



Derived from: The National Registry of Emergency Medical Technicians
Paramedic Psychomotor Competency Portfolio

CLINICAL SHIFT EVALUATION WORKSHEET

Student Name: _____		Date: _____		Clinical Site: _____			Campus: _____							
Page ____ of ____		Time in: _____ Time out: _____		Unit or Station: _____			Preceptor: _____							
Directions: Each contact must be rated by the student first, and rated by the preceptor second. Marks student ratings in the row marked "S" and preceptors in row "P". Comment on any discrepancies on back. Preceptors complete shaded sections.				Rating*: NA = Not Applicable – not needed or expected. 0 = Unsuccessful – required excessive or critical prompting; includes "Not attempted" when student was expected to try. 1 = Marginal – inconsistent, not yet competent. 2 = Successful/competent – no prompting (See description at the end of the instrument).										
Patient Age/Sex	Impression/Differential Diagnosis	LOC, Complaints, Event/Circumstances	Summary of Treatments rendered successfully by the student	Circle Patient Contact Type	Rater:	Clinical Objectives							Comments and immediate plan for improvement for next contact.	
						Pt. Interview & Hx.	Physical Exam	Impression/RX plan	Skill Performance	Communication	Professional Behavior	Team Membership		Initials
1				ALS	S									
				BLS	P									
2				ALS	S									
				BLS	P									
3				ALS	S									
				BLS	P									
4				ALS	S									
				BLS	P									
5				ALS	S									
				BLS	P									
6				ALS	S									
				BLS	P									
7				ALS	S									
				BLS	P									

Comment on any unsatisfactory ratings or discrepancies:	
Overall plan for improvement for future shifts:	
Student reported: <input type="checkbox"/> on-time, <input type="checkbox"/> well groomed, <input type="checkbox"/> in uniform and prepared to begin the shift <input type="checkbox"/> YES <input type="checkbox"/> NO	Student knows equipment location and use. <input type="checkbox"/> YES <input type="checkbox"/> NO
Behavior was professional: <input type="checkbox"/> Accepts feedback openly <input type="checkbox"/> Self-motivated <input type="checkbox"/> Efficient <input type="checkbox"/> Flexible <input type="checkbox"/> Careful <input type="checkbox"/> Confident	Student helps clean up and restock, unprompted. <input type="checkbox"/> YES <input type="checkbox"/> NO
Student asked relevant questions and participated in learning answers, used downtime to its highest potential. <input type="checkbox"/> YES <input type="checkbox"/> NO	Student left site early (did not complete shift). <input type="checkbox"/> YES <input type="checkbox"/> NO
Preceptor requests a follow-up with appropriate program personnel. <input type="checkbox"/> Phone call _____ or <input type="checkbox"/> Email _____	
Student Signature:	I agree to the above ratings: Preceptor Signature
	Preceptor – PLEASE INITIAL HERE: <u>By Initialing here, I acknowledge that I have reviewed the PRS Preceptor Orientation Packet regarding 1. Student/Preceptor Roles and Responsibilities 2. The training guidelines per unit/ward 3. Student FERPA rights regarding privacy of their education.</u> If you have not seen this material, please ask the student to provide you with the material for your review and approval, or see the Unit Manager/education coordinator of your facility to review the material provided.
Clinical Objectives: Pt. Interview/Hx Gathering: Student completes an appropriate interview and gathers appropriate history; listens actively, makes eye contact, clarifies complaints, respectfully addresses patient (s); demonstrated compassion and/or firm bedside manner depending on the needs of the situation. Physical Exam: Student completes an appropriate focused physical exam specific to the chief complaint and/or comprehensive head-to-toe physical examination. Impression & Rx Plan: Student formulates an impression and verbalizes an appropriate treatment plan. Skill Performance: Student performs technical skills accurately and safely. Communication: Student communicates effectively with team, provides an adequate verbal report to other health care providers and completes a thorough written patient narrative. Professional Behavior Objectives: Student demonstrates they are: <ul style="list-style-type: none"> • Self-motivated: Takes initiative to complete assignments and improve/correct problems, strives for excellence, incorporates feedback and adjusts behavior/performance. • Efficient: Keeps assessment and treatment times to a minimum, releases other personnel when not needed and organized team to work faster/better. • Flexible: Makes adjustments to communication style, directs team members and changes impressions based on findings. • Careful: Pays attention to detail of skills, documentation, patient comfort, set-up and clean-up and completes tasks thoroughly. • Confident: Makes decisions, trusts and exercises good personal judgment and is aware of limitations and strengths. • Open to feedback: Listens to preceptor and accepts constructive feedback without being defensive (interrupting, giving excuses). Team Membership Objective: Clinical experience evaluation of field performance assesses a student as a Team Member and is isolated to evaluation of individual skill delivery or a portion of patient care that is delivered. The student is not assuming the Team Leader role but integrating with other Team Members. When evaluating the student performance as a team member, only the portion of care completed by the student is evaluated. The Team Member role contains an affective component and evaluates the students' cognitive understanding of complete patient care that paramedic's are expected to deliver.	
Rating: NA = Not applicable – not needed or expected; This is a neutral rating (Example: Student expected to only observe, or the patient did not need intervention). 0 = Unsuccessful – required excessive or critical prompting; includes “Not attempted” when student was expected to try; this is an unsatisfactory rating. 1 = Marginal – inconsistent, not yet competent; This includes partial attempts. 2 = Successful/competent – no prompting. * NOTE: Ideally, students will progress their role from observation to participation in simple skills, to more complex assessments and formulating treatment plans. Students will progress at different rates and case difficulty will vary. Students should be active and ATTEMPT to perform skills and assess/treat patients early even if this results in frequent prompting and unsuccessful ratings. Unsuccessful ratings are normal and expected in the early stages of the clinical learning process when student needs prompting. Improvement plans MUST follow any unsuccessful or inconsistent ratings.	

If needed, please feel free to contact the Education Director: Paula Johnson at: 304-716-0129 ext. 602. If not in, please leave a voicemail.