

**Com-Care Emergency Medical Services
Job Description/Performance Evaluation**

Job Name, Position, Title: **Emergency Medical Technician- Paramedic, Full Time**

Supervisor: **Shift Supervisor / Director**

Evaluated By: **Director / Shift Supervisors**

Qualifications: **An Emergency Medical Technician- Paramedic must be
Currently licensed in the state of Kentucky and have a
Current ACLS and BLS certification.**

Employee: _____ Hire Date: _____ Appraisal Date: _____

Appraisal Type: 90 Day Annual Other (specify) _____

Performance will be scored for each objective listed using the performance rating scale of 0 to 4 with pre-defined criteria for each score value.

Responsibilities/Objectives (Weight 30%)	Rating
A. Supports the mission, policies, and procedures established by Ohio County EMS	
B. Acts as a preceptor for new employees and EMT-P students while adhering to set Policy for a preceptor site.	
C. Observes patient clinical signs and symptoms and communicates these effectively to receiving medical facility of higher level of Pre-Hospital Care.	
D. Completes all required documentation for each patient/activity/run performed and turns in all run forms and associated paperwork within the time frame specified in agency policy. (SUPV)	
E. Maintains clean and neat work area at assigned station to insure a clean and safe work environment (SUPV)	
F. Interacts professionally with 911 dispatch and adheres to all communications protocols.	
G. Maintains a clean, safe, and well stocked Ambulance during their shift. Completing All shift Check documentation prior to end of the assigned shift. (SUPV)	
H. Provides Advanced Life Support in Emergency and Non-Emergency situations According to established Medical Protocols	
I. Responds promptly to all Emergency and Non-Emergency calls, Adhering to Service policy regarding in-service times. (SUPV)	
J. While On-Call, Responds to their assigned Station within required time of being notified and adheres to all On-Call policies. (ALL SUPV)	

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Job Knowledge- Training/Objectives

Weight 30%

A. Must demonstrate knowledge and proficiency in driving of Ambulance in emergency and non-emergency situations. (SUPV)	
B. Must know and practice the proper techniques of moving, repositioning, and transferring of patients from and to bed, stretcher and/or wheelchair. Practices safe and effective lifting techniques.	
C. Performs Advanced Life Support procedures such as IV's, Intubations and other Skills as described in Medical Protocol as an Advanced procedure with minimal Difficulty.	
D. Demonstrates knowledge of Universal Precautions and Infection Control practices in preventing the spread of disease/infections among employees, patients, family members and other Health Care providers.	
E. Must know the correct procedure for documentation of daily ambulance check sheets including checking of call truck. (SUPV)	
F. Establishes early ALS Intervention/ Care on Medical emergencies by providing Oxygen, Monitor and initial assessment within 10 minutes of arrival.	
G. Must demonstrate knowledge of proper procedures for immobilization and patient packaging as directed by agency medical protocol.	
H. Must demonstrate knowledge of Advanced Life support procedures according to Established Medical Protocols. Has good knowledge of all medical protocols.	
I. Participates in Service – Sponsored training and attends Medical staff meetings To increase ALS skills and knowledge.	
J. Constantly strives to maintain and increase job related skills and knowledge by attending all in-service and educational programs offered by the agency.	

Interpersonal Relations/Objectives (Weight 20%)	Rating
A. Initiates and promotes effective working relationships by utilizing appropriate Interpersonal communication skills with all staff members. (SUPV)	
B. Identifies and initiates resolution of conflict with self and others using appropriate Channels of communication.	
C. Demonstrates a positive attitude toward supervision, instruction and is cooperative with implementing new and/or revised policies and procedures. (SUPV)	
D. Presents a professional and well groomed appearance abiding by Com-Care's dress code while at work. (SUPV)	
E. Interacts appropriately with patients, family members and visitors in the patient's Home, office or other Health Care locations.	
F. Promotes patient privacy and maintains confidentiality of patient and employee Information by complying with the Confidentiality policy.	
G. Assumes responsibility for personal growth and accountability by identifying own Strengths and weaknesses.	

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Attendance/Punctuality (Weight 20%)	
A. Reports to work as scheduled and works time scheduled. Clocks in by time scheduled. (SUPV)	
B. Promptly notifies the appropriate staff member/supervisor in the event of illness/absence, abiding by set agency policy providing adequate time for supervisor to find a replacement. (ALL SUPV)	
C. Absenteeism is infrequent and for just reason, with no unexcused absences. (MARCUS)	
D. Attends all staff, management and committee meetings and mandatory in-services unless excused by the Shift Supervisor or Director.	

Working Environment:

This person will be working primarily in the community setting. A possibility of cuts or minor burns, or other related injury from instruments and equipment exist. This person may be exposed to communicable diseases and identified hazardous material and extremes in weather. There is a possibility of strains due to moving patients, prolonged standing, sitting, lifting, or injury from irrational patients. This person must have a car and the ability to drive it, and be responsible for providing proof of automobile insurance coverage.

Special Notation:

This job description is not intended to be all-inclusive, and employees may also perform other reasonably related business responsibilities/duties as assigned by their immediate supervisor and/or other management as required.

Disclaimer:

This service reserves the right to revise or change the job duties as the need arises. This job description does not constitute a written or implied contract of employment.

I have read and understand the above mentioned qualifications and requirements for this job position. I meet or exceed the qualifications outlined in this job description, and am willing to carry out these specifications in accordance with the agency's policy and procedure.

Signature

Date

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Performance Rating Summary

Areas Rated	Total Points	Divided by:	Total Possible	=Performance Rating	x Weight	Merit Index
Responsibilities			40		x 30%	
Job Knowledge			40		x 30%	
Interpersonal Relations			28		x 20%	
Attendance/Punctuality			16		x 20%	

Total Performance Appraisal Score _____

Evaluator's/Supervisor's Comments:

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Employee Comments:

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Action Plan

Problem/Need	Intervention	Date for Review/Resolution
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Employee Signature: _____ Date: _____

Director's Signature: _____ Date: _____

Administrator's Signature: _____ Date: _____

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