

EVALUATION DOCUMENT OVERVIEW

This instruction sheet is to summarize the process for the evaluation materials for Marble Falls Area EMS employees and volunteers working towards clearance to practice as an independent provider. If at any point there is a question related to the process, please contact Scott Parker. It is very important for you to document all discussions related to areas of improvement for the new employees and volunteers as their improvement over the course of the introductory period will be a significant part of their final evaluation process. In addition, please make any recommendations to us regarding this process so that we may adjust and ultimately improve the program.

SECTION 1 – EMPLOYEE KNOWLEDGE ASSESSMENT WORKSHEET

- Importance: This document is to help the education team and mentoring lieutenant identify specific policies and/or procedures that may require further education during the introductory period. This form will not be used as a graded part of the introductory period.
- Instructions: The mentoring provider should review all of the topics listed on the sheet and select the best description, from the bottom of the page, that describes the new employee's knowledge after the new employee's third shift of riding out.
- Kept by: The mentoring provider once completed.
- Turned in: This form should be completed by the fourth ride out and turned in by the mentoring provider to the Commander for review.
- Requirements: The new employee will review the appropriate policies and procedures, as identified by the topics reviewed with this form.
- Associated Docs: Employee Procedures Manual

SECTION 2 – STATION/SHIFT OVERVIEW

- Importance: Describes the necessary items for review and evaluation while working on shift.
- Instructions: Review the document each shift with mentoring lieutenant to determine what the focus will be for the shift.
- Kept by: New Employee
- Turned in: Not turned in to administration for evaluation.
- Requirements: None.
- Associated Docs: Station/Shift Evaluation Forms, Education Issues Form, and Supplemental Documentation

SECTION 3 - STATION/SHIFT EVALUATION FORM

- Importance: Reviews the operational/administrative abilities of the new employees.
- Instructions: The on-duty crew should allow/assist the new employee with the performance of as much of the listed areas as possible, while on shift. It is at the discretion of the mentoring lieutenant what is acceptable, needs improvement, or unacceptable. Remember that any unacceptable performance requires the Education Issues form to be completed. Any areas needing improvement should include brief notes, identifying any corrective actions taken or proposed.
- Kept by: New Employee
- Turned in: The Commander is to receive these at the end of each shift/ride with call evaluations. There will be a folder available in the Commander's box. Copies will be provided to the mentoring provider.
- Requirements: Must be completed by the end of each rotation.
- Associated Docs: Supplement Form & Education Issues Form



SECTION 4 - CALL EVALUATION

Importance: Reviews the medical performance of the new employee.
Instructions: The on-duty crew on the unit should guide the discussion of the new employee on the assessment and treatment given by the crew, for each call. Please be honest in this review, as we are looking to improve care and not looking to punish or correct actions. If there is a concern related to an individual performance, please complete the Education Issues form and return it with the call evaluation. Remember, any run in which the medic performs any of the items on this form should generate an evaluation, even canceled calls and refusals.

Kept by: New Employee

Turned in: The Commander is to receive these at the end of each shift/ride with call evaluations. There will be a folder available in the Commander's box. Copies will be provided to the mentoring provider.

Requirements: **MUST BE KEPT COMPLETELY CONFIDENTIAL.** Must be completed by the end of each rotation.

Associated Docs: Education Issues Form & Supplemental Documentation

SECTION 5 - EDUCATION ISSUES

Importance: Identifies areas requiring further education.

Instructions: The on-duty crew should complete this form with the new employee. This is not to be used as a disciplinary form. This form will be filled out for any item in which performance must change. In the event that corrective actions have already been taken, notate this on the form. Any further action from the Operations Director will be coordinated with you, as appropriate. Although not encouraged, you may elect to complete this document without discussing your concerns with the new employee. This action will generate a complete review by the Operations Director and Commander.

Kept by: On-duty Crew

Turned in: The Commander is to receive these at the end of each shift/ride with call evaluations. There will be a folder available in the Commander's box. Copies will be provided to the mentoring provider. A meeting will be scheduled with the new employee to discuss improvement points and efforts as quickly as possible.

Requirements: **MUST BE KEPT COMPLETELY CONFIDENTIAL**

Associated Docs: Any evaluation that generates a concern related to the medic's performance.

SECTION 6 – SUPPLEMENTAL DOCUMENTATION FORMS

Importance: Allows extension of comments from any of the forms within the packet.

Instructions: Use whenever additional writing space is needed.

Kept by: Dependent on Form / Part of Process – it should be with the document it is supplementing.

Turned in: With document for which it is supporting.

Requirements: Must be turned in with document that it is supplementing.

Associated Docs: All documents in which further explanation may be needed.

SECTION 7 – CLINICAL OPERATING GUIDELINES (MARK-UP VERSION)

SECTION 8 – ORIGINAL PACKET FOR COPYING



MFAEMS EMPLOYEE KNOWLEDGE ASSESSMENT

EMPLOYEE NAME: _____

EVALUATION OBJECTIVES	DATE REVIEWED	KNOWLEDGE RATING*	ASSESSOR'S INITIALS
Employee describes and discusses public service responsibilities of the crew in uniform or at a MFAEMS function.			
Employee describes and discusses addressing issues of professionalism related to MFAEMS.			
Employee describes and discusses the confidentiality policy.			
Employee describes and discusses the Marble Falls Area EMS disciplinary policy.			
Employee describes the sexual harassment policy and who, how, and when to report.			
Employee describes the violence in the workplace policy and who, how, and when to report.			
Employee describes to who, how, and when to report on-the-job Injury.			
Employee describes the firearms rules for the organization.			
Employee describes what identification is required while working.			
Employee describes the uniform requirements including the night shirt policy, other insignia, and nametags.			
Employee describes payroll reporting, the pay schedule, and where/how paychecks may be picked up.			
Employee describes the mandatory overtime process including location of list and trading/giving away overtime			
Employee describes and discusses scheduling as it relates to shifts, vacation, sick, and education time off.			
Employee describes and discusses the relationship of EMS to First Responders in the area.			
Employee describes and discusses how to address concerns involving First Responders in the area.			
Employee describes and discusses how to address medical concerns involving other care providers.			
Employee describes and discusses to who, when, and how to report an accident.			
Employee describes or discusses the unit change out procedure, including documentation.			
Employee describes and discusses decontamination of the ambulance and when/how it should be performed.			
Employee describes and discusses considerations and policies related to emergency and non-emergency driving.			
Employee describes and discusses the weekly and monthly equipment and supply checks for each station.			
Employee describes and discusses the roles/responsibilities of riders/students while performing as a team member.			
Employee describes and discusses the acceptance and/or dismissal of a rider or student from an approved ride-out.			
Employee describes and discusses the importance of accurate and appropriate evaluations of the students.			
Employee describes and discusses the Response Area Plan and identifies its importance.			
Employee describes and discusses the different types of medical transfers and response requirements for each.			
Employee describes and discusses the paperwork requirements for MFAEMS.			
Employee describes and discusses the crews' responsibilities related to truck maintenance & inventory control.			

*These topics are to be discussed in the first week of the introductory period program with the new employee. In the "Knowledge Rating" category, please indicate one of the following categorizations for how well the new employee understands and can describe the information:

None Minimal Good Excellent

This is not to "evaluate" the new employee but to give us a baseline that will allow us to develop an education plan during the introductory period. The terminal goal is for the new employee, at the end of the introductory period, to have "Excellent" knowledge in every area listed above.



Station/Shift Knowledge Overview

Goal: To familiarize the new employee with operational aspects of each area and to allow the new employees to opportunity to meet most of the employees in our department.

Outlined below are the orientation points for each station/area. The purpose in covering these points is to provide the new employee with a consistent overview for each area. Each Lieutenant (or their designee) should review the topics and cover any area that has either not been covered or has been documented, in the pass-on information, as needing further discussion or orientation.

An "Area" is defined as a district or region that a given unit has as a designated response area.

STATION

Access

Employee understands how to access the station both when the unit is in station and out. The employee also understands the parking and security considerations for the station.

Cohabitation Rules

Employee understands the rules related to sharing the facility, as appropriate.

Activities/Duties

Employee understands and can locate the station activities and duties to be performed on a daily, weekly, or monthly basis.

AREAS

Boundaries

Employee identifies the response district for each station and has driven the major thoroughfares and cross streets to familiarize themselves with the area. Map study of the area should also include, if status allows, going to the various communities/areas served by your unit.

Available Maps

Employee physically reviews the various maps used in each truck and assists in finding addresses while responding to calls. Selection of and navigation to difficult addresses, at the station personnel's discretion, is appropriate.

Considerations

Employee will identify special considerations for response including traffic patterns/flow, railroad traffic, construction or any other travel problems and identify alternative routes, as needed.

MAINTENANCE FACILITIES

Fueling

Employee will review all fueling sources for each unit, including access procedures and record keeping.

Other

If a maintenance source is located in the area, every effort should be made to drive to that facility.

MEDICAL FACILITIES

Hospitals

Employee should identify and visit the Emergency Department of the hospitals in Burnet. Access and other considerations should be covered at the time of the visit. Please introduce the employee to the staff.

Nursing Homes

Employee should identify and visit all nursing homes within the area. Entrances, access, and other considerations should be covered at the time of the visit. Please introduce the employee to the staff.

Medical Clinics/Specialty Facilities

Employee should identify and visit all large medical and specialty clinics within the area. Entrances, access, and other considerations should be covered at the time of the visit. Please introduce the employee to the staff.

OTHER FACILITIES

Schools

Employee should identify and visit all schools located in the area, noting the school zones and traffic considerations for each. Entrances, access, and other considerations should be covered at the time of the visit. If stopping on campus, please notify the school staff.

Difficult Access/Special Consideration Address

Employee will identify any address or area that requires special knowledge or access. (This is to be determined by each station.)

FIRST RESPONDERS

Identification

Employee will identify each first responder group within each area. The capabilities of each first response group (i.e. fire, rescue, hazmat, etc.) will also be covered.

Communication

Employee will identify how the unit/personnel communicate with the different first responder groups, in the assigned area.

Area

Employee will identify the response districts for each first responder group for each unit.

MAINTENANCE

Cleaning Supplies

Employee will identify the location of all truck and station cleaning supplies.

Cleaning Procedures

Employee will describe the appropriate cleaning procedures for truck and station cleaning, for each unit.

SUPPLIES

Location

Employee will identify the location of medical, truck, and station supplies and describe any process used for tracking them.

Replacement

Employee will identify and describe the process for ordering and replacing any supplies for each station.

Station/Shift Evaluation Form Employee: _____

EVALUATION OVERVIEW

This document is to cover shift performance and vehicle operations. The form is designed to help identify and document areas in which our employees need further education. This document serves as an evaluation tool for the guidance of education and is not intended to guide punitive action. The evaluation is based on goals established by our mission and is guided by our policies and procedures. We encourage positive interaction with the employee on these points and request that you respect the education and opinions of the education program, Lieutenants, and other station personnel guiding the new employees.

THE FORM

This guide itemizes each of the Performance Areas listed below. There are 4 different responses to the items listed below:

Not Acceptable **Needs Improvement** **Acceptable** **N/A**

Although the "N/A" (Not Applicable) and the "Acceptable" are self explanatory and require no additional documentation, the other two do have additional information that must be included.

Please document any "Not Acceptable" items on the **Education Issue** form. Please document the specific problems, as identified to the employee related to the area of the deficit with any suggested remedies. If there is a concern related to the performance of the evaluated employee that is not discussed with the employee, please mark the appropriate box at the bottom of the form. Please understand, any issue identified as an "Education Issue" will be addressed with the new employee.

Any "Needs Improvement" should be discussed with the new employee with an overview of the concerns and corrective measures, if any, documented in the "Notes" of the specific section, or in the supplement attached. Remember, what you feel may need improving, may be "Acceptable" to your peers...

PERFORMANCE AREAS

SHIFT DOCUMENTATION	<input type="radio"/> Not Acceptable	<input type="radio"/> Needs Improvement	<input type="radio"/> Acceptable	<input type="radio"/> N/A
EQUIPMENT CHECKOUT	<input type="radio"/> Not Acceptable	<input type="radio"/> Needs Improvement	<input type="radio"/> Acceptable	<input type="radio"/> N/A
OPERATION OF EMERGENCY EQUIPMENT	<input type="radio"/> Not Acceptable	<input type="radio"/> Needs Improvement	<input type="radio"/> Acceptable	<input type="radio"/> N/A
DRIVING	<input type="radio"/> Not Acceptable	<input type="radio"/> Needs Improvement	<input type="radio"/> Acceptable	<input type="radio"/> N/A
RIGHT SEAT PROCEDURES	<input type="radio"/> Not Acceptable	<input type="radio"/> Needs Improvement	<input type="radio"/> Acceptable	<input type="radio"/> N/A
COMMUNICATION	<input type="radio"/> Not Acceptable	<input type="radio"/> Needs Improvement	<input type="radio"/> Acceptable	<input type="radio"/> N/A
SYSTEM STATUS MANAGEMENT	<input type="radio"/> Not Acceptable	<input type="radio"/> Needs Improvement	<input type="radio"/> Acceptable	<input type="radio"/> N/A
SYSTEM, STATION, AND SHIFT MANAGEMENT	<input type="radio"/> Not Acceptable	<input type="radio"/> Needs Improvement	<input type="radio"/> Acceptable	<input type="radio"/> N/A
INVENTORY AND TRUCK MAINTENANCE	<input type="radio"/> Not Acceptable	<input type="radio"/> Needs Improvement	<input type="radio"/> Acceptable	<input type="radio"/> N/A
PROFESSIONAL DEVELOPMENT	<input type="radio"/> Not Acceptable	<input type="radio"/> Needs Improvement	<input type="radio"/> Acceptable	<input type="radio"/> N/A

Notes: _____

Evaluator: _____ Signature: _____

Medic Evaluated: _____ Signature: _____

Date of Evaluation: _____ Station: _____

Supplement Attached: Yes No Initials: _____ **Education Issues Form** Attached: Yes No Initials: _____

Education Issues

This form is used to identify areas in which more education may be required. This form supports the "Not Acceptable" item on the Shift Evaluation Form. Please complete all areas of the form. This form is considered confidential and may only be discussed with the Operations Director or their designee. No other parties should be permitted to see this document or may be included in discussions of this item, especially other evaluating medics.

Evaluator: _____ Signature: _____

Medic Evaluated: _____ Signature: _____

Date of Evaluation: _____ Station: _____

Education Issue: _____

Description of Concern: _____

Was concern discussed with the medic being evaluated: Yes No Initials: _____

If "No", why not: _____

Actions Taken (if any): _____

Medic's Written Response (use back, if necessary): _____

Is further action required, in your opinion? Yes No Initials: _____

If "Yes", what do you recommend: _____
