

Manitoba PCP Program Requirements

Student enrollment/qualifications

Entrance Requirements

- secondary School Diploma or equivalent
the following 3 credits will become a requirement after September 1, 2010
 - one senior level credit in Biology
 - one senior level credit in Chemistry or physics (general or advanced)
 - two senior level credits in English
- level C Health Care Provider CPR - current within 1 year
- transfer credits will be considered for credit toward the PCP program
- credit through a formal Prior Learning Assessments may be considered when required knowledge can be demonstrated. – this will become a requirements by September 1, 2010
- valid Class 4 Manitoba driver's license which allows the use of an ambulance
- up-to-date immunization status including Varicella and Hepatitis B
- completion of a fitness test for counseling purposes related to suitability for a career in EMS
- current criminal record check
- current child abuse registry check

Preferences

- high school diploma may include:
 - one senior level credit in Computer Studies
- students who have post secondary education may be accepted based on the ranking of their pre-requisites but could have transfer credits applied to vocational courses
- current Standard First Aid

Instructors/Faculty

Requirements

- Primary Care Paramedic level, must have extensive clinical(EMS) experience
- EMS specific program applications will only be taught by licensed EMS personnel (appendix B)

Preference

- Advanced Care Paramedics
- the instructor will have a background in teaching and a university education
- Respiratory Technologists, Nurses, etc, teaching non-specific applications must maintain these professional qualification
- lab classes with a student-teacher ratio no greater than 8:1
- EMS instructors must maintain qualification for Manitoba EMS licensure at a minimum of the Technician-Paramedic level

Program

Requirements

- CMA accreditation
- a minimum of 1020 contact hours (can be delivered through alternate methods, see Appendix A)
 - at least 60 hours of hospital clinical
 - a minimum of 240 hours practicum experience
- all Manitoba competency requirements for PCP will be met throughout the program as well as specific criteria in competencies within clinical and practicum experience

The program must include:

- patient care theory
 - patient care lab
 - medico-legal
 - physical education
 - psychology
 - ambulance operation
 - clinical
 - practicum experience
- the program content will reflect Manitoba Emergency Treatment Guidelines and Protocols
 - the program will have the support from an external program advisory committee
 - the program will have a QA/QI program that ensures that the program and faculty are evaluated annually
 - the entire program will be evaluated by students, graduates, and employers. The results of these evaluations will be considered as the program evolves

Preferences

- a strong emphasis of physical activity and endurance should be delivered throughout the program

Theory

Requirements

- course outlines will reflect clearly defined learning outcomes
- resource materials are to be provided to supplement the literature that reflect Manitoba specific areas related to legislation, medico-legal, patient care protocols, etc

Preference

- examinations will adequately evaluate the student and set the foundation for the implementation of theory into practice simulations within lab classes
- Canadian reference material

Skills (simulated settings)

Requirements

- students will obtain all related competencies for simulated settings (lab) prior to progressing to the related clinical and practicum experience components
- competency requires more than one attempt and in a multitude of settings, example: an airway assessment should be completed in many settings, such as patients presenting unconscious, semiconscious, apneic, tachypneic, bradypneic, airway obstruction, and facial trauma

Preference

- the ratio of faculty to students will remain low in order to ensure lab performance is satisfactory
- a skill should be completed a minimum of five (5) times in each situation to ensure competency
- attempts should be individualized to ensure student success and all students should be encouraged to make an attempt, understanding they will not pass unless all requirements are completed to standard

Clinical

Requirements

- students must obtain all related competencies for simulated settings (lab) prior to progressing to the related clinical and practicum experience components
- clinical placement will introduce many patient presentations to the student and will involve a minimum of 60 hours of assessment and implementation of their skills within their scope of practice
- required clinical exposures will include Pediatrics, Emergency Department and Recovery Room

Preferences

- clinical placement is the initial student-patient intervention and should follow base theory delivery and run concurrent in the later section of a delivered program of one year in length
- other clinical sites may include Labour & Delivery, Psychiatry, Personal Care Home

Practicum / preceptorship

Requirements

- the student will complete each competency more than once in a variety of settings or patient presentations
- the student will complete the competency specifics to the Manitoba amended NOCP June 2001
- a minimum of 240 hours
- students will be placed with a licensed practitioner with a minimum 1 year experience and an acceptable scope of practice minimally equivalent to the Technician-Paramedic level of licensing
- preceptors must participate in a paramedic preceptorship training program
- at the conclusion of the practicum, the student will evaluate his/her preceptor for quality assurance purposes

Preferences

- the student, throughout their practicum will be exposed to ambulance calls in their entirety, this should continue throughout their practicum while fulfilling all competencies as listed within the NOCP
- Practicum encompassing day and night shifts in both urban and rural/northern settings should be considered.
- This preceptor program(minimum four (4) hours) should identify a philosophy of education, self evaluation, as well as learning and evaluation styles. The objective is to prepare good medics to become good teachers or preceptors.

- **APPENDIX A**

Contact hour: organized, supervised educational activities, including (this list is not

inclusive):

- in-class teaching
- scheduled instruction
- web based computer teaching activities
- examinations

A contact hour does not include (this list is not inclusive):

- coffee or lunch breaks
- pre-reading
- research assignments
- homework

Program agencies using non-traditional methods of education/program delivery will be required to justify the method and equate it to contact hours.

Example: history of the sphygmomanometer

- all students required to complete a pre-read
 - in class – 4 hours – lecture/ video - discussion, case study review, small group work
 - alternate – 5 hours - video/audio streaming, instructor led internet chat discussion, special workbook assignment with instructor support

An **instruction** is a form of communicated information that is both command and explanation for how an action, behavior, method, or task is to be begun, completed, conducted, or executed.

- **APPENDIX B**

EMS Specific program applications	Performance Environment
GENERAL COMPETENCY 1.1 Function as a professional.	
1.1.h Promote awareness of emergency medical system and profession.	P
1.1.i Participate in professional association.	A
GENERAL COMPETENCY 1.3 Possess an understanding of the medicolegal aspects of the profession.	
1.3.a Comply with scope of practice.	P
1.3.c Include all pertinent and required information on ambulance call report forms.	P
GENERAL COMPETENCY 1.4 Recognize and comply with relevant provincial and federal legislation.	
1.4.a Function within relevant legislation, policies and procedures.	A
GENERAL COMPETENCY 1.5 Function effectively in a team environment.	
1.5.c Work collaboratively with other emergency response agencies.	P
1.5.d Work collaboratively with other members of the health care team.	P
GENERAL COMPETENCY 2.1 Practice effective oral communication skills.	
2.1.a Deliver an organized, accurate and relevant report utilizing telecommunication devices.	P
2.1.b Deliver an organized, accurate and relevant verbal report.	P
GENERAL COMPETENCY 2.2 Practice effective written communication skills.	
2.2.a Record organized, accurate and relevant patient information.	P
GENERAL COMPETENCY 3.2 Practice safe lifting and moving techniques.	
3.2.b Transfer patient from various positions using applicable equipment and/or techniques.	P

3.2.d Secure patient to applicable equipment.	P
3.2.e Lift patient and stretcher in and out of ambulance with partner.	P
GENERAL COMPETENCY 3.3 Create and maintain a safe work environment.	
3.3.a Assess scene for safety.	P
3.3.b Address potential occupational hazards.	P
3.3.h Clean and disinfect an emergency vehicle.	P
GENERAL COMPETENCY 4.1 Conduct triage.	
4.1.a Rapidly assess a scene based on the principles of a triage system.	S
4.1.b Assume different roles in a mass casualty incident.	A
4.1.c Manage a mass casualty incident.	A
GENERAL COMPETENCY 4.2 Obtain patient history.	
4.2.f Obtain information regarding incident through accurate and complete scene assessment.	P
GENERAL COMPETENCY 5.6 Provide basic care for soft tissue injuries.	
5.6.a Treat soft tissue injuries.	P
5.6.b Treat burn.	S
5.6.c Treat eye injury.	S
5.6.d Treat penetration wound.	S
5.6.e Treat local cold injury.	S

GENERAL COMPETENCY 5.7 Immobilize actual and suspected fractures.	
5.7.a Immobilize suspected fractures involving appendicular skeleton.	S
5.7.b Immobilize suspected fractures involving axial skeleton.	P
GENERAL COMPETENCY 6.1 Utilize differential diagnosis skills, decision-making skills and psychomotor skills in providing care to patients.	
6.1.a Provide care to patient experiencing illness or injury primarily involving cardiovascular system.	P
6.1.b Provide care to patient experiencing illness or injury primarily involving neurological system.	P
6.1.c Provide care to patient experiencing illness or injury primarily involving respiratory system.	P
6.1.d Provide care to patient experiencing illness or injury primarily involving genitourinary / reproductive systems.	S
6.1.e Provide care to patient experiencing illness or injury primarily involving gastrointestinal system.	P
6.1.f Provide care to patient experiencing illness or injury primarily involving integumentary system.	P
6.1.g Provide care to patient experiencing illness or injury primarily involving musculoskeletal system.	P
6.1.h Provide care to patient experiencing illness primarily involving immune system.	S
6.1.i Provide care to patient experiencing illness primarily involving endocrine system.	S
6.1.j Provide care to patient experiencing illness or injury primarily involving the eyes, ears, nose or throat.	S
6.1.k Provide care to patient experiencing illness or injury due to poisoning or overdose.	S
6.1.l Provide care to patient experiencing non-urgent medical problem.	P
6.1.m Provide care to patient experiencing terminal illness.	S

6.1.n Provide care to patient experiencing illness or injury due to extremes of temperature or adverse environments.	S
6.1.o Provide care to patient based on understanding of common physiological, anatomical, incident and patient-specific field trauma criteria that determine appropriate decisions for triage, transport and destination.	P
6.1.p Provide care for patient experiencing psychiatric crisis.	S
6.1.q Provide care for patient in labour.	S
6.2 Provide care to meet needs of special patient groups.	
6.2.a Provide care for neonatal patient.	S
6.2.b Provide care for pediatric patient.	C
6.2.c Provide care for geriatric patient.	C
6.2.d Provide care for physically-challenged patient.	S
6.2.e Provide care for mentally-challenged patient.	S
GENERAL COMPETENCY 6.3 Conduct ongoing assessments and provide care.	
6.3.a Conduct ongoing assessments based on patient presentation and interpret findings.	P
6.3.b Re-direct priorities based on assessment findings.	P
GENERAL COMPETENCY 7.1 Prepare ambulance for service.	
7.1a Conduct vehicle maintenance and safety check.	P
7.1.b Recognize conditions requiring removal of vehicle from service.	A

7.1.c Utilize all vehicle equipment & vehicle devices within ambulance.	S
GENERAL COMPETENCY 7.2 Drive ambulance or similar type vehicle.	
7.2.a Utilize defensive driving techniques.	S
7.2.b Utilize safe emergency driving techniques.	S
7.2.c Drive in a manner that ensures patient comfort and a safe environment for all passengers.	S