

Seminole County EMS Group

Paramedic Clinical Assessment Program

2019 Guidelines Document

Revision 05 MAY 2019

Mission Statement

The Paramedic Clinical Assessment Program provides each agency with a systematic preparation and evaluation program to incorporate new paramedics into the Seminole County EMS System. The program combines on the job field training, training and supervised practice to enable them to assume the duties of an autonomous paramedic within the Seminole County EMS System.

This program uses standardized evaluation guidelines designed to identify strengths, weaknesses and training needs of those paramedics new to the Seminole County System. It includes supervised observation and training provided by program mentors to help the provisional medic develop the skills and abilities necessary for independent practice within the system.

The members of the Seminole County Emergency Medical Services System are committed to the principles of the Paramedic Clinical Assessment Program. This training process is necessary for the effective and seamless operation in the delivery of care to the citizens of Seminole County.

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Goals

The Seminole County Emergency Medical System Paramedic Clinical Assessment Program (PCAP) is a program designed to meet following goals;

- It provides a standard process among all agencies for the orderly, systematic training of all new paramedics to incorporate them into the Seminole County EMS System.
- To produce highly trained and motivated paramedics, capable of providing state of the art medical care based on the standards established by the Seminole County Medical Director.
- To provide equal and standardized training to all newly licensed paramedics, newly employed paramedics, and provides a framework to outline remedial training as needed.
- To build on the foundation of knowledge given in paramedic school, thereby, creating an environment in which the provisional paramedic may develop new skills as well as increase proficiency in those acquired in the academic setting.
- It improves the departmental screening process by providing on-the-job observation the provisional paramedic's performance.
- To establish an evaluation system, which is valid, job related, utilizing a standardized and systematic approach to the documented measurement of the provisional paramedic's performance.
- To support career paths within the department by providing qualified paramedics the chance to become mentors thereby allowing for additional training and opportunities to develop leadership skills.
- To ultimately improve the overall efficiency and effectiveness of the Department by enhancing the climate of professionalism and competency demanded by the ethical standards of Emergency Medical Services.

Program Overview

The Seminole County Paramedic Clinical Assessment Program provides a framework to assess new graduates or newly employed paramedics in their knowledge, skills and abilities as they relate to the expectations required of paramedics working independently in the Seminole County EMS System.

All personnel are required to be competent in the foundation knowledge and skills as outlined in the National and State paramedic education guidelines. This program is not intended to teach an employee to be a paramedic. Its sole purpose is to refine the knowledge, skills and abilities of personnel new to the Seminole County EMS System so they are able to assume an independent practice role as authorized by the Medical Director.

Each agency will be responsible for the training of their new paramedics in accordance with the guidelines within this document. Upon completion of the program all necessary materials, reports and supporting documentation are submitted to the person responsible for records management of the Seminole County EMS System before issuing the certification release letter.

The PCAP Program consists of the following positions, which have various duties and responsibilities. Position descriptions are briefly outlined below and do not contain the total duty responsibilities for each level.

Paramedic Clinical Assessment Program Roles and Responsibilities:

Medical Director

- Is responsible for the overall PCAP oversight.
- Will perform call reviews with the provisional paramedic and sign off on run reviews.
- Is the final authority to approve the release of the provisional paramedic.
- Is the final authority to approve personnel to perform mentor duties.

Agency EMS Officer

- Has the agency oversight and management of the PCAP Program.
- Manage the mentoring process in concert with each shift's leadership.

Station/Shift Supervisor

- The Station / Shift Supervisor (EMT or Paramedic), will participate in an advisory capacity to the mentor and provisional paramedic regarding agency specific policies, procedures or mandates.
- Has oversight of the day-to-day training and supervised practice between the shift mentor and the provisional paramedic.
- Is responsible for the review, accuracy, and complete submission of all mentoring documents/supporting materials prior to the provisional paramedic's release.

Paramedic Field Training Mentor

- The mentor is the primary overseer of the training and evaluation of the provisional paramedic. He/she provides daily training and guidance to the provisional paramedic.
- The mentor must complete the Daily Performance Evaluation Report providing feedback to the provisional paramedic on their performance. This form must be signed by both the mentor and the provisional paramedic each shift.
- The mentor is responsible that all check offs, ALS contacts and goals of the program are met. He/she is responsible for completing required training and documentation.

- The mentor will work closely with shift supervisor and the EMS Officer providing progress reports of the provisional paramedic and identifying deficient performance areas as well as determining when the provisional paramedic is prepared for the paramedic knowledge test, skills check offs and final scenario test prior to release as an independent paramedic.

Provisional Paramedic

- The provisional paramedic is responsible to be familiar with all aspects of their PCAP manual and **is ultimately responsible** for his or her own development. He/she is responsible to review, learn and develop the skills needed to practice as an independent paramedic in the Seminole County EMS System. Although the mentor and station/shift supervisor facilitates daily training and supervised performance it is still the provisional paramedic's responsibility to be prepared to meet the expectations and perform in an acceptable fashion within the program.
- He/she will coordinate with their mentor in keeping their PCAP manual current with the Daily Performance Evaluation Reports, ALS contact forms and skills check forms.
- During the PCAP program, the provisional paramedic is expected to develop a thorough knowledge on the Seminole County Practice Parameters as they relate to the delivery of medical care in Seminole County. The mentor will evaluate the provisional paramedic's performance and knowledge at regular intervals.
- Self-Motivation – the program layout allows the provisional paramedics to know the expectations at any point in their training. They are encouraged to be ready for any assessment of procedures, parameters, etc.

Program Phases

Documentation to Initiate PCAP Program

Florida Certified Paramedics employed by a Seminole County Fire/EMS Agency must submit the following documentation to initiate the PCAP Program.

- Copy of current AHA or state accepted equivalent ACLS provider card.
- Copy of the current National Registry and State paramedic certification.
- Authorization from the Agency's shift leadership to begin the mentoring process.

The PCAP Program is broken down into three separate phases described below. This format utilizes a building block approach to the development of the provisional paramedic. Each subsequent phase builds upon the previous portion therefore, it is important to have a solid foundation before the provisional paramedic is allowed to move into the next phase.

Phase I

Objective

The first phase is where the provisional paramedic learns the parameters and procedures specific to SCEMS. He/she will concentrate on becoming familiar with the Seminole County Practice Parameters, various responsibilities of the paramedic position as well as the skills that are necessary when performing in the capacity of paramedic.

Major Tasks

- Learn the Seminole County EMS Practice Parameters.
- Complete a comprehensive review of each parameter with the mentor. The mentor signs off on each parameter as the provisional paramedic demonstrate competence on the subject. This is done in preparation for the paramedic protocol knowledge test at the conclusion of the mentoring program.
- Develop knowledge of the assigned ALS equipment, its operation and troubleshooting.
- Become intimately familiar with records management software, ALS documentation and reports.
- Concentrate in developing/enhancing patient assessment skills.
- Perform advanced care skills, medication administration, etc. under the close supervision of the mentor.

Advanced Skills

- Complete patient assessments
- Advanced airway procedures and airway management
- IV/IO initiation and maintenance
- Rhythm recognition
- Defibrillations/cardioversion/pacing
- Pharmacology

Phase II**Objective**

The focus of this and the next phase is to develop the provisional paramedic as a leader. This phase reinforces the skills in Phase I while concentrating on critical thinking skills. In this phase, the provisional paramedic will take on more responsibilities of patient management with emphasis on a systematic approach to patient assessment. They begin to assume their role as the crew leader and “directing” the call. He/she focuses on patient assessment and the history-taking interview, establishing a comfort level with these extremely important skills. In this phase, the provisional paramedic is not expected to routinely perform basic mechanical skills but rather focus on managing the patient and assessment/interview process.

Major Tasks

- The provisional paramedic transitions into the lead paramedic role.
- Refine his/her systematic approach to patient assessments.
- He/she assumes scene control, including patient/bystander safety.
- Develop the ability to recognize the critical patient and initiating immediate needed interventions.
- Manage the patient management during the transport phase of the incident.
- Orchestrate the management of multiple rescuers during patient care activities.
- Become familiar in the role of rescue officer in charge of a unit.
- Demonstrate competence in the following areas:
 - Radio report / face to face report
 - Develop skills to accurately provide a patient hand-off report
 - Electronic report writing program
 - Proper report writing/documentation of all skills
 - Transport paperwork (patient information)

Advanced Skills

- Achieve mastery in completing thorough patient assessments.
- Develop skills to manage the overall scene.

Phase III

Objectives

In this final phase, the provisional paramedic will handle all calls in a manner consistent with those of an independent paramedic. The mentor will monitor their actions and not interfere with the care except in the event of an inappropriate or unsafe condition occurs. The mentor will also take action in instances where it is necessary to avoid liability or danger. The mentor is not to train the provisional paramedic during this period, although providing feedback is acceptable.

Major Tasks

- He/she demonstrates logical thought process relating to treatment and refusals.
- He/she demonstrates proficiency in his/her knowledge of Seminole County EMS Practice Parameters through appropriate incident management.
- Functions with little or no intervention from the mentor in an independent but supervised capacity.

Program Completion

When the mentor and provisional paramedic feel comfortable with his/her performance, the provisional paramedic must then successfully undergo the following testing and evaluation activities:

- Complete a timed 100 item written paramedic protocol knowledge test.
 - The test will include material from the Practice Parameters, ACLS, PEPP, and PHTLS manuals.
 - Two-Hour completion timeframe.
- Complete a static ECG recognition and identification test.
- ALS Skills qualification checks (skills check offs).
- Scenario based final evaluation with dynamic ECG identification evaluation (megacode).

In addition, the provisional paramedic must provide the following clinical documentation (these activities are completed at any point during PCAP):

- Review with Medical Director five (5) patient care reports. Two (2) of the reports for review must be informed refusals of care.
 - The provisional paramedic is responsible for the completion of all reports for review in their entirety.
 - The Medical Director must sign off each report individually.
- Attendance to three (3) Medical Director Meetings (spread throughout the entire process). The provisional paramedic must complete and provide the PCAP MD meeting roster form submitted with the final documentation packet.
- Complete fifteen (15) ALS patient contact forms; one of them being an informed refusal (does not have to be ALS patient). The provisional paramedic is responsible for the completion of the ALS contact forms; the mentor must review and sign off each contact.

Additional Documentation:

- Submit one daily performance evaluation form for each 24 hr shift during the PCAP process. The mentor is responsible to complete the form and discuss it with the provisional paramedic. The provisional paramedic is responsible to review the feedback provided and sign the form acknowledging receipt of the information.
- The provisional paramedic must also provide a signed "Completion of Seminole County EMS Provisional Requirements" form.
- He/she also must complete and submit a "Mentor Evaluation Form".

Phase Progression

The provisional paramedic performs under the supervision and direction of the mentor and station supervisor throughout the phases. These phases are fluid in nature and can progress at a pace suitable for learning and developing skills at different rates consistent with the expectations and needs of the department. Individuals learn and develop skills at different rates but are expected to progress satisfactorily during the probationary period established by each department. The mentor guides the PCAP process to meet the needs of the individual. Once the individual has completed all of the cognitive, psychomotor, affective knowledge and skills, the mentor submits a final report via the station supervisor and the chain of command to the Agency EMS Officer to schedule a final evaluation assessment for the provisional paramedic.

Upon successful completion of the final testing and evaluation and all documentation has been submitted, a recommendation is submitted to the Medical Director for the approval and release of the provisional paramedic.

Program Length

PCAP is designed to be fluid in nature, giving the provisional paramedic the opportunity to progress at his/her pace in order to effectively develop the skills and abilities necessary to perform independently as a paramedic. The program takes at a minimum ten (10) 24-hour shifts. There are no specific maximum time requirements however, the majority of individuals are able to complete the requirements in approximately 10-30 (24 hr) shifts. The ultimate decision on PCAP mentoring length is person and agency specific.

Assignment of Mentors

The EMS Officer and the respective agency's leadership of the provisional paramedic are responsible to select a mentor from a cadre of qualified paramedics to oversee the PCAP process based on operational needs, station availability and human dynamics. The goal is to complete the PCAP process with a minimal disruption of shift operations and personnel.

Mentor Evaluation Form

The provisional paramedic must complete an evaluation of their mentor upon completion of the precepting process. The information contained within this evaluation is used to provide training feedback to the mentor and to strengthen the PCAP process. The form itself or specific comments are not to be shared directly with the mentor. We urge the provisional paramedic to provide an honest appraisal of their mentor abilities and experience.

Daily Performance Evaluation Report

The provisional paramedic is given daily performance evaluation using the Daily Performance Evaluation Report. The provisional paramedic's daily assessment is based on his/her abilities. He/she should not be compared to tenured paramedics nor will they be compared to their peers. This form provides the provisional paramedic feedback on his/her performance and recommendations to improve or refine their skills and abilities.

At the completion of each shift the mentor will meet with the provisional paramedic and discuss the evaluation. The provisional paramedic and the mentor must sign the daily evaluation. These are maintained in the provisional paramedic manual in date order.

Appeal Procedure

In the event that a provisional paramedic feels that a problem exists with the mentor and/or a performance rating or comment on the Daily Performance Evaluation Report is inaccurate or does not fully explain a particular incident the provisional paramedic may submit a request to the Station/Shift Supervisor for review of the report with the EMS Officer. This procedure will only be used if the provisional paramedic has discussed the situation fully with their mentor, supervisor, and they feel the matter needs to be reviewed further by the Agency's EMS Officer.

Field Training Mentor Qualifications

The opportunity to precept can be challenging and rewarding experience for a paramedic's professional career. It offers exposure to new and different thinking styles, knowledge, perspectives, and experiences for the provisional paramedic as well as the mentor. PCAP mentors are the standard to which all provisional paramedics wish to achieve and therefore should be well rounded in every aspect of their position. A highly motivated program requires highly motivated mentors.

Mandatory Qualifications

- Have a minimum of one (1) year experience as an autonomous paramedic within the Seminole County EMS System.
- Must have an overall satisfactory rating on their last two most recent performance evaluations.
- Must have the positive endorsement of their Lieutenant and Battalion Chief.
- Must not have any standard of care incidents or problems resulting in formal counseling or discipline issued within the last 12 months, as indicated by the Medical Director.
- Must possess excellent written and verbal communication skills.
- Must maintain confidentiality.
- Must agree to attend mentor training as outlined by the Medical Director.

Desired Qualifications

- Florida State Instructor I, II or III Certificate or other recognized teaching credentials.
- Instructor certifications in EMS disciplines such as BLS, ACLS, PALS, PEPP, PHTLS.

Appointment Process

Qualified Paramedics wishing to serve as a Paramedic Field Training Mentor must submit a written request to their Station / Shift Supervisor. The request must outline their reasons for wanting to serve as a mentor and their qualifications and have a resume attached. All mentors must have the positive endorsement of their supervisor and Battalion Chief for consideration. The documentation is then be forwarded to the Agency's EMS Officer for review and confirmation of qualifications. The completed package is submitted to the Medical Director for final approval. In the event that no paramedics volunteer to serve as Paramedic Field Training Mentors, each department reserves the right to assign qualified paramedics at their discretion to serve in that capacity in order to preserve the level of service and the operational needs of the agency.

Voluntary Removal or Resignation of a Paramedic Field Training Mentor

The Paramedic Field Training Mentor must make a request in writing to agency's EMS Officer for the resignation request. The decision to accept removal or resignation is based on the current number of provisional paramedics and quantity of Paramedic Field Training Mentors available subject to the agency's operational needs and at the discretion of each department's leadership.

Involuntary Removal of a Paramedic Field Training Mentor

The Station/Shift Lieutenant can submit a request via the chain of command to have a Paramedic Field Training Mentor removed from that position through the agency's EMS Officer to the Medical Director. The EMS Officer will investigate the reasons for the requested removal. The affected Paramedic Field Training Mentor is given the opportunity to state their case to the EMS Officer, the respective Battalion/Division Chiefs and the Medical Director.

Based on the review of the circumstances and/or reasons for the request, the EMS Officer and shift leadership will offer a recommendation to the Medical Director. The Medical Director will issue the final decision in one of three categories:

- Allow the mentor to continue to serve in their same capacity.
- Provide the mentor with additional training or guidance to improve their performance up to the Medical Director standards.
- Suspend the mentor's field training responsibilities.

Precepting Paramedic Students

The Seminole County Emergency Medical System understands the need for qualified mentors for paramedic students in the Central Florida area. Each agency's first obligation is to precept the provisional paramedics within their ranks and to provide clinical ride time to current employees attending the paramedic program. Agencies will make every effort to support students from the local programs. Whenever students are allowed to complete clinical hours with an agency the following rules will apply:

- All ride times will be coordinated with the Agency's EMS Officer or their designee.
- There will not be a student placed with a mentor that is concurrently precepting a provisional paramedic. This is not fair to the student, provisional paramedic, or mentor.
- An employee that is also a paramedic student is under the school's liability while riding as a student. However, they are still expected to follow the same rules and policies as an employee, (i.e. cell phones, computer policies, etc). They should make good use of their down time at the station by studying. They are not assigned chores but can help. They are expected to pitch in at meals, etc. They must wear their school approved uniform when riding as a student.
- A student is expected to uphold their school contract with a mentor just as much as the mentor is expected to uphold the said contract. Ride times are scheduled in advance and should strictly be adhered to. Any circumstances beyond either the student's or the mentor's control (i.e. illness, emergencies) will be handled as the need arises. The student will be responsible to notify the college (as per college guidelines) and notify their assigned station of the event.
- The student clinical experiences will be in accordance with Chapter 64J-1.020 (a) (b), Florida Administrative Code (2008 Revision):
 - *EMT/Paramedic students are not subject to call while participating in class, clinical or field sessions. (During class, clinical or field sessions the student shall not engage on any activities other than those that are program related).*
 - *Each applicant shall demonstrate that each EMT and paramedic student function under the direct supervision of an EMS preceptor and shall not be in the patient compartment alone during patient transport and shall not be used to meet staffing requirements.*

The host agency holds the right to dismiss a student from a clinical riding experience for just cause. The Station / Shift Supervisor will notify their respective chain of command and forward a written statement to the EMS Officer with the details of the problem or misconduct. The EMS Officer will notify and discuss the events with the College's Clinical Coordinator for further actions.

**Streamlined Provisional
Clinical Assessment Program for
Previously Certified SCEMS Paramedics**

**Streamlined Provisional Clinical Assessment Program
for Previously Certified SCEMS Paramedics**

The Seminole County Emergency Medical Services System recognizes the importance of proper training and mentoring of all employees using a standard process and methodology. There are however, instances where employees leave employment with a Seminole County Agency, are on extended leave or furlough and are returning to work or being hired back as a returning employee to one of the SCEMS agencies. SCEMS also recognizes that returning employees who left in good standing have a good foundation knowledge of the system and can easily be mentored and updated in a streamlined PCAP process. Because these cases are extremely different each instance will be reviewed by the Agency EMS Officer in concert with the Medical Director to determine if the individual is eligible for streamlined PCAP process. The Medical Director reserves the right and has the final authority to require a full PCAP mentoring process from any returning employee without cause.

The following guidelines will assist the EMS Officer of each agency determine if a Streamlined Provisional Clinical Assessment Program is warranted for a returning employee:

Requirements:

- Must have been employed by or on an active roster status with a Seminole County Agency within the last 24 calendar months. Employees who were terminated at any time or have been separated from employment for a period greater than 24 months are not eligible for this program.
- Must have been actively practicing as Seminole County Certified Paramedic for at least 12 months prior to resignation or entering into extended leave from a Seminole County Agency.
- Must have been at the time of resignation or placed on an inactive or extended leave status in good standing as a Seminole County Certified Paramedic.
- Must not have or ever have had any pending or completed disciplinary actions against their Florida Paramedic Certificate from another agency, or any Federal and/or State Regulatory Agency.
- Must be current in BLS-Healthcare Provider and ACLS Provider certifications.

Employees meeting the above Criteria will be able to complete the Streamlined PCAP Program. These employees will be required to complete the following:

- Successful completion of the Seminole County Paramedic Knowledge Test and static ECG Recognition test.
- Supervised precepting by a Field Training Mentor for a maximum of ten (10) shifts (24 hrs each) at a Phase III performance level (independent patient management). Length of mentoring will be determined by the Field Training Mentor, the Station/Shift supervisor and Agency's EMS Officer and will be based on the evaluation of skills, ability to perform independently and competency in managing all phases of patient care based on the Seminole County Practice Parameters and National Paramedic Curriculum.
- Complete five (5) ALS Patient Contacts, one of them being an informed refusal of care.
- Have a Daily Performance Evaluation Report completed for each day of the streamlined mentoring process.
- If at the conclusion of ten (10) 24 hour shifts, the employee has not reached full independent performance level competency, the employee will then be required to undergo the full PCAP mentoring process. It is important to stress that this streamlined mentoring period will not be extended beyond the initial ten (10) shifts.
- At the completion of the Streamlined PCAP Process, the Provisional Paramedic must submit a Mentor Evaluation Form, a signed Completion of Seminole County EMS Provisional Requirements along with the ALS Patient Contact forms and the Daily Performance Evaluation Reports to the Agency's EMS officer prior to being released.

Forms Appendix

PCAP Completion Checklist

Name: _____

Date: _____

The provisional paramedic participating in the Provisional Clinical Assessment Program must perform under the supervision of a Paramedic Field Training Mentor for a minimum of ten (10) 24-hour shifts.

Documentation to Initiate PCAP Program

- Copy of current AHA or Sstate accepted equivalent ACLS provider card
- Copy of the current State paramedic certification

Completion Evaluation

When the mentor and provisional paramedic feel comfortable with his/her performance, the provisional paramedic must then successfully undergo the following testing and evaluation activities:

- Complete a timed 100 item written paramedic protocol knowledge test.
- Complete a static ECG recognition and identification test.
- ALS Skills qualification checks (skills check offs).
- Scenario based final evaluation with dynamic ECG identification evaluation (megacode).

Documentation

The following activities must be completed and documents submitted with the final PCAP packet to EMS Performance Management before being released as a County Certified Paramedic:

- Medical Director Meeting Roster documenting three separate meetings and five (5) reports reviewed by the Medical Director three (3) of those being transports and two (2) of those must be informed refusals. The Medical Director must sign off the copy of the reviewed reports; attach these reports must to the roster.
- Fifteen (15) completed ALS Patient Contact Forms, one of them being an informed refusal (the refusal could be of a BLS patient). The ALS contact forms are to be completed by the provisional paramedic, then reviewed and signed off by the mentor.
- Completed Practice Parameter, equipment, and procedure evaluation forms.
- One Daily Performance Evaluation Form completed by the mentor for each 24 hr shift period during the PCAP process.
- Signed Completion of Seminole County EMS Provisional Requirements form.

The provisional paramedic must complete and submit to the agency EMS Officer:

- Completed Mentor Evaluation Form.

Streamlined PCAP Process Checklist

Name: _____

Date: _____

The provisional paramedic participating in the Streamlined Provisional Clinical Assessment Program must perform at a Phase III (independent level of practice-see below) under the supervision of a paramedic field-training mentor for a maximum of ten (10) 24 hour shifts. In the event that the provisional paramedic is not ready to be released at the conclusion of this period, the employee must then undergo a complete PCAP mentoring process.

Phase III Objectives

During this phase, the provisional paramedic will handle all calls as an independent paramedic. The mentor will monitor their actions and not interfere except in the event of an inappropriate or unsafe condition occurs. The mentor will also take action in instances where it is necessary to avoid liability or danger. The mentor will not be expected to train the provisional paramedic during this period, although feedback will be given.

- Demonstrates logical thought process relating to treatment and refusals.
- Demonstrates proficiency in their knowledge of Seminole County EMS Practice Parameters through appropriate incident management.
- Functions with minimal or no intervention from the mentor.

Below is checklist of activities and documentation needed to complete the streamlined PCAP process:

- Successfully complete the Seminole County EMS Paramedic Protocol Knowledge Test and Static ECG Recognition Test.
- The provisional paramedic performs at an independent level of practice under supervision of a paramedic field training mentor.
- Complete five (5) ALS patient Contacts - one of them being an informed refusal.
- Have a Daily Performance Evaluation Form completed for each 24 hr shift of streamlined PCAP process.
- At the conclusion of the streamlined PCAP process, the field training mentor, the station/shift supervisor will offer a recommendation to the Agency EMS Officer as to whether to release or retain the provisional paramedic.

The following documents must also be submitted to the Agency EMS Officer before being released as a County Certified Paramedic:

- Two (2) Patient Care Report reviewed by the Medical Director. one (1) ALS and one (1) an informed refusal of care.
- One completed Daily Performance Evaluation Form for each 24 hr shift period during the streamlined PCAP process.
- A Completed Mentor Evaluation Form.
- A signed Completion of Seminole County EMS Provisional Requirements form.

PCAP Medical Director Attendance Form

**Seminole County EMS Clinical Assessment Program
Face-to-Face Medical Director Meeting Attendance Record**

Name: _____ Mentor: _____

Agency: (CIRCLE ONE) CFD LFD LMFD OFD SCFD SFD

Call documentation reviewed for the purposes of Paramedic Clinical Assessment Program
must be completed by the provisional paramedic

	1 ST Meeting	2 ND Meeting	3 RD Meeting
DATE:			
LOCATION:			
SHIFT:			
# Runs Rev.			
IR#			
IR#			
IR#			
MD's INITIALS			

This form must be signed by the Medical Director and submitted to the records manager prior to provisional release.