

College of Paramedics of Manitoba Protecting public interest through regulatory excellence in paramedicine

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## Education Program Approval Criteria Advanced Care Paramedic Anatomy and Physiology Pre-requisite

	ACP
Student enrollment/qualifications *Note: Post-secondary education providers are approved by a provincial government body. The A&P credential must come from an approved post-secondary education provider (College/Polytechnic or University). In Manitoba, approval is under Manitoba Advanced Education and Training *Note: candidates may qualify for the CPMB Policy AE-5 PCP and ACP A&P Exemption	ACP Students must have a minimum two (2) years' experience as a Primary Care Paramedic, be registered with the College of Paramedics of Manitoba, be in good standing, and hold a valid Certificate of Practice *If not already completed for entry into a Primary Care Paramedic program, six (6) Credits of Post-Secondary Human Anatomy and Physiology (including lab component) completed within five (5) years of beginning an ACP Paramedic program. BLS level CPR current within 12 months Updated Immunizations: • Hepatitis B • Measles, mumps, rubella • Pertussis (adult) • Polio • Tetanus and diphtheria • Varicella (chickenpox) • Influenza
	• Influenza As well, students should obtain documentation of any previous tuberculin skin tests (TSTs or Mantoux), chest x- ray reports obtained after a positive TST, and documentation of a previous diagnosis of, or therapy for, latent tuberculosis infection (LTBI) or active tuberculosis
	disease Immunization: requirements for immunization should align with current Provincial Ministerial and Public Health orders. Students should be aware of provincial requirements and College of Paramedics of Manitoba practice directions.
	CRVS/CA/AA checks current within 12 months. Checks received that are not clear are subject to review and consultation regarding employability. Education Providers should follow their policies regarding non-clear record checks.
Instructors / Faculty	Paramedic Instructors must be a minimum ACP with a minimum 5 years of clinical experience.



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	Paramedicine Instructors must be registered with the College of Paramedics of Manitoba, are in good standing, and hold a valid Certificate of Practice
	Non-Paramedic instructors must be from a registered Health Professionals with relevant education credentials (Physician, RN, RT, etc.)
	All Faculty must receive a formal introduction and orientation to the Program and have a clear understanding of the content delivery expectations.
	Paramedic Faculty must have completed a formal training in Adult Education within 5 years (ex. Certificate in Adult Education, Teaching for Learning in Adult Education, Emergency Services Instructor Level 2)
Program Content	The primary purpose of the Program is to prepare students for work in the province of Manitoba.
	The Program must be accredited through Accreditation Canada (Equal).
	Program content will reflect Shared Health Manitoba Care Maps, Medication Standing Orders and Procedures ( <u>https://sharedhealthmb.ca/health-providers/ers/</u> )
	Program content will include any NOCP variants as identified by the College of Paramedics of Manitoba.
	Resource materials reflect MB specific areas related to legislation. (Including but not limited to Regulated Health Professions Act, College of Paramedics of Manitoba General Regulations, Highway Traffic Act, Narcotic Act, etc.)
	All competency requirements will be met throughout the program.
	Clinical and Practicum sites must be located in Manitoba. (Other Canadian placement may be considered with prior approval of the College of Paramedics of Manitoba)
	Those serving as preceptors in Clinical and/or Practicum sites must have completed specific training provided by Education providers and approved by the College of Paramedics of Manitoba. In addition to the recording process, Preceptor training should include, but is not limited to an understanding of the NOCP Competencies, the definition of supervision (see NOCP definition of supervision), proficiency expectations (see NOCP definition of proficiency), policies and expectations should there be a critical incident and/or student suitability/fitness concerns,



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expectations of feedback format and documentation for students.           Quality Assurance Requirements           The program will have a stakeholder program advisory committee.           The program will have a stakeholder program advisory committee.           The program will have a nanual QA/QI process for program, faculty and preceptor evaluation. Information will be used for program, faculty and preceptor improvement.           The ratio of faculty to students shall be 1:6 maximum is to ensure adequate supervision and monitoring for psychomotor performance           Simulated, Clinical, Practicum Competencies         The student must demonstrate <i>proficiency</i> in a designated Performance Environment.           Proficiency involves the demonstration of skills, knowledge and abilities in accordance with the following principles: <ul> <li>Consistency (the ability to practice without assistance from others)</li> <li>Independence (the ability to practice without assistance from others)</li> <li>Timeliness (the ability to practice in a time frame that enhances patient safety)</li> <li>Accuracy (the ability to practice in a time frame that enhances proficiency in al NOCP Simulated (S) competencies prior to progressing to the related clinical and practicum experience components</li> </ul> <li>Students must demonstrate proficiency in al NOCP Simulated (S) competencies prior to progressing to the related clinical and practicum experience components</li> <li>Students should have multiple opportunities to demonstrate proficiency and are required to demonstrate competencies more than once and in a variety of scenarios/situations.</li> <li>Didactic and Simulated Content</li> <li>No minimum contact hours are specified at</li>		
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A contact hour is defined as:	Didactic and Simulated Content	Emphasis should be placed on ensuring adequate time to receive didactic material, and reasonable opportunities to
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	<ul> <li>Organized, supervised educational activities including:</li> <li>in-class content delivery scheduled instruction/demonstration</li> <li>distance content/activity delivery (live interaction with students)</li> <li>proctored examinations</li> <li>tutoring/consultation/practice</li> </ul>
	<ul> <li>A contact hour does not include:</li> <li>coffee or lunch breaks</li> <li>pre-reading/assigned preparation</li> <li>research assignments</li> <li>homework</li> </ul>
Clinical	No minimum hours are specified at this time. Emphasis should be placed on ensuring reasonable opportunities to attempt competencies and demonstrate proficiency.
<ul> <li>Practicum</li> <li>*Note: Current workforce clinical practice has challenged securing appropriate rural preceptors. Education programs should make every attempt to provide students with a rural placement as part of the practicum when they become available.</li> </ul>	No minimum hours are specified at this time. Emphasis should be placed on ensuring reasonable opportunities to attempt competencies and demonstrate proficiency.
	Practicum should include both urban and rural placements where/when possible.
	"Urban" is defined as cities with 10,000 people or greater including "catchment" area, "Rural" is defined as communities with less than 10,000 people.
	Preceptors must be registered with the College of Paramedics of Manitoba, be in good standing, and hold a valid Certificate of Practice.
	Preceptors must be classified as an Advanced Care Paramedic or higher and have a minimum of five (5) years of practical experience in a practicum setting.
Evaluation	Before the conclusion of the Education Program, the student will successfully complete a summative or cumulative (including both didactic and psychomotor content learned) evaluation.