## **Rogers Fire Department Standard Operating Procedures**

**Policy Title:** EMS Provider Remediation Process

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Updated – July 2016 (Removed Practical Evaluation

Group)

Updated - December 2017 (CAAS Reference and Medical

Director Notification) Revised – January 2019

## **PURPOSE**

The purpose of this policy is to establish the process for addressing reported deficiencies in skills or knowledge of Rogers Fire Department emergency medical service providers.

## POLICY

The Rogers Fire Department (RFD) maintains an aggressive emergency medical training program. Any successful EMS program must include a process for addressing identified deficiencies in its medical personnel. The remediation process outlined in this policy may be initiated by the member's company officer, Citywide Tour Commander, or the EMS Program Manager.

Any perceived deficiencies should always be addressed on a company level whenever possible; this should include documented sessions spelling out the issue with the member, the plan for addressing the issue, and the documented results of this process. The Citywide Tour Commander will be kept informed of all aspects of this process and should be available for suggestion, counseling, and guidance. Applying the full strength of this policy shall occur at the discretion of the Citywide Tour Commander.

When a Paramedic or EMT is identified as a potential candidate for remediation, a Performance Evaluation Group (PEG) comprised of his/her Captain, Citywide Tour Commander, and the EMS Program Manager will meet to ascertain the nature of the issue and determine the next appropriate step to address the issue. This group will perform a quality improvement review on a sampling of the member's incident reports from the last two (2) months. This group will also be responsible for reviewing all the remedial documentation taken prior to the QI review.

After this review, if it is determined that further remediation is required, a recommendation will be drafted and submitted to the Deputy Chief of Training. This letter will outline the reasons that the remediation process is necessary and include any documentation supporting that decision. At this stage of remediation the Medical Director will be notified for their input and support.

If it is determined that the member requires additional remediation, they will be referred to the EMS Program Manager for a comprehensive evaluation.

The remediation process will last not less than 15 shifts and no more than 30 shifts. During this time the EMS Program Manager will be responsible for administering regular NWA Regional Protocol evaluations and practical evaluations consistent with RFD Form 60 Schedule A or RFD Form 60 Schedule B, whichever is appropriate.

The remediated member will be assigned to a paramedic preceptor for the duration of the process. This preceptor will be responsible for the evaluation and shift-to-shift training of the remediated member for the duration of the process. It should be understood by the remediated member that the preceptor is acting on behalf of the department and has the final say on patient care and the evaluation of patient care performed. The EMS Program Manager will meet with the preceptor and remediated member at least once every two (2) weeks to keep track of progress and address any concerns of the parties involved.

This remediation process can be halted at any time if it is determined that the member is performing at a proficient level after the minimum time frame of fifteen (15) shifts has been reached. This can be done by agreement of the paramedic preceptor, supervising company officer, Citywide Tour Commander and the EMS Program Manager.

A written examination and another performance evaluation by the PEG are required to complete the remediation process. The PEG will consist of the same members previously utilized. This PEG will again administer pre-approved scenarios until they are confident that they have observed an accurate performance of the member's abilities. After the session, the PEG will document the results of each scenario and summarize their finding. The PEG should include a recommendation of the member's suitability to return to the line as an EMS provider for the Rogers Fire Department.

A final examination will be administered by the EMS Program Manager. This will follow the same guidelines listed above. A final score of 80% must be obtained on this final exam. If the minimum grade on the final examination is not obtained, the member will be referred back to his paramedic preceptor for a minimum of four (4) shifts. One (1) retest can be administered at anytime after the Candidate completes the four (4) shifts.

At the conclusion of the remediation process a written recommendation will be sent to the Fire Chief summarizing the findings of the remediation process. This recommendation will include a summary of the process, the before and after scores of the written exam, a summary of the PEG findings, and an evaluation by the EMS Program Manager concerning the member's ability to function as an emergency medical service provider with the Rogers Fire Department. The final determination of a candidate's suitability to return to work will be made by the Fire Chief.

Failure of the member to successfully complete any portion of the remediation process will result in disciplinary action to be determined by the Fire Chief.

All of these evaluations will be kept strictly confidential. Copies should be maintained in the member's training file.