



UNIVERSITY OF
LINCOLN

Non-Ambulance Placement Handbook

BSc (Hons) Paramedic Science

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Thank you!

Thank you for providing practice placements for our paramedic students. Non-ambulance placements are an essential part of the paramedic programme to ensure our students become holistic practitioners able to work in a range of clinical environments as part of a multi-professional team.

We are committed to supporting our placement coordinators, mentors/supervisors and practice educators. This handbook is designed to give you helpful information around learning outcomes for non-ambulance placements and what skills paramedic students are able to undertake. It also contains information on key contacts, gives an overview of what students will be learning whilst in university and provides information regarding what to do if a problem arises.

Modules and Indicative Content on the BSc (Hons) Paramedic Programme

It is useful for you to have an awareness of what paramedic students will be studying during their time in university. Figure 1 shows the modules that make up the BSc (Hons) Paramedic Science at the University of Lincoln with figure 2 showing the indicative content of those modules.

Figure 1 Modules

BSc (Hons) Paramedic Science – Programme Overview 2023/2024		
<u>Level 4</u>	<u>Level 5</u>	<u>Level 6</u>
Essential Skills for Paramedic Science 30 credits Charlotte Hildred	Developing Skills for Paramedic Science 30 credits John McKenzie	Augmenting Skills for Paramedic Science 30 credits Paul Bramwell
Fundamentals of Anatomy, Physiology & Pathophysiology 30 credits Emily Baxter	Pathophysiology for Paramedic Science 30 credits Emily Baxter	Clinical Pharmacology for Paramedic Science 30 credits Vernon Mukori
Time Critical, Complex & Special Populations 30 credits Ian Mckenzie-Purdham	Public Health & Health Determinants 30 credits Ian McKenzie Purdham	Research & Evidence Based Practice 30 credits Greg Whitley
Mental Health & Resilience 30 credits Rachael Mason	Interprofessional Collaborative Practice & Professional Values 30 credits Charlotte Hildred	Leadership & Education Support 30 credits Paul Bramwell

Practice-Based Learning Level 4 Charlotte Hildred 0 credit	Practice-Based Learning Level 5 John McKenzie 0 credit	Practice-Based Learning Level 6 Ian McKenzie-Purdham 0 credit
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Figure 2 Indicative content

Module title	Indicative content
Year 1 (level 4)	
Essential Skills for Paramedic Science	<ul style="list-style-type: none"> • Kit familiarisation • Basic clinical skills <ul style="list-style-type: none"> o Pulse o Respiratory rate o Temperature o Manual blood pressure o BM measurement o Suction o OP/NP/IGEL o IM injection o ECG placement o Oxygen and Entonox • Documentation and PRFs (including electronic) • Introduction to basic clinical decision making • Basic medical and trauma assessment • Medicines management & JRCALC technician drugs • ILS – adult • Basic ECGs • Introduction to evidence-based practice • Introduction to reflective practice and the reflective journal, academic writing and study skills
Fundamentals of Anatomy & Physiology	<ul style="list-style-type: none"> • Introduction to the body • The musculoskeletal system • The cardiovascular system & basic cardiovascular conditions • The respiratory system & basic respiratory conditions • The nervous system & basic nervous system conditions • The immune and lymphatic system & basic immune system conditions • The endocrine system & diabetes • The renal system • The digestive system & basic digestive system conditions • The integumentary system • The reproductive system
Time Critical, Complex & Special Populations	<ul style="list-style-type: none"> • Codes of conduct, professionalism, and professional values • An introduction to working collaboratively with other health professionals and service users. • Communication • Non-oppressive and anti-discriminatory practice • Safeguarding • Care of the older patient • Falls and frailty. • End of life care and breaking bad news. • Physical and psychological age-related conditions • Dementia • Learning Disabilities • Anatomical and physiological differences in paediatrics

	<ul style="list-style-type: none"> • Assessment and management of the sick child • Paediatric trauma - theory • Paediatric and newborn intermediate life support • Advocacy for the child • Pain assessment in paediatrics • Child abuse and non-accidental injury • Child protection – a multi-professional approach • Maternity and obstetrics • Complications in pregnancy • SIDS
Mental Health & Resilience	<ul style="list-style-type: none"> • Models of behaviour (cognitive, social, physiological) • Resilience and self-care • Stress and coping • Burnout • Understanding behavioural reactions to illness and disease • Suicide and self-harm • Mental health conditions
Year 2 (level 5)	
Developing Skills for Paramedic Science	<ul style="list-style-type: none"> • Clinical decision making • Advanced medical life support • Adult advanced life support • Advanced trauma life support • Medicines management & JRCALC paramedic drugs • HOTT approach to traumatic cardiac arrest • Appropriate pharmacological interventions • Major incidents – JESIP, interoperability, ambulance command and control structure • Triage – sieve and sort • ECGs • Clinical skills <ul style="list-style-type: none"> o IV cannulation o IO cannulation o ET intubation o SC injection o Needle thoracocentesis o Needle cricothyroid puncture
Pathophysiology for Prehospital Professionals	<ul style="list-style-type: none"> • Musculoskeletal conditions • Cardiovascular conditions • Respiratory conditions • Neurological conditions • Immunological conditions • Endocrine conditions • Renal conditions • Digestive conditions
Prehospital Paediatrics and Obstetrics	<ul style="list-style-type: none"> • Anatomical and physiological differences • Assessment and management of the sick child • Medical management of the paediatric patient • Trauma management of the paediatric patient • Paediatric advanced life support • Age related pharmacology • Advocacy for the child • Pain assessment in paediatrics • Child abuse and non-accidental injury • Child protection – a multi-professional approach • The reproductive system • Maternity and obstetrics • Complications in pregnancy • SIDS

Interprofessional & Collaborative Practice across the Health Professions	<ul style="list-style-type: none"> • Professionalism • Professional behaviours, roles, responsibilities, and values • Role appreciation • NHS constitution and core values • Communication • Non-oppressive practice and legislation • Unconscious bias and stereotyping • Safeguarding • Service user engagement • CPD and reflective practice • Ethical frameworks in health care • Healthcare law • Sociological and social aspects of health • Contemporary policies and drivers
Year 3 (level 6)	
Augmenting Skills for Paramedic Science	<ul style="list-style-type: none"> • Enhanced assessment (medical model) and clinical decision making • Cranial nerve assessment • The eye – anatomy, conditions and assessment • The ear – anatomy, conditions and assessment • Abdominal assessment • Wound care and closure • Urinalysis • Dental emergencies • Integumentary system and conditions • Managing acute and chronic conditions • Co-morbidities • Alternative care pathways and safety netting • Health promotion and public health (MECC) • Contemporary issues in paramedic science • Career pathways
Clinical Pharmacology for Paramedic Science	<ul style="list-style-type: none"> • Pharmacokinetics • Pharmacodynamics • Medications and the law • JRCALC drugs • Patient medications • Polypharmacy • Supplements and herbal remedies • Over the counter drugs • Recreational and illegal drugs and alcohol dependence/abuse • Independent & supplementary prescribing • Analgesics and pain management • Blood pressure control, hypertension and antihypertensive drugs • Blood clotting and drugs that interfere with coagulation
Research & Evidence Based Practice	<ul style="list-style-type: none"> • How to conduct a literature search • The hierarchy of evidence • How to write a literature review • Developing a research proposal • Critical appraisal • Quantitative research methodologies • Qualitative research methodologies • Gathering primary data and data collection • Data analysis • Statistical analysis • Ethical issues in research • Evidence-into-practice, research process in action and relevance • Promoting quality of care, evaluation, governance, and audit • Writing for publish

Leadership & Education Support

- Learning theory
- Leadership and management theory
- Organisational culture
- Human factors
- Change management
- Teamwork and motivation
- Coaching
- Preceptorship
- Practice education
- Supporting other students and health professionals

As part of the Essential Skills for Paramedic Science module, students also undertake mandatory education in order to prepare them for practice-based education. This is outlined in figure 3.

Figure 3 Mandatory education

- Basic life support
- Infection prevention and control
- Safeguarding
- Fire safety
- Equality and diversity
- Manual handling
- Conflict resolution
- Capacity and consent
- Conflict resolution
- Information governance and data protection

The Clinical Assessment Portfolio (CAP)

The electronic CAP (similar to the nursing Practice Assessment Document - PAD) provides students with an ongoing record of their placements over the three years of the programme, allows them to reflect on their learning and personal development, and provides evidence that they have achieved the competencies to meet the requirements of the Health and Care Professions Council (HCPC) Standards of Proficiency: Paramedics (2023) and the College of Paramedics (CoP) Curriculum Guidance (2017).

The CAP has a 'Competency Record' section reflecting the skills and competencies students must be signed off on whilst in practise placement. The Competency Record is a PASS/REFER assessment based upon direct observation, questioning or discussions with the student. It is designed to assess students continuously throughout placement.

It should be noted that the formal interviews and progression points in the CAP must be signed off by a named paramedic Practice Educator (PEd) within the student's ambulance placement.

Individual competencies can however, be signed off by any qualified registrant if they deem the student competent (see figure 4 & 5) at the learning outcomes relevant to the placement they are on (see Figure 7). Examples include nurses, physiotherapists, occupational therapists, operating department assistants, doctors and anaesthetists. **The sign off of such non-ambulance placement competencies is at the placements discretion and they should deem what is appropriate for the student to engage in whilst on placement with them.**

Assessment Levels and Competencies

The definitions of the levels at which students should be able to work are outlined in the elements of practice criteria in figure 4. The recommended summative assessment level (criteria level) for competencies by year is outlined in figure 5. Elements are mapped to meet HCPC Paramedics Standards of Proficiency (2023) and the College of Paramedics Curriculum Guidance (2017).

Figure 4 Assessment levels and elements of practice criteria

Criteria Level	Knowledge/Reasoning	Level of Performance	Personal and Professional Awareness
Dependent (D)	<ul style="list-style-type: none"> Lacks knowledge No awareness of alternatives Unable to explain / give reasons for actions 	<ul style="list-style-type: none"> Lacks accuracy & confidence Needs continuous guidance & supervision Poor organisation No awareness of priorities 	<ul style="list-style-type: none"> Actions & behaviour are not modified to meet the needs of the client and situation No meaningful explanations given Lacks insight into personal and professional behaviour
Assisted (A)	<ul style="list-style-type: none"> Knowledge is usually accurate Little awareness of alternatives Identifies reasons for actions 	<ul style="list-style-type: none"> Accurate performance but some lack of confidence & efficiency. Requires frequent direction / supervision Some awareness of priorities / requires prompting 	<ul style="list-style-type: none"> Recognises the need to modify actions / behaviour to the client and situation, but unable to do so in non-routine situations Gives standard explanations / does not modify information
Minimal supervision (MS)	<ul style="list-style-type: none"> Applies accurate knowledge to practise Some awareness of alternatives Beginning to make judgements based on contemporary evidence 	<ul style="list-style-type: none"> Safe and accurate; fairly confident / efficient Needs occasional direction or support Beginning to initiate appropriate actions Identifies priorities with minimal prompting 	<ul style="list-style-type: none"> Actions / interventions / behaviours generally appropriate for the client and situation Explanation is usually at an appropriate & coherent Level Identifies the need for assistance
Independent (I)	<ul style="list-style-type: none"> Applies evidence based knowledge Demonstrates awareness of alternatives Sound rationale for actions Makes judgements / 	<ul style="list-style-type: none"> Confident / safe / efficient Needs minimal direction / support Able to prioritise Able to adapt to the situation 	<ul style="list-style-type: none"> Conscious / deliberate planning Actions/ interventions/behaviour are appropriate to the client & situation

	<ul style="list-style-type: none"> • decisions based on contemporary evidence 		<ul style="list-style-type: none"> • Gives coherent / appropriate information • Identifies & makes appropriate referrals
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Figure 5 Recommended summative assessment level for competencies by year

Competency Record Criteria	Criteria Level		
	Year 1	Year 2	Year 3
Communication	MS	I	
Moving and Handling	MS	I	
Health & Safety	MS	I	
Professional Conduct, Performance and Ethics	MS	I	I
Service User Involvement & Wellbeing	A	MS	I
Documentation & Record Keeping	MS	I	
Patient Assessment I	A	I	I
Patient Assessment II		MS	I
Paediatric Patient Assessment		MS	I
Primary & Secondary Survey	MS	I	
Airway Management I	MS	I	
Airway Management II		MS	I
Intermediate Life Support (ILS)	MS	I	I
Advanced Life Support (ALS)		MS	I
Advanced Trauma Life Support (ATLS)		MS	I
Paediatric Advanced Life Support (PALS)		MS	I
Wound Care & Haemorrhage Control	MS	MS	I
Wound Closure			I
Burns Management	MS	I	I
Fractures, Immobilisation & Splinting	MS	I	
Intramuscular (IM) Injection	MS	I	
Assisting the Paramedic	MS	I	
Subcutaneous (SC) Injection		MS	I
Intravenous (IV) Cannulation		MS	I
Intraosseous (IO) Cannulation		MS	I
Infusion		MS	I
Needle Thoracocentesis		MS	I
Medicines Management & Administration I	A	I	I
Medicines Management & Administration II		MS	I
Clinical Decision Making	A	MS	I
Obstetric & Gynaecological Presentations & Management		MS	I
Multiple Casualties, Major Incidents & Resource Management		MS	I

OSCE Assessments

Throughout the three years of the programme, students will undertake formative and summative OSCE assessments. This is to ensure that they are safe to practise the task in placement where they will be summatively signed off as competent. The CAP contains a record of the OSCE assessments students undertake whilst in university.

Whilst relevantly qualified and registered health professionals can sign students as competent on individual competencies within their Clinical Assessment Portfolio (CAP) including intermediate and final grades, it is the student's named ambulance paramedic PEd that holds the responsibility for signing the student off as competent at each year's progression point.

Figure 6 summative & formative OSCE assessments

Year 1	Year 2	Year 3
Baseline Observations Pulses, Respiratory Rate, Blood Pressure, Blood Glucose	Needle Cricothyroid Puncture	Enhanced Patient Assessment: Respiratory System
3 Lead ECG Placement	Needle Thoracocentesis	Enhanced Patient Assessment: Cardiovascular System
Airway Management OPA, NPA & iGel	Subcutaneous (SC) Injection	Enhanced Patient Assessment: Neurological System
Intramuscular (IM) Injection	Intravenous (IV) Cannulation	Enhanced Patient Assessment: Musculoskeletal System
Immediate Life Support (ILS)	Intraosseous (IO) Cannulation	Enhanced Patient Assessment: Gastrointestinal System
Intermediate Medical Life Support (IMLS)	Advanced Life Support (ALS)	Enhanced Patient Assessment: Genitourinary System
Intermediate Trauma Life Support (ITLS)	Advanced Medical Life Support (AMLS)	Wound Closure: Suturing, Gluing, Wound Closure Strips
	Advanced Trauma Life Support (ATLS)	
	Paediatric Advanced Life Support (PALS)	
	Paediatric Advanced Life Support (PALS)	

Placement Orientation

This should be completed by the students' mentor/supervisor for each placement area.

Placement Orientation (To be completed for each setting within the rotation)	Student Signature/Date:	Practice Educator Signature/Date:
The following activities must be met within the first day of placement:		
An orientation to the practice placement setting has been undertaken including shift patterns, breaks, meal times, placement profile, nature of service, awareness of user group, intended interventions and clinical outcomes.		
Placement specific fire procedures have been explained and student is aware of exit, alarms and fire safety equipment locations.		

The student and supervisor are aware of the University and Trust escalation processes and support mechanisms. (Issues to paramedicspractice@lincoln.ac.uk)		
The student understands and adheres to dress code, infection prevention and control and promotes a professional image.		
The student is aware of how to summon assistance in the case of emergency.		
Resuscitation policy and procedures have been explained and the location and use of necessary equipment has been shown.		
Information governance protocol including data protection, record keeping and confidentiality has been discussed.		
The student is aware of where to find key policies and protocols for safe practise: <ul style="list-style-type: none"> • Health and safety • Incident reporting • Infection prevention and control • Safeguarding and escalation of concerns • Lone working (as applicable) • Sickness and absence policy and reporting procedure • Supply/administration/destruction/surrender of controlled drugs 		
Practical arrangements such as: <ul style="list-style-type: none"> • Security access to practise area • Access to computer and learning resources • Storage of personal belongings • Break periods 		
The placement interface with other services or agencies and opportunities for inter-professional learning to inform opportunities, insight visits and learning plan.		
Risk assessment and reasonable adjustments have been discussed and considered relating to disability/learning/pregnancy needs (where disclosed).		
The following criteria must be met prior to student use:		
Any moving and handling equipment used in the practise area must be demonstrated in terms of safe use for student and service user/patient.		
The student has had a demonstration of any medical devices and practises used in the practise area.		

Learning Outcomes for Non-Ambulance Placements

In addition to their core ambulance placement, students undertake a wide range of non-ambulance practice placements across the programme. Each of the non-ambulance placements have their own associated learning outcomes that students may have opportunity to meet whilst on placement and these are detailed below.

Figure 7 non-ambulance placements and associated learning outcomes

Year 1	
Mental Health Placement	

School of Health and Social Care, University of Lincoln BSc (Hons) Paramedic Science Non-Ambulance Placement Handbook
Version 2.0 (Sept 2023)

<p>LO1 Demonstrate at all times practice and conduct that accords with the HCPC Standards of Conduct, Performance and Ethics.</p> <p>LO2 Actively engage as a learner, discuss learning outcomes with an identified named mentor/supervisor/practice educator and maximise available learning opportunities.</p> <p>LO3 Observe and participate in the appropriate communication of information and support to service users, relatives and staff within the mental health environment.</p> <p>LO4 Discuss the modification of approaches to ensure application of care with respect to the environment and situation encountered especially in regards to safety.</p> <p>LO5 Discuss the impact of Mental Health legislation on the assessment, management and delivery of care for service users.</p> <p>LO6 Participate appropriately in the assessment of an individual's needs within the practice learning environment.</p>	<p>Provides an opportunity to gain experience and develop an understanding of the complexities and range of mental health conditions that patients may present with across the lifespan, and the role of the paramedic in assessing and managing these. This should include the opportunity to develop and gain an understanding of compulsory admission to hospital procedures under the Mental Health Act. Aspects of self-care will also be explored.</p>
<p>Year 2</p>	
<p>Theatres Placement</p>	
<p>LO1 Demonstrate at all times practice and conduct that accords with the HCPC Standards of Conduct, Performance and Ethics.</p> <p>LO2 Actively engage as a learner, discuss learning outcomes with an identified named mentor/supervisor/practice educator and maximise available learning opportunities.</p> <p>LO3 Undertake airway management and ventilation skills.</p> <p>LO4 Ventilate an intubated patient using a bag-valve-mask and oxygen.</p> <p>LO5 Perform intravenous cannulation.</p>	<p>The theatre placement is designed to allow students to gain experience across the whole spectrum of airway management in unconscious patients. Additionally, students will observe and undertake intravenous cannulation under the supervision of anaesthetists.</p>
<p>Emergency Department Placement</p>	
<p>LO1 Demonstrate at all times practice and conduct that accords with the HCPC Standards of Conduct, Performance and Ethics.</p> <p>LO2 Actively engage as a learner, discuss learning outcomes with an identified named mentor/supervisor/practice educator and maximise available learning opportunities.</p> <p>LO3 Undertake a range of patient assessments to identify illness and injury including history taking, base line observations and physical examination as indicated.</p> <p>LO4 Perform intravenous cannulation</p> <p>LO5 Participate in CPR and advanced life support as part of a wider team.</p>	<p>This provides the opportunity to experience interaction with other allied health and medical professionals, as well as opportunities to develop skills of communication, patient handover, adult and paediatric patient assessment, plus further treatment and investigation such as cardiology, radiography, pathology, pharmacology and other appropriate departments.</p>

LO6	Undertake airway management and ventilation skills.	
LO7	Undertake cardiac monitoring and 12-lead ECG interpretation.	
Mental Health Placement		
LO1	Demonstrate at all times practice and conduct that accords with the HCPC Standards of Conduct, Performance and Ethics.	Provides an opportunity to gain experience and develop an understanding of the complexities and range of mental health conditions that patients may present with across the lifespan, and the role of the paramedic in assessing and managing these. This should include the opportunity to develop and gain an understanding of compulsory admission to hospital procedures under the Mental Health Act. Aspects of self-care will also be explored.
LO2	Actively engage as a learner, discuss learning outcomes with an identified named mentor/supervisor/practice educator and maximise available learning opportunities.	
LO3	Observe and participate in the appropriate communication of information and support to service users, relatives and staff within the mental health environment.	
LO4	Discuss the modification of approaches to ensure application of care with respect to the environment and situation encountered especially in regards to safety.	
LO5	Discuss the impact of Mental Health legislation on the assessment, management and delivery of care for service users.	
LO6	Participate appropriately in the assessment of an individual's needs within the practice learning environment.	
Year 3		
Minor Injuries & Illnesses Placement		
LO1	Demonstrate at all times practice and conduct that accords with the HCPC Standards of Conduct, Performance and Ethics.	These placements are designed to allow students to gain experience in a more focused and enhanced assessment, history taking following a medical model of enquiry and clinical decision making. They will give students the opportunity to assess and manage patients with a range of minor injuries and illnesses in the urgent and emergency care setting. Placements will be in a variety of settings including GP surgeries, walk in centres and minor injuries units.
LO2	Actively engage as a learner, discuss learning outcomes with an identified named mentor/supervisor/practice educator and maximise available learning opportunities.	
LO3	Demonstrate enhanced skills in holistic history taking and physical assessment whilst utilising active clinical reasoning to inform a plausible differential diagnoses, and appropriate disposition for a service user with a minor illness or injury.	
LO4	Following a structured holistic assessment process, effectively manage service users with long-term conditions and co-morbidities supporting with appropriate health promotion, referral and multi-disciplinary approach.	
LO5	Critically appraise the evidence base to inform clinical decision making in urgent care settings.	
LO6	Demonstrate a critical understanding of the planning, processes, clinical challenges and limitations relating to the safe discharge or referral of service users within urgent and emergency care.	

<p>LO7 Following a wound assessment, demonstrate appropriate wound closure techniques including suturing, stapling, gluing and wound closure strips.</p>	
Out-of-Hours (OoH) Unscheduled Care, GP Practice	
<p>LO1 Demonstrate at all times practice and conduct that accords with the HCPC Standards of Conduct, Performance and Ethics.</p> <p>LO2 Actively engage as a learner, discuss learning outcomes with an identified named mentor/supervisor/practice educator and maximise available learning opportunities.</p> <p>LO3 Demonstrate enhanced skills in holistic history taking and physical assessment whilst utilising active clinical reasoning to inform a plausible differential diagnoses, and appropriate disposition for a service user with a minor illness or injury.</p> <p>LO4 Following a structured holistic assessment process, effectively manage service users with long-term conditions and co-morbidities supporting with appropriate health promotion, referral and multi-disciplinary approach.</p> <p>LO5 Critically appraise the evidence base to inform clinical decision making in urgent care settings.</p> <p>LO6 Demonstrate a critical understanding of the planning, processes, clinical challenges and limitations relating to the safe discharge or referral of service users within urgent and emergency care.</p> <p>LO7 Following a wound assessment, demonstrate appropriate wound closure techniques including suturing, stapling, gluing and wound closure strips.</p>	<p>Both this and the above placement will offer the chance for our students to identify what providers of primary and urgent care do (how they manage certain conditions) once the paramedic refers through to them. It also offers the opportunity for a multi-professional collaborative approach to the patient – the student needs to be aware of what are the expectations of them from other providers of healthcare should they refer patients towards them in the future.</p>

Reflection (3rd years only)

In addition to the individual competencies contained within the CAP and in order that students are able to make the most of the placement opportunity, they are required to complete an additional reflective section for each non-ambulance placement. These are structured as follows:

- What do I wish to get from this placement? (to be agreed with mentor/supervisor)
- Supervisor's comments
- Supervisor feedback on placement
- Personal reflection upon placement

Key Contacts and Information

The Interprofessional Practice Support Team

During practice-based education, students and mentors/supervisors/PEds are supported by the University of Lincoln Paramedic Team Personal Tutors. For ease of use there is a single point of contact:

Single Point of Contact

paramedicspractice@lincoln.ac.uk

01522 83 5808

You can also contact John McKenzie, Placement Lead for paramedic science:

jomckenzie@lincoln.ac.uk

01522 83 5039

Or Ian Mckenzie-Purdham, Programme Lead for paramedic science:

imckenziepurdham@lincoln.ac.uk

The website below also provides further information:

<https://www.lincoln.ac.uk/home/shsc/placements/paramedicscienceplacements/>

Early Warning Concern List

If concerns are identified at any stage, the statements in the Early Warning Concern List shown in figure 8 can be used to formulate an action plan or can be referred to the University via paramedicspractice@lincoln.ac.uk.

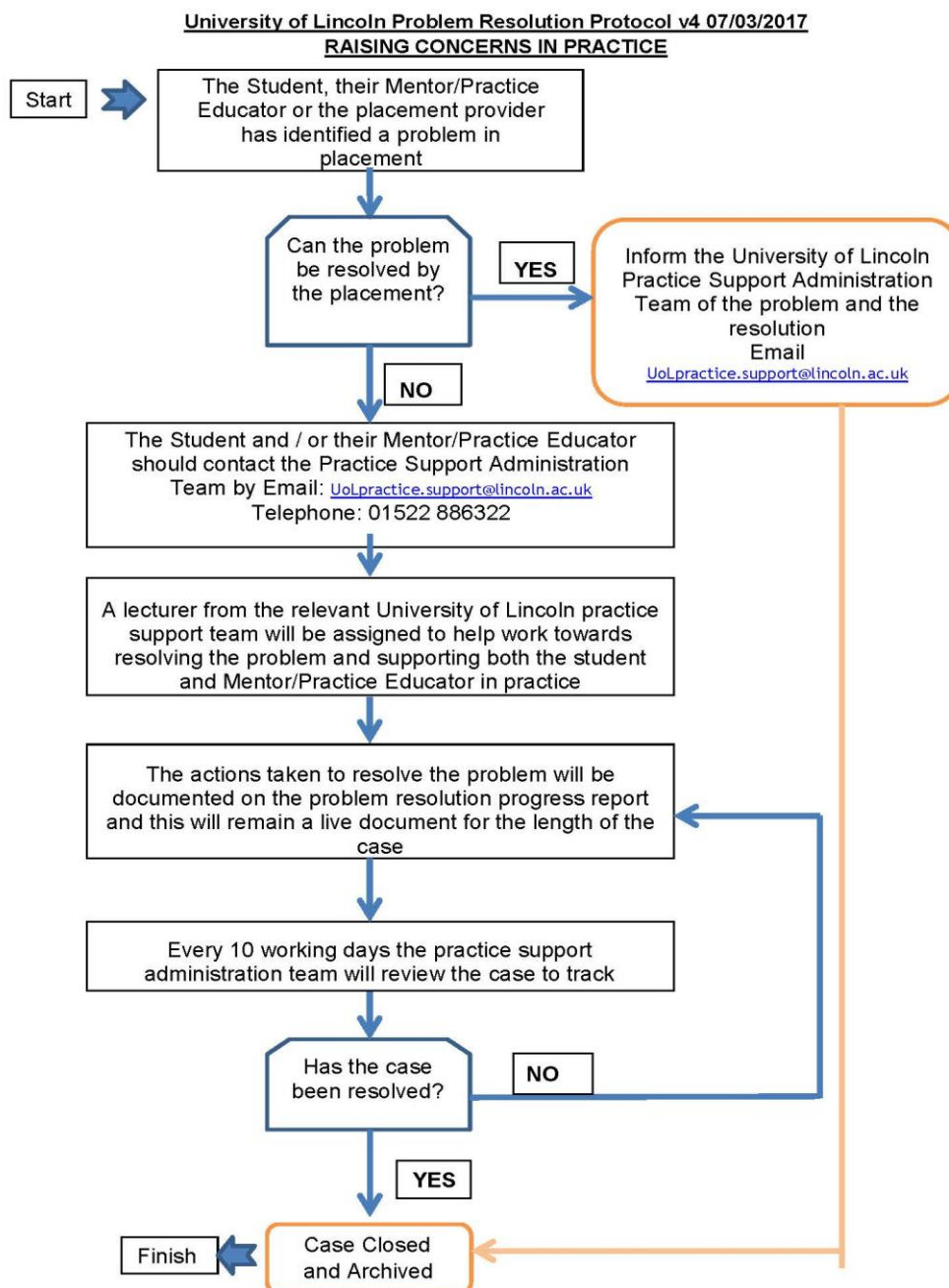
Figure 8 Cause for concern early warning check list

Early Warning Concern List
<ul style="list-style-type: none"> • Has no insight into weakness so unable to change following constructive feedback • Practical interpersonal and communication skills are not appropriate to their level of experience • Demonstrates inability to deal with difficult situations for their level of experience • Poor written record keeping • Lacks insight into the impact of their communication on others • Demonstrates a lack of empathy, respect, dignity and caring towards clients/ carers and colleagues
<ul style="list-style-type: none"> • Is preoccupied with personal issues • Is not motivated and shows lack of interest • Does not respond appropriately to feedback • Is unable to effectively work within the team • Shares personal experiences with patients and clients inappropriately • Lacks insight into their behaviour towards others
<ul style="list-style-type: none"> • Demonstrates inconsistent clinical performance to their level of experience • Has demonstrated unsafe clinical practise • Is unable to demonstrate preparation and organisational skills to their level of experience • Is unable to relate actions to potential risks re self, patients and colleagues • Misuse of IT and/or electronic patient records
<ul style="list-style-type: none"> • Demonstrates poor professional behaviour and is unaware of professional boundaries • Is unreliable – i.e. persistent lateness/absence/sickness • Evidence of breaching confidentiality, of patients, peer group, placement or University staff • Evidence of inappropriate use of social media • Uses mobile phone to text while in clinical area • Does not adhere to uniform policy • Inappropriate use of electronic mail, text messaging and social network sites • Does not demonstrate respect for all members of the team
<ul style="list-style-type: none"> • Does not have required knowledge for their level of experience • Has little or no ability to translate numerical calculations into drug administration • Unable to apply theory to practise • Does not meet the required level of competencies for their level of experience • Is unsafe in recognising need for storing, recording or monitoring side effects of medications for example • Appears to have little understanding of legislation around medicines management, legal and ethical frameworks • Does not use initiative in knowledge acquisition around drugs associated with patient profile for placement area, routes of administration, side effects, adverse reactions for example

Raising Concerns in Practice

It may sometimes be necessary for mentors/supervisors/ PEds, students or both to raise concerns in practise for a variety of different reasons. When there is a cause for concern it is important that this is raised in a timely manner and the University of Lincoln Problem Resolution Protocol in figure 9 gives guidance should such a situation arise.

Figure 9 Problem resolution protocol



Student Support

There will be times when students need support for specific issues. The University of Lincoln have a robust student support mechanism and a variety of services available to help them. Figure 10 gives advice to staff regarding where best to direct students for a range of different issues.

Figure 10 Staff guide to support services for students

