Northwest Community EMS System POLICY MANUAL					
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### I. INTRODUCTION

- A. All paramedic and Prehospital RN (PHRN) students shall be directly supervised, mentored and evaluated by an approved preceptor.
- B. The preceptor shall act as a resource, facilitator and guide. This individual is valued not only as a teacher but serves as a role model exemplifying the standards of excellence in the NWC EMSS. Therefore, the preceptor must demonstrate thorough knowledge of the Northwest Community EMS System Policies, Procedures, and SOPs.

# II. POSITION DESCRIPTION: A Preceptor shall

- A. complete a preceptor orientation class given by the Resource Hospital prior to the first preceptor assignment and again once every two years if changes in practice or field internship processes have occurred.
- B. be responsible and accountable for decisions made regarding patient care when working with their student.
- C. orient, teach, and coach their assigned student during all supervised experience.
- D. complete sequential, objective, and fair evaluations which quantify achievement of the objectives and measure performance against System standards. Their judgment will be consulted and heavily relied upon when considering a candidate for licensure/recognition; therefore, areas of strengths as well as continued learning opportunities must be specifically documented on the evaluations.
- E. meet with the Hospital EMSC/Educator at the end of each Phase to provide a progress report and plan for the next phase and confer at the end of the internship to finalize the paperwork and offer a comprehensive evaluation, summary report and recommendation, either positive or negative, to be forwarded to the NWC EMSS Administrative Director and/or Paramedic Course <u>Lead Instructor</u>.
- F. maintain effective communication with the student and hospital EMS Coordinator/ educator to facilitate the evaluation process.
- G. teach and mentor according to the current NWC EMSS Policies, Procedures and SOPs.
- H. review all runs completed by the student that are evaluated by another licensed Paramedic/PHRN. Delegation of preceptor duties is to occur only in the instance of operational necessity and only to another approved Preceptor. Delegation to another preceptor is not to exceed 50% of the runs accumulated by the student unless a waiver has been granted by the Resource Hospital.
- I. remain with the student throughout the duration of the call.
- III. **QUALIFICATIONS**: In order to be considered for Preceptor status, a Paramedic/PHRN must receive written recommendation from their Fire Chief/EMS Director. Each candidate must demonstrate or provide evidence of the following:
  - A. Current unencumbered license as a Paramedic or PHRN and current practice privileges in the NWC EMSS.
  - B. No multiple sustained complaints or run reviews in their EMS personnel file for the past year that should have triggered a Request for Clarification (RFC) per System policy G-1.
  - C. At least two years' experience as a Paramedic/PHRN in good standing in the NWC EMSS unless a waiver is granted based on an individual's outstanding performance.
  - D. Above average knowledge and skill proficiency.

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E. For Preceptor candidates who have not had direct patient care experience in at least six of the last 12 months ONLY: The Preceptor candidate must submit to the Paramedic Course lead instructor a minimum of 12 acceptable ALS PCRs for runs on which the preceptor candidate participated and completed the documentation. These will be evaluated for completeness and accuracy of care according to the current SOPs.

#### IV. MECHANISM of APPROVAL

- A. <u>Candidates shall complete the Preceptor Application outlining teaching experience,</u> qualifications and reasons they would like to be considered for a preceptor position.
- B. Provider Chief/EMS CEO or their designee shall sign and submit the application to the assigned System hospital EMSC/Educator.
- C. The hospital EMSC/Educator will review the appropriateness of the candidate based on their qualifications, <u>characteristics of an effective preceptor</u>, and adherence to recommended guidelines.
  - 1. Preceptors must have the skills to form an effective learning environment and facilitate a constructive clinical learning experience for students
  - 2. <u>Preceptors need more than experience to be effective (though having a wealth of it is a prerequisite).</u> They also need to possess certain traits and talents and should demonstrate the following characteristics:
    - a. A desire to be a supporter/learning coach
    - b. <u>Competency in specialty; models desired behaviors; meets or exceeds</u> <u>System standards of practice</u> and advocates for best practice care
    - c. Teaching skills; motivated to teach and willing to be a preceptor
    - d. Sensitive to learning needs of students
    - e. Positive attitude; shows genuine interest in and respect for others and a non-judgmental attitude toward student, co-workers, patients, bystanders, and significant others
    - f. Leadership skills
    - g. Flexibility to change and ability to adapt to new situations
    - h. Effective interpersonal and communication skills (emotional intelligence)
    - i. Good to excellent critical thinking skills; effective decision making and problem-solving skills; can articulate reasons for actions while performing them
    - j. Patience
    - k. Interest in professional growth (self & others)
    - I. Ability to provide effective feedback (students & faculty)
    - m. Is accessible to student for completion of projects/objectives
  - 3. Preceptors shall have documented teaching/mentoring experience, i.e., CPR instructor, Fire Fighter instructor certification, Illinois-recognized EMS Lead Instructor, ACLS/PALS/ITLS or PHTLS instructor, community education, Peer educator, assisting with teaching/measuring skill competencies, teaching within the EMS Agency, assisting with education programs within the System and/or previous experience successfully precepting other students. For full list of teaching options see C2 Con-Ed policy.
  - Preceptors shall demonstrate knowledge of the principles and concepts included in the National EMS Education Standards, the NWC EMSS SOPs, Policies and Procedures.

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- D. In the event a concern is raised by the EMSC/Educator. that a candidate may not be qualified or appropriate based on the guidelines, a discussion shall take place with the Chief/EMS Director or his designee to clarify the objections and reach consensus. If they cannot reach consensus, the concern will be raised to the EMS MD or his designee to discuss with the Chief/EMS Director.
- E. Upon approval by the Chief/EMS Director and Hospital EMSC/educator, the application will be sent to the Resource Hospital for approval by the EMS MD or his designee. Upon approval, a letter of appointment will be sent to the Preceptor with copies of relevant forms. Copies will be sent to the Department Chief or EMS Director and Provider EMSC.

## V. TO MAINTAIN the POSITION, a PRECEPTOR shall

- A. fulfill annual CE <u>and competency</u> requirements required by IDPH and/or the NWC EMS System.
- B. fulfill key performance expectations as specified in the preceptor agreement.
  - Each Phase meeting measures performance of the student and preceptor. Preceptor performance is measured by the appropriateness of EMS judgments and interventions, the accuracy and completeness of the patient care report and supplemental forms for runs on which both the student and preceptor participated, the preceptor's written comments on the student's evaluation forms and oral comments during the meeting.
- C. If the preceptor has not successfully achieved performance expectations as stated in the preceptor agreement, the opportunities for improvement will be documented in writing and provided to the preceptor, the Provider Chief/EMS CEO, the PEMSC, and the Paramedic Course Lead Instructor.
- D. The EMS MD or his designee will review the preceptor's performance and will discuss a corrective action plan with the provider Chief/EMS CEO.

#### VI. MECHANISM for OBTAINING a WAIVER

In cases of demonstrated personnel hardship to the EMS Agency or Hospital, Preceptor candidates with strong performance records who do not meet all Preceptor qualifications may be awarded temporary privileges to perform as a Probationary Preceptor for a student Paramedic/PHRN who has demonstrated strong didactic and clinical skills while in class. The Probationary Preceptor may be asked to meet with the designated EMSC/educator and the student on more frequent basis than the official phase meetings to evaluate and mentor the Preceptor's performance.

VII. **CEU hours:** A maximum of eight CE hours per year will be granted to Preceptors contingent on the quality and effectiveness of their performance as determined by the Hospital EMSC/Educator. These hours do not substitute for the required minimum academic CE hours, competency measurements, or mandatory reviews, but may be used to complete the annual requirements.