to providing the highest quality education in the EMS industry as demonstrated through the caliber of our faculty, the tremendous success of our alumni, and the enthusiastic support of our EMS employers.

Core Theme 2: Student and Graduate Success: Our aim is to continue to partner with high potential students, from diverse backgrounds and perspectives, and assist them in becoming national EMS clinical and organizational leaders.

Core Theme 3: Statewide Educational Opportunities: We will continue supporting bold intellectual pursuits that advance and expand the EMS industry's comfort zone in order to improve and innovate both the quality of individual patient care as well as the systems of EMS care.

Core Theme 4: Public Service: We strive to partner with communities, industry, other colleges and universities, and private citizens to develop community-based solutions to community problems

Program Mission
The purpose of the Oregon Health & Science University/ Oregon Institute of Technology Paramedic Education Program is to educate pre-hospital care providers; to prepare EMS leaders of the future; and to enhance the delivery of health care in the out-of-hospital setting.

Program Educational Objectives
- Comprehend, apply, and evaluate information relative to the role of an entry-level Paramedic.
- Demonstrate technical proficiency in all of the skills necessary to fulfill the role of an entry-level Paramedic.
- Demonstrate personal behaviors consistent with professional and employer expectations of an entry level Paramedic.

Program Faculty Review
Program Student Learning Outcomes and Objectives were reviewed by program faculty during Fall Convocation Program Assessment Meeting.

We generally do this sort of review at our December faculty meeting. At our December 2016, we re-approved our program mission and objectives.

Showcase Learning Opportunities
Other learning opportunities include:

- Clinical internship rotations in a variety of hospitals and clinics in the Portland Greater Metro Area, in both Winter and Spring Terms
- Externships lasting at least 420 hours in a variety of EMS systems
- Fresh cadaver lab where students are allowed to practice various medical procedures
- High fidelity simulations labs, at least throughout the year
- Weekly attendance in Trauma and M and M review conferences at OHSU
- Participation in primary research projects

Program History & Vision

Program History
The Paramedic Education Program is an integral part of OHSU's Department of Emergency Medicine, EMS Section. Staff physicians provide medical direction to the majority of EMS agencies in Multnomah and Clackamas Counties, portions of Washington County and Tualatin Valley Fire and Rescue. The Department of Emergency Medicine manages the emergency department at OHSU, an emergency medicine residency program, an EMS fellowship, the Oregon Poison Center, and a research section.

Graduates of the Paramedic Education Program have completed a competency-based educational program consisting of didactic, clinical, and field internship phases, and are designated entry level Emergency Medical Technician Paramedics (EMT-P's). It is important to emphasize the entry-level designation of our graduates, so as to not create unrealistic expectations of the program by future employers or the graduates themselves. Medicine is as much art as science, and the art of pre-hospital care is developed through clinical practice and an individual's commitment to lifelong learning.

The didactic portion of the program is located mainly at the Oregon Tech Wilsonville campus with one day per week spent at the OHSU campus. The clinical portion of the program is located at numerous hospital locations throughout the greater Portland Metropolitan Area. The Externship portion of the program is located in various EMS agencies in the greater Portland Metropolitan Area, the Oregon coast, as well as several areas across the country.

Meeting with Advisory Board
Program faculty held a meeting with their Advisory Board during the academic year.

Advisory Board Review
The Advisory Board reviewed the Program Mission and Objectives during the academic year.

The Advisory Board approved the Program Mission and Objectives on 4/11/2017

Attachment 1_Advisory_Board_Minutes_04112017

Program Enrollment

Attachment 2_Enrollment_5_Year_History_by_Major

Program Graduates

Attachment 3_Graduates_10_Year_History_by_Major

Employment Rates and Salaries

Attachment 4_Grad_Data_First_Destination_3_Year_History_by_Major

Pass Rates on Board and Licensure Exam
N/A

Results of Board or Licensure Exam
N/A

Other Program Assessment Data
N/A

Desired Data
N/A

Closing the Loop

Describe any actions taken and re-assessment done during this academic year in response to assessment findings from prior academic years.
N/A

Changes Implemented
N/A

Assessment Findings
N/A

Program Student Learning Outcomes Assessment Cycle

PROGRAM STUDENT LEARNING OUTCOMES 3-Year Cycle Paramedic A.A.S.	2016-17	2017-18	2018-19
OIT-APEP 2016-17.1 An ability to understand, interpret and apply EMS and general medical knowledge necessary to function in a healthcare setting.	FISDAP Exam NREMT Written Paramedic Exam CoAEMSP Graduate Summary Report CoAEMSP Employer Summary Report		
OIT-APEP 2016-17.2 An ability to perform a broad range of paramedic level EMS skills both difficult and routine.	Final Skills Exam NREMT Preactical Paramedic Exam CoAEMSP Graduate Summary Report CoAEMSP Employer Summary Report		
OIT-APEP 2016-17.3 An ability to conduct oneself in an ethical and professional manner and show proficiency in interpersonal relations and communication.	Final Externship Benchmark Assessment CoAEMSP Graduate Summary Report CoAEMSP Employer Summary Report		

Assessment Map & Measure

F – Foundation – introduction of the learning outcome, typically at the lower-division level,
P – Practicing – reinforcement and elaboration of the learning outcome, or
C – Capstone – demonstration of the learning outcome at the target level for the degree

For each outcome, programs should identify at least 2 direct measures (student work that provides evidence of their knowledge and skills), and 1 indirect measure (student self-assessment of their knowledge and skills) for each outcome.

For every program, data from the Student Exit Survey will be an indirect measure at the capstone level.

OIT-APEP 2016-17.1 An ability to understand, interpret and apply EMS and general medical knowledge necessary to function in a healthcare setting.	
Course/Event	FISDAP Exam
Legend	C – Capstone
Assessment Measure	Direct – Exam Questions (multiple choice type)
Criterion	Our target is to have 80% of the students pass with one attempt and for 95% to pass all sections with 1-2 attempts.
Course/Event	NREMT Written Paramedic Exam
Legend	C – Capstone
Assessment Measure	Direct – Exam Questions (multiple choice type)
Criterion	Our target is to have 80% of the students pass with one attempt and for 95% to pass all sections with 1-2 attempts.
Course/Event	CoAEMSP Graduate Summary Report
Legend	C – Capstone
Assessment Measure	Indirect – Alumni Survey
Criterion	Our target is that 90% of the survey respondents for the three years' surveys check either 4 or 5 in response to each Cognitive question.
Course/Event	CoAEMSP Employer Summary Report
Legend	C – Capstone
Assessment Measure	Indirect – Employer Survey
Criterion	Our target is that 90% of the survey respondents for the three years' surveys check either 4 or 5 in response to each Cognitive question.

OIT-APEP 2016-17.2 An ability to perform a broad range of paramedic level EMS skills both difficult and routine.	
Course/Event	Final Skills Exam
Legend	P – Practice
Assessment Measure	Direct – Performance Appraisals

Criterion	Our target is to have 80% of the students pass with one attempt and for 95% to pass all sections with 1-2 attempts.
Course/Event	NREMT Practical Paramedic Exam
Legend	C – Capstone
Assessment Measure	Direct – Performance Appraisals
Criterion	Our target is to have 80% of the students pass with one attempt and for 95% to pass all sections with 1-2 attempts.
Course/Event	CoAEMSP Graduate Summary Report
Legend	C – Capstone
Assessment Measure	Indirect – Alumni Survey
Criterion	Our target is that 90% of the survey respondents for the three years' surveys check either 4 or 5 in response to each Cognitive question.
Course/Event	CoAEMSP Employer Summary Report
Legend	C – Capstone
Assessment Measure	Indirect – Employer Survey
Criterion	Our target is that 90% of the survey respondents for the three years' surveys check either 4 or 5 in response to each Cognitive question.

OIT-APEP 2016-17.3 An ability to conduct oneself in an ethical and professional manner and show proficiency in interpersonal relations and communication.	
Course/Event	Final Externship Benchmark Assessment
Legend	P – Practice
Assessment Measure	Direct – Externship Evaluation
Criterion	Our target is for 80% of the students to receive 5 points and for 95% of the students to receive 4 or 5 on the Professionalism Final Benchmark
Course/Event	CoAEMSP Graduate Summary Report
Legend	C – Capstone
Assessment Measure	Indirect – Alumni Survey
Criterion	Our target is that 90% of the survey respondents for the three years' surveys check either 4 or 5 in response to each Affective question.
Course/Event	CoAEMSP Employer Summary
Legend	C – Capstone
Assessment Measure	Indirect – Employer Survey
Criterion	Our target is that 90% of the survey respondents for the three years' surveys check either 4 or 5 in response to each Affective question.

Analysis of Results

OIT-APEP 2016-17.1 An ability to understand, interpret and apply EMS and general medical knowledge necessary to function in a healthcare setting.

Criterion	Met
Summary	Fisdap Exam: 80% passed with 1 attempt; 95% passed with 1 or 2 attempts. NREMT Written Exam: 80% passed with 1 attempt; 90% passed with 1 or 2 attempts. CoAEMSP Graduate Survey: 100% of respondents checked either 4 or 5 in response to each Cognitive question. CoAEMSP Employer Survey: 100% of respondents checked either 4 or 5 in response to each Cognitive question.
Improvement Narrative	N/A

Attachment 5_CoAEMSP_Graduate_Summary_Report

Attachment 6_CoAEMSP_Employer Summary Report

Attachment 7_Fisdap_and_Written_NREMT_Paramedic_Results

OIT-APEP 2016-17.2 An ability to perform a broad range of paramedic level EMS skills both difficult and routine.

Criterion	Met
Summary	NREMT Practical Paramedic Exam: 100% passed with 1 attempt. CoAEMSP Graduate Survey: 100% of respondents checked either 4 or 5 in response to each Psychomotor question. CoAEMSP Employer Survey: 100% of respondents checked either 4 or 5 in response to each Psychomotor question.
Improvement Narrative	N/A

Attachment 5_CoAEMSP_Graduate_Summary_Report

Attachment 6_CoAEMSP_Employer Summary Report

OIT-APEP 2016-17.3 An ability to conduct oneself in an ethical and professional manner and show proficiency in interpersonal relations and communication.

Criterion	Met
Summary	The CoAEMSP Graduate Survey showed 97% of respondents checked either 4 or 5 in response to each Affective question. The CoAEMSP Employer Survey showed 97% of respondents checked either 4 or 5 in response to each Affective question.
Improvement Narrative	N/A

Attachment 5_CoAEMSP_Graduate_Summary_Report

Attachment 6_CoAEMSP_Employer Summary Report

References

Program Assessment Coordinator: Kate Darling, Instructor, Emergency Medical Services

Department Assessment Coordinator: Sharon Beaudry, Assistant Professor, Management

Office of Academic Excellence

Oregon Tech/OHSU
EMS Advisory Committee Meeting
April 12, 2017 12:00 – 2:00pm
TVF&R Station 56 & South Operating Center, Room 125B

Attending –
Miguel Juarez (Student Representative), Adam Wagner, Carmen Nebeker, Suzann Schmidt, Randy Lauer, Rob McDonald, Jeff Rubin, Laurie Hanly, Chris Hamper, Jonathan Chin, Mercedes Wilson, Shawn Wood, Deb Disko

1. **Call to Order**

Laurie Hanly called meeting to order.

2. **Review Minutes of November 28. 2016 Meeting**

With the addition of approval of goals, the minutes were approved.

3. **Old Business**
   a. Survey Regarding Accreditation
      Are the committee members missing any information to complete the accreditation survey?
      All feel confident in this area.
      Survey deadline is 04/14/2017.
      Faculty surveys are complete.

   b. Program Goals
      Are they acceptable as is or in need or redirection?

      Obstetrics: Defined as a pregnant women regarding of stage. The goal includes an assessment of a patient, not just the delivery. Current goal is set at two and is that adequate?   We currently cover obstetrics in our skills lab course but not Sim. Students are getting exposure in the ED and most have 5 – 10 patient interactions.
      The new recommended change for the class of 2018 is to increase from 2 to 4.

      Bariatrics: Defined as a patient with a BMI of 40 or higher.
      Bariatrics is included in our skills lab course. We cannot offer it as a SIM as it would be difficult to find a standardized patient. On externship we cannot guarantee that all students will have exposure to bariatric patients. Our advisory boards concern is not over assessment. They are concerned about employee safety, patient transporting and the ability to manage a scene. Look into the feasibility of including additional bariatric topics in our curriculum so student will understand the resources and equipment available to them. Should we require students to look over specialty equipment or a bariatric rig when on their externship? Is this a viable option, as opportunities would vary from site to site?

      Will not be able to make changes for the class of 2017. Adding a bariatric goal would require more research and development and planning for the next year. Potentially, a future recommendation would be two bariatric patients.

      Psychiatric Patients: Our current goal is 4 (2 clinical /2 field) patient contacts. We cannot set our goal higher until we can guarantee all students have adequate patient access to reach the higher goal. Should this include a distinction between pediatric and adult? It might be that we are already doing this but need to change our reporting to document. Carmen will look into this and report at our next meeting.

De-escalation and restraint training: We cover this area in Sim using standardized patients and do a seminar with NAMI. Kate covers chemical restraints in pharmacology and Hugh added a lecture to Medical Emergencies.

Laurie know of a couple people at the VA who are good at presenting a role-playing scenario requiring restraint and de-escalation.

Alerted Mental Status is covered in Medical Emergencies and we teach in lab how to approach using Jeff Disney's Acronym.

We have added significant amount of psychiatric care to our curriculum this year and are comfortable with our current requirements.

Skills: Live intubations are set at 10. Should intubations be set to seven for adults and three for children? Two sim intubations equal one live intubation. Can we implement this for the class of 2018?

Pediatrics: We have increased our pediatric shifts from two to four using Randall Children's Hospital and Doernbecher Children's Hospital. This year all students have access to a pediatric OR rotation and most students are getting up to eight intubations. Our students have adequate exposure in this area.

Preceptor Documentation: Writing Skills-should this be a proficiency goal?

This is generally not a strong suit of paramedics. Would it be beneficial to add an additional writing prerequisite? We agree that the ability to write is important, however should it be a goal of the program? There is a difference between writing well and writing a proficient PCR. Faculty critique students' FISDAP narratives and PCRs while in clinicals and externship practicums. Papers are graded for grammar as well as content. A chart-writing lecture was added this year. We should see signs of improvement in this area.

Preceptors need to improve their documentation. Especially if a student is not doing well. Preceptor documentation is outlined in our handbook.

At this time no specific action is required.

Vote on Goals – Jeff Rubin moves that we adopt goals as listed and the motion was unanimously approved.

c. Mission Statement Review

Laurie Hanly read current mission statement. The committee feels are mission statement is strong. Miquel Juarez offered a student perspective on our mission statement. "*The quality of education is high, the quality of instructors is high and instructors are available. The program draws good students, locally and nationally. Many students enter the program with bachelor and master's degrees which takes learning to a higher level. The BS degree is an appreciated option.*"

The committee agrees we have stepped up in our innovation and this is demonstrated by our research projects and updating our curriculum to respond to the needs of mental health patients.

Jeff Rubin moved to accept the mission statement as is. It was accepted unanimously.

d. Annual Report
   Evaluations – how to increase response by employers and graduates.
   It was stated that this is a nationwide problem. Our program is getting a 20-30% response.
   It was suggested to remind students during externship that this was coming. Possibly hold diploma until completed.
   Chris offered to give students/preceptors and option to sit in on a community/critical lecture as an incentive for returning a survey.

4. **New Business:**

   a. Adam Wagner – Critical Care program highlights
      Paramedics are taking part in some aspects of critical care on some of their calls. Medics are taking part in this but do not have the training. This is especially true in rural areas where more paramedics are practicing critical care but are not necessarily trained in this area.   It is important to help spread the word that this training is available and there is a need to make it available to current medics. With the exception of some clinical experiences, all critical care coursework is available online.

   b. Areas of emerging employment opportunities

   c. Reminder: Poster session @ OR EMS conference (fall 2017)

   d. Paramedic MH/Stress Coping tools
      How can the program break down the social aspect barrier of asking for help? Nationwide there is a wall of "We don't need help". The culture is slowly changing. Our faculty feels if we can teach them coping skills while students, they will continue with these practices when working in the field. Our program has brought in Oregon Tech's mental health counselor to teach students coping mechanisms. Our Clinical Coordinator discusses available resources for students before they leave on externships. Our student representative feels an informal debriefing time every couple of weeks would be helpful. Should we add a lecture in this area?

   e. CoAEMSP Paramedic Program Re-Accreditation
      The paramedic program's self-study for re-accreditation is will be submitted by June 1, 2017 with a site visit requested for February or March of 2018.

   Next Meeting – November 2017

Oregon TECH

Majors History, Fall 4th Week
November 30, 2016

The following data represents majors declared by student as of Fall 4th week. Students with multiple/dual majors have been reported
under each major in which they enrolled; therefore the student headcount will be duplicated. A small number of students that declared
a third major have now been included in this report. Data reported is combined for all levels and all locations.
Some programs may have had name changes such as CLS and have been reported as they were (historically).

Description	Fall 2012	Fall 2013	Fall 2014	Fall 2015	Fall 2016	5 Year Difference	5 Year % Change
ABA Course Series	0	0	3	0	0	0	-
Accounting Certificate	0	0	0	0	1	1	-
Allied Health	0	0	0	0	3	3	-
Allied Health Management	11	5	3	2	1	-10	-90.9%
Applied Behavior Analysis	0	0	0	10	17	17	-
Applied Mathematics	41	38	47	42	33	-8	-19.5%
Applied Psychology	146	149	122	96	110	-36	-24.7%
Automat, Robot, & Cntrl Engr	0	0	0	0	1	1	-
Biology	15	8	1	1	0	-15	-100.0%
Biology-Health Sciences	136	150	150	138	151	15	11.0%
Civil Engineering	127	121	110	120	118	-9	-7.1%
Clinical Lab Science-Earlyadm	6	10	35	22	0	-6	-100.0%
Clinical Laboratory Science	62	85	94	95	2	-60	-96.8%
Communication Studies	55	42	39	47	40	-15	-27.3%
Computer Engineering Tech	82	82	81	86	63	-19	-23.2%
Dental Hygiene	226	240	211	221	202	-24	-10.6%
Diagnostic Medical Sonography	86	104	95	102	112	26	30.2%
Dispute Resolution Certificate	1	1	2	4	2	1	100.0%
Echocardiography	121	119	123	122	128	7	5.8%
Electrical Engineering	76	120	146	164	197	121	159.2%
Electronics Engineering Tech	67	58	51	37	32	-35	-52.2%
Embedded Systems Eng Tech	24	25	32	35	57	33	137.5%
Emergency Medical Services Mgt	0	0	17	20	34	34	-
EMT - Paramedic	29	30	29	28	28	-1	-3.4%
Environmental Sciences	49	49	51	48	42	-7	-14.3%
General Studies	495	736	632	1,031	1,414	919	185.7%
Geomatics	1	0	0	0	0	-1	-100.0%
Geomatics-option in GIS	13	14	10	10	7	-6	-46.2%
Geomatics-option in Surveying	49	39	26	31	30	-19	-38.8%
Health Care Mgmt-Admin Mgmt	0	10	14	19	18	18	-
Health Care Mgmt-Clinical Mgmt	0	4	10	11	25	25	-
Health Care Mgmt-Rad Science	0	3	6	12	12	12	-
Health Informatics	0	0	0	20	38	38	-
Health Sciences	1	1	0	1	2	1	100.0%
Information Technology	0	0	0	56	114	114	-
IT Accounting Option	8	4	2	1	1	-7	-87.5%
IT Applications Dev Opt	91	75	71	48	20	-71	-78.0%
IT Bus/Systems Analysis Opt	58	59	69	51	28	-30	-51.7%
IT Health Informatics Opt	54	68	59	32	17	-37	-68.5%
Magnetic Resonance Imagng Spec	0	0	0	0	4	4	-
Manufacturing Engineering Tech	129	99	109	107	101	-28	-21.7%
Marriage and Family Therapy	0	0	0	0	10	10	-
Mechanical Engineering	208	303	331	323	354	146	70.2%
Mechanical Engineering Tech	145	112	121	121	104	-41	-28.3%
Medical Lab Science-Earlyadm	0	0	0	0	17	17	-
Medical Laboratory Science	0	0	0	0	86	86	-
Mgmt Info Sys/Mgmt Acc Option	1	0	0	0	0	-1	-100.0%
Mgmt/Accounting Option	32	38	35	32	19	-13	-40.6%
Mgmt/Marketing Option	34	34	36	34	37	3	8.8%
Mgmt/Small Bus Mgmt Option	54	43	38	37	33	-21	-38.9%
MIT Applicant	0	0	1	2	0	0	-
Nuclear Medicine Technology	47	51	48	48	49	2	4.3%
Nursing	50	49	52	61	69	19	38.0%
Operations Management	61	66	65	69	70	9	14.8%
Optical Engineering	0	0	3	3	3	3	-
Picture Archive/Comm Sys Spec	0	0	1	2	3	3	-
Polysomnographic Technology	19	13	6	12	5	-14	-73.7%
Population Health Management	0	0	3	24	31	31	-
Pre-Clinical Lab Science	0	8	1	20	2	2	-
Pre-Dental Hygiene	62	65	35	37	48	-14	-22.6%
Pre-Medical Imaging Tech	273	287	253	237	226	-47	-17.2%
Pre-Medical Lab Science	0	0	0	0	27	27	-
Pre-Nursing	56	60	53	69	78	22	39.3%
Pre-Paramedic Education	0	3	3	7	0	0	-
Pre-Renewable Energy Eng	111	0	0	0	0	-111	-100.0%
Pre-Respiratory Care	11	12	8	11	9	-2	-18.2%
Radiologic Science	164	163	154	160	152	-12	-7.3%
Renewable Energy Engineering	110	206	203	180	166	56	50.9%
Respiratory Care	85	84	88	103	117	32	37.6%
Sleep Health-Polysom Tech Opt	0	0	4	6	17	17	-
Software Engineering Tech	260	268	289	309	285	25	9.6%
Spec in Entrepreneur/Small Bus	0	0	0	1	2	2	-
Specialization in Accounting	0	0	0	2	2	2	-
Specialization in Marketing	0	0	1	1	1	1	-
Specialization Travel/Tourism	0	1	0	0	0	0	-
System Engr & Technical Mgmt	0	0	2	3	0	0	-
Technology and Management	16	30	43	46	46	30	187.5%
Vascular Technology	88	95	80	93	98	10	11.4%
Total (Duplicated)	**4,146**	**4,539**	**4,407**	**4,923**	**5,371**	**1,225**	**29.5%**
Total (Unduplicated)	**4,001**	**4,414**	**4,273**	**4,786**	**5,232**	**1,231**	**30.8%**

Attachment 3_Graduates_10_Year_History_by_Major

Oregon TECH

10 Year History By Major and Degree Type
As of September 5, 2016

Specializations

	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
Picture Archive/Comm Sys Spec	-	-	-	-	-	-	4	4	3	-
Specialization in Accounting	-	-	-	-	-	-	-	1	-	-
Specialization in Marketing	-	-	-	-	-	-	-	2	-	-
Total	**0**	**0**	**0**	**0**	**0**	**0**	**4**	**7**	**3**	**0**

Certificates

	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
Accounting Certificate	-	-	-	-	-	-	-	-	-	-
Dispute Resolution Certificate	1	2	1	2	4	1	6	11	1	2
Marketing Certificate	-	-	-	-	-	-	-	-	-	-
Polysomnographic Technology	-	-	4	14	13	11	8	6	3	9
Total	**1**	**2**	**5**	**16**	**17**	**12**	**14**	**17**	**4**	**11**

Associates

	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
Associate of Arts	13	8	2	5	-	1	-	-	1	1
Computer Engineering Tech	7	5	3	2	3	-	5	7	6	6
Dental Hygiene	25	26	22	25	18	27	18	23	21	9
Electronics Engineering Tech	3	1	2	1	-	-	-	-	-	-
EMT - Paramedic	19	21	22	25	27	17	28	26	26	29
Office Systems Technology	-	2	2	-	-	-	-	-	-	-
Polysomnographic Technology	-	-	1	2	3	5	6	2	4	-
Respiratory Care	23	16	15	17	-	-	-	-	-	-
Sleep Health-Polysom Tech Opt	-	-	-	-	-	-	-	-	-	3
Software Engineering Tech	7	2	3	2	2	-	-	2	9	2
Total	**97**	**81**	**72**	**79**	**53**	**50**	**57**	**60**	**67**	**50**

Bachelors

	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
Allied Health Management	-	-	-	1	2	4	3	2	1	-
Applied Environmental Science	1	-	-	-	-	-	-	-	-	-
Applied Mathematics	-	-	7	1	5	4	7	4	4	5
Applied Psychology	46	42	37	30	36	38	30	40	37	31
Biology	10	6	16	14	11	11	3	4	1	2
Biology-Health Sciences	-	-	-	-	-	-	10	14	20	18
Civil Engineering	23	23	29	28	20	14	23	17	15	25
Clinical Laboratory Science	23	24	24	22	22	35	27	34	49	46
Communication Studies	13	13	9	10	13	8	19	13	4	8
Computer Engineering Tech	15	7	14	8	13	3	4	3	3	3
Dental Hygiene	35	38	45	55	49	54	51	76	62	65
Diagnostic Medical Sonography	21	24	21	27	29	24	19	31	25	24
Echocardiography	6	4	16	9	21	32	31	32	29	35
Electrical Engineering	-	-	-	6	11	9	11	17	17	26
Electronics Engineering Tech	18	17	13	10	18	16	11	10	10	13

Bachelors

	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
Embedded Systems Eng Tech	-	-	-	1	2	2	4	1	5	3
Emergency Medical Services Mgt	-	-	-	-	-	-	-	-	-	1
Environmental Sciences	1	1	3	1	5	5	4	5	11	14
Geomatics	10	8	5	5	1	-	-	-	-	-
Geomatics-option in GIS	-	-	2	1	1	3	3	5	1	2
Geomatics-option in Surveying	-	-	1	11	13	14	10	13	1	12
Health Care Mgmt-Admin Mgmt	-	-	-	-	-	-	-	-	1	2
Health Care Mgmt-Clinical Mgmt	-	-	-	-	-	-	-	-	1	-
Health Sciences	1	3	2	2	2	6	1	1	-	-
Industrial Management	-	-	-	1	-	-	-	-	-	-
Information Technology	4	4	1	2	-	1	-	-	-	-
IT Accounting Option	-	1	2	1	1	2	1	2	-	-
IT Applications Dev Opt	8	5	13	5	6	8	21	12	8	11
IT Bus/Systems Analysis Opt	1	1	4	10	12	6	12	14	13	8
IT Health Informatics Opt	-	-	-	-	2	4	9	6	14	7
Management Information System	12	2	8	3	-	2	-	-	-	-
Manufacturing Engineering Tech	30	15	16	18	18	9	13	5	11	12
Mechanical Engineering	3	3	17	12	11	19	14	27	23	45
Mechanical Engineering Tech	31	19	31	23	24	19	24	18	17	21
Mgmt Info Sys/Mgmt Acc Option	-	3	-	-	-	-	-	-	-	-
Mgmt/Accounting Option	8	4	3	8	4	9	9	12	5	8
Mgmt/Marketing Option	9	7	5	5	7	8	7	4	7	7
Mgmt/Small Bus Mgmt Option	9	11	11	18	8	6	8	12	4	7
Nuclear Medicine Technology	18	18	16	15	16	16	15	14	14	15
Operations Management	8	6	3	15	7	14	16	13	19	18
Optical Engineering	-	-	-	-	-	-	-	-	1	1
Population Health Management	-	-	-	-	-	-	-	-	-	5
Radiologic Science	47	51	50	53	51	50	48	55	45	56
Renewable Energy Engineering	-	-	6	9	29	35	60	35	29	29
Renewable Energy Systems	-	-	1	-	-	-	-	-	-	-
Respiratory Care	5	8	6	7	10	21	21	21	27	22
Software Engineering Tech	44	36	27	27	31	29	41	31	35	47
System Engr & Technical Mgmt	-	-	-	-	-	-	-	-	-	3
Technology and Management	-	-	-	-	-	-	1	1	11	8
Ultrasound/Diag Med Sono Opt	1	-	-	-	-	-	-	-	-	-
Ultrasound/Vascular Option	1	-	-	-	-	-	-	-	-	-
Vascular Technology	30	30	26	23	23	25	21	28	19	24
Total	**492**	**434**	**490**	**497**	**534**	**565**	**612**	**632**	**599**	**689**

Masters

	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
Civil Engineering	-	-	-	-	-	-	-	-	2	6
Manufacturing Engineering Tech	3	4	7	2	6	8	12	4	8	9
Renewable Energy Engineering	-	-	-	-	-	-	-	1	11	9
Total	**3**	**4**	**7**	**2**	**6**	**8**	**12**	**5**	**21**	**24**

Grand Total

	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
Grand Total	**593**	**521**	**574**	**594**	**610**	**635**	**699**	**721**	**694**	**774**

Attachment 4_Grad_Data_First_Destination_3_Year_History_by_Major

Oregon Tech Graduate Outcome Data

a=2013/2014/2015 combined	% Employed		% Continuing Ed		% Looking for Work		% Not Looking		Success Rate		Median Salary	
b=2014/2015/2016 combined	a	b	a	b	a	b	a	b	a	b	a	b
% among those reporting outcomes	83.3	**87.6**	6.1	**6.7**	9.4	**4.9**	1.2	**0.8**	90.6	**95.1**	$ 54,000	**$ 56,000**
Biology-Health Sciences	36	38	60	62	4	0	0	0	96	100	$ 20,750	$ 33,000
Civil Engineering	83	92	11	8	6	0	0	0	94	100	$ 50,000	$ 51,540
Communication Studies	60	67	13	11	27	22	0	0	73	78	$ 27,000	$ 28,500
Computer Engineering Technology	89	93	0	0	0	0	11	7	100	100	$ 63,000	$ 64,000
Dental Hygiene	86	96	4	1	9	2	1	1	91	98	$ 53,000	$ 57,500
Diagnostic Medical Sonography	97	98	3	2	0	0	0	0	100	100	$ 60,000	$ 60,868
Echocardiography	95	93	0	3	5	3	0	0	95	97	$ 60,500	$ 64,000
Electrical Engineering	87	83	0	10	13	7	0	0	87	93	$ 60,000	$ 60,000
Electronics Engineering Technology	73	82	7	5	20	14	0	0	80	86	$ 54,250	$ 66,750
Embedded Systems Engineering Tech	80	83	0	17	20	0	0	0	80	100	$ 58,250	$ 60,000
EMT/Paramedic	100	100	0	0	0	0	0	0	100	100	$ 48,000	$ 52,000
Environmental Sciences	67	76	11	18	22	6	0	0	78	94	$ 39,800	$ 40,000
Geomatics: GIS	100	100	0	0	0	0	0	0	100	100	$ 42,000	$ 42,000
Geomatics: Surveying	69	64	0	9	31	27	0	0	69	77	$ 40,500	$ 43,000
Health Care Management	75	80	25	20	0	0	0	0	100	100	$ 52,000	na
Health Informatics	75	79	10	11	15	11	0	0	85	89	$ 53,000	$ 52,000
Information Technology	84	88	0	2	16	10	0	0	84	90	$ 55,000	$ 55,000
Management: Accounting	78	83	6	6	17	11	0	0	83	89	$ 32,000	$ 32,250
Management: SmBus/Entrepreneursh	77	87	15	13	8	0	0	0	92	100	$ 33,000	$ 40,900
Management: Marketing	82	93	0	0	18	7	0	0	82	93	$ 39,250	$ 48,500
Manufacturing Engineering Technolo	77	85	5	4	13	11	0	0	87	89	$ 62,500	$ 60,000
Mathematics, Applied	60	71	20	29	0	0	20	0	100	100	na	na
Mechanical Engineering	71	82	12	9	10	5	7	4	90	95	$ 60,000	$ 60,000
Mechanical Engineering Technology	86	100	7	0	7	0	0	0	93	100	$ 60,000	$ 62,500
Medical Laboratory Science	100	100	0	0	0	0	0	0	100	100	$ 53,750	$ 55,000
Nuclear Medicine Technology	87	86	0	3	13	11	0	0	87	89	$ 57,000	$ 57,846
Nursing												
Operations Management	83	83	11	14	6	3	0	0	94	97	$ 63,000	$ 63,000
Polysomnographic Technology	83	100	0	0	17	0	0	0	83	100	$ 50,000	$ 40,500
Population Health Management	na	75	na	25	na	0	na	0	na	100	na	$ 42,000
Psychology, Applied	54	66	24	26	15	5	6	3	85	95	$ 30,000	$ 30,000
Radiologic Science	92	97	1	0	6	3	1	1	94	97	$ 47,000	$ 50,000
Renewable Energy Engineering	76	83	6	8	18	9	0	0	82	91	$ 57,000	$ 56,500
Respiratory Care	97	98	0	0	3	2	0	0	97	98	$ 56,000	$ 56,000
Software Engineering Technology	93	91	0	0	3	7	3	3	97	93	$ 62,250	$ 66,750
Technology and Management	100	88	0	0	0	12	0	0	100	88	na	na
Vascular Technology	92	91	0	0	8	9	0	0	92	91	$ 64,602	$ 62,000

Additional Notes:

Numbers may not add to 100 due to rounding

na=not reported, or not available due to small sample size

METHODOLOGY

Sample Frame 2016: 781 degrees awarded per FAST

Survey Response Rate: 49% Total Knowledge Rate 2016: 75%

Sources: Data collected from a variety of sources. Below, for 2016, in chronological order:

    Grad Fair paper survey

    Faculty senior exit survey

    Career Services survey

    Career Services followup with non-respondents

    Faculty information from their contact with students

    LinkedIn Profiles

Salaries of $2,500 and below and $250,000 and above were deleted.

Students with dual majors are included under each major

Known Outcomes 2016: 587

Known Outcomes 2013/2014/2015 combined N=1008

Known Outcomes 2014/2015/2016 combined N=1244

Oregon Health and Science University / Oregon Institute Technology Survey

CoAEMSP Employer Summary Report

There are **6 CoAEMSP Employer Survey** Records that match your Summary criteria.

5 = Strongly Agree   4 = Generally Agree   3 = Neutral (acceptable)   2 = Generally Disagree   1 = Strongly Disagree   N/A = Not Applicable

I. Paramedic Knowledge Base (Cognitive Domain)

The Graduate

1. Has the EMS knowledge necessary to function in a healthcare/EMS environment.

Rating:	5	4	3	2	1	N/A
Count:	**3**	**3**				
Percentage:	**50**	**50**				

Total Responses: **6**   Mean ± SD: **4.5 ± 0.5**

2. Has the general medical knowledge necessary to function in a healthcare/EMS environment.

Rating:	5	4	3	2	1	N/A
Count:	**3**	**3**				
Percentage:	**50**	**50**				

Total Responses: **6**   Mean ± SD: **4.5 ± 0.5**

3. Has the ability to rapidly assess patient acuity.

Rating:	5	4	3	2	1	N/A
Count:	**3**	**3**				
Percentage:	**50**	**50**				

Total Responses: **6**   Mean ± SD: **4.5 ± 0.5**

4. Is able to collect relevant information from patients.

Rating:	5	4	3	2	1	N/A
Count:	**2**	**4**				
Percentage:	**33**	**66**				

Total Responses: **6**   Mean ± SD: **4.3 ± 0.5**

5. Is able to evaluate relevant patient information.

Rating:	5	4	3	2	1	N/A
Count:	**2**	**4**				
Percentage:	**33**	**66**				

Total Responses: **6**   Mean ± SD: **4.3 ± 0.5**

6. Is able to formulate an appropriate treatment plan.

Rating:	5	4	3	2	1	N/A
Count:	**2**	**4**				
Percentage:	**33**	**66**				

Total Responses: **6**   Mean ± SD: **4.3 ± 0.5**

7. Uses sound judgment while functioning in a healthcare/EMS environment

Rating:	5	4	3	2	1	N/A
Count:	**2**	**4**				
Percentage:	**33**	**66**				

Total Responses: **6**   Mean ± SD: **4.3 ± 0.5**

Summary Statistics Paramedic Knowledge Base (Cognitive Domain)

Rating:	5	4	3	2	1	N/A
Count:	**17**	**25**				**0**
Percentage:	**40**	**59**				

Total Responses: **42**   Mean ± SD: **4.4 ± 0.5**

II. Paramedic Clinical Proficiency (Psychomotor Domain)

The Graduate

1. Effectively performs a broad range of clinical skills.

	Rating:	5	4	3	2	1	N/A
	Count:	3	3				
	Percentage:	50	50				

Total Responses: **6**   Mean ± SD: **4.5 ± 0.5**

2. Possesses the skills to perform thorough patient assessments.

	Rating:	5	4	3	2	1	N/A
	Count:	2	4				
	Percentage:	33	66				

Total Responses: **6**   Mean ± SD: **4.3 ± 0.5**

3. Is able to perform approved procedures.

	Rating:	5	4	3	2	1	N/A
	Count:	2	4				
	Percentage:	33	66				

Total Responses: **6**   Mean ± SD: **4.3 ± 0.5**

4. Is able to perform and interpret diagnostic information.

	Rating:	5	4	3	2	1	N/A
	Count:	2	4				
	Percentage:	33	66				

Total Responses: **6**   Mean ± SD: **4.3 ± 0.5**

Summary Statistics Paramedic Clinical Proficiency (Psychomotor Domain)

	Rating:	5	4	3	2	1	N/A
	Count:	9	15				0
	Percentage:	37	62				

Total Responses: **24**   Mean ± SD: **4.4 ± 0.5**

III. **Paramedic Behavioral Skills (Affective Domain)**

The Graduate

1. Communicates effectively as a Paramedic.

	Rating:	5	4	3	2	1	N/A
	Count:	1	5				
	Percentage:	16	83				

Total Responses: **6**   Mean ± SD: **4.2 ± 0.4**

2. Conducts himself/herself in an ethical manner.

	Rating:	5	4	3	2	1	N/A
	Count:	3	3				
	Percentage:	50	50				

Total Responses: **6**   Mean ± SD: **4.5 ± 0.5**

3. Conducts himself/herself in a professional manner.

	Rating:	5	4	3	2	1	N/A
	Count:	3	3				
	Percentage:	50	50				

Total Responses: **6**   Mean ± SD: **4.5 ± 0.5**

4. Functions effectively as a member of the healthcare/EMS team.

	Rating:	5	4	3	2	1	N/A
	Count:	1	5				
	Percentage:	16	83				

Total Responses: **6**   Mean ± SD: **4.2 ± 0.4**

5. Accepts supervision and feedback and works effectively with supervisory personnel.

	Rating:	5	4	3	2	1	N/A
	Count:	1	5				
	Percentage:	16	83				

Total Responses: **6**   Mean ± SD: **4.2 ± 0.4**

6. Is self-directed and responsible for his/her actions.

	Rating:	5	4	3	2	1	N/A
	Count:	2	4				

	Percentage:	**33**	**66**				
	Total Responses: **6**	Mean ± SD: **4.3 ± 0.5**					

7. Arrives to work prepared and on time.

Rating:	5	4	3	2	1	N/A
Count:	**3**	**3**				
Percentage:	**50**	**50**				
Total Responses: **6**	Mean ± SD: **4.5 ± 0.5**					

8. Contributes to a positive work environment.

Rating:	5	4	3	2	1	N/A
Count:	**3**	**3**				
Percentage:	**50**	**50**				
Total Responses: **6**	Mean ± SD: **4.5 ± 0.5**					

Summary Statistics Paramedic Behavioral Skills (Affective Domain)

Rating:	5	4	3	2	1	N/A
Count:	**17**	**31**				**0**
Percentage:	**35**	**64**				
Total Responses: **48**	Mean ± SD: **4.4 ± 0.5**					

IV. **Comments**

Please comment on the OVERALL quality of this Paramedic program's graduate.

Leetch, Alec - This employee is an asset to our agency. He is a good paramedic and a credit to the strength of your program.
Lamb, Sarah - Sarah is a great paramedic and employee. She came into the position with the expected skills and knowledge and has progressed at a pace that we would expect.
Fillinger, Micah - This paramedic has been a solid asset for us since start of employment. He easily moved through our field training program and was placed on a permanent shift.
White, Brenna - This paramedic has been a solid asset for us since start of employment. She easily moved through our field training program and was placed on a permanent shift.
Young, Josh - This paramedic has been a solid asset for us since start of employment. He easily moved through our field training program and was placed on a permanent shift.
Abbott, Cody - The graduate has and continues to be a positive addition to our paramedic crews. His knowledge is exceptional and loves to teach what he has learned.

What qualities or skills did you expect of the graduate that he/she did not possess?

Leetch, Alec - No Comment Entered
Lamb, Sarah - There was nothing obvious that was missing. There were a few skills and medications that are in our local protocols that are not in the scope of NREMT. She came up to speed with just a little training.
Fillinger, Micah - I have not seen any deficiencies with Micah. From the start, he appeared confident in his skills and knowledge base and understanding of what he lacked in experience.
White, Brenna - I have not seen any deficiencies with Brenna. From the start, she appeared confident in her skills and knowledge base and understanding of what she lacked in experience.
Young, Josh - I have not seen any deficiencies with Josh. From the start, he appeared confident in his skills and knowledge base and understanding of what he lacked in experience
Abbott, Cody - Every graduate comes to the field with a vast amount of knowledge but being in the field is different. He has completed field training in record time and gained confidence. Any program would have a hard time giving new paramedics confidence. The internship helps but when you are on your own it is a different story. I would not expect this student to have the confidence of a veteran paramedic.

Please provide comments and suggestions that would help this program to better prepare future graduates.

Leetch, Alec - No Comment Entered
Lamb, Sarah - Nothing I can think. We are very pleased with your graduate.
Fillinger, Micah - One issue that I have seen with new graduates is the lack of understanding of EMS systems structure and design and also the management of personnel. I believe if, at minimum, an awareness level understanding of the roles/responsibilities of supervisors, training officers, managers would prove beneficial to reduce stigmatization and reduce possible tension.
White, Brenna - One issue that I have seen with new graduates is the lack of understanding of EMS systems structure and design and also the management of personnel. I believe if, at minimum, an awareness level understanding of the roles/responsibilities of supervisors, training officers, managers would prove beneficial to reduce stigmatization and reduce possible tension.
Young, Josh - One issue that I have seen with new graduates is the lack of understanding of EMS systems structure and design and also the management of personnel. I believe if, at minimum, an awareness level understanding of the roles/responsibilities of supervisors, training officers, managers would prove beneficial to reduce stigmatization and reduce possible tension.
Abbott, Cody - The program has been successful and the graduates I have seen come into the field have a vast knowledge and

are well prepared. I cannot see anything that needs to be changed with the program.

What are strengths of the graduate(s) of this program?

Leetch, Alec - No Comment Entered
Lamb, Sarah - Sarah has talked about how she enjoyed running in different EMS systems: volunteer, paid, for profit, non profit, etc. EMS has a many different variations and it is great to see them first hand.
Fillinger, Micah - Solid grasp of paramedic skills and knowledge. Graduates easily plug into the workforce without additional retraining / evaluation in the FTEP process.
White, Brenna - Solid grasp of paramedic skills and knowledge. Graduates easily plug into the workforce without additional retraining / evaluation in the FTEP process.
Young, Josh - Solid grasp of paramedic skills and knowledge. Graduates easily plug into the workforce without additional retraining / evaluation in the FTEP process.
Abbott, Cody - His EKG skills, IV skills and patient care are excellent.

Search Criteria

- Report Type: **Summary**
- Graduation Date: All
- Employer Survey Dates: **Thursday, November 10, 2016** to **Wednesday, December 28, 2016**
- Flag: Any
- Comment Type: **Full**

Oregon Health and Science University / Oregon Institute Technology Survey

CoAEMSP Graduate Summary Report

There are **7 CoAEMSP Graduate Survey** Records that match your Summary criteria.

5 = Strongly Agree   4 = Generally Agree   3 = Neutral (acceptable)   2 = Generally Disagree   1 = Strongly Disagree   N/A = Not Applicable

I. Paramedic Knowledge Base (Cognitive Domain)

The Program

1. Helped me acquire the EMS knowledge necessary to function in a healthcare/EMS environment.

	Rating:	5	4	3	2	1	N/A
	Count:	**5**	**2**				
	Percentage:	**71**	**28**				

Total Responses: **7**   Mean ± SD: **4.7 ± 0.5**

2. Helped me acquire the general medical knowledge base necessary to function in a healthcare/EMS environment.

	Rating:	5	4	3	2	1	N/A
	Count:	**5**	**2**				
	Percentage:	**71**	**28**				

Total Responses: **7**   Mean ± SD: **4.7 ± 0.5**

3. Prepared me to collect relevant information from patients.

	Rating:	5	4	3	2	1	N/A
	Count:	**5**	**2**				
	Percentage:	**71**	**28**				

Total Responses: **7**   Mean ± SD: **4.7 ± 0.5**

4. Prepared me to evaluate relevant patient information.

	Rating:	5	4	3	2	1	N/A
	Count:	**6**	**1**				
	Percentage:	**85**	**14**				

Total Responses: **7**   Mean ± SD: **4.9 ± 0.3**

5. Prepared me to formulate an appropriate treatment plan.

	Rating:	5	4	3	2	1	N/A
	Count:	**5**	**2**				
	Percentage:	**71**	**28**				

Total Responses: **7**   Mean ± SD: **4.7 ± 0.5**

6. Trained me to use sound judgment while functioning in a healthcare/EMS environment.

	Rating:	5	4	3	2	1	N/A
	Count:	**5**	**2**				
	Percentage:	**71**	**28**				

Total Responses: **7**   Mean ± SD: **4.7 ± 0.5**

Summary Statistics Paramedic Knowledge Base (Cognitive Domain)

	Rating:	5	4	3	2	1	N/A
	Count:	**31**	**11**				**0**
	Percentage:	**73**	**26**				

Total Responses: **42**   Mean ± SD: **4.7 ± 0.4**

II. Paramedic Clinical Proficiency (Psychomotor Domain)

The Program

1. Prepared me to perform a broad range of clinical skills.

	Rating:	5	4	3	2	1	N/A
	Count:	**5**	**1**	**1**			
	Percentage:	**71**	**14**	**14**			

Total Responses: **7**   Mean ± SD: **4.6 ± 0.7**

2. Prepared me with the skills to perform a thorough patient assessment.

Rating:	5	4	3	2	1	N/A
Count:	4	2	1			
Percentage:	57	28	14			

Total Responses: **7**   Mean ± SD: **4.4 ± 0.7**

3. Prepared me to perform approved procedures.

Rating:	5	4	3	2	1	N/A
Count:	5	2				
Percentage:	71	28				

Total Responses: **7**   Mean ± SD: **4.7 ± 0.5**

4. Prepared me to interpret diagnostic information.

Rating:	5	4	3	2	1	N/A
Count:	6	1				
Percentage:	85	14				

Total Responses: **7**   Mean ± SD: **4.9 ± 0.3**

Summary Statistics Paramedic Clinical Proficiency (Psychomotor Domain)

Rating:	5	4	3	2	1	N/A
Count:	20	6	2			0
Percentage:	71	21	7			

Total Responses: **28**   Mean ± SD: **4.6 ± 0.6**

III. **Paramedic Behavioral Skills (Affective Domain)**

The Program

1. Prepared me to communicate in my role as a paramedic.

Rating:	5	4	3	2	1	N/A
Count:	4	3				
Percentage:	57	42				

Total Responses: **7**   Mean ± SD: **4.6 ± 0.5**

2. Prepared me to conduct myself in an ethical manner.

Rating:	5	4	3	2	1	N/A
Count:	6	1				
Percentage:	85	14				

Total Responses: **7**   Mean ± SD: **4.9 ± 0.3**

3. Prepared me to conduct myself in a professional manner.

Rating:	5	4	3	2	1	N/A
Count:	5	1				1
Percentage:	71	14				14

Total Responses: **7**   Mean ± SD: **4.8 ± 0.4**

4. Taught me to manage my time efficiently while functioning in a healthcare/EMS environment.

Rating:	5	4	3	2	1	N/A
Count:	3	3	1			
Percentage:	42	42	14			

Total Responses: **7**   Mean ± SD: **4.3 ± 0.7**

Summary Statistics Paramedic Behavioral Skills (Affective Domain)

Rating:	5	4	3	2	1	N/A
Count:	18	8	1			1
Percentage:	64	28	3			3

Total Responses: **28**   Mean ± SD: **4.6 ± 0.6**

IV. **Paramedic General Information**

1. I have actively pursued attaining my national EMS credential(s).

Rating:	5	4	3	2	1	N/A
Count:	7					
Percentage:	100					

	Rating:	5	4	3	2	1	N/A

Total Responses: **7**   Mean ± SD: **5.0 ± 0.0**

2. I am a member of a state EMS professional association.

	Rating:	5	4	3	2	1	N/A
	Count:	**5**	**1**			**1**	
	Percentage:	**71**	**14**			**14**	

Total Responses: **7**   Mean ± SD: **4.3 ± 1.4**

3. I am a member of a national EMS professional association.

	Rating:	5	4	3	2	1	N/A
	Count:	**6**	**1**				
	Percentage:	**85**	**14**				

Total Responses: **7**   Mean ± SD: **4.9 ± 0.3**

4. I actively participate in continuing education activities.

	Rating:	5	4	3	2	1	N/A
	Count:	**4**	**1**	**2**			
	Percentage:	**57**	**14**	**28**			

Total Responses: **7**   Mean ± SD: **4.3 ± 0.9**

Summary Statistics Paramedic General Information

	Rating:	5	4	3	2	1	N/A
	Count:	**22**	**3**	**2**		**1**	**0**
	Percentage:	**78**	**10**	**7**		**3**	

Total Responses: **28**   Mean ± SD: **4.6 ± 0.9**

V. **Comments**

Please comment on the OVERALL quality of your preparation as a paramedic.

Adair, Kristian - Outstanding initial prep. I believe there was a good holistic view from the program terms; good focus on the classroom educational info as a foundation, and good opportunities to learn skills. Moderate opportunity within sims to synthesize both of those together into practical performance.
Anonymous - No Comment Entered
Anonymous - Excellent
Palmberg, Ryan - Excellent. Between the classroom instruction and field internship with Wake County EMS I was very prepared to start my first job as a paramedic. I would highly recommend the program to anyone.
Prull, Brenna - The best I have seen.
Anonymous - All of our instructors had us well prepared for the field.
Funicello, Alexander - Great book knowledge. Needs to improve on field skills

Based on your work experience, please identify two or three strengths of the program.

Adair, Kristian - Faculty of broad background and outstanding didactic presentation. Great resources available to students from the program (OHSU resources). Good work load- not too much busy work, but work that actually builds learning toward goals. Good relationships with EMS agencies for internships (would love to hear from some local agencies about operations and jobs during the program!)
Anonymous - No Comment Entered
Anonymous - Focus on adaptive critical thinking with an emphasis on research-based therapy
Palmberg, Ryan - ECG, pharmacology, and the simulation labs. I feel like these parts of the program put me ahead of some of my coworkers, even though I was a brand new medic and they had more previous experience. The cadaver lab was also a huge learning experience for me.
Prull, Brenna - 12 leads! Thanks Kate! And being able to control a scene as the lead paramedic - SIM really helped
Anonymous - Excellent lab time and practice
Funicello, Alexander - Understanding whats going on with the patient. Wide variety of optional treatments. Thinking paramedic not just blindly following protocols

Based on your work experience, please make two or three suggestions to further strengthen the program.

Adair, Kristian - Good ways to stay sharp on your skills after exiting the program... I understand that the goal of the program is initial prep, however within your first year out there is a lot going on and it can be easy to lose track of resources for staying on-point with your knowledge. Would love more team-based sim opportunities, and then time to actually review and digest learnings from sim after the fact.
Anonymous - No Comment Entered
Anonymous - More time on psych
Palmberg, Ryan - A thorough unit on capnography and CO_2 waveform interpretation would be a great addition to the program. Capnography is an amazing tool that I think is underutilized in EMS. I recently took a continuing education course on this and it has improved my practice immensely. I felt a little unprepared when it came to lung sounds. The program did well in teaching us what the sounds were and what they indicated, but my difficulty came with actually listening with my stethoscope and understanding what the sound was that I was hearing. A little more in depth instruction on lung sounds would be an asset to

future students.

Prull, Brenna - I think I would have benefited from more conflict resolution training. We often finds ourselves faced with aggressive pts, family members, and in Portland Fire we get a lot of argumentative fire fighters.

Anonymous - Better medical class preparation.

Funicello, Alexander - More realistic sim experience. More RSI/ OR rounds

What qualities/skills were expected of you upon employment that were not included in the program?

Adair, Kristian - We do quite a bit of blood draws, which we didnt talk a ton about, and frankly the blood draw presentation from the CLS was not properly oriented to EMS use. Granted, that presentation was super boring and dry, and an EMS tailored blood draw/lab value sessions would probably be better installed toward the end of the program when the student has a full base of knowledge already. Would like to have known more about lab values and which tubes they are from and then what lab values are associated with clinical presentation of illness (just an overview, doesnt need to be super intense). Also more hands-on time with various medical devices- different types of vents and different types of IV pumps and basic principles of operation. As a new medic often you end up working with hospital transfers, which can be more complex patients and involve several devices s well.

Anonymous - No Comment Entered

Anonymous - No Comment Entered

Palmberg, Ryan - None.

Prull, Brenna - None that I can think of.

Anonymous - None

Funicello, Alexander - Running cardiac arrests

Please provide comments and suggestion that would help to better prepare future graduates.

Adair, Kristian - I think I was well-prepared, its just a matter of staying on the forefront of EMS trends as they progress. It just takes time to build confidence when beginning work, but I think I had all of the necessary critical thinking options. Frankly, skills and book knowledge will always be changing; its important to learn them obviously, but having the ability to decide what is important/not-important, who is sick/not-sick and how to critically assess what is going on is the most valuable skill. Deciphering information and prioritizing actions is critical. Also, LOVED my out of town internship. Valuable experience.

Anonymous - No Comment Entered

Anonymous - No Comment Entered

Palmberg, Ryan - For future students...really take advantage of hospital rounds and your ER rotation. Listen to as many lungs as possible and look at as many ECGs as you can. Ask lots of questions. I learned a lot by watching and listening to ER doctors as they performed patient assessments. All of this goes to prepare you for that call when you are the only medic and nobody is there to help you!

Prull, Brenna - This is already the best program..... The only thing I wish I had more training on (probably because I work in multnomah county) is more scene safety awareness and self defense tactics. Our company offers no training for restraining pts but expects us to do it without harm. Perhaps school could assist in teaching paramedics how to safely restrain pts

Anonymous - Study hard.

Funicello, Alexander - Do not do OR rounds at OHSU. Require more tubes/RSI/Cardiac arrest

Search Criteria

- Report Type: **Summary**
- Graduation Date: All
- Graduate Survey Dates: **Thursday, November 10, 2016** to **Sunday, December 25, 2016**
- Flag: Any
- Comment Type: **Full**

1. The **FISDAP Exam** is the test that every student must successfully pass in order to graduate from our program. Our target is to have 80% of the students pass with one attempt and for 95% to pass all sections with 1-2 attempts.

Table 1: FISDAP Exam

	Number of students passing with one attempt	**Number of students passing with two attempts**	**Number of students passing with more than two attempts**
	15	4	1

2. **NREMT Written Paramedic Exam** is the comprehensive written exam administered by the National Registry of EMT's that prospective paramedic candidates must take after graduating from their paramedic program before they are granted a license to practice within an individual state. Our target is to have 80% of the students pass with one attempt and for 95% to pass all sections with 1-2 attempts.

Table 2: NREMT Written Paramedic Exam

Number of students passing with one attempt	**Number of students passing with two attempts**	**Number of students passing with more than two attempts**
15	2	3