The EMS Student Preceptor

Roles and Expectations

2 CEU's
What is a Preceptor?

- Any trained individual that works with a student to provide an appropriate clinical learning experience.
- They facilitate the learning experience by helping the student to transition from observer to team member to team leader, and ultimately to independent EMT or Paramedic.
Preceptors

○ can be called mentors, instructors, field training officers.

○ Must be....

○ willing and able.

○ qualified.

○ non-biased.

○ willing to continue to learn.
Preceptors

- The preceptor helps students develop competence during the field internship process.

- He or she provides demonstration, instruction, and guidance.

- He or she evaluates performance within a given set of indicators.
Guidelines for Preceptors

- **Consistent** instruction and evaluation from preceptor to preceptor.

- Performance criteria for students: clear standards for completion.

- Preceptors must remember that there is more than one way to perform most skills. Most important is “do no harm.”
The Preceptor Role

- Define job function
- Know expected outcomes
- Effective communication
- Objective oral and written evaluations
- Identify competency level
- Apply adult learning principles
- Encourage critical thinking
- Recognize impact of non-verbal communication
- Understand the importance of constructive feedback
Preceptor Rights

- Should expect a job description
- Formal training program
- Expected program outcomes
- Evaluation tools
The Preceptor as a Role Model

- Clarity — preceptors understand what is expected and have clear communication with students
- Consistency — unvarying responses
- Openness — preceptors are NOT expected to have all the answers
- Communication — open and honest with active listening
- Accessibility — easy for the student to approach
- Competence — demonstrate up-to-date knowledge
The Preceptor/Educator Role

- Factors influencing learning
  - Environment
  - Culture
  - Intellectual ability
  - Language
  - Learning style
The Preceptor/Educator Role

- Formulate a learning plan
  - Assess
  - Identify
  - Prioritize
  - Goal setting
Preceptor Identified Learning Needs

- Evaluate the student’s current level of competency
- Identify priority of learning needs
- Action plans developed
Instruction

- The preceptor needs to instruct the student and guide him through each potential patient contact.

- During these patient contacts the preceptor is:
  - Watching
  - Listening
  - Guiding the student with prompts when needed
Demonstration

- Where the bar is set. Preceptor needs to show the student what is expected of them and give them a frame of reference.

- For instance: Initial patient assessment

- Preceptor will tell the student how to do an initial assessment step by step “in the real world” and will demonstrate same. “Hello, Mr. Smith. My name is…. What seems to be the problem?”
Prompts

- Once the preceptor knows where the student is headed with his assessment and treatment, he can use prompts as needed to keep the student on track.

- Guide students only when necessary. Let the student be the team leader. There may be missed learning opportunities if you step in too soon.
Prompts

Is what the student is doing:

- Safe?
- Timely?
- Appropriate/pertinent?
- Within local protocol?

- If not, then the preceptor should prompt the student.
Prompts

- **Real-time** – ongoing corrections versus fixes at the end of the call.

- **Verbal** – can be obvious or subtle

  - “Put the pt on 6 liters via nasal cannula”
  - “How much O₂ did you want?”
Prompts

- **Nonverbal** – checks pulse, blood pressure, $\text{SpO}_2$. Provides supplemental $O_2$.

**Advantages:**
- Silent
- Out of patient’s line of sight
- Less distracting to patient
- Student remains “in control”

**Disadvantages:**
- Student might not see
- Student might not understand
Teaching Psychomotor Skills

- Prepare
  - Put learner at ease
  - Find out what they know
  - Make eye contact
  - Don’t overwhelm
Teaching Psychomotor Skills

- Present
  - Tell them what you expect
  - Give brief overview of job
  - Demonstrate the task
  - Emphasize safe work methods
Teaching Psychomotor Skills

- Try-out
  - Student should complete the task
  - Have them explain the steps of a process
  - Correct student’s performance if needed
  - Reinforce correct performance
Teaching Psychomotor Skills

- Follow-up
  - Encourage questions
  - Check their knowledge
  - Model desired behavior
  - **Always** tell them how they are doing
Evaluating your student

- **Ask yourself:**
  - If the student graduates, could I work with him?
  - If the student graduates, would I feel comfortable with her caring for a member of my family?

- **Were the student’s actions**
  - Timely?
  - Safe?
  - Appropriate?
  - Within local protocol?
Maybe you’re uneasy because there is unacceptable behavior, but it is not occurring during a patient contact?

Again, ask yourself: could I work with this person? Would I feel comfortable being around them?

Part of precepting is teaching your student what is acceptable and what is not. Soft skills are a big part of everyday life as well as the work environment.
Remember:

- These are adult learners.
- You may need different strategies for different students.
- Never assume the student is seeing what you’re seeing.

Remember to:

- Teach
- Guide
- Evaluate
- Document
Dos and Don’ts

- **DO**
  - Be a positive role model
  - Meet with your student prior to shift start to discuss student goals and to answer questions
  - Address any problems as soon as they arise
  - *Remember you were once in their shoes*
Do

- Maintain professionalism in attitude
- Display confidence
- Refrain from gossip
- Offer positive reinforcement
- Take the time to explain skills and treatments used
DO

- Read the student’s entire patient care report and critique together.

- Make sure you sign in all places you are required to sign, on both the patient care report as well as the time sheet.

- Make sure you print your name in the designated space on both the patient care report as well as the time sheet. We need to know who the preceptor was.
DON’T

- Impede the student’s ability to learn with busy work
- Always use the same teaching methods
- Take out frustrations on students
- Sign student paperwork without thorough review.
DON’T

- Substitute the student for staff
- Expect perfection right from the start
- Provide negative reinforcement or chastise the student publicly, instead review the call and discuss what could have been handled differently.
“Good Students”

“Good students” result from the student’s ability to:

- Make good decisions
- Multitask
- Demonstrate good affective behavior

Psychomotor skills are usually not considered critical indicators of student or team leader performance.
“Difficult Students”

- 10% of students cause 90% of our headaches.
- Require more time and effort.
- Require different teaching strategies.
- May not make good paramedics if they simply cannot learn.
- Poor communication skills
- Poor affective behavior
- Poor performance of physical skills
Rights of Students

- Understand their learning needs
- Active participant
- Reads and follows all policy manuals
- Completes all competencies
- Completes all evaluations
Conflicts / Issues

- If a conflict arises, contact the program administrator or clinical coordinator and advise them of the situation.

  **SFCAD Point of Contact:**
  - Randall Davis, Education Coordinator

- If there is a personal conflict, do not let it affect your relationship with the student. If it is unresolvable, request that the student be put with a different preceptor.
Conflicts / Issues

- If there is an accidental exposure or in the case of an accident, have the student notify their clinical coordinator and fill out the necessary paperwork. Fill out your witness account of the incident and let the student keep a copy of this incident report.
Evaluations

- Will work both ways - you evaluate the student as an aspiring Paramedic, and the student evaluates you as a teacher and mentor.

- Students like to be challenged, taught, and given the opportunity to learn. Be one of the preceptors that students can’t wait to ride with.
Evaluations

- Don’t just “go down the line’” marking things along the way. Give it some thought, the student wants to know what they can improve on. Don’t let the students fill out their own evaluations.

- Follow the written feedback with oral feedback, or vice versa. This gives the student the opportunity to ask further questions.
THANK YOU!

- For being there to help students learn and realize their potential.

- For your time and effort to make sure students get the best learning experience possible.

- For making sure students become the best that they can be. After all, we all know it may be us or our family they will have to treat one day!
CLASSMARKER TEST

BE SURE TO COMPLETE THE SHORT QUIZ AT THE END. HERE IS THE LINK:

CLICK HERE TO TAKE THE TEST