

Student Paramedic Ambulance Placement Handbook (2024-25)

Introduction & Context

This handbook contains guidance on the ambulance placements Student Paramedics must complete across their three-year BSc (Hons) in Paramedic Science. It contains guidance on the placement criteria, how to complete the electronic portfolio (Pebblepad) and who to contact to raise concerns or queries.

Placement experiences form a fundamental part of the student's development across the three-year programme. The student is expected to complete approximately 1500 hours of combined placement in total divided across the three years.

Understandably most of the Student Paramedics placement is supported and facilitated by two partner Ambulance Trusts; East Midlands Ambulance Service and Yorkshire Ambulance Service, however the student must also complete several "non-ambulance" placements to supplement their Ambulance placement and gain specific knowledge and insight in a particular area of healthcare.

Paramedics are regularly called upon to assess and manage patients with a wide variety of medical or traumatic presentations. Completion of ambulance placements allows for the consolidation of learning by experiencing the management of patients in a controlled setting under the supervision of a suitably experienced Practice Educator (PEd).

We would like to take this opportunity to thank you for supporting our students. The knowledge and experience they gain from the placements you provide is invaluable and enhances their education greatly which ultimately will result in them being effective and proficient Paramedics. They should conduct themselves in a professional manner with a positive and enthusiastic attitude to learning, we hope you enjoy spending time with our students.

Finally, should you have any questions regarding our students, or their placements please feel free to get in touch with any member of the placement team who will be happy to help.

Contact Information for Sheffield Hallam University

Simon Lovell or Jay Hughes Yorkshire Ambulance Service Placement Lead(s)	Mob: 07796 073086 Email: yas-student-placement@shu.ac.uk
Sam Smithson Placement Manager, YAS	Mob: 07824 540169 Email: Samantha.smithson1@nhs.net
Steven Walker East Midlands Ambulance Service Placement Lead	Mob: 07341 092135 Email: sw5998@hallam.shu.ac.uk
Suki Khatkar Placement Experience & Contract Manager, EMAS	Mob: 07812 261288 Email: suki.khatkar@emas.nhs.uk
Sharyn Edwards Course Lead, Paramedic Science	Mob: 07584 145826 Email: hwbse1@hallam.shu.ac.uk

Absence and Sickness Reporting

If a student fails to attend a placement area when allocated, please contact either the ambulance placement lead(s) or the placement co-ordinator for guidance.

In the event a student is absent due to sickness it is the student's responsibility to inform both the university and their placement mentor. Should a student be sent home during their placement due to illness then the student should report this to the university and the placement team.

Accident and Injury reporting

Should an untoward incident or injury occur involving one of our students on placement guidance can be found at <https://www.shu.ac.uk/health-social-placements>

Electronic Clinical Assessment Portfolio (eCAP)

The eCAP is a document that contains all of the competencies to be completed while attending an ambulance placement.

The whole document is classed as a 'pass' or 'fail' assessment for the student.

How to complete any related competencies

It is the student's responsibility to ensure they complete all their competencies while attending a specific ambulance placement.

The student should be familiar with the outcomes of their placement with you.

There are specific competencies for ambulance placements. The student must achieve these competencies with relevant supporting evidence.

The competencies are recorded via a mobile application, which the student will access on their mobile device.

The outcome level is classed as either "dependent", "minimal supervision" or "independent". Definitions of these levels are highlighted below,

Level	
Dependant (D)	<p>Knowledge / reasoning Demonstrates knowledge of the fundamentals of patient care. Minimal awareness of alternative care pathways and referrals. Minimal awareness of rationale for actions and clinical decision making.</p> <p>Level of performance Can perform skill but displays minimal confidence & efficiency. Requires frequent direction / supervision. Minimal awareness of priorities / requires prompting with most tasks.</p> <p>Personal and professional awareness Minimal recognition of the need to modify actions / behaviour to the service user and situation. Self aware of knowledge and performance gaps in own practice. Able to provide basic explanations for actions.</p>

<p>Minimal Supervision (MS)</p>	<p>Knowledge / reasoning Applies accurate knowledge to person centred care with minimal support Demonstrates awareness of clinical impressions, differential diagnosis and alternative care pathways. Able to make some clinical decisions based on contemporary evidence.</p> <p>Level of performance Requires occasional direction or support. Frequently initiates appropriate actions. Identifies priorities with minimal prompting.</p> <p>Personal and professional awareness Demonstrate behaviours appropriate for the service user and situation Explanation and rationale for clinical decisions are frequently appropriate & coherent. Identifies the need for support/assistance and can recognise the limitations of their scope of practice.</p>
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<p>Independent (I)</p>	<p>Knowledge / reasoning Consistently applies evidence-based knowledge. Demonstrates differential clinical reasoning. Consistently demonstrates sound rationale for actions.</p> <p>Level of performance Independent in performance Able to prioritise tasks to form effective person centred care plans. Practice within the HCPC standards of performance</p> <p>Personal and professional awareness Demonstrates conscious deliberate planning of service delivery All Actions/ interventions and behaviour are appropriate to the service user & situation. Provides coherent / appropriate information to all service users and can effectively pass required information to other health care professionals . Can independently identify the need for & make appropriate referrals to other health and social care services. Practice within the HCPC standards of conduct and ethics</p>
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Website

This website is designed for the student, mentor, and placement providers. It contains information on all the elements required for placement. Under placement profile information you will find your institution and a link to your website.

Within this website you will also find Sheffield Hallam Policies and Procedures along with Service Level Agreements for your reference.

If you have any questions, please feel free to contact a member of the placement team.



Link: <https://www.shu.ac.uk/health-social-placements/profession-information/paramedic-science>

Expectations of our students

We expect our students to conduct themselves in a manner fitting of a healthcare professional. Our students should adopt a proactive approach to their learning/education and should portray their profession in a good light. Our students are bound by the code of conduct set by the University and the Health and Care Professions Council (HCPC).

We fully expect our students to integrate with the team they are working with and work competently and effectively and are expected to perform all tasks asked of them within their scope of practice.

Our students are informed of their placements and they are familiar with their competencies in advance. Students are also informed that it is their responsibility to ensure these competencies have been achieved.

It is expected that our students will attend in full uniform with appropriate issued Personal Protective Equipment (PPE)..

We hope you enjoy your time with our student, but should you have any questions, worries or concerns please contact a member of the paramedic team.

Thank you.

[Health and Care Professions Council \(HCPC\) standards for Practice-based learning](#)

Standard	Standard
5.1	Practice-based learning must be integral to the programme.
5.2	The structure, duration and range of practice-based learning must support the achievement of the learning outcomes and the standards of proficiency.
5.3	The education provider must maintain a thorough and effective system for approving and ensuring the quality of practice-based learning.
5.4	Practice-based learning must take place in an environment that is safe and supportive for learners and service users.
5.5	There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning.
5.6	Practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be on the relevant part of the Register.
5.7	Practice educators must undertake regular training which is appropriate to their role, learners' needs and the delivery of the learning outcomes of the programme.

5.8

Learners and practice educators must have the information they need in a timely manner in order to be prepared for practice- based learning.

Guidance for Ambulance Placement

Introduction

On behalf of the whole placement team, **thank you** for agreeing to support our student's ambulance placements. We understand some areas may be used to working with our students, however others may not. Highlighted below are just a few key messages and links to further guidance.

First contact...

Our students should have attended an induction with the trust prior to placement in year one, and they will have been given all the information to arrive at the placement area fully prepared. This is still a daunting experience for some of our students who may have had very limited exposure to hospital and ward environments so please ensure the student is familiarised with the area and introduced to relevant team members. Please encourage their involvement and ensure they are feeling supported and guided.

Our students are team players, however ...

Our students are team players and will happily assist with tasks, they are proficient to assist in; each year of ambulance placement they attend has competencies they must achieve.

Those who supervise our students don't need a formal mentorship qualification,

The Health and Care Professions Council (HCPC) state Practice Educators must have the relevant knowledge, skills, and experience to support safe and effective learning. While their guidance does suggest Practice, Educators are typically on a relevant register, they do acknowledge other arrangements are appropriate. Our perspective is that this is subjective to the task in hand.

Our students know what they need to achieve, should be proactive in achieving it and initiating the relevant recording (on their phone via Pebblepad),

Prior to commencing a placement block all our students receive a pre-placement briefing which outlines our expectations of them. This includes the competencies they should achieve and being proactive in achieving them. Our students record their competencies via Pebblepocket on a mobile device. While we do produce guidance on this, our students can take you through it.

Finally, thanks again, please let us know what you think ...

We really appreciate all your support and feedback. Our students should conduct themselves with the highest degree of professionalism, in keeping with the profession they wish to join. Should you feel this is not the case, please get in touch with us. Of course, positive feedback is also welcomed!

Student Paramedic Ambulance Placement Competencies

Below is a list of the competencies, some will differ slightly depending on the students year within the course program, please see their portfolio for specifics.

	Competency	Explanation
1	Demonstrate effective and appropriate communication with a patient / service user (across age ranges)	<i>The student consistently applies and adapts their clinical social skills in complex situations by engaging with service users and their caregivers across the lifespan.</i>
2	Identify and minimise potential on scene risks to maintain a safe working environment	<i>The student consistently identifies risk factors to a variety of scenes and manages the situation safely and effectively in complex situations.</i>
3	Minimise cross infection within your scope of practice	<i>The student actively promotes the importance of minimising the risk of cross infection through the correct use of technique and equipment.</i>
4	Use appropriate moving and handling techniques and equipment	<i>The student promotes the most appropriate equipment and manages all patients using the correct moving and handling techniques.</i>
5	Obtain informed consent	<i>The student will be able to consistently obtain informed consent for a variety of service users considering alternatives in complex situations by involving the service user in the decision making process. (Eg.RESPECT)</i>
6	Maintain patient confidentiality in written and verbal communications	<i>The student consistently maintains the confidentiality of the service user and demonstrates when information can/must be shared with the others. (eg. GDPR, safeguarding)</i>
7	Obtain an appropriate patient history	<i>The student can obtain an appropriate and comprehensive patient history with a complex service user</i>
8	Identify vulnerable patients / service users at risk across a range of situations.	<i>The student consistently identifies vulnerable individuals and completes a referral and where appropriate engages with the multidisciplinary team.</i>
9	Undertake a physical examination of the medical patient and implement appropriate care	<i>The student can undertake a physical patient examination using the medical model and implement the most appropriate care.</i>
10	Obtain an ECG (including 3 and 12 lead)	<i>The student is able to accurately interpret a range of abnormalities on 12 lead ECG, implementing an appropriate plan of care.</i>

11	Carry out an appropriate neurological assessment (FAST, GCS, Pupils, Cranial nerve, myotomes and dermatomes)	<i>The student can carry out a detailed neurological assessment including cranial nerve assessment.</i>
12	Carry out an appropriate abdominal assessment (inspect, palpate, auscultate and percuss)	<i>The student can carry out a detailed abdominal assessment using the medical model.</i>
13	Carry out an appropriate MSK assessment (inspect, palpate, circulation assessment, passive, active and resistance)	<i>The student can carry out a detailed MSK assessment of ankle, knee, wrist & elbow.</i>
14	Carry out an appropriate Cardiovascular/Respiratory assessment (inspect / palpate / auscultate / percuss / gain necessary observations.	<i>The student can carry out a detailed assessment of the cardiovascular/ respiratory system using the medical model.</i>
15	Demonstrate effective management of the elderly patient.	<i>The student is able to demonstrate the most appropriate and effective management of the elderly adult patient with complex care needs.</i>
16	Appropriately manage a patient with complex social care needs	<i>The student is able to identify and safely manage a service user demonstrating a holistic approach.</i>
17	Demonstrate effective health promotion	<i>The student is able to show they can identify service users that may benefit from discussion around health promotion and can sign post the service user to the correct pathway making every contact count.</i>
18	Identify life threatening emergencies and implement appropriate management plans	<i>The student is able to identify life threatening situations and implement the management plan for the identified condition.</i>
19	Demonstrate effective assessment and management of a trauma patient	<i>The student is able to demonstrate the effective assessment and management of a trauma patient.</i>
20	Recognise the need for immobilisation and apply appropriate equipment.	<i>The student can lead a team when applying immobilisations equipment.</i>
21	Demonstrate effective wound care (assessment, cleaning, dressing) and effective management.	<i>The student is able to demonstrate wound care – assessment, cleaning, and dressing. Where available, utilising appropriate referral for optimum management.</i>
22	Assess and effectively manage a gynaecological emergency.	<i>The Student is able to Assess and effectively manage a gynaecological emergency</i>

23	Assess and effectively manage a maternity emergency	<i>The Student is able to Assess and effectively manage a maternity emergency</i>
24	Assess and effectively manage a paediatric emergency	<i>The Student is able lead, assess and effectively manage a paediatric emergency</i>
25	Collaborate with other healthcare providers or internal/external agencies working as an advocate for the service user and/or their caregiver	<i>The student can Lead an interdisciplinary team discussion to develop a management plan in the best interest of the service user.</i>
26	Identify appropriate means of transportation in relation to patients' condition	<i>The student can identify the appropriate means of transport in relation to the patient's condition and justify reasoning.</i>
27	Management of a patient in cardiac arrest.	<i>The student will be able to direct others as lead clinician in the management of a patient in cardiac arrest and provide a debrief to the team following the event.</i>
28	Manage a patient using appropriate positional methods when transporting / managing a patient / service user.	<i>The student is able to manage a patient using appropriate positional methods and justify their decisions</i>
29	Manage a patient's airway using manual clearance methods and suction equipment	<i>The student will be able to manage a patient airway using manual clearance methods and suction equipment.</i>
30	Manage an airway using basic procedures (manual / postural / adjuncts)	<i>The student will be able to manage an airway using the most appropriate interventions.</i>
31	Ventilate a patient using a bag-valve mask	<i>The student is able to recognise the need to and perform effective ventilation using a BVM.</i>
32	Prepare medical gases appropriately for administration	<i>The student is able to Identify the need to administer and consistently prepare all medical gases for service users and administer these as per service policy.</i>
33	Intravenous cannulation	<i>The student is able to perform intravenous cannulation.</i>
34	Prepare an intravenous infusion	<i>The student can identify the need in a range of patients when an intravenous infusion is indicated.</i>
35	Communicate an effective handover to an interdisciplinary team	<i>The student will be able to communicate a handover.</i>

BSc (Hons) Paramedic Science

1 st Year			2 nd Year			3 rd Year	
Trimester 1 (Sept – Dec)	Trimester 2 (Jan – March)	Trimester 3 (Apr– July)	Trimester 1 (Sept – Dec)	Trimester 2 (Jan – March)	Trimester 3 (Apr– July)	Trimester 1 (Sept – Dec)	Trimester 2 (Jan – March)
Foundations of Paramedic Practice 1A	Foundations of Paramedic Practice 1B	Personal and Professional Development	Developing Paramedic Practice 2A	Developing Paramedic Practice 2B	Evidence and Enquiry for Practice	The Advancing Professional	Specialist Populations in Paramedic Practice
Collaboration for Individual & Community Wellbeing			Assessing and Addressing Complexity			Independent Paramedic Practice	Complexity & Leadership in Professional Practice

Year One: Non-emergency experience

The aim of this placement is for the students to learn “essential” skills.

The aim of this placement is for the students to learn/enhance “essential” skills.

The emphasis across this year of placement is to expose our students to the clinical healthcare setting; this maybe their first placement since commencing on the BSc Paramedic program.

This year we expect the students to be working supported as they build their exposure and experience of being patient facing.

This particular placement is for the students to engage with service users within a practice setting. Particular importance is aimed at patient and service user interaction and overcoming any communication anxieties.

Year One: Ambulance

The emphasis across this year of placement is to expose our students to the ambulance healthcare setting; this will be their first placement since commencing on the BSc Paramedic program.

This year we expect the students to be working supported as they build their exposure and experience of being patient facing.

This initial placement is for the students to initially observe within a practice setting before with support expanding their exposure, confidence and interactions with service users.

There are specific linked competencies that the students have to achieve across their first year of their BSc program, some of these competencies may be relevant to this placement opportunity, so as an allocated practice mentor or clinical educator you may be asked to witness a specific competency. This should be in the form of an electronic signature via PebblePocket software.

Year Two:

The emphasis across this year of placement is to build upon Year 1 exposure, which has been very much basic assessment, and discussion of management plans. The student will have supported a clinician in the patient / service user care plan.

This year we expect the students to be working more autonomously, still with support but working towards practice with minimal supervision. There will be clinical interventions the students are able to undertake also, surrounding airway and ventilation, intravenous cannulation and use of specific pieces of equipment.

There are specific linked competencies that the students have to achieve across their second year of their BSc program, some of these competencies may be relevant to this placement opportunity, so as an allocated practice mentor or clinical educator you may be asked to witness a specific competency. This should be in the form of an electronic signature via PebblePocket software.

Year Three:

The emphasis across this year of placement is to build upon the last 2 years of exposure, Year 2 will have seen the students increase their involvement with patient / service user assessment, whilst discussing and carrying out management plans. This clinical practice will have been undertaken with minimal supervision.

This year we expect the students to be working more autonomously, aiming to be proficiently working towards practices in assessment, decision-making and management plans, supported with supervision and discussion surrounding treatment plans post exposure. There will be clinical interventions the students are able to undertake also, surrounding airway and ventilation, intravenous cannulation and other clinical interventions along with use of specific pieces of equipment.

There are specific competencies that the students have to achieve across their third year of their BSc program, some of these competencies may be relevant to this placement opportunity, so as an allocated practice mentor or clinical educator you may be asked to witness a specific competency. This should be in the form of an electronic signature via PebblePocket software.

Practice Educator's

Access to PebblePad will be granted by the student, (the student is responsible to ensure all competencies are met and signed off correctly, through pebble pocket)

Initial Meeting

Introduction (All years)

Re-visit any previous action plans (Year 2 & Year 3 students)

What is expected of the student (All years)

Action plan (All years)

Intermediate Meetings

Check on progress / action plan (All years)

Action plan adjustment if necessary (All years)

Raise any major concerns to SHU placement lead (All years)

Final Meeting

Check on progress / action plan (All years)

All competencies completed (All years)

Raise any major concerns to SHU placement lead (All years)

Final sign off completed (All years)

Advice / action plan for continued development (Year 1 & Year 2)

If at any point you feel you have concerns regarding a student's professional behaviours or placement progression, please get in contact with the appointed ambulance trust lead for discussion or support. The earlier this is raised allows for all parties to be involved and an agreed plan to be devised.

Process for managing a student who is NOT progressing, including REFER or FAILURE – must be submitted via SHU “**Student Not Progressing form**”

Students who are not progressing OR are not demonstrating appropriate knowledge/ skills/ behaviour.

1) Practice educator/supervisor/assessor

Meets with and informs student of specific concerns and agrees Action Plan to address the identified concerns and review dates for attainment.

Documents concerns and Action Plan and review dates in student's course-specific documentation e.g., Assessment of Practice document.

Seeks support of Learning Environment Manager (LEM)/Placement Manager, where available.

Notifies SHU link tutor/lecturer/Academic Advisor.

2) Student and practice educator/supervisor/assessor meet on agreed dates to review student's progress against Action Plan; record documented in student's course-specific documentation.

3) Student demonstrates progress towards agreed Action Plan - student's progress confirmed and documented e.g., at mid-point interview.

4) If a student continues to make progress. Practice educator/supervisor/assessor confirms that student has a 'Pass' at final assessment interview.

Students still not progressing / not demonstrating appropriate knowledge/skills/behaviour.

- 1) SHU link tutor/lecturer/Academic Advisor notified and contacts placement to agree support strategy required by student and practice educator/supervisor/assessor to revise and implement Action Plan.

Student demonstrates progress towards agreed Action Plan - student's progress confirmed and documented e.g., at mid-point interview.

- 2) If a student continues to make progress. Practice educator/supervisor/assessor confirms that student has a 'Pass' at final assessment interview.

Students fail to progress.

- 1) 'Refer' OR 'Fail' confirmed and reported in accordance with SHU assessment regulations.

'Refer' placement period:

Students are allocated a different Practice Educator and allocated to additional placement hours. The Practice Educator will be aware of progression to this point and any agreed Direct Action Plans. The student is expected to attend all this additional placement block until the Practice Educator is comfortable in processing final sign-off. Once sign-off has occurred then the students are not required to attend any further placement hours offered.

'Fail' of refer period:

Students will be informed by their Practice Educator that they have not met the required standard to achieve sign-off. This will be documented and sent to SHU for processing.

- 2) Academic Advisor / Course Team meets with student to ensure appropriate advice/support provided and/or follow up action.

Attendance at Difficult Incidents

We are aware of the nature of work our students are exposed to whilst on ambulance placements and accept that this cannot be controlled. With your support and further support of the relevant ambulance trust, together we can support our students through these experiences.

If a student attends a stressful / traumatic incident, we would ask that the following actions are taken.

Debrief the student immediately after an incident
Inform the relevant line manager, either YAS Team Leader or EMAS Station Manager
Inform the ambulance placement team
Inform SHU ambulance placement lead

This will allow for welfare and support mechanisms to be initiated from within the university. During extended placement times, we rely on you as the student Practice Educators to be our eyes. Hopefully the above process will mean we can all support our students following this exposure.

Reporting Incidents or Accidents or Concerns

Any student involved in an incident or accident (or near miss) on placement is required to report the event to the University as soon as possible.

Guidance on what to do if you need to support any report of an incident or accident that affects the student, or any concern they have about their placement learning experience can be found on the Placement website.

Accident, Incidents or Concerns on Placement - Paramedic Only Report Form

[This form must be completed with the support of the placement link tutor/placement lead and saved as 'word' document before encrypting]