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TC & MH - V6

Guidance for Mentors and Paramedic Trainees on Yorkshire Ambulance Service & Acute Trust Placements

Table of Contents

Guidance for Mentors and Paramedic Trainees on Yorkshire Ambulance Service Acute Trust Placements	
Introduction	4
Background	5
Placements	5
Pharmacological Intervention	6
Programme Structure and Expectations of Trainees	7
Year 1	7
Placement One	7
Placements Two & Three	7
Core skills and OSCE completion (prior to start of placement one)	8
Minimum threshold achieved by end of Year 1 – Academic Level 4	8
Year 2	9
Placements One & Two	9
Placement Three	10
Core skills and OSCE completion (throughout Year 2)	10
Minimum threshold achieved by end of Year 2 – Academic Level 5	11
Year 3	12
Placements One & Three	12
Placement Two	12
Core skills and OSCE completion (throughout Year 3)	13
Minimum threshold achieved by end of Year 3 – Academic Level 6	13
Competency Standards & Assessment	14
Orientation Checklist	14
Competency Standards	14
Academic Level	15
EPAD Assessment	
Mid-point Assessment	16
End-Point Assessment	
Placement Checklist	19
Contact Details	20
Absence Reporting	21
YAS Placement	21
Acute Trust	21
Incidents/Accidents on Placement	
Post-Incident Care	
Raising Concerns	
Student Orientated	

Placement Orientated	23
Glossary of Terms	24
References	25
Appendices	26
Appendix 1 - Skill set for Student Paramedics during clinical placements with YAS2	26
Appendix 2 – Orientation Checklist	28

Guidance for Mentors and Paramedic Trainees on Yorkshire Ambulance Service (YAS) & Acute Trust Placements

Introduction

In 2017, the University of Hull was validated by the Health & Care Professions Council (HCPC) to deliver a BSc (Hons) Paramedic Science programme. Practice placements form an integral part of this programme and a paramedic trainee's practice experience is one of the most important parts of the educational preparation process to becoming a qualified paramedic. This guidance has been developed to provide you with an understanding of your role in supporting paramedic trainees while they are undertaking practice placements with you. Furthermore, it explains the purposes of acute trust placements and why paramedic trainees must attend NHS placements as part of this programme.

We would like to take the opportunity to thank you for your support and time in supervising and mentoring a paramedic trainee. Although this can add extra pressure and commitment to your already busy clinical roles, observing and supporting the trainees to develop into competent paramedics can be very rewarding as a clinical mentor. If you feel you need additional support in mentoring a paramedic trainee please, do not hesitate to contact either your organisation's practice learning support team or a member of the paramedic programme team at the University of Hull.

This guidance should be read in conjunction with the programme handbooks (Practice Assessment Documents Years 1, 2 & 3) which provide more detail about specific learning outcomes that need to be met in clinical practice placements.

Background

There is a drive through UK health policy to shift care, where possible, from acute hospital settings to community based primary and secondary care services (Department of Health (DH), 2005). In order to meet patient needs in community-based healthcare, health professionals, which includes paramedics, need to expand their clinical skills and knowledge of services that provide and support healthcare. To assist the paramedic trainee in acquiring the necessary clinical skills, but also a broader understanding of healthcare and the needs of patients, they need to have practice experiences in a wide range of clinical settings (Ruston & Tavabie, 2011). 'Road-ready' paramedics (Lucas et al., 2014:242) need to be more than just emergency responders, and the modern paramedic is required to be a holistic, person-centred health practitioner (Lucas et al 2014:242). Therefore, the paramedic trainee needs experiences that include prehospital, hospital emergency care, chronic illness, mental health, midwifery, dementia and end of life care to develop both clinical and non-clinical skills.

As part of the paramedic programme at the University of Hull, trainees will be allocated clinical practice placements in a range of NHS placements at specific points in each academic year. The placements are intended to consolidate their knowledge and skills from the theory sessions and introduce the trainees to a wide range of different non-emergency settings. This aims to develop transferable skills and increase their knowledge of how the paramedic interacts with the overall healthcare system.

Placements

Paramedic trainees are expected to attend all allocated placements and should be prepared to travel, sometimes at a distance, to placement areas. They are also expected to be prepared to work days, nights and weekends as necessary. In all placements, they should be working an average of 37.5 hours per week. Paramedic trainees will have supernumerary status, which means they are not employed, or form part therein, of the local workforce; they are in addition to and over and above the normal workforce numbers. Placements will be allocated by the University and the YAS placements team. Therefore, students must not arrange or amend any placement without making a formal request through the University and/or YAS placements team.

The clinical practice placements will be undertaken in healthcare settings within the University of Hull's usual placement circuit, which will provide them a range of experiences. Their acute trust clinical placements will feature practical supervised experience in, for example, operating theatres, coronary care units, minor injury centres, accident and emergency departments, maternity, mental health and children's units. This will ensure they have the opportunity to work alongside a range of qualified health and social care and emergency care staff, to enable and encourage active participation within the multidisciplinary team and facilitate interprofessional learning. Placement hours will be confirmed by the named mentor at the end of the scheduled placement through PebblePad.

Pharmacological Intervention

Paramedic trainees may not administer any pharmacological intervention to any patient under any circumstances, until they are registered with the HCPC as a paramedic in their own right. The only caveat to this is whilst paramedic trainees are on placement with YAS; YAS will authorise higher education institution students to undertake parenteral medicine administration in accordance with Schedule 19 of the Human Medicines Regulations 2012, where administration is for the purpose of saving life in an emergency (see Appendix 1 for further details).

Programme Structure and Expectations of Trainees

Placement Overview	Purpose of Placement	
Year 1		
 Placement One (December) 2 weeks: Introduction to healthcare (acute care) 	This is the first clinical placement of the programme. Trainees will have only been at the university for 10 weeks. The placement is a short experience to introduce the trainees to the hospital environment. They are expected to be mainly observational and developing their knowledge and skills in fundamental aspects of care such as professionalism, collaborative working, communication strategies and patient interaction. This could for example include assisting a patient in essential care and/or hygiene routines.	
 Placements Two & Three (March – May & July - August) 13 weeks: Emergency care within YAS Introduction to healthcare (acute care) 	This is the student's first experience of both the ambulance and acute care disciplines. These placements provide an introduction into these respective systems of care. The student should start to formulate theory/practice links between the prehospital and wider healthcare environment. This includes, but is not limited to, patient communication, interaction and consent. The student should explore how professional values, dignity and respect influence patient interaction in accordance with the HCPC code of conduct, ethics and performance. Additionally, the student should be formulating a foundation for effective team	

working as well as problem solving skills,
incorporating safe and effective
professional communication throughout;
acknowledging the challenges and
importance of inter-professional and
interagency working.
Achieve competencies in the e-practice portfolio.

Core skills and OSCE completion (prior to start of placement one)

- Communication, ethics, dignity, respect and professional behaviours
- Adult basic life support & defibrillation
- Moving and manual handling
- Documentation and record keeping
- Patient assessment (primary & secondary survey) including appropriate intervention (within the scope of practice covered by theoretical sessions on modules:
 - Clinical Practice Education 1
 - Foundations of Professional Practice
 - Professional and Contemporary Issues in Professional Practice

Minimum threshold achieved by end of Year 1 – Academic Level 4

The student observes others undertaking the activity, can accurately describe it and is a helper. The student demonstrates acceptable performance under direct supervision and is a knowledgeable observer. The student has observed or been oriented to the experience/activity and has participated and assisted in the activity/experience where appropriate. The mentor will facilitate exposure to the experience/activity and observes the student's performance including supporting the student in participation whilst observing performance.

Please see YAS guidance (Appendix 1) for year 1 skills matrix – only to be observed whilst on YAS placements.

Year 2

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Placements One & Two (November - December & March - May) 13 weeks:

- 6 weeks acute trust (split into three, two week rotations through anaesthetics 1, anaesthetics 2, maternity, mental health, primary care (minor injuries & illness) & paediatrics)
- 7 weeks emergency care within YAS
- All year 2 placements reinforce those experiences sought in year 1. Therefore, the following expectations/competencies are in conjunction with those already prescribed for year 1.
- Demonstrate understanding of physical health assessments related to each of the main body systems with an applied knowledge and understanding of anatomy and pathophysiology.
- Evaluate the patient's physical condition through a systematic approach to health history taking and demonstrate the ability to make reasoned judgements relating to the investigation, interventions, treatments and referral of patients.
- Prioritise diagnostic investigations and make decisions or referrals appropriate to clinical speciality.
- Undertake examination of the key organ systems using a system based approach.
- Understand and demonstrate advanced airway management skills for those patients requiring airway maintenance. This should follow a step-wise approach, defaulting to the most appropriate intervention through critical analysis and decision making (manual techniques, OP, NP, SAD, ETI (not in YAS)).
- Demonstrate a range of clinical skills in a simulated environment utilising a range of health care equipment.

Demonstrate understanding of physical • Placement Three (July - September) 6 health assessments related to common weeks: illness / injury presentation in the prehospital environment. 6 weeks acute trust (split into three, two Evaluate the patient's physical condition week rotations through anaesthetics 1, through a systematic approach to health anaesthetics 2, maternity, mental health, history taking in a pre-hospital primary care (minor injuries & illness) & environment. paediatrics) Prioritise diagnostic investigations and • make decisions or referrals appropriate to clinical speciality and within the limitations of a pre-hospital environment. Undertake examination of the key organ systems using a system based approach in a pre-hospital environment.

> Achieve competencies in the e-practice portfolio.

Core skills and OSCE completion (throughout Year 2)

- Communication, ethics, dignity, respect and professional behaviours
- Adult & paediatric intermediate life support
- Patient ventilation
- Advanced trauma life support
- Advanced airway management
- Medicines management
- Intravenous access
- Intraosseous familiarisation
- ECG recognition (3-lead rhythm recognition & 12-lead interpretation)
- Moving and manual handling
- Documentation and record keeping
- Patient assessment (primary & secondary survey) including appropriate intervention (within the scope of practice covered by theoretical sessions on modules:
 - Clinical Practice Education 2
 - Clinical Assessment & Examination

- Pathophysiology for Paramedics
- Acute prehospital care

Minimum threshold achieved by end of Year 2 – Academic Level 5

The student carries out the activity as instructed, showing understanding of the rationale behind it. The student is beginning to function more independently and is beginning to formulate principles to guide practice. The student is beginning to adapt and apply paramedic skills and can undertake the activity inclusive of explaining how the outcome relates to paramedic practice.

The student can undertake the activity with appropriate supervision from the mentor whilst the activity/experience is occurring.

Please see YAS guidance (Appendix 1) for year 2 skills matrix – only to be observed whilst on YAS placements.

Yea	ar 3
Placements One & Three (November - December & June - September) 17 weeks: • Emergency care within YAS	 All year 3 placements reinforce those experiences sought in year 1 & 2. Therefore, the following expectations/competencies are in conjunction with those already prescribed for year 1 & 2. Critically apply knowledge and understanding of normal physiological processes and subsequent changes as a result of critical illness/injury. Evaluate the theories and concepts underpinning the management and care of critically debate the effect prescribed therapeutic interventions may have on the patient's physiological status. Critically evaluate the evidence base for commonly prescribed therapeutic interventions. Critically evaluate the nature of the paramedic's role in the multidisciplinary critical care environment.
 Placement Two (February - April) 9 weeks: 4 weeks primary care 5 weeks acute trust 	 Explore the knowledge and skills required to implement change and relate these to the practice setting. Explore and analyse models of management, leadership and decision-making in relation to paramedic practice. Critically review a range of knowledge and skills relating to the development of individual personal effectiveness. Explore the knowledge and skills required to effectively mentor junior staff.

	Achieve competencies in the e-practice portfolio.		
Core skills and OSCE completion (throughout Year 3)			
Communication, ethics, dignity, respect and professional behaviours			
Adult and paediatric advanced life support			
Full ECG interpretation			
Intraosseous access			
• Reinforcement of all skills from years 1 &	\$ 2		

- Clinical leadership, critical analysis and critical decision making (demonstrating decisions and situational awareness is justified, purposeful, accountable, least-intrusive, non-maleficent and founded in beneficence)
- Facilitation of mentorship to junior staff and colleagues alike.
- Medicine management, including relevant legislation
- Consolidation of all skills from Years 1, 2 & 3.

Minimum threshold achieved by end of Year 3 – Academic Level 6

The student competently and consistently applies and adapts the skills, knowledge and attitudes acquired to new situations. The student is capable of working as an effective member of the team in an organised and efficient way and is beginning to act as a role model to others; the student is developing teaching skills.

The student uses previous experience and applies this knowledge to new settings and is beginning to influence others; these skills can be practiced independently in a safe and competent manner.

Please see YAS guidance (Appendix 1) for year 3 skills matrix – only to be observed whilst on YAS placements.

Competency Standards & Assessment

Orientation Checklist

The orientation checklist should be completed on every placement undertaken throughout the duration of the programme. All elements of the orientation checklist must be completed and should be addressed before the end of the first shift. If for any reason these elements cannot be satisfied after one calendar week of commencing placement, advice and guidance must be sought from the local Placement Learning Facilitator (PLF) and the University of Hull Paramedic Science Placement Lead.

This process is designed to induct students into specific placement areas. The key element of the orientation is to align expectations and responsibilities in order to enhance the overall learning experience. Should you have any further queries, please contact the Paramedic Programme Team. Please see Appendix 2 for the Orientation Checklist.

Competency Standards

Throughout each year of the programme, students have a range of competencies to attain. Each competency must be fully evidenced by the end-point assessment (see End-Point Assessment). *This means every competency should have a minimum of two pieces of evidence attached, with at least one asset at the level of minimum supervisor or proficient*. Assets should be recorded by the student at their earliest opportunity and logged against competencies on a daily basis. It is the responsibility of the named supervisor to ensure the asset accurately represents the activity undertaken before confirming a signature. The student's performance should be assessed and graded using the following categories. Remember, students should be judged at the appropriate academic level (see below Academic Level):

- Dependent For a first year student, this likely means that the student has little or no part in the activity, and has little understanding or awareness of what they are seeing. This would also mean that a final year student is unable to perform an activity or skill without their practice educator having significant involvement.
- Assisted For a second year student, this would mean that they are able to carry out an activity but rely heavily on their practice educator for very specific direction and guidance during the task.

- **Minimal supervision** This means that a first year student is witnessing an activity and mostly able to describe the activity they are seeing. A second year student would be able to perform the activity with little input from their practice educator, and should broadly understand the need for the activity. A final year student should be identifying the need for an intervention and be able to perform it with little prompting.
- Proficient (independent) Proficient first year students will have a good awareness
 of what is happening, although they may not understand the evidence or significance
 behind what they see. A proficient second year student would be able to perform a
 task when asked, but may not realise that it needs to be performed until asked to do
 so. In contrast, a final year student reaching proficient status should understand
 what they are doing and why they are doing it. They should be able to perform most
 skills independently (though it is important to recognise that students must keep
 within their scope of practice, and that practice educators should always have the
 final say about assessments and interventions that service users receive).

Academic Level

The expected level of performance increases throughout the three-year programme. At the start, the focus is on students understanding and appreciating the activities they observe, rather than getting involved (although this should be encouraged where appropriate). By the end of the course, students should be able to undertake activities independently and practice educators should be able to take a 'hands off' approach.

First year students are expected to reach academic level 4:

- The student has been exposed to the experience/activity.
- The student observes others undertaking the activity, can accurately describe it and is a helper.
- The student role is to have observed or been oriented to the experience/activity.
- The practice educator role is to facilitate exposure to the experience/activity and observe the student's performance.

Second year students are expected to reach academic level 5:

- The student can undertake the activity and explain how the outcome relates to paramedic practice.
- The student carries out the activity as instructed, showing understanding of the rationale behind it. The student is beginning to function more independently and is beginning to formulate principles to guide practice. The student is beginning to adapt and apply paramedic skills.
- The student can do this with supervision explaining the rationale.
- The practice educator supervises the student whilst undertaking the activity/experience.

Final (third) year students are expected to reach academic level 6:

- The student uses previous experience and applies this knowledge to new settings and is beginning to influence others.
- The student competently and consistently applies and adapts the skills, knowledge and attitudes acquired to new situations. The student is capable of working as an effective member of the team in an organised and efficient way and is beginning to act as a role model to others. The student is developing teaching skills.
- The student can do this independently in a safe and competent manner.
- The practice educator assesses the student's ability to work independently in a safe and competent manner.

EPAD Assessment

The EPAD will be summatively assessed at two points with the respective academic year. These constitute the mid-point assessment and the end-point assessment.

Mid-point Assessment

The following criteria will be reviewed at the mid-point assessment:

Year 1 – Attached to module Clinical Practice Education 1.

By the end of the second trimester, students should have:

- Completed the front page of the EPAD (name, student number, declarations)
- Highlighted the AST's contact details in the EPAD guide.
- Recorded evidence against 50% of the first year competencies (note: the competencies do **not** need to be fully evidenced at this stage, and evidence may be at the *dependent* or *assisted* standards - this is merely a mid-point check).
- Successfully completed the placement pages for the placements they have attended, including:
 - recording information about the placement area and named practice educator for each placement.
 - Complete the orientation checklist for every placement attended.
 - recording the appropriate meetings for each placement. Placement blocks of two weeks or less = 2 meetings. Placement blocks of more than two weeks = 3 meetings.
 - o recording the hours that have been worked for each placement.
 - \circ demonstrating the required standards and performance on each placement.

Year 2 – Attached to module Clinical Assessment and Examination for Paramedics.

By the end of the first trimester, students should have also:

- Recorded evidence against 25% of the second year competencies.
- Successfully completed the placement pages for all placements so far.

Year 3 – Attached to module Management of the Critically III Patient.

By the end of the first trimester, students should have also:

- Recorded evidence against 25% of the third year competencies.
- Successfully completed the placement pages for all placements so far.

End-Point Assessment

The following criteria will be reviewed at the end-point assessment:

Year 1 – Attached to module Professional and Contemporary Issues in Paramedic Practice.

By the end of the first year, students should have also:

- Fully evidenced all of the first year competencies at either the *minimally supervised* or *proficient* standards.
- Successfully completed all remaining placement pages for year one.

Year 2 – Attached to module Clinical Practice Education 2.

By the end of the second year, students should have also:

- Fully evidenced all of the second year competencies at either the *minimally supervised* or *proficient* standards.
- Successfully completed the remaining placement pages for year two.

Year 3 – Attached to module Clinical Practice Education 3.

By the end of the third year, students should have also:

- Fully evidenced all of the third year competencies at either the *minimally supervised* or *proficient* standards.
- Successfully completed the remaining placement pages for year three.

Placement Checklist

The following provides an overview of the required elements for each placement area:

- Section 1 completed Named supervisor and placement details.
- Complete associated placement specific orientation checklist.
- Section 2 completed Meeting section; Placement blocks of two weeks or less = 2 meetings. Placement blocks of more than two weeks = 3 meetings. See EPAD guide / meetings, for additional guidance.
- Section 3 completed Placement hours accurately recorded and signed timesheet uploaded to correspond shifts.
- Section 4 completed Conduct, performance and ethics. All statement should be answered with 'YES'.
- Competencies all associated competencies for this specific placement signed and completed. Assets tagged to relevant competencies.
- All sections saved.

Contact Details

Name & Role	Telephone	Email Address
	Number	
Nicki Credland	01482 463334	N.Credland@hull.ac.uk
Head of Department		
John McKenzie	01482 463291	J.McKenzie@hull.ac.uk
Paramedic Team		
Programme Director		
Antony Rodgers	01482 466449	Antony.Rodgers@hull.ac.uk
Paramedic Team		
Admissions Tutor & AST		
Rachel Harris-Raven	01482 462133	R.Harris-Raven@hull.ac.uk
Paramedic Team		
AST		
Matt Hurwood	01482 463358	M.Hurwood@hull.ac.uk
Paramedic Team		
Placement Lead & AST		
Paramedic Team	Not applicable	paramedicteam@lists.hull.ac.uk
(generic team email)		
Andrea Randerson	01482 464583	Go to
Paramedic Science Programme		https://evision.hull.ac.uk_and
Administrator		log an enquiry with the Student
		Information Desk (SID)
Faculty of Health Sciences –	01482 464663	FHS-Placements@hull.ac.uk
Placement Team		
(generic team email)		
YAS Placements	01904 666095	yas.yasplacements@nhs.net
(generic team email)		

Absence Reporting

In the event a student is unable to attend placement (wholly or partially) or will be late attending a rostered shift, please follow the below guidance.

YAS Placement: The student must contact all the following people:

- The named mentor Ideally email and telephone
- YAS Placements (<u>yas.yasplacements@nhs.net</u>)
- Andrea Randerson Programme Administrator (Go to <u>https://evision.hull.ac.uk</u> and log an enquiry with the Student Information Desk (SID)

Acute Trust: The student must contact all the following people:

- The named mentor / placement area Ideally email and telephone
- Andrea Randerson Programme Administrator (Go to <u>https://evision.hull.ac.uk</u> and log an enquiry with the Student Information Desk (SID)
- The designated link lecturer for the unit and/or the local PLF:
 - HUTH Julie Dimaline (<u>Julie.Dimaline@hey.nhs.uk</u>)
 - HUTH Victoria Needler (Victoria.Needler@hey.nhs.uk)
 - HUTH Elizabeth Robinson (<u>Elizabeth.A.Robinson@hey.nhs.uk</u>)
 - NLaG (Acute) Heather Groves (<u>Heather.Groves@nhs.net</u>)
 - NLaG (Acute) Claire Fisher (<u>Claire.Fisher7@nhs.net</u>)
 - NLaG (Community) Claire Clarke (<u>Claire.Clarke1@nhs.net</u>)
 - RDaSH Nicola Woodhall (<u>Nicola.Woodhall@nhs.net</u>)
 - York PCT Cheryl Betts (<u>Cheryl.Betts@york.nhs.uk</u>)
 - Humber NHS Claire Tiernan-Smith (<u>C.Tiernan@nhs.net</u>)
 - CHCP Clare Ward (<u>clare.ward@nhs.net</u>)
 - CHCP Karen Petterson (<u>Karen.Petterson@nhs.net</u>)

Please only contact the designed PLF if you experience issues reporting placement absence. PLF's still remain however, the designed point of contact for all placement related support.

Incidents/Accidents on Placement

If a student/s is/are involved in any kind of incident or accident whilst on placement, the YAS Clinical Supervisor, local PLF and the University Placement Team must be informed so that appropriate support can be put into place for the student. The placement team will advise the university and seek advice where necessary.

Post-Incident Care

In the event a student attends a traumatic or potentially distressing incident/patient, please follow the below guidance:

YAS Placement: Log the appropriate PIC referral through YAS DATIX and inform YAS Placements. Additionally, please email the paramedic team (see Contact Details) who will be able to log the incident and provide further support as appropriate.

Acute Trust: The named mentor should make contact with their PLF and one of the paramedic team (see Contact Details). The nature of the concern will be triaged accordingly and further support sought as required. Further information can be found at the University of Hull's Placement Learning Unit website under the raising practice concerns section (https://www.hull.ac.uk/Faculties/fhs/shsw/Placement-Learning-Unit.aspx).

Raising Concerns

Should any member of YAS or the acute trust wish to raise a concern, please follow the below guidance.

Student Orientated: This covers any concerns regarding a student's performance, behaviour, conduct or professional capability and the non-achievement/attainment of learning outcomes. Please contact one of paramedic team (see Contact Details) in the first instance alongside the local PLF/YAS Placements. Depending on the nature of the concern, the appropriate remedial measures will be instigated. Further information can be found at the University of Hull's Placement Learning Unit website under the raising practice concerns/processes for escalating concerns regarding students on practice placement section (https://www.hull.ac.uk/Faculties/fhs/shsw/Placement-Learning-Unit.aspx). **Placement Orientated:** All staff and students within the Faculty of Health Sciences (FHS) have a professional responsibility to raise any concerns that they have in relation to practice learning environments. This covers but is not limited to, any concerns surrounding suspected or witnessed poor or unsafe practice/s, danger or risk to health and safety or being asked to practice beyond respective role, experience and/or training. Further information can be found at the University of Hull's Placement Learning Unit website under the raising practice concerns/raising practice-related concerns section (https://www.hull.ac.uk/Faculties/fhs/shsw/Placement-Learning-Unit.aspx). Please note, the relevant raising practice concerns tracking form should be completed in full and sent to the FHS Quality Department (fhs-quality@hull.ac.uk) for quality assurance purposes.

Glossary of Terms

- AST Academic Support Tutor
- CHCP City Heath Care Partnership
- DH Department of Health
- ECG Electrocardiogram
- EPAD Electronic Practice Assessment Document
- ETI Endotracheal intubation
- FHS Faculty of Health Sciences
- HCPC Health & Care Professions Council
- HEI Higher education institution
- MIMI Minor injuries & minor illnesses
- NHS National Health Service
- NP Nasopharyngeal airway
- OP Oropharyngeal airway
- OSCE Objective structured clinical examination
- PCT Primary Care Trust
- PEd Practice Educator
- PIC Post-incident care
- PLF Placement Learning Facilitator
- SAD Supraglottic airway device
- UK United Kingdom
- YAS Yorkshire Ambulance Service NHS Trust

References

Department of Health (2005) *Taking healthcare to the patient: transforming NHS ambulance services*. London: Department of Health.

Millins, M. (2018) *Skill set for student paramedics during clinical placements with YAS.* Wakefield: Yorkshire Ambulance Service NHS Trust.

Ruston, A. & Tavabie, A. (2011) An evaluation of a training placement in general practice for paramedic practitioner students: improving patient-centred care through greater interprofessional understanding and supporting the development of autonomous practitioners. *Quality in Primary Care*, 19, 167-173.

Appendices

Appendix 1 - Skill set for Student Paramedics during clinical placements with YAS (Millins, 2018)

This document outlines the clinical skills and competencies that Student Paramedics are permitted to undertake, whilst under the direct supervision of a Practice Educator at Yorkshire Ambulance Service NHS Trust (YAS). The document is designed to complement but not replace the placement handbook which should be available for all Practice Educators.

Undertaking Clinical Care

On all occasions, the following three steps must be confirmed before an HEI student undertakes any patient care:

Confirmation of being taught	Approval of PEd/Supervisor for Student Paramedic to use the skill	Consent of Patient
A student must only undertake clinical care which they have been taught at either the HEI or by the YAS Academy	The PEd/Supervisor overseeing the care must authorise the Student Paramedic to undertake the clinical care	The Patient must consent to the Student Paramedic undertaking the care.

Patient Assessment

YAS will authorise HEI students to undertake clinical assessment in accordance with the most recent Joint Royal Colleges Ambulance Liaison Committee (JRCALC) United Kingdom Ambulance Services Clinical Practice Guidelines, unless superseded by a Trust specific policy or guideline. In all patient assessment episodes, the Student must be under the direct supervision of a Practice Educator (PEd) in most cases this will be a paramedic however, EMTIIs can act as PEds for undergraduate students from the University of Bradford.

YAS requires Student Paramedics to use both Paramedic Pathfinder and the National Early Warning Score II during the assessment process, supervised by their PEd.

All patient assessment details recorded by a Student Paramedic on a patient record must be countersigned by a PEd. On all occasions the YAS PEd or Supervisor remains the **accountable** clinician in terms of patient assessment.

Patient Management (Pharmacological)

YAS will authorise HEI students to undertake **parenteral** medicine administration in accordance with Schedule 19 of the Human Medicines Regulations 2012 where **administration is for the purpose of saving life in an emergency**. The Student Paramedic (under direct supervision) must comply with the latest Joint Royal Colleges Ambulance Liaison Committee (JRCALC) United Kingdom Ambulance Services Clinical Practice Guidelines when administering these medications. The following medications may be administered.

Patient Management (Pharmacological)	Year 1	Year 2	Year 3
Intra-Muscular Adrenaline 1:1000	×	√	✓
Intra-Muscular Chlorpheniramine	×	√	√
Intra-Muscular Hydrocortisone	×	✓	✓
Intra-Muscular Glucagon	×	✓	✓
Intra-Muscular Naloxone Hydrochloride	×	✓	✓
Intra-Nasal Naloxone Hydrochloride	×	√	√

Student Paramedics are not permitted by law to give any medication, in any circumstance via the Intravenous/Intraosseous route.

Patient Management Non-Pharmacological

YAS will authorise HEI students to undertake non-pharmacological management (see table below) in accordance with the most recent Joint Royal Colleges Ambulance Liaison Committee (JRCALC) United Kingdom Ambulance Services Clinical Practice Guidelines, unless superseded by a Trust specific policy or guideline. In all patient management episodes, the Student must be under the direct supervision of a Practice Educator (PEd).

Clinical Skill (Non-Pharmacological)	Year 1	Year 2	Year 3
Airway Management, head tilt chin lift or jaw thrust	✓	√	✓
Airway Management, use of suction within direct vision	~	✓	•
Airway Management, use of flexible suction	×	✓	✓
Airway Management, insertion of a OPA/NPA	✓	✓	✓
Airway Management, insertion of an SAD	×	√	✓
Airway Management, insertion of a endotracheal tube	×	×	×
Airway Management, removal of a foreign body obstruction with magill forceps	×	√	√
Needle cricothyroidotomy with jet ventilation	×	×	×
Ventilation with bag valve mask and oxygen	✓	√	✓
cardio-pulmonary resuscitation	✓	✓	✓
Manual defibrillation	×	✓	✓
Application/management of a parapac ventilator	×	√	✓
Intravenous cannulation	×	√	✓
Intraosseous cannulation	×	√	✓
Application of a traction splint	✓	√	✓
Application of a limb splint	✓	√	✓
Application of a KED	✓	√	✓
Application of spinal immobilisation	✓	√	✓
Application of a pelvic splint	✓	√	✓
Application of trauma dressings	✓	✓	✓
Application of a trauma tourniquet	×	√	✓
Delivery of a baby (normal presentation)	×	√	✓
Delivery of a baby (malpresentation)	×	×	×
External control of obstetric haemorrhage	×	✓	✓

Appendix 2 – Orientation Checklist

Placement Information & Orientation

This process is designed to induct you into the specific placement area. The following elements should be addressed before the end of the first shift and should be further explored during the initial placement meeting; the initial placement meeting should be conducted no later than one calendar week after starting the placement. If any of the following elements cannot be successfully confirmed after one calendar week, please establish contact with the local Placement Learning Facilitator (PLF) and the University of Hull Paramedic Science Placement Lead.

The key element of orientation is for you to understand emergency procedures and health and safety protocols, and your responsibilities within these as a healthcare student. Orientation may be undertaken by your named supervisor or a person delegated by your supervisor.

The items below are essential:

Student – Please confirm the below elements by completing the associated check boxes.

Supervisor – Please confirm you have completed the orientation checklist with the student and any associated 'ASSESSOR FIELDS'.

Please remember to save all entries.

STUDENT FIELDS

- A general orientation to the healthcare placement setting has been undertaken:
- You have been shown around the placement area and introduced to staff:
- You are aware of key policies and regulations relating to:
 - dress code whilst on placement:
 - shift times:
 - meal breaks
 - sickness / absence reporting:
 - Use of mobile phones and information technology:
- The local fire procedures have been explained:
- You have been shown:
 - Fire alarms:
 - Fire exits:
 - Fire extinguishers:
 - Procedures for evacuation and muster points:
- The resuscitation policy and any relevant procedures relating to this have been explained:
- You have been shown the resuscitation equipment and any associated practices have been explained:
- You know how to summon help in an emergency and who to alert:
- You have been made aware of confidentiality and information governance requirements:
- You have been made aware of how to dispose of clinical waste and used equipment – i.e. sharps, linen:

- You have been shown and given a demonstration of moving and handling equipment and mobility techniques bespoke to this placement area:
- You have been given a demonstration of any medical devices used in this area:
- You understand your responsibility in reporting unsafe / poor quality of care and using the complaints procedure:
- You are aware of how to manage, record and store patient valuables:
- You have been made aware of how to manage and store your personal belongings:
- Do you require any reasonable adjustments relating to health, learning, disability, pregnancy, risk assessment? If YES, follow up in the initial meeting:

ASSESSOR FIELDS

- The student has been orientated into the placement area and has completed the associated orientation checklist:
- The student has been made aware of important modes of communication i.e. Resuscitation telephone number, fire telephone number, Airwaves; requesting speech, requesting priority speech, opening an emergency channel. Enter here: TEXT BOX
- The student is aware of where to find local policies:
 - Health & Safety:
 - Incident reporting / informing University if an incident form has been completed:
 - Infection control and prevention:
 - Manual handling:
 - Safeguarding vulnerable adults and children:
 - Lone working / personal safety:
 - Handling of messages & methods of communication:
 - Other issues specific to this placement area; please specify i.e. COSHH, ionizing radiation. TEXT BOX
- If the student has disclosed any reasonable adjustments, please specify the implemented measures i.e. relating to health, learning, disability, pregnancy, risk assessment. This will require follow up during the initial meeting: TEXT BOX
- Any further issues specific to this placement area not covered in the above criteria: YES / NO & TEXT BOX