

University for the Common Good

Paediatric Placements - Paramedic Students

Why here?

Paramedics are generalist practitioners who attend to patients in a variety of settings with diverse needs and presentations. They have an important role in reducing unnecessary hospital admissions through treatment, referral and discharge of patients.

The profession is evolving across the UK and in Scotland we are seeing a greater presence of paramedics in settings outside of prehospital emergency care including primary care, in-hospital, and community care environments as well as education, governance and public health.

Therefore, we want to prepare our students through engagement with diverse learning experiences in a wide variety of practice settings. These cross-sector placements allow achievement of pertinent learning outcomes associated with early development of the holistic healthcare practitioner, such as:

Paediatric Assessment and Triage

•Demonstrate the ability to assess paediatric patients using age-appropriate tools such as the Paediatric Assessment Triangle and recognise signs of serious illness or deterioration.

Recognition and Management of Paediatric Emergencies

•Identify and assist in the management of common paediatric emergencies, including respiratory distress, seizures, sepsis, and trauma, applying appropriate interventions.

Paediatric Medication Administration and Dosage Calculations

•Develop an understanding of weight-based drug calculations and learn about safe administration of medications commonly used in paediatric care.

Effective Communication with Children and Families

•Adapt communication skills to engage effectively with children of different ages and developmental stages, while also providing reassurance and clear explanations to parents or caregivers.

Interprofessional Collaboration in Paediatric Care

•Observe and participate in the teamwork between paediatricians, nurses, and other healthcare professionals to understand the paramedic's role in hospital-based and pre-hospital paediatric care.

What's in it for placement providers?

Supporting paramedic students on placement can also confer a wide variety of benefits to the environment where they are placed. These benefits can include:

Staff development, including facilitating student learning and organisation of learning opportunities

Increased mutual awareness of scope of practice and professional processes

Clearer shared expectations of patient care provision More efficient patient care provision through understanding of available services

Establishing links and building future working relationships

How long?

Each placement is 1 week long. We consider this to be 36 hours.

The placement experience is mandatory but the student may not meet the exact number of hours and still be able to progress on the programme e.g. if only 30 hours can be achieved within the capacity of the placement provider the other 6 hours does not need to be recovered.

All practice education progression is based on achievement of learning outcomes, not the number of hours the student is present.

Students (unless under 18) are permitted to work night shifts and weekends; therefore, you can arrange for students to follow a specific shift pattern if this is suitable for everyone and facilitates student learning. Additionally, a student may ask to do fewer, longer shifts to achieve their learning and maintain part-time work or family commitments. If this can be accommodated without detriment to the placement provider and their learning it would be appreciated by all.

What can students do?

Below are some additional suggestions of how students can be engaged and active learners to achieve their learning outcomes across both technical and non-technical domains of practice:

Observe and assist a variety of staff involved in patient care (with both patient and clinician consent)

- oFollow doctor/nurse/AHP/specialist rounds, observing and providing support in triage, assessment and management of paediatric patients
- Observe and discuss targeted assessments including respiratory, cardiovascular, neurological, trauma, minor injury, mental health, skin/tissue, etc.
- oPractice specific skills/procedures/assessments under supervision within their scope of practice (e.g. patient triage and consultation, basic observations, targeted systems assessments, intravenous cannulation, advanced life support)
- oExposure to and discussion around patients/clients with complex co-morbidities, and less common conditions requiring specialist care
- oDiscussion around the legal, ethical and practical considerations of patients who have complex health and/or social needs and how this is managed safely

Increase familiarity of paediatric-specific adaptations to communications, assessment and management

- olncrease awareness of normal and abnormal parameters in baseline observations and presentations in paediatric patients
- oDiscuss appropriate assessment and management of paediatric patients presenting with a range of medical and trauma-related conditions
- oObserve and discuss use of supportive paediatric-specific assessment tools and adaptations to assessment and consultation processes

Observe and support medication prescription and administratior

oObserve how to safely prepare and administer medication via oral, nebulised, inhaled, buccal, sublingual, rectal, transdermal, intranasal, subcutaneous, intramuscular, intravenous, and intraosseous routes

Spend time with the senior team to enable understanding of the day to day running of the department

oWhat staff are present? What is their scope of practice? Why might they come into contact with ambulance personnel? What process will have occurred prior leading to their attendance?

Observe and discuss shared decision making in developing patient care plans

- oBuild awareness of admission criteria, functions of different wards, and anticipated follow up for specific conditions (e.g. acute, medical, surgical, short stay, long stay, specialist care, etc.)
- ODevelop communication skills with patients, families and carers
- oExplore adaptations to communication to aid delivery of person-centred care to paediatric patients
- oObserve and discuss patients discharged home with care packages and considerations around safe-guarding and onward care needs
- $\circ\mbox{\sf Familiarisation}$ of the local procedures and care pathways

Scope of Practice

Students entering their paediatric placement will be in their 2nd or 3rd year of study.

They will have completed learning, practice and real-world application in 15 - 25 weeks of placement with the Ambulance service in the following:

	Summer	January
	Year 2	Year 3
Baseline Observations including BM		
ECG: Application and recognition of Cardiac Arrest Rhythms		
ECG: Recognition of NSR, ST elevation and depression		
ECG: Recognition of abnormal ECG presentations		
Stepwise Airway Management (including supraglottic airways)		
Awareness and support for advanced airway management		
Introduction to haemorrhage control & Immobilisation		
Assessment of a medical patient (ABCDE & basic Hx)		
Assessment of a trauma patient		
Advanced Life Support (Adult, paediatric & Trauma)		
IV/IO Access		
Development of more in-depth consultation and history for non-life threatening presentations		
Clinical reasoning and shared decision making in non-life threatening presentations		
Introduction to safe practice in referral, safeguarding and discharge		

Students are permitted to practice these skills in the paediatric environment under the supervision of an appropriately trained clinician for the skill.

However, there is no requirement for supervisors to sign off these skills in the students PAD

Supervision

We ask that there is a nominated practice educator (PE) or mentor within the placement area who would meet them at the start of the first day for attendance record keeping and orientation. They would ideally also be responsible for identifying and directing students to learning opportunities (such as those suggested above) throughout the placement block.

If you have any questions/concerns, please contact paramedicplacements@gcu.ac.uk

Assessment and documentation

All relevant documentation should be completed independently by the student.

It is not necessary for PE/mentors to review/verify these, but comments and feedback are welcomed and encouraged where possible.

Students are required to submit the following documents to GCU following the placement:

Essential (ideally signed or verified by PE/mentor)

- Practice learning environment orientation
- Record of attendance
- Learner contract for cross sector placements, including reflection on experience impact

Desirable (optional should the PE/mentor wish to provide additional feedback)

- Final report PEds/Supervisors can also provide feedback in the learner contract for cross-sector placements
- Non-technical skills assessment
- Signature verification

PEs/mentors have the option of reviewing and signing these documents should they wish to provide additional feedback, but this is entirely optional.

Students should ensure that they download the correct learner contract for cross-sector and complete the initial sections before they attend the initial meeting