

Evaluation Forms

The following evaluations should be done at 50- to 100-hour increments during your training of the student. It allows you to make adjustments, as needed, and assure that you are making progress with your candidate.

Student/Candidate Self-Evaluation

Have the candidate evaluate themselves on a 1–10 scale for each of the following categories:

1 is the lowest confidence in themselves

10 is the highest confidence in themselves

Do this self-evaluation at the beginning of training and at the end of training.

- Communication
- Teamwork
- Leadership
- Patient Assessment
- Delegation
- Setting the Tone
- Decision-Making
- General Medical Knowledge
- Application of Knowledge
- Methods of Action

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- Flexibility in Treatment Plans
- Assertiveness
- Confidence

On the following evaluation forms, use the scale 1 to 5:

1 Candidate does not demonstrate the knowledge required to make informed decisions about a patient’s treatment plans. If scores of 1 are demonstrated, it is incumbent upon the student to take the necessary measures to inform their intellect to a level at which they can now make decisions. This is a critical moment. Will they invest in themselves the work needed to learn medicine?

3 Candidate meets the bare minimum of understanding to create and implement treatment plans. Candidate still requires prompting on most calls. Able to function on BLS calls but still has difficulty with complex ALS calls.

5 Candidate exceeds the knowledge that is required of them and has a very good grasp of medical principles needed to operate independently as a paramedic. This is demonstrated by the candidate routinely implementing the correct treatment plans independently from instructor input.

Medical Principles

Does your student demonstrate proficiency in the following disciplines?

Cardiology				
1	2	3	4	5

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Pharmacology

1 2 3 4 5

Anatomy/Physiology

1 2 3 4 5

Pulmonology

1 2 3 4 5

Altered Mental Status

1 2 3 4 5

Infections

1 2 3 4 5

Guidelines or Protocols

1 2 3 4 5

Trauma

1 2 3 4 5

Airway Management and Anatomy

1 2 3 4 5

OB Emergencies

1 2 3 4 5

Pediatric

1 2 3 4 5

CVA

1 2 3 4 5

Capnography

1 2 3 4 5

Any other medical knowledge you deem applicable and necessary as the instructor.

_____ 1 2 3 4 5

_____ 1 2 3 4 5

_____ 1 2 3 4 5

During your evaluation if you find 3s and below, use these scores to identify an area that should be addressed. The goal is

Leadership

1 2 3 4 5

Patient Assessment

1 2 3 4 5

Delegation

1 2 3 4 5

Setting the Tone

1 2 3 4 5

Decision-Making

1 2 3 4 5

During your evaluation if you find 3s and below, you need to identify and address this area with your student. The goal is to have at minimum a 3, which would be identified as average, in every discipline.

- What areas need to be addressed?
- What is your teaching plan to improve upon these areas? Write it down and include the student in developing a teaching plan.
- What is today's date? This will hold you more accountable and give you a tool to measure success.

Tools to Improve Skills

These tools are just a brief starting point. If you have methods that work already, then implement those tools. Make sure you identify for yourself clearly what it is that you are teaching or trying to improve by using your own tools.

Communication

Give your student pictures to look at for 30 seconds and then ask them to communicate effectively to you what is in the picture in 45 seconds or less.

Have your student give a class on capnography and evaluate whether they are communicating the information appropriately.

Record your student giving practice hand-off reports to other agencies or the hospital so they can hear what they sound like.

Teamwork

Your student must run the calls, all of them. To some degree they must be involved in the decision-making on every single call you run. They must work within the team to implement their vision for patient care. Force them to make decisions and delegate tasks.

Leadership

Run scenarios and have your student take the lead within your crew. This will build confidence, teamwork, communication, and delegation. Allow your student to run the call with absolutely zero input from you, the instructor. Do allow for team members to voice their opinions as if it is a real call.

Have your student come up with a training calendar for the day and allow them the opportunity and latitude to implement it as they see fit.

Patient Assessment

Reflect on the line of questioning on each call you go on with your student. Why did they ask what they asked? What information were they trying to get and why? Did they get the information? Was it pertinent? Did they implement a good treatment plan based on that information? Did they correctly interpret the information that they gathered?

Delegation

Have the student practice giving tasks to other team members. Don't allow the student to perform all of the interventions or, in some cases, any.

Setting the Tone (Tones 3 Cs)

Command: Do they take command of the call or are they timid?

Conviction: Do they demonstrate the conviction to act. Do they understand duty to act, implied consent? Are they convinced that as paramedics they must intervene for people?

Confident: Do they communicate the plan confidently to team members? Or are they easily swayed and unable to make a decision?

Your student must run the calls. They cannot learn to make decisions by watching you make decisions. Once your student becomes comfortable in the learning environment you create and understands that they will not be told what to do, and have liberty to do as they see fit, they will grow exponentially. Obviously, intervene if necessary to maintain the standard of

care for your patient. Do not willingly allow for negligent care to be conducted by your student.

Qualities to Evaluate and Develop within Your Candidate

Humility. Is your student humble? To give you more clarity on what humility looks like, ask yourself this. Does your student respond well to constructive criticism? Do they take your direction and mentorship well or are they making excuses and interjecting instead of following your lead? To determine if the student is being humble, you must be actively engaged in mentoring them. This does not include showing them how awesome you are. Mentoring them does not include telling your student about all the cool calls you have run. They don't care. If a call is not applicable to the mentorship, then don't discuss it. Here is the key, humility in your student starts with humility in you as the instructor.

Ego/Pride. Is your student prideful and arrogant? Obviously this is the antithesis to humility. Is the student making rash decisions in arrogance? Do they know everything all the time? Do they disregard your input and mentorship? This quality must be addressed, however, and once again this starts with you as the instructor. Are you prideful and arrogant? Here is a little insight—nobody cares how awesome you think you are, or how many calls you run. It is absolutely fruitless to demonstrate this to your student. Learning is hindered. Do you know why it is hindered? Because your arrogance demonstrates to your student that you are precepting them to your benefit and exultation; you

are not doing it for your student's benefit. Your student recognizes this. Your student will respond much better if you start by checking your own ego first.

Compassion. Is your student compassionate with others? The primary focus here is the patient. There may be certain situations or patients that trigger your student to become frustrated and upset. This is okay, and it is realistic. What is important, however, is to recognize such situations so that you can address it. When your student knows more clearly how they react to certain situations, it will improve their patient care.

Empathy. Is your student empathetic? Do they treat patients with a judgmental attitude? Understand that sometimes people become frustrated and overwhelmed with certain patients, which is okay, but the overarching attitude shouldn't exhibit hate and judgment. They will be better at treating patients if they are able to understand where people are coming from and be empathetic to it.

Accountability. Does your student hold themselves accountable for their actions and interventions? Again, this starts with you as the instructor. Do you hold them accountable for the expectations that you have discussed?

Responsibility. This goes hand-in-hand with accountability. Does your student take responsibility for their actions? Do they take responsibility for treatment plans they implement? This is key. If your student is not willing to own the treatment that they implement, they will never be able to act decisively. Acting

decisively is about owning what you do. It's not about understanding every nuance of medicine.

Passion. What drives your student? Help your student develop a good understanding of why they became a paramedic in the first place. Of course this always begins with a desire to help others. But why do they want to help others? That is the real question that needs to be answered. When that question is answered and articulated clearly in the mind of your student, it will drive them toward excellence. Help them develop this answer and understand the importance of it.

Integrity. This one is simple. Does your student exhibit integrity? This is demonstrated every day by working with you as the instructor. Do they try to get out of work? Are they lying to you about anything? Do they do what is right when you are not there? Are you able to give them an assignment with confidence they will follow through and accomplish it? A lack in integrity is demonstrated by making excuses and blaming others for poor outcomes instead of taking responsibility for those outcomes. Your student's lack of integrity will affect patient care, and they will blame others for things when they shouldn't.

Assessment of Qualities

1 Candidate does not demonstrate the associated attribute, so extensive counseling is needed by the instructor. If your candidate demonstrates a score of 1 in these areas, it may be cause for major concern. These qualities should be present even at the beginning of training.

3 Candidate demonstrates an ability to interact with patients and teammates well enough to navigate a call. A score of 3 demonstrates there is still room for improvement with bedside manner and self-discipline.

5 Candidate demonstrates routinely an ability to connect with your patients and team, and seamlessly executes an appropriate treatment plan. Your candidate is routinely able to accept constructive criticism and learn from it by implementing your feedback quickly into their mode of treating patients. Your candidate routinely demonstrates a willingness to take accountability for their actions and makes no excuses for decisions made.

Qualities: Identify and evaluate these qualities in your student. Under *passion* realize that this is something for which you should help your student come to understand for themselves. As the mentor and instructor, you need to address these qualities if your student needs it. Again these look so great.

Humility

1 2 3 4 5

Ego/Pride

1 2 3 4 5

Compassion

1 2 3 4 5

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Empathy

1 2 3 4 5

Accountability

1 2 3 4 5

Responsibility

1 2 3 4 5

Passion

1 2 3 4 5

Integrity

1 2 3 4 5

Skills Evaluation

1 Candidate cannot perform the skill, does not demonstrate an ability to successfully perform the skill or understand when to implement the intervention.

3 Candidate performs the skill adequately enough to provide patient care. Improvement and practice still needed to be proficient and work independently. Is still hesitant, unsure of themselves, and fails 50 percent of the time.

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5 Candidate routinely performs the skill with no instructions from the evaluator.

Intubation

1 2 3 4 5

IV

1 2 3 4 5

12 lead Placement

1 2 3 4 5

12 lead Interpretation

1 2 3 4 5

Patient Assessment

1 2 3 4 5

Capnography Interpretation

1 2 3 4 5

Bleeding Control

1 2 3 4 5

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Cardiac Monitor Usage

1 2 3 4 5

Medication Administration

1 2 3 4 5