

**Evaluating an Effective EMS Orientation Process for the Ross Township Fire
Department**

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CERTIFICATION STATEMENT

I hereby certify that the following statements are true:

1. This paper constitutes my own product, that where the language of others is set forth, quotation marks so indicate, and that appropriate credit is given where I have used the language, ideas, expressions, or writings of another.
2. I have affirmed the use of proper spelling and grammar in this document by using the spell and grammar check functions of a word processing software program and correcting the errors as suggested by the program.

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ABSTRACT

The problem this study will address is that the current EMS orientation program is not consistent, with the current EMS operating procedures of the Ross Township Fire Department. After new employees have been through orientation, they will feel comfortable and confident in their EMS skills and handling EMS responses for Ross Township. The purpose of this study is to identify and describe the best methods to orientate and evaluate these employees.

The research questions this study investigated are:

1. What are the benefits of an employee orientation program?
2. What are the various methods in orientating and evaluating an employee?
3. What evaluation programs are being utilized by other EMS agencies in evaluating newly hired or newly paramedic certified employees?

Through descriptive research, it was determined what procedures are the most important in building a successful new employee orientation. This information and results were obtained through various published journals, libraries, internet research and through a survey instrument.

The research that was conducted for this paper indicated that a well thought out and executed new employee orientation program will yield an employee who is confident and productive. Recommendations from this research include; assign only one preceptor to each new employee, add department core values (mission/vision) statements, tour - all fire stations, create and utilize a follow-up program for the orientation program.

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INTRODUCTION

Statement of the Problem

The Ross Township Fire Department has had an emergency medical services (EMS) new paramedic orientation program since 2006. New paramedic orientation includes new employees that are paramedics or emergency medical technicians (EMT) and current employees who become paramedics. The orientation program consists of an orientation packet that is given to new employees on their first day. The packet contains information about the township's EMS information, equipment, and EMS skills that have to be completed by a predetermined date. This orientation packet was utilized from a neighboring department with changes made to adapt to Ross Township EMS.

The problem is the current EMS orientation program was never designed as to how Ross Township Fire Department operates. The orientation packet was designed for an employee to pair with a preceptor for several months who would assist the new employee with completing the orientation packet. Currently, a new paramedic employee for Ross Township will ride with the assigned crews for four shifts, and then is placed on shift as part of a two person crew. This is due to budgetary restrictions. Because of the two personnel staffing, the new employee is providing primary patient care without supervision during patient transport to the hospital. The new employee is assigned a preceptor, but works with whomever is on shift that day to complete the packet. The assigned preceptor, usually an officer, oversees that the packet is completed in its entirety. This has led to employees and supervisors complaining of inconsistencies in how new employees are orientated.

The current orientation packet requires a large number of benchmarks for EMS skills to be completed. This orientation packet was designed for a department with a high call volume.

Since Ross Township has a low call volume, employees could go past the completion date on the orientation packet without completing all of the benchmarks. Due to the lack of emergency calls, the new employee has to complete the skills on a mannequin instead of patients to finish the packet. This problem also extends the time frame in which the packets are getting completed by several months. This problem has new employees who are hired as paramedics operating as EMT's till the orientation packet is complete, at which point they are cleared to function as a paramedic in Ross Township. While the new paramedics are only allowed to function as EMT's till they are cleared, two new problems surface. It creates a service delivery problem since the new paramedic can only function as an EMT till they have completed the orientation program. It also creates a scheduling problem because until the new paramedic completes the orientation program, they can only be placed on the EMT slot on the schedule. A scheduling and a staffing problem now exist.

Since a proper orientation process has never been researched for Ross Township, what is the most effective method in evaluating and orientating a new employee? Therefore, *the problem this study will address is the current EMS orientation program is not consistent, with the current EMS operating procedures of the Ross Township Fire Department.* After a new employee has been through orientation, they will feel comfortable and confident in their EMS skills and handling EMS responses for Ross Township.

Purpose of the Study

The purpose of this study is to identify and describe the best methods to orientate and evaluate employees. This evaluative study will identify the most effective method to orientate and evaluate EMS employees of the Ross Township Fire Department.

Research Questions

The research questions this study will investigate are:

1. What are the benefits of an employee orientation program?
2. What are the various methods in orientating and evaluating an employee?
3. What evaluation programs are being utilized by other EMS agencies in evaluating newly hired or newly paramedic certified employees?

BACKGROUND AND SIGNIFICANCE

The Ross Township Fire Department is a combination department serving 8,355 (US Census Bureau, 2010), residents in a thirty-six square mile response area. This response area covers Ross Township, as well as the Village of Millville located in the northern end of the township. Calls for service were approximately 1,091 in 2013 with about 86% or 947 of those calls for EMS response. The departments staffing consist of one career chief, and four part time employees staffing two stations. There are currently 23 paramedics and 14 EMT's on the department's roster. The department staffs two Advanced Life Support units with either one EMT and one paramedic or two paramedics depending on that days staffing schedule.

The Ross Township Fire Department has been providing emergency medical services since 1968. In 1998, Ross Township upgraded its emergency medical services from basic life support (EMT service) to an advanced life support (Paramedic service). During this time, Ross Township Fire Department was staffed as a volunteer fire department. Ross Township had a 29.6% increase in population from the years 2000 to 2010 (2010 U.S. Census, Ohio Department of Development). Therefore township administration looked to improve its fire and EMS services in response to the continued development throughout the community.

In 2005, the Ross Township Fire Department, Ross Township Life Squad, and the Millville Fire Department merged its services together to form the Ross Township Fire Department. All three departments were volunteer organizations and provided emergency services to Ross Township and the Village of Millville. During the process of merging all three organizations, Ross Township administration began to look into staffing an ambulance during the daytime hours throughout the week.

In 2004 Ross Township began staffing an ambulance and an advanced life support unit (ALS) with three part-time personnel from the hours of 6 a.m. to 6 p.m. The personnel were hired from the volunteer ranks of all three organizations. After the merger, Ross Township hired a full-time fire chief. A new fire station was built in the northern end of the township replacing the station occupied by the Millville Fire Dept. When the new station opened, the department was staffed with two part-time personnel at each station responding as first emergency first.

With the need for more personnel to staff the stations, the department began to hire personnel from the outside. At this point there was no orientation system in place for both fire and EMS personnel. Hiring outside personnel brought new challenges such as not being familiar with the new employee's skill level; as well as new employees not being familiar with Ross Township EMS protocols and operations. The department decided that there was a need for a new employee orientation process. With a high workload that was involved with having a new department and with paid personnel staffing they decided to utilize an EMS orientation packet from a neighboring department.

At the time of application, the candidate is required to have either an Ohio Basic Emergency Medical Technician (EMT-B) certification or an Ohio Paramedic (EMT-P) certification at the time the applicant submits their application. The day the new employee is hired, they receive a Ross Township EMS Orientation packet and they are to start working on it their first day of work. The orientation packet was designed for a department that is mainly a career staffed department that has a high call volume. The packet is designed so that the new employee is placed with a preceptor and works as an additional crew member till the packet is completed.

Utilizing an orientation process from another department has created problems. Since Ross Township has a low call volume, new employees struggle with getting all of the criteria in the packet met within the time frame required. A new employee only spends four shifts working as an extra. Even though they are assigned a preceptor, they may work with that preceptor only on a few shifts. Usually, it is up to another supervisor or a senior member to help the new employee with their packet. Over the years there have been complaints from supervisors and employees. Some complained the current process is too long for the time the new employee works as an extra, due to the amount of content in the packet. Another complaint was that the assigned preceptor is not seeing the new employee through their orientation. Some of the new paramedics have stated that after the orientation they did not feel comfortable working as the only paramedic on duty.

With the complaints received by supervisors and employees in the past years, this has created concern for the department's administration, who questioned the effectiveness of its current orientation process. With part-time employees only working 12 to 24 hours a week, a new orientation process is needed to be researched and designed to be effective to how the Ross Township Fire Department operates.

Therefore, the potential impact this study will investigate is to identify the methods of conducting an orientation process that will properly evaluate a new employee effectively. This goal should be obtained through a properly structured orientation program. The orientation program will have updated information, and patient care skills that are designed to be completed in a timely manner. This will allow for a more beneficial orientation program.

LITERATURE REVIEW

The review of literature includes sources from the Lane Public Library, Miami University, The National Fire Academy Library, and the Internet. The purpose of this literature review is to summarize the findings of other researchers as they pertain to the title of this Applied Research Paper. This researcher focused on the findings of others regarding 1) What are the benefits of a new employee orientation program? 2) What are the various methods in orientating and evaluating newly hired or newly paramedic certified employees? 3) What evaluation programs are being utilized by other EMS agencies in evaluating newly hired or newly paramedic certified employees?

New employee orientation programs are commonplace in the work force and are used in career fields from business, education, to the military (Wanous, & Reichers, 2000).

Orientation programs are a form of employee training designed to introduce new employees to their job, the skills that they will be performing, the people they will be working with, and the organization as a whole. "Orientation is the process whereby a new employee is familiarized with the firm, the job, the work group and other terms and conditions of employment" (Caruth, Caruth, & Pane Haden, 2010). Orientation programs vary from employer to employer in both private and public sector. Louis, Posner, & Powell (1983), reported that orientation programs may take the form of formal or informal orientations conducted by supervisors or peers or a combination of both.

Orientation programs will differ in the extent to which information about the job and work environment is provided. Orientation programs will vary in length from a few days to several months, depending on the type of job skills involved.

One of the benefits of having a thorough and well thought out orientation program is that employees start out on the right track. A main benefit of an orientation program is the new employee feels more comfortable with the new job, which results in a more satisfied employee, and thus improved employee retention. Getting new employees off to the right start is essential. Those first few days, or even weeks, on the job is a “make-or-break” period for many workers. “The difference between long-term job success and short-run departure often hinges on effective employee orientation” (Caruth et al., 2010). Orientation programs set the stage for employee success. Hacker (2004) stated “improving new employee orientation can increase retention rates by as much as 25%”, and Hacker also states “it helps the new employee feel welcome, relieves anxiety, and launches the individual toward being a loyal and productive member”. Robbins (2002) reaffirms this stating “orientation programs are effective in retaining and motivating employees, lowering turnover, increasing productivity, improving employee morale, facilitating learning, and reducing the anxiety of the new employee”. Employers tend to spend a lot of money on recruiting and hiring, but spend very little, if any at all, on orientation programs. Well thought out and maintained orientation programs demonstrate a commitment to an employee’s success and longevity.

“In a survey of 1,400 chief financial officers, an overwhelming 83% of respondents said that formal orientation programs are effective in retaining and motivating personnel” (Messmer, 2000). The author further explains that employers may recognize the value of an orientation program but, many programs provide new hires with only a vague introduction to the company policies and procedures. The author further notes that new employee orientations that are spread over weeks to even months will yield more lasting results than programs that inundate employees with information on their first few days.

“Precepting, mentoring, and teaching are three different subsets of instructional methods. Precepting would fall somewhere between teaching and mentoring. Barnum (2006) felt that precepting like mentoring is a one-on-one relationship sustained over a predetermined time. Even if the preceptor precepts more than one student, each relationship is usually handled on a one-on-one manner. While mentoring, relationships form between two people over a period of time. Preceptorships are generally informally arranged when an organization requires someone to be prepared for a job or role and someone else is assigned to demonstrate expected performance standards. Although preceptorship resembles mentorship in being a one-on-one relationship, preceptorship is more like teaching in respect to the content of the orientation program. The learning goals to be achieved are professional, not personal. Compared to mentorship, preceptorship is more about specific learning. Compared to teaching, preceptorship is about broader content.

The goal of a preceptor is to teach. Gurchiek (2014) states that there are five phases to ambulance preceptorship. The first phase is Pre-Shift Phase. Gurchiek (2014) states that this is the timeframe at the beginning of each shift and is the most important component of the internship. After the equipment checks, the preceptor and the student should use this time to develop objectives for the shift. The objectives would correlate with how the student is performing and where improvements are needed. The second phase is the Patient Care Phase. This phase gives the student an opportunity to practice patient assessments, skills and clinical judgment in the presence of the preceptor. The preceptor ensures a safe environment for both patient and student. The value of the clinical experience will depend on the willingness and quality of the preceptor to teach in the clinical environment. This phase is the most stressful for the preceptor due to the dual

role of being a clinical preceptor and also providing quality patient care. The third phase is the Debriefing Assessment Phase. This phase allow time for the student and preceptor to discuss the call, ask questions and clarify information, and provides time for a teachable moment. The fourth phase is the Post-Shift Phase. This phase is the shift evaluation summary. This evaluation is for the student's performance on that shift. It can include patient encounters, skills, treatments, leadership, professionalism/attitude, radio communications and patient care reports. The fifth and final phase is the Student Advising Phase. This is where the paramedic program director of field internship coordinator should meet with the student every 10 to 15 shifts to review the student's progress. Gurchiek (2014) states that "preceptors are the gatekeepers for their profession", and also states that paramedic preceptors are a necessity to transitioning students to the pre-hospital environment.

Mentoring is no longer seen as a "nice to have", as organizations are finding ways to develop and retain their workforce. Mentoring programs do not need be complex to bring value to the new hire, mentor, and the business as a whole. Miller (2006) states "the mentor's role is to teach and advise new employees". Barnum (2006) felt that mentoring is where a senior employee and a junior employee enter into a relationship. The senior employee both instructs and guides the junior employees career and career choices over a period of time, sometimes lasting a lifetime. Mentoring always occurs on a one-on-one relationship, and can include both professional and personal lessons. An effective mentor will use the power of their knowledge, experience and contacts in order to provide both direct and indirect assistance. Mentoring at times is more about the employee than what is taught. A mentor can help reduce stress for a new employee, which is with and can hinder performing new skills and duties. By having the support of a mentor, a new employee has an increased level of self-confidence and is

less likely to stumble. According to McCauley (2007) a recent survey of chief financial officers, 58% polled stated that it's uncommon for entry-level employees to be matched with a mentor both formally and informally within their organizations. Mentoring is a valuable way to transfer knowledge, foster talent, and promote best practices.

Barnum (2006) described teaching as a relationship in which the teacher conveys knowledge to an individual or a group of learners. The relationship is unidirectional from teacher to student. Teaching is conveyed by lecture or by conversation. Teaching is about learning something that is structured around what is being taught or learned.

Benchmarking is an evaluation tool that sets a minimum or maximum number of skills and/or activities the EMS provider must achieve. Some of the various benchmarking skills would include but not limited too is taking a patients vitals, applying a cardiac monitor, and starting intravenous lines.

Organizational orientation is a process that cannot be accomplished in a day or even a week. It can take up to a year for an employee to feel fully integrated into a new job. Careful thought needs to go into what is covered in a new employees orientation program and how it is presented. "A well-planned organizational orientation is designed to make new employees feel welcome and knowledgeable about their new organization", states Diane Arthur (Arthur, 2006) "The purpose of organizational orientation is to:"

- Give new employees an overview of the organization's history and services
- Explain the organizational structure
- Describe the organization's philosophy, mission, and goals
- Explain how vital each employee is in helping to achieve company goals
- Describe how the organization is different from other organizations
- Explain career development opportunities, including available training, mentoring programs, tuition assistance, and promotional opportunities

- Describe the benefits and employee services offered
- Identify the organization's commitment to equal employment opportunity, diversity, non-harassment, health, and safety
- Outline the company's standards of performance and policies and procedures
- Outline safety and security practices

Alice Stark (Starke, 1996, p.4) states in her article what a new employee orientation program should accomplish for the new employee and the employer.

- Create a good first impression
- Relieve anxiety
- Set expectations
- Retention of information
- Higher productivity and innovations
- Encourage socialization
- Team building
- Build identification with the employer and prevent problems
- Helps lower turnover rates for employers.

Some of the literature used in this research expressed the importance of a follow-up program. Supervisors should monitor the employee orientation program regularly to ensure that it is working properly and continuing to be an effective tool for the employer. Linda Jerris (Jerris,1993) stated “the orientation process is not complete until you have evaluated the methods and results of the program and have fined-tuned it accordingly.” Judith Brown (Brown, 2004 p.2) states “Ask for feedback. Find out from former new hires how they perceived the orientation process, and don't be afraid to make changes based on those recommendations.” Creating a well-designed orientation program helps achieve high employee morale and productivity. An effective orientation program – or the lack of one – will make a difference in how quickly a new employee becomes productive. A good employee orientation program is a good employee retention program.

In EMS, the tradition of orientating and training new employees isn't as strong as other careers. In some places, a new employee is given a brief orientation, if at all, and then given the keys to the ambulance. Paramedic school may teach you about medicine, but it does not teach you anything about leadership, operations of a particular department, or how to get along with others. Information about a particular agency is not taught in paramedic school. This information would include: how to talk on a radio, how to navigate through a particular area, where are the hospitals located, what kind of equipment is used, what standard operating protocols are being utilized by that department, and what are the vision, mission, and values of the organization. A well planned and thought-out orientation program will help bridge this gap for new employees.

Orientation sets the course for an exciting journey for the new employee. Making employees feel valued, competent and a part of something great will go a long way toward making them feel they have made a great career move. The quicker they feel that way, the faster they will feel engaged and are able to contribute to the organization.

PROCEDURES

This applied research project includes data from various published books and professional journals found in the Lane Public Library, Miami University Rentschler Library, King Library, and B.E.S.T. Business, Engineering, Science and Technology Library, and the National Fire Academy Library via the internet. Also researched were journal articles through the use of the internet using research database EBSCO. The Ross Township EMS Orientation packet was also utilized in this research. This applied research project was formatted and written based on the sixth edition of the American Psychological Association publication manual.

The purpose of this research project was to gather information on conducting new employee orientation programs. The information that was gathered was compared to current practice of orientating new employees at Ross Township Fire Department. A descriptive research methodology was utilized to guide in determining the answers to the research questions.

This research project seeks to formally address the following questions:

1. What are the benefits of an employee orientation program?
2. What are the various methods in orientating and evaluating an employee?
3. What evaluation programs are being utilized by other EMS agencies in evaluating newly hired or newly paramedic certified employees?

Research questions one and two were answered by the gathering and review of the information collected during the literature review portion of this study. The information that was gathered for the literature review and the current Ross Township Fire Department New Employee Orientation Packet guided the development of the survey that was later utilized for question three.

To answer question three, data was collected via a survey on the various methods, content and length of other area fire departments in relation to new employee orientation programs. The survey was distributed electronically via Survey Monkey to various chief officers or

supervisors who oversee their department's new employee orientation program. The survey was emailed on a voluntary basis and sent to the members of the Southwest Ohio Fire Chief's Association, which covers Butler, Hamilton, Clermont and Warren counties. The survey was made up of various multiple choice questions aimed specifically to gather information toward new employee EMS orientation programs.

The survey includes questions that will gather statistics and information pertaining to that department's new employee orientation. Departments of various operating and staffing levels were utilized for the survey. This gave the research project more information as to how other departments of various sizes are conducting EMS orientations, if at all. This procedure was utilized due to difficulty in finding department's within the region of Southwest Ohio that were staffed, operated, and had a call volume similar to Ross Township. The information was collected through the use of Survey Monkey and analyzed by the author of this research paper. There were seventy two (72) respondents to the survey out of two hundred (200).

Definition of Terms

Survey Monkey – An online survey development cloud based (“software as a service”) company, founded in 1999 by Ryan Finley. Survey Monkey provides free, customizable surveys, as well as a suite of paid back-end programs that include data analysis, sample selection, bias elimination, and data representation tools. Survey Monkey. (2015, May 10). In *Wikipedia, The Free Encyclopedia*.

Retrieved from <https://en.wikipedia.org/w/index.php?title=SurveyMonkey&oldid=661738416>

Advanced Life Support (ALS) - is a set of life-saving protocols and skills that extend Basic Life Support to further support the circulation and provide an open airway and adequate ventilation (breathing). Advanced Life Support, (2016, March 7). In *Wikipedia, The Free Encyclopedia*.

Retrieved from https://en.wikipedia.org/wiki/Advanced_life_support

Emergency Medical Services (EMS) - Emergency Medical Services, more commonly known as EMS, is a system that provides emergency medical care. Once it is activated by an incident that causes serious illness or injury, the focus of EMS is emergency medical care of the patient(s). EMS is most easily recognized when emergency vehicles or helicopters are seen responding to emergency incidents. But EMS is much more than a ride to the hospital. It is a system of coordinated response and emergency medical care, involving multiple people and agencies. A comprehensive EMS system is ready every day for every kind of emergency.

Retrieved from <http://www.ems.gov/whatisEMS.htm>

Limitations of the Study

There were several limitations to this study. Through this author's research, no specific text written for new employee orientation programs for the fire service were located. However, there was significant information available in the private sector of the business world. A direct comparison can be made to how new employees can be orientated between the public sector and the private sector.

Another limitation was the survey that was utilized in this research. A Other (Please Specify) box was included in some of the questions to allow for answers that were not an option in the survey to help gain more information from the respondent. This created a pathway for the respondent to answer the question in their own words, which at times was more than what the

question was designed to produce. This additional information from the respondents at times created confusion for this author. The survey was limited to the area considered the Southwestern Ohio district by the Ohio Fire Chief's Association to provide a point of reference geographically. The survey could have been expanded to the state of Ohio or limited to only a few "like" departments with similar structure as the Ross Township Fire Department. This approach could have provided additional information or could of have limited information for consideration within this study.

RESULTS

The results of this applied research project are the compilation of information and data from various sources. These sources include various published books and research journals found in the Lane Public Library, Miami University Rentschler Library, King Library, and B.E.S.T. Business, Engineering, Science and Technology Library, and the National Fire Academy Library via the internet. The research database EBSCO and the Ross Township Fire Department Orientation packet was utilized for this research.

A survey through Survey Monkey was emailed to various chief officers or supervisors in charge of new employee orientation. The survey was emailed on a voluntary basis with a return rate of thirty six percent or seventy-two of two hundred surveyed, and sent to members of the Southwest Ohio Fire Chief's Association, covering Butler, Hamilton, Clermont, and Warren counties. The survey was made up of various multiple choice questions aimed specifically toward new employee EMS orientation programs.

Research Question 1.

What are the benefits of an employee orientation program?

Resources used for this research project stated various benefits for both the employee and the employer for organizations that utilize an effective employee orientation program. One of the benefits of a thorough, well thought out, and properly structured orientation program is new employees get started on the right track. This helps the new employee feel welcome and knowledgeable about their new organization. It also helps relieve anxiety, improves employee morale, and launches the individual toward being a loyal and productive member. Orientation programs are effective in retaining and motivating employees. Hacker (2004) stated "improving new employee orientation can increase retention rates by as much as 25%. Orientation programs

demonstrate a commitment to an employee's success and longevity. For the employer, an orientation program helps set expectations, retention of information, higher productivity and innovations, team building, and builds identification with the employer and prevents problems.

Research Question 2.

What are the various methods in orientating and evaluating an employee?

Several methods of orientating and evaluating employee have been identified in this research.

Mentoring programs seemed to be one of the most popular methods of orientating employees. This, in part, demonstrates that a mentoring program does not have to be complex to be an effective method for the new employee, the mentor or the business as a whole. Mentoring is a one-on-one relationship. It can consist of both professional and personal lessons. A mentor instructs and guides new employees career and career choices over a period of time. Utilizing a mentoring program helps reduce stress for the employee which is associated with performing new skills and duties. It also increases the level of self-confidence in the employee.

Precepting falls between mentoring and teaching. Precepting is like mentoring where the relationship is one-on-one over a predetermined time. A preceptor can precept more than one employee at a time. Precepting is more like teaching in respect to the content of the orientation program. The lessons goals are professional and not personal. Precepting is more about specific learning than compared to mentoring, and preceptorship, compared to teaching, is about broader content.

Teaching is about learning something that is structured around what is being taught or learned. Barnum (2006) described teaching as a relationship in which the teacher conveys knowledge to an individual or a group of learners. This information is conveyed by lecture or by

conversation. In teaching, there is little requirement for a close relationship between the teacher and student.

Research Question 3.

What evaluation programs are being utilized by other EMS agencies in evaluating newly hired or newly paramedic certified employees?

To answer research question 3, a survey (Appendix 1) was sent to fire departments in Butler, Hamilton, Clermont, and Warren counties that are members of the Southwest Ohio Fire Chief's Association. (Appendix 2) contains the survey answers.

Question #4 asked does your department utilize an EMS orientation program for new employees? There were 72 respondents to the question. 62 departments, or 85.11% ,selected yes, they do have an orientation process. 10 respondents or, 13.89 %,selected no, they do not utilize an orientation process. Question 5 asked what kind of an evaluation system they have in place? There were 60 respondents to the question. 12 respondents skipped the question, 10 skipped due to not having an orientation program and 2 skipped for unknown reason. 85% of the respondents selected they use mentoring by a co-worker as their evaluation system. 78.33% selected using evaluation by supervisor. 33 respondents or, 55%, selected they utilize written or skills testing. And finally, 9 or 15%, respondents stated they use evaluation by medical director.

To finish answering research question 3, question 9 asked if an existing employee becomes a paramedic, do they have to go through any sections of the new employee orientation program? Of the 60 respondents, 39 or 65% selected yes, 21 respondents or 35% selected no, and 12 respondents skipped the question.

DISCUSSION

With Ross Township Fire Department not having developed its own new employee EMS orientation program, it was crucial to research what information would be needed to design an effective orientation program. All material researched seemed to be in agreement that a well-organized orientation program will have many benefits for the new employee. Robbins (2002) states “orientation programs are effective in retaining and motivating employees, lowering turnover, increasing productivity, improving employee morale, facilitating learning, and reducing the anxiety of the new employee”. “Orientation programs set the stage for employee’s success” echoes Carol Hacker (Hacker 2004).

The importance of an orientation program was seen in the survey (Appendix 1). Question 4 asked, does your department utilize an EMS orientation process for new employees. Of 72 respondents, 62, or 86.11% ,responded yes.

Utilizing another department’s orientation program has presented several problems. One of the problems was the time frame that it took to complete the orientation packet. The current orientation packet can take up to 6 months to complete. Since new employees only have 4 shifts working with another employee before being placed as part of the crew, this has led to service delivery and scheduling problems. One problem being that a paramedic will have to operate as an EMT until the paramedic has completed the packet. The other problem is the new employee is providing primary patient care without supervision. In the survey, question 7 asked: How long is your new employee orientation process? Of the 60 respondents, 23, or 38.33%, answered 1 to 30 days. This could be met by requiring less benchmarks and sign-offs for EMS skills to be completed. Developing an orientation program that would be completed in this time frame would be very beneficial in the current operations of the department.

Another problem with the current orientation packet was it allowed for multiple preceptors. Barnum (2006) felt that precepting like mentoring is a one-on-one relationship sustained over a predetermined time. Even if the preceptor precepts more than one student, each relationship is handled on a one-on-one manner. With this in mind, the new employee would be better served with having only one preceptor. This would also stop the confusion that has been created in the past with having multiple preceptors.

The survey that was sent out had a question pertaining to what information was utilized in their orientation packet. Question 6 asked: Which of the following is included in your new employee orientation process? The respondent was allowed to select all that applied. There was a list of items to select. 60 respondents answered the question while 12 skipped. One of the items was Core Values. This included reviewing the department's mission and vision statements. 34, or 56.67%, responded out of 60 respondents. Another item that was included in other department's orientation packets was the tour of all fire stations. 49, or 81.67%, responded out of 60 respondents. These items will need to be added to the orientation packet.

One procedure that will not be needed to change is for existing employees that become a paramedic. Question 9 asked: If an existing employee becomes a paramedic, do they have to go through any sections of the new employee orientation program? 39, or 65%, of the respondents stated yes. This procedure is currently practiced in the Ross Township orientation packet.

Some of the literature used in this research expressed the importance of a follow-up program. This is where preceptors monitor the employee orientation program regularly to ensure that it is up to date with current practices and is continuing to be effective for the employer. Linda Jerris (Jerris,1993) stated "the orientation process is not complete until you have evaluated the methods and results of the program and have fined-tuned it accordingly." Judith Brown

(Brown,2004 p.2) states “Ask for feedback. Find out from former new hires how they perceived the orientation process, and don’t be afraid to make changes based on those recommendations.”

A well designed and effective orientation program will pay dividends to the employer. It will create a good first impression for the employee. It will set expectations, help the employee retain information, and encourages team building and socialization with other employees.

RECOMMENDATIONS

The Ross Township Fire Department has never had an orientation program that was specific to how Ross Township performs and operates. The current orientation packet has led to several problems in the past with how the department operates.

The goal was not to reinvent the wheel, as far as the orientation packet is concerned, but to identify and resolve current problems that needed to be addressed. With the material that has been researched, there are some areas that could be improved upon for a more effective orientation program. Research shows improvements need to be made in the following areas.

Recommendations include:

- The current orientation packet needs to be designed to where it can be completed within 30 days. This can be completed by shortening the EMS Skills Benchmarking in relation to EMS call volume by Ross Twp.
- Assign each new employee one preceptor for the duration of their orientation. This will help stop all of the confusion between the preceptors about the new employees.
- Add the department's Core Values (Vision, Mission) statements to the orientation packet. Even though these items are in the standard operating procedures that all new employees receive, it can be easily covered in the orientation packet.
- Have all new employees tour all department stations during orientation.
- Create and utilize a follow-up program for new employees. This will help with keeping the orientation program up to date with current operations and continues to be an effective tool.

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APPENDIX 1 – SURVEY INSTRUMENT



Ohio Fire Executive Program Class 14 Research Project

1. EMS Orientation Program Survey

My name is Charles Caudill, Assistant Chief Ross Township Fire Department. I am currently enrolled in the Ohio Fire Executive Program Class 14. I am conducting research in an attempt to identify information in developing a new EMS orientation program for new and existing employees for the Ross Township Fire Department. This short survey of 10 questions is an attempt to identify how other departments EMS orientation programs are constructed if at all. If you would like the results of this survey or a copy of my research paper, I can be contacted at 513-616-9030 cell or ccaudill@rosstwp.org. Thank you for participating in my survey. I appreciate your time and assistance in support of my research. Your feedback is very important. Thank You.



Ohio Fire Executive Program Class 14 Research Project

2. EMS Orientation Program Survey

*** 1. What is your current rank?**

- Chief
- Assistant Chief
- Deputy Chief
- Battalion Chief
- Captain
- Lieutenant

Other (please specify)

*** 2. Which of the following best describes the staffing of your department?**

- Fulltime
- Part-time
- Combination- Varied combination of either Fulltime, Part-time, Volunteer.
- Volunteer

*** 3. How many EMS personnel does your department have?**

- <10
- 11-20
- 20-50
- 50-100

*** 4. Does your department utilize an EMS orientation process for new employees?**

- Yes
- No



Ohio Fire Executive Program Class 14 Research Project

3. EMS Orientation Program Survey

*** 5. What type of an evaluation system do you have in place? You can select more than one.**

- Mentoring by co-worker
- Evaluation by supervisor
- Written or skills testing
- Evaluation by medical director

Other (please specify)

*** 6. Which of the following is included in your new employee orientation process? Select all that apply.**

- Core Values (Mission/Vision Statements)
- Orientation of Standard Operating Procedures
- Apparatus Familiarization
- EMS Skills Testing
- EMS Skills Benchmarking
- EMS Skills Sign-off
- Street Familiarization
- Tour of all Fire Stations and Facilities

Other (please specify)



Ohio Fire Executive Program Class 14 Research Project

3. EMS Orientation Program Survey

*** 7. How long is your new employee orientation process?**

- 1 to 7 Days
- 1 to 30 Days
- 30 to 90 Days
- 90 to 180 Days

Other (please specify)

*** 8. Is your medical director directly involved in the new employee orientation process?**

- Yes
- No

If yes, (please explain)

*** 9. If an existing employee becomes a paramedic, do they have to go through any sections of the new employee orientation program?**

- Yes
- No



Ohio Fire Executive Program Class 14 Research Project

3. EMS Orientation Program Survey

10. If you answered Yes to question nine (9), what sections do they have to complete?

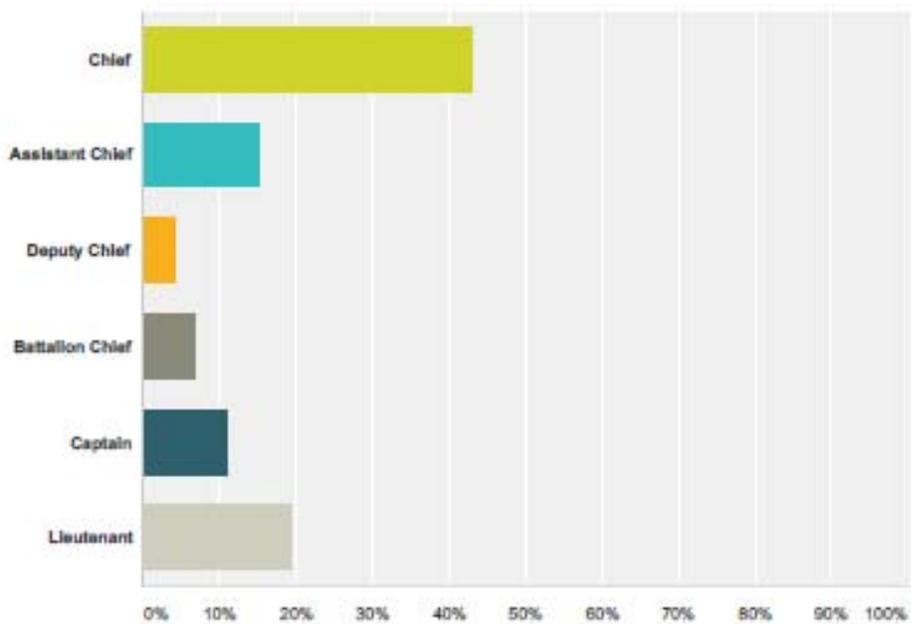
- Core Values (Mission/Vision Statements)
- Orientation of Standard Operating Procedures
- Apparatus Familiarization
- EMS Skills Testing
- EMS Skills Benchmarking
- EMS Skills Sign-off
- Street Familiarization
- Tour of all Fire Stations and Facilities

Other (please specify)

APPENDIX 2 – SURVEY ANSWERS

Q1 What is your current rank?

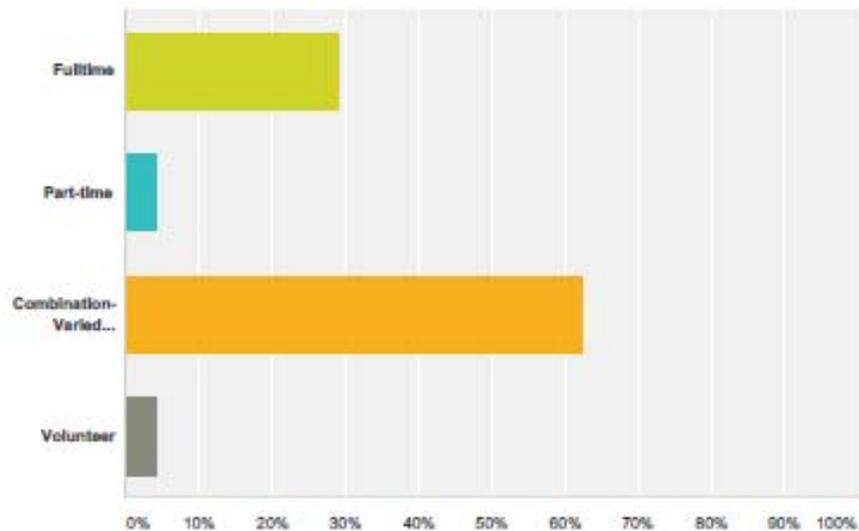
Answered: 72 Skipped: 0



Answer Choices	Responses	
Chief	43.06%	31
Assistant Chief	15.28%	11
Deputy Chief	4.17%	3
Battalion Chief	6.94%	5
Captain	11.11%	8
Lieutenant	19.44%	14
Total		72

Q2 Which of the following best describes the staffing of your department?

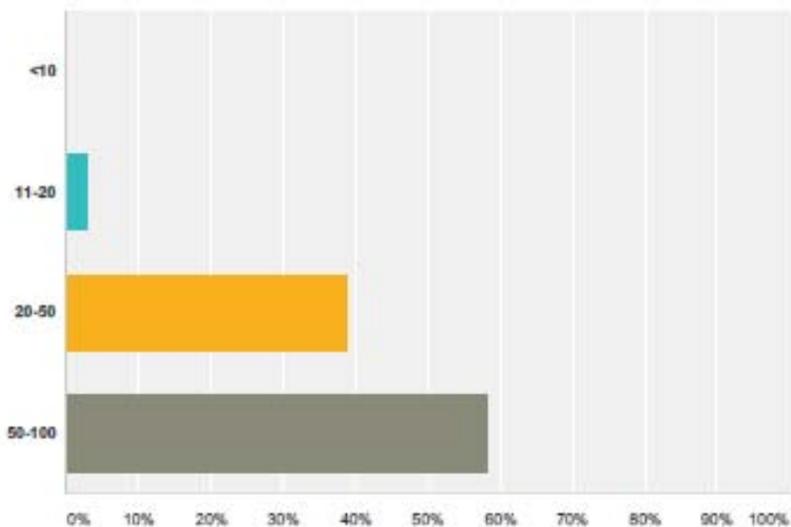
Answered: 72 Skipped: 0



Answer Choices	Responses
Fulltime	29.17% 21
Part-time	4.17% 3
Combination- Varied combination of either Fulltime, Part-time, Volunteer.	62.50% 45
Volunteer	4.17% 3
Total	72

Q3 How many EMS personnel does your department have?

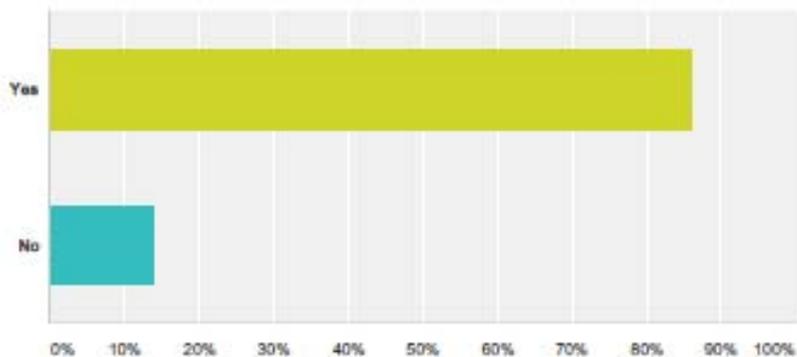
Answered: 72 Skipped: 0



Answer Choices	Responses	Count
<10	0.00%	0
11-20	2.78%	2
20-50	38.89%	28
50-100	58.33%	42
Total		72

Q4 Does your department utilize an EMS orientation process for new employees?

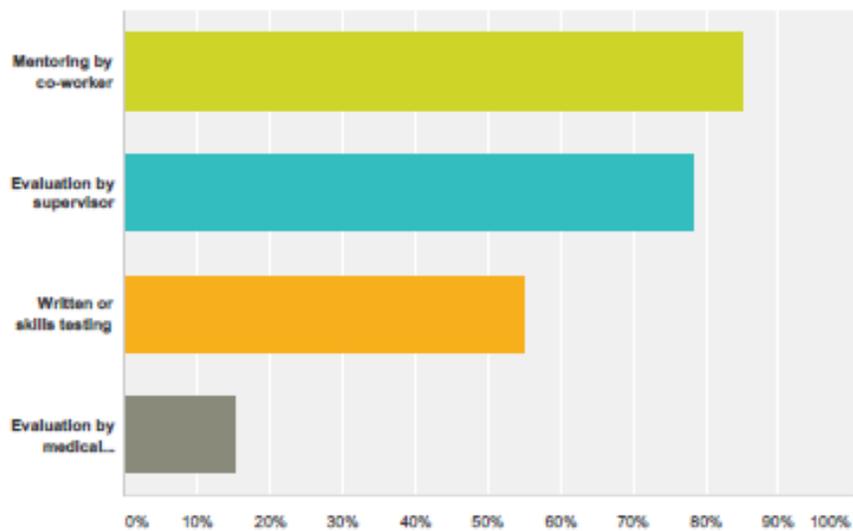
Answered: 72 Skipped: 0



Answer Choices	Responses
Yes	86.11% 62
No	13.89% 10
Total	72

Q5 What type of an evaluation system do you have in place? You can select more than one.

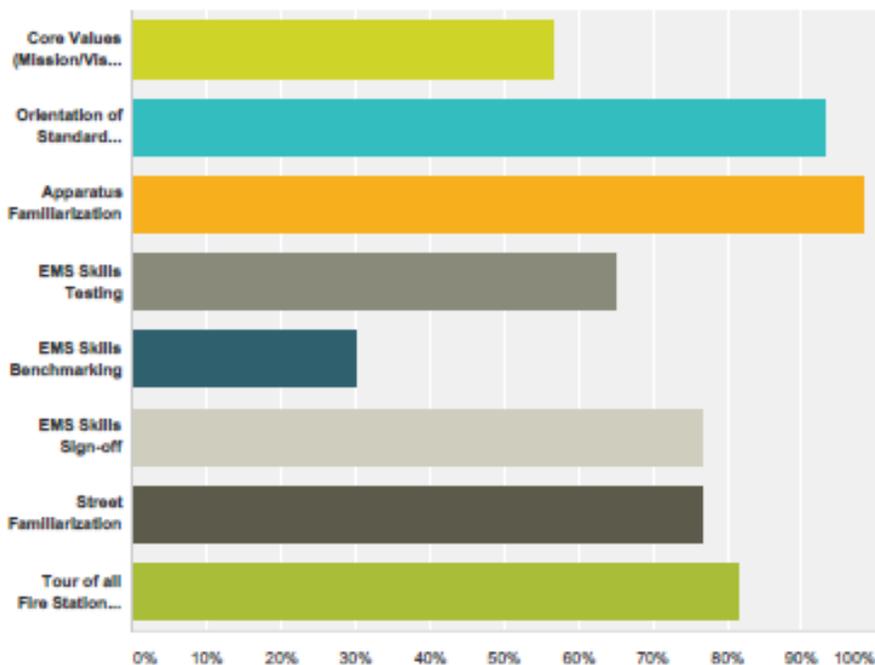
Answered: 60 Skipped: 12



Answer Choices	Responses
Mentoring by co-worker	85.00% 51
Evaluation by supervisor	78.33% 47
Written or skills testing	55.00% 33
Evaluation by medical director	15.00% 9
Total Respondents: 60	

**Q6 Which of the following is included in your new employee orientation process?
Select all that apply.**

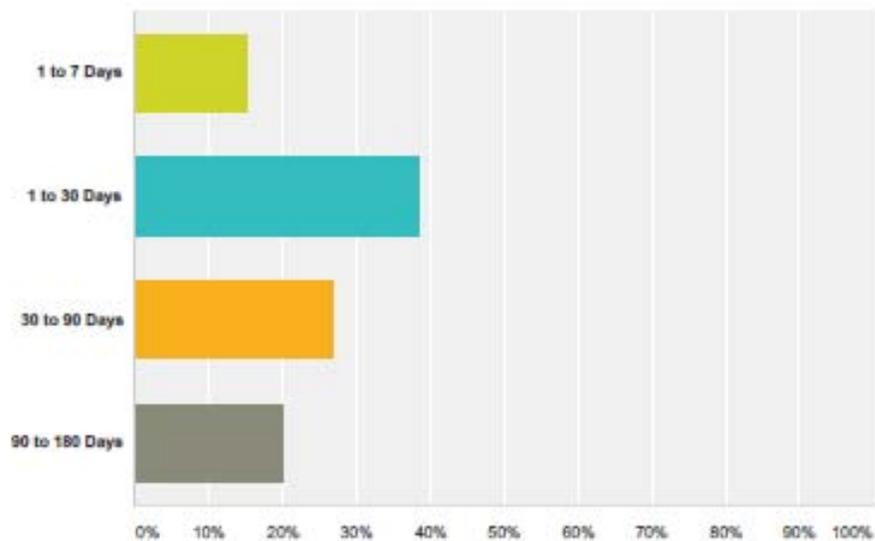
Answered: 60 Skipped: 12



Answer Choices	Responses
Core Values (Mission/Vision Statements)	56.67% 34
Orientation of Standard Operating Procedures	93.33% 56
Apparatus Familiarization	98.33% 59
EMS Skills Testing	65.00% 39
EMS Skills Benchmarking	30.00% 18
EMS Skills Sign-off	76.67% 46
Street Familiarization	76.67% 46
Tour of all Fire Stations and Facilities	81.67% 49
Total Respondents: 60	

Q7 How long is your new employee orientation process?

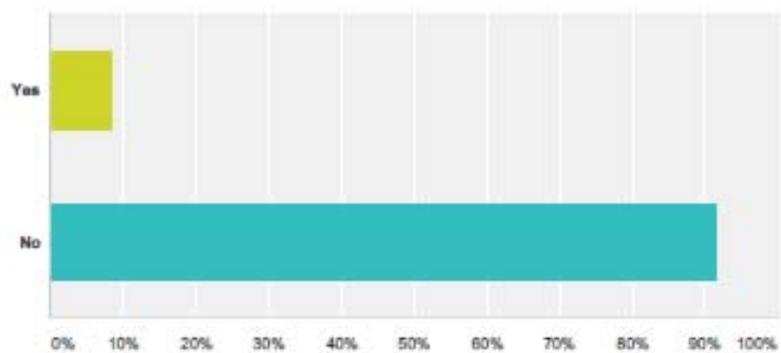
Answered: 60 Skipped: 12



Answer Choices	Responses
1 to 7 Days	15.00% 9
1 to 30 Days	38.33% 23
30 to 90 Days	26.67% 16
90 to 180 Days	20.00% 12
Total	60

Q8 Is your medical director directly involved in the new employee orientation process?

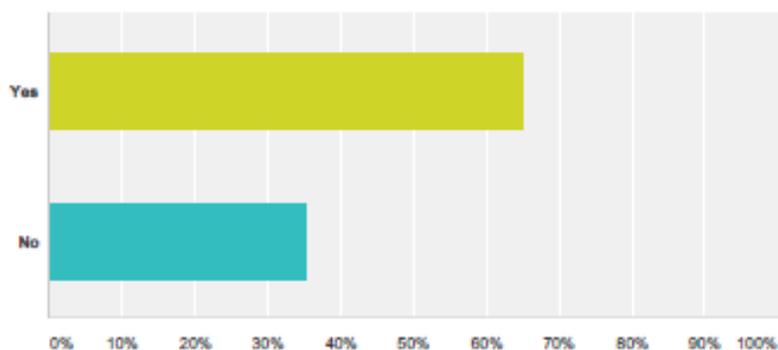
Answered: 60 Skipped: 12



Answer Choices	Responses	
Yes	8.33%	5
No	91.67%	55
Total		60

Q9 If an existing employee becomes a paramedic, do they have to go through any sections of the new employee orientation program?

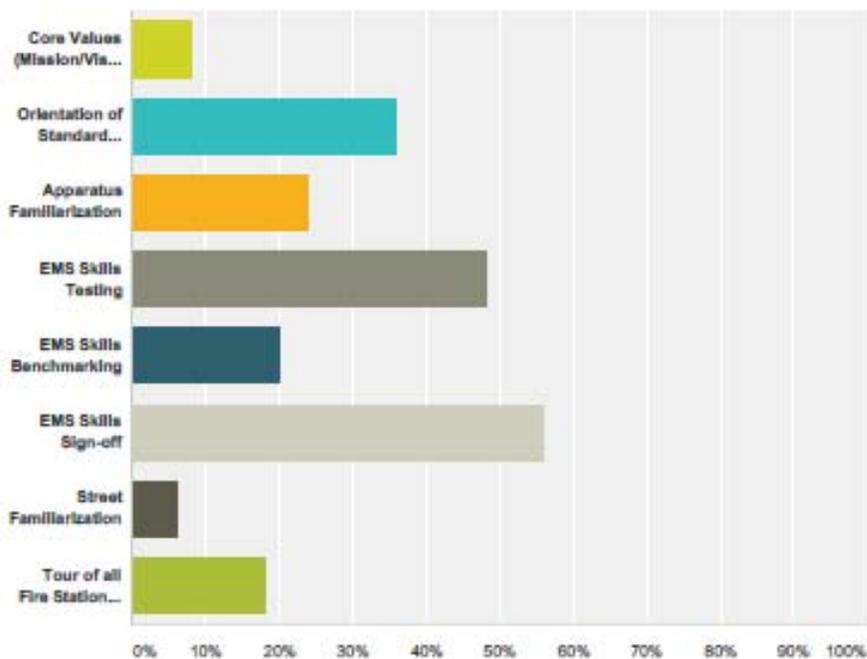
Answered: 60 Skipped: 12



Answer Choices	Responses	
Yes	65.00%	39
No	35.00%	21
Total		60

Q10 If you answered Yes to question nine (9), what sections do they have to complete?

Answered: 50 Skipped: 22



Answer Choices	Responses
Core Values (Mission/Vision Statements)	8.00% 4
Orientation of Standard Operating Procedures	36.00% 18
Apparatus Familiarization	24.00% 12
EMS Skills Testing	48.00% 24
EMS Skills Benchmarking	20.00% 10
EMS Skills Sign-off	56.00% 28
Street Familiarization	6.00% 3
Tour of all Fire Stations and Facilities	18.00% 9
Total Respondents: 50	

APPENDIX 3 – ROSS TOWNSHIP ORIENTATION PROGRAM

ROSS TOWNSHIP FIRE DEPARTMENT



PARAMEDIC ORIENTATION PROGRAM & SKILLS BOOK



Purpose:To provide the provisional employee with an atmosphere that will be conducive to learning about the Department, and practice EMS skills, while encouraging individual growth.

Candidate Name:_____

Team Leader:_____

Preceptor Name:_____

Preceptor Name:_____

Preceptor Name:_____

Beginning date of orientation_____

Completion Date (At least 30 days and no more than 90 days)_____

Extension Period not to exceed 30 days.

_____Days

Reason:_____

_____Steve Miller

_____Date

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Welcome

Introduction

This program has been established to help you through your orientation to the EMS paramedic program at Ross. It was recognized long ago that orientation could no longer be left to the “big-brother” type of orientation that was so commonplace in the years past. The Emergency Medical Service has developed into a highly competitive, demanding, and skilled profession. Our goal is ensuring that our paramedics exceed even the most demanding medical standards. The program is intended to offer you every opportunity to learn your trade at a comfortable pace. It is not designed to push anyone through for the sole purpose of getting another person on the streets.

Background

You will be assigned (2-3) Field Preceptors. Together, you and your Preceptors will comprise a Field Training Team. You will meet with your Team Leader to outline your desired course of orientation and set measurable goals in which to meet your objectives.

This program is based on objective evaluations from the Preceptors, and skills obtained while “in the field”. After reviewing your evaluations and your skill sheets a recommendation will be made to the Orientation Administrator for your clearance. A/C Caudill will then draft a memo stating your clearance from the orientation program. This will serve as the Officer’s notice that you have successfully completed your field internship requirements.

Program Pathway

The following is an outline of the general progression of the program.

Candidates

Candidates can be separated into three distinct groups. Those individuals becoming members of Ross as 1) New Firefighters/EMT's, 2) Evaluation Candidates or 3) Paramedic Only.

Field Preceptors

The Field Training Preceptors will be chosen after an application and interview process using the following criteria:

- ◆ Current on all Fire and EMS training for the department
- ◆ 2 yrs. Experience with the RTFD
- ◆ Current ACLS
- ◆ Chosen by the Fire Chief
- ◆ Classroom experience on preceptor training, techniques of teaching and guidelines of the orientation program.

The Preceptors can function as both the Paramedic and EMT-B Preceptors. This will provide for greater consistency with instruction and experiences of the candidates.

Preceptors will be grouped into teams called Field Training Teams. Each team will be comprised of 3-4 Preceptors. Each team will then be grouped with approximately 2-3 candidates. By assigning a "team" rather than one individual, we are attempting to maximize the number of hours available to a candidate at any one time. The candidates will be assigned to ONLY those Preceptors in their respective team and therefore are only to work with those Preceptors.

Classroom

EMS classroom orientation will be mandatory for all new hires, as well as all firefighters requesting to be re-designated to paramedic status. The following information and skills will be reviewed and performed during the classroom orientation:

- ◆ General operating EMS guidelines for RTFD, paying particular attention to:
 - ◆ EMT-B guidelines
 - ◆ EMT-P guidelines
- ◆ RTFD Equipment specifics
- ◆ EMS paperwork and reports
- ◆ Written EMS evaluation
- ◆ Basic skills evaluations
 - ◆ CPR
 - ◆ Airway
 - ◆ Lifting techniques

Field Internship

Field Internship will begin with a conference between you and your Team Leader. Here, you will discuss your expectations of Ross, and you will learn what our Preceptors expect from you. This will be an opportunity to “learn about each other”, and decide upon a time frame for you to work within. You will also schedule specific shifts at this time. Orientation proceeds from observation to working as a part of the team, and ultimately, to working as “team leaders” in patient care.

- ◆ All new recruits entering the EMS Orientation Program will schedule as many shifts as possible with specific Preceptors in order to progress through the orientation phase as quickly as possible.
- ◆ While you are in the EMS Orientation, you will be permitted to work EMS shifts only!

Paramedic orientation will be outlined as described below.

Paramedic

During the Paramedic Orientation, your performance on squad scenes will be evaluated as an extra on the BLS units. This will give you and your Preceptors the opportunity to ensure that the basics have been reviewed, and that you are comfortable with operations and paperwork. During these first shifts, all paperwork and checklists covering the general EMS evaluations will need to be completed.

ALS Internship will begin after completing a minimum of 5 BLS runs. (This may be increased or decreased by your Preceptors)

***Current RTFD Personnel

Those who have been employed at RTFD while attending medic school, may have the initial 5 BLS runs waived, and begin directly into the ALS evaluation portion.

Paramedic Behavioral Objectives

Administrative

- ◆ Become proficient in reading the map books, and layout of the Township.
- ◆ Complete written EMS forms based on a patient situation.
- ◆ Understand ALS and BLS response protocols of Ross.

Patient Care

- ◆ Observe/perform patient assessment including developing a relevant medical history, making pertinent observations of the environment and doing a pertinent physical exam.
- ◆ Observe/maintain airway in the unconscious patient using head positioning, insertion of airways, and endotracheal intubation.
- ◆ Observe/perform oxygen administration.
- ◆ Assist in management of cardiac arrest including cardiopulmonary resuscitation and defibrillation.
- ◆ Observe/perform peripheral IV insertion.
- ◆ Record and interpret ECG's.

- ◆ Observe/prepare and administer intramuscular, subcutaneous and IV medications.
- ◆ Observe/assist with the management of patients presenting the following problems:
 - ◆ Major trauma to the head/neck, chest, abdomen, spine and extremities.
 - ◆ Possible myocardial infarction.
 - ◆ Congestive heart failure.
 - ◆ Chronic Obstructive Pulmonary Disease.
 - ◆ Obstructed airway.
 - ◆ Diabetic emergencies.
 - ◆ Asthma attack.
 - ◆ Seizure.
 - ◆ Coma.
 - ◆ Obstetrical problems.
 - ◆ Psychiatric problems.
 - ◆ Overdose.
 - ◆ Intoxication.
- ◆ Observe/demonstrate proper use of telemetry procedures.

Evaluations

Run evaluations will be made after all patient contact and after each shift worked. Your Preceptors will review these evaluations and any problem areas will be identified and resolved prior to continuing. The main point of the program is to ensure your comfort in assigned skills and not to “cut you loose” before you are ready.

Your Preceptors will meet on several occasions during your internship. This will provide objective evaluations of your performance and progress in the program. Once all performance and skill objectives have been satisfied, your Training Team will create a final evaluation report. This report will be turned into the Orientation Administrator for final review. You will then be released as a second paramedic.

The Field Internship portion of the orientation is designed to last at least 30 days, but not more than 90 days. By requiring at least 30 days, we will be ensuring that even “seasoned” personnel are guaranteed the opportunity to observe Ross policies, equipment locations, and paperwork. The Internship should not last more than 90 days. This should not be a long drawn-out process. The idea of the 90-day limit is to encourage regular and frequent attendance during these 3 months. (Under rare conditions, it may be necessary to extend the 90-day limit. Additional time will be allowed based on functional competency of the candidate and call volume, with the recommendation of the Training Team and the Orientation Administrator.)

After clearance to run as a paramedic, you and your Training Team will meet at 6-month intervals for one year to evaluate your performance. This will offer the Preceptors an opportunity to evaluate their teaching effectiveness and make necessary adjustments as well as to offer suggestions on how to make the overall program more effective.

ALS Response Protocols

Primary Paramedic Alarm Response

The following is a list of automatic responses for the Ross Twp. Fire Department Paramedics. This list in no way limits the response to these dispatches alone. These alarms are provided as the primary guidelines for paramedic responses.

- ◆ Allergic Reaction
- ◆ Asthma
- ◆ Breathing Difficulty/Shortness of Breath
- ◆ Respiratory Arrest
- ◆ Heart Attack/Chest Pain
- ◆ Non-Breather
- ◆ Unconscious Patient
- ◆ Person Down
- ◆ D.O.A.
- ◆ Stroke
- ◆ Seizure Disorder
- ◆ Diabetic Emergency
- ◆ Overdose (Drug/Alcohol)
- ◆ Poisoning
- ◆ Obstetrics/Gyn
- ◆ Burns (Chemical/Thermal)
- ◆ Electrocution
- ◆ Stabbing/Shooting
- ◆ Drowning/Near Downing
- ◆ Person Struck
- ◆ Suicide Attempts (Regardless of mode) (Doesn't include threat of suicide)
- ◆ Industrial Accident (Major Trauma, Entrapment, Rescue)
- ◆ Hemorrhage/Severe Bleeding
- ◆ Auto Accident (Entrapment, Multiple Injuries, Highway Rollover)
- ◆ Motorcycle Accidents
- ◆ Mutual Aid Medics (by request only)
- ◆ Request of Units on Scene
- ◆ Unknown Illness

Backup ALS Response Protocol

The following is a list of the Ross Township Fire Department Backup Paramedic Alarm Responses in which that Medic may request an additional Medic to respond to provide ALS resources when the Paramedic Unit is out of service.

- ◆ Non-Breather
- ◆ Unconscious Person
- ◆ Possible D.O.A.
- ◆ Electrocutation
- ◆ Stabbing/Shooting
- ◆ Drowning/Near Downing
- ◆ All Entrapments
- ◆ Motorcycle Accidents
- ◆ Highway Accidents
- ◆ All “Automatic Response” calls where the medic in the short manpower district responds in the ambulance, thereby making that district’s medic vehicle O.O.S.

Current Certifications

<u>Certification</u>	<u>Cert# Card #</u>	<u>Agency</u>	<u>Expiration Date</u>
EMT-B/EMT-I			
EMT-P			
BLS* (CPR Card)			

ALS Cards

<u>Certification</u>	<u>Cert# Card#</u>	<u>Agency</u>	<u>Expiration Date</u>
ACLS* (Required)			
PALS* (Strongly recommended)			
ACLS Instr.			
PALS Instr.			
BTLS			
PHTLS			
CPR Instr.			
Other			

All above information will be forwarded to update your EMS personnel records.

Paperwork

<u>Item</u>	<u>Date</u>	<u>FTP Initials</u>
Squad Checks Daily Weekly		
Run Reports (Doc. Criteria)		
Squad Log Book & Procedures		
Documentation Guide		
Supplemental Forms		
Controlled Substance Forms		
Multiple Refusal Forms		
Supply Request Form		
MCI Forms		
Departmental Accident Procedures		
Customer Reply Program		
QA Program QI Request Form QI Report Forms		

Equipment Checklists: All equipment will be reviewed and then demonstrated to ensure competency in the use of each particular piece of equipment.

Basic EMS Checklist:

Equipment

<u>Item</u>	<u>Date</u>	<u>FTP Initials</u>
Backboards		
C-Collars CID's		
Suction Equipment Onboard SSCOR V-VAC		
Airway Bag Airway Adjuncts Pulse Ox		
First Aid Kit		
Pedi Kit		
Broselow Bag Pedi Kit		
Oxygen Main Portable Cascade		
Stair Chair		
Child Car Seat		
Cot (Ferno & Stryker)		
Splinting Devices Vacuum Traction – Hare Sager		
XP-One		
Pedi Immobilizer		
Patient Leather Restraints		
OB Kits		
Burn Supplies		
Triage Kit		
Accountability Tags		
Rope Bag		
Tool Box		
Fire Extinguisher		
Jumper Cable		
Mast Pants		
Glucometer Kit Video		

<u>Item</u>	<u>Date</u>	<u>FTP Initials</u>
Irrigation Solutions		
Ice Packs		
Trauma Pads		
All Size Gauze Pads		
IV Pouches		
Drug Locations		
Lifepak Monitor/AED		
Water Rescue Equipment		
Door Locks		
Camera-Polaroid		

ALS Checklist:

Equipment

<u>Item</u>	<u>Date</u>	<u>FTP Initials</u>
IV Box/Pouches		
Airway Bag		
Telemetry		
Broselow Bag Childrens Hosp. Bag		
Zoll & Lifepak Operations AED Manual & Video		
Thomas Bag (orange)		
Trauma/Burn Kit		
Ventilator		
Monthly Drug Inventory		
Monitor Tester		
Controlled Substance Box/Replacements		
Medic 96 Operations		

Miscellaneous Paperwork

<u>Item</u>	<u>Date</u>	<u>FTP Initials</u>
Radio ID & Procedures		
Radio Procedures		
Street Guides (Direction Sheet Completed)		
SOG Manual Review		
Fueling Procedure		
Squad Operations On Spot Chains Lighting Control Sirens Oxygen Cascade Unit		
Review EMS Reference Binders		
Vehicle Restock Procedures		

Skill Requirements

While in orientation, you will be required to obtain certain skill. Skills will be performed as listed next to each skill in the subsequent tables. Obviously, it will be next to impossible to afford you with every situation and every type of patient during your orientation; therefore, certain skills may be performed on manikins (i.e. CPR).

Skills must be reviewed with your Preceptor PRIOR to that skill being performed in the field. Each skill should be verbally reviewed, **andthendemonstrated** for your Preceptor. This will take the place of spending an entire “classroom” day to demonstrate competency on basic skills. This will also afford the Department the opportunity to ensure that ALL skills have been reviewed rather than a select few. Once the skill has been reviewed, it will then be acceptable to begin performing that skill in the field.

The numbers indicated to the right of the skill, represent the minimum number of times the skill should be completed during the orientation. You may continue performing the skill for additional experience once you have reached the minimum number. For those skills without minimum requirements, please try to obtain these skills whenever possible.

Paramedic candidates will be required to complete both the BLS and ALS skill checklists as appropriate.

Basic Skills

<u>Procedure</u>	<u>#Required</u>	<u>Date Reviewed</u>	<u>Verification Initials</u>
B/P By Palpation	2		
Pt. Hx & Physical	5		
Vital Signs (Pediatric & Adult)	5		
Control of External Hemorrhage			
Treatment of Burns			
Fracture Immobilization			
C-Spine Immobilization	2		
BLS Run Report Completed	5		

Skills in Bold are Required

Basic Skills Verification

<u>Date</u>	<u>Comments</u>	<u>Verification Initials</u>
1		
2		
1		
2		
3		
4		
5		
1		
2		
3		
4		
5		
1		
1		
1		
1		
2		
1		
2		
3		
4		
5		

Basic Skills

<u>Procedure</u>	<u># Required</u>	<u>Date Reviewed</u>	<u>Verification Initials</u>
Basic Airway Management	5		
Orotracheal Suctioning			
Aseptic Endotracheal Suctioning			
BVM Ventilations (Manikin Acceptable)	2		
Positive Pressure Ventilations (Ett)			
Oxygen Administration	5		

Skills in Bold are Required

Basic Skills Verification

<u>Date</u>	<u>Comments</u>	<u>Verification Initials</u>
1		
2		
3		
4		
5		
1		
1		
1		
2		
1		
1		
2		
3		
4		
5		

ALS Skills

<u>Procedure</u>	<u># Required</u>	<u>Date Reviewed</u>	<u>Verification Initials</u>
IV Setup & Insertion	5		
Intubation (Manikin Acceptable)	2		
Cardiac Monitoring	10		
Advance Airway Management	10		
Defibrillation/ Cardioversion	2		

Skills in Bold are Required

ALS Skills Verification

<u>Date</u>	<u>Comments</u>	<u>Verification Initials</u>
1		
2		
3		
4		
5		
1		
2		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
1		
2		

ALS Skills

<u>Procedure</u>	<u># Required</u>	<u>Date Reviewed</u>	<u>Verification Initials</u>
EMS Telemetry Calls	2		
Delivery/Setup For OB Emergency			
Blood Sugar Monitoring	2		
Drawing of Blood			
Piggyback Administration of Meds			
Bolus Administration of Meds			
Administration of Meds Via ETT			
Sublingual Medication	2		
Inhaled Administration of Meds	2		

Skills in Bold are Required

ALS Skills Verification

<u>Date</u>	<u>Comments</u>	<u>Verification Initials</u>
1		
2		
1		
1		
2		
1		
1		
1		
1		
1		
1		
2		
1		
2		

ALS Skills

<u>Procedure</u>	<u># Required</u>	<u>Date Reviewed</u>	<u>Verification Initials</u>
Fluid Bolus			
IM/SQ Injection			
ALS Written Reports	5		

Skills in Bold are Required

ALS Skills Verification

<u>Date</u>	<u>Comments</u>	<u>Verification Initials</u>
1		
1		
1		
2		
3		
4		
5		

Driving Directions

This exercise will help the individual learn the streets of Ross Township.

Using the street guide, write the best route of travel from the location provided, to the address provided. Please note any information that will help in locating the address and any information that the responding units may need to know upon arrival, (ex. Business name, or no hydrants in area, or long drive).

Example:

From Station 1 to Davis Road

Ross: Left out of firehouse, Right onto Hamilton-Cleves, Left onto US27, Right onto Ross Hanover, Right onto Davis Road.

From Station 2 to Davis Road

Millville: Left out of firehouse onto Ross Hanover Road onto Davis Road.

1) From Station 1 to Deer Cross Lane.

2) From Station 2 to Deer Cross Lane.

3) From Station 1 to Fox Den Court

4) From Station 2 to Fox Den Court

5) From Station 1 to Fox Run Drive

6) From Station 2 to Fox Run Drive

7) From Station 1 to Water Street

8) From Station 2 to Water Street

9) From Station 1 to Ross Estates Drive

10) From Station 2 to Ross Estates Drive

11) From Station 1 to Mill Street

12) From Station 2 to Mill Street

13) From Station 1 to High Street

14) From Station 2 to High Street

15) From Station 1 to Narrow Street

16) From Station 2 to Narrow Street

17) From Station 1 to Cory Court

18) From Station 2 to Cory Court

19) From Station 1 to Wilson Ave

20) From Station 2 to Wilson Ave

21) From Station 1 to 402 Jeff Scott Court

22) From Station 2 to 402 Jeff Scott Court

23) From Station 1 to 2067 Robin Ave

24) From Station 2 to 2067 Robin Ave

Main Paperwork Trail

Area	Date Completed	Preceptor Initials	Comments
BLS Equipment			
ALS Equipment			
Run Reports			
Response Protocol			
Department SOG's			
Skill Eval. Sheets			

Second Paramedic

This outline is to be used as a guide by paramedics that will be placed into the secondary medic position. The paramedics must understand that they will be partly responsible for the ambulance personnel, EMS details and emergency medical equipment.

The Paramedic will have an understanding of the following material:

Skills Book_____

One Medic Transport Policy_____

Primary Paramedic Alarm Response_____

Back-Up Paramedic Alarm Response_____

Important Phone Numbers_____

Telemetry Procedures_____

Township Map_____

Radio Procedures_____

Surrounding EMS Units_____

Reporting Procedures: Writing, and reviewing run reports._____

Change Over Procedure_____

Paramedic Trainee Observer Guidelines_____

Medic and Squad Inventory_____

All Paperwork in Clipboards_____

Protocols and Standing Orders: The Paramedic will be provided a binder or CD-ROM containing the Ross Twp EMS protocols and standing orders. The Paramedic must have a thorough knowledge and understanding of the protocols. This knowledge will be tested and confirmed through oral and written testing.

Skills Book: When completed, the skills book will become part of the Paramedics permanent record. This book helps build confidence in the new paramedic as well as establishes trust from the veteran preceptors and part time EMT's. The Paramedic will be provided the skills book to log all of the EMS details while in the orientation program. The skills must be reviewed with a preceptor prior to performing them. The skills can be performed in the field or on a manikin. An "EMS Evaluation Check Sheet" must be completed for each EMS detail.

One Medic Transport Policy: The Paramedic must have a thorough knowledge of the "One Medic Transport Policy". Basically: 1) All EMS details can be transported with one paramedic driver and one paramedic in the rear of the squad. 2) If one medic is transporting with a basic EMT driver, ALS procedures can be performed.

Primary Paramedic Alarm Response: The following is a list of automatic responses for the RTFD Paramedic. This list serves as a primary response guideline that permits the response to these dispatches only adjusted only as manpower allows.

Allergic Reaction	Non-Breather
Asthma/Emphysema	Obstetrics
Burns (Chemical/Thermal)	Overdose (Drug/Alcohol)
Breathing Difficulty	Person Struck
D.O.A.	Person Down
Diabetic Emergency	Poisoning
Drowning/Near Drowning	Request of units on the scene
Electrocution	Respiratory Arrest
Falls of greater than 10 feet	Seizure Disorder
Heart Attack/Chest Pain	Sick Person (Unspecified)
Hemorrhage/Severe Bleeding	Stabbing/Shooting
Industrial Accidents	Stroke
Motorcycle Accident	Suicide (Not if "contemplating")
Mutual Aid medics (by request only)	Unconscious Patient
Unknown Illness	
Auto Accidents (Entrapment, Multiple Injuries, Highway, Rollover)	

Back-Up Paramedic Alarm Response: The following is a list of back-up responses that the engine in the incident district will respond to, if the medic unit is on a run. The engine in the details district must automatically respond if that district is down to one medic according to the following dispatches.

Drowning/Near Drowning	Electrocutions
Entrapments	Highway Accidents
Motorcycle Accidents	Non-Breather
Possible D.O.A.	Stabbing/Shooting
Unconscious Person	

All calls where the medic in the short manpower district responds in the ambulance, thereby making that districts medic vehicle O.O.S.

Imports Phone Numbers

Station 101 -----	738-2023
Station 102 -----	863-3410
Butler County-----	785-1300
Ft. Hamilton-----	867-2144
Mercy Fairfield-----	870-7007
University-----	1-800-826-8100
Franciscan Mount Airy-----	853-5222
Children's-----	
University Air Care-----	1-800-826-8100
MiamiValley Care Flight-----	1-800-542-3333

Telemetry Procedures

The Paramedic must be able to communicate with medical control and know when to make the call. This is where an extensive knowledge of the protocol will come into good use. Any discrepancies in the protocol, unanswered phones, or unprofessional attitudes should be reported to the Paramedic Supervisor. Medical control is a valuable resource to be utilized when needed; they are not to be utilized as a supplement for the paramedic's lack of knowledge.

Township Map: A Township map will be provided; it must be unfolded to be of any value.

Radio Procedures

The portable radios should be set to the RTFD channel on every EMS detail. The Paramedic must be able to utilize proper radio procedures to call for additional resources, back-up medics or mutual aid vehicles.

Surrounding EMS Units

The Paramedic must know the call signs and skill levels of the units bordering Ross Township in the case one is needed for an EMS detail.

Reporting Procedures

The Paramedic should be proficient in writing run reports when promoted or hired. This will be reviewed if necessary. *Don't forget HIPPA, refusal signatures, and PD signatures, if needed.

Change Over Procedure

Anything unusual found during the Paramedics shift should be passed on from the out-going medic to the in-coming medic. The in-coming Paramedic should begin the vehicle check and ensure all equipment and supplies are accounted for.

Paramedic Trainee Observer Guidelines

The Second Paramedic must understand that RTFD is a teaching department. Due to our large run volume and our variety of emergencies, medic students are eager to log ride time with us. The students must contact Chief Steve Miller prior to riding. Contact should be made with the medic student so the Paramedic is aware of the student's skill level, confidence, and competence. Cooperation, guidance and skill building confidence should be shown to the student. Any problems should be reported to the Paramedic Supervisor.

Medic and Squad Inventory

You cannot properly do your job if you do not know what tools you carry. Know how much, what and where on each unit. You will be tested on this knowledge.

Clipboard Paperwork

Know all the paperwork contained in the squad and medic clipboards.

This outline is to be used to help you become a better EMS provider. The EMT's will be relying on you to know everything there is to know concerning EMS. The outline and all material should be reviewed with your prior to going on any EMS details. If any problems arise during your orientation, it is imperative that you talk with the Paramedic Supervisor. They are there to help, assist and give constructive criticism when needed. The Paramedic Supervisor is able to adjust the entire orientation program to fit your skill level.