The Importance of Lesson Plans in the Skill Laboratory

The lesson plan is a document used by educators to provide an overview of what is going to be taught in that specific lesson. Lesson plans can vary in their detail however the best lesson plans provide a road map such that any educator could step into the classroom and teach the lesson. This road map provides for a successful pathway and is the educational best practice for both classrooms learning and laboratory skill practice.

Over the past 2 hybrid courses, we have evaluated these lesson plans, engaged in discussions, and incorporated your feedback to make these lesson plans the best they can be. Based on this 6 month review process, I want to provide you some insights on the lesson plan as we will be using these in hybrid labs going forward. We are also working to build these out for accelerated labs and the expectation is if they are available for the lab, they will be used.

The lesson plans we use for our EMT labs provide several sections on the cover page. These include a section on the materials needed for the lab to aid in setting up the skill station. At the top you will also see an overview of the lesson plan. This area will help provide clarification if the students have had this skill before or if this is the first time they have had this particular skill. You will also find helpful notes in this overview section. There is also a section that covers the objectives which are to be covered in the laboratory; these in essence are the guiding principles of that specific session. While you won’t go line by line and lecture these points to the students, the objectives are the points which should be covered in the lab. You will also find a section with additional resources which typically includes the skill video if there is one and any additional information that would be helpful for the skill. The box labeled verification is provided to show how success is measured in the lab. Typically, this is through fisdap however if this skill is not recorded in fisdap you will find this information as well. The verification box is also were any comments are made if this is the last time students will see this lab as an indication for you to remind students, they need to be at 100% in fisdap.

Beyond the overview, the lesson plan also includes a timeline of how the lab should be conducted. As educators you know this can be fluid as some classes ask more questions and others are more reserved. However, the times listed should give you an overview of where you stand on completing the tasks of the lab. Most of the timelines start with a short introduction and then the skills video. You will see some notes in the skills video section as students should
be focused on the video and not distracted by phones or ipads. If this is the first lab in which the particular skill is seen by students, you will see a breakdown of the skill demonstration. If this is a skill which the students have completed previously, the lab plan will direct the students into skills practice following the skills video. Please be mindful, the demonstrations described are meant to lead you through the demonstration efficiently as to cover the skills as described in fisdap while having students practice with you. This should help you as an instructor know where the students are in their progress of the class and work to get students practicing skills.

There are some additional items which will be described in the timeline. For example, there may be additional skills to be taught within the skill. During the airway management station for example, after students have practiced the skills and logged 2 attempts, the lesson plan advises to demonstrate the insertion of an NPA so students can see both the OPA and NPA. The objective behind adding the skill after students have practiced the OPA twice is so students are not overwhelmed with new information and have received some small wins during the lab. This affective component is important to learning and has been documented to improve student’s performance. In essence, when our students feel successful, they are more likely to keep trying new things. The same occurs in the oxygen administration skill which the lesson plan directs you to demonstrate nasal cannula after students have completed 2 attempts of applying the NRB mask. These skills, inserting the NPA and applying nasal canula are incredibly important for our students however if the lesson plan wasn’t referenced, could be overlooked. As described above, this is the road map to delivering a great skill lab.

The timeline portion of the lesson plan also serves as aid to supplement the lab as the repetitiveness of the lab can leave anyone of us asking, “did I say that to this group?” Besides the lesson plan being educational best practice, using the lesson plan as a road map or timeline helps improve consistency between each group and verification everything that needs to be covered is in fact reviewed with students.

The timelines have also been built to include example patient scenarios. The scenarios include the condition, example vital signs, and any specifics on how the patient should be presented. The specific scenarios have been selected because they match the content covered in lecture. By providing scenarios which match the lecture content, we add to the students learning as they can take what they had earlier in the week and now apply it to patient care. If you attended orientation with Dr. Heather Davis, you will remember her advocating for this practice as it has
been demonstrated to raise the level of critical thinking in our students. Beyond greater learning, by using a set of patient scenarios, the program as a whole can verify each student has seen these specific conditions. Previously when we make up different patient’s each lab, there is no way of verifying a student or a group of students have seen a variety of conditions before completing the program. While we may think this is the case, a program of our pace currently does not have a way to verify that and as we work to ensure the UCLA quality of education, we can ensure our students have seen specific conditions throughout their education by putting these conditions into the lesson plans. This is actually a fairly common issue among programs and one of the reasons the Commission on Accreditation requires paramedic programs to detail the age and condition of each patient treated in skill labs and sets a benchmark for the number of times a paramedic student must see each condition or age of patient.

Additional rational for including the patient scenarios in the lesson plans is to ensure we are providing students with scenarios which are physiologically accurate. For example, the neurogenic shock patient needs pink, dry skin but the rest of the shock patients will be pale and cool. The scenarios also ensure we are using simulation best practices. This includes ensuring the scenario is realistic and appropriate for the student’s progress in the program. You may think back to your initial EMT course and remember scenarios that were impossible, or you left scratching your head wondering how you were supposed to recognize a specific condition. My favorite example is the dinosaur attack or the plane crash of hemophiliacs. These types of scenarios are unrealistic and do not lead to students learning, in fact they lead to students feeling resentful which does not aid in their desire to continue learning. You may have also seen the scenario where a patient falls from a ladder and lands on a knife but displays no signs or symptoms of the knife unless the patient’s back is visualized. We will continue to teach students to assess all body regions without tricking them or setting them up for failure. These examples of educational mistrust between student and instructor are another reason we utilize the scripted scenarios with the additional details. I assure everyone we can teach students to check the back of their trauma patient without having to hide injuries or have the student leave a lab feeling tricked.

While the lesson plan provides the outline of the scenario and condition and the expectation is these scenarios are included in lab, we have left plenty of room to flex your creativity muscles
and add your own touches to the scenario. You will also find much of the feedback and scenarios that were provided over the last 6 months have been included in the lesson plans.

You will also see the scenarios will repeat themselves throughout the weeks. For example, COPD occurs in both the morning and afternoon of hybrid day 2. This is intentional and provides the students with multiple attempts at seeing conditions which we know they will see in the field. Again, this is your opportunity to get creative and change the setting in which the patient is found as we know not all COPD patients are found on a couch watching TV following a meal of hamburgers and fries. In fact, this is noted in the lesson plan as you may not have taught the same section in the morning and thus not know what came in the prior medical assessment lab.

The lesson plans and the patient scenarios are the expectation for the lab. It may not appear problematic to change the skill lab or use different scenarios however that sets the group of students and fellow instructors up for difficulty. Changing the lab schedule around or changing the scenarios and conditions may lead to the students duplicating some conditions and not seeing others. The students will then miss the content that was intended to be covered and they may not get those conditions again. This can also lead to confusion with students who have not had the content covered yet and thus the expectation for their learning is set too high.