

	Lower Providence Emergency Medical Service Standard Operating Guidelines	
	Subject: <i>Training- Attendant Program</i>	SOG #200-006
	Approved: Chief Christopher J. Reynolds	Initiated: September 2023 Revised: N/A

Description: The Attendant Training Program is designed to allow for the growth and development of internal LPEMS Members from auxiliary or Junior members to EMR, EMT, AEMT, and EMT-P providers at the Attendant Level with LPEMS. This allows for internal growth and continued service to this organization during the transition from an auxiliary member to a certified provider.

Purpose: To provide a pathway for auxiliary members to become fully certified and recognized providers while maintaining active membership within the LPEMS system.

Procedure:

- The Auxiliary or Junior Member will precept with approved LPEMS preceptor(s).
- Shifts must be completed with an approved Preceptor.
- Members must comply with Position Description for their desired certification level (101-001A -101-001D)
- A minimum of twenty calls based on Assessment, Skills, Evaluations, Charting, and Overall Performance.
 - i. Review will be conducted with Training Coordinator and/or Clinical Care Coordinator (ALS) after each 5 call increments to discuss reviews.
 1. The provider will complete a separate narrative.
 2. Each narrative will have an Evaluation Sheet (Appendix 200-006A) completed and attached to the front of the Narrative.
 3. ALS Providers after becoming an attendant must then complete the Medical Command Authorization requirements in SOG 101-007.
- Additional time can be added if deemed necessary by the Training Coordinator, Clinical Care Coordinator, or Medical Director.
- Volunteer members will remain an Active Volunteer Member at their current operational status.

Certifications

The prospective Attendant must remain current with all certifications as required by the intended position description.

Transition:

All prospective Attendants must be current on their Skills, Protocols and Documentation in preparation for Command. The Skills, Protocols and Documentation will be based on LPEMS SOG's, Pennsylvania and Montgomery County protocols.

The following will be reviewed and is the minimum acceptable skill set required by LPEMS:

- Proficiency demonstrated:
 - i. Patient Assessment
 - ii. Stair Chair Operations
 - iii. Stretcher Operations
 - iv. Long Board Operations – Full Spinal Immobilization
 - v. Long Board Operations – Long Bone or Pelvic Splinting
 - vi. Moving Devices – Scoop, Reeves, Mega Mover, Binder
 - vii. Airway Management – NC, NRB, BVM, CPAP, Nebulizer, Airway Adjuncts
 - viii. Suctioning
 - ix. Cardiac Monitor – 12 Lead and AED
 - x. LUCAS Device
 - xi. Medication knowledge
 - xii. Current Protocols
 - xiii. Team Leadership
- Patient Assessment :
 - i. Recognition and treatment /STEMI with notification
 - ii. Recognition and treatment / Stoke Alert and notification.
 - iii. Recognition and treatment / Respiratory Emergencies
 - iv. Psychiatric/ Behavioral Emergencies
 - v. Maternity/ Obstetric BLS Emergencies
 - vi. Pediatric Emergency
 - vii. Musculoskeletal, Bleeding, Shock, Trauma Emergencies
 - viii. Diabetic Emergencies
- Communication and Documentation
 - i. Communicating with the patient, patient’s family, and Hospital Staff
 - ii. Hospital Notification / Med Command Contact
 - iii. Producing a complete, concise, written PCR

After completion of each call, the Preceptor and Prospective Attendant will discuss and evaluate the following:

- Verbal communication with Partner, Patient, Family and Hospital Staff
- Reviews of Candidate’s Written Patient Care Report
- Candidate’s use and skill with equipment
- Candidate’s knowledge of current protocols
- Member’s evaluation (Appendix 200-006A) will be documented by the Preceptor and reviewed by the Training Coordinator,