



Student Paramedic Non-Ambulance Placement Handbook (2024-25)

Introduction & Context

This handbook contains guidance on the different "non-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 non-ambulance placements allows for the consolidation of learning by experiencing the management of patients in a controlled setting under the supervision of suitably experienced allied health professionals.

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

Name & Position	Contact Details
Hospital Placement Lead	
(Non-Ambulance)	
James Stubley Senior Lecturer in Paramedic Science	Mobile: 07385 931967 Email: <u>James.stubley@shu.ac.uk</u>
Sam Fisher Lecturer in Paramedic Science	Mobile: 07881 334062 Email: sam.fisher@shu.ac.uk
SHU Placement Co-ordinator	
TBC	Office: 0114 225 5013 Email: ahpplacements@shu.ac.uk

Absence and Sickness Reporting

If a student fails to attend a placement area when allocated, please contact either one of the non-ambulance placement leads 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 provider. 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 student paramedic competencies, some will be relevant to the placement and can be completed while attending a non-ambulance placement.

The whole document is classed as a 'pass' or 'fail' assignment 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 non-ambulance placement.

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

There are no specific competencies for non-ambulance placements. However, many of the student paramedic competencies may be relevant to your particular area, Some competencies must be achieved by the student, some are optional if the placement allows.

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)	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. Level of performance Can perform skill but displays minimal confidence & efficiency. Requires frequent direction / supervision. Minimal awareness of priorities / requires prompting with most tasks. 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.

Minimal	
Supervision	Knowledge / reasoning Applies accurate knowledge to person centred care with minimal support
(MS)	Demonstrates awareness of clinical impressions, differential diagnosis and alternative care pathways. Able to make some clinical decisions based on contemporary evidence.
	Level of performance
	Requires occasional direction or support.
	Frequently initiates appropriate actions.
	Identifies priorities with minimal prompting.
	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.

Independent (I)	Knowledge / reasoning Consistently applies evidence-based knowledge. Demonstrates differential clinical reasoning. Consistently demonstrates sound rationale for actions.
	Level of performance Independent in performance Able to prioritise tasks to form effective person centred care plans. Practice within the HCPC standards of performance
	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

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 all their competencies in advance. Students are also informed that it is their responsibility to ensure any relevant competencies are achieved where possible.

Students are asked to contact the placement area prior to the start of their placement to confirm start times and locations along with any other special requirements. Where appropriate our students are registered with PEMS and PARE and will gather information from there.

It is expected that our students will attend in full uniform should this not be appropriate please inform the student when contact is made.

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

Thank you.

Health and Care Professions Council (HCPC) standards for Practice-based learning

Standar d	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 Placement Areas

Introduction

On behalf of the whole placement team, **thank you** for agreeing to support our student's non-ambulance placements. We understand some areas may be used to working with our students in green 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 your trust placement team, 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 ...

Although our students are team players and will happily assist with tasks, they are proficient to assist in. Each non-ambulance placement they attend has no formal linked competencies to achieve, however, many of their student paramedic competencies may be appropriate. We'd be grateful if they are given the opportunity to work supernumerary under the supervision of your staff.

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 relevant student paramedic competencies they could 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 \dots

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!

BSc (Hons) Paramedic Science

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

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Student Paramedic Non-Ambulance Placement (5 shifts) (1st years) aims

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

The emphasis across this placement is to expose our students to the clinical or healthcare related setting. This may 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 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.

There are specific linked competencies that the students have to achieve across their 1st 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.

Placement Area:	Duration:	Aim:
Nursing / Residential / Alternate Care facility	5 Shifts	The aim of the student being in this area is to gain exposure and experience within a relevant care setting. Students are expected to develop communication skills and achieve exposure to basic care needs. It is envisaged that the students will experience supporting moving and assisting patients with transfer and mobility needs as well as engage in communication.

Student Paramedic Non-Ambulance Placement (7 shifts) (2nd years) aims

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.

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 and intravenous cannulation.

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.

Placement Area:	Duration:	Aim:
Accident and Emergency/ Acute Admissions	3 Shifts	The aim of the student being in this area is to understand the patient's journey from when they have handed the patient over to our in-hospital colleagues. The student should actively participate in the assessment of patients to ascertain any differences or additional procedures in the emergency department. It is envisaged that students will work in the resuscitation room, major and minor's areas and other areas of acute admissions. Completing this placement will allow students to understand the role of the emergency department / acute admission areas and how they fit with regards to the patient journey. It will give the student an insight into how patients are treated beyond the ambulance environment.

Placement Area:	Duration:	Aim:
		This placement is to allow students to experience patients with a cardiac condition and to understand how these can be managed.
CCU/PPCI	2 Shifts (ideally 1 day in each area)	It is a good experience for the student to witness a patient undergoing a PPCI procedure (if possible), so they can understand what the catheter lab requires of the paramedic in the preparation and arrival of the patient.
		In the cardiac ward it would be beneficial for the student to participate in assessments of patients in order that they are able to understand what the department assesses and any differences or additional assessment procedures.

Placement Area:	Duration:	Aim:
		The purpose of this placement is to refine the students' skills of airway management; Prior to attending this placement, the student will have had their airway skills assessed in simulated practice, including inserting basic airway adjuncts, the use of supraglottic devices (e.g., LMA and/or iGel), direct laryngoscopy as an adjunct to ETI and the use of a bag valve mask to perform bag mask ventilation. They should have the underpinning knowledge regarding airway management however require concentrated exposure in a controlled clinical environment.
Theatre/Theatre recovery	2 Shifts	The student should understand the importance of good monitoring and airway management. It would be beneficial if the student could remain with an anaesthetist for either all the placement or one a day at a time, as this will allow the anaesthetist the opportunity to see the progress of the student and provide continuity for the student. The role of ETI in Paramedic Practice has been deemphasised, routinely this is only an adjunct for specialist practice clinicians.

Student Paramedic Non-Ambulance Placement (7 shifts) (3rd years) aims

The emphasis across this year of placement is to build upon the last two 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 and intravenous cannulation.

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.

Placement Area:	Duration:	Aim:
		The aim of the student being in this department is to enhance their exposure and confidence when interacting, assessing and treating this specific patient group.
Paediatrics	2 Shifts	Completing this placement will allow students to increase their confidence with paediatrics and allow access to clinical colleagues experienced within this area of clinical practice.

Placement Area:	Duration:	Aim:
		The aim of the student being in this department is to enhance their exposure and confidence when interacting, assessing and managing this specific patient group.
Maternity / Obstetrics	2 Shifts	Completing this placement will allow students to increase their confidence when dealing with this specific patient group in the prehospital environment. During paramedic practice this is increasingly undertaken without the presence of midwifery AHP at scene.
		It will also allow access to clinical colleagues experienced within this area of clinical practice.

Placement Area:	Duration:	Aim:
Community Based Teams	3 Shifts (ideally 1 in each of Mental Health, District Nurses, COPD/Heart Failure / Falls assessment teams (Ambulance service Emergency Care Practitioners could be utilised for the latter two areas)	The aim of the student being in these areas is to enhance their exposure and experience when interacting, assessing and managing this specific patient group. A bulk of the Paramedic profession workload is assessing patients and dealing with complex cases, in particular Mental Health presentations. It will also allow access to clinical colleagues experienced within this area of clinical practice.

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

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

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

3.5	5	Communicate an effective handover to an interdisciplinary	The student will be able to communicate a handover.
		team	