

Monterey County EMS System Policy



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PARAMEDIC PRECEPTOR AUTHORIZATION

I. PURPOSE

The purpose of this policy is to define the qualifications and responsibilities of paramedic preceptors and to establish a process for the approval of paramedic preceptors in Monterey County.

II. POLICY

A. Paramedic Preceptor Qualifications

1. At least two (2) years of full-time work experience providing patient care as a paramedic.
2. At least one (1) year of full-time work experience providing patient care as a paramedic in Monterey County.
3. Paramedic licensure and accreditation are current and in good standing, including but not limited to:
 - a. No pending disciplinary actions or clinical care restrictions or remediation.
 - b. No disciplinary actions or clinical care restrictions or remediation in the previous 24 months.
3. Employed by an approved Monterey County Advanced Life Support (ALS) service provider organization.
4. Meets the requirements of California Code of Regulations, Title 22, Chapter 4, Sections 100150 and 100153.

B. Paramedic Preceptor Authorization

1. Monterey County accredited paramedics may apply to the EMS Agency for authorization to become a paramedic preceptor by:
 - a. Submitting a completed Paramedic Preceptor Application packet which includes a letter of recommendation from their ALS employer verifying the applicant is in good standing with that employer and the employer's intent to use the applicant as a preceptor.
2. Preceptor authorization shall be for a four (4) year term and will expire on the last day of that term. The EMS Agency will provide the preceptor with documentation of authorization.

- #### C. Preceptors may apply for reauthorization no less than thirty (30) days prior to the end of their authorization term and must meet the following standards to maintain authorization:

1. Must have maintained paramedic accreditation. A lapse in accreditation will result in a revocation of preceptor authorization.
2. Preceptors shall attend one of two preceptor conferences/meetings each year of the authorization term. Failure to participate in the preceptor conferences shall automatically revoke preceptor authorization.
3. Preceptor authorization shall automatically be suspended if an investigation which could lead to disciplinary action or clinical remediation is undertaken, for any reason, against the license or accreditation of the paramedic preceptor by the employer, the EMS Agency, or the EMS Authority. Following the conclusion of such an investigation the EMS Agency may revoke or reinstate the preceptor's authorization.

III. PRECEPTOR RESPONSIBILITIES


- A. Preceptors have many important responsibilities in completing the education of paramedic students. Those responsibilities include:
 1. Preceptors shall be thoroughly knowledgeable of and adhere to all EMS Agency policies and procedures with a special emphasis on field operations, clinical care, and preceptor/intern oversight and responsibilities.
 2. Preceptors are responsible for patient care, including all care provided by their intern.
 3. Preceptors shall continuously monitor, by direct observation, the care provided by their intern and shall ensure that patient care is not compromised by the acts, omissions, or presence of the intern in the field. The preceptor shall immediately intercede whenever the intern's performance may be harmful or detrimental to the patient.
 4. Preceptors shall report all incidents that result in patient harm or threatened patient safety to the paramedic training program, ALS service provider, and the EMS Agency in accordance with Monterey County EMS System Policy 6020 - Unusual Occurrence Reporting.
 5. Preceptors shall be present in the patient compartment of the ambulance anytime the paramedic intern is providing patient care during transport to a hospital.
 6. Preceptors are responsible for the completion of all patient care records and must review and countersign all patient care records completed by the paramedic intern.
 7. Preceptors shall instruct their intern on how to properly document patient care and complete an electronic patient care record.
 8. Preceptors shall ensure that all required patient care records, ALS service provider records, and paramedic training program records are completed and submitted prior to going off shift.
 9. Preceptors shall conduct daily evaluations of the paramedic intern assessing intern behavior and performance using cognitive, psychomotor, and affective domains.

10. Preceptors shall ensure the paramedic intern is knowledgeable in Monterey County EMS policies and protocols.
11. Preceptors shall conduct cumulative and final field evaluations of the paramedic intern.
12. Preceptors shall identify appropriate intern progress and counsel an intern that is not progressing. Preceptors shall keep the training program and the employer's CQI Coordinator informed of the intern's progress.
13. Preceptors shall instruct interns on the correct procedures for making base hospital contact, conducting a patient report via med-net, and requesting base hospital orders.
14. All paramedic students accepted for field internships shall at a minimum meet the requirements of California Code of Regulations, Title 22, Chapter 4, Section 100152.

V. PRECEPTOR RESTRICTIONS

- A. Paramedic preceptors are restricted to overseeing the field internship of one (1) intern at a time. Preceptors shall not precept more than one (1) paramedic intern or EMT student during the same time period. Preceptors may not accept more than two (2) interns in a one-year period unless approved by the paramedic service provider and the EMS Agency.
- B. No more than one (1) student of any level shall be assigned to a response vehicle at any one time.
- C. Paramedic interns, paramedic preceptors, and paramedic training programs are prohibited from making and retaining copies of patient care records and other confidential records (e.g. QI forms, ALS without base contact reports).
- D. To prevent conflicts of interest, preceptors shall not accept payments or gratuities from interns or students. Paramedic training programs and ALS providers may have preceptor payment agreements in place; those agreements may be honored appropriately.

END OF POLICY


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