Medic Training



| Department: Operations | SOP#120 | Applicable to: All Staff |
|----------------------------|---------|--|
| Effective Date: 1 Dec 2020 | 4 Pages | Authority: AC of Education |
| Applicable CAAS Standards: | | Revised Effective Date: 4/14/22 |

Purpose:

The purpose of this Standard Operating Guideline (SOG) is to outline the position of Brighton Volunteer Ambulance (BVA) regarding medic training for both EMT Basic and Paramedics.

Scope:

The scope of this document applies to career and volunteer staff members in the starting phase of their time with the agency, as they work toward clearance at their certification level.

Guideline:

- 1. Career Staff personnel (Full Time and Part Time) will simultaneously clear as a Medic and a Driver.
- 2. Volunteer Staff will clear as a medic first, and practice at the medic level for sixty days or fifteen calls, whichever comes first, prior to advancing to driver training.
- 3. While training, all staff will complete minimally twenty hours of road training time per month.
 - 3.1. To increase the likelihood of success, trainees are encouraged to work minimally eight hours per week.
- 4. Trainees must arrive for work prepared and in uniform in accordance with SOG's 104, 105, and 107. Staff members working in EMS are encouraged to arrive for their shift at least fifteen minutes early. Trainees should expect to not be available for non-agency activity for at least two hours after their scheduled end of shift due to the possibility of late calls and completion of on shift responsibilities.
- 5. ALS Trainees will be provided with a skills sheet to track the progress of the trainee. BLS Trainee progress will be tracked on the Trainee Progression Tracker. During downtime with the Field Training Officer (FTO), these tasks will be reviewed/taught/affirmed for understanding and ability.
- 6. The training department will follow a 30/60/90 day progression, with the trainee being cleared by day ninety, if they are completing sufficient hours, or in extenuating circumstances at the discretion of the Assistant Chief of Training.
 - 6.1. If a trainee does not meet the requirements, the 30/60/90 day progression may be repeated once. Failure to clear in the second period will require a Performance Improvement Plan to be generated, to map an exact plan to lead to a trainees successful clearance.
- 7. FTO's will submit an online evaluation of the trainee at the completion of each shift.

This document supersedes any documents on the topic dated prior to the effective date noted above.

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8. Trainees will submit an online evaluation of the FTO at the completion of each shift.

- 9. Operations/Operational Knowledge Needs
 - 9.1. Interpersonal interaction ability, Proper policy understanding/how to reference, Crew interaction/management, Resource knowledge, handling crisis and unusual situations, situational awareness and management, equipment location and function, ALS Assist-a-tech skill, radio communications, multi-patient incident response, responding to aggressive deadly behavior events, & chain of command.
- 10. Medical Knowledge Needs
 - 10.1. Scene management, patient assessment, critical thinking skills, accurate field diagnosis & rule out, excellent bedside manner, proper treatment plans developed and executed, appropriate patient management, strong skills to the certification level, patient transfer skills, MIST reports, & documentation.
- 11. General Needs
 - Geography, safety devices, daily shift responsibilities, base knowledge: Loan Closet, MDT, Chores, Phones, Personal Protective Equipment, & cleaning.
- 12. To be cleared:
 - 12.1. Full BLS Clearance
 - 12.1.1. FTO must have had the trainee for a minimum of three shifts before awarding a clearance signature.
 - 12.1.2. For a full clearance, the trainee needs a minimum of ten calls as primary provider, with three clearance signatures, and all skills checked off.
 - 12.2. Quick BLS Clearance
 - 12.2.1. FTO may award a clearance signature in the first shift.
 - 12.2.2. Trainees must complete all skills and have a minimum of three calls as primary and two signatures.
 - 12.3. Full ALS Clearance
 - 12.3.1. Three FTO's must have had the trainee for a set of three phases before clearing.
 - 12.3.2. For a full clearance signature in any one of the three phases, the trainee needs a minimum of ten calls (Full ALS transports) as primary provider per phase.
 - 12.3.3. The three phases are as follows: Phase 1, The trainee will ride as a third in addition to the ALS FTO and their partner, until the ALS FTO/ALS Preceptor sees fit that the trainee has earned their first signature. Phase 2, The Trainee will ride as an ALS FTO/ALS preceptors partner, providing care under the

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supervision of the ALS FTO/ALS Preceptor; until such time as the trainer determines that the trainee has earned a second clearance signature. The Assistant Chief of Training will Clinically QA each one of the trainee's charts and monitor their progress with the help of the FTO they are partnered with and "Trainee Progression Tracker." Phase three, The trainee will ride double ALS only, with progression tracked through the QA of every one of their charts as well as progression meetings with the trainee and the Assistant Chief of Training to determine their preparedness. Once the trainee has satisfactorily adjusted to the third phase and has no clinical concerns brought up by the Assistant Chief of Training, The Clinical/QA lead, the partners that the trainee has ridden with and the Medical Director/Associate Medical Director; only then will the trainee have cleared as an independent ALS Medic.

- 12.3.4. The trainee will complete an evaluation on the simulation manikin, prior to entering the third phase. A satisfactory performance will be determined by the Assistant chief proctoring the simulation, and is left up to their discretion. Only after successful completion of the simulation will the trainee enter the third phase of training.
- 12.3.5. The trainee will complete a final session as desired by an agency Medical Director/Associate Medical director. This may be another Sim, Oral Boards, conversation, etc. As the Medical Director/Associate Medical and or the Assistant Chief of training's discretion.
- 12.4. Quick ALS Clearance
 - 12.4.1. FTO may award a clearance signature in the first shift.
 - 12.4.2. Trainees must complete all skills and have a minimum of three calls as primary and two signatures.
 - 12.4.3. The trainee will complete a final evaluation on the simulation manikin.
 - 12.4.4. The trainee will complete a final session as desired by an agency Medical Director. This may be another Sim, Oral Boards, conversation, etc. As the Medical Director sees fit.
- 13. 30/60/90 Three Phases
 - 13.1. If the trainee has not cleared after the first three months, they will be evaluated for allowable progression to a second phase opportunity. The trainee will need to show steady progress for this to be applied.

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13.2. The same will be applied after six months. If stear progress is being made but the trainee is not ready to clear, they will be allowed another ninety days to clear.

- 14. Removal from training.
 - 14.1. If a trainee does not complete the program in the nine month span, they will be relieved of their position with the agency.

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