

FACULTY OF HEALTH AND LIFE SCIENCES

Foundation Degree (Science) Paramedic Science

Clinical Practice Placement Documentation

Module: Foundation Paramedic Practice

Module Code: F102PM

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Name.....

Student.....

Name of Personal Tutor:.....

Name of Course Leader

Name of Work Environment

Name of Mentor.....

This document is the property of Coventry University and will form part of the assessment of your practice module. It must be completed and kept safely for the duration of the course.

If this document is found please could you contact:

Coventry University on 02476 795961

Introduction to Paramedic Practice

The Foundation Degree in Paramedic Science is designed to develop your knowledge, skills and abilities in becoming a capable and caring paramedic practitioner. The Foundation Paramedic Practice module underpins the practice element of the first year of your programme. To fulfil the requirements of the Health and Care Professions Council (HCPC) (2012a) Standards of Proficiency and Standards of performance and ethics (HCPC 2012b), all competences are mapped to the Standards of Proficiency (HCPC 2012a), and the core values of paramedic practice (HCPC 2012b) are fully integrated into practice.

This practice learning record will be formatively and summatively assessed in order to demonstrate your achievement of your competence in practice. The experiences gained whilst working in the pre-hospital environment are essential to the achievement of your programme and will also be used to enhance your learning in other University based modules of the course. Therefore it is important that you maintain your learning competencies and maintain records of your experiences.

For the purpose of this programme, learning can be achieved in any approved ambulance service where appropriate learning opportunities are available for you to undertake practice under supervision of your mentor(s) and qualified paramedics. This experience is essential to the integration of theory and practice in your learning and your development of effective paramedic care practice.

With support you will make sense of your practice through the application of theory, skills learnt in the classroom environment, constructive feedback, and reflection on your experiences. You will work with mentors who will assess and facilitate learning to enable the achievement of the required competencies and practice outcomes in the practice environment. It is important as a student on the programme that you are supervised at all times by a HCPC registered paramedic and to recognise your limitations. As you progress through your programme and develop your practice skills and knowledge you will have the opportunity to fully participate in all aspects of paramedic roles and responsibilities under the guidance of your mentor.

All of the modules in the programme integrate values, knowledge and skills for practice and enable you to learn through practice and experiential related Learning. Assessment strategies will also enable you to use and reflect on your work experiences. It is recognised that using learning experiences from your work environments can raise ethical issues e.g. confidentiality, consent, questioning of work practices etc. You will have the opportunity to explore and discuss strategies for developing reflective practice and managing ethical issues in the scope of practice modules and this will be reiterated throughout the course. If you identify any ethical issues you are encouraged to discuss these with your mentor and course tutor.

Core values in Paramedic Practice

Your main responsibilities as a health professional are summarised below, grouped into the categories of conduct, performance and ethics (HCPC 2012b). Please remember that this is not a complete list of all the issues that can arise in relation to your conduct, performance and ethics.

As a health professional, you must protect the health and well-being of people who use or need your services in every circumstance.

This means that you must always keep high standards of **conduct**. You must always:

- Act in the best interests of your patients, clients and users.
- Respect the confidentiality of your patients, clients and users.
- Maintain high standards of personal conduct.
- Provide any important information about conduct, competence or health.

Also, you must always keep high standards of **performance**. You must always:

- Keep your professional knowledge and skills up to date.
- Act within the limits of your knowledge, skills and experience and, if necessary, refer on to another professional.
- Maintain proper and effective communications with patients, clients, users, carers and professionals.
- Effectively supervise tasks you have asked others to carry out for you.
- Get informed consent to give treatment (except in an emergency).
- Keep accurate patient, client and user records.
- Deal fairly and safely with the risks of infection.
- Limit your work or stop practicing if your performance or judgement is affected by your health.

Finally, you must always keep high standards of **ethics**. You must always:

- Carry out your duties in a professional and ethical way.
- Behave with integrity and honesty.
- Follow our guidelines for how you advertise your services. and
- Make sure that your behaviour does not damage your profession's reputation.

For a more complete outline of your responsibilities log on to the Health and Care Professions Council Website: <http://www.HCPC-uk.org/>

This Clinical Practice Assessment document is divided into **6 parts**.

Part 1 – Support in Practice and Statement of University and Placement Responsibilities provides information relating to the responsibilities of the placement provider, the named and associate mentor and you - the student. This section also contains documentation of induction to practice and list of signatories. This signatory list must contain a list of names of registered paramedics and their signatures that have signed any records in your document.

Part 2 – Clinical Skills and Drug Administration Record. This will provide signed evidence that you have attended and gained the relevant theory and practice in the university setting. This will be signed by the teaching staff to verify that you have attended the lecture and that you are deemed safe to practice the skill under direct supervision of an appropriately qualified registered paramedic.

Part 3 – On-going Achievement Record. This will **formatively** record evidence of your on-going progression and achievement during your practice placement during each practice block.

Part 4– Assessment Criteria Framework – Provides information on the framework used to assess the achievement of the competence against a defined framework

Part 5 – Summative Assessment. Achieved Competences. This will **summatively** record evidence of achievement of competences and practice outcomes. All competences are mapped against the HCPC (2012a) Standards of Proficiency.

NB: The skills in this section may be difficult to summatively assess as competent in practice due to limited or non exposure in the practice environment. These competences should be formatively assessed through discussion, reflection, skills simulation etc., with your named mentor so you have the underpinning knowledge and understanding required for this skill.

Completion of Records

Appropriate teaching staff who have supervised the student practicing the skill in the university setting **MUST** sign part 2. Students **MUST NOT** undertake this skill or administer drugs if **NOT SIGNED**

Parts 3 and 5 **MUST** be completed and signed by you and your named/associate mentor.

In part 3, your SWOT analysis and action plan, initial, midpoint and final interview and your summative assessment (Part 5) must be completed and signed by your named mentor.

Please ensure that when summatively assessing your competences that your mentor includes comments to support his/her decision to pass/fail. An appropriately qualified registered paramedic who is supervising you in practice may verify competences that are observed and discussed.

NB: It is your responsibility to ensure that all the relevant areas completed, signed and by appropriate person. Failure to complete all records accurately and appropriately may result in a FAIL being awarded.

- Minimum Practice Requirements

This module requires you to undertake a minimum number of 520 hours in the learning environment with mentor support. Please refer to the Programme Handbook, and module handbook – F102PM.

PART ONE

SUPPORT IN PRACTICE & STATEMENT OF UNIVERSITY & PLACEMENT RESPONSIBILITIES

Student and Mentor Support in Practice University Programme Team

The programme leader and programme team will lead in the facilitation of practice- based learning in the pre-hospital environment. They will provide support to you and your mentor during your practice placement.

The Programme Team has a responsibility to:

- Maintain knowledge and information of the student programme of study
- Support students during their placement should they have any concerns
- Support mentors answering any concerns regarding the competencies or work-based learning modules
- Be approachable and contribute to a supportive learning environment for the students
- Communicate with Programme leaders any concerns or queries related to the student or the course
- Answer or seek answers to any queries raised by mentors
- Undertake clinical visits during each placement block.

Clinical Placement Leads

The Clinical Placement Leads for both university and practice setting are:

CLINICAL PLACEMENT LEADS
Mike Clewes – Placement Co-ordinator, Senior Lecturer in Paramedic Science. Coventry University E: ab5094@coventry.ac.uk T: 02477 655910
Aimee Trimbee Organisational Development (OD) Practice Placement Officer West Midlands Ambulance NHS Foundation Trust E: aimee.trimbee@wmas.nhs.uk T: 01384 246348 M: 07920278419

The Clinical Placement Leads for the University is responsible for:

- Co-ordinating placement allocations with the Ambulance Trust working alongside practice placement officer
- Ensure that you have the relevant experience and opportunity to achieve learning outcomes
- To address any issues encountered in practice environment and liaise with appropriate university staff and staff in placement area
- Supporting mentors in practice

The practice placement officer for WMAS will be responsible for:

- Co-ordinating your placement within the Ambulance Trust working alongside the scheduling departments
- Ensuring that you have the opportunity to attain all relevant work-based competencies.
- Notifying Clinical Placement Lead of relevant suitable placements.
- Liaising with the Clinical Placement Lead should any problems arise within practice placements.

Named Mentor and Associate Mentor

There are two titles used for mentors in paramedic practice setting – Named Mentor and Associate Mentor. The mentor titles and qualifications are as follows:

Title	Experience	Qualifications
Named Mentor	2 years post registration experience 12 months experience as associate mentor	HCPC Registered Paramedic A university accredited mentor preparation programme (Level 5 minimum)
Associate Mentor	Minimum of 12 months post registration experience	HCPC Registered Paramedic 1 day mentor programme

In addition, all mentors must be kept updated and engaged in annual mentor updates.

You will be allocated a Named Mentor and Associate Mentor during your placement. Mentor(s) will act as a resource for your learning and will support and guide your aims and objectives to achieve the competences and practice outcomes through practice based activities. Named mentors will be expected to confirm that you have achieved a competent level using the assessment framework (Part 5) for ALL competences in part 6. Your named mentors will also be responsible for formatively assessing the desired competences for Part 6.

There is a requirement that your named mentor or associate mentor will work with you for a minimum of 15 hours per week. Due to fixed rotas, annual leave or unforeseeable circumstances there may be occasions where working with mentor(s) for the minimum requirement (15 hours/week) will be difficult to achieve. For e.g. you could work with a mentor for 12 hours over 1 week, then 36 hours the following week: or for 36 hours over 1 week then 12 hours the following week. It is therefore important to look at the overall minimum requirements for duration of the placement.

NB: For your programme you are required to work a minimum of 225 hours with your allocated Named Mentor or Associate mentor.

In the remaining hours of your placement you will be allocated to an appropriately qualified HCPC registered paramedic who will be responsible for supervising you in practice placement. An appropriately qualified registered paramedic must have a minimum of 12 months clinical practice experience as a registered paramedic. **They will be able to verify your attendance and verify that you have observed practice and participated in the care provided/skill in relation to the competency.**

Responsibilities of the Named Mentor:

The Named Mentor is responsible and accountable for:

1. Organising and co-ordinating your learning whilst in practice
2. Orientating you into the workplace
3. Supervising your learning situations and provide you with constructive feedback on your practice and progress
4. Formulating action plans and other strategies to enable you to progress
5. Undertaking all placement reviews (as required by university) and set realistic objectives in collaboration with the you
6. Verifying your attendance
7. Assessment of your total performance - including skills, attitudes and professional behaviours
8. Completion of contemporaneous records of your progression in your Clinical Practice Assessment Document
9. Liaising with other named mentors and associate mentors to discuss and review your progress
10. Reporting/discussing any concerns about your progression/performance to university staff in a timely manner
11. **Completion of and signing off all clinical summative assessments**

Responsibilities of the Associate Mentor

The associate mentor is responsible and accountable for:

1. Facilitating your placement learning
2. Orientating you into workplace
3. Supervising your learning situations and providing you with constructive feedback on their practice and progress
4. Monitoring and documenting your progression (**formative assessment**) and reporting to your named mentor
5. Verifying your attendance
6. **Formatively** assessing your performance - including skills, attitudes and professional behaviours
7. Completion of contemporaneous records in the students practice documentation (**formative assessments only**)
8. Reporting any concerns about your progression/performance to named mentors and/or university staff
9. **Completion of formative assessments**

Responsibilities of you - the Student

Learning from and for practice inevitably requires you to take responsibility for your learning thus you are expected to:

Before Placement

- Read all the student handbooks relating to your programme of study.
- Keep the practice-based learning / practice skills record safe and secure for the duration of the course and make it available to your Personal Tutor, Programme Leader, programme team, mentor, and the external examiner when required.

- Identify your specific learning needs with support from your Personal tutor and mentor and consider possible opportunities which you may request to develop your practical skills
- Attend the practice placement preparation session and identify how to contact the key university link, which supports this area

During Placement

- Act professionally with regard to punctuality, attitude and image, and dress according to requirements of the practice-learning environment
- Plan time with your mentor to reflect on your progress in achievement of your personal aims and objectives and competences. Ensure documented assessment is completed at the appropriate time and your mentor signs all documentation.
- Adhere to local, regional and national guidelines, policies and protocols.
- Maintain confidentiality with regard to patients / clients and their families, staff and placement areas. Your Clinical Practice Assessment Document **MUST not contain any copies of patient records**
- Maintain effective communication with patients / clients, mentors, clinical colleagues and university clinical link staff
- Demonstrate a willingness to work as part of the team in the delivery of 24-hour safe patient care over a 7 day week
- Be proactive in your learning, expressing your needs and adopting a questioning reflective approach and be willing to participate in practice experiences relevant to your level of knowledge and ability with the support and supervision of your mentor.
- Use your mentor for guidance and support to enable you to achieve your **ALL** required competences and practice outcomes.
- Identify learning opportunities available to you during this placement through discussion with your mentor and university link staff, e.g. multidisciplinary working, specialist staff or procedures, investigations, care pathways
- Utilise learning opportunities to appreciate the roles of other health care workers both within the ambulance service and within partner organisations.
- Provide and act upon constructive feedback.
- Reflect upon your progress to increase self-awareness, confidence and competence and evaluate your achievements.
- Arrange meeting dates with your named mentor to complete your initial, mid-point and end-point assessment within the required deadlines for each placement block.
- Evaluate your work-based learning experience on completion of each work-based learning module.
- Maintain regular contact with your personal tutor and keep him/her informed of any concerns or problems you may have either within your practice experiences or of a personal nature that impact on your performance.
- Contact the placement and university to report sickness absence and discuss with link liaison staff any problems which influence your placement progress
- Report any sickness using the sickness line : 02476795926 or email placementabsence.hls@coventry.ac.uk
- Complete assessment within the designated time and ensure documentation is kept safe at all times
- Complete accurately the daily record of attendance and ensure this is signed by your mentor or registered paramedic The Programme leader and personal tutor will view this at the end of each placement block

After placement:

- Evaluate the placement, mentor support and learning opportunities provided in a constructive, professional manner
- Evaluate your achievements; discuss any areas requiring development with your personal teacher in order to develop an action plan for subsequent placements

- Maintain confidentiality in reflection and utilisation of practical experiences in discussion groups, portfolio and assignments

Registered Paramedic Responsibilities

You have a responsibility to formatively assess to:

- Consider whether the student has demonstrated sufficient level of performance and underpinning knowledge and skill towards achievement of the competency.
- Provide constructive feedback to the student
- Provide constructive feedback to the students named mentor

NB. The named mentor(s) will undertake the Summative assessment.

University Link Support Responsibilities

The University has a responsibility to:

- Undertake joint audit of all practice placements to ensure accuracy of data and to ensure practice placements meet all standards for student learning
- Through annual mentor updates and the university web pages, ensure that mentors are kept informed when changes are made in the curriculum, programmes or modules and that relevant documentation is available and accessible
- Ensure that students and mentors are aware of university link support staff and have contact names, telephone numbers and email addresses
- Take an active role in monitoring and supporting student learning and mentor support in practice placements
- Guide and support students and mentors in developing and implementing action plans, where appropriate
- Have in place an effective system of jointly monitoring feedback from students and mentors about practice placement experiences and the quality of mentorship,
- Provide support to mentors, staff and students in the clinical environment
- Ensure that mechanisms are in place to enable debriefing with the Programme Leader in the event of unsatisfactory assessment.
- Ensure the clinical environment have relevant course documentation.
- Maintain good communication between the university and the clinical environment through the programme team

1.8 Contact Details for Coventry University Programme Team

Name	Title	Telephone No.	Email Address
Mike Clewes	Senior Lecturer/Placement Coordinator	02477 655910	ab5094@coventry.ac.uk
Stef Cormack	Senior Lecturer/Course Director	02477 655942	ab6925@coventry.ac.uk
Matthew Harris	Senior Lecturer	02477 655830	ab6935@coventry.ac.uk
Dan Staines	Senior Lecturer	02477 655929	aa8318@coventry.ac.uk

Steph Coles	Lecturer	02477 659133	aa4429@coventry.ac.uk
Dawn Wilbraham-Hemmings	Lecturer	02477 659840	ac2835@coventry.ac.uk
Miriam Perry	Senior Lecturer	02477 659039	ab8052@coventry.ac.uk

1.9 Contact Details for Clinical Placement Area

Name	Title	Telephone No.	Email Address
Aimee Trimbee	Organisational Development Officer Practice Placement Officer	Office: 01384 246348 Mobile: 07920278419	Aimee.trimbee@wmas.nhs.uk

Evidence and Assessment of Practice Learning

There are several mechanisms that allow you to demonstrate your integration of theory with practice and achievement in practice learning. These are:

On-going Achievement Record	This formative assessment section will demonstrate evidence of on-going achievement of practice outcomes during each placement block.
Mentor confirmation of achievement of competences	<p>Your mentor will directly assess your achievement of the competences by working with you, observing your performance against the criteria: and questioning you about your underpinning knowledge and understanding against each competency.</p> <p>If required further action plans will be put into place if you are not progressing. During the end-point review the named mentor will discuss your practice and decide on whether you have achieved a competent level for all the required competences. Your named mentor will also confirm that you have achieved the minimum requirements for practice hours recorded in your OAR. Throughout your time with your mentor you must complete all the required sections in your clinical practice assessment book. Failure to complete required records will result in a fail being awarded.</p> <p>NB: Your competences can be signed off at the end interview for each placement block provided these have been achieved.</p>

Student concerns in placement

If you have a concern in placement regarding patients, your experience, your progress or personal issues there are various support services / mechanisms that you can access. Firstly if possible it would be useful to discuss this with your mentor as they can often help to resolve your concerns. If you feel you are unable to do this such as the concern relates to your mentor then you can discuss with the practice educator/facilitator, lecturer practitioner or module leader who can often help to resolve your concerns or sign post you to any services that may be of relevance.

It is expected that you take on the responsibility yourself to resolve any concerns you have. This is part of your training to become a health care professional.

Please Note Mentors cannot discuss anything about your placement experience with family, relatives or friends as this would be a breach of your confidentiality. If family relatives or friends turn up at placement to discuss your concerns they will not be seen by the mentor and or staff in the placement. However you can make arrangements to have a meeting with your family, relative or friend present with relevant staff at the university. You will have to give your permission for this to occur

About the Clinical Competences

The clinical competences to be achieved in this practice module identify the knowledge, skills and attitudes that must be achieved in practice to meet the learning outcomes. They are all mapped against the HCPC (2012a) Standards of Proficiency and are fully integrated with the core values of paramedic practice (HCPC 2012b). Your mentor will directly assess your achievement of the practice outcomes by observing your performance against the criteria: and questioning you about your underpinning knowledge and understanding against each competency through these clinical competences. All of the observations and questioning will be recorded via the On-going Achievement Record and Clinical Competence. To meet the learning outcomes you must be signed as achieved for all competences to achieve an overall pass grade for the Clinical Practice Assessment Document.

There are the desirable competences that will be difficult to assess as competent in clinical practice due to the limited exposure or non-exposure within the clinical environment. You will find these competences in Part 6 of the assessment document. You will be formatively assessed on these skills through discussion, skills simulation, written work etc. with your named mentor to determine whether you have the knowledge and understanding underpinning these skills.

The process of Mentorship and Assessment of Achievement

- Following confirmation of the placement location, the student should contact the learning environment to identify their mentor and discuss meeting with learning needs and work commitments.
- All students will receive an induction, which will include all introductions to the environment, the other staff and general location of specific equipment and varying types of ambulance. During this time relevant health and safety issues e.g. fire procedures etc. and location of policies and procedures will be discussed.
- The initial interview should identify the learning opportunities available in the pre-hospital environment and enable the student and the mentor to agree common learning goals for the duration of the work-based learning module. Students should identify and discuss possible

places and actions that might help them develop and demonstrate achievement of the practice-learning outcome.

- Approximately half way through the placement (on an agreed date) there will be a mid-point review with the students named mentor. This will allow for feedback on progression and development. From this a plan of action will be agreed to address any specific areas for further development. All outcomes will be reviewed at this point.
- At the end of the practice learning placement the student will have an end-point review with their named mentor. This will allow for a discussion concerning the student performance to take place. A review of performance in relation to the learning goals set at the start of the placement will occur and the student's ability to offer evidence for having demonstrated the achievement of the core practice outcomes will also occur. At this point the relevant outcomes for the module will also be reviewed. These outcomes must be met to a satisfactory (Competent) standard at this stage.

NB. An initial interview, midpoint interview and end of placement interview should be carried out for each placement block and must be recorded in the On-going Achievement Record

- Students are responsible for arranging to meet with named mentors at agreed times in order to complete the mid-point and end-point reviews and for the completion and submission of evidence of achievement of the learning outcomes to the course leader by the dates published.
- The Programme Leader will report all student achievements to the board of examinations.
- In the event of referral as a first attempt the Clinical Placement Leads will ensure that an appropriate opportunity for reassessment is provided.

**COVENTRY UNIVERSITY
FACULTY OF HEALTH AND LIFE SCIENCE**

STUDENT INDUCTION CHECKLIST

NAME OF STUDENT.....DATES OF PLACEMENT.....

PLACEMENT

The following items should be included in your induction into the organisation, preferably on your first day. Please check off the items below when they occur and inform your placement organiser of any items not covered within one week of the start of your placement. This list is not exhaustive and other topics may be covered, which you may note if you wish. **Please show this form to your University Visiting Tutor/Mentor/Ambulance Officer and ask them to sign below to show that they have seen this form and do not foresee any health and safety problems.**

TASK	Date
Introduced to key staff members and their roles explained	
Location of toilet facilities	
Location of rest room, canteen (if relevant) etc.	
Lunch, tea and coffee arrangements	
Place of work	
Dress code	
Work space	
How to answer the telephone, transfer calls and make calls both internally and externally	
Post arrangements	
Car parking	

HEALTH & SAFETY ISSUES	Date
Emergency procedures	
Safety policy received or location known	
Location of First Aid box	
First Aid arrangements (including names of first aiders)	
Fire procedures and location of fire extinguishers	
Accident reporting and location of accident book	
COSHH regulations	
Display Screen Equipment regulations/procedures	
Manual handling procedures	
Protective clothing arrangements	
Instruction on equipment participant will be using (list equipment):	
Other issues	

Signed

Date.....

GUIDANCE NOTES FOR STUDENTS ON PLACEMENTS
(HEALTH AND SAFETY)

ACTION TO BE TAKEN IN AN EMERGENCY:

Information for students on placements

Because of the wide variety of work which is carried out and the possible complex layout of the various buildings it is not possible to produce a set of valid and detailed emergency instructions to cover every situation which may arise. For this reason each employer has its own emergency instructions relating to particular buildings. There should be in every building a notice setting out the procedure to be adopted in case of fire.

This instruction should be studied and committed to memory.

There are certain points which apply to all emergency situations:

- You should commit to memory the standing orders for emergency action. You will have no time to read them in an emergency.
- Remember; you are expected to act in the spirit of the instructions. There is no substitute for common sense.
- The most important consideration at all times is human safety.
- Remember; if you become a casualty someone must rescue you, possibly at personal risk to himself or herself.
- You should act quietly and methodically. You should not rush or attempt to pass others when leaving the scene of an emergency.
- The senior person present should assume control of the situation, ensuring the safe evacuation from the premises of all persons present and be prepared to warn the Emergency Services, etc., of known specific hazards.

If you have to telephone for assistance in an emergency, the following information must always be given:

1. Who you are
2. Where you are: the location and telephone extension from which you are telephoning
3. The nature of the emergency and what services are required
4. The exact location where assistance is required

You should ensure that the message has been correctly received by asking for it to be repeated back to you.

It is essential that the location is clearly defined. Local terminology should not be used because for instance, "the research site" means very little to the Emergency Services.

It is important always to give the correct name for the building and the street where it is located, if the post code is known that should also be provided.

Thank you.

PART 2

CLINICAL SKILLS

&

DRUG ADMINISTRATION

RECORD

Clinical Skills & Drug Administration Record

YOU are required to attend all lectures. These include core clinical skills and drug administration. You will be taught relevant theory including anatomy and physiology and application of practice through practicing skills in the clinical laboratory environment within the university. All clinical skills and administration of drugs taught will be signed by the appropriate teaching staff. This will confirm that you are deemed safe and knowledgeable to perform the skill under direct supervision of a named and/or associate mentor/paramedic.

You can **ONLY** practice these skills and administer the drugs under the supervision of a named/associate mentor/paramedic. Under **NO** circumstances can the student practice the skills or administer the drugs if they are **NOT** signed by teaching staff in the university. In addition the student **MUST NOT** practice any skill or administer drugs unsupervised.

PLEASE NOTE:

The Medicines and Healthcare products Regulatory Agency (MHRA), (2008) advise that 'Paramedics' can administer certain medicines on their own initiative for immediate, necessary treatment of sick and injured persons and provide a list of Prescription Only Medicines under the paramedic exemption list. **The legal** provisions for individuals do not cover all the medicines listed in the guidelines issued by the Joint Royal Colleges Ambulance Liaison Committee (JRCALC). These additional medicines are generally only available to paramedics in the course of the business of an ambulance trust or other body entitled to receive wholesale supplies of an extended range of medicines.

Student paramedics are not covered under the MHRA paramedic exemption list.

IT IS ILLEGAL FOR ANY REGISTERED PARAMEDIC TO INSTRUCT/SUPERVISE A PARAMEDIC STUDENT TO ADMINISTER THE DRUGS LISTED IN THE PARAMEDIC EXEMPTION MEDICINES AND CERTAIN MEDICATIONS LISTED IN THE JRCALC.

UNDER NO CIRCUMSTANCES ARE STUDENT PARAMEDICS ALLOWED TO ADMINISTER CONTROLLED DRUGS AND THOSE DRUGS UNDER THE PARAMEDIC EXEMPTION MEDICINES

The following drugs can be administered by a **STUDENT PARAMEDIC** (once signed by University staff) under direct supervision of a mentor and/or an appropriately qualified registered paramedic.

- Adrenaline 1:1000 (IM)
- Aspirin
- Chlorphenamine
- Entonox
- GTN
- Glucagon (IM)
- Hypostop
- Hydrocortisone Injection (IM)
- Ipratropium Bromide (Atrovent)
- Naloxone Hydrochloride
- Oxygen
- Paracetamol (Tablet & Calpol)
- Salbutamol

Atropine & Pralidoxime combi-pen can be used for self-administration in nerve agent incidents but cannot be administered to the public. For further details on administration for student paramedics:

https://www.collegeofparamedics.co.uk/news/archive/2011/08/08/paramedic_exemption_medicines_pre-registered_student_paramedics

List of Signatories and Designation of Teaching Staff (only) at Coventry University

*Not to be used by paramedics/mentors

Name (Block Letters)	Designation	Signature	Date

**Record of Clinical Skills & Drug Administration
University Block**

Clinical Skill	Signed	Date
Basic Airway Assessment & Management Airway adjuncts (OP, NP), Head Tilt, Chin Lift, Oxygen masks, flow rates, Assisted ventilation		
3 lead ECG interpretation 12 lead ECG application		
Respiratory/ Chest Assessment, Inspection, palpation, percussion, auscultation,		
Cardiovascular Assessment Manual/ Automated BP, pulses, ECG, SPO2		
Neurological Assessment AVPU, GCS, (inc: pupillary responses)		
Abdominal Assessment Inspection, palpation, percussion and auscultation		
Stroke Assessment (FAST) and management		
Administration of drugs taught within yr1		
Basic Life Support Adult and Paediatric BLS Resuscitation Council (UK) 2010 Guidelines		
Primary & Secondary Survey Assessments		
Trauma C- spine injuries & Immobilisation		
Extrication & Road Traffic Collisions (RTC's)		
Imminent Birth Managing a Normal Delivery		

PART 3

**ON-GOING
ACHIEVEMENT RECORD
(OAR)**

On-going Achievement Record

Guidance Notes

This on-going achievement record forms part of the continuous assessment of clinical practice. It is designed to support your progression through the course and to enable your named mentor to confirm on-going achievement at the end of each practice placement block. It also enables monitoring of your attendance in order that the HCPC requirement for hours can be met. You must therefore maintain this document for the whole course as evidence for progression during each placement

For all Placement blocks you and your named mentor must meet together at the initial, midpoint and end of the placement blocks to document achievements, possible development needs and any concerns. This is then shared with your Personal Tutor.

At the start of each placement block you will also be required to complete a number of self-assessments. You must complete the self-assessment in the Clinical Placement Summary and complete a SWOT analysis and action plan prior to your initial meeting with your named mentor. Completing the SWOT analysis will enable to identify your strengths, weaknesses, opportunities and threats in relation to your practice learning and progression towards your summative assessment. You will then be required to complete an action plan to identify your learning outcomes (objectives) you want to achieve in your placement block. Outcomes are

‘Statements of what a learner is expected to know, understand and/or be able to do at the end of a period of learning’.

In other words, the learning outcomes for a placement are what you have to demonstrate to your mentor that you have achieved. The documentation that you complete is the vehicle you use to demonstrate the learning outcomes which you have agreed. When completing your action plan please remember to use the SMART acronym to ensure that your objectives can be achieved in the allocated placement time (see Practice Learning Handbook – appendix 8)

Your completed SWOT and action plan can then be discussed during your initial, mid-point interview and final interviews to measure your progress. It is important to discuss and plan your learning needs and progress in collaboration with your named mentor.

When completing the documentation, please ensure that this is discussed and completed in partnership with you and your mentor.

When completing the Clinical Practice Attendance record you must record the shift using the 24-hour clock and record total number of hours worked for e.g. 06.00 to 18.00 - 12 hours; 18.00 to 02.00 – 8 hours.

All authorised sickness and unauthorised absence taken must also be recorded as follows:

S = Sick

A = Unauthorised Absence/absent

All errors must be crossed out and clearly visible and countersigned by you and your named mentor.
TIPPEX SHOULD NOT BE USED.

It is **YOUR** responsibility to ensure this is signed and kept up to date.

It is checked when you review it with your Personal Tutor at the end of your Placement blocks.

It should reflect that you have negotiated to work with your mentor wherever possible and to experience the range of shifts/weekends and/or nights where required and appropriate

You are responsible for carrying this document from placement to placement.

Please also refer to the Module Guide

Student declaration (to be completed by the student at commencement of Placement)

I give my consent for the sharing of personal confidential information between successive mentors and relevant education providers for the purpose of assessing my progress and fitness to practise

Signed

Print name

Date

Placement Block 1

Record of Clinical Placement Attendance

You are required to complete 520 hours for this practice placement block.

Date Month:	SHIFT		HRS	Station where shift worked	Mentor's Signature
	START	FINISH			
1					
2					
3					
4					
5					
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7					
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24					
25					
26					
27					
28					
29					
30					
31					
TOTAL					

Student's Signature:

Date:

Mentor(s) Signature:

Date:

Placement block 1

Record of Clinical Placement Attendance

Date	SHIFT		HRS	Station where shift worked	Mentor's Signature
	START	FINISH			
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2					
3					
4					
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29					
30					
31					
TOTAL					

Student's Signature:

Date:

Mentor(s) Signature:

Date:

Placement block 1

Record of Clinical Placement Attendance

Date	SHIFT		HRS	Station where shift worked	Mentor's Signature
	START	FINISH			
1					
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29					
30					
31					
TOTAL					

Student's Signature:

Date:

Mentor(s) Signature:

Date:

Placement block 1

Record of Clinical Placement Attendance

Date	SHIFT		HRS	Station where shift worked	Mentor's Signature
	START	FINISH			
1					
2					
3					
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27					
28					
29					
30					
31					
TOTAL					

Student's Signature:

Date:

Mentor(s) Signature:

Date:

Hrs worked in PB1	Sick/Absent hrs in practice	Sick/Absent hrs in university	Hrs to make up 209PM	Personal Tutor Signature	Date

Clinical Placement Summary – Placement Block 1

Placement Area/s:

Mentors Name/s

Behaviour and Value matrix

<u>Attitudes / Behaviours / Values</u>	Self assessment	Mid-point	Final Interview	U
	(student)	(mentor)	(mentor)	
Attendance / Time Keeping	U S G	U S G	U S G	UNSATISFACTORY Urgent review by PT & Placement Lead
Appearance / Uniform	U S G	U S G	U S G	
Professionalism	U S G	U S G	U S G	
Caring Nature / Empathy	U S G	U S G	U S G	
Conscientiousness	U S G	U S G	U S G	
Team work	U S G	U S G	U S G	
Interest / Involvement	U S G	U S G	U S G	
Initiative / Resourcefulness	U S G	U S G	U S G	
Engagement	U S G	U S G	U S G	
Problem solving	U S G	U S G	U S G	

<u>Skills & Knowledge</u>	Self assessment	Mid-point	Final Interview	G
	(Student)	(Mentor)	(Mentor)	
Communication	U S G	U S G	U S G	GOOD PERFORMANCE No action required Well Done! Formative
Applying theory to practice	U S G	U S G	U S G	
Evidence Based Practice	U S G	U S G	U S G	
Scope of Practice	U S G	U S G	U S G	
Health Promotion	U S G	U S G	U S G	
Numeracy	U S G	U S G	U S G	
Dexterity / Skill	L/E U S G	U S G	U S G	
Clinical skills	L/E U S G	U S G	U S G	
Verbal Reporting	L/E U S G	U S G	U S G	
Documentation	L/E U S G	U S G	U S G	

Action Plan/s (based on any areas of practice identified above as unsatisfactory at the midpoint interview)

You may “sign post” where additional action plans are to be found in the student portfolio

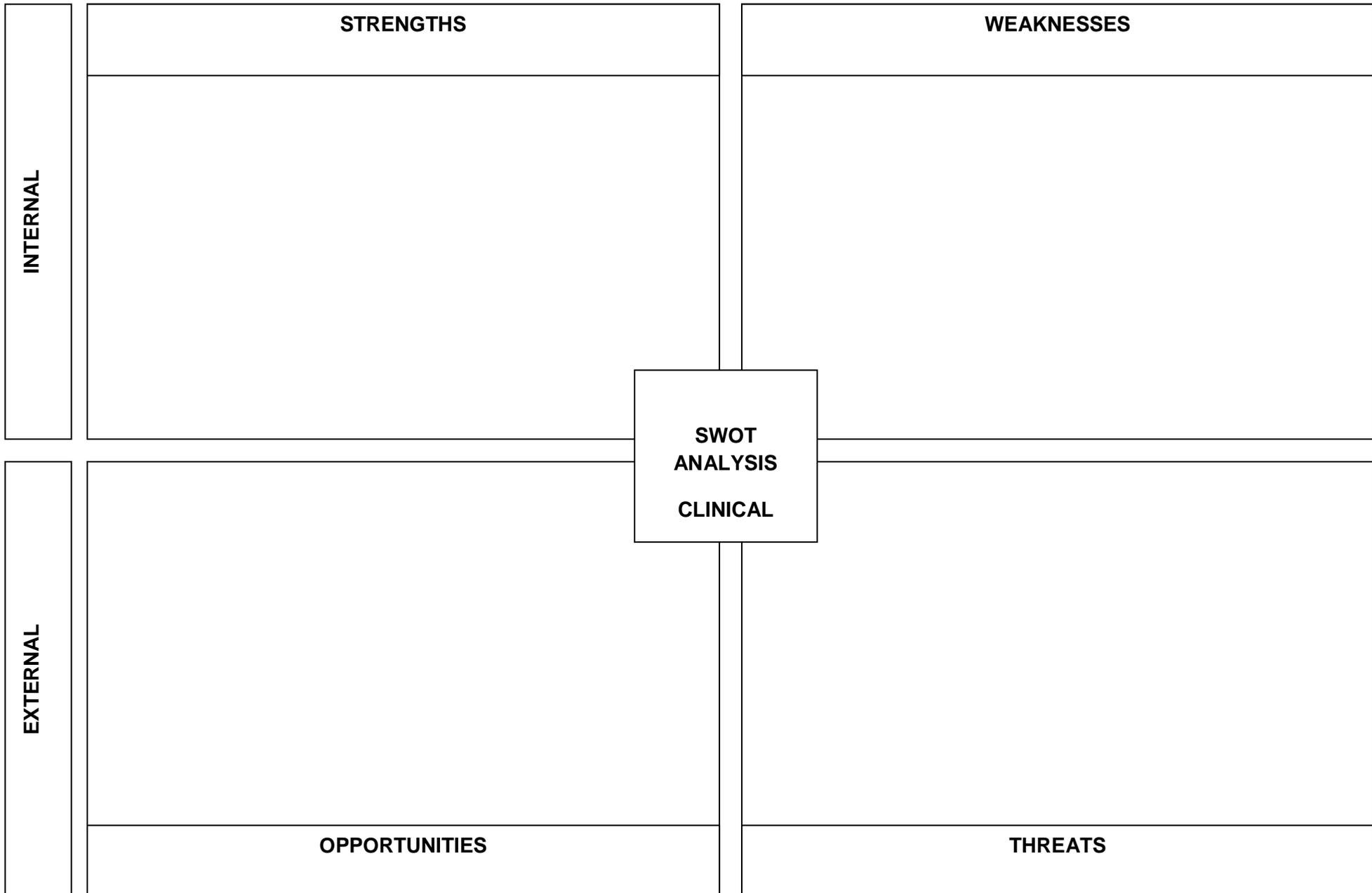
Student Signature:

Date:

Mentor Signature:

Date

SWOT ANALYSIS – PB 1



Action Plan

Overall Goal: Objectives	Action	Resources Required	Evidence Used	Achieved by

Student's signature:

Date

Mentors Signature:

Date

Initial Interview

Mentor Remarks (Continue overleaf if necessary)

Achievement:

Specific areas for development:

Student Remarks (Continue overleaf if necessary)

Personal Tutor Remarks (if required)

(Continue overleaf if necessary)

Mid-Point interview

Mentor Remarks (Continue overleaf if necessary)

Achievement:

Specific areas for development:

Student Remarks (Continue overleaf if necessary)

Personal Tutor Remarks (if required)

(Continue overleaf if necessary)

Mentor Remarks (Continue overleaf if necessary)

Achievement:

Specific areas for development:

Student Remarks (Continue overleaf if necessary)

Personal Tutor Remarks (if required)

(Continue overleaf if necessary)

PART 4

THE

ASSESSMENT

FRAMEWORK

The Assessment Framework

Assessment Process - Formative and summative assessment

The assessment of each competency consists of formative assessment and summative assessment. Formative assessment refers to what is learnt and how it is learnt. This should involve a continuing and systematic appraisal of the students' performance throughout their clinical placement to determine the degree of mastery of the given learning task. It also helps to focus on a particular learning necessary to achieve mastery of the required competences. Formative assessment is linked to the initial and midpoint interview and is part of the continuous assessment. The purpose of the interviews is to identify the learning needs and to discuss your student progression (Gopee 2011). This will allow the student to observe, discuss and practice the skill in preparation for their summative assessment

Summative assessment refers to what to learn and what counts. This is linked to the final interview and this will determine whether the student can competently & consistently undertake the competence without direct supervision in a safe, effective manner to ensure they are fit to practice at the point of registration with the Health Professions Council as a Registered Paramedic.

Assessment of Learning - Educational Taxonomy

To determine the achievement of competences the assessment process is based on the Steiner and Bell (1979) Experiential Taxonomy. Experiential learning is learning by doing rather than by merely being informed by others of a particular topic and is achieved by building simulation from the learning experience (Kolb 1984). Taxonomy refers to a classification or structure to assess student learning. An educational taxonomy can identify elements relating to progress and attainment of skills, and intellectual growth, which we can use as a tool to measure student achievement.

The Steiner and Bell (1979) Experiential Taxonomy is widely used in healthcare professions for assessment of student learning. This experiential taxonomy considers experience as a whole entity and identifies the developing levels of learning which when applied to the practice situation leads to a natural progression of clinical competence through progression of five experiential categories (Steiner and Bell 1979)

1. Exposure	Lowest
2. Participation	↓
3. Identification	
4. Internalisation	
5. Dissemination	Highest

Without tangible evidences the starting point must be the exposure level.

Figure 1 provides a description of some student activities, which are included in each category and the point allocated for performance in that category.

Figure 1. Taxonomy levels and criteria

<p>Exposure</p> <p>Student is exposed to the experience.</p> <ul style="list-style-type: none"> • Shows awareness but lacks knowledge and skills • Listens, observes, asks questions • Reacts to the experience and recognises own limitations and responsibilities • Reflects on learning experience and explores the implications of these reflections • Show willingness to participate 	<p>Participation</p> <p>Student can reproduce the activity encountered at the exposure level</p> <ul style="list-style-type: none"> • Begins to articulate underlying rational skills for the activity • Shows recall of ideas and concepts • Introduces and discusses background information • Practices under supervision in a standardised way • Uses appropriate interpersonal behaviour • Explains activities when questioned 	<p>Identification</p> <p>Student is able to carry out the activity competently</p> <ul style="list-style-type: none"> • Recognises and explains situations where the activity is applicable • Able to assess own strengths and limitations • Utilises theory and research in relation to carrying out the activity • Beginning to show initiative, recognises standards, values and qualities required • Act on one's own without having to be prompted
<p>Internalisation</p> <p>Student identifies with the activity so that it becomes second nature to the student</p> <ul style="list-style-type: none"> • Shows confidence in own activity • Able to reflect experience in an objective manner • Able to apply new knowledge to new situation • Shows creativity • Utilises research in relation to the activity • Undertake clinical skills in a safe and consistent manner • Consistently applies theory to practice to a range of clinical situations 	<p>Dissemination</p> <p>Student acts as a role model, informing others and promoting the experience to others</p> <ul style="list-style-type: none"> • Competent and demonstrates the ability to teach others • Illustrates motivational abilities in relation to others • Is able to carry out the activity in complex unfamiliar situations • Acts as a role model • Is able to discuss the wider influences: social and economic and how these impact on practice 	

STEINAKER, N. W. AND BELL, M. R. (1979) *The Experiential Taxonomy. A New Approach to Teaching and Learning*. London: Academic Press.

Competency Achievement

To achieve a competent level the student must achieve the minimum level of **Identification** (Level 3). Students must be able to perform and demonstrate knowledge and understanding against the criteria for each competence. The process of the assessment commences with the **formative assessment** linked to the initial interviews to identify learning needs. This forms the basis of the discussion. This is followed by midpoint interview to discuss progress through the **Exposure** and **Participation** levels. The **summative assessment** linked to the final interview will identify whether the student has progressed and achieved the level of **Identification**.

For example

Stage 1: Exposure

For each competency, there is a formative assessment where the student can observe the mentor or Registered Paramedic observe the skill and begin to ask questions.

Stage 2: Participation

The student has the opportunity to discuss and practice the skill on several occasions under direct supervision. The student begins to identify the rationale for undertaking the skill and can provide explanations when questioned

Stage 3: Identification

The student is able to act on one's own and use initiative to safely and consistently undertake the skill under indirect supervision. Can confidently discuss rationale for undertaking the skill and can demonstrate the required underpinning knowledge and understanding for that competence.

When making a judgement on student achievement there is a variety of evidence that can be considered

1. Direct observation by Mentor

Observing and supervising the student practice in relation to their competencies.

E.G. Observing the student carrying out a patient history

Observe their willingness to practice

2. Discussion.

Discussion allows assessment of the student's knowledge and understanding

E.G Ask the student what are the clinical norms for vital signs across the age range.

What are the current national guidelines underpinning practice in relation to the

Competence

3. Supplementary Evidence

Underpinning knowledge and application of learning.

E.G this may be through written reflection of work

Written reports, completion of patient documentation

Short essays

The summative assessment will be graded a pass or fail. If the student does not achieve the required level and is awarded a fail, a clear written rational for this must be made by the student and the mentor.

PART 5

SUMMATIVE ASSESSEMENT

**ACHIEVEMENT OF
COMPETENCES**

COMPETENCE: Demonstrate awareness of scene management and safety

The student should:

- Practice in accordance with current legislation and national, regional and local guidelines, protocols and policies
- Assess the situation and identify potential threats to personal safety and that of others
- Minimise risks to bystanders where possible
- Monitor situation and report/action changes as required
- Remove/protect patient from hazards or further injury where possible
- Request additional resources/personnel when appropriate
- Ensure all appropriate and available Personal Protection Equipment is utilised

The student should demonstrate developing knowledge and understanding of:

- Apply current legislation and national, regional and local guidelines, protocols and policies
- Their own role and responsibilities and the responsibilities of others professional agencies
- Communication methods and chain of command
- Conflict resolution strategies
- Hazardous materials commonly transported around the country
- Common domestic substances and the manner in which they may be encountered

Cross Reference to

Learning Outcome:

HCPC SOP
All

FORMATIVE ASSESSMENT

The student has observed, discussed and practiced the skill under direct supervision of a registered paramedic/mentor

Registered Paramedic/Mentor to sign & date when achieved

Observed	Signed:	Date:
Discussed	Signed:	Date:
Discussed	Signed:	Date:
Practice under supervision	Signed:	Date:
Practice under supervision	Signed:	Date:

SUMMATIVE ASSESSMENT

The student can competently & consistently undertake the competence under supervision in a safe, effective manner

Please delete as appropriate: Achieved / Not achieved (Please comment reasons for not achieving)

Mentors signature: _____ **Date:** _____

Students signature: _____ **Date:** _____

Mentor Comments:

Student Comments:

COMPETENCE: Demonstrate safe, effective and appropriate care when undertaking a primary survey

The student should:

- Take steps to ensure safety and minimise risks to yourself, the patient and others in the immediate environment
- Communicate clearly with patient in an appropriate manner
- Conduct assessment, and management systematically in order of priority
- Recognise time critical patients and make appropriate decisions in the management of the individual
- Practice in accordance with current legislation and national, regional & local guidelines, protocols and policies
- Demonstrate the ability to respect the patient's privacy, dignity, cultural and religious beliefs

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and protocols
- How to monitor and respond to changes in patients condition
- Understands clinical norms of patients across ALL age ranges, including:
 - AVPU
 - Respiratory rate
 - Pulse rate
 - Peripheral oxygen saturation
 - Pupil reactions
 - Blood glucose level
- The indicators of high risk or life-threatening conditions in relation to the above parameters

Cross Reference to

Learning Outcome:

HCPC SOP

ALL

FORMATIVE ASSESSMENT

The student has observed, discussed and practiced the skill under direct supervision of a registered paramedic/mentor

Registered Paramedic/Mentor to sign & date when achieved

Observed	Signed:	Date:
Discussed	Signed:	Date:
Discussed	Signed:	Date:
Practice under supervision	Signed:	Date:
Practice under supervision	Signed:	Date:

SUMMATIVE ASSESSMENT

The student can competently & consistently undertake the competence under supervision in a safe, effective manner

Please delete as appropriate: Achieved / Not achieved (Please comment reasons for not achieving)

Mentors signature: _____ Date: _____

Students signature: _____ Date: _____

Mentor Comments:

Student Comments:

COMPETENCE: Demonstrate safe, effective and appropriate care for patients with respiratory complaints

The student should:

- Ensure that a primary survey is conducted without delay
- Obtain an accurate history of the patient's condition
- Identify:
 - the nature and severity of the individual's complaint
 - the likely causes of the individual's complaint
 - the implications of pre-existing and other medical problems which the individual may have
- Ensure an holistic clinical assessment is performed
- Conduct appropriate observations and interprets results
- Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
- Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and protocols relevant to patients with respiratory complaints
- Anatomy, physiology and pathophysiology's relevant to respiratory complaints
- The features that can be used to develop a differential diagnosis for patients
- Understands how respiratory complaints may affect clinical norms of patients across ALL age ranges , including:

AVPU	Respiratory rate	Pulse rate
Blood pressure (non-invasive)	Temperature	Peripheral oxygen saturation
Pupil reactions	Glasgow coma score	ECG rhythm recognition
Blood glucose level	Peak flow measurement	Auscultation & Percussion
- The importance of a systematic and logical approach to holistic patient assessment and management
- The risks associated with making assumptions about a patient's health status
- Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

Learning Outcome:

HCPC SOP

ALL

FORMATIVE ASSESSMENT

The student has observed, discussed and practiced the skill under direct supervision of a registered paramedic/mentor

Registered Paramedic/Mentor to sign & date when achieved

Observed	Signed:	Date:
Discussed	Signed:	Date:
Discussed	Signed:	Date:
Practice under supervision	Signed:	Date:
Practice under supervision	Signed:	Date:

SUMMATIVE ASSESSMENT

The student can competently & consistently undertake the competence under supervision in a safe, effective manner

Please delete as appropriate: **Achieved / Not achieved (Please comment reasons for not achieving)****Mentors signature:** _____ **Date:** _____**Students signature:** _____ **Date:** _____**Mentor Comments:**

Student Comments:

COMPETENCE: Demonstrate safe, effective and appropriate care for patients with cardio-vascular complaints

The student should:
 Ensure that a primary survey is conducted without delay
 Obtain an accurate history of the patient's condition
 Identify:
 the nature and severity of the individual's complaint
 the likely causes of the individual's complaint
 the implications of pre-existing and other medical problems which the individual may have
 Ensure an holistic clinical assessment is performed
 Conduct appropriate observations and interprets results
 Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
 Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:
 Current legislation and national, regional and local guidelines, policies and protocols relevant to patients with cardiovascular conditions
 Anatomy, physiology and pathophysiology's relevant to cardiovascular conditions
 The features that can be used to develop a differential diagnosis for patients
 Understands how cardiovascular complaints may affect clinical norms of patients across ALL age ranges , including:
 AVPU Respiratory rate Pulse rate
 Blood pressure (non-invasive) Temperature Peripheral oxygen saturation
 Pupil reactions Glasgow coma score ECG rhythm recognition
 Blood glucose level Auscultation Percussion
 The importance of a systematic and logical approach to holistic patient assessment and management
 The risks associated with making assumptions about a patient's health status
 Why it is important to ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

Learning Outcome:	HCPC SOP ALL
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FORMATIVE ASSESSMENT

The student has observed, discussed and practiced the skill under direct supervision of a registered paramedic/mentor

Registered Paramedic/Mentor to sign & date when achieved

Observed	Signed:	Date:
Discussed	Signed:	Date:
Discussed	Signed:	Date:
Practice under supervision	Signed:	Date:
Practice under supervision	Signed:	Date:

SUMMATIVE ASSESSMENT

The student can competently & consistently undertake the competence under supervision in a safe, effective manner

Please delete as appropriate: Achieved / Not achieved (Please comment reasons for not achieving)

Mentors signature: _____ **Date:** _____

Students signature: _____ **Date:** _____

Mentor Comments:

Student Comments:

COMPETENCE: Demonstrate safe and effective care of patients with neurological complaints

The student should:

- Ensure that a primary survey is conducted without delay
- Obtain an accurate history of the patient's condition
- Identify:
 - the nature and severity of the individual's complaint
 - the likely causes of the individual's complaint
 - the implications of pre-existing and other medical problems which the individual may have
- Ensure an holistic clinical assessment is performed
- Conduct appropriate observations and interprets results
- Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
- Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and protocols relevant to patients with neurological complaints
- Anatomy, physiology and pathophysiology's relevant to neurological complaints
- The features that can be used to develop a differential diagnosis for patients
- Understands how neurological complaints may affect clinical norms of patients across ALL age ranges , including:

AVPU	Respiratory rate	Pulse rate
Blood pressure (non-invasive)	Temperature	Peripheral oxygen saturation
Pupil reactions	Glasgow coma score	ECG rhythm
Blood glucose level	FAST test	
- The importance of a systematic and logical approach to holistic patient assessment and management
- The risks associated with making assumptions about a patient's health status
- Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

Learning Outcome:

HCPC SOP

ALL

FORMATIVE ASSESSMENT

The student has observed, discussed and practiced the skill under direct supervision of a registered paramedic/mentor

Registered Paramedic/Mentor to sign & date when achieved

Observed	Signed:	Date:
Discussed	Signed:	Date:
Discussed	Signed:	Date:
Practice under supervision	Signed:	Date:
Practice under supervision	Signed:	Date:

SUMMATIVE ASSESSMENT

The student can competently & consistently undertake the competence under supervision in a safe, effective manner

Please delete as appropriate: Achieved / Not achieved (Please comment reasons for not achieving)

Mentors signature: _____ **Date:** _____

Students signature: _____ **Date:** _____

Mentor Comments:

Student Comments:

COMPETENCE: Demonstrate safe and effective care of patients with gastro-intestinal complaints

The student should:

- Ensure that a primary survey is conducted without delay
- Obtain an accurate history of the patient's condition
- Identify:
 - the nature and severity of the individual's complaint
 - the likely causes of the individual's complaint
 - the implications of pre-existing and other medical problems which the individual may have
- Ensure an holistic clinical assessment is performed
- Conduct appropriate observations and interprets results
- Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
- Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and relevant to patients with gastro-intestinal complaints
- Anatomy, physiology and pathophysiology's relevant to gastro-intestinal complaints
- The features that can be used to develop a differential diagnosis for patients
- Understands how gastro-intestinal complaints may affect clinical norms of patients across ALL age ranges, including:
 - AVPU
 - Blood pressure (non-invasive)
 - Pupil reactions
 - Blood glucose level
 - Respiratory rate
 - Temperature
 - Glasgow coma score
 - Inspection, Palpation, Percussion & Auscultation
 - Pulse rate
 - Peripheral oxygen saturation
 - ECG rhythm recognition
- The importance of a systematic and logical approach to holistic patient assessment and management
- The risks associated with making assumptions about a patient's health status
- Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

Learning Outcome:

HCPC SOP

ALL

FORMATIVE ASSESSMENT

The student has observed, discussed and practiced the skill under direct supervision of a registered paramedic/mentor

Registered Paramedic/Mentor to sign & date when achieved

Observed	Signed:	Date:
Discussed	Signed:	Date:
Discussed	Signed:	Date:
Practice under supervision	Signed:	Date:
Practice under supervision	Signed:	Date:

SUMMATIVE ASSESSMENT

The student can competently & consistently undertake the competence under supervision in a safe, effective manner

Please delete as appropriate: **Achieved / Not achieved (Please comment reasons for not achieving)**

Mentors signature: _____ **Date:** _____

Students signature: _____ **Date:** _____

Mentor Comments:

Student Comments:

COMPETENCE: Demonstrate safe and effective care of patients with gynaecological complaints

The student should:

- Ensure that a primary survey is conducted without delay
- Obtain an accurate history of the patient's condition
- Identify:
 - the nature and severity of the individual's complaint
 - the likely causes of the individual's complaint
 - the implications of pre-existing and other medical problems which the individual may have
- Ensure an appropriately focused, holistic clinical assessment is performed
- Conduct appropriate observations and interprets results
- Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
- Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and protocols relevant to patients with gynaecological complaints
- Anatomy, physiology and pathophysiology's relevant to gynaecological complaints
- The features that can be used to develop a differential diagnosis for patients
- Understands how gynaecological complaints may affect clinical norms of patients across ALL age ranges , including:
 - AVPU
 - Blood pressure (non-invasive)
 - Pupil reactions
 - Blood glucose level
 - Respiratory rate
 - Temperature
 - Glasgow coma score
 - Pulse rate
 - Peripheral oxygen saturation
 - ECG rhythm recognition
- The importance of a systematic and logical approach to holistic patient assessment and management
- The risks associated with making assumptions about a patient's health status
- Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

Learning Outcome:

HCPC SOP

ALL

FORMATIVE ASSESSMENT

The student has observed, discussed and practiced the skill under direct supervision of a registered paramedic/mentor

Registered Paramedic/Mentor to sign & date when achieved

Observed	Signed:	Date:
Discussed	Signed:	Date:
Discussed	Signed:	Date:
Practice under supervision	Signed:	Date:
Practice under supervision	Signed:	Date:

SUMMATIVE ASSESSMENT

The student can competently & consistently undertake the competence under supervision in a safe, effective manner

Please delete as appropriate: **Achieved / Not achieved (Please comment reasons for not achieving)**

Mentors signature: _____ **Date:** _____

Students signature: _____ **Date:** _____

Mentor Comments:

Student Comments:

COMPETENCE: Demonstrate safe and effective care of pregnant women

The student should:

Ensure that a primary survey is conducted without delay

Obtain an accurate history of the patient's condition

Identify:

the nature and severity of the individual's complaint

the likely causes of the individual's complaint

the implications of pre-existing and other medical problems which the individual may have

Ensure an holistic clinical assessment is performed

Conduct appropriate observations and interprets results

Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols

Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

Current legislation and national, regional and local guidelines, policies and protocols relevant to pregnant women

The anatomical and physiological changes in normal pregnancy

The stages of normal labour and childbirth

Pathophysiology's relevant to problems in pregnancy

The features that can be used to develop a differential diagnosis for patients

Understands how pregnancy and labour may affect clinical norms of patients, including:

Respiratory rate Pulse rate Blood glucose level

Blood pressure (non-invasive) Temperature Peripheral oxygen saturation

Glasgow coma score ECG rhythm recognition

The importance of a systematic and logical approach to holistic patient assessment and management

The risks associated with making assumptions about a patient's health status

Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

Learning Outcome:

HCPC SOP

ALL

FORMATIVE ASSESSMENT

The student has observed, discussed and practiced the skill under direct supervision of a registered paramedic/mentor

Registered Paramedic/Mentor to sign & date when achieved

Observed	Signed:	Date:
Discussed	Signed:	Date:
Discussed	Signed:	Date:
Practice under supervision	Signed:	Date:
Practice under supervision	Signed:	Date:

SUMMATIVE ASSESSMENT

The student can competently & consistently undertake the competence under supervision in a safe, effective manner

Please delete as appropriate: **Achieved / Not achieved (Please comment reasons for not achieving)****Mentors signature:** _____ **Date:** _____**Students signature:** _____ **Date:** _____**Mentor Comments:**

Student Comments:

COMPETENCE: Demonstrate safe and effective care of patients with musculoskeletal complaints

The student should:

- Ensure that a primary survey is conducted without delay
- Obtain an accurate history of the patient's condition
- Identify:
 - the nature and severity of the individual's complaint
 - the likely causes of the individual's complaint
 - the implications of pre-existing and other medical problems which the individual may have
- Ensure an holistic clinical assessment is performed & identify deformity, swelling, bruising, bleeding, type of wound, actual and potential blood/fluid loss
- Perform thorough pain assessment using an appropriate pain assessment tool
- Provide appropriate musculoskeletal support and immobilisation
- Conduct appropriate observations and interprets results
- Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
- Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and protocols relevant to patients with musculoskeletal conditions
- Anatomy, physiology and pathophysiology's relevant to musculoskeletal conditions
- The features that can be used to develop a differential diagnosis for patients
- Understands how musculoskeletal problems may affect clinical norms of patients across ALL age ranges , including:

AVPU	Respiratory rate	Pulse rate	Blood pressure (non-invasive)
Temperature	Peripheral oxygen saturation	Pupil reactions	Glasgow coma score
- Importance of and techniques of limb straightening
- Different methods of immobilisation and equipment used (not exhaustive list):

Cervical collar	Spinal board	Scoop stretcher	Splints	Triangular bandages	Bandages
-----------------	--------------	-----------------	---------	---------------------	----------
- The importance of a systematic and logical approach to holistic patient assessment and management
- The risks associated with making assumptions about a patient's health status
- Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

Learning Outcome:

HCPC SOP

ALL

FORMATIVE ASSESSMENT

The student has observed, discussed and practiced the skill under direct supervision of a registered paramedic/mentor

Registered Paramedic/Mentor to sign & date when achieved

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Discussed	Signed:	Date:
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Practice under supervision	Signed:	Date:
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SUMMATIVE ASSESSMENT

The student can competently & consistently undertake the competence under supervision in a safe, effective manner

Please delete as appropriate: **Achieved / Not achieved (Please comment reasons for not achieving)**

Mentors signature: _____ **Date:** _____

Students signature: _____ **Date:** _____

Mentor Comments:

Student Comments:

COMPETENCE: Demonstrate safe and effective care of patients with wounds and burns

The student should:

- Ensure that a primary survey is conducted without delay
- Obtain an accurate history of the patient's condition
- Identify:
 - the nature and severity of the individual's complaint
 - the likely causes of the individual's complaint
 - the implications of pre-existing and other medical problems which the individual may have
- Ensure an holistic clinical assessment is performed & identify type of wound
- Identifies burn classification
- Perform thorough pain assessment using an appropriate pain assessment tool
- Provide appropriate wound/burn care
- Conduct appropriate observations and interprets results
- Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
- Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and protocols relevant to patients with wounds and burns
- Anatomy, physiology and pathophysiology's relevant to wounds and burns
- The features that can be used to develop a differential diagnosis for patients
- Understands how wounds and burns may affect clinical norms of patients across ALL age ranges , including:

AVPU	Respiratory rate	Pulse rate	Blood pressure (non-invasive)
Temperature	Peripheral oxygen saturation	Pupil reactions	Glasgow coma score
			ECG rhythm recognition
- The importance of a systematic and logical approach to holistic patient assessment and management
- The risks associated with making assumptions about a patient's health status
- Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

Learning Outcome:

HCPC SOP

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Student Comments:

COMPETENCE: Demonstrate safe and effective communication

The student should:

- Demonstrate via a number of different means, including face to face, over the phone, via vehicle radio.
- Ensure confidentiality is maintained during communications
- Practice in accordance with current legislation and national, regional and local guidelines, protocols and policies
- Adapt communication style used to suit the setting
- Correct use of abbreviations, medical terminology and slang when communicating
- Ensure changes to the situation or circumstance are reported to the appropriate personnel
- Be aware of their body language and non-verbal communication
- Keep in regular contact with University/tutors (e.g. progress reports, sickness/absence, assessment support)

The student should demonstrate developing knowledge and understanding of:

- Apply current legislation and national, regional and local guidelines, protocols and policies
- Correct radio procedures when transmitting messages
- The recognised abbreviations in relation to communication
- Alert procedures

Cross Reference to

Learning Outcome:

HCPC SOP

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COMPETENCE: Demonstrate safe and effective moving, handling and patient positioning

The student should:

- Select the most appropriate method of patient transfer in relation to medical and physical needs
- Employ the safe kinetics of lifting
- Identify where and when additional resources are required
- Plan and assess access and egress routes
- Transfer the patients with minimal stress ensuring communication is maintained at ALL times.
- Possess knowledge of the specialist equipment, tools and materials needed for different processes and how to check whether they are working properly
- Performs a dynamic risk assessment throughout ALL aspects of pre-hospital care.
- Practice in accordance with current legislation and national, regional and local guidelines, protocols and policies

The student should demonstrate developing knowledge and understanding of:

- Apply current legislation and national, regional and local guidelines, protocols and policies
- Their own role and responsibilities and the responsibilities of others in relation to moving and handling.
- Health and safety regulations covering your area of work.
- Procedure for conducting a personal risk assessment in relation to moving and handling
- Equipment available in area of work to minimise manual handling risks to both patient and practitioner

Cross Reference to

Learning Outcome:

HCPC SOP

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Mentor Comments:

Student Comments:

COMPETENCE: Demonstrate safe, effective and appropriate care when performing basic airway management

The student should:

- Ensure that a primary survey is conducted without delay
- Recognises the need for intervention
- Uses suction correctly if needed
- Ensures appropriate positioning of the head (considering potential cervical spine injury if necessary)
- Chooses appropriate adjunct of correct size
- Inserts adjunct correctly
- Assesses effectiveness of intervention
- Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
- Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and protocols
- Anatomy, physiology and pathophysiology's relevant to basic airway management
- The different manoeuvres and equipment used for maintaining an open airway
 - Head-tilt chin lift Jaw thrust Chin lift Suction
- The different types of basic airway adjuncts, ventilation devices and their indications and cautions for use
 - Oropharyngeal airway Nasopharyngeal airway Laryngeal mask airway Bag-valve mask
- Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

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COMPETENCE: Demonstrate safe, effective and appropriate care when performing Basic Life Support (BLS) and defibrillation

The student should:

- Identify the need to perform BLS and defibrillation following a primary survey and manage any immediate ABC compromise
- Competently perform cardiac chest compressions at a rate and depth in accordance with current Resuscitation Council Guidelines
- Apply defibrillator pads quickly and appropriately
- Recognise shockable and non- shockable rhythms and act accordingly
- Select the correct energy level and deliver shock safely following ALL safety checks (patient clear, lines down and oxygen away)
- Perform the appropriate pre defibrillation safety checks (5 P's – perspiration, patches, pendants, Playtex, pacemaker)
- Assess and address the 4 H's and 4 T's as is reasonably practicable
- Practice in accordance with current legislation and national, regional & local guidelines, protocols and policies
- Communicate with relatives and/or bystanders in an appropriate manner.
- Ascertain whether there are active advance directives/ Do Not Attempt Resuscitation orders in place.

The student should demonstrate a working knowledge and understanding of:

- Current Resuscitation Council guidelines.
- How the defibrillator delivers the shock, and causes which may alter the shock
- The pathophysiology of both shockable and non-shockable rhythms, and why each rhythm is treated differently.
- Common causes of the 4 H's and 4 T's and the treatments required to address them
- The limits of their own skills and knowledge, and when further assistance is required
- Current legislation, national, regional & local guidelines, protocols and policies for the treatment of individuals presenting with neurological compromise

Cross Reference to

Learning Outcome:

HCPC SOP

ALL

COMPETENCE: Demonstrate safe, effective and appropriate care when performing measurement of blood pressure

The student should:

- Ensure that a primary survey is conducted without delay
- Recognises the need for intervention
- Prepares equipment and patient correctly
- Performs procedure correctly
- Interprets result alongside patient assessment
- Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
- Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and protocols
- Anatomy, physiology and pathophysiology's relevant to conditions which require blood pressure measurement
- The normal parameters of blood pressure across different age ranges
- The relevance of abnormal findings and subsequent management of the patient
- The different equipment used for measuring blood pressure and its correct use
- Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

Learning Outcome:

HCPC SOP

ALL

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COMPETENCE: Demonstrate safe, effective and appropriate care with measurement of temperature

The student should:

- Ensure that a primary survey is conducted without delay
- Recognises the need for intervention
- Prepares equipment and patient correctly
- Performs test and disposes of equipment correctly
- Interprets result alongside patient assessment
- Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
- Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and protocols
- Anatomy, physiology and pathophysiology's relevant to conditions which require temperature measurement
- The normal parameters of temperature
- The relevance of abnormal findings and subsequent management of the patient
- The different equipment used for measuring temperature and its correct use
- Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

Learning Outcome:

HCPC SOP

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COMPETENCE: Demonstrate safe, effective and appropriate care when performing Blood glucose monitoring

The student should:

- Ensure that a primary survey is conducted without delay
- Recognises the need for intervention
- Prepares equipment and patient correctly
- Performs test and disposes of equipment correctly
- Interprets result alongside patient assessment
- Practice in accordance with current legislation and national, regional and local guidelines, policies and protocols
- Ensure that re-assessment and evaluation is performed and treatment plan is adjusted as necessary

The student should demonstrate developing knowledge and understanding of:

- Current legislation and national, regional and local guidelines, policies and protocols
- Anatomy, physiology and pathophysiology's relevant to conditions which require blood glucose assessment
- The normal parameters of blood glucose levels
- The relevance of abnormal findings and subsequent management of the patient
- The different equipment used for measuring blood glucose and its correct use
- Ensure that ALL information is taken into account in reaching a differential diagnosis and need for reassessment

Cross Reference to

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COMPETENCE: Demonstrate safe, effective and appropriate care when undertaking a 3 lead and 12 lead electrocardiogram

The student should:

- Identify the need to conduct an electrocardiogram (ECG)
- Apply limb leads correctly to the wrist and ankle area (or as appropriate), taking care to reduce the risk of artefact.
- Apply chest leads correctly, taking care to reduce the risk of artefact.
- Ensure good electrode contact and utilise appropriate techniques to ensure this.
- Demonstrate competent use of associated equipment
- Practice in accordance with current legislation and national, regional & local guidelines, protocols and policies
- Communicate with people in an appropriate manner.
- Make reasonable efforts to uphold the individuals religious and cultural beliefs

The student should demonstrate a working knowledge and understanding of:

- How the ECG monitor receives and records the trace
- Einthoven's Triangle
- Basic components of the ECG (P waves, QRS complexes and T waves) and how they relate to the cardiac cycle
- The conduction pathway of the heart
- Current legislation, national, regional & local guidelines, protocols and policies for the treatment of individuals presenting with cardiac symptoms

Cross Reference to

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HCPC SOP

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