



Field Evaluation Criteria

5 Call Evaluation Process

CVEMSA requires a candidate for local accreditation be evaluated during 5 ALS patient contact calls. All patient contact must be observed and documented by a CVEMSA-approved Preceptor/Evaluator. The Evaluator must approve the candidate's performance and document a recommendation to accredit or not accredit based on the observed performance. At the end of the field evaluation the accreditation candidate will meet with EMS Agency Medical Director or designee and review all forms and patient care reports required for accreditation. If there are any issues identified during the accreditation interview, the EMS Agency may contact the Evaluator for clarification. The Evaluator may be required to attend the accreditation interview at the discretion of the Medical Director.

Extension of the 5 Call Evaluation

The Evaluator and/or the EMS Agency may extend the field evaluation process up to an additional 5 ALS calls, to a maximum of 10, when deemed appropriate. This would be when it is deemed that more time and/or patient contacts are needed to determine if the paramedic meets the passing standards.

Pass/Fail Criteria

The purpose of the field evaluation is to determine if the paramedic is knowledgeable to begin functioning under the local policies and procedures. New paramedics must demonstrate proficiency at the level of a "safe beginner" as a minimum standard of clinical competence. Any paramedic unable to meet this basic level of safe practice should not be recommended for local accreditation. The CVEMSA Medical Director will evaluate any candidate who does not successfully complete the field evaluation.

ALS Contact Criteria

All ALS calls must be performed under the guidance of an EMS Agency approved Preceptor/Evaluator. The EMS Agency will count ALS calls in which a paramedic assessed a patient and initiated direct ALS intervention. These skills include: IV/IO access, medication administration, cardioversion, defibrillation, intubation including King Airway and/or i-gel supraglottic airway. ALS skills used to qualify a patient contact for inclusion must be successfully performed. Blood glucose determination **will not** be counted towards a 'contact' if done without any other intervention.

The EMS Agency will accept one call in which a paramedic candidate does not complete ALS intervention but completes a thorough ALS patient assessment. Ideally, the EMS Agency would like to review 5 ALS intervention calls. However, in the rare circumstance a candidate did not complete an ALS skill due to a short transport to an Emergency Department or the candidate completes an AMA involving an in-depth medical assessment without interventions, the paramedic will complete a one-page written report (see next page) documenting their assessment process, anticipated treatment plan and critical decision making. This report will be reviewed and approved by the Preceptor/Evaluator and the Agency Clinical Liaison and then submitted to the EMS Agency for final approval.

*Only one call will be reviewed by the EMS Agency that does not have ALS contact criteria as noted above.

COASTAL VALLEYS EMS AGENCY



Paramedic candidate written report for a non-ALS invasive assessment:

Preceptor/Evaluator's Approval Signature:	Date:
Clinical Liaison's Approval Signature:	Date:
EMS Agency Approval Signature:	Date: