SECTION 1 PRECEPTOR GENERAL INFORMATION

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The Nova Scotia and New Brunswick Campuses of Medavie HealthEd offer training in Primary Care, Advanced Care and Critical Care Paramedic programs and other Continuing Medical Education programs. Our programs are designed to meet the proficiency requirements of the National Occupational Competency Profile (NOCP) as established by the Paramedic Association of Canada, the Paramedic Association of New Brunswick and Emergency Health Services of Nova Scotia (EHSNS).

Our programs are designed to provide acquisition of concepts and theories; the mastery of professional skills; and the attainment of a professional attitude. The medical field is constantly changing and evolving; therefore, an emphasis is placed on the development of self-directed learning skills supported by faculty who serve as both academic advisors and facilitators.

The following paragraphs provide descriptions of the three practitioner levels offered by the school:

"The Primary Care Paramedic (PCP) has successfully completed a recognized educational program in Paramedicine at the primary care level. PCPs may be volunteers or career paramedics associated with urban, suburban, rural, remote, industrial, air ambulance and / or military services. PCPs constitute the largest group of paramedic practitioners in Canada. They are expected to demonstrate excellent decision-making skills, based on sound knowledge and principles. Controlled or delegated medical acts1 identified in the PCP competency profile include semi-automated defibrillation and the administration of certain medications." National Occupational Competency Profile for Paramedic Practitioners, October 2011, © 2011 Paramedic Association of Canada.

"The Advanced Care Paramedic (ACP) has successfully completed a recognized educational program in Paramedicine at the advanced care level. Such programs often require prior certification at the PCP level (or equivalent). Advanced Care Paramedics are most often employed by urban, suburban, air ambulance and / or military services. Currently relatively few ACP's are found in rural areas. ACP's are expected to build upon the foundation of PCP competencies, and apply their added knowledge and skills to provide enhanced levels of assessment and care. This includes the added responsibilities and expectations related to an increased number of controlled or delegated medical acts available. Controlled or delegated medical acts identified in the ACP competency profile include advanced techniques to manage life-threatening problems affecting patient airway, breathing, and circulation. ACP's may implement treatment measures that are invasive and / or pharmacological in nature." National Occupational Competency Profile for Paramedic Practitioners, October 2011, © 2011 Paramedic Association of Canada.

Program Approval

The practice of Paramedicine, as with all health care practices in Canada, is regulated by each province, or the appropriate federal authority such as the military, RCMP and Canadian Coast Guard.

Each regulator determines the scope of practice and practitioner classification system for its jurisdiction. In New Brunswick, paramedic programs have two regulating bodies; the Paramedic Association of New Brunswick and the Private Occupational Training Act of the New Brunswick Department of Post-Secondary Education. While, in Nova Scotia, the regulating bodies are Emergency Health Services Nova Scotia and the Private Career Colleges Division of the Nova Scotia Department of Labour and Advanced Education.

The Paramedic Association of New Brunswick and Emergency Health Service Nova Scotia determine the scope of practice, practitioner classification and institutions that are eligible for delivery of these programs, in their jurisdictions.

The Department of Education, Private Career Colleges Division in Nova Scotia and POTA in New Brunswick are responsible for regulating all Private Career Colleges in the province. It is important to note, that the PCC Division, in NS, and the POTA, in NB, only regulate job entry type programs and that they do not regulate job development or further study programs that advance an individuals credentials.

Medavie HealthEd has received approval from both of these organizations for the deliver of Primary Care Paramedicine. The Advanced Care Paramedicine program, which can only be taken after the successful completion of the PCP program, is not a job entry program and is considered further study for advancement of individual credentials; therefore approval was required solely from Emergency Health Services Nova Scotia and the Paramedic Association of New Brunswick.

In addition to complying with all of the above provincial regulatory requirements, Medavie HealthEd has elected to participate in the voluntary national accreditation process for paramedic training administered by the Canadian Medical Association (CMA). During this voluntary accreditation process, the school is working to ensure it meets the CMA's *Requirements for Accreditation*, which among other critical items, includes an expectation that a program will ensure that its graduates possess the competencies determined by the Paramedic Association of Canada. The CMA is responsible to evaluate and determine if the program graduates have successfully meet and/or exceeded the specific competencies listed in the National Occupational Competency Profiles for Paramedics.

Education Placement Agreements

Medavie HealthEd requires Education Placement Agreements to be completed with all facilities used for clinical or practicum sessions. This is a legal contract which defines the obligations between the student, preceptor, institution and the school. The contract between Medavie HealthEd and the clinical site must be signed by all parties, prior to the student beginning the clinical experience.

Program Delivery Pedagogy

Each program offered by the Medavie HealthEd follows a similar teaching and learning format of instruction. Following the principles of adult learning, each program employs multiple learning styles and techniques to ensure students thoroughly comprehend the curriculum. Styles used include, didactic learning, skills learning through simulation sessions and practical through hands on patient care in the clinical/hospital and ambulance operations settings.

Didactic Sessions

In this setting, the student is introduced to a number of academic issues including medico legal, patient assessment and the pathophysiology of medical and traumatic illnesses or injuries. The student is evaluated for academic knowledge through class participation, projects, quizzes, tests and examinations

Simulation Sessions

The simulation sessions provide the student with the opportunity to practice and perform skills specific to their proficiency level. To ensure proficiency is achieved, the student is evaluated a minimum of two times in the lab setting by the instructors for each individual skill. Furthermore, they are evaluated on their performance of multiple scenarios which requires the use and correct applicable of multiple skills thus simulating real scenarios they will encounter in their clinical settings.

Clinical Sessions

This component of the program provides the student with a concentrated period of practical training in a controlled institutional environment. The goal is to develop the student's ability to accurately assess and meet the needs of patients, in both an emergent and non-emergent setting.

The student develops his/her competencies, specific to the clinical setting, under the direct supervision of the institutional staff (e.g. physicians, nurses, respiratory therapists, or other qualified health care professionals). The assigned preceptor engages in one-to-one evaluations of the student using the evaluation tools provided by the school. This review and analysis of patient care aids the student in developing the skills and abilities needed to enter professional practice in the future.

In the event that a student receives an incomplete or failure in a clinical rotation, the right to complete or not complete supplemental hours is at the discretion of Medavie HealthEd. Attitude, commitment, dedication, skills proficiency and the demonstration of initiative are the primary factors, influencing the successful completion of the clinical sessions.

Ambulance Practicum Sessions

The ambulance practicum component of the program provides the student with a concentrated period of practical field experience with an ambulance service; and focuses on the student's ability to assess and meet the needs of patients, in both emergent and non-emergent situations.

During these sessions, the student will develop his/her competencies, specific to the ambulance practicum session, under the direct supervision of the paramedic preceptor. The preceptor engages in one-to-one evaluations of the student using the evaluation tools provided by the school. This review and analysis of patient care will help the student to form a knowledge base for professional practice in the future.

Ultimately, this represents the capstone of the teaching/learning experience as it is designed to help the student transition successfully into the role of the paramedic practitioner.

In the event of an incomplete or failure of this component, the right to complete supplemental hours is at the discretion of the Medavie HealthEd. Attitude, commitment, dedication, skills proficiency and demonstrating initiative are the major factors, which influence successful completion of the ambulance practicum session.

Course Completion Requirements

Hourly Requirements

Primary Care Paramedicine

Didactic Completion of all Essential Skill Competencies listed as skill (S) or

knowledge (X or A) based evaluations. This portion of the program encompasses in class hours, self directed learning as well

as lab setting evaluations. (See program calendar for hours)

Clinical Completion of all Essential Skill Competencies listed as a Clinical

(C) based evaluation with a minimum number of hours. (See

program calendar for hours)

Practicum Completion of all Essential Skill Competencies listed as a Practical

(P) based evaluation with a minimum number of hours. (See

program calendar for hours)

Advanced Care Paramedicine

Didactic Completion of all Essential Skill Competencies listed as skill (S) or

knowledge (X or A) based evaluations. This portion of the program encompasses in class hours, self directed learning as well

as lab setting evaluations. (See program calendar for hours)

Clinical Completion of all Essential Skill Competencies listed as a Clinical

(C) based evaluation with a minimum of hours. (See program

calendar for hours)

Practicum Completion of all Essential Skill Competencies listed as a Practical

(P) based evaluation with a minimum of hours. (See program

calendar for hours)

The Preceptor

The role of the preceptor is to be a mentor and guide for each student. The goal is to develop a strong working relationship between student and preceptor to ensure the highest standard of care is provided to patients.

Preceptor Responsibilities

- To review and become familiar with the evaluation tools and forms provided for the evaluation of the student.
- To review and sign the appropriate documentation before the end of each shift.
- Ensure that the student clearly comprehends the preceptors' role and expectations.
- Provide the student with ongoing feedback. (e.g. address issues and any concerns in a timely manner and before said shift ends.)
- If necessary, assign and review homework relevant to debriefings and discussions.
- In the hospital/clinical setting, the preceptor is asked to provide a written evaluation regarding the student's proficiency based on each patient the student provides care for; as well as a short daily evaluation.
- In the ambulance practicum setting, the preceptor is asked to provide a written evaluation regarding the student's proficiency based on each patient they provide care for; and perform both a mid-point and end point evaluation.
- To discuss any pertinent issue that arises immediately with the clinical supervisor and/or faculty of the Medavie HealthEd faculty.

Note: Please refer to the position description provided on the following pages for more detailed information on the responsibilities of a preceptor.

Preceptor as Mentor

Preceptors are more than clinical teachers; they are mentors, who create an environment that encourages the student sufficient freedom to grow and progress within their scope of practice. The clinical and practicum experience provided to the student represents invaluable learning experiences and is a vital component the Paramedicine programs. A successful mentoring relationship, that which encompasses leadership, guidance, professionalism and respect is fulfilling and meaningful for both parties. This sharing of time and expertise will ensure that quality patient care will continue in the Health Care system.

Preceptors need to recognize the growing proficiency of the student within a given semester and as a result of this begin to encourage greater independence in the areas of diagnostic reasoning, assessment skills, and patient management as warranted.

Preceptor as Clinical Expert

Preceptors are recognized as clinical experts within their area of practice, and thus can demonstrate the conduct and performance the student will need to master. Their progression from novice to expert, and years of experience enables them to assist students in practical learning. Preceptors also recognize that not all of the learning experience occurs during direct patient care.

Health care professionals are in the vanguard of producing and using research findings within their practice disciplines. The unique ways that individual paramedics, nurses and physicians incorporate research methodologies in their practice helps expand the student's understanding of the role of research in the clinical setting and reminds them of the need to continually learn and apply new methodologies as the emerge.

Preceptor as Team Member

Collaboration with other health care team members is important in the provision of patient care. Therefore, it is anticipated that a preceptor will take the lead in developing and nurturing a team environment with the student.

Preceptor Position Description

Position Title: Preceptor; Primary, Advanced or Critical Care Paramedicine

(Volunteer Position)

Date Established: 20 June 2005 Date of last Revision: 25 March 2012

Provides Reports to: Medavie HealthEd Clinical Coordinator

Supervises: Medavie HealthEd Primary, Advanced & Critical Care

Paramedicine Students

Nature of Position:

The Primary, Intermediate, Advanced and Critical Care Paramedic Preceptor is considered an associate member of Medavie HealthEd and Adjunct Faculty of the Paramedic training schools.

Preceptors are responsible for the effective supervision, mentoring and evaluation of Paramedic students assigned to work with them during the Practicum setting. The Preceptor may be employed by one of the Medavie operating companies, hospital or other health care facilities. In association with the Clinical Coordinator, the Preceptor is expected to work effectively in the team environment to ensure students acquire the competencies and knowledge required for employment and personal growth in the field of Paramedicine in the field of Paramedicine.

Duties and Responsibilities:

This individual is in direct contact with and provides regular reports to the Clinical Coordinator or school Manager. The Primary, Advanced or Critical Care Preceptors primary role is to ensure the learning needs of the students attending the program are being met by teaching, evaluating and coordinating the activities of students under their supervision.

Functions:

Note: CCP, ACP, Nursing and Physician Preceptors may evaluate both PCP and ACP students. ICP & PCP, Nursing and Physician Preceptors may evaluate PCP students.

- Supervise and assist with student learning activities throughout the shift including
 patient contacts and interaction with allied health personnel acting as both role
 model and facilitator for the learning experience.
- Ensure students are provided with an orientation to the department, ambulance or facilities where practicum training is taking place.
- Ensure students are aware of all relevant health and safety requirements including Policy and Procedure for the department or ambulance service where training is taking place. Report concerns of unsafe practice immediately to the schools Clinical Coordinator and site Supervisor.
- Collaborate with the schools Clinical Coordinator for issues or concerns regarding the student practicum.

- Provides written and verbal evaluation reports through the schools competency tracking mechanisms for students on their knowledge, skills, attitude and competency attainment during the practicum period. Is familiar with the Student Evaluation tools used by the School
- Participates in training functions when offered to improve skills and maintain familiarity with the schools evaluation tools
- Discuss mutual expectations and facilitate student's access to appropriate resources
- Applies principles of adult education and fosters a learning environment that
 promotes student competence and confidence in assuming both responsibility and
 accountability for practice. Is able to assist the student to think critically while
 making clinical judgments by applying new and previously learned theory and
 skills.
- Reviews teaching objectives and the preceptor handbook with the department and school. Is able to offer recommendations for revision and clarifies any unclear areas with Clinical Coordinators prior to beginning the practicum experience.
- Maintain a positive attitude towards the practicum experience, student and faculty participation.
- Maintains student records in an orderly and concise manner.
- Complete other duties, as mutually agreed upon.

Hours of Work:

The normal working week for this position will mirror exactly what shift the preceptor works on their regular rotations. In other words, students work with preceptor's during the preceptor's regular working shift.

Qualifications:

Education/Experience:

Registration as an active Primary Care, Intermediate Care, Advanced or Critical Care Paramedic in the province of Nova Scotia, New Brunswick or PEI. An institutional or organizational staff person (i.e. R.N., R.T., etc.) who is qualified to perform the skills that the student will be assessed in performing; the staff person will be qualified to provide patient care in the department where the student is obtaining their educational experience. It is preferred that the individual possess a minimum of two years relevant experience in pre-hospital care. This individual should have excellent pre-hospital emergency health care skills and knowledge.

Skills:

Strong oral, written communication and interpersonal skills are required. Excellent organizational skills are required. The successful candidate must be capable of working effectively with as part of team in an educational leadership capacity.

Student Responsibilities

Students are provided with their clinical schedule which identifies the sites and locations they are to attend for their training. If possible, the student will also be provided with the preceptors' name with whom they will be partnered with during a specific clinical experience. The student is responsible for attending all assigned sessions given to them by the Clinical Coordinator of their parent campus.

The student is to provide the preceptor with an opportunity to review the electronic version of the preceptor manual on their iPad to help familiarize the preceptor with the required documentation, evaluation tools and pertinent objectives of that session. It is at this point that students are to communicate their strengths and areas for improvement to the preceptor. It is also expected that students will take responsibility for their learning experience; that is, request specific patient experiences, populations, procedures, etc.

The student is to conduct and present themselves in a manner that encourages and merits the respect of the faculty, preceptors, patients and members of the general public. They must also assume responsibility for personnel and professional development. The student must strive to improve the standards of the school and the Pre-hospital care community. The student must observe both the rules of Medavie HealthEd, stated below and the particular organization in which they are undertaking training. See Code of Conduct () and the Clinical Code of Conduct () for further details. Located in the Medavie HealthEd Policy and Procedure manual.

The following lists the general completion requirements of the student during the clinical, pre-practicum and practicum settings of the program. These may be found in each of the specific manuals for further reference.

- 1. The students are required to complete a minimum number of hours during their clinical and practical experiences and must complete all assigned paperwork. (See program calendar for hours)
- 2. Students are expected to *arrive 15 minutes prior to the start of shift*, and in uniform.
- 3. Students will not only abide by the *Schools Dress Code and Code of Conduct*, but must also follow all of the *Institutions' Policies and Procedures*, at all times, during their placement.
- 4. The student will follow the *regular rotation of his/her preceptor* during the clinical rotation. They are **responsible to the preceptor for duties, assignments, and assessments**, which are outlined in **the** Clinical and Practicum Sections of this manual. Extensions may be granted at the discretion of the supervisor, staff member, and Medavie HealthEd staff, if more time is needed to meet the objectives.
- 5. The student will *maintain and complete* their manuals for evaluation by their Preceptor and Medavie HealthEd staff. Documentation is to be completed on a daily

basis, as required. The electronic clinical documentation should be **kept up-to-date** and available *for review by both the preceptor and* Medavie HealthEd *staff*, at all times.

- 6. Prior notification must be given to the preceptor and Medavie HealthEd staff of *any late or missed shift*. If this occurs more than twice and without good reason, then the student may expect to lose his/her clinical preceptor due to lack of commitment. Students must call the school between 08:00 09:00 each day missed. In addition they must call the institution before the start of the shift, during business hours or via email.
- 7. The student is to *present and verify a calendar* of placement shifts to both the *preceptor and the* Medavie HealthEd.
- 8. The student is expected to arrive for the *shift fully prepared both mentally and physically*. Any *homework assigned* by the preceptor must be completed.
- 9. In order to *gain credit* for the clinical/practical the student must meet the *criteria* outlined in the learning requirements.
- 10. **Program policies on student conduct must be respected at all times.** The student will **demonstrate professional demeanor** and **deportment** at all times. **Behavior**, which is **unprofessional or inappropriate**, can result in **immediate suspension** from the clinical setting and subsequent to investigation the student may be dismissed from the program. Given the responsibilities and accountability required of Paramedics there would be **a very low tolerance** for inappropriate behavior, particularly in this clinical setting.
- 11. If a student feels they are being *treated inappropriately or harassed* by a preceptor they are to immediately contact the Medavie HealthEd staff. Documentation will be gathered from all parties involved and an investigation will be completed by the Program Manager.

Faculty and Clinical Coordinator Responsibilities

Course Faculty and/or Clinical Coordinator arrange appropriate clinical sites to meet the needs of the students and conduct site visits on an as-needed basis. Faculty also, evaluate the student's clinical performance by reviewing submitted documentation of patient contacts; by critiquing all verbal and written case presentations; and by analyzing clinical projects for the students. These clinical projects address identified learning needs at the assigned site, either for the staff or client population.

The Faculty and/or Clinical Coordinator are available to respond to questions from preceptors regarding any component of the schools evaluation tools. The preceptor may

also contact the Faculty and/or Clinical Coordinator, regarding the student's ability to meet the proficiency requirements, at anytime during the students training.

The Faculty and/or Clinical Coordinator are also available to respond to questions from students during the clinical/ambulance components of their training. The student is encouraged to contact the Faculty and/or Clinical Coordinator on a regular basis to discuss their progression in the program.

Evaluation Process

Preceptors and students are given evaluation tools at the beginning of the practicum. These tools serve two purposes: first, they represent a blueprint to guide the student's progress during the practicum; and second, they act as a measurement of the student's accomplishments.

In the Clinical setting, students are formally evaluated on overall performance by the clinical preceptor on a daily or weekly basis (this is dependant upon how long the preceptor is assigned to the student), and specifically evaluated on a skill basis. During the practicum session the student is evaluated on each call and a thorough evaluation is performed on a weekly basis during the practicum session.

Evaluation also occurs informally, with continuous feedback from the preceptor in the form of critique and praise. Hence, effective communication skills are necessary in order to prevent misunderstandings which could result in evaluation errors. For example, in an attempt to spare a student's feelings, some preceptors may avoid offering critical feedback when it is needed; thus jeopardizing the feedback and evaluation process. That being said, continuous criticism without any positive feedback or direction for improvement will also negatively affect the learning process.

Troubleshooting

In spite of best efforts, problems can and do arise when precepting students. Signs to watch for would be:

- Student appears distracted
- Student fails to fulfill responsibilities
- Staff does not accept the student as part of the health care team
- Student does not progress in knowledge base and/or skill level
- Student is repetitively late for clinical, or is absent without notice
- Patients refuse to let the student work with them
- Personality conflicts occur between preceptor and student

In order to assist with the above, Medavie HealthEd Faculty are available at all times to address any preceptor concerns. In many cases, clear communication between preceptor and student will resolve emerging problems and conflicts. Faculty will aim to meditate in

the event that the preceptor or student feels the need for an impartial third party, if this does not resolve the issue the matter will be referred to the manager of the school.

Medavie HealthEd greatly appreciates the time and effort expended by preceptors on behalf of our students. We value and recognize the contributions of time, energy, and expertise preceptors so willingly give to our program. Without the valuable experience and perspective gained from the multiple clinical opportunities, students would not be adequately prepared to meet the challenges of Paramedicine in today's healthcare environment.

When to Contact School Faculty/Medavie Staff

Preceptors, students or supervisors can contact Medavie HealthEd staff at any time if there is a question or concern. Depending on the situation please allow staff a day or two to return your message. If the situation is of an urgent nature contact the Clinical Coordinator then site supervisor or operations manager.

Patient safety or personal issues:

- Inappropriate behavior on the part of the student, preceptor or other staff.
- Student is constantly late for shifts.
- Student is inadequately prepared for the shift or clinical rotation.

Concern with student progress or behavior:

- Student is not following through with preceptor suggestions
- Student is having difficulty transferring skills or knowledge from one situation to another
- Preceptor has concerns about the student being unable to complete the practicum in the expected timeframe.

Injury accident or illness

• Please ensure appropriate school staff are notified.

Support or feedback:

- If either the student or preceptor is looking for guidance or advice for directing student learning.
- The student is showing outstanding or substandard student performance during the practicum.