

REGIONAL PARAMEDIC PROGRAM FOR EASTERN ONTARIO

COMPETENCY ASSESSMENT

Candidate Name (Print)

Date

Location

Scenario Code/Call #

Evaluator's Name (Print)





Terms of Reference

Please use the following terminology while completing the **Global Rating Scale (GRS)** for the assessment of paramedic clinical competence:

- Accuracy
- Appropriateness
- Communicates
- Confidence
- Consideration

- Consistency
- Delegates
- Determination
- Differentiates
- Independence

- Interpretative
- Knowledgeable
- Timeliness

Evaluated Skills

Please use the following skills to evaluate paramedic candidates while completing the **Objective Structured Clinical Evaluation (OSCE)** portion the booklet:

- 12-Lead Interpretation
- 15-Lead-Interpretation
- ASA
- BGL
- BVM
- Chest Needle Thoracostomy
- CPAP
- CPR
- CVAD Access
- ECG Interpretation
- ETT
- I.O. Adult

- I.O. Pediatric
- IM
- IN
- IV
- King LT
- Magill
- MDI
- Medical Math
- Nebulizer
- Nitro SL
- NPA
- OPA

- Patching
- Rhythm Interpretation
- SGA
- Suction
- Synchronized Cardioversion
- TCP
- TOR
- TTI
- TTI Assist
- Fluid Injection

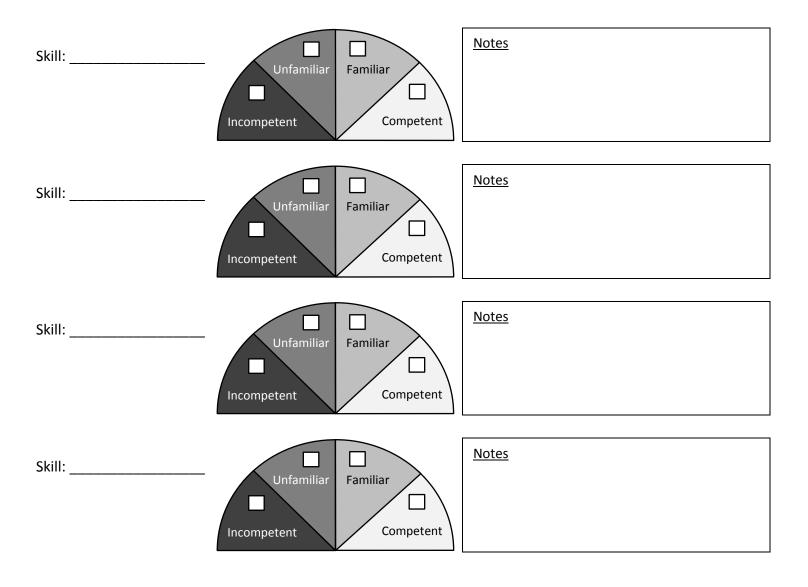




OSCE Evaluation

Individual skills will be evaluated according to the expectations set out in the OSCE (Objective Structured Clinical Evaluation) standards and performance will be recorded as (please check one):

Incompetent	Lacking the qualities needed to be effective
Unfamiliar	Not well enough acquainted to be effective
Familiar	Acquainted enough to be effective
Competent	Having all requisite qualities for effectiveness





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GLOBAL RATING SCALE for the ASSESSMENT OF PARAMEDIC CLINICAL COMPETENCE

Rating Label	Definition
1 Unsafe	Not performed as required. Performance compromised patient care / safety; serious remediation is required, unsuitable for supervised practice or progression.
2 Unsatisfactory	Performance indicated cause for concern. A potential for compromised patient care / safety exists; considerable improvement is needed. Not ready for supervised practice or progression.
3 Poor / Weak	Inconsistently performed, and/or performance does not meet the standard, improvement is needed. More training / practice is needed before consideration for supervised practice or progression.
4 Marginal	Occasionally performance is to standard, and/or performance meets minimum standards, improvement is recommended; suitable for supervised practice or progression with some remediation.
5 Competent	Often performed to standard, and/or performance is safe and to standard. Some areas could be improved. Ready for independent practice or progression with only minor concerns if any.
6 Highly Competent	Consistently performs to standard, and/or performance is safe and to standard. Occasionally exceeds the standard. Little improvement needed if any; ready for independent practice or progression.
7 Exceptional	Consistently demonstrates a high standard of performance, and/or consistently exceeds the standard enhancing patient safety; could be used as a positive example for others; highly recommended for independent practice or progression.

2	5	4	5	6	1
UNSAT	POOR/WEAK	MARGINAL	COMPETENT	HIGHLY	EXCEPTIONAL
				COMPETENT	
l	JNSAT	JNSAT POOR/WEAK	JNSAT POOR/WEAK MARGINAL		JNSAT POOR/WEAK MARGINAL COMPETENT HIGHLY COMPETENT

Refers to the individual's overall ability to consider and integrate environmental, scene, resources and patient condition cues into the overall interaction, management and safety plan. This includes observing whole environment (all available data sources), anticipating likely events, discriminating between relevant and irrelevant data and avoiding tunnel vision (inappropriately focusing on elements to the exclusion of others). The individual is expected to demonstrate examples of situation awareness throughout the interaction and updating actions as necessary.

History Gathering	1	2	3	4	5	6	7
	UNSAFE	UNSAT	POOR/WEAK	MARGINAL	COMPETENT	HIGHLY COMPETENT	EXCEPTIONAL

Refers to the individual's overall ability to effectively and thoroughly gather an appropriate history (includes history of present illness and medical history) which is organized, appropriately structured, timed and focused according the clinical situation and level of urgency (context). This Includes interpreting and evaluating findings while discriminating between relevant and irrelevant findings. Also, refers to a demonstrated ability to include a consideration for differential diagnosis, while working toward a working diagnosis.

Patient Assessment	1	2	3	4	5	6	7
	UNSAFE	UNSAT	POOR/WEAK	MARGINAL	COMPETENT	HIGHLY COMPETENT	EXCEPTIONAL

Refers to the individual's overall ability to select and perform a physical exam and investigation of signs and/or symptoms that is organized and appropriate given the clinical situation and level of urgency. This includes interpreting and evaluating findings while discriminating between relevant and irrelevant findings. Also, refers to a demonstrated ability to continue appropriate reassessment / detailed assessment as needed. Finally, this also includes a consideration for differential diagnosis, while working toward a working diagnosis.



			GRS for th	ne ASSESSMEN	NT OF PARAME	DIC CLINICAL (COMPETENCE
Decision Making	1	2	3	4	5	6	7
efers to the individuals overall ability e based on and supported by fin formation for decisions made (i.e., a so includes selecting an appropriate andition, resources etc) and context	dings, consid avoiding prema e managemen	eration of risl ature closure)	ks, benefits ar and ensuring d	nd differential lecisions are a	diagnosis. This ppropriately price	s involves hav pritized, and tin	ving adequate ned. This
Resource Utilization	1	2	3	4	5	6	7
	UNSAFE	UNSAT	POOR/WEAK	MARGINAL	COMPETENT		EXCEPTIONA
Communication	1 UNSAFE	2 UNSAT	3 POOR/WEAK	4 MARGINAL	5 COMPETENT	6 HIGHLY	7 EXCEPTION
efers to the individuals overall ability atient care and team effectiveness. ppropriate individuals and that mess kills, demonstrating empathy, resp ppropriately communicated with team	This includes ages are hear onding appro	the use of con d / received (i. priately to sta	icise and appro .e., closes the latements by the	opriate languag loop). This als he team, patie	ge, ensuring sta o includes demo ent or bystando	COMPETENT nd/or bystande tements are di onstrating effe er. Actions a	rected at ctive listening
Procedural Skill							
	1	2	3	4	5	6	7

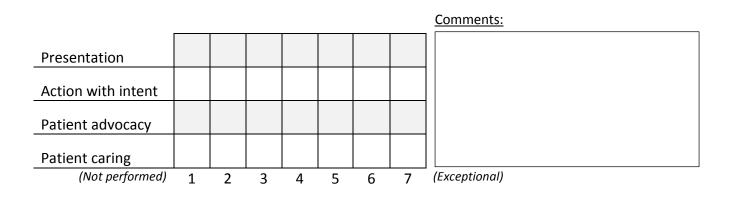
Refers to the individuals overall ability to complete psychomotor or procedural skills or tasks effectively, appropriately and to standard. This involves a familiarity with equipment used, ensuring appropriate and safe application while completing tasks to standard and avoiding commission or omission errors. This also involves adaptability to failures / problems (as necessary) and ensuring team, patient and bystander safety while performing these procedures; includes appropriate execution, properly sequenced, and evaluating / reevaluating effectiveness.



Professionalism

Professionalism evaluation results as defined by:

Presentation	Conduct in a manner that gives the patient confidence
Action with intent	Conduct that has a purpose toward benefiting the patient
Patient advocacy	Conduct representing the interest of the patient
Patient caring	Conduct that displays to the patient they are being cared for





For Coordinator Use Only

GRS Score: _____

(Please select appropriate evaluation type and check off result accordingly):

Α.	Entry to Practice	
	Ready for Independent Practice	
	Not Ready for Independent Practice	
	Comments/Details:	
В.	Continuing Education	
	Recertified	
	Not Recertified	
	Comments/Details:	
C.	Academic Practice	
	Ready for Preceptorship	
	Not Ready for Preceptorship	
	Comments/Details:	
D.	Field Evaluation	
	Continue Independent Practice	
	Discontinue Independent Practice	
	Comments/Details:	

Coordinator Signature: _____