Southern Union State Community College
EMS Program

Clinical Instructor/Preceptor Handbook

Revised:
February 2018

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Introduction

The Emergency Medical Services (EMS) Program at Southern Union State Community College is dedicated to assisting EMS students in reaching their potential. Our goal is to produce quality entry-level EMTs, AEMTs, and Paramedics. By providing sound classroom and lab instruction and strong reality-based clinical experiences from qualified medical professionals, our goal will be achieved. Therefore, we are asking for your help. We need highly qualified clinical preceptors, such as you, in our affiliate Hospitals, Ambulance Services, and Fire departments to allow our EMS students to be exposed to patient situations and to perform certain patient care procedures under your supervision. The clinical training that you provide directly affects the graduate's ability to handle a variety of emergency situations.

Thank You for your dedication and willingness to serve our students.

Faculty Contact Information

If at any time you need to contact one of our faculty members, please utilize the following information. Our faculty members will stop by often to ensure our students are performing and behaving as expected. We also welcome any comments and suggestions from our preceptors during these visits.

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General Considerations for the EMS Preceptor

Each student comes from different environments and diverse backgrounds. Student performance and success will often depend on the learning environment. The student should be able to depend on you to welcome them and make them feel accepted as part of the EMS system. This sets a tone reflecting your professionalism and gives the student a high confidence level with you. As you well know, first impressions often lay the foundation for lasting working relations and respect.

One way to help the student feel comfortable is to exercise the Golden Rule. "Do to others as you would have them do to you." Remember your good preceptors and how they treated you. By the same token, remember those bad preceptors you may have had. What traits and personalities did he/she portray? Bad experiences with student preceptors don't enhance the student's training. In most cases, it hurts the student's attitude, hinders the learning experience, and reflects negatively on the preceptor and even the preceptor's employer.

Maintain a positive attitude toward EMT training, your profession, your individual work, and your employer. Don't discuss problems with your employer with the student. They have been informed to refrain from discussions that are not beneficial to learning. This is not a healthy learning environment. If you or the students have disagreement with school policies, procedures, etc. contact the EMS Program Director or Clinical Coordinator. We can benefit from your suggestions as ways to improve the existing policies and procedures. Through continuous quality assurance, improvement, and open communication, everyone will benefit.

If at any time you feel "burned out" by the clinical preceptor program, let the EMS Clinical Coordinator or Program Director know immediately.

Team Lead Definition

For a successful team lead, the student must:
- function under the direct supervision of the assigned preceptor on an ALS unit
- must perform the majority of the assessment
- evaluate patient acuity
- develop treatment plan
- successfully manage the patient during transport to definitive care

Clinical/Field Instructor/Preceptor Qualifications

Clinical instructors/preceptors should demonstrate the following characteristics:

- A desire to teach

- Willingness to be an instructor/preceptor

- A non-judgmental attitude toward coworkers

- Assertiveness to stand for best practice care

- Flexibility to change and ability to adapt to new situations

- Excellent communication skills

- Positive attitude toward patient care and adherence to standards

- Good to excellent critical thinking and interpersonal skills

- Patience

- Commitment to provide opportunities for EMS students to lead the patient care team

Hospital Based Requirements

SUSCC provides general training to clinical site leadership and relies on those individuals to designate employees to serve as clinical instructor/preceptor in accordance with their policies.

SUSCC places faculty at its primary clinical locations to oversee the education of its students. Within that structure, or at clinical sites that do not have an assigned clinical faculty, students may be assigned to individual professionals. When clinical faculty are

not on site, students are to report to the professional in charge of the unit to which they are assigned, and that individual should assign the student to a qualified instructor/preceptor.

Field Requirements

Field clinical instructors/preceptors must have current knowledge of the principles and concepts included in the National EMS Education Standards and program curriculum. Field instructors/preceptors must meet the following criteria:

- Current unencumbered EMSP license issued by the State in which you practice.
- Be designated by their service/department.
- Demonstrate a willingness and competence to work with students to assist them in meeting pertinent course objectives in the field setting.
- Supervise, regulate, and document accurately, student behavior in the field.
- Complete the student clinical evaluation app/forms and competency app/forms.
- Assure that all student-performed clinical procedures are supervised and signed off on.

SUSCC provides general training to Field site leadership and relies on those individuals to designate those individuals it authorizes to serve as Field Clinical Instructors/Preceptors in accordance with their policies.

Capstone Field Internship Preceptor Qualifications

Capstone Field Internship Preceptors must have current knowledge of the principles and concepts included in the National EMS Education Standards and program curriculum. Capstone Field Internship Preceptors must also have above average knowledge and skills proficiency and meet the following minimum requirements:

- Current unencumbered paramedic license issued by the State in which you practice.
- Two (2) years' experience as a Paramedic. ACLS, PALS, ITLS, CCEMT, etc. may be used to substitute as experience when the preceptor does not meet the work requirement. This is at the discretion of the EMS program and service director.
- Complete Southern Union EMS's approved preceptor training in accordance with the Committee on Accreditation of Education Programs for the Emergency Medical Services Professions (CoAEMSP).
- Complete the student clinical evaluation app/form and competency app/form.
- Assure that all student-performed clinical procedures are supervised and signed off on.
- Provide the EMS program with your work schedule upon request. Inform the EMS program of any changes in your work schedule that might affect your ability to oversee EMS students.

Fraternization

Interactions between preceptors and students at Southern Union State Community College are guided by mutual trust, confidence, and professional ethics. Professional preceptor/student relationships have a power differential and carry risks of conflicts of interest, breach of trust, abuse of power, and breach of professional ethics.

Fraternization is a social or business relationship between students and instructors or preceptors, which has the potential to impact adversely on a student's ability to learn in a safe, collegial environment, on order and discipline, and on the reputation of the Program. It also has the potential to degrade the positive and trusting relationships between students and preceptors.

Some possible examples of activities encompassed by the broad term "fraternization" include but are not limited to:

- Social activities not sponsored by the Program or College
- Going to private homes or clubs together
- "Consensual relationships" including dating, romantic, sexual, or marriage relationships

All Program faculty and staff, including preceptors, must maintain the highest level of professionalism, and unquestionable integrity, at all times while engaged in SUSCC activities. Factors, concerning fraternization with instructors, include whether the student's conduct has:

- Compromised the chain of command
- Resulted in the appearance of partiality
- Undermined good order, discipline, authority, or morale
- Damaged the ability of the program to accomplish its mission

Fraternization (continued)

The preceptor relationship presents a unique challenge in that preceptors may work with or have pre-existent outside relationships with students. Ideally, all interactions with preceptors should be confined to SUSCC-related activities, at SUSCC approved locations, for the full duration of the student's enrollment, and there would be no non-college social networking (Facebook, Twitter, etc.) connections. However, because of the family-nature of prehospital medicine, this may not be possible.

Students are expected to fully disclose any non-college relationship with a preceptor, regardless of nature (e.g., coworker, business, neighbor, prior relationship, etc.). Students are also expected to immediately report any direct awareness of another student's inappropriate behavior to the EMS Program Director.

Clinical Information

<u>Pre-clinical Training</u>

Our students have completed the required OSHA course and are aware of the various types of PPE required for patient contacts. However, some students will be new to the healthcare setting and may require a few reminders initially. All clinical orientation for sites that require it has been completed.

<u>Length of Rotations</u>

Our students have a variety of rotation types and we try to correlate the start of the rotation to the start of a preceptor's shift and instruct our students to be 15 minutes early to observe and assist with shift changing responsibilities.

Students are instructed to remain at the clinical for the assigned length. However, if the student is sent home or requests to leave early, please document this on the clinical evaluation.

Paramedic students entering the Capstone Field Internship during their last semester will be assigned a single preceptor at one of the Ambulance/Fire services. The student and preceptor will work together to form a schedule.

<u>Clinical Areas</u>

Students are to remain in their assigned area unless given permission by their preceptor to leave the area. Students may assist in moving patients or follow them to their destination if approved by the preceptor and those involved in the care of the patient after the transfer. Students may not wander the facility for any other reason.

<u>Phone Calls and Visitors</u>

Students are not permitted to use facility phones for personal phone calls. If a student does need to make a personal phone call, they must ask to be excused to a private area designated for phone calls. Students are not permitted to have visitors at their clinical site for any reason. If a student does have a visitor, please contact a faculty member or document the event on their clinical evaluation.

<u>Dress Code</u>

SUSCC has implemented a dress code to help maintain a professional appearance:

- Shirts – SUSCC EMS Polo Shirts with Health Science Logo. Shirt tail must be tucked in.
- Trousers – Loose-fitting navy blue or black slacks or BDUs.
- Coats – Dark, single colored. Must not contain any patches or emblems.

- ID Badge – Official SUSCC photo ID badge is to be worn on outermost garment at all times.
- Scrubs – AEMT and Paramedic students will be required to black wear scrubs, with health science logo, while in the hospital setting.
- Shoes – Black uniform boots are preferred in the prehospital clinical. Clean tennis or nursing shoes are permitted in the hospital setting. Shoes must be solid black.
- Jewelry – Limited to wristwatch, plain wedding band, or Medical Alert emblem. One set of stud earrings are allowed with one in each ear lobe. No other jewelry is allowed.
- Hair – Clean and confined so that it does not interfere with patient care. Beards and mustaches are permitted al long as they are neatly trimmed and do not interfere with the use of a HEPA respirator.
- Nails – Short and clean; clear polish only. No artificial nails are allowed.
- Personal – Students are expected to maintain necessary personal hygiene including bathing daily, shampooing hair, and using underarm deodorant.

Acceptable Behavior

SUSCC students are counseled on acceptable behavior before attending rotations. Students are expected to show all employees of a clinical site the same amount of respect they would show an instructor. If at any time you feel the behavior is inappropriate or unprofessional, you are encouraged to send them home immediately and document the behavior on the clinical evaluation. Another forbidden behavior is to attend a clinical while appearing, acting, or even smelling intoxicated. Please contact the program director or clinical faculty immediately if this occurs.

Dinner and Break Time

A preceptor may grant the student's breaks and meals when he/she feels it is appropriate. The preceptor will determine the allotted amount of breaks outside of meals. Students may only eat their food in the appropriate designated areas.

Smoking and Tobacco Use

Southern Union State Community College is a tobacco free college. This extends to our clinical sites. Students are not allowed to smoke or use smokeless tobacco during clinical rotations.

Incidence Forms

If a student is injured or has violated any aspect of the clinical site's rules, please complete the form and notify the program director or clinical faculty as soon as possible.

Clinical Evaluation App

SUSCC utilizes a Clinical Student Evaluation App to collect evaluations from clinical/field instructors. The student will have the app installed on their phone/tablet and will enter their Name, Student ID, Level, Clinical Site, and Date.

The clinical/field instructor will then answer five (5) yes/no questions and then rate the students overall performance on a scale of 1 to 5. You will then be able to add any additional comments if needed. Then put your name, student arrival and departure time, your title, and then sign in the space provided. After you have signed the app, please hit the "submit" button. The student will not be able to alter or see the evaluation after you submit the form.

EMS Program - Incident Report Form

Incident: Date: _____ Time: _____ Location: _____

Clinical Facility:_____ Clinical Unit: _____

Student Involved_____ Level of Training:_____

Pt. Initials (If Applicable): _____ Clinical Coordinator:

Notification Date/Time: Preceptor: _____

Potentially Infectious Materials Involved (Check Which Applies)
_____ Blood_____ Urine _____ Sputum_____Feces _____Other _____ None

Details of the Incident by the Student (Work Being Performed, Etc):

How Incident Was Caused (Accident, Equipment Malfunction, Etc):

Check Personal Protective Equipment Used at the Time of Incident:

_____Gown _____Gloves _____Mask _____Eye wear _____Headgear_____ Shoe Covers

Action Taken: (Treatment, Hazard Cleared, Etc.):

Description of Incident by the Unit Preceptor:

Clinical Coordinator's Recommendation for Avoiding Repetition:

Clinical Coordinator's Comments/Actions:

Preceptor's Signature/Date

_____

Clinical Instructor's Signature/Date

_____

Preceptor Points

Education Focus:
- The goals of your department and how it relates to EMS.
- Patient assessment
- Patient interview
- Giving/Receiving report
- Pathophysiology/ Injury patterns
- Question/Answer
- Observe/Assist with advanced procedures

Special Skill Sets:
- Basic patient assessment and interview
- Vital signs assessment
- Blood glucose analysis
- Oxygen administration
- CPR
- Airway adjuncts
- ECG Application (3, 4, & 12-lead)
- CPAP Application
- Aspirin administration
- Naloxone administration (intranasal only)
- Nitroglycerin administration (sublingual or spray only)
- Breathing treatments (albuterol, etc. updraft or auto-inhaler only)
- Oral glucose administration
- Site maintenance of heparin locks and saline locks

Limitations:
- No IV/IO access
- No Medication administration (except as specified above)
- No Advanced airways
- No ECG interpretation

AEMT Preceptor Points

Education Focus:
- The goals of your department and how it relates to EMS.
- Patient assessment
- Patient Interview
- Pathophysiology/ Injury patterns
- Question/Answer
- Observe/Assist with advanced procedures

Special Skill Sets:
- Blood glucose analysis
- Peripheral venipuncture (IV)
- Adult and pediatric intraosseous cannulation (IO)
- Placement of Blind Insertion Airway Device (BIAD)
- ECG Application (3, 4, & 12-lead)
- CPAP application
- Medication administration
  - NOTE: In the ER students can give ALL meds; however, in the EMS setting, students must follow AEMT state protocols.
  - Dextrose
  - Nitroglycerin
  - Aspirin
  - Albuterol
  - Nitrous Oxide
  - Epinephrine (IM only)
  - Glucagon
  - Ondansetron
  - Thiamine
  - Diphenhydramine
  - Normal Saline
  - Naloxone

Limitations:
- No Endotracheal Intubation
- No ECG interpretation
- No ACLS procedures (excluding AED, BIAD, and CPR)

Paramedic Preceptor Points

Education Focus:
- The goals of your department and how it relates to EMS.
- Patient assessment/ Patient Interview
- Pathophysiology/ Injury patterns
- Medication knowledge
- Question/Answer
- Observe/Assist with advanced procedures

Special Skill Sets:
- Any Basic or Advanced EMT skill
- Advanced patient assessment
- External Cardiac Pacing
- Blood glucose analysis
- Peripheral venipuncture (IV)
- Naso-gastric tube placement
- Needle Decompression of a tension pneumothorax
- Peripheral venipuncture (IV)
- Adult and pediatric intraosseous cannulation (IO)
- Medication administration
- All advanced Airways
- ECG rhythm interpretation and 12-Lead ECG Analysis
- ACLS medications and procedures

Limitations:
- None other than what is specified in Alabama State Protocols
- **Students are not allowed to dis-impact patients or perform a urinary catheter skill**