

Paramedic Preceptor Training Program

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**MILWAUKEE AREA TECHNICAL
COLLEGE**



Who Should Review This Paramedic Preceptor Training Program?

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- Paramedic students in an EMS System
- ALS Service Providers
- Preceptors in (pre-assigned locations)

This is Required Training

- Review requirements to function in preceptor role

Thank you

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- Thank you for helping to train the next generation of paramedics

Objectives

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- The presentation will review the following:
- Preceptor Requirements
- Introduction to the Field Internship
- Learning Objectives
- Field Preceptor Experience
- Daily Field Internship Evaluation
- Adult Learning Principles

Introduction

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- MATC field interns participating in field rotations are paramedic students who have completed a major portion of their didactic paramedic curriculum.

DHS 110.51 Preceptors

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- In order to serve as a preceptor for field training, an individual shall have all of the following qualifications:
- (a) The individual shall be licensed as an EMT at or above the skill level of the training provided and shall have the knowledge and experience in using the skills, equipment and medications that are required by the scope of practice for the certification or licensure for which training is provided.

DHS 110.51 Preceptors

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- (b) A preceptor shall have a minimum of two years pre-hospital patient care experience as a licensed, practicing EMT at or above the level of the training provided.
- (c) A preceptor shall oversee and mentor students during supervised field training and shall complete the records required to document the field training.
- (d) The ambulance service provider shall keep résumés and other documentation of the qualifications of those individuals designated as preceptors on file and shall make this documentation immediately available for review by the certified training center or the department.

Success of the Preceptorship

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Success of a preceptorship is determined by the relationship between the student and the preceptor.

Students look to preceptors for answers and guidance.

Preceptors are an extension of the classroom.

Preceptor Definition

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- **What is a Preceptor?**
 - An expert in a particular field that provides transitional role support and learning experiences to a paramedic student during a period of practical experience and training.

Preceptor Definition

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- **Preceptors are:**
 - Tutor, Mentor, Teacher, Advisor
 - Facilitator, Evaluator
 - Motivator, Coach
 - Adjunct to the EMS educational process
 - Provider of Positive and Negative feedback

Characteristics of an effective preceptor

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- Knowledgeable in the skill and concepts to be reinforced
- Models desired behaviors
- Skilled in the interventions to be provided
- Motivated: Believes a quality internship is important
- Effective communicator: Can convey their knowledge to the student

Characteristics of an effective preceptor

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- Help students to connect the dots, between the classroom and the street
- The best quality-oriented learning with the greatest retention happens on the job with one-on-one coaching
- The sooner they can apply the material presented in class, the more it will be retained

Role of a Preceptor

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- Support students to make them feel they are safe and valued
- Demonstrate by example how competent staff perform their job
- Know and appreciate the student's knowledge level
 - Remember what it was like to be a student yourself

Preceptor Roles & Responsibilities

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- What is your role?
 - Provide each student with the best possible chance to succeed!
- Be PRESENT
- Be CARING
- Be HONEST

Preceptor Roles & Responsibilities

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- **Be PRESENT**
 - Spend time with the student, stay engaged
 - Help them learn from every day events
 - Treat each patient encounter as an opportunity to learn and gain some new insight
 - Provide after-action reviews and critiques

Preceptor Roles & Responsibilities

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- **Be CARING**
 - Provide watchful supervision
 - Show interest in the student's professional growth
 - Ask them where they may need help
 - Remember, in 6 months this person could be your partner or caring for you or your loved ones

Preceptor Roles & Responsibilities

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- **Be HONEST**
 - Being a preceptor is not all about telling a student that they did well
 - Being a preceptor is about being honest with the student (and with yourself)
 - If they preformed well, let them know. If there is room for improvement, guide them
 - Hold the student accountable for their actions
 - Never condone sub-standard performance

Role of a Preceptor

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- Orientate the student to site, crew, equipment
- Make sure the student understands what is expected of him/her
- Guide the student from “Team Member” to “Team Leader”
- The goal at the end of this is to produce a competent entry-level paramedic

Tips and Methods

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- Help them apply theory to practice by allowing them to:
 - Perform the assessment
 - Interpret the data
 - Perform the skills
 - ✦ Unless the patient's condition requires immediate interventions
 - ✦ Patient care is never scarified so that a student obtains a “skill”
- They will learn more by doing than watching

Role of a Preceptor

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- Facilitate learning rather than controlling it
 - Preceptor directs the process of learning
 - Student sets the pace of learning
 - Each student is different
- Direct, coach and support
- Be willing to provide constructive and regular feedback on student's performance
- Be responsible for the student for the entire shift the student is scheduled

Role of a Preceptor

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- Identify learning experiences for student
 - Some patients are “time critical” and may not be the best experience for a student to practice skills
 - The patient always comes first when weighed against the skill needs of a student
- Allow student to assume Paramedic role in decision making
- Allow student to be accountable for their own actions and judgments
- Actively stimulate critical thinking by use of questions/answers

Preceptor Bill of Rights

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- All preceptors have the RIGHT to:
 - Be treated with dignity and respect
 - Be free from intimidation or harassment
 - Expect their students to discuss and/or demonstrate core knowledge
 - Expect their student will be eager to learn
 - Expect their student will be active participants
 - Be creative in student instruction
 - Report student deficiencies they perceive
 - Be free from the threat or act of retribution

Preceptor Bill of Rights

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- You will notify myself or Russ Spahn immediately if any of these happen while a student is participating in supervised field training

Student Bill of Rights

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- All students have the RIGHT to:
 - Be treated with dignity and respect
 - Be free from intimidation or harassment
 - Make mistakes; have a preceptor who is able to correct and/or intervene before harm is done
 - Expect their preceptor wants to teach
 - Expect fair and impartial evaluations
 - Expect fair and reasonable answers to questions
 - Not be subjected to inappropriate or unsafe situations
 - Report situations to appropriate supervisor without threat of retribution or retaliation

Student Bill of Rights

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- Students will also notify myself or Russ if any of these things happen during their ride along

Laws of Learning

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- Remember how you learned when you were the student
- First impressions are lasting
- Repetition yields habit
- Skills not practiced are forgotten
- Positive experiences leave lasting impressions
- Experience is the mistake you will never make again

Adult Learners

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- **A Good Student Should Be:**
 - Self-directed
 - Motivated by their desires
 - An active participant
 - Able to relate current experience to previous experiences
 - Able to be heard
 - Acknowledged for their efforts
 - Treated with respect and dignity

Environment Conducive to Learning

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- Display mutual respect
- Collaborate; don't compete
- Have open, 2 way communication
- Feedback is encouraged and enhances growth
- Feedback needs to be concurrent, immediate and shared in a manner void of blame or personal attacks

Student Development

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- Students are in a process of developing entry level knowledge, skills and behaviors
- Student development is a gradual phased progression
- Students appreciate the opportunities to participate and learn from practices of more experienced providers

Benner's Theory: From Novice to Expert

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Novice

All of us were here at one time in our careers!

Advanced Beginner

This is where most students are. They will get better with education and practice.

Competent (goal of entry level paramedic)

This is where we want them to be at the end of the program.

Proficient

This comes with time and experience.

Expert

This is where YOU are and where THEY want to be.

Capability of Novice Student

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- Participate in educational setting
- Demonstrate competency of BLS skills
- Possess a general knowledge base
- Be able to follow directions
- Be dependable
- Possess an attitude open to learning

Capability of Advanced Beginner

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- Focus on ALS Skills (don't forget BLS skills)
- Model behaviors observed
- Additional responsibilities added if student can demonstrate they can handle more and are functioning within their scope of practice
- Overall patient management should be the responsibility of the preceptor

Competency (goal of entry level)

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- Focuses on overall patient management
- Demonstrates team leadership skills
- Demonstrates evaluation completed thoroughly and with accurate assessment
- Delegates tasks to other team members
- Capability for accurate treatment, transportation decisions, effective communication
- Displays confidence
- Demonstrates flexibility and professionalism

Student Clinical / Field Log

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- This is the student's responsibility
- They know how to complete this form
- Student enters clinical information regarding patient contacts on a daily log sheet
- Student documents assessments and interventions performed during rotation /shift

Student Clinical / Field Log

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- Students should review the log sheet with Preceptor before the end of their shift.

Preceptors Responsibility

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- It is your responsibility to verify each contact/intervention documented
- Make sure students don't "fluff the numbers"
- It is your responsibility to initial each contact/intervention documented
- Students should take credit for what they do

Preceptors Responsibility

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- In keeping with the Standards set by CoAEMSP, students must be evaluated in all three learning domains
- Cognitive (Knowledge)
- Psychomotor (Skill)
- Affective (Professionalism)

Preceptors Responsibility

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- Please perform student evaluations!
 - Located on back of Student Log
- The Student should do a Self-Evaluation first
- Then the Preceptor should do their evaluation of the student
- Review the evaluation with the student
- Identify “Strengths” and “Area for Growth”
 - What should the student focus on for their next rotation(s)

Preceptors Responsibility

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- Review students previous evaluations
- Review other preceptors comments
 - Previously identified strengths and areas for improvement
- Other preceptors will then view your comments to help guide the students learning
- Preceptor and students must sign each evaluation!

Student Log

		Student Self-Assessment						Preceptor Assessment					
		Unsatisfactory → Competent						Unsatisfactory → Competent					
Affective	Professionalism	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	Communications	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	Time Management	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	Teamwork	1	2	3	4	5	N/A	1	2	3	4	5	N/A
Psychomotor	IV/IO Access	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	Medication Administration	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	Defibrillation Cardioversion Pacing 12 Lead	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	Airway Management	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	BLS Skills	1	2	3	4	5	N/A	1	2	3	4	5	N/A
Cognitive	Understanding of Pathophysiology	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	Situational Awareness	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	Patient Assessment	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	Critical Thinking/Differential Dx	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	Documentation	1	2	3	4	5	N/A	1	2	3	4	5	N/A
	TOTAL												

Grading Key:

- 1 = Unsatisfactory (significant deficiencies)
- 2 = Needs Improvement (needs further practice and/or education to improve)
- 3 = Emerging from Basic to Advanced level
- 4 = Entry level competence
- 5 = Above entry level competency
- N/A = Not Performed/Observed

Students are to first assess themselves in each respective category (using the scale provided below). If a student did not perform a specific procedure, "N/A" should be used.

Preceptors are to assess the students (using the scale provided below) after the students have assessed themselves. If a preceptor is unable to assess a student on a given category, "N/A" should be used.

Objective rationale for any "1" or "2" scores should be documented in the "Comments/Feedback" field.

Preceptors: Your objective evaluation and comments will be used by future preceptors to guide and enhance clinical knowledge and practice.

		Comments/Feedback
Student Signature	Student strengths:	
Preceptor Name	Area(s) for further development:	
Preceptor Signature		

Grading Key

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- 1 = Unsatisfactory (significant deficiencies)
- 2 = Needs Improvement (needs further practice and/or education to improve)
- 3 = Emerging from Basic to Advanced level
- 4 = Entry level competence
 - ✦ This is where they should be
- 5 = Above entry level competency
 - ✦ I don't expect many students to achieve this level every day, in every category. This is the exceptional student
- N/A = Not Performed/Observed

Preceptors Responsibility

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- Please identify the number that best fits the student's performance overall
- DO NOT award fractions of a point! Use only whole numbers
- Scores of 1 or 2 in any category requires documentation/justification.
- Document justification in the “comments/feedback” section.

Preceptors Responsibility

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- Your feedback is essential to student education and growth
- Students are required to turn these forms into the MATC EMS faculty
- All preceptor evaluations are reviewed by the MATC EMS faculty

Preceptors Responsibility

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- Remember that these are students, not experienced paramedics
- Don't go easy on them, but also remember what it was like to be a student
- MATC students are NOT taught protocols, they are taught the National Standard Curriculum

Providing Feedback

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- Start with positive feedback
 - Find *something* to say!
 - Reinforces behaviors and encourages repetition
- Needs to be timely
- Needs to be objective
- Needs to be constructive
 - What was done right
 - What opportunities for improvement are evident
- Needs to be documented to provide continuity throughout the learning process

CoAEMSP Standards

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- The field internship must provide the student with an opportunity to serve as team leader in a variety of pre-hospital advanced life support emergency medical situations.
- The field internship site must allow students to assess and manage patients in the pre-hospital environment where he/she will progress to the role of Team Leader

Wisconsin Minimum Competencies Team Leader

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- The role of Team Leader is a phased in process
- Student should be comfortable as a Team Member first
- When they assume the role of Team Leader, start with less complex patients
- As the student develops the skill and confidence, they can advance to more complex patients
- Find out what opportunities your student needs

Team Leader

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- This category applies to the patient who receives an ALS evaluation in which critical thinking skills are used to gather, weigh and synthesize patient information in order to formulate a diagnosis and plan of care for the patient
- A Team Lead may be obtained even though the patient may be deemed stable for transport by a Basic Life Support unit or a patient that refuses care/transport

Team Leader

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- Performing all or some of the duties associated with the EMS level of care for which the student is receiving training.
- The expectation is that the student may not necessarily perform all the expected skills and duties of someone licensed to the level of a paramedic, but he/she must demonstrate the ability to make patient care decisions based on all elements gathered to form a general impression of the patient and a working diagnosis

CoAEMSP Standards

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- The student has successfully led the team if he or she has conducted a comprehensive assessment
 - Not necessarily performed the entire interview or physical exam, but rather been in charge of the assessment
- The student has formulated and implemented a treatment plan for the patient.
 - This means that most (if not all) of the decisions have been made by the student, especially formulating a field impression, directing the treatment, determining patient acuity, disposition and packaging/moving the patient (if applicable).
- Minimal to no prompting was needed by the preceptor.
- No action was initiated/performed that endangered the physical or psychological safety of the patient, bystanders, other responders or crew.
- Preceptors should not agree to a "successful" rating unless it is truly deserved.

Documentation Of Team Leader

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- Documentation of student performance in the Team Leader role will require separate documentation
- This is a standardized NREMT checklist utilizing a standardized NREMT scoring guide

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Documentation Of Team Leader

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- Students will provide the preceptor with this form
- A “Successful Team Lead” is determined by the overall score on the NREMT sheet
- Students must achieve a score of 40 or greater to be considered “Successful”
- Any Critical Criteria is an automatic failure

CoAEMSP Standards

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- Students must be “successful” as a Team Leader in 18 of their last 20 attempts

Student Injury

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- If a student sustains an injury during this ride along:
- Determine if the student needs to be transported to the Emergency Department
- All students have insurance coverage provided by MATC
 - This would be a “Workman's Comp” issue
- Have the student complete any paperwork that your company requires
- Contact Del Szewczuga
 - szewczud@matc.edu

MATC Paramedic Program Contacts

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Preceptors Make a Difference

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Thank you!

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Email with questions or concerns