Program Review Self Study Template

	January Company					
	Program Coordinator:	C Rafton	School:	CD and H		
	Program Code: MTCU Code:		Date Completed:	May – October 2014		
	Program Name: Paramedic					
Inc	dicator					
1.0	Industry Trends		Summary of Key Findings			
	1.1 Sectoral Standards and Industry Trends		1.1 Sectoral Standards and Industry Trends			
Re	view / discuss:		There are a number of emerging trends in the Paramedic industry that may impact the program. These include:			
•	New or emergent industry / sector themes or issues that may have a potential impact on program positioning		 In a referral letter dated June 28, 2007, the Minister of Health and Long-Term Care asked the Health Professions Regulatory Advisory Council (HPRAC) to advise whether paramedics and emergency medical attendants (EMAs) should be regulated in Ontario under the Regulated Health Professions Act, 1991 (RHPA), and, "if so, what would be the appropriate scope of practice, controlled acts, and titles authorized to the profession." 			
•	Industry / sector issues identified by the Program Advisory Committee		· · · · · · · · · · · · · · · · · · ·			
•	Recent labour market data or sector reports		 paramedics not be regulated under the RHPA. HPRAC also identified a number of areas that MOHLTC can consider to broaden its view of the paramedic profession, including expanding and refining the base hospital program's oversight; 			
Recent or anticipated changes in occupational standards, level of entry and credential and / or standards of accreditation		providing title pro of the delivery of • The context of the	, at the same time, making more comprehensive the oversight of paramedics; otection to paramedics; and making inter-professional collaboration a cornerstone pre-hospital emergency health care. e report can be found in h.gov.on.ca/en/news/bulletin/2014/docs/hb_20140307_1.pdf			

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 Program alignment to and sectoral trends Trends identified by the Advisory Committee 1.1 Sectoral Standards at Trends continued Review / discuss: 	e Program	Standard, Decea It is estimated the paramedicine for Last amendment laws.gov.on.ca/ CMA (Canadian programs have reference is increasided (acknowledged of potential job oppensor) Payment for precent There is also the Working group of the Working group of the Working desired available for use available for use lincreased opport Educators of Cale There are changed addition of the finiture (May 2 2013, Vol. 17, No. A greater focus of have limited knowledged.	ed since last Program Review, ALS Standards 3.1, BLS standard, Equipment ased Patient Standard V 1.0. All have been incorporated into the curriculum at there will be more job openings for non-emergency transport instead of 2011-2020. (Industry Trends Appendix 1.1) to Ambulance Act (2009, c. 33, Schedule. 18, ss. 1, 17 (2)). http://www.e-/html/statutes/english/elaws_statutes_90a19_e.htm Medical Association) accreditation: two colleges with Primary Care Paramedic eccived CMA accreditation. In grequency of Primary Care Paramedic (PCP) Autonomous IV starts education component by Ontario Base Hospital Group) in the province, with more ortunities for graduates. This is also supported by PAC. Expotorship is prevalent in our area with all four proximity services committing to it. Inclusion of the requirement to pay for base hospital certification as well. It is reated June 2013 with all three colleges attending first meeting. Sory Committee suggested joint work group for creation of preceptorship training. By students for simulation experiences. Trent has regional simulation center by programs at Fleming tunity for collaboration as faculty are registered for Society of Pre-hospital mada (SPEC) 2014 The sin prehiring assessment techniques in Paramedicine Services (including the Global Rating Scale), the Ontario Base Hospital Group (OBHG) spoke to its use 014 Medical Advisory Committee). Prehospital Emergency Care, January-March No. 1: Pages 57-67 The evidence based decision-making is developing in paramedicine. Our students wiedge of current state of research in the province.

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1.2 Industry Liaison Review / discuss: Program initiatives to maintain involvement with the industry / sector such as field placement supervisions, clinical, faculty renewal, professional learning, other professional affiliations, or community-based projects		Most faculty continuand certificatio Some faculty teace All faculty not wood Faculty participat Care, SPEC, To Faculty are on the Faculty maintain for updates in Faculty involved of Program Advisory Fleming program Lab instructors are Involvement in Maculty spend times.	e Medical Advisory Committee for the Ontario Base Hospital Advisory Group membership in the Society of Pre-hospital Educators of Canada (SPEC), (OPA)	
2.0 Curriculum Developm Framework	ent and	Summary of Key Findir	ngs	
2.1 Curriculum Framework Review / discuss:		The PMD faculty provides academic advising and learning support for all students regarding their progress throughout each semester of the program. Formative and continuous feedback related to acquisition of knowledge and a skill pertaining to performance expectations within each course is		

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approach and addresses our core promise to students concerning personalized learning and support. The program faculty continue to and in the lab, for example: Classroom – Patient Care cour Moving to more case of and discussing the path with base hospital for Counting biggest challenge is student to an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of an discussing the path with base hospital for Counting to more case of the path with base hospital for Counting to more case of the path with base hospital for Counting to more case of the path with base hospital for Counting to more case of the path with base hospital for Counting to more case of the path with base hospital for Counting to more case of the path with base hospital for Counting to more case of the path with base hospital for Counting to more case of the path with base hospital for Counting to more case of the path with base hospital for Counting to more case of the path with base hospital for Counting to more case of the path with base hospital for Count		Cumulative evaluation w The program faculty contand in the lab, for examp Classroom – Patient Ca Moving to more and discussing to with base hospit biggest challeng Therefore, facul Two didactic con Profession and meet outcomes Lab Evaluation uses self an Many subjective asses		
2.2 Outcomes from Curricul	um Renewal	Key Outcomes from the Curriculum Renewal process from 2010-2011, 2011-2012 and 2012-2013:		
Review / discuss: • Key outcomes from the Cu	urriculum	From 2010/2011 • Continue to explore potential for increasing student applicant awareness of physical fitness. Discuss lift testing criteria at open house, include in incoming student packages and		

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Renewal processes of the years Progress to date in implem recommendations arising Curriculum Renewal Success of the changes in and the means by which the evaluated	nenting the from	However, provelome day The Sch to give stude prospective sonce accept faculty and unconsistency Summary of end of seme program so failed. Of the that they we recommend Formalizand CLT. RPP contained and course Ambular Moving this of placements.	s. This is also done at Welcome Days and open houses (Spring and fall). orgam continues to lose students to fitness as not all incoming students attend ys and open house. ool of CDH video marketing has included all PMD lifts to be posted to the website ents a better sense of what lifts involve. Explore videotaping with respect to ways students can practice individually in order to meet the minimum lift requirements ed to the program. All lifts are videotaped currently for signoffs and reviewed by insuccessful students. This has helped remove some appeals and also given in testing and appreciation for standards that are set. If Lift-testing Progression for 2012 and 2013 (located in appendix). At the easter one in 2012, 5 or 14% of PMD students failed to progress in the PMD lely due to lifting, & in 2013, at the end of semester one, 6 or 17% students e students that failed, 100% of these students were identified by week three ere unable to lift 70% (see statistics in appendix). This further supports the lation to add physical fitness requirements to program entry. The a proposed course outline for Research and Professional Practice (RPP) with ourse to include Canadian Health Care System content. This was completed revision continues annually during curriculum renewal. The Ride out and Observations FLPL076 (75 hours), Move to semester 3. Moved. Course to semester 3 has enabled the program to secure future student in highly competitive services. Students are also given placement preparation in this course.

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		Discussion regarding starting consolidation in back 7 weeks of Sem 3 to replace clinical experience to more accurately reflects what is currently happening in consolidation. Completed.		
		 Increase formal use of the professional portfolio in clinical and field courses. Ongoing. Some done in Communication which help students prepare for job market but needs further attention 2014 Rec: Meet with COMM for Paramedics faculty (Melanie Isaacs) to discuss specific PMD program needs (done during CBD 2014) 		
		•Preceptor μ	payment. Ongoing issue.	
		•Develop a prep course for the PMD professional examination. Some of this work done in CBD 2013 but course not completed. Currently the course needs to be completed in order to run in 2015/2016. 2014 Rec: Develop prep course for PMD professional exam during CBD 2015		
		Build on alumni support. Ongoing. Many of our grads are active in volunteering in the labs with structured scenarios to run for current student population. A lot of mentoring and tutoring done as well. One of the strengths of the program		
		Move Field prep course. Moved. The course is now taught in first half of Semester three. Members of the Program Advisory Committee are saying students are well prepared.		
		From 2011/2012 • Change Advanced Patient Skills ESRV 024 -2 hour lecture and 2 hour lab Changes		

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			gives the students practice in the application of advanced skills. A technician is ause lab classes can be up to 18 students for one faculty, with needles used, etc. ocedures)	
		 Move Health Care Concepts HLTH65. Move course to semester 1. Moved. 2014 Rec: to be moved during 2014 program review. 		
		 Communication for Paramedics COMM 36. Re-examine content to look at more applied pieces, Real interview practice, and using APA format. Somewhat addressed. Liaise with Communication staff for this piece 2014 Rec: Met with COMM for Paramedics faculty (Melanie Isaacs) to discuss specific PMD program needs (done during CBD 2014). Melanie also indicated that the Library Technicians have a documentation system in a drop-down menu that can be linked to each course. Program Faculty to follow-up. 		
		 From 2012/2013 Student attrition is very high in the program. Faculty feel this is due to not getting the best from the applicant pool. Recommendations to enhance the academic and physical preparedness of students (marketing and recruitment activities) – to ensure students are fully aware of the intellectual and physical demands of the program as well as a realistic perspective as to what they will actually be doing within the program. Discussions with the registrar's office to change criteria or weigh them differently to increase student's chances of success have not been successful to date (Carol, Mary, Registrar's office). 2014 Rec: Meet with Registrar's office to make changes to admission criteria to enhance Biology even more (see also high school v. PMD statistics in appendix) March 2013: Registrar's office has changed criteria very slightly to weigh U level biology (one of the 		

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		predictors for success in program) as 1.2 over C level biology. No other changes made as yet. GPA still used as the admission criteria, despite FDR research done in 2012 showed last 5 years no positive correlation of GPA with overall success in Sem 1 and 2 of program. • Looking to align program over the block development times with the NOCP (National Occupancy Competency Profile) for PCP in order to potentially align for accreditation (Mary, John, Colleen and faculty with CLT) No time allotted at this point 2014 Rec: align program for accreditation during CBD 2015 • Develop eLearning or technology enhanced curriculum best suited to PMD program (Mary, eLearning coach) This work is ongoing. Some movement in a few courses, e.g Simulation enhancement for lab courses. Use of D2L etc • Align Fleming's PMD program with more research initiatives (Mary and John) not done. Some connection with EMS Specialists in research to get educational material for this course. 2014 Rec: Align program with research initiatives. Deferred Actions for CR • Application process (weighing, change in requirements) to address attrition is being looked at by Program faculty and Dean but will not happen for September 2013 as registrar's office did not respond in time to make changes for 2013 admission. Attempt revision for 2014. Some success (minor)re weighting of U level Biology only. No other changes 2014 Rec: Revise program admission standards. • Program Standards change requested by PMD programs to MTCU. (2014). Pending-not formalized	

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2.3 Curriculum Sequencing and Alignment with Standards

Review / discuss:

- The Ontario College Credentials
 Framework and the extent to which the program aligns with the provincial standards.
- The program's current admission requirements and their suitability in relation to program rigour and student preparedness
- The extent to which course content, levels of learning, and assessment methodology are successfully sequenced and aligned between courses and across semesters

The curriculum within Fleming's PMD Program supports and directly aligns to the 11 program vocational learning outcomes established within the provincial program standard for the PMD Program, as well as the Essential Employability Skills Learning Outcomes and the General Education requirements specified for a College Diploma. The curriculum comprises four semesters of course work and a 360 hour Paramedic Consolidation.

Total instructional hours for the program = 1755 hours and within that, the block field placement comprises 360 hours. (Typical duration for an Ontario College Diploma is 4 semesters or 1200-1400 equivalent instructional hours.)

Knowledge, skill, and performance expectations of students in the program reflect requirements for successful performance in the Paramedic practice setting in accordance with the Ambulance Act.

The PMD program curriculum reflects performance expectations, knowledge and skills for practice with individuals, families, groups, organizations and communities.

The following are the minimum academic requirements for admission to the program: (Source: http://flemingcollege.ca/programs)

Ontario Secondary School Diploma (OSSD) with the majority of credits at the College (C), and Open (O) level, including:

- Two College (C) English courses (grade 11 or grade 12)
- Two different Grade 11 or Grade 12 College (C) Science courses (Biology, Chemistry or Physics) when (C) is the minimum course level for admission, (U) or (U/C) courses are also accepted. Recommended grade 11 College (C) Biology (although not required for admission, this course will help to prepare you for the program).

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		commencement of class considered on an individ Achievement Test. All ap	ents who do not possess an OSSD but who will be 19 years of age before the es) who can demonstrate potential for success in college studies, will be ual basis. These applicants will be required to write the Canadian Adult oplicants will be required to achieve course credit in the mandatory sciences ool or through Academic Upgrading programs.		
		 Additional Program Requirements: In addition to the above, all students must meet the following program requirements prior to the start of classes: You must possess a G class licence as you will be driving a vehicle early in first semester Current Standard First Aid Certificate, current Basic CPR Certificate (level C), Proof of Immunization. 			
		A police reference check (including vulnerable sector) must be completed during first semester. Please do not obtain prior to the start of classes because of the expiry date.			
		Students are advised to try to obtain their class F licence as soon as possible as an F licence is require for job applications in early fourth semester.			
		Students should also be advised that eligibility for employment is subject to the requirements of the Ambulance Act, which includes a valid Ontario class F licence, a criminal reference check, and physical fitness, as lifting is a major component of the job.			
		Current admission requirements are primarily GPA and English and 2 sciences. Data requested by program on student predictors of success show that for years 2008 to 2011, GPA alone is not a predictor of success in Semester 1 and 2 (semester's with greatest attrition). English and a U level biology were			

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		shown to be a predictor.	(see Appendix)	
		Additional information was Fleming.	as requested from FDR re: success in program from GHS-GAS options within	
		The registrar's office, in response to a request from the program, has weighted the U level biology of applicants in the high school pool at 1.2 for U level biology vs C or other level biology.		
		instituting other criteria fo	about weighing only the required courses (English and 2 sciences) as well as or this oversubscribed program, particularly in light of current strains on PMD ne future costs of paying for preceptorship.	
	Students are not coming in to the program physically prepared, despite Welcome days, and extension focus in admission package and Open House discussions. Faculty are looking for a physical fitness admission test that is defensible, and would accurately identify applicants at risk for failure due to fit A Queens University researcher has recently partnered with us (and others) to develop a fitness measurement tool that potentially could be used for admission.			
		Other interesting potential admission criteria include the Multiple Mini Interview (MMI). Research at another college is ongoing to see what the outcome of this screening tool would be and its application to other colleges across Ontario. (see Appendix 2.1)		
PMD program realigned in 2009 with the then new program standards which went the major impact from that document the support for the 210 lb basic lift requirent formally three times in the program and informally throughout second to fourth set the May 2013 and May 2014 meeting of the Heads of PMD for a requirement for			at document the support for the 210 lb basic lift requirement. This is tested e program and informally throughout second to fourth semester. Discussions at	

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		standard to reflect the rapid changes in the industry but this has not been scheduled or approved as yet by MTCU. Faculty, on a yearly basis, realign the curriculum to ensure appropriate flow for content between courses, between semesters, and to also ensure that content is reinforced multiple times during the curriculum. Curriculum renewal assists in this process formally. Fourth semester is a comprehensive review in preparation for the provincial exam and the field.		
2.4 a) Curriculum Map Review the Program Curriculum Map and discuss the extent to which there is alignment of vocational and course outcomes Review / discuss the distribution and progression of Vocational Learning Outcomes, Essential Employability Skills, and General Education themes across the curriculum.		vocational learning outco (EESLO's) on the update At the course level, the censure alignment and to VLO's and the EESLO's aligning course learning (2.2). The 2014 revised curricuto VLO's and EESLO's we Education requirements one General Education ecourse learning expectar	e PMD program faculty have documented how their courses link to the program omes (VLO's) and the Essential Employability Skills Learning Outcomes and curriculum map attached. ourse learning outcomes are being mapped against the assessment activities to verify that the course descriptions and learning outcomes are supporting the that have been identified and linked to the course. A more deliberate approach to outcomes and assessments to VLO's and EESLO's needs to occur (Appendix lum map for the PMD program reveals a relatively balanced alignment of courses with an appropriate progression throughout each semester. The General for the program are met through two mandatory General Education courses and elective option. tions and assignment guidelines generally reflect an incremental increase in nice requirements over the four academic semesters of course delivery.	
2.4 b) Curriculum Map		Attached (Appendix 2.3)		

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	Submit an updated curriculum map as an attachment to the Program Review Report				
	2.5 Delivery Mode		Curriculum in the PMD Ontario College Diploma program is primarily delivered in a lecture, lab and seminar format in semester one through four.		
•	 Review / discuss: The primary modes used to deliver curriculum such as lecture, seminar, lab, applied project, field camp and web based courses The rationale for, and appropriateness of, these delivery modes in relation to program learning outcomes The degree and depth to which the program is providing work integrated learning experiences 		assignment drop boxes at Course learning outcome skills. Applied and experioncepts related to the firm the block field placement student in an experiential Feedback solicited over that we can secure field	program also make use of the LMS course discussion boards, grade books and and posting of course notes. The seriflect integration of theory and practice, connecting knowledge, values and iential learning is reinforced through labs and seminars where theoretical eld of practice are demonstrated and reinforced. The which occurs in the 3rd and 4th semesters was designed to immerse the land cumulative applied learning opportunity. This is a 420 hour preceptorship, the past 5 years confirms the need to start the preceptorship in 3rd semester so placements for the students. The intensive block field placement enables emonstrate and apply concepts and skills learned throughout the program.	
•	The degree and depth to value learning experiences are extended the use of educational techniques.	enhanced by	Feedback from Advisory and Base hospitals: Positive feedback was received on our student success with testing. Services would like to see an increased focus on driving skills and would also like all students to be certified by the base hospital. The fee is between \$350 and \$400 per student but is not a pre-requisite with all services yet. In many instances, students have moved easily from their field placement experience into entry-level		

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		career positions within the same agency where they completed their field placement. Learning experiences in the PMD program include: case studies, reflections (journals), oral presentations, intervention plans, debates, discussions, literature review, research plans, essays, portfolios, mock placement calls/interviews, enactments, and client engagement in hospital settings, and scenario practice in as real a situation as possible. Courses include group work and group projects, group facilitation, case assessment and treatment plan, in-class activities and practice, peer feedback and evaluation, volunteering, as well as guest speakers. E-technology learning experiences within the PMD program are currently enhanced by the use of the following activities in some courses: blogs/discussion boards, twitter, email, drop boxes, power point, YouTube clips, LMS grade forms, video and audio material and equipment, video postings, Google docs, Facebook, course notes on the LMS, use of the testing centre, and close captioning. While core program courses are web-enhanced; in future, more extensive use and integration of D2L (Desire to Learn – Fleming College's learning management system) will occur - including course notes, quizzes, assignments, discussions, surveys and supplemental course resources. It is also recommended that the PMD program consider the development of several online learning modules to support students who are transferring into the program and are requiring access to core and foundational learning concepts to better position them for entry into higher level courses that link to and	
2.6 Assessment and Evaluate Review / discuss:	tion Methods	build upon these concepts and theories. Structured simulation (formative) is a key element to learning & assessment within the PMD program. Currently the program relies on single summative testing (one final scenario) for practical courses. In 2015 the program will move to multiple simulations testing in an OSCE (Objective summative cumulative evaluation) style format incorporating the Global Rating Scale (GRS) and multi-raters. Lab manuals and	

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•	The program approach to learning assessment			sments throughout the semester should also reflect this type of assessment so iliar with this type of scoring early on in the program.

- The balance and frequency of assessment types across the curriculum and their appropriateness to course / vocational outcomes
- Reflect and comment upon the variety of methods used to demonstrate outcomes. Are learner centered principles part of the assessment approaches?

As evidenced in the PMD Program Assessment Cumulative chart, as well as the PMD Weekly Assessment charts for each semester, there is a strong and balanced focus across all semesters on applied learning assignments that integrate theory and practice. The intention is for learning assessments within individual courses to align and build upon each other across the semesters. The program review process has revealed gaps as well as duplications in some of the course content and assessments which will be addressed in the action plans emerging.

Assessment categories/methods as well as the frequency of each across semesters is reflected in the following list: (Note: The accrued numbers in each category have been extracted from the assessment section for each course):

See Assessment Schedule Chart Appendix 2.4

While this chart reflects a significant volume of assignment requirements, it also positively reflects a focus on incremental progression of applied learning approaches and integration of theory and practice.

During this review process, tracking and strengthening of alignment between course assessment activities, course learning outcomes, and VLO statements is occurring.

Generally, there is an incremental building of complexity and performance expectations of students as they progress through each semester of academic study. As concepts are introduced and assessment methods are applied, common approaches to evaluative tools are being built in. (example- common approach to the design and application of enactment feedback sheets. As well, various learning activities

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		and assessment methodologies such as role playing, enactments, interviews, exchanging feedback, etc. involve specific protocols. These protocols will be introduced in the courses where the methodology is being used. A student handbook is being developed which will be distributed to students as they enter the program. It will include these protocols and other important resources that support learning within the PMD program and field of practice.		
		It is evident from the volume of assignments that there are various pressure points for both students and faculty in the frequency of assignments due within any given semester. (Appendix 2.4)		
		collaboratively by faculty discussions as to how to collaborating (i.e. one as	stinct in that they are not linked to other courses or developed and/or marked within the program. Within the program review process, there have been potentially reduce the number of overall required assignments by faculty signment serving to meet assessment requirements for two courses) as well as ce the volume of assignments due in any given week.	
		Learner Centered Teaching and Assessment Principles		
		Extracted from: Learner-Centered Teaching: Five Key Changes to Practice by M. Weimer, 2002, San Francisco: Jossey-Bass. Copyright 2002 by John Wiley & Sons.		
		organizing content, gene solving problems, constru	s do learning tasks less. Teachers must stop always doing the learning tasks of rating examples, asking and answering questions, summarizing discussion, ucting diagrams, and others.	
		PRINCIPLE 2: Teachers	do less telling; students do more discovering. Teachers should stop telling	

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		students everything they need to know.	need to know and begin to permit students to find out for themselves what they	
		PRINCIPLE 3: Teachers do more design work. With student-centered learning the instructional design functions of the teacher are more important because learning activities become the vehicles by which learning occurs.		
		PRINCIPLE 4: Teachers do more modeling. Teachers must assume the role of master learner and demonstrate for students how expert learners approach learning tasks.		
		•PRINCIPLE 5: Teachers do more to get students learning from and with each other. Teachers often underestimate the potential of students working together collaboratively and cooperatively on learning tasks.		
		•PRINCIPLE 6: Teachers work to create climates for learning. With student-centered learning teachers are much more involved in designing and implementing activities that create conditions conducive to learning.		
		•PRINCIPLE 7: Teachers do more with feedback. Evaluation and assessment are used to maximize learning through the constructive delivery of feedback to students.		
		Within the PMD program, there are creative methods that incorporate many of the learning principle themes. For example, •Case/Problem based learning in theory classes where there can be many correct answers, peer evaluated and strong connections to critical thinking		

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		•Scenarios in the Lab are as close to real practice as possible. Using current weather conditions, nursing home lab, patients [sometimes from other programs ie massage] to incorporate treatment and communication in real time and environment •Extrication Day – with Fire department working collaboratively in real settings with vehicles and the actual equipment and challenges.		
Review / discuss: Program strategies that sudiversity and promote und diversity, including program climate, curriculum contentapproaches to teaching an	ipport student erstanding of m culture / t and	hearing impairment becand Act). The physical demands of standards of practice (e.g. All faculty have completed. The program does not have throughout all semesters all individuals equally and Faculty training opportunity.	ities through Diversity and Positive Space workshops offered by Debbie Harrison ge has developed an AODA implementation plan that will support diversity and	

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2.8 Learning Pathways

Review / discuss:

 Recent or anticipated initiatives that promote student pathways including high school articulations, dual credit, program laddering, dual diplomas, and university transfer, articulations, and partnerships Fleming PMD Graduates can apply to the Advanced Care Paramedic Program Fleming PMD Graduates can apply to the University of Toronto for a Bachelor of Science in

Paramedicine.

Fleming PMD Graduates can apply to the University of Ontario Institute of Technology (UOIT) for credit towards a Bachelor of Allied Health.

Through joint programs and transfer agreements with the University of New Brunswick and the University of Ontario Institute of Technology (UOIT), PMD graduates can apply the learning acquired at Fleming College to earn a related degree in less time and at less cost.

Anatomy and Physiology I and II have been revised and are now the same courses taught to all students in the School of Community Development and Health. Thus, if students are unsuccessful in PMD, they can migrate more easily into another program within the school.

There are 8 seats held in the program for students entering from the School of General Arts & Science-GHS one-year certificate. Since students in this program exhibit a greater success rate when they enter the PMD program, it has been suggested to increase this number to 16 or 18 and market this option. This idea may bring more students to Fleming to the GHS or Pre-Health certificates. This may also help deal with the attrition rate in the program.

Fleming college also reserves 2 seats in the Paramedic program for Pre-service Firefighter students.

Fleming PMD graduates are eligible for a variety of exemptions from university undergraduate programs.

Although not an official written agreement, sponsoring agencies like Second Career and WSIB do encourage people to apply to the Fleming PMD program.

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		The PMD program also supports students that are sponsored by Band Councils.		
3.0 Student and Graduate Satisfaction	•	Summary of Key Findings		
3.1 Formal Measures of Stud Graduate Satisfaction	dent and / or	Key Performance Indicat	or results for the program with a focus on numbers 4, 8, 9 and 11.	
Review / discuss:		KPI 4 – Graduate Satisfaction – Generic and Vocational Learning Outcomes		
Key Performance Indicator results for the program with a focus on #s 4, 8, 9, and 11		2013 Program 97% System 91% 2012 Program 96% System 90% 2011 Program 94% System 87% 2010 Program 82% System 91%		
Program status and positioning in relation to the KPIs of other programs of a similar type (where applicable)		2009 Program 78% System 91% Five Year Average: Program 90% System 90% College 87% The five year average for the graduate Satisfaction with Generic and Vocational		
Feedback and summary report from Learning Support Services (LSS)			Learning Outcomes is at the system average and above the college average. However, the program shows a significant increase from 2009 to 2013.	

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summary		o KPI 8 –	Student Satisfaction – Learning Experience
review of course evaluatio	Themes or issues emerging from a review of course evaluation summaries (Chair/Dean response here)		2013 Program 98% System 90% 2012 Program 91% System 90% 2011 Program 86% System 91% 2010 Program 91% System 90% 2009 Program 97% System 92% Five Year Average: Program 92% System 91% College 82% The five year average for the Student Satisfaction with the Learning Experience overall is slightly higher than the system average and higher than the college average. The program showed a downward trend from 2009 to 2011, but is now trending upward and above the system in 2012 and 2013.
		o KPI 9 –	Student Satisfaction – Teachers
			2013 Program 94% System 84% 2012 Program 82% System 85% 2011 Program 69% System 84% 2010 Program 84% System 84% 2009 Program 88% System 85% Five Year Average: Program 83% System 85% College 76% The five year average for the Student Satisfaction with Teachers overall is lower than the system and higher than the college. However, the program shows a

Program Coordinator:	C Rafton	School:	CD and H
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			significant upward trend from 2011 to 2013.
		o KPI 11 -	- Graduate Satisfaction – Program
			2013 Program 89% System 86% 2012 Program 97% System 83% 2011 Program 100% System 83% 2010 Program 90% System 87% 2009 Program 89% System 85% Five Year Average: Program 93% System 85% College 83% The five year average for the Graduate Satisfaction with the Program overall is higher than the system and the college. However, the program shows a downward trend from 2011 to 2013.
		• Feedback and sum Fall 2013 Learning Strategies – 1 Anatomy & Physio I – 6 Patient Care – 5 Patient Care III – 1 Adv. Paramedic Skills – Jan 2014	mary report from Learning Support Services (LSS) summary 1

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		Anatomy and Physio II –	1	
		There was one question asking about the College facilities (not sure what question). The results were low. The Coordinator discussed with student groups and got feedback stating the students were not happy with the lack of toilets in the labs and the limited access to library & LSS resources after hours.		
		82% grads working. (MCU 86.5%) 54% in related field. Grad satisfaction 91% (MCU 76.2%)		
		 Themes or issues emerging from a review of course evaluation summaries The course evaluations were reviewed and found that students really appreciated the materials the were taught and that the courses were well structured and helped them learn, the outcomes were clear and that assessments and evaluations were appropriately met. The students commented that the HLTH 65 class was repetitive to them and that by sem 3 they already knew about most of the content. They also requested more labs, less lectures. They also asked for more up-to-date equipment and techniques in the lab. The students also would like more testing and scenarios 		
Student focus groups, Student Advisor Observations/Reports. Formal or Information 3.2 Other Measures of Student and Graduate Satisfaction Student focus groups, Student Advisor Observations/Reports. Formal or Information Discussions and Debriefing session comments				
• "Everyone seems really keen on the idea of having our final scenarios broken up into tests as opposed to one big final. This seems to help take the stress out of it. The am				
Student focus groups (mai component)	ndatory	we're able to practice and use the lab seems to be a very good thing for our program. Many of us are grateful towards the freedom we're allowed when practicing outside of class time hours, and many believe it to be a good direction. Another point that has come up once or twice is that while I know we cover a lot of lifting in our fitness program, some people think it would be of benefit if		
Student Advisor observation	ons / reports	there was some	sort of check-up or review half way to make sure peoples' techniques are correct,	

Program Coordinator:	C Rafton	School:	CD and H
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Formal or informal discussions with students and graduates such as class councils, class representatives, individuals or delegations Debriefing sessions following a field placement, clinical placement, or practicum		mainly of the tim program it would Want more cons training for staff Also requested: Inter Port Incre Dec: Rem Mov Com There is also firs Committee	inal lifting test. Overall the vast majority of students are greatly appreciative e and consideration all the staff have shown us. If there's any benefit to this be the opportunity to learn from you guys." istency around faculty using same metrics for evaluations. Suggest getting a that come in less frequently before lab testing viewing skills workshop folio building ease in lab helpers rease in student/teacher ratio in lab hodel: Communications For PMD – more PMD specific e Health Concepts to Sem 1 munications for PMD doesn't have PMD specific information in it and second year student representation on the PMD Program Advisory aintain their own Facebook page and feed concerns to faculty
4.0 Employment Trends		Summary of Key Findir	ngs
4.1 Employment Review / discuss:		73% and Flemin	nent rate is 83% with 66% working in related employment. CDH school total is g College total is 53% working in related field e program comparison 87% employment vs 83%

Program Coordinator:	C Rafton	School:	CD and H
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Program Name:	Paramedic		
the last few years, including those of students employed in the field, in a related field, outside the field, or unemployed, and any emerging • Emerging pattern o some se after the unemployed, and any emerging		 Emerging pattern some se after the Service 	rveyed during the above time period] are 100% satisfied as noted: Prvices are not hiring A-EMCA-pending which means our grads cannot apply until y have successfully completed their exam hiring times are changing with many not starting the hiring process until the Fall of the following year.

- Student preparedness for entry-level positions
- Emergent employment trends such as new types of positions, changing job market, regional distinctions, changing employer profile, or emerging skill shortages

Anecdotally [2013 grad example] there were 15 graduates of the program, by Winter 2014 all but one were employed, and several graduates have more than one part-time job.

- 93% of grads feel they are prepared for entry-level positions, and graduates are very satisfied with their education. School 89%, Fleming 80% and provincial 79%
- Recent graduates are employed throughout Ontario, Nova Scotia, Alberta, with Land and Air ambulance, and many graduates continue their level of training to an ACP.

Employment trends

- The Ontario Base hospital group are starting to implement a core assessment process (Global Rating Scale using Multiple Raters), thus it is important to incorporate this assessment format in the program to prepare students for their initial certification process once they graduate.
- Industry is changing, more transfer companies are being used for patient transfer [low acuity] and grads are using this as a stepping stone to a fulltime position.
- Many venues like Mosport, Fairs, Sporting events etc are supplying first response. Some of these positions are paid and some are volunteer positions.

Comment/feedback from employers [PAC], preceptors, clinical placements around soft

Program Coordinator:	C Rafton	School:	CD and H		
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Program Name:	Paramedic	C			
		skills/communication is that this is an area for improvement. Grads are academically solid but struggle with communication and driving. [from discussion with Chief Charbonneau – rep for Ontario Association of Paramedic Chiefs [OAPC]			
 4.2 Other Graduate Destinations Review / discuss: Alternative graduate destinations such as further education, international opportunities, volunteer service, or other experiences 		university, to post-diplom Paramedic graduates ha	at students increasingly express interest in continuing their education to a opportunities, to international opportunities, to volunteer or other experiences. ve: aramedic education as advanced care paramedics of to complete bridging programs and acquire university degrees such as the nce of Paramedicine at the University of Toronto. sion groups in International destinations such as Honduras, with Global Medic in transfer or non-emergency services ova Scotia and Alberta Oil fields as medics field and pursued other allied health programs (e.g respiratory therapist, PSW)		
5.0 Strategic Positioning		Summary of Key Findings			
 5.1 College Alignment Review / discuss: Program alignment with control priorities such as vision, movalues, strategic plan, acan framework, and the education 	nission, demic	Fleming Vision: Students succeeding through personalized learning. Innovation and achievement powered by people. PMD Vision: Fleming Mission: Fleming champions personal and career success through applied learning. We contribute to community success and environmental sustainability through programs, services and applied research.			

	Program Coordinator:	C Rafton	School:	CD and H			
	Program Code: MTCU Code:		Date Completed:	May – October 2014			
	Program Name:	Paramedic					
	mandate, and / or academ the School	nic priorities of	PMD Mission:				
•	Opportunities for new prograinitiatives based on Progra or community strengths ar	am, School,	Fleming Values : The students learning experience is our first priority. We value people and community. Fleming is committed to a sustainable future. We are inspired by Sir Sandford Fleming to innovate with vision and implement excellence.				
			PMD Values:				
			Recom 2014: Develop College Strategic Priori	PMD mission, vision & values statements ties:			
			1) Achieving Exce	llence in Student Learning:			
			to immerse the s 420 hour precep demonstrate and	block field placement which occurs in the 3rd and 4th semesters was designed tudent in an experiential and cumulative applied learning opportunity. This is a torship. The intensive block field placement enables students to effectively apply concepts and skills learned throughout the program. Students obtain experience all facets of the working environment.			
			 Applied learning opportunities are provided in and outside the classroom. Examples include block placement, case studies, reflections (journals), oral presentations, intervention plans, debates, discussions, literature review, research plans, essays, portfolios, mock placement calls/interviews enactments, and client engagement in hospital settings, and scenario practice in as real a situation as possible. Courses include group work and group projects, group facilitation, case assessment and treatment plan, in-class activities and practice, peer feedback and evaluation, 				

Program Coordinator:	C Rafton	School:	CD and H	
Program Code: MTCU Code:		Date Completed:	May - October 2014	
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		volunteering, as	well as guest speakers.	
		 Annual advisory committee meetings. Members include a cross-section of paramedic agencies from the Peterborough and City of Kawartha counties, Durham Region, and first and second year PMD students and alumnae. See PAC meeting minutes with ideas from stakeholders. Current program and curriculum review occurring with the action plan to be implemented fully for Fall of 2015. 		
			artial Load Faculty with previous and current expertise in the paramedic field e program of current trends, and benefits current students.	
		Opportunities for	national and international placements	
			tunities in courses which make the program more customer friendly, accessible, udents to using social media effectively.	
		Collaboration with Student Services to enhance student experience i.e. use of Career Service staff to take part in mock placement interviews and resume writing in concert with Communications faculty.		
		2) Providing Superior Services and Facilities		
		Encourage the use of IT - IT provides technical support and education to both faculty and students as needed ie. Learning Commons, digital resources.		
		Library services	- PMD students use the library extensively. They request that the library be	

Program Coordinator:	C Rafton	School:	CD and H
Program Code: MTCU Code:		Date Completed:	May – October 2014
Program Name:	Paramedic		
		address students support students 3) Leading in Sustaina • Ecological: PMD • Social: Sustaina have community 4) Growing with Positi • The PMD prograinitiatives like Seprogram. 5) Building Community • The faculty view Therefore, contin	se of Learning Support and Counseling Services i.e. have counselors come to a regarding available services; regular contact with LSS staff to organize how to a that are struggling. bility program adopted the Fleming College green policy (Did they???). ability concepts are integral to several assignments and course topics. Students field placement opportunities. ve Results Im accepts students that are involved in Worker's Compensation, retraining econd Career and Employment Insurance, and the Ontario Disability Support

Program Coordinator:	C Rafton	School:	CD and H	
Program Code: MTCU Code:		Date Completed:	May - October 2014	
Program Name:	Paramedic			
		requirements Some faculty teach externally (E.g. Advanced Cardiac Life Support) Any faculty not working in the field teach clinical courses to facilitate maintaining clinical skills and knowledge Faculty are involved in Conferences (e.g SimOne, Ontario Paramedic Association (OPA), Critical Care, SPEC, TemaConter) Faculty are on the Medical Advisory Committee for the Ontario Base Hospital Advisory Group Faculty maintain membership in the Society of Pre-hospital Educators of Canada (SPEC), (OPA) for updates in industry etc. Faculty involved extensively with services for field placement, community projects etc. Program Advisory Committee meets annually Fleming program graduates often volunteer and help out in labs Lab instructors are working paramedics and bringing real world experience to the lab. Involvement in Mass CPR training, Polar plunge (Rotary Event), Battle in the Saddle (Cancer Fundraising) Faculty spend time at local high schools and elementary School (career days) to promote paramedicine as a career choice.		
		6) Developing the Fleming Working Environment		
		 The faculty meet informally on a regular basis. These meetings include part-time and partial load faculty who inform the program on the current trends in paramedicine. Faculty have actively used the Know-it-All system with the School of Community Development and Health; faculty share resources and training opportunities with each other regularly; and 		

Program Coordinator:	C Rafton	School:	CD and H	
Program Code: MTCU Code:		Date Completed:	May - October 2014	
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		faculty collabora	te with other programs regarding curriculum development and joint teaching.	
		 Faculty will engage in discussing a mission and vision/value statements for the program (Recom for CBD 2015), and there was active participation in the completion of the School's integrated plan. 		
			e the importance of faculty evaluations, course evaluations, KPI results and arious sources of information.	
		Opportunities for new palliances	program initiatives based on Program, School, or community strengths and	
		The paramedic Program fosters student success through personalized, learner-centered approaches in the lab and clinical settings. For example: Students create their own learning goals and learning objectives for clinical settings according to course level learning outcomes. Demonstrated teaching and learning philosophy is "open door." All faculty are available to students for questions and support.		
		The program champions personal and career success through applied learning. The program has a variety of lab, clinical, consolidation and placements that provide rich applied opportunities that prepare students for the profession. The KPI-grad satisfaction rate for the program is 97%.		
		The Fleming Paramedic program is highly visible in the local media through events such as extrication day, working with local fire services and Paramedic Week with local paramedics at the local mall which all contribute to community awareness and program sustainability.		

Program Coordinator: C I	Rafton	School:	CD and H	
Program Code: PMI MTCU Code: 516		ate Completed:	May – October 2014	
Program Name: Para	amedic			
		PMD students work with MST (Massage Therapy) students to create pharmacological scenarios where medics attend to simulated patients.		
 5.2 Competitor Programs Review / discuss: Key parallels and differences be this program and those of its cle competitors, where applicable 'Value-added' program distinction their attractiveness to prospection students 	Loyalist etween osest ions and	t is a part time pro Domestic Tuition Consumables Fe Books, Supplies Loyalist places s costs Applicants must Assessment (CF Transfer agreem Public Safety an Bachelor of Heal	a: \$6,188 (Year One) \$3,418 (Year Two) ee: \$850 and Uniforms: \$1,500 tudents in same region so incurs same preceptor costing issues but students pay achieve a "fair" rating on the Canadian Physical Activity, Fitness and Leisure	

Program Coordinator:	C Rafton	School:	CD and H
Program Code: MTCU Code:		Date Completed:	May - October 2014
Program Name:	Paramedic		
		Durham College- Full time Domestic Tuition Consumables Fee Books, Supplies Durham also plate but offloads to stee Transfer agreem Administration (Consumables Tee Thompson River While our program does attractiveness to prospect environment is within clotatmosphere supportive a social obligations and ope Value Added PM Access to dedicated laber Extrication Day Certificat International Trauma Life Defensive Driving certification	a: \$ 7,723 (Year One and two) be: \$ \$1,024 and Uniforms: n/a ces students in some of the same region so incurs same preceptor costing issues
6.0 Enrolment Trends		Summary of Key Findir	ngs

Program Coordinator:	C Rafton	School:	CD and H				
Program Code: MTCU Code:		Date Completed:	May – October 2014				
Program Name:	Paramedic						
 6.1 Demand for the Program Review / discuss: Patterns in the number of applicants, qualified applicants over the Changes, if any, in the studemographic profile, inclumaturity, diversity, prior knet technological literacy, wor and expectations Impact, if any, of this chan profile on program curricular 	program cants, and past 6 years dent ding level of nowledge, k experience,	 appendix). This further supports the recommendation to add physical fitness requirements to program entry. Some students do not succeed because their literacy skills, basic math skills and science skills are weak. The PMD program would like to approach LSS to design and implement a basic math workshop for students failing to meet the basic criteria (as they do in Communications and Computer). The PMD Program will test students. It is also recommended to increase the weighting of the biology course for applicants to the program. Data requested by program on 					
Patterns of student success and retention on a semester by semester basis over the last six years		Retention from 2009 – 20 average retention for the Sem 1 – 2009 55	following semesters	intakes only, Source: FDR) indicates an			

	Program Coordinator:	C Rafton	School:	CD and H			
	Program Code: MTCU Code:		Date Completed:	May – October 2	2014		
	Program Name:	Paramedic					
•	The effectiveness of any s adopted to improve studer and retention		2011 55% 76% 88% 2012 63% 83% 87% 2013 63% Two major reasons for student attrition are 1) student is unable to meet physical abilities in lifting (i.e roughly 6out of 35 or 17% of semester one students Fall 2013, and 2) academic rigor. Successful applicants still do not read preprogram package which outlines lifting requirements or appreciate time and effort required to achieve success in physical lifting once in the program (It has been suggested in the past some manner of physical prescreening.) FDR Data suggested U level biology and English as positive predictors for success, yet GPA only is still used as screening applicants, (with exception of 1.2 for U level Biology in F2014 –Outcome of this cohort TBA). Program is still pursuing more rigorous application criteria for our oversubscribed program The program implemented a mentorship initiative for semester one students in 2012. Second year students are partnered with first year students at the semester one orientation session. The first and second year students then spend time together to ensure that incoming students know the resources, can ask questions in an unrestrictive forum with fellow students and understand program requirements. This is particularly helpful for the younger students who are transitioning to the college environment. Success of this program is still under review and looks positive so far. Relationally, first and second year students are				
7.	0 External Relations		Summary of Key Findir	ngs			
1	1 Alumnae eview / discuss:		PMD graduates have been consistently represented and been very active members of the Program Advisory Committee over the past five years.				

Program Coordinator:	C Rafton	School:	CD and H		
Program Code: MTCU Code:		Date Completed:	May – October 2014		
Program Name:	Paramedic				
 The type and range of aluninvolvement in the program Current and future strateg alumnae in the program 	gram ies to engage	 Alumni are involved with mentoring students through classroom scenarios and presentations, simulations, guest speakers, mock interviews, lab sessions and testing. They are given prescreened scenarios with set outcomes for consistency. Want more formalized guidelines for alumni for new Global Rating scale and other testing modalities. (e.g. Use of video library for alumni helpers). Alumni who are working in the field, provide supervision to our students during their block placements, and are also placement peers. Alumni continue their academics and complete degrees in related fields and move on as managers in a variety of agencies. We also have alumni who continue their academics and return to the program to teach. Faculty continue to encourage graduates to return to help in the labs post-graduation. A celebration of Fleming's PMD program 10th year anniversary is set to take place in Sept 2014 at the college. 			
 7.2 Community Relations Review / discuss: Significant partnerships, reconnections, or offers of sthe community that help to program and the student of the student of the community staff, and student in volunteer projects and experience. 	upport from o enrich the experience involvement	 Paramedic Program Faculty Award: presented to a graduating student of the PMD program for outstanding academic achievement Paramedic Program Faculty Award: presented to a graduating student of the PMD program for outstanding practical achievement in both the Paramedic lab and field testing OPSEU Award: presented to a graduating student of the emergency services program who has demonstrated commitment and motivation to the program as exemplified by both personal and academic goals Amanda Finch Award through Ontario Paramedic Association (OPA) PMD Program Coordinator participates on the Heads of Paramedic Committee One Faculty participates on Provincial Medical Advisory Committee One Faculty participates on National Occupational Competency Profile –Critical Care Workgroup OPA annual conference is attended by students, and faculty have presented at the conference 			

Program Coordinator:	C Rafton	School:	CD and H
Program Code: MTCU Code:		Date Completed: May – October 2014	
Program Name:	Paramedic		
 Contributions to the not fo such as committee or boa program-associated facult Community recognition in student bursaries, awards scholarships 	rd service by y and staff the form of	 (2010,2012,2014) Faculty conduct school visits to Rhema, Crestwood and St Peters Secondary Schools for Career Day. PMD graduates volunteer in current PMD labs Mary Osinga (fulltime faculty) is the past president of the Ontario Paramedic Association Students regularly participate in spring disaster scenarios Participated with Peterborough EMS in CPR Blitz (2012) and Paramedic Week Mall activities 2013/2014 Participated in Durham Base Hospital Survivor Day (2014) Students and faculty do a variety of fundraising (Pedal for Hope, Polar Plunge and Dress down days for an injured paramedic) Part Time faculty (B. Cranley) very active in Fire Department medical training and community work Part time/Partial Load faculty and PMD students volunteer at the National Skills Competition in Durham. Students volunteer for a variety of EMS Research initiatives at Dalhousie in Nova Scotia, as well at Queens University and the University of Toronto. 	
 7.3 Program Advisory Common Review / discuss: The distribution of Common membership by constituen and / or region 	ttee	 The Paramedic Program Advisory Committee has a wide and diverse membership which represents a cross section of the community. Distribution of the committee membership includes representation from ambulance services, the regional base hospital, the Ministry of Health, and Fleming College PMD program graduates, students, faculty and administration. We do not at present have representatives from the First Nations communities. The committee meets once per year. Generally this PAC is very well attended by the members (or their delegates) with lively discussion of topics of mutual interest. 	

Program Coordinator:	C Rafton	School:	CD and H	
Program Code: MTCU Code:		Date Completed:	May – October 2014	
Program Name:	Paramedic			
the frequency of meetings members' level of participal engagement, and turnove The extent to which Commoperations are aligned with College Advisory Committee.	e extent to which Committee Frations are aligned with the Fleming Flege Advisory Committee Fentation Manual and Advisory		operations are directly aligned with the Fleming College Advisory Committee	
8.0 Program Resources		Summary of Key Findings		
8.1 Human Resources Review / discuss: The number and distribution of all faculty, technicians, and technologists associated with the program including full-time, part-time, sessional, and cross-appointments Profile of the Dean, faculty, and staff associated with the program including cumulative credentials, scholarship, work-related and teaching experience,		School Operational Liais The program is supporte adequate support for the There is a vast amount of faculty. Three of the faculty mem	gram is supported by a Dean, Chair and Operations Leader. There is also a on, a placement facilitator and NARS SOL. d by a Dean, Chair, Operations Leader and one School Liaison Officer. There is administrative leadership of the program. If experience and engagement in the current fulltime, partial load and part-time abers have recently won National Awards of Lifetime Achievement as well one onter at local and provincial conferences. The current staffing levels are adequate well.	

Program Coordinator	C Rafton	School:	CD and H
Program Code MTCU Code		Date Completed:	May – October 2014
Program Name	Paramedic		
 Significant faculty or staff accomplishments such a recognition and awards, of credentials, and appoi Contributions to the profecommunity or industry by associated faculty and st board / committee service and presentations / publi Current staffing levels for in relation to program numbers, curriculum, deliand areas of specialization generalization Hiring priorities over the based on the above Current professional deverenewal plans in relation student needs 	s professional achievement intments essional programaff including e, research, cations the program every modes on /		

Program Coordinator:	C Rafton	School:	CD and H
Program Code: MTCU Code:		Date Completed:	May - October 2014
Program Name:	Paramedic		

8.2 Physical Resources

Review / discuss:

- Program costing information
- Scope of current program resources such as laboratory equipment, software, library holdings, or tools essential to or which enhance program delivery or student learning
- The adequacy of above resources in the context of program outcomes, program currency, and student numbers
- Program specific external revenue such as sponsorships, grants, donations or gifts-in-kind
- Other externally generated revenues, if applicable

Program Costing

The contribution to overhead for the PMD program was 20% (2010-2011), 5.9% (2012-2013) and 17.7% (2013-2014). This does not meet the College's acceptable threshold for Contribution to overhead of 35%. This drop in CTO reflects academic years where there were less than 20 students in 3rd and 4th semester.

The major risk to CTO is the new cost of preceptorship that is being added to the program.

The classroom is a portable and the students must come into the main building to use the washroom, or stand outside when waiting to enter the lab for testing.

Resources are costly to maintain:

- Lifepak 12 monitor/defib
- Zoll monitor/defib
- mannequins high tech simulation
- ambulance older and with multi users wears more frequently

Gifts

- City of Kawartha Lakes has donated an ambulance for September 2014. Newer vehicle should help with some of the current maintenance fees on the older vehicle.
- Will remove new tires just purchased for current college ambulance
 Consider where to keep current vehicle would be nice to use for loading and scenario practice ideal when indoor site is ready
- There are adequate library and software holdings for the program. However, the students feel that the library hours need to be extended.

File Program Review report in: S:\shared data\CLT\School Name\Program Name

Attach copies of existing and revised bench marks, Attach an updated Program Curriculum Map

Program Review Action Plan	Responsibility	Timeframe
Section 1		
Preceptor payment and training is the program's most pressing challenge at this time. Continued work with preceptor working group is required to outline operating principles regarding payment for preceptors and base hospital fees. The creation and delivery of preceptor training will also be completed.	Dean, Chair, Operations Leader and faculty, Life-long learning lead.	August 2014 and on going
Incorporate the Global Rating Scale and multi-rater evaluations throughout all four semesters. Rater tester training is required for this to occur.	Faculty	Fall 2014
A focused plan to increase course content relating to research and evidence based decision-making will be created and implemented into the curriculum.	Faculty	Spring 2015
PCP Autonomous IV starts (an Ontario Base Hospital Group acknowledged education component) is increasing in frequency in the province, therefore, there are greater potential employment opportunity for graduates with this skill. A cost/ benefit analysis of the incorporation of this skill into curriculum must be completed.	Faculty/PAC	Spring 2015 PAC
An investigation will be completed surrounding the benefits and challenges of becoming a member of Ontario Paramedic Association and the Paramedic Association of Canada. A decision will be made whether to recommend this addition to the program budget for 2015/2016.	Colleen Rafton	Fall 2014
The program will be aligned to the outcomes and objectives of National Occupational Competency Profiles for PCP.	Faculty	Spring 2015
The program will continue to incorporate new standards including new BLS and ALS Patient Care Standards.	Faculty	On going
Further collaboration with local regional simulation center at Trent, SimOne, and Learning Space will occur to create and organize simulation scenarios such as labour and delivery scenarios.	Carol/faculty	On going
An investigation of the risks and benefits of the inclusion of a volunteer	Mary Osinga	Fall 2014

or service learning activities in the curriculum will be completed.		
The program will develop an eLearning plan.	Chair, Faculty and CLT	Winter 2015
Section 2		
Communications: General Education course cannot capture discipline specific communication needs of PMD. • PMD written documentation	Communications faculty	Discussed in CBD 2014 (some action done already)
(coding, data collection, medical terminology)Radio communication/radio operator license		
 However, Communications for Paramedics course will incorporate incident reports. 		
Remove Human Growth and Development (General Education mandatory) and replace with Abnormal Psychology (Blended) to support the increased requirement for mental health knowledge and to add an etechnology enhanced course.	Molly and Colleen (at grid verification time)	Will not be effective until new intake of 2016
Analyse data from Fleming Data Research relating to Semester 1 success rates for PMD students from i) High school only ii) GHS grads	Investigation: Monique Gatt	Aug 2014
iii) University/Diploma. A recommendation regarding Admission criteria will be created for presentation to Registrar. See section 6	Analysis: Faculty, Chair and Dean	Winter 2015
recommendation for potential specific recommendation.	Present Recommendation: Dean	Winter 2015
Move HLTH65 Health Care Concepts from Semester 3 to Semester 1.	Molly and Colleen (at grid verification time)	Will not be effective until new intake of 2016
Change Name of HLTH 246 to Research Profession and Practise. Course will remain in Semester Three.	Molly and Colleen (at grid verification time)	Will not be effective until new intake of 2016
Continue to build on procedural video library to assist students with mandatory pre lab preparation and assignments.	Lab Faculty	Fall 2014
Implement a greater degree of Learner centered approach in the curriculum through more videoing of student's tests and demonstrations, peer evaluation, problem based leaning and the incorporation of Global Rating Scale.	John and Mary working on this for all labs PC1 and carrying through	CBD 2014-some courses completed Spring 2015-work to continue

Alignment of new Anatomy and Physiology courses and Selected Topics to Patient Care and Pharmacology courses is required.	Faculty	Spring 2015
Investigate the creation of a General Education Elective for College Health Science program that includes a lifting/fitness component for pre-PMDs and other program students.	Chair of GAS and CDH and faculty groups from each school	CBD 2015/16
Develop Exam Preparation course for PMD professional exam for delivery through Life Long Learning Division.	John Fader Mary Osinga and Linda Poirier	Spring 2015
Update Paramedic external website to ensure accuracy and currency.	Colleen Rafton & Marketing staff	Winter 2015
All core Paramedic courses require review and revision of the course descriptions & course learning outcomes (see work–to-date in Course Review Summary Chart for Program Review). Also a review of gaps & duplications within course content and assessments is also required. A reduction in the number of assessments is also required. This work will be documented on Course Review Summary Chart.	Faculty	This work began in CBD 2014 and needs to be completed in Spring 2015
Investigate the possibility of a reduction in program hours to more closely reflect trends in Ontario College Diplomas.	Chair/Dean	Winter 2015
Program Vision, Mission and Values will be created.	CLT representative	Spring 2015
Section 3		
To improve inter-rater reliability in testing, additional training and support will be given to testers.	Faculty	Fall 2014
The formal use of a professional portfolio will be implemented into all clinical and field courses.	Communications/ PMD Faculty	Spring 2015
Section 4		
An increase in focus on communication and other "soft skills" will be included in Crisis Management course and other lab and clinical courses (eg. Termination of Resuscitation unit in Crisis Management course)	Faculty	Spring 2014/15
Section 5		
Create a Standardized Patient program with local high schools. Students could use this as volunteer hours and has the ability to expose	Dean, Chair and faculty.	Winter 2015

students to a wide variety of health related careers.		
Add community paramedicine and care of older adult competencies to	Mary Osinga	Spring 2015
the program focusing on upper semesters.		
Section 6		
Investigate an increase in the number of College Health Sciences	Carol/Registrar and	Winter 2015
program graduates seats admitted to the program from 8 to 16. This has	Coordinator	
the potential to increase the numbers to the college health science		
program and to potentially decrease the attrition rate(see FDR data)		
Students continue to be weak in basic math skills. Faculty would like to	Faculty and LSS staff	2015
approach Learning Support Services to assist in the design and		
implement a basic math workshop for students failing to meet basic		
math criteria.		
A review of the implications of increasing first semester enrollment by	Dean/Chair/Operations	Winter 2015
one additional section to increase FTEs and thereby increasing	Leader	
Contribution to Overhead (CTO) is required.		
Section 7		
A 10 year anniversary of the program celebration is set to take place in	Faculty	
Sept 2014 at the college.		
Section 8		
Student's feedback relating to KPI (relating to facilities) indicated that	Dean, Operations Leader,	Fall 2014
they were very unhappy with the PMD lab currently housed in a portable	Chair and Faculty	
in parking lot with no water or bathrooms. Continued advocacy at ELT is		
required to ensure the program has required space.		