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This policy establishes guidelines for Attendant Level Paramedics who have successfully completed the requirements to enter the ICE process and are awaiting final assignment to a preceptor. It is to be viewed as a provisional in-charge position typically occupied by an individual for a period of 3 – 6 months and should not to exceed 12 months.

General Information

The purpose of the Paramedic I position is to allow successful ICE candidates to grow professionally while waiting to complete the In-Charge Evaluation process. These individuals should have successfully completed each phase of the initial promotional requirements and have demonstrated Operational and Clinical proficiency as documented by Field evaluations and testing requirements. Entry into the evaluation process may be delayed for numerous reasons including but not limited to the following:

- The number of employee vacancies in the Operations Division of MCHD may indefinitely delay assignment to a preceptor
- No preceptors are available to evaluate the candidate
- The candidate may have personal considerations that delay the evaluation process


All Paramedic-I candidates completing the promotional requirements will be temporarily authorized to work at the Paramedic I level and may staff a unit with other employees within the MCHD organization at the following levels:

- Employees authorized at the Paramedic I position
- Employees authorized at the Paramedic II position or higher

Under **no circumstances** will a Paramedic I be allowed to staff an MICU within the 9-1-1 system with any attendant level employee including EMT-B, EMT-I and EMT-P **unless** they are assigned to a **transfer unit** for a designated shift. While staffing a transfer unit the Paramedic I should operate within the system under the guidelines already established by the Assistant Director EMS-Operations.

Once a candidate meets all of these requirements he/she should write a letter to the Clinical Department that includes:

- What skills would you want your ideal P-I to have
- What qualities make a good P-I
- Why he/she wants to become a P-I
- Brief summary of past experiences that might qualify applicants for the position (may be non-EMS related)
- Strengths and weaknesses of the applicant and how they may impact ability to perform at this level


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When the Clinical Department receives a letter of intent from a P-I candidate the following should occur:

- Verify applicant is in good standing with all MCHD departments
- Verify status of DSHS certification on DSHS website
- Evaluation of documentation compliance
- Verify attendance of all mandatory C.E. Classes
- Verification of mandatory card classes as well as number of classes taught
- Analyze transport and refusal ratios in relation to peers
- Review field and station evaluation scores as documented by supervisors
- Review past annual performance evaluations

The following process will be implemented to ensure that each candidate has been evaluated by a preceptor before receiving Clinical Authorization at the Paramedic I Level including but not limited to the following:

- The Paramedic I candidate is working with a Paramedic II and the preceptor rides as a third member of the crew to obtain evaluations. In this instance the Paramedic I candidate should assume the responsibility of patient care for **all** responses. The preceptor should be authorized at the Paramedic II level or higher and is responsible for completing the appropriate evaluation forms that may include station and truck inspections as well as patient care evaluations.
- Two Paramedic I candidates may be assigned to an MICU with a preceptor riding third for the entire shift. The preceptor should be authorized at the Paramedic II level or higher and is responsible for completing the appropriate evaluation forms that may include station and truck inspections as well as patient care. In this instance the Paramedic I candidates should alternate responsibility for patient care so evaluations may be obtained on each candidate. When a preceptor is evaluating two (2) Paramedic I applicants the crew may be evaluated for decision making as a team as well as individually while providing patient care.
- Candidates may be authorized at the Paramedic I level for up to one year at the discretion of the Medical Director and/or Assistant Director EMS-Clinical Services if a preceptor identifies areas of improvement for the candidate. During this time the Paramedic I candidate may have specific goals and tasks to accomplish. At the end of the recommended time period the candidate may re-enter the formal ICE process assigned to a preceptor for a final evaluation period. If the candidate is successful he/she will complete the ICE process and be authorized at the Paramedic II level with a 90-day probationary period required by policy for all promotional processes within the MCHD organization. If the candidate is unsuccessful he/she will be re-authorized at the attendant paramedic level and cannot re-apply to the Paramedic I or ICE program for one (1) year.

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Although the Paramedic I position is not intended to be a permanent assignment there are other benefits for employees as well as the organization that can be identified including:

- Employees who have successfully completed the required objectives may request to remain at the Paramedic I level for up to 30-60 days to have an opportunity to gain additional experience before entering the formal ICE process. These individuals should have documentation of proficiency from a preceptor at the Paramedic-II level or higher.
- MICU's may be staffed with two (2) employees authorized at the Paramedic I level which allows staff the opportunity to gain additional experience as well as allowing greater flexibility within the organization for staffing purposes.

It should be noted that all decisions for medical authorization within the organization are at the discretion of the Medical Director and the Assistant Director EMS-Clinical Services and may reflect what is in the best interest of the MCHD organization.