

Assessing and Documenting the Progression of Learning

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The Panelists



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Learning



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Takeaways

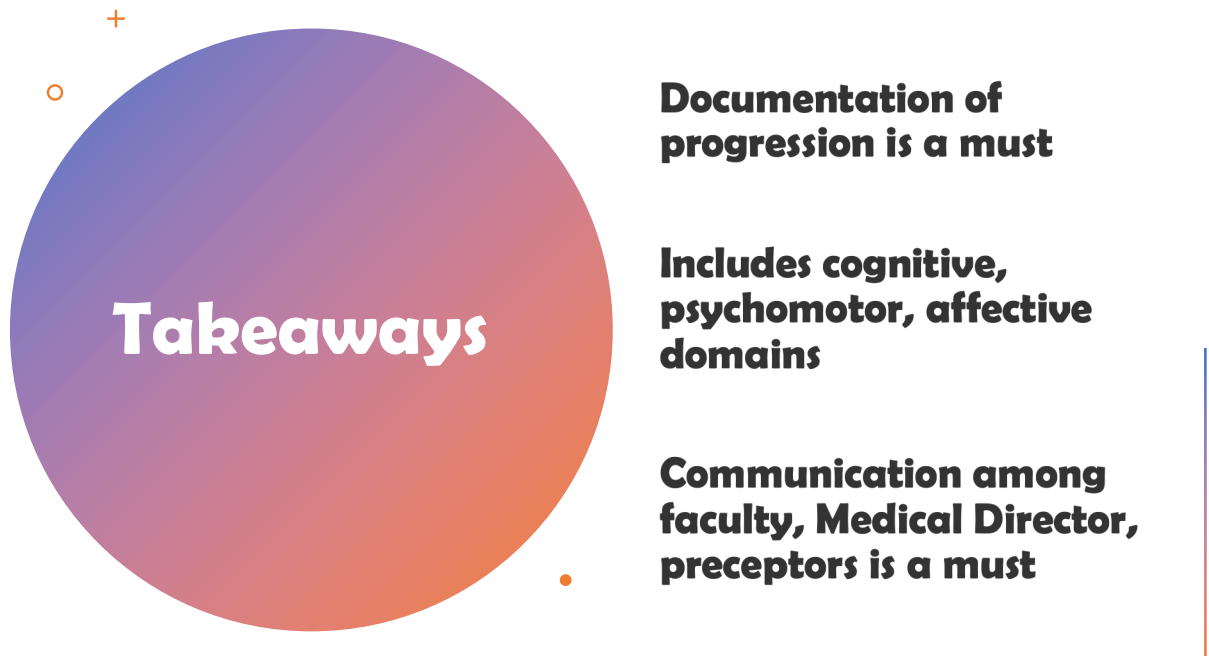


**Learning progressions:
Finding your
best assessment**



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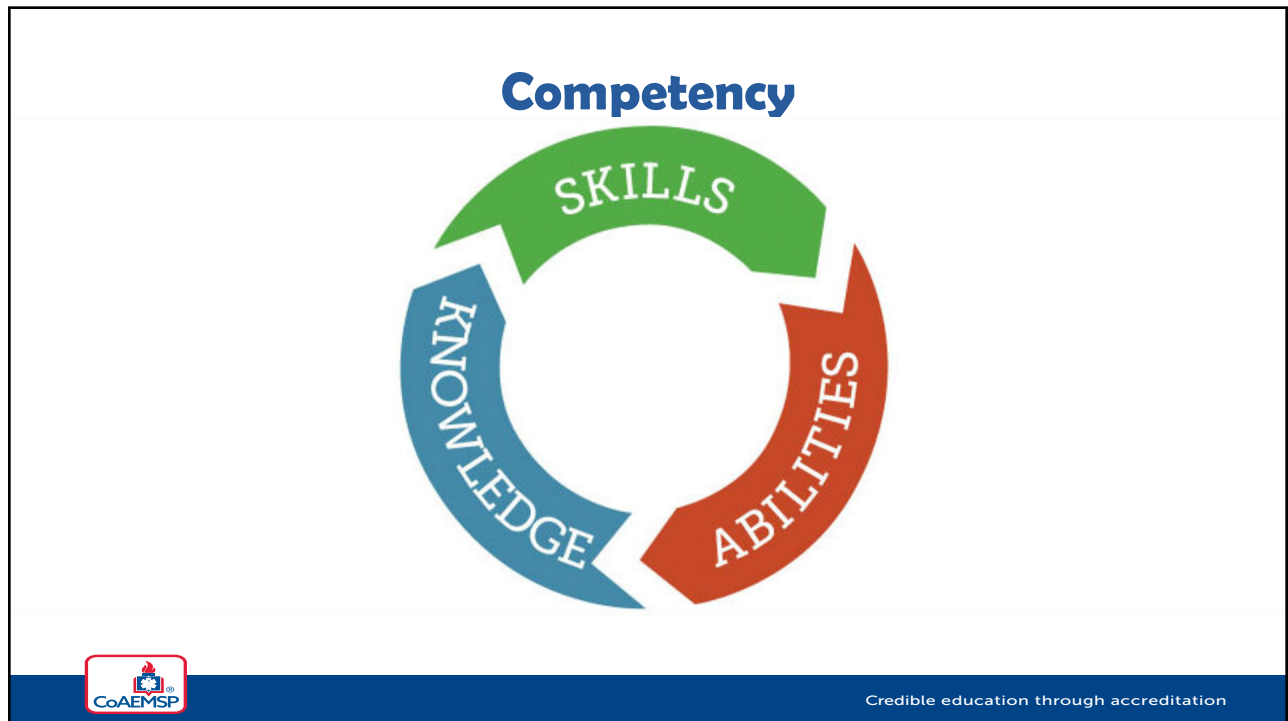
Takeaways

- **Documentation of progression is a must**
- **Includes cognitive, psychomotor, affective domains**
- **Communication among faculty, Medical Director, preceptors is a must**

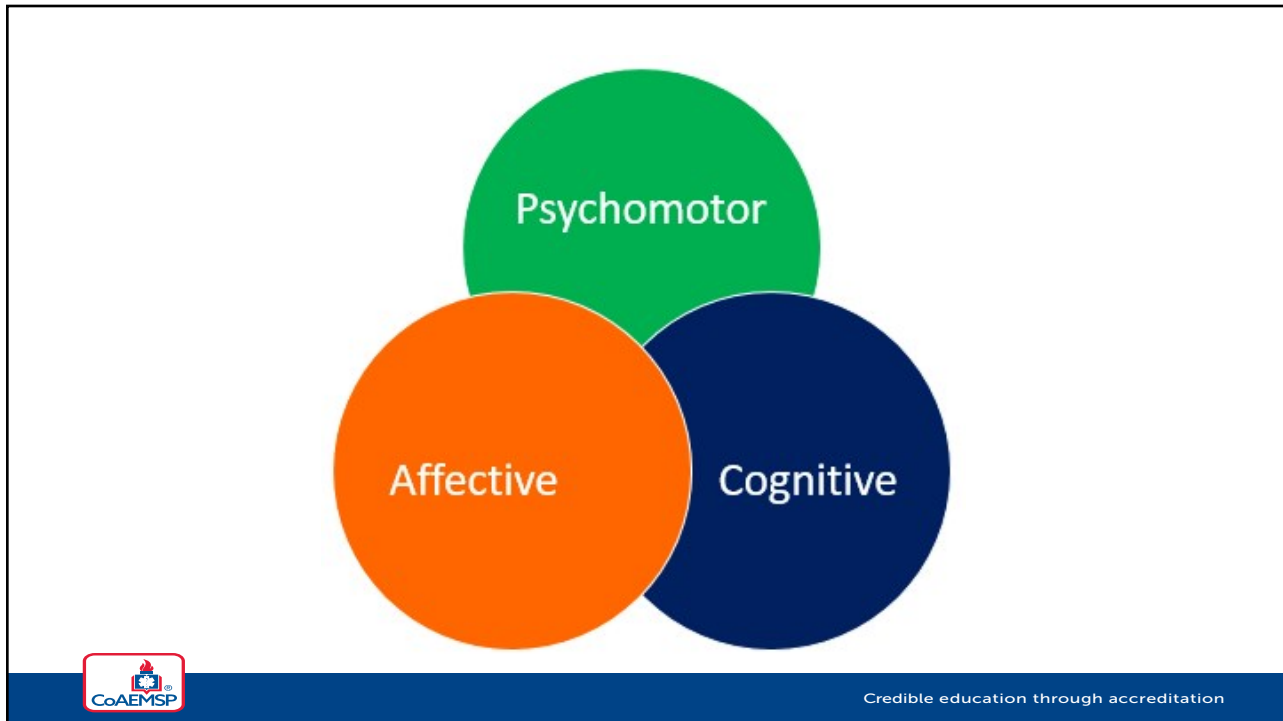
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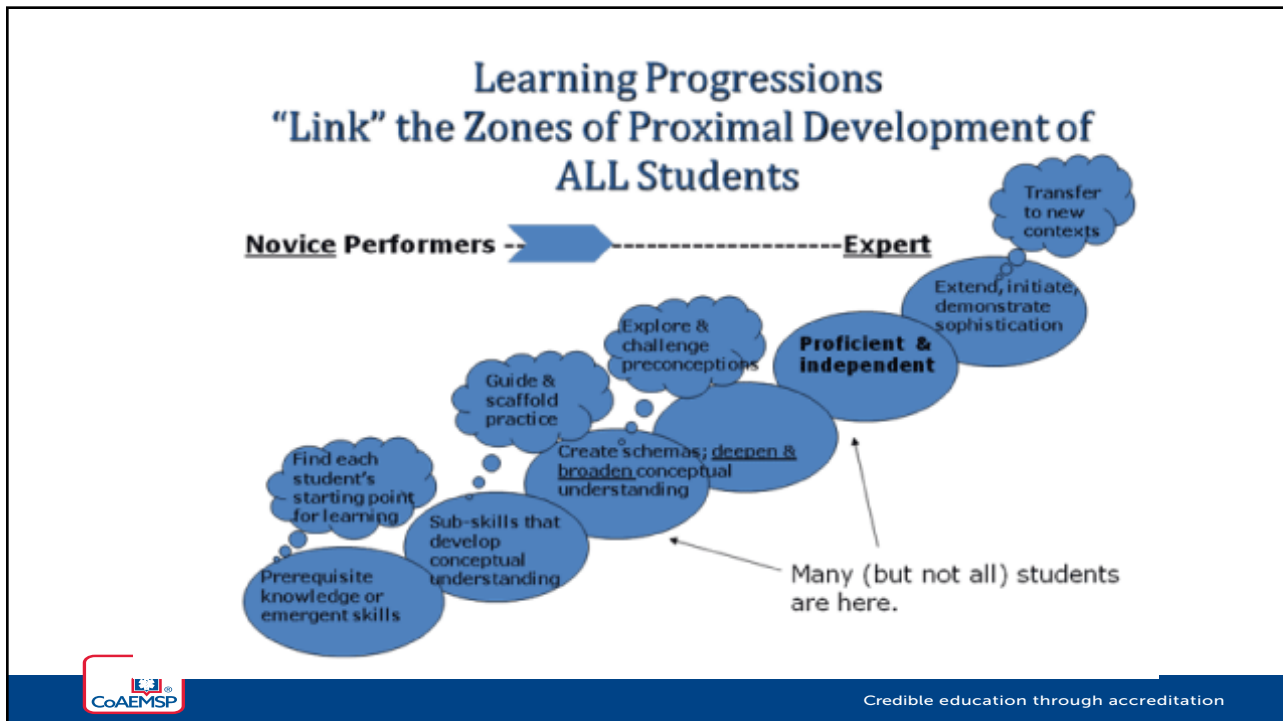
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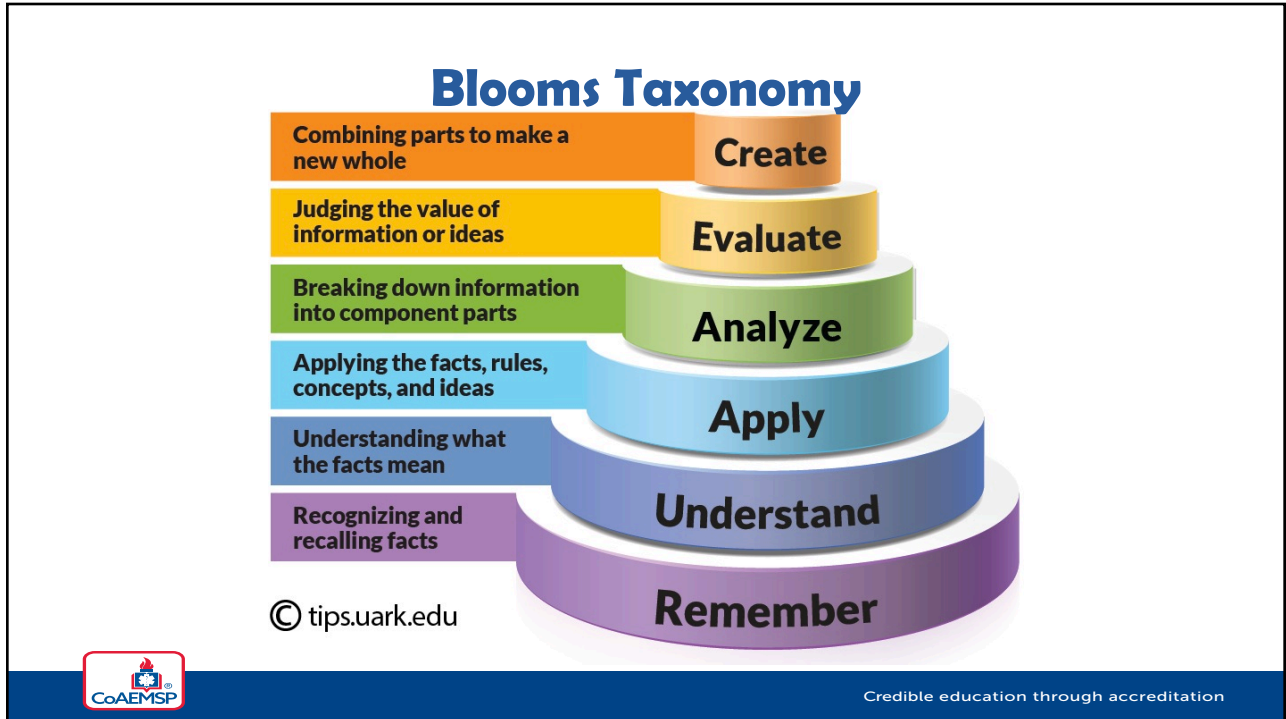
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Develop critical thinking

Apply concepts

Evaluate competency

OBJECTIVES



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Program Structure



One or multiple courses



Primary or multiple instructors



Few or multiple adjunct instructors



Program length and span



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**Formative
assessments**

**Summative
assessments**

Comprehensive

Cognitive Assessment Instruments



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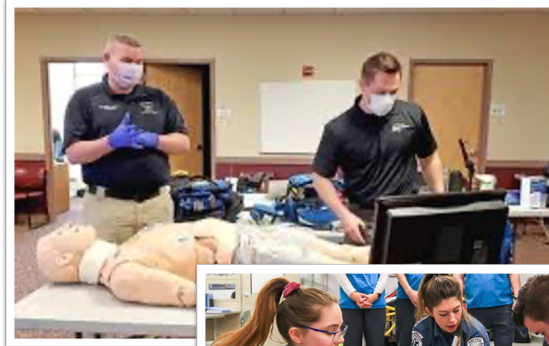
Psychomotor Assessment

Skills

Scenarios

Simulations

Summative/testing



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Affective Assessment


**Evaluation
each phase**

**Summative
evaluation**




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Affective Behavior Evaluation

Program Number:

Program Name:


Student:

Date:

Faculty:


Course:

Please rate the following attributes of professional behavior and affect. Some examples are included but others may be appropriate.	Needs Improvement	Fair	Good
1. Integrity <small>Consistent honesty, trustworthy with the property of others; trustworthy with confidential information; complete and accurate documentation.</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Compassion <small>Acts to support others who are suffering, actively listens to patients and families and demonstrates concern.</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Accountability <small>Takes responsibility for actions, complete assignments, open to constructive feedback.</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Respect <small>Polite to others, does not use derogatory or demeaning terms, has a manner that brings credit to the profession.</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Empathy <small>Responds appropriately to the response of patients and family members; demonstrates respect</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>




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Student Progress/Tracking Notes

CoAEMSP Program Number:

Paramedic Sponsor/Program Name:

Student Name:


Lead Instructor:

Course:

Class Dates:

Date	Issue/Concern for this Student	Discussed with Student (Yes/No)	Faculty Initials	Comments

[NOTE: All response boxes on this form will automatically expand as text is entered. Additional rows can be added to this table by placing the cursor in the bottom, right hand box and pressing "tab".]



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Each term

Progress report

Documented

Academic Advising

What is
ACADEMIC ADVISING?

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Student Academic Progress

CoAEMSP Program Number:

Date:

Paramedic Sponsor/
Program Name:

Length in Program: (months)

Student:

Term Number:

Category		
Mid-term Average		
Areas of Strength		
Weakest Areas		
Skills Completion		
% of Skills Completed		
Any Remaining Skills		
Performance in Scenarios		
Affective Performance		
	N/A	
Clinical Progress		
% of Clinicals Completed		
Clinicals to Complete		
Capstone Field Internship Progress		
% of Capstone Field Internship Completed		
Progress on Competencies and Contacts Completed		

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Monitor student experiences

Provide feedback

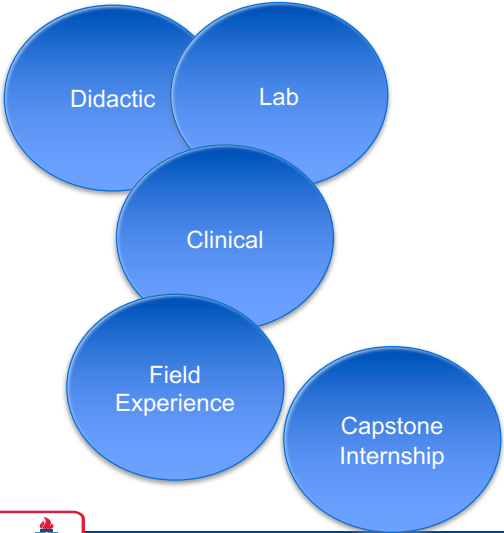
Clinical Experience



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Clinical Experience



Sequencing pros and cons

Documentation/monitoring confirmed skill competency before rotations

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Field Experience

Structure

During didactic and clinical experience

Following didactic and clinical experience



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Capstone Field Experience

Paramedic level decision making

All types of patient calls

Team lead

Minimal prompting



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REQUIRED

Met all required competencies

Summative assessment 3 domains

Transcript



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REQUIRED

Essential!

Medical Director must certify terminal competency


Terminal competency form

Original or certified electronic signature



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CoAEMSP

Terminal Competency Form

CoAEMSP Program Number:

Paramedic Program Name:

We hereby attest that the candidate listed below has successfully completed all of the Terminal Competencies required for graduation from the Paramedic Education program as a minimally competent, entry-level, Paramedic and as such is eligible for State and National Certification written and practical examination in accordance with our published policies and procedures.


Name of Graduate:

PROGRAM REQUIREMENTS successfully and fully completed on
 Program Overall Score

List of Written High Stakes Examinations (including the final cumulative summative examination)

	Score		Score		Score
(1)	<input type="text"/>	(5)	<input type="text"/>	(9)	<input type="text"/>
(2)	<input type="text"/>	(6)	<input type="text"/>	(10)	<input type="text"/>
(3)	<input type="text"/>	(7)	<input type="text"/>	(11)	<input type="text"/>
(4)	<input type="text"/>	(8)	<input type="text"/>	(12)	<input type="text"/>

- Completed Appendix G Requirements (required minimums, competencies, and patient contacts)
- Documented Skill Competencies
- Affective Learning Domain Evaluations
- Clinical/Field Experience Tracking Records (attended all required areas, completed required competencies)
- Capstone Field Internship Tracking Records (number of team leads, achieved competencies)
- Graduation Requirements Report



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Establish milestones

Closeout forms

Graduation checklist




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Graduation Checklist

Date:

CoAEMSP Program Number:

Paramedic Sponsor/
Program Name:


Course Number:

Course Start Date:

Course Completion Date:

All of the following must be verified and documented prior to requesting a certificate of completion for the Paramedic program.

Verified	Requirement
<input type="checkbox"/>	Student has submitted all required paperwork
<input type="checkbox"/>	Minimum hour and contact requirements for program/state have been met
<input type="checkbox"/>	Minimum number of required patient contacts have been met and verified in a graduation report format
<input type="checkbox"/>	Student successfully completed the capstone cognitive examination
<input type="checkbox"/>	Student has successfully completed a capstone psychomotor assessment
<input type="checkbox"/>	A final <i>Professional Affective Behavior Evaluation</i> has been completed
<input type="checkbox"/>	Student has completed a <i>Course Evaluation Final</i>
<input type="checkbox"/>	Student has completed clinical site and preceptor evaluations
<input type="checkbox"/>	Student has completed a <i>Program Resource Survey-Students</i>
<input type="checkbox"/>	Program materials (resource texts) or equipment has been returned
<input type="checkbox"/>	Student address/email/phone is updated in system



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- Documentation of progression is a must**
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Takeaways



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Accreditation is
an everyday activity

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Thank you



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