



# FTO and ILS/ALS Guidelines for the Field Clinical Internship

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**OSF<sup>®</sup>  
SAINT FRANCIS  
MEDICAL CENTER**

# Peoria Area EMS System

## Field Clinical Guidelines

### PROGRAM GOALS AND OBJECTIVES

The purpose of the field clinical program is to offer the student the opportunity to apply concepts and techniques learned throughout the didactic and clinical modules. The program is designed to insure the effective orientation of students and provisional EMS Providers to the units, equipment and patient care. The student should take this opportunity to refine cognitive and performance skills. The Field Training Officer (FTO) will offer consistent support, direction and guidance to insure a positive learning experience. FTO's are expected to enhance their knowledge and skills to show the students the value of continuing education and refinement of skills.

The goal of the Peoria Area EMS System (PAEMS) is to deliver the highest quality health care, which can be achieved with available resources. As the resource hospital for the PAEMS System, OSF Saint Francis Medical Center strives to meet this goal with the field clinical by preparing students to function as entry level intermediate or paramedic providers with emergency medical services and in the prehospital transportation industry.

To achieve the goal and purpose of the field clinical and in keeping with the educational format established by the developers of the National Standard Curriculum, three program objectives have been developed.

- Cognitive Objectives  
Upon completion of the clinical the student will demonstrate the ability to comprehend, apply and evaluate information relative to the role of an entry level provider.
- Psychomotor Objectives  
Upon completion of the clinical the intern will demonstrate technical proficiency in all of the skills necessary to fulfill the role of an entry-level provider.
- Affective Objectives  
Upon completion of the internship the intern will demonstrate personal behaviors consistent with professional and employer expectations for the entry-level provider.

These objectives will be discussed further throughout this manual with emphasis placed on the process for evaluating and documenting the student's progress in accomplishing these objectives.

Questions or additional guidance in the goals and objectives of the clinical program should be directed to the PAEMS Office at OSF Saint Francis Medical Center (309-624-3101).

# Paramedic/Intermediate Field Clinical Experience

## DEFINITIONS

**Field Clinical Experience** – An opportunity for the student to improve skills, gain understanding and develop technique in patient assessment and management with supervised practical experience in the prehospital setting.

**Student/Intern** – The designation “Student” or “Intern” is given to an individual who has completed all didactic requirements and is released by the course coordinator to the hospital and field clinical training.

**Field Training Officer (FTO or Preceptor)** – An FTO is an experienced and competent professional who serves as a clinical role model and resource person to students and provisional EMT’s. The FTO will orient student EMT’s to their roles and responsibilities pertaining to patient care. They will also introduce them to the formal and informal rules, customs, cultures and norms of their co-workers and workplace.

## MINIMUM REQUIREMENTS

### **Student (Intern) – hereafter referred to as “Student”**

- a. Successfully complete all didactic and hospital clinical requirements of an IDPH approved EMT-I/P Course.
- b. Achieve a minimum score of 80 % on the Peoria Area EMS System Protocol Exam (ALS or ILS).
- c. Demonstrate skill proficiency by passing a System practical skills test.

### **Field Training Officer**

- a. Minimum of one year experience as an Illinois state licensed and Peoria Area EMS System certified Paramedic (current).
- b. Demonstrate a clear understanding of the ILS and ALS protocols (minimum 85% score on ALS protocol exam).
- c. Current certifications in :
  1. Advanced Cardiac Life Support (ACLS)
  2. International Trauma Life Support (ITLS) or Basic Trauma Life Support (BTLS)
  3. Pediatric Education for the Prehospital Provider (PEPP) or Pediatric Advanced Life Support (PALS)
  4. Current CPR Healthcare Provider Card (or equivalent).
- d. Recommendation by Agency Training Officer and EMS Medical Director

## **EXPECTATIONS**

### **Expectations of the Student/Intern**

The Field Clinical is an opportunity given to the student to learn the job and refine skills. The student should demonstrate sincere interest and motivation in all aspects of prehospital care and transportation. Students are expected to function as a member of the EMS team and participate in all activities of the crew (i.e., equipment checks, restocks, routine transport care, etc.).

Cognitive, psychomotor and affective expectations will vary depending on the stage of the Field Clinical. A student entering the program should be expected to assume many aspects of patient care under the direct guidance of the FTO. As the student progresses through the Field Clinical, expectations should grow, assuming all aspects of patient care with minimal FTO guidance.

### **Expectations of the Field Training Officer**

Field Training Instructors are given the opportunity to participate in the student's development as a competent prehospital professional. The FTO is the "coach" who delegates patient care responsibilities, supports with positive praise and constructive feedback, and directs the intern with clear instructions reinforcing objectives and expectations.

FTO's are expected to provide a positive role model by demonstrating:

- Thorough understanding of the System protocols and operating procedures.
- Understanding of Course Curriculum and how to temper with "street sense" and System expectations without compromising the Curriculum.
- Willingness to accept criticism and make appropriate adjustments
- Ability to convey a positive, professional attitude in regards to the profession, the System, their employer and the learning process.
- Commitment to maintain Continuing Education Requirements.
- A sincere interest in the students and the program.
- Absence of prejudice due to students' background, agency affiliation, age, sex, color or ethnic origins.
- Ability to communicate effectively and provide constructive criticism.
- Willingness to complete all necessary documentation in a timely manner.
- Willingness to attend meetings and training sessions designed to facilitate the internship program.

### **Expectations of the Training Agency**

Training agencies are given the opportunity to participate in the student's development as a competent prehospital professional while evaluating the student as a perspective employee and the FTO's development as an important component in the expansion of the EMS team. With the privilege of being recognized as a training agency comes the responsibility to provide an atmosphere of good faith and trust, free of prejudice based on distinguishable individual differences attributed to hereditary pattern, ethnic background, educational attainment and environmental experiences.

## **PROGRAM PROCEDURES**

### **Scheduling and Assignment of Preceptors**

Field Clinicals are scheduled through a representative of the training agency (see PAEMS Internship Policies). When the Student is enrolled in the program, he/she will be provided a list of training agencies and scheduling contacts. Orientation meetings will be arranged by the individual training agencies. Due to the unique environment of each training agency, preceptor assignment will be at the discretion of the training agency. When possible, interns should be scheduled with a new preceptor (FTO) after every 80 – 84 hours. Interns are highly encouraged to schedule their field clinical experiences at more than 2 agencies.

### **Length of Field Clinicals**

Length of Field Clinicals is determined by current Student Manuals for each level of licensure and by System policy. The EMS Medical Director may amend (shorten or lengthen) the requirements based on the student's evaluations. Program requirements must be completed within time limits as specified by the training program and current IDPH Rules and Regulation.

### **Patient Documentation**

Complete the Narrative portion of the Illinois Emergency Medical Services "Prehospital Care Report" (PCR) – Student USE ONLY form - for each of the patient's assessed. Use appropriate medical terminology and documentation guidelines. All documentation completed by the Student must be reviewed by the Field Training Officer prior to submitting. The FTO's signature on the report form will indicate he has reviewed all information and has deemed it acceptable. The Student shall sign the Prehospital Report Form with "EMT-I/I" (Emergency Medical Technician – Intermediate Intern) or "EMT-P/I" (Emergency Medical Technician – Paramedic Intern) following his/her signature. Patient charts should not be copied or attached to field clinical documentation or maintained by the intern.

### **Program Evaluation**

Program evaluation will be conducted on a continuous basis. Students will be given the opportunity to complete the 'Skill Ratings' form on the back of the Run Critique. Information from the evaluations will be communicated to the FTO's and Course Coordinators during meetings and inservices.

### **Status of Student and Staffing Requirements**

A Student's status while functioning with an agency is assumed to be that of a guest, unless other crew established. The student does not function with the ambulance provider under a formal job description or employment agreement, but rather under the aegis of the Peoria Area EMS System and the provisions of Illinois Department of Public Health EMS Rules and Regulations. Unless otherwise established, the training agency-student relationship is neither implicitly or explicitly an employer-employee relationship. However, students must respect the operating procedures of the training agency at all times, and must comply with the training agencies uniform requirements, which may require the purchase of specific uniform apparel.

**The student is authorized to perform, under the direct and immediate supervision of a System approved FTO, those procedures that are allowed in current System protocols for that level in their training program.**

**When acting outside the approved internship program, the student may only function at the level of their System Certification.**

Ambulance crews used for evaluation of students must consist of at least an EMT-P recognized as a *Peoria Area EMS System* FTO and an EMT-B. **Hours worked as a member of a two-person crew cannot be counted as student hours.** Students employed with a training agency may document ILS/ALS procedures performed while working with an FTO. Procedures performed will be entered into the student's records. At no time during the field clinical is the intern allowed to manage patient care without FTO supervision. Failure to comply may result in termination from the program.

## **STUDENT EVALUATION**

To monitor the student's progress and abilities, the student is evaluated on cognitive, psychomotor and affective objectives. The manner, extent and standard to which the student will be evaluated will depend on the stage of the field clinical in which the FTO is evaluating the intern.

### **Cognitive Objectives**

Evaluation of the student's knowledge and understanding can be accomplished by verbal evaluations and questions throughout the internship. This is a useful tool in maintaining the student's interest, stimulating thinking, determining attitudes and developing a deeper understanding of subject matter. In the early stage of the field clinical, questions should be limited to specific skills and subjects. This is helpful in determining what the intern knows versus what needs to be learned. As the intern progresses, cognitive knowledge should be evaluated to determine the student's reasoning abilities and focus on a broad scope of concepts.

### **Psychomotor Objectives**

Performance evaluations are assessments of the student's proficiency of the skills. Evaluations are based on specific performance objectives found on the skill evaluation forms. The student is evaluated on procedures, timeliness, performance, safety and the amount of assistance required to complete the task.

### **Affective Objectives**

Students should also be evaluated on how they demonstrate conscientiousness and interest in the program and profession. Affective objectives can be measured by observing and documenting the attitude and demeanor of the student. Although this is a subjective evaluation, measurable factors may include the intern's innovation, appearance, habits, courtesy, cooperation, reliability, attendance and perseverance.

## **STUDENT PROGRESS DOCUMENTATION**

### **Field Clinical Evaluation**

Time (in hours) functioning as an intern shall be documented on the “EMT Student Field Internship Progress Report” The FTO will complete the “Affective Evaluation Report”, “Skills Rating Form”, and “Team Leadership Report” at the end of each intern shift. The student will complete the “Skills Rating’ form where appropriate.

### **Field Student Report**

Patient contacts and skills performed shall be documented on the “Run Critique”. Student’s should provide a brief summary of the patient’s problem and skills the student performed. FTO’s should provide an evaluation of the student’s performance and skills (cognitive and psychomotor).

### **Cumulative Student Reports**

Students are responsible for maintaining all Field Clinical reports and shall meet with the Course Coordinator at every 80 hours or as needed.

For **EMT-I students**: The Clinical Coordinator must meet with the student every 80 hours.

For **EMT-P students**: The Clinical Coordinator must meet with the student every 80 hours.

At the end of the Field Internship, the Course Coordinator will recommend the student to the PAEMS Prehospital Education Coordinator for a record review prior to interviewing with the EMS Medical Director for approval to test at the State or National Level.

### **Student Evaluation**

Every 80 hours The Course Coordinator will review with the intern their field clinical status and make recommendations. Strengths, weaknesses and goals will be discussed during the review.

### **Skill Records**

Students are expected to keep all records and reports current and in a 3-ring binder.

### **Problem Resolution**

The Training Agency’s Field Training Instructor and Students should report concerns and problems to the Course Coordinator and the Agency’s Training Officer. Resolution of problems, which arise

during a field internship, is primarily the responsibility of the Course Coordinator and the Agency's Training Officer. If resolution cannot be reached, or if the problem requires the attention of the PAEMS Medical Director, the Course Coordinator shall immediately notify the Prehospital Education Coordinator and the Medical Director. Written documentation may be requested.

### **Absence or tardiness for internship ride along shifts**

If the student needs to cancel a scheduled shift, he/she must notify the training agency twenty-four (24) hours prior to the start of the shift. Shifts canceled 24-hours in advance will not be counted as absences; however, excessive cancellations (more than 2) may result in corrective action.

Interns who notify the training agency of an expected absence, but do not make the notification 24-hours prior to the start of the shift, will be counted as absent and the FTO shall document the absence in the student record. An intern who accumulates more than 3 absences during the internship may be terminated from the program.

Interns who do not report for scheduled shifts and have not notified the training agency prior to his/her absence will be considered "No Shows". The training agency should notify the Course Coordinator of the "No Show". The Course Coordinator will meet with the student and document the reason for the "No Show". The Course Coordinator may suspend or terminate the student from the internship.

### **Remediation**

During the period of internship, an FTO or Course Coordinator may find the student's skills and techniques to be below acceptable standards. The FTO or Course Coordinator should document those specific skill and techniques in which the intern is displaying deficiency. Documentation should be made on the "Skills Rating Form" located on the back of the Run Critique or on the "Course Coordinator Evaluation Form". The report(s) should specifically state "Intern requires immediate EMS Medical Director's review" and should be submitted to the EMS Office within 24-hours.

Reports of deficient skills will be investigated by the Prehospital Education Coordinator with recommendations forwarded to the EMS Medical Director.

### **Resolution of personality conflicts between the FTO and Intern**

If a personality conflict is perceived between an FTO and Intern, the involved parties should bring the conflict to the attention of the Training Agency's Training Officer and the Course Coordinator. The situation will be investigated and recommendations forwarded to the involved parties.

### **Open-Door Policy**

The EMS Medical Director of the Peoria Area EMS System supports an open-door policy. When necessary, students and FTOs should feel free to communicate comments and concerns directly to the EMS Medical Director and the Prehospital Education Coordinator.

*Peoria Area EMS System*  
**Field Clinical Guidelines**

FTO – AGREEMENT:

I have read the Peoria Area EMS System’s “Guidelines for Paramedic Field Clinical Experience” and agree to uphold the policies, procedures, requirements and expectations of the System. I understand that I may be withdrawn from the list of Peoria Area EMS System Field Training Officers (FTOs) if I fail to meet the minimum requirements of the program or violate the guidelines. If I decide to voluntarily withdraw as an FTO, I will notify my Agency’s Training Officer AND the PAEMS System in writing.

PRINT NAME \_\_\_\_\_ Agency \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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