

TRI-TOWN EMERGENCY MEDICAL SERVICE
Personnel Evaluation Form

Employee's Name		Position		Date of Hire	
Employee Classification:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Per Diem <input type="checkbox"/> Temporary <input type="checkbox"/> Internship				
Evaluating Supervisor		Title		Date	
Evaluation Period		TO		Date Evaluation Reviewed with Employee	
Type of Evaluation	<input type="checkbox"/> Completion of Internship <input type="checkbox"/> Probationary Evaluation <input type="checkbox"/> Promotion <input type="checkbox"/> Extended Probationary Evaluation <input type="checkbox"/> Annual Performance Evaluation				
AMBULANCE OPERATION AND MAINTENANCE PERFORMANCE EVALUATION					
Emergent Driving Skills	Evaluate the employee's vehicle operating skills in an emergent situation.				
	<input type="checkbox"/> 1 -2 UNACCEPTABLE: Involved in MVC(s), Unnecessary and/or improper use of lights & sirens. Drives at unsafe speeds. Fails to slow and STOP at intersections. Loses control on corners. Does not evaluate traffic conditions. Other unsafe acts with ambulance.				
	NUMBER OF COLLISIONS:			NUMBER OF BACKING INCIDENTS:	
	<input type="checkbox"/> 3 ACCEPTABLE: Maintains control over the ambulance. Appropriately evaluates traffic conditions and reacts properly. Correct use of lights and sirens. Generally practices defensive driving and utilizes a spotter when backing. Generally provides smooth ride for EMS providers & patients.				
	<input type="checkbox"/> 4 EXCEEDS: Displays a high degree of reflex ability and driving competence. Usually anticipates driving situations in advance and responds accordingly. Consistently practices defensive driving, utilizes spotters when backing and provides smooth rides for EMS providers and patients				
COMMENTS:					
Non-Emergent Driving Skills	Evaluates the employee's skill in motor vehicle operation under normal & routine driving conditions. Is the employee safe and prudent?				
	<input type="checkbox"/> 1-2 UNACCEPTABLE: Violates traffic laws. Involved in avoidable collision(s). Has a difficult time operating an ambulance under normal conditions such as poor speed control. Does not adjust speed for current conditions. Driving style is inconsistent with service policy or manufacture recommendations. Uses personal electronic devices while driving.				
	NUMBER OF COLLISIONS:			NUMBER OF BACKING INCIDENTS:	
	<input type="checkbox"/> 3 ACCEPTABLE: Generally maintains control of the ambulances. Has a good working knowledge of the operational characteristics of the ambulances. Generally practices defensive driving techniques and does not get irritated at other motorist easily. Generally utilizes a spotter when backing.				
	<input type="checkbox"/> 4 EXCEEDS: Consistently maintains control of the ambulance exhibiting lawful and courteous driving. Consistently utilizes a spotter when backing and practices defensive driving techniques.				
COMMENTS:					
Vehicle & Equipment Checks	Evaluates employee's adherence to service requirements pertaining to the ambulance equipment and safety checks as well as ensuring the ambulance is clean.				
	<input type="checkbox"/> 1-2 UNACCEPTABLE: Employee has a history of not performing vehicle checks OR shows evidence of a poor vehicle check (such as a single line through all the check boxes) OR has been caught falsifying a check sheet. Supervisors receive reports of the ambulance being turned over not fully stocked. THIS IS EXTENDED TO PARAMEDICS FOR MEDICATION CHECKS. <i>(sample 5-10 Ambulance Check Sheets)</i>				
	<input type="checkbox"/> 3 ACCEPTABLE: Generally the employee adequately completes an ambulance check and restocks items as needed. All items on the check sheet are reliably addressed.				

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		Ambulance is restocked after every call. Employee routinely washes and mops the ambulance on every shift and when needed.
		<input type="checkbox"/> 4 EXCEEDS: Employee ensures the ambulance is always clean and stocked.
Veh. (cont.)	COMMENTS:	
CLINICAL COMPETENCY EVALUATION		
Assessment	Evaluates the employee's assessment skills. <i>(Review a minimum of 10 patient care reports)</i>	
		<input type="checkbox"/> 1-2 UNACCEPTABLE: Employee routinely fails to adhere to the fundamental components of the "Routine Patient Care" protocol as delineated in the current version of the New Hampshire Patient Care Protocols. Employee does not regularly obtain two (2) sets of vital signs when they transport a patient OR does not obtain at least one set of vital signs on patient refusal of transports. Receiving facility complains that the employee's assessment does not match the facility. Employee fails to recognize when a patient is potentially critically ill/injured. Either the employee has inappropriately triaged a patient to a lower license level OR employee has assume care of a patient that needs to be managed by a higher license level.
		<input type="checkbox"/> 3 ACCEPTABLE: Employee generally accurately assesses their patients, and then reassesses their patient when time permits. Also the employee follows the "Routine Patient Care" protocol as delineated in the current version of the New Hampshire Patient Care Protocols and obtains at least two (2) sets of vital signs when they transport a patient or at least on set of vital signs when the patient refuses to be transported. Employee
		<input type="checkbox"/> 4 EXCEED: Employee consistently performs a thorough assessment and considers differential diagnosis and shows evidence of such in their documentation.
	COMMENTS:	
Treatment	Evaluates the treatments that the employee rendered, based on the assessment by the employee	
		<input type="checkbox"/> 1-2 UNACCEPTABLE: Employee routinely renders "Safe" or standard (same) treatments for all their patients regardless of presentation, such as "IV, Oxygen, and Monitor" and treatment is not based on assessment. Employee has operated outside of patient care protocols. Employees have rendered unsafe, OR inappropriate treatments OR has not employed all safety precautions in the delivery of treatments.
		<input type="checkbox"/> 3 ACCEPTABLE: Employee generally performs an acceptable assessment and provides accurate treatment based on that assessment. Employee typically renders treatment that are within the comfort level of most providers of their license level. Treatment modalities can be described as cautious. Employee also demonstrates they reassess after the rendering of any treatment.
		<input type="checkbox"/> 4 EXCEED: Employee provides appropriate treatments based on assessment. Employee also demonstrates the ability to utilize numerous protocols for the management of their patients. Employee shows sound judgement when employing aggressive treatments. Employee always demonstrates they reassess their patients after rendering any treatment.
	COMMENTS:	
Patient Care Protocols	Evaluates the employee's ability to understand and follow the most current version of New Hampshire EMS Patient Care Protocols.	
		<input type="checkbox"/> 1-2 UNACCEPTABLE: Employee does not understand and does not adequately implement the patient care protocols. Operates outside of patient care protocols.
		<input type="checkbox"/> 3 ACCEPTALBE: Employee demonstrates a working knowledge of the patient care protocols and adequately implements them.
		<input type="checkbox"/> 4 EXCEEDS: Employee demonstrates a strong working knowledge of the patient care protocols and provides less common treatments and procedures when indicated.

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	COMMENTS:	
Clinical Competency	Evaluates the employee's effort in meeting training requirements and show competency with service equipment and supplies	
	<input type="checkbox"/>	1-2 UNACCEPTABLE: Employee does the minimum amount of trainings within the organization and outside the organization to meet their licensing needs OR fails to meet licensing requirements when relicensing is due. Employee does not regularly complete service required trainings by the posted deadline. Employee does not complete required competencies OR does not effectively understand how to use the service equipment that is within the employee's scope of practice. Employee show little or no effort to learn the service's equipment or supplies.
	<input type="checkbox"/>	3 ACCEPTABLE: Employee generally completes all service required training on time. Employee has a working knowledge of service equipment that is within the employee's scope of practice. Employee completes all service competencies when assigned and before the deadline. Employee completes all required relicensing requirements in sufficient time to ensure no lapse of licensing occurs.
	<input type="checkbox"/>	4 EXCEED: Employee's working knowledge of service equipment and supplies is such that they can comfortable train other employees. Employees completes all service trainings and competencies ahead of time. Employee seeks out trainings outside of the service.
	COMMENTS:	
Documentation	Evaluates the employee's ability to adequately document EMS calls and provide essential information.	
	<input type="checkbox"/>	1-2 UNACCEPTABLE: Employee routinely does not obtained all patient demographics to include: address, phone number, date of birth or Social Security Number. Employee does not routinely complete all sections of the Patient Care Report. Employee regularly only documents Pulse, B/P and Respiratory Rate for vitals. Employee does not regularly explain why treatment were rendered or were not rendered. Employee regularly does not provide sufficient information within their narrative to adequately describe the patient's condition, assessment and other important findings. Employee over uses abbreviations or uses abbreviations that are difficult to understand. Employee routinely does not document mileage. Employee routinely does not enter payer information in the billing section. Employee routinely does not obtained the correct signatures or have signatures in the appropriate sections.
	<input type="checkbox"/>	3 ACCEPTABLE: Employee generally address all sections and most if not all parts of each section of the Patient Care Report. Employee generally documents all information needed for billing and has appropriate signatures in the appropriate locations. Employee's narrative is easy to read, clear, absent of spelling errors and gives enough information to adequately describe the patient's condition, assessment, treatments rendered and other important aspects of the call. Employee has appropriate use of abbreviations and only uses widely understood abbreviations.
	<input type="checkbox"/>	4 EXCEED: Employee consistently completes all sections of the patient care report, provides all billing information, and has appropriate signatures in the appropriate locations. Employee's narrative is consistently very thorough, describing the patient's condition, assessment findings, indications for treatments, reasons treatments were not rendered and the patient's response to rendered treatments.
	COMMENTS:	
WORK BEHAVIOR EVALUATION		
Productive Work Environment	Evaluates the employee on their use of time for completion of routine tasks	
	<input type="checkbox"/>	1-2 UNACCEPTABLE: Employee is not self-motivated. Does not routinely complete station tasks unless told to do so. Employee spends much of their time not actively engaged in work, tasks, or educational activities that would benefit the employee, the service and/or those the organization serves. Employee is known to sleep during the day. Employee engages in the spreading of rumors. Employee is generally not supportive of all their co-

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		workers. Employee is known to avoid tasks. Employee is known to separate themselves from others.			
		<input type="checkbox"/> 3 ACCEPTABLE: Employee generally completes routine tasks when on shift but does not seek out other tasks to complete unless instructed to do so. All work done by the employee is satisfactory. Employee remains awake during day time. Employee will occasionally use spare time to for educational purposes to benefit themselves, the service and those the organization serves. Employee does not get involved in the spreading of rumors.			
		<input type="checkbox"/> 4 EXCEED: Employee is self-motivated. Employee consistently completes routine tasks, when on shift and seeks other tasks to perform. Work done by the employee is noticeable done well. Employee only rests at night or when legitimate service related reasons exist. Employee uses a good portion of their spare time for the betterment of the service.			
	COMMENTS:				
TEAM WORK	Evaluates the employee's ability to work with others.				
		<input type="checkbox"/> 1-2 UNACCEPTABLE: Employee does not work well with others. Employee shows no initiative to help other employees when a need exists, to include assisting new employees acclimate to the service. Employee has engaged in bullying, intimidation or avoidance of other employees. Employee shows a lack of ability to keep personal opinions to them self. Employee will leave the ambulance not fully stocked, dirty or otherwise in a poor condition at the change of shift. Employee talks in a condescending manor about local police officers, fire department members or of fellow employees. Employee engages into activities that is counter-productive to the mission of the organization.			
		<input type="checkbox"/> 3 ACCEPTABLE: Employee will generally help out other employees. Employee accepts criticism from others and professionally gives constructive criticism. Employee assists others and management in the betterment of the service. Employee is able to be a leader on EMS calls. Employee provides for the educational and professional developmental needs of other employees and interns.			
		<input type="checkbox"/> 4 EXCEED: Employee consistently works with others when they are in need. On calls employee is a strong EMS leader and is able to provide patient care while providing their partner with a learning experience. Employee takes time to explain EMS related items to those who ask. Employee promotes the service to others.			
	COMMENTS:				
Supervisor- Employee Relationship	Evaluates the employee's professional relationship with management				
		<input type="checkbox"/> 1-2 UNACCEPTABLE: Employee engages in activities or conversations that are insubordinate in nature. Employee does not follow the chain of command. Employee displays a "Passive-Aggressive" attitude. Employee openly points out problems but offers no valid solution.			
		<input type="checkbox"/> 3 ACCEPTABLE: Employee has a civil demeanor with their supervisor(s). Interactions are professional. Employee follows the chain of command. Employee does not openly question the supervisor(s) authority, such discussion are done in private and are constructive in nature. Employee does not talk bad about their supervisor(s) when the supervisor(s) are not present to defend themselves.			
		<input type="checkbox"/> 4 EXCEED: Employee consistently, publically commends the works of their supervisor(s) and privately discusses with the supervisor their concerns. Supervisor(s) trust the opinion of the employee and will seek out the employee's thoughts on certain matters.			
	COMMENTS:				
Attendance & Service to TRI*TOWN	Evaluates the employee's availability and attendance				
	# of Call-Outs		# of Shifts Tardy		# of No-Call/No-Shows
		<input type="checkbox"/> 1-2 UNACCEPTABLE: (FULL TIME EMPLOYEES): More than three (3) call outs; exceeding the available time off allotted, failure to follow call-out, vacation time request, or "Leave" request. (PART TIME): More than three (3) call-outs; Not providing additional			

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	<p>availability outside of the employee's assigned shifts; working less than 40 weeks of the employee's assigned shifts. (PER DIEM): More than three (3) call-outs OR called out more than 5% of their shifts, not providing at least 36 hours of availability a month. Receiving a service notification of "Lack of Activity". (ALL EMPLOYEES): More than two (2) unauthorized tardiness; one (1) or more "No-Call / No-Show"; leaving any shift without being relieved unless authorized to do so by the Director.</p>
	<p><input type="checkbox"/> 3 ACCEPTABLE: (FULL TIME): 1-3 call-outs; use of available vacation/personal time; follows procedure for requesting time off or leave. (PART TIME): 1-3 call-outs; provide 1-3 additional shifts of availability a month; works their assigned shift 40-50 weeks a year. (PER DIEM): 1-3 call-outs a year or less than 5%, whichever is less; provides at least 36 hours of availability a month. (ALL EMPLOYEES): no unauthorized tardiness, no "No-Call / No-Show"</p>
	<p><input type="checkbox"/> 4 EXCEED: Employee does not call-out, arrives early enough to ensure they are always on-time, (PART TIME): Works their assigned shift over 50 weeks a year and routinely puts in availability for additional shifts. (PER DIEM): Consistently puts in availability for more than 36 hours a month.</p>
	<p>COMMENTS:</p>
Customer Service	<p>Evaluates the employee's interaction with the service's patients, family members, the public, other public safety agencies and healthcare providers.</p>
	<p><input type="checkbox"/> 1-2 UNACCEPTABLE: Employee lacks confidence to adequately interact with patients, family members or other personnel involved in patient care. Employee has documented instances of being "rude" towards others. Employee does not advocate for their patients, such as having a high refusal rate, providing inadequate medical treatment, inappropriate triaging of a patient (triage down to a lesser license level or accepting a patient that requires a higher level of care), etc. Employee makes condescending comments about other employees, other public safety officials and/or other healthcare providers. Employee has a reputation of having other responders do aspects of their job, such as carrying equipment, lifting of patients, etc. Employee does not adequately obtain billing information, which can result in the patient being billed for services that should be paid for by their insurance provider.</p>
	<p><input type="checkbox"/> 3 ACCEPTABLE: Employee generally is courteous to patients, family members, bystanders, other responders and other healthcare providers. Employee does not get complaints pertaining to their demeanor. Employee works well with other responders on EMS calls. Employee generally provides billing information, ensuring the right payer receives the ambulance bill. Employee generally ensures the appropriate license level is caring for the patient and the care provider meets service standards. Employee knocks before entering the residence and generally introduces themselves. At the completion of the call, the employee generally makes an appropriate departing comment to the patient and/or family.</p>
	<p><input type="checkbox"/> 4 EXCEED: Employee is consistently courteous to patients, family members, bystanders, other responders and other healthcare professionals. Employee consistently works well with others and offers to do tasks that would generally be assigned to another person. Employee consistently ensures that appropriate provider is caring for the patient, and the employee consistently provides the appropriate care and does not find invalid reasons to withhold care. Employee consistently provides enough billing information to ensure the appropriate payer receives the ambulance bill. The employee consistently enters residences after knocking and then introduces themselves. At the completion of calls, the employee consistently makes an appropriate departing comment to the patient and/or family. Employee will help out at the receiving facility, such as replace full linen bags, clean beds and replace linen, help out with tasks when asked to do so, etc.</p>
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SAFETY EVALUATION	
<input type="checkbox"/>	No Work Related Injuries
<input type="checkbox"/>	No Collisions with the Ambulance
<input type="checkbox"/>	Appropriately Utilizes Personal Protective Equipment
<input type="checkbox"/>	Wears High Visibility Garments when working in the Roadway or on Large Scale Events
<input type="checkbox"/>	Consistently wears seat belts (to include in the patient compartment)
<input type="checkbox"/>	Consistently utilizes shoulder straps for the patient.
<input type="checkbox"/>	Consistently disinfects the ambulance and equipment.
<input type="checkbox"/>	Consistently utilizes a spotter when backing.
<input type="checkbox"/>	Consistently utilizes appropriate lifting techniques.
<input type="checkbox"/>	Not involved in a patient or co-worker being injured.
If all boxes are Checked, add 0.5% Safety Raise to the Employee's Merit Raise	

General Comments and Recommendations by Evaluator

Review of Employee Self Evaluation

Evaluation Point Total		
#	Section Description	Points
1	Emergent Driving Skills	
2	Non-Emergent Driving Skills	
3	Vehicle & Equipment Checks	
4	Assessment	
5	Treatment	
6	Patient Care Protocols	
7	Clinical Competency	
8	Documentation	
9	Productive Work Environment	
10	Team Work	
11	Supervisor / Employee Relationship	
12	Attendance & Service to Tri-Town EMS	
13	Customer Service	
TOTAL SCORE FOR EVALUATION		

Points	% Raise	COMMENTS
< 35	0%	Employee required to be involved in a Performance Improvement Plan
36 – 39	1.0%	
40 - 46	2.0%	
47 - 52	3.0%	Employee cannot have any "1's" or "2's". If so, employee will receive the next lower pay increase.

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Employee's Merit and Safety Raise				
Point Total	Merit Raise (%)	Safety Raise (%)	Total Raise (%)	Effective Date

Employee Comments about Evaluation

Employee Concerns / Recommendation (for the Service)

<input type="checkbox"/> I CONCUR with My Evaluation <input type="checkbox"/> I DISAGREE with My Evaluation <input type="checkbox"/> I request an APPEAL with the Board of Directors			
EMPLOYEE'S SIGNATURE:		DATE:	
EVALUATOR'S SIGNATURE:		DATE:	