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Program/s in this review: Paramedical Technology AAS

Specialized accrediting agency (if applicable): CAAHEP & CoAEMSP

Campuses where the program is delivered: Kenai, Mat-Su

Members of the program review committee:

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1. Centrality of Program Mission and Supporting Role

The UAA Paramedic Program is taught on two (2) community campuses; the Kenai Peninsula College (KPC), Kenai River Campus and on the Matanuska-Susitna College (MSC). Both of these campuses are in the vicinity of large Alaska communities that have paramedic level Emergency Medical Services (EMS), and whom hire graduates from both programs. KPC has been able to supply paramedic level personnel for the last 14 years with 42 being hired on the Kenai Peninsula with Borough Fire Departments. MSC has had equal successes by preparing four (4) paramedics for the Anchorage Fire in 2018 – 2019 and several others employed by departments in the Mat-Su valley. Both programs have also produced graduates who were hired throughout Alaska in metropolitan, rural, and remote environments as well as within the oil, gas, and mining industries. Many students have also been hired by in-state Air Ambulances and also local hospitals as Lab Technicians and Emergency Room Paramedics. Several others have continued their medical education by working toward becoming Registered Nurses, Physician Assistants or going to medical school.

Upon completion of both didactic and clinical coursework, paramedic students from both campuses are sent to Advanced Life Support EMS departments for a two-month field internship capstone with licensed paramedic training officers and under the supervision of the department’s medical directors. These internship sites are in large cities in Texas, Colorado and Oregon with new sites created annually to meet student needs. Currently MOA’s are being developed in Nevada and Washington State. In-state partnerships include training with LifeMed Alaska, Anchorage Fire Department, Mat-Su EMS, plus Central Emergency Services, Kenai Fire Department, and Nikiski Fire Department on the Kenai Peninsula. The program also partners with Central Peninsula Hospital, Mat-Su Regional Hospital, Alaska Regional Hospital, Providence Alaska Medical Center and the Alaska Native Medical Center in Anchorage.

Both MSC and KPC have received extramural support and funding for the program. TVEP and State of Alaska funding for the paramedic programs including building a new wing in the Snodgrass building (MSC) that was dedicated to Paramedicine and Nursing. KPC did a full remodel within the Ward Building to add an EMS classroom, simulation and practice breakout rooms. Both campuses have ample medical equipment and supplies including multiple high-fidelity human simulators and other paramedic level equipment and supplies. Both KPC and MSC have full sized ambulance simulators that are used to train all levels of EMTs and paramedic classes on their respective campuses.
Both campuses have received TVEP awards in the past and have used them to purchase high fidelity simulators (i.e. SimMan G3, SimMom, Simbaby) and other significant program equipment. There is no other outside revenue used for the program. Both campuses have Student Paramedic Associations (Student Clubs) which generate a small amount of revenue used for student club activities.

There is a very high demand for paramedics nationwide and KPC/MSC Paramedic Students are often recruited at their internship sites. Employer and student surveys report that graduates are well trained from both campuses and no concerns or problems have been identified. Students have been hired in both Alaska and throughout the contiguous states. The Department of Labor is projecting a 7 percent growth for paramedics nationwide from 2018 to 2028, faster than the average for all occupations.

2. Program Demand (including service to other programs), Efficiency, and Productivity

The IR-Report shows mixed enrollment on both campuses over the last seven (7) years. There are several demographic reasons to justify this as well listed options that will reverse the downward trend in student enrollment in the Paramedic Programs.

The course pass rate data show a steep decline in 2016, however internal department databases reflect a continued high pass rate in all paramedic courses (>90%).

The road system in Alaska is well staffed with EMS departments that employ and recruit paramedics annually. Paramedics are also being hired to replace the aging workforce. On the Kenai Peninsula there are currently several open paramedic positions and another 6-8 projected for the coming fiscal year. Anchorage and the Mat-Su Valley have hiring lists annually and graduates of both programs have been employed by the Municipality of Anchorage since the program’s inception. Mat-Su campus has also been able to provide training to Anchorage Fire with hybrid delivery methods for their on-duty staff.

Fire and EMS departments desire the advanced level skills and knowledge of a licensed paramedic, but are often restricted by funding shortfalls. In Alaska the EMT is a certification through the Office of EMS and the scope of practice is often adjusted upward to allow for “expanded scope” skills and medications to be given by minimally trained personnel.

The oil, gas, and mining industry has used the expanded scope of practice to its advantage. They require a paramedic to work in the remote camps, after hiring them cross-certify them as EMT-3, so they can be trained to provide additional expanded scope skills such as suturing, and primary care examinations and medication administration. The industry needs the experience of a paramedic, and pays well, but also needs the flexibility of the EMT’s scope, something that isn’t an option for licensed paramedic providers.

EMT courses feed Paramedic Programs. KPC and MSC need to increase EMT headcount by recruiting from high school and in some cases the Jr. High School aged students into EMS courses. If we can entice students (starting at age 14) to take EMS classes such as the Emergency Trauma Technician (ETT) and also increase the number of both traditional and hybrid EMT classes both campuses will continue to see increases in the paramedic student enrollment.
Paramedic training is intensive, and ongoing medical education is absolutely necessary to maintain the professional license. KPC and MSC should look at expanding their programs to include offering additional short courses or non-credit courses that will allow students to maintain their paramedic licenses after graduation. Paramedics are required to have annual, biannual, and skills training that faculty and lab aids are already able to teach. The college has the necessary equipment and technology on hand to offer this required training with minimal additional effort, and at a reasonable cost to the student. Faculty should also use service time to visit both high school and local job fares and look for other recruitment opportunities. Both programs have collaborated with federal workforce development offices on the Kenai Peninsula and in Anchorage to help students receive funding for their paramedic education.

3. Program Quality, Improvement and Student Success

The UAA Paramedic Programs taught on the Matanuska-Susitna and at Kenai Peninsula College campuses both use the most current edition of the “EMS Educational Standards” produced by the U.S. Department of Transportation for paramedic education.

UAA PMED degree’s CIM requirements were updated in 2019 to allow for students to complete their Paramedic AAS Degree either concurrently or after completion of the paramedic majors. Students will now be able to test for National Registry Paramedic certification exams before finishing their degrees if they choose. This adjustment brought UAA’s program into alignment with most other accredited programs nationwide. The Paramedic core course requirements did not change for students who choose to finish their degree after completing the majors.

Mat-Su College Paramedic Program is CAAHEP Accredited and has been a re-accreditation in 2019. KPC is currently under a “letter of review” and has completed all of the requirements for full CAAHEP accreditation which is expected to be awarded in May 2020. Both campuses did exceptionally well on their last self-studies and site visits.

Student success rates for both KPC and MSC are very high. National Registry first time pass rates for Paramedic testing is approximately 73%. Both UAA community campuses have greater than 90% first time pass rates on the exam. CAAHEP (national accreditation) require that programs maintain a 70% successful course completion, 70% first time pass rate on the National Registry exams and a 70% successful job placement for paramedic graduates. Annual reports to CAAHEP/CoAEMSP show that both campuses have met this requirement.

The KPC and MSC paramedic programs are taught in a face-to-face “academy style” format with didactic and skills lab being taught over three (3) semesters and clinical rotations being taught concurrently each semester. The Capstone (field internship) comes at the conclusion of the three-semester course work. Students at KPC attend classes 16 hours/week and have an additional 450 hours of hospital or fire department clinicals divided across the three-semester course. MSC is teaching the program in a blended learning format with the same hour requirements.
The paramedic program is not taught in a DE format, however there is live sessions that are broadcasted to students who are not in class due to illness or scheduling conflicts. Mat-Su has also run one cohort through the program using VC as a main way to deliver the material and then incorporated “intensive” lab sessions using lab assistants several times throughout the three semesters. KPC has not looked at methods upon traditional face to face at this time.

There are 14 student outcomes across the seven (7) core Paramedic classes. These outcomes are evaluated in three-year cyclic rotations. The last annual review showed strengths in all student outcomes with only pathophysiology of diseased being identified by exam analysis as needing any adjustments. Faculty discussions include promoting A&P (BIO 111 & 112) to students prior to attending paramedic school and also to include more paramedic specific pathophysiology in the didactic portions of the program. The use of the program’s medical directors and guest experts in the areas of study has shown to be helpful. The test analysis has also identified questions that could have been misleading and were updated with the approval of the program’s medical director.

The program’s success learning objectives are set by external accreditation and both programs have met the 70% completion, 70% first time pass rates, and 70% job placement over the last year since the last CAAHEP annual report. Failing below these standards more than three years in a row could lead to program accreditation suspension. Neither MSC or KPC is in any danger of this occurring.

Students are required to actively participate in service learning. A minimum of eight hours per semester must be documented. This is often completed teaching First Aid and CPR skills to members of the public and well as within other medical classes taught on campus. Paramedic students also act as standby medical personnel at local high school sports events, MMA fights, hockey games, and auto races. Students may also earn service grade point s by assisting in the other EMS courses as proctors, assistants and victims during state and national testing events.

Each paramedic student must participate in both in-hospital and fire department clinical rotations. There are assigned areas in the hospital that each student must attend. There rotations are under the supervision of licensed paramedics or nurse mentors. The areas where students do “in-hospital” rotations include the Emergency Department, Operating Room, ICU, OB, Pediatrics, Respiratory Therapy, and cardiac cath lab. The “out of state” internships are performed in Texas, Colorado, and Oregon with two more being developed in Washington State and Nevada.

Both programs use the program’s faculty as advisors for both EMT and Paramedic programs. There is also online advising done for out-of-state students who inquire about the program. Mid-term and end of semester advising is done with every paramedic student and includes medical director involvement. Both programs have formal advising sessions every year that are advertised throughout their local communities and in state wide news media.

KPC had a great CAAHEP initial site visit in September 2019 with only four (4) minor corrections which were immediately resolved. Full CAAHEP Accreditation is expected in May
2020. MSC was fully accredited by CAAHEP in 2015 and has since had a full continuing accreditation. That review showed no citations or improvements necessary.

The AAS Degree was revised for the fall 2020 paramedic program. The changes included:

1. Removed the prerequisite for A&P to enter the program. It is still required for the degree completion.
2. Removed the prerequisites of GERs before students could attend the capstone field internship. This effectively allows the student to choose which path (AAS or course completion) as options, and does not slow down licensure and immediate employment opportunities if so desired. In the single enrollment since the change the enrollment in the KPC Paramedic Program has more than doubled.
3. All clinicals (PMED 242, 254, 264, and 295) were all changed from a Pass/No Pass grading system to a A-F grading scale. This allowed students who maintain exceptional grades throughout the semester to receive the Dean’s List or Chancellor's list which may lead to more scholarship opportunities.

Other awards and recognitions have been received by both KPC and MSC campus paramedic programs including KPC being named as an “Center of Excellence” by the State of Alaska Office of EMS. Both campuses have also placed in the State of Alaska EMS Symposium Skills Competition. KPC was awarded the Chancellor's Award for Exemplary Achievement in Internal/External Partnerships in 2006.

4. Program Duplication / Distinctiveness

There are three (3) paramedic programs in the UA System. MSC and KPC are community campuses of UAA and UAF has a paramedic program in Fairbanks. The UAA and UAF programs do not collaborate between programs. KPC and MSC are meeting the needs of their communities of interest. The programs are highly localized and meet the needs of the population they serve.

The KPC Paramedic Program has shown great success with students who want a traditional face to face paramedic program and has demonstrated a solid foundational learning environment for students who are entering the prehospital medical field for the first time and may benefit more from a more structured educational experience. The KPC Program has been identified as a “Center of Excellence” by the State of Alaska for its high standards and dedication to Alaska EMS. Both faculty members at KPC are actively involved in Alaska EMS committees and serve as advanced certifying officers for state EMS testing. The program continues to meet the hiring needs of the Kenai Peninsula, one of the primary reasons for developing the paramedic program on the Peninsula in 2005.

The MSC Paramedic Program has successfully offered the paramedic program in both a traditional and a blended format. Students who enroll in the blended section did three (3), week long intensive lab sessions each semester and then participated in lectures using Zoom video conferencing software. The students that graduated from the blended course had a 100% pass
rate on their initial National Registry exams as did the traditional face to face students in that cohort.

The Mat-Su Paramedic Program has met the needs for the Mat-Su Valley and has supported full time personnel at Anchorage Fire who have a desire to take the paramedic program locally.

The current delivery styles and methods on both the MSC and KPC campuses are well established and are meeting the needs of the State of Alaska’s advanced EMS paramedic needs. None of the programs should be discontinued, shared or merged as each serve’s members of their own part of the state and communities of interest. Each program has developed successful programs that offer the University of Alaska the highest paramedic enrollment options. It is very unlikely that new paramedic recruits would be willing to travel to another UA campus to gain this training. New college students would be more likely to leave Alaska to get their paramedic training, and then likely not return to Alaska eventually and ultimately causing a shortage in the State paramedic workforce.

5. Summary Analysis

Both KPC and MSC produce paramedic students who finish the training, pass the national exams, and find employment after they graduate. The UAA paramedic students are well received in the EMS industry and sought after by larger departments looking for quality in their future employees. Independent accreditation has value and has helped UAA develop a robust paramedic workforce that is meeting the needs of the community that each campus serves. Low enrollment is concerning and something that faculty discuss regularly, always looking for ways to reverse a downward trend in the vocation. We believe that in order to “grow” the paramedic programs we need to put a greater emphasis on increasing the EMT class size and work with our community partners to recruit into the lower-level classes that feed into the paramedic programs and always remind them of the value to patient care that comes from high quality trained paramedic employees.

MSC has already developed an EMT-Hybrid program that is offered every semester and is well attended. KPC should also look at moving forward with a distance learning component to the EMT classes, especially in the high school demographic population who haven’t decided on their college or career choices yet. KPC can also look to their local partners and determine how a DE format might be implemented. Both campuses need to work together to educate the state employers of the value of hiring quality licensed paramedics.

It is hereby the recommendation by all three (3) members of the Paramedic Expedited Program Review Committee that both MSC and KPC continue moving forward with programs that are meeting the needs of their individual communities and work to grow the EMT programs that feed into the paramedic program.