

**OKALOOSA COUNTY
EMERGENCY MEDICAL SERVICES
STANDARD OPERATING PROCEDURE**

Title:	Field Training Program
Policy:	503.00
Purpose:	The Field Training Program is designed to ensure and enhance the experience, performance, and knowledge of the Okaloosa County EMS Members with the use of a qualified Field Training Officer (FTO).

This policy consists of the following numbered sections:

- 1. Overview**
- 2. Performance Reviews**
- 3. Release from the Field Training Program**
- 4. Field Training Program Expectation of the Orientee**
- 5. Field Training Program Orientee Performance Standards**
- 6. Field Training Program Expectations of the Field Training Officer**
- 7. Field Training Officer Minimum Qualifications, Selection, and Removal**
- 8. Accountability and Compliance**

1. Overview

The Planning and Training Section Commander will determine the training period for each Orientee. Each Orientee will be initially assigned 120 hours of clinical ride time, but can extend up to 240 hours. All objectives outlined within the program must be completed, and clearance to Full-Duty status obtained, within 240 hours and 60 days from the date of hire. During this time, the Orientee is evaluated on his/her proficiency with all practical and cognitive medical skills within his/her scope of certification (i.e. IVs, intubation, monitor operation and interpretation, etc.), his/her ability to develop and implement patient treatment plans, his/her knowledge of the Okaloosa County Protocols, Policies, Human Resources Policies/Procedures, his/her ability to effectively manage scenes, and demonstrate safe vehicle operations. It is expected that the Orientee complete all items outlined below within the initial 120 hours. Prior to the Paramedic Orientee's Oral Board/Interview with the Medical Director, he/she shall be evaluated by the Planning and Training Section Commander (or designee) prior to being scheduled for release. EMT Orientees are not required to interview with the Medical Director. **It is the Orientee's responsibility to ensure all evaluations, paperwork, and skills are completed and on file with Training. Orientees should make copies of all forms that are forwarded to Training for their personal record.** An email distribution list has been created for ease of contacting all Training Staff: EMSFieldTrainer@myokaloosa.com

A. Field Training Officers

1. The role of the Field Training Officer (FTO) is to assist the Orientee in linking field and clinical experience as well as serve to guide the Orientee toward a successful career. During the actual field training, the Orientee shall learn to assimilate, evaluate, and synthesize the vast amount of material presented to them. The Field Training Officers will review all Patient Care Reports (ePCR's) written by the Orientees prior to the end of the Orientees ride time for the day. The FTO shall select his/her name in the "Reviewed By" section under the "Review & Exposure" subsection of the "Outcome" tab in the Triptix 4 program to acknowledge the report was reviewed. No official EMS report, ALS or BLS, is to be filled out by any paramedic or EMT student who is on a clinical, including Okaloosa County personnel.

**OKALOOSA COUNTY
EMERGENCY MEDICAL SERVICES
STANDARD OPERATING PROCEDURE**

2. It is recommended that the Field Training Officer attend and demonstrate for the Orientee key attributes and abilities about one-third of the time.
3. In the event that a Field Training Officer is unavailable to the Orientee, the Planning and Training Section Commander or Coordinator may elect to place the Orientee with an experienced paramedic or EMT (for EMT Orientees). The Planning and Training Section Commander or Coordinator will inform the non-FTO paramedic/EMT on the objectives and expectations for the ride time. At no time should the Orientee ride more than 24 hours with a non-FTO. The non-FTO paramedic/EMT will be expected to adhere to the guidelines outlined within this document including the completion of the OCEMS Field Training Program Assessment Tool.

B. Extensions

1. The maximum terms for the respective hours of the Field Training Program are 120 hours. If the Orientee requires additional shifts, an extension may be allowed up to a maximum of 120 hours, for a total 240 hours for the entire program. A Performance Improvement Plan (PIP) shall accompany all requests for extension. Any extensions granted must still be completed within 60 days from the date of hire. Aggravating or mitigating circumstances shall be considered.
2. A failure to accomplish the objectives after the initial 120 hours as noted in the scoring (2 or below) of the Assessment Tool for the outlined categories or failure to complete the Objectives Packet may be cause for the Field Training Officer(s) to request an extension. The request for extension shall be submitted in writing to the Planning and Training Section Commander within 24 hours of the Orientee's last ride. Every effort will be made to minimize delays in beginning the extension and PIP process. When approved, the term for the extension and PIP will typically be for 48 hours, but not to exceed 120. If at any point the Planning and Training Section Commander feels that the Orientee is not making adequate progress, he/she may make recommendations to the Medical Director and EMS Chief whether to extend training or to separate employment; the Medical Director(s) will make the final recommendation to the EMS Chief.
3. Successful completion of the extension (PIP) will result in the Field Training Officer completing an Assessment Tool and making the recommendation for graduation of the Orientee from the program. The Planning and Training Coordinator & Section Commander will review the Orientees progress and paperwork to ensure all objectives have been met, then make a recommendation to the EMS Chief for approval to be released from training and assume a Full-Duty status.

2. Performance Reviews

A. Orientee Performance Review and Shift Summary

1. An OCEMS Field Training Program Assessment Tool shall be completed by the Field Training Officer summarizing the totals from the Individual Call Evaluation Tool. The Field Training Officer will go over the review with the Orientee. Comments will be provided and suggestions for improvement will be made. It will then be saved to the Orientee's assigned folder on the EMS file share and emailed to the EMSFieldTraining email group.
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**OKALOOSA COUNTY
EMERGENCY MEDICAL SERVICES
STANDARD OPERATING PROCEDURE**

2. Should at any time the Orientee receive an unfavorable recommendation or evaluation, the Field Training Officer(s) may develop a Performance Improvement Plan (PIP) at the direction of the Planning and Training Section Commander and/or Medical Director.
3. In the event any deficiencies are identified in the Orientees' performance, he/she may receive additional training in the area(s) identified. The Orientee will be continually evaluated in the areas of deficiencies until he/she has reached a satisfactory level of improvement meeting the acceptable required performance standard or it is determined that he/she is unable to meet the acceptable required performance standard to qualify to function as a(n) EMT/paramedic for the Okaloosa County Emergency Medical Services Division. A deficiency is defined as a weakness in skill, technique, knowledge, demeanor or professionalism that would jeopardize the standard of patient care set forth by the DOT National Standard Curriculum and Okaloosa County EMS.

B. OCEMS Field Training Program Assessment Tool

1. An OCEMS Field Training Program Assessment Tool shall be submitted by the Field Training Officer upon completion of each assigned shift. This review gives the next Field Training Officer an assessment of the progress of the Orientee, which identifies goals and areas needing improvement. Only the assigned Field Training Officer (or experienced non-FTO as described in Section 1 subsection A.3 above) may write and submit an evaluation for an EMT or Paramedic Orientee.

C. Driving Evaluation

1. A Driving Evaluation will be completed by the Field Training Officer when the Orientee drives during the shift. The minimum number of favorable Driving Evaluations shall be reflective of the number of calls driven (i.e., 4 total calls and 4 favorable Driving Evaluations). If the number of favorable Driving Evaluations does not match the number of calls driven, an explanation outlining why must be included in the Field Training Officer Comments section in the OCEMS Field Training Program Assessment Tool. A minimum of 10 favorable Driving Evaluations must be submitted before the Orientee can graduate from the Field Training Program.

D. Objectives Packet

1. The Orientee must provide written documentation (Proficiency Evaluations inside the Objectives Packet) to the training section, completed by their Field Training Officer(s) that the Orientee has met the performance competency as set forth by the Medical Director.
 2. Recommended Clinical Focus for hours 0-24:
The Orientee should be proficient in all of the listed areas by the end of the 24th hour of rides:
 - a. Roles and Responsibilities of the Provider
 - b. The Well-Being of the Provider/ Injury Prevention
 - c. Basic Airway Management and Ventilations
 - d. Patient Assessment/ Physical Examinations
 - e. Communications and Documentation
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**OKALOOSA COUNTY
EMERGENCY MEDICAL SERVICES
STANDARD OPERATING PROCEDURE**

- f. General Pharmacology (Paramedics)
 - g. Venous Access and Medication Administration (Paramedics)
3. Recommended Clinical Focus for hours 25-48:
The Orientee should be proficient in all of the areas listed in the 0-24 hour ride time(s), as well as the following areas, by the end of the 48th hour of rides:
- a. Clinical Decision Making
 - b. Trauma Treatment/ Skills
 - c. Trauma Management
 - d. Crime/ Death Scene Operations
 - e. Ambulance Operations
 - f. Equipment Operation
 - g. Advanced Interventions (Paramedics)
 - h. Neonatology (Paramedics)
4. Recommended Clinical Focus for hours 49-120:
The Orientee should be proficient in all of the areas listed in the 0-24 hour of rides and 25-48 hour of rides, as well as the following areas, by the end of the 96th hour of rides:
- a. Medical Emergency Management
 - b. Advanced Airway Management (Paramedics)
 - c. Scene Control and Incident Command (Paramedics)
5. Prior to the 120th hour:
The Orientee **MUST** be proficient in **ALL** of the above applicable listed areas, and be evaluated by the Planning the Training Section Commander (or designee) on any of the topics/situations listed. Once the Orientee has completed all required items/objectives, they may be considered for graduation; they do not have to complete 120 hours of rides, as this program is objective based.

E. Field Training Program Critique

- 1. A Field Training Program Assessment Tool shall be completed by the Orientee at the end of each Field Training Officer assignment and again as a summary evaluation at the end of his/her Field Training. This critique provides feedback on the Field Training Officer's performance and overall program satisfaction. This assessment tool does not need to be completed in the presence of the Field Training Officer; the Orientee shall submit the evaluation directly to the Planning and Training Coordinator, Section Commander, EMS Chief, and/or Medical Director to ensure an honest and open evaluation is submitted.

3. Release from the Field Training Program

To successfully graduate from the Field Training Program, the Orientee must complete:

A. Field Orientation

- 1. Achieve an average minimum score of 3 in all categories of the OCEMS Field Training Program Assessment Tool; a minimum score of 2 must be obtained in the Affective Domain section.
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**OKALOOSA COUNTY
EMERGENCY MEDICAL SERVICES
STANDARD OPERATING PROCEDURE**

2. Earn a positive recommendation for progression from his/her Field Training Officer(s).
 - a. It is recommended that an Orientee receive evaluations from no less than two Field Training Officers. Graduation from the Field Training Program is based upon a recommendation from a Field Training Officer provided the Orientee has consistently met, or exceeded, the Orientee Performance Standards and that such performance has been consistently documented on the Orientee Performance Reviews and as noted in the OCEMS Field Training Program Assessment Tool. The assignment of Field Training Officer(s) is at the discretion of the Planning and Training Section Coordinator and Commander.
3. Successful completion of all applicable objectives and skills checklists.

B. Assessment Day

1. Successfully pass a written assessment with a minimum score of 80%. This assessment may be based on Okaloosa County EMS Protocols, American Heart Association Basic Life Support, American Heart Association Advanced Cardiac Life Support (for paramedics), Pre-hospital Trauma Life Support, International Trauma Life Support, and the National Standard Curriculum.
2. Pass psychomotor skills stations utilizing the criteria outlined on the National Registry Checklists for each station.
 - a. There will be 5 skills stations assessed. The skills to be assessed will be at the discretion of the Planning and Training Section Commander and Medical Director, and made available to the Orientee during their practice sessions. It is highly recommended that the Orientee practice the stations throughout their Field Orientation. All Field Training Officers will have 24-hour access to the EMS Training Center and equipment for this reason.
 - b. If an assessment is not successfully passed, the Orientee will reschedule a date to retake the missed assessment. An unsuccessful second attempt of the assessment may result in termination of employment; this decision will be at the recommendation of the Planning and Training Section Commander and solely be at the discretion of the EMS Chief and Medical Director. Aggravating or mitigating circumstances shall be considered.

C. Oral Boards/Medical Director Review

1. Paramedic Orientees must successfully complete an oral interview clearance with the Medical Director(s). It is the Medical Directors right to conduct this clearance in whatever fashion he/she feels necessary as to have the Orientee demonstrate competence. This may include, but not limited to, hands-on scenarios, discussions, video attendance of skills assessments, etc. All paperwork shall be presented to the Medical Director at the time of this final clearance for review. If the Medical Director has been satisfied that all goals have been met, he/she will sign the Orientation Checklist granting Paramedic privileges. This checklist will become a permanent document in the employees training file.
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**OKALOOSA COUNTY
EMERGENCY MEDICAL SERVICES
STANDARD OPERATING PROCEDURE**

4. Field Training Program Expectations of the Orienteer

A. Communicate With Your Partner

Treat your Field Training Officer like a partner. He/She is a part of the team, not to be on scene with you as an observer. She/he may intentionally wait to be asked to perform non-critical interventions, but this is only to better understand your thought process. The Field Training Officer is ultimately responsible for all that you do. For this reason, part of your responsibility is to keep the Field Training Officer informed of all patient conditions at all times. This does not mean you have to “recite” every bit of information you obtain, but keep in mind you need to work out a communication style with each Field Training Officer to keep him/her informed. Any unexpected change in patient condition (especially during transport) must be brought to the attention of the Field Training Officer.

B. Be Prepared For All Calls

The primary medical kit, cardiac monitor, and stretcher shall be taken with you on all calls. On calls of potential life threat (chest pain, unconscious party, trouble breathing, etc.), the suction unit shall also be taken in with you.

C. Patient Care

You will be running the calls. Obviously, in the beginning it is understood that you will need more assistance with decision-making. This assistance should become less frequent as time goes on. You are being evaluated on your ability to become more independent in assessing the patient, organizing the scene, delegating tasks, and treating the patient(s). Your Field Training Officer should not be intervening on calls unless he/she feels there is a threat to the patient, or a liability for the organization.

D. Work Up Site

Where you decide to initiate treatment will be dictated by patient condition, environment, and proximity to the ambulance, proximity to the receiving hospital, resources available, and personal safety. These are some of the concepts your Field Training Officer will help you consider on each call.

E. Back Up What You Demonstrate

Orientees should be prepared at all times to justify through sound medical judgment, any given action or inaction. This does not mean “making excuses.” Rather, the Field Training Program is intended to be a learning environment. Discussion will be initiated about many aspects of patient care—not just those where there is a perceived problem. Being asked about specific circumstances is not meant to put you on the defensive, instead it should create an interactive discussion between you and your Field Training Officer.

F. Feedback

Just as you will be evaluated as an Orienteer, you will also be expected to evaluate the Field Training Officers and the Field Training Program. Each Orienteer shall return a Field Training Program Evaluation after each orientation ride (or as soon after as possible) to the Planning and Training Section Coordinator and/or Planning and Training Section Commander by email or hand delivery. These evaluations are used to improve the quality of the program in the future and are of great value. If at any time a conflict arises that you cannot resolve by working with the Field Training Officer, you are encouraged to call Planning and Training Section Coordinator or Commander at 850-609-4799 or 850-612-6109.

**OKALOOSA COUNTY
EMERGENCY MEDICAL SERVICES
STANDARD OPERATING PROCEDURE**

5. Field Training Program Orienteer Performance Standards

All Field Training Orientees must, in the opinion of the Field Training Officer, EMS Staff, and Medical Director demonstrate the ability to consistently function independently in the Okaloosa County EMS System. This is to be evidenced by:

- A. Consistently being prepared for each shift and properly equipped for each call.
- B. Consistently delivering medically sound pre-hospital health care; and the consistently appropriate interpretation of the Okaloosa County Protocols.
- C. The safe operation of an ambulance vehicle in both the emergent and non-emergent modes.
- D. Consistently demonstrating the ability to safely control and manage all situations encountered at the scenes of medical emergencies (within their scope of practice), while abiding by these standards.
- E. Consistently providing clear and appropriate verbal medical reports and written documentation.
- F. Demonstrating the interpersonal skills necessary to consistently treat all patients and families, co-workers, other agency personnel, bystanders, and hospital staffs with courtesy, respect and dignity; and to consistently represent Okaloosa County in a professional manner.

6. Field Training Program Expectations of the Field Training Officer

The Field Training Officer (FTO) shall utilize the following guidelines in meeting the Field Training Program goal of orienting the newly hired/promoted paramedic and/or EMT to meet the minimum qualifications to function independently in the Okaloosa County EMS system.

A. Have the Orienteer Run the Scene

Orientees can only be evaluated on their ability to orchestrate scenes if they are actually doing it! Expect that they may require more assistance when the Orienteer begins their rides and be prepared to intervene at any time—but only do so if necessary. Discussion of the events of any call should occur as soon as possible after patient care is completed.

Discussion of the events—whether or not there is any perceived problem—benefits both the Orienteer and the FTO's understanding of that Orienteer.

B. The FTO is Responsible For All of the Orientees Actions

The FTO must be aware of everything that is going on involving the ambulance crew. The FTO must develop a system of communication with the individual Orienteer, which facilitates the FTO being thoroughly informed about the scene. The FTO is expected to take control of any situation that may compromise either the patient or the organization (in the opinion of the FTO).

C. Assist With Patient Care

The FTO should act as a partner for the Orienteer—not just an observer. If the Orienteer has had problems delegating tasks on calls, the FTO may elect to withhold assistance until directed to do so—of course only with the non-critical patients. The FTO should make

**OKALOOSA COUNTY
EMERGENCY MEDICAL SERVICES
STANDARD OPERATING PROCEDURE**

suggestions on how the Orientee may better adjust his/her style to accommodate this EMS system. However, if the Orientee's style is different from the FTO's, the Orientee should not be made to feel that he/she is wrong.

D. Encourage Efficiency

This EMS system relies on the ability of ambulance crews to "Turn Around" rapidly to handle another call. While the FTO needs to orient the new Orientee to this concept, Orientees should not be pushed to rush too much. The FTO needs to realize that new Orientees may in fact need more time on scenes, and more time getting back in service than more "seasoned" veterans do. It may adversely affect patient care to try to push "Turn-around Time" too hard, too fast.

E. Work Up Site

Where the Orientee chooses to initiate treatment is dictated by patient condition, environment, and proximity to the ambulance, proximity to the receiving hospital, resources available, and personal safety. The FTO shall help the Orientee put all of these concepts together to make the appropriate decision for this EMS system.

F. Evaluation

The FTO shall complete an OCEMS Field Training Program Assessment Tool each orientation ride. These evaluations should be completed as soon as possible prior to the end of shift, as to have the most vivid recollection of events. These evaluations should not contain information that has not been discussed with the Orientee. OCEMS Field Training Program Assessment Tools shall be saved to the Orientee's file in the Orientee Evals shared folder and emailed to the EMSFieldTrainer email group. The FTO shall save and update the Orientee's objective packet (which is also found in the Orientee's file in the Orientee Evals shared folder) after each Orientation ride.

G. Communication

The FTO is expected to communicate with the other Orientee's FTO's and coordinate the next rides objectives and goals and to ascertain any details and feedback that may not have been conveyed in the Orientee Performance Reviews. If a scheduling conflict arises, the FTO is expected to contact the Planning and Training Section Coordinator or Commander to assist in rescheduling. The FTO is also expected to communicate with the Planning and Training Section Coordinator and Commander to update them on the progress of the Orientee.

H. Quality Assurance Review

When the FTO does not have an Orientee assigned to them for the shift, he/she is expected to complete quality assurance review of assigned charts on the Triptix program. The reports will be reviewed to ensure Okaloosa County EMS protocols were properly followed, properly completed, and to provide positive and corrective feedback to the report author.

**OKALOOSA COUNTY
EMERGENCY MEDICAL SERVICES
STANDARD OPERATING PROCEDURE**

7. Field Training Officer Minimum Qualifications, Selection, and Removal

A. Minimum Qualifications

To be considered for selection as a Field Training Officer, candidates must have:

1. Two years' experience at current certification level (EMT or Paramedic)
2. One year experience as an Okaloosa County EMS EMT or Paramedic
3. At least 90% attendance to CTP's in last year
4. Not received any reprimands or suspensions within the past two years
5. Instructor Certification in at least one standard course (AHA BLS, AHA ACLS, AHA PALS, NAEMT PHTLS) or must be obtained within 6 months

B. Selection Process

1. Field Training Officer candidates should follow Policy 412.01 Special Team Member Selection/Retention/Removal for the process of applying to the Field Training Officer Team. In addition to that process, candidates will also be interviewed by a panel consisting of current Field Training Officer Team members, the Planning and Training Section Commander, and others (as determined by the Planning and Training Section Commander).
2. A maximum of 16 Full time Field Training Officers will be selected, and they will be spread out equally to all branches and shifts. All efforts will be made to have one EMT and one Paramedic Field Training Officer in each branch on each shift and on different trucks. Additionally, these positions are non-transferrable. A Field Training Officer changing shifts or branches may not be allowed to remain on the Field Training Officer Team. This is to ensure the positions are distributed fairly and evenly. Relief employee Field Training Officer candidates must adhere to the above minimum qualifications and will be considered on a case-by-case basis.
3. After being selected to the team, new Field Training Officers will meet with the Planning and Training Section Commander for training on the program's goal, the expectations of the Field Training Officer, the expectations for the Orientee, and the processes for completing evaluations, forms, and Quality Assurance Review.

C. Field Training Officer Removal

1. A Field Training Officer may be removed from the Field Training Officer Team for:
 - a. Failure to meet the minimum qualifications (as listed above)
 - b. Failure to complete evaluations and documentation in a timely manner
 - c. Failure to meet the expectations of the Field Training Officer (as described above)
 - d. Consistently receiving negative evaluations from his/her Orientees
 - e. Not consistently displaying the attitude or character expected of a Field Training Officer
 2. Additionally, Field Training Officers are volunteer positions serving at the will of the EMS Chief and may be removed from the team at his/her discretion.
 3. Likewise, The EMS Chief may also use discretion under extraordinary circumstances to extend or omit certain qualifications or processes for the operational needs of the team.
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**OKALOOSA COUNTY
EMERGENCY MEDICAL SERVICES
STANDARD OPERATING PROCEDURE**

8. Accountability and Compliance

- A. At the end of each orientation shift, the Field Training Officer will submit and save the new hire's completed OCEMS Field Training Program Assessment Tool to the Orientee's file on the file share and email it to the EMSFieldTraining email group. Similarly, the Field Training Officer shall save the Objective's packet to the Orientee's file on the file share.
1. Any areas that need improvement will need to have suggestions provided to improve that deficiency.
 2. The Field Training Officer's documentation will be reviewed for completeness, future goals, and if it was submitted in a timely manner by the Planning and Training Section Coordinator. This will be tracked to ensure compliance.
- B. The Planning and Training Section Commander is responsible for all aspects of the Field Training Program and its quality.

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