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| **Northwest Community Healthcare Paramedic Program**  **Preceptor Application 2019** |

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| Name: | Employer: |
| Phone #: | Shift: □ 1st/Black □ 2nd/Red □ 3rd/Gold |
| e-mail address: | Date of original EMT-P/PHRN licensure: |
| Original EMS education site: | Date of NWC EMSS entry: |

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| **Prior teaching experience** (EMS or other) and additional certifications (Submit current card/license if applicable) | | |
| CPR instructor | Fire fighter instructor | Community educator |
| ACLS, BTLS, PHTLS Instr. | Illinois Lead Instructor | Preceptor for EMT or PM classes |
| PALS/PEPP Instructor | Peer I or II educator | Peer III or IV educator |
| Other: Please list | | |
| **Preceptor applicant**: Please give a brief description of why you would like to be accepted as a Field Training Officer/Preceptor. | | |
| Previously completed the NWC EMSS Preceptor course? Date of last attendance: | | |

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| **I recommend this candidate for preceptor status in the NWC EMSS.**  Signature Chief/EMS CEO or ED supervisor:: Date: |

**Forward to assigned System hospital EMS Coordinator/Educator**.

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| **Qualifications** | **RN verification** |
| Currently licensed as a Paramedic/PHRN in good standing in the NWC EMSS |  |
| No sustained complaints relative to patient care or allegations of ethical violations that would suggest high risk behavior in the past year per Policy G-1 |  |
| Has 2 years’ experience as a Paramedic/PHRN in the NWC EMSS meeting all System requirements |  |
| Has had direct patient care in at least 6 of the last 12 months. (If they have not provided direct patient care during that time, submit how they have maintained full knowledge and competency of EMS principles and skills.) |  |

KEY: SA: Strongly agree A: Agree D: Disagree SD: Strongly disagree

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| **Rating of recommended qualifications:** | **SA** | **A** | **D** | **SD** |
| Skilled in EMS care; adherence to best practice care guidelines and System standards |  |  |  |  |
| Good to excellent critical thinking skills: Makes effective decisions; able to articulate reasons for actions while performing them; flexibility to change; and ability to adapt to new situations |  |  |  |  |
| Excellent interpersonal skills (emotional intelligence): maintains positive working relationships; non-judgmental attitude toward co-workers; |  |  |  |  |
| Shows genuine interest in others and a willingness to teach; displays sincere interest in professional development for self and others |  |  |  |  |
| Skilled in peer evaluation: Ability to evaluate performance and coach behavior in an effective manner |  |  |  |  |
| Patience |  |  |  |  |

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| **This candidate is qualified and appropriate for preceptor status in the NWC EMSS.**  Signature of Hospital EMSC/educator Date: | **Yes** | **No** |

**If YES: Forward to Mike Gentile (**[**mgentile@nch.org**](mailto:mgentile@nch.org) **); fax: 847-618-4489 If NO: Continue on back.**

**If a concern is raised by the Hospital EMSC/Educator that a candidate may not be qualified or appropriate based on program guidelines, a discussion shall take place between the hospital EMSC/educator and the Agency Chief/EMS CEO or his or her designee to clarify the objections and reach consensus.**

Summary of discussion:

**If they cannot reach consensus, the concerns will be forwarded to the Program Director or her designee to discuss with the Agency Chief/EMS CEO.**

Summary of discussion:

**Outcome**:

Program Director Signature Date:

CJM: 1/14; 1/15; 2/16; 12/17; 11/18