



Field Training and Evaluation Program

Updated August 2025

Greene County/Greeneville EMS Field Training and Evaluation Program (FTEP)

Trainee	
Start Date	
Date Completed	
FTO Signature (Red)	
FTO Signature (Blue)	
FTO Signature (Green)	
Convalescent Truck Senior Provider	
Training Officer Signature	
Date Approved	

By accepting this Guide and signing below, I agree to complete all tasks, steps, and licensure specific objectives in this task book to the satisfaction of GCEMS Field Training Officers and/or Training Officer in the allotted time described within this workbook. I have read the guidelines outlined in the Greene County/Greeneville EMS Patient Treatment Guidelines and know that it is my responsibility to notify my FTO and/or Training Officer if I feel that I am unable to keep up, or complete the workbook. By signing below, I also indicate that I have been given an electronic version of the latest Standing Orders to work from.

Trainee signature: _____

Date: _____

(Upon completion, return this book to the Training Officer)

Greene County/Greeneville EMS FTEP Program Overview

The purpose of this program is to systematically train employees in the operations and standards of Greene County/Greeneville EMS. It will be used with new hires and employees whom earn a higher EMS certification.

Role Descriptions and Responsibilities

Trainee

The trainee is an employee, typically a new hire, of Greene County/Greeneville EMS and should show a strong desire to learn throughout this program. The trainee will understand that success in the program is their own responsibility.

Field Training Officer (FTO)

The FTO is tasked with assimilating the candidate into Greene County/Greeneville EMS. This is accomplished through acting as an educator, evaluator, and role model.

Crew

The crew will be the main support for the medic unit during EMS calls and day to day tasks. They will model teamwork and cohesiveness, provide support to the process, and be engaged in the trainings. The FTO will be part of this Crew.

Training Officer

The Training Officer will oversee the progress of each trainee by:

- Maintaining and tracking trainee progress
- Providing support to the trainee, FTO, and crew in the FTEP process
- Ensuring compliance with the FTEP program by all necessary parties
- Intervening if a trainee is failing to respond to training
- Regularly meeting with trainee to discuss progress and offer assistance
- Keeping agency management up-to-date on the progress of the trainee
- Making the recommendation to Management if a trainee has met all the requirements of the FTEP program and should be released from training

Agency Management/Medical Director

- Provide each candidate with agency protocols and SOGs prior to the first day of orientation
- Provide support to the trainee, FTO, crew, Training Officer, and FTEP program
- Be a resource for the education and evaluation of the trainee as needed
- Provide final approval for release from training program based on the recommendation of the FTO's & Training Officer

Training Phases

Classroom Training Phase

- The 'Administrative Items' section of this book will be completed
- The necessary skills checks will be completed based on licensure level

Supervised Field Training Phase

Each candidate shall perform patient care under the **direct supervision** of an FTO of equal or higher certification.

- The trainee must remain supervised as the attendant on EMS calls
- There is no specified timeframe to complete the supervised training period as it will be at discretion of the FTOs and Training Officer.
- FTO's will complete a daily observation report (DOR) for each shift.
- This Task Book must be completed satisfactorily prior to the end of the supervised period and be approved the agency Training Officer.

Unsupervised Field Training - 12 Hr. Shift (Convalescent Truck)

Each candidate shall perform patient care **at the BLS level** while riding with convalescent staff.

- The trainee should provide care as the team lead during this period.
- Providers will continue to meet each month with the agency Training Officer to discuss progress.
- BLS staff will complete a daily observation report for this shift.

Failure to Respond to Training

The Training Officer based on the evaluations of the FTOs may determine the trainee is failing to respond to training. The Training Officer will develop a performance improvement plan to provide guidance and a timeline for the trainee to meet the minimum standards of the program.

Completion of the FTEP Program

The Training Officer will determine if a trainee is ready for release from the FTEP Program based on recommendation of the FTOs and provide a written recommendation to management. Trainees will not be released from the program until approved by management.

Termination of Field Training

The field training orientation may be terminated before completion for the following reasons:

- Failure to respond to training and/or any performance improvement plan that was developed for the trainee by the Training Officer or Assistant Director.
- Failure to successfully complete the requirements for completion of the FTEP Program
- Failure to pass the protocol test and/or the skills performance test in 3 tries.
- Failure to complete the FTEP Program in **2 months**. This requirement will be evaluated on a case-by-case basis by FTOs, Training Officer, and management.

Administrative Items

Trainee	FTO	Date	Initial and date as each item is completed
			Station locations and door codes
			ESO ePCRs <ul style="list-style-type: none"> Cheat sheets Sample tickets Rejected tickets Quality Assurance Documentation
			ESO Scheduler <ul style="list-style-type: none"> Uploading certifications Schedule views Requesting open shifts Vacation/Sick time
			Truck Checkoff <ul style="list-style-type: none"> Interior cabinets and equipment Exterior cabinets and equipment Oxygen mains/portables Tires Fluid levels Faulty equipment and reporting
			Supply room and supplies
			Destination guidelines for trauma, cardiac, stroke, pediatrics, etc.
			Available mutual aid resources and requesting additional response (other county agencies)
			Injury/workers comp process
			Incident Reports

Field Operations and Ambulance Equipment

Trainee	FTO	Date	Initial and date as each item is completed
			CAD System <ul style="list-style-type: none"> • Shift setup • Dispatch and responding to calls • Emergency button • Operations during CAD failure
			Radio Operations <ul style="list-style-type: none"> • Channels and encoding • Battery charge/change • Emergency button
			Cardiac Monitor <ul style="list-style-type: none"> • Self-test • Blood pressure/intervals • 12-lead acquisition and transmission • AED Mode (if applicable) • Pacing/Synchronizing (if applicable) • Paper replacement
			Stretcher operations <ul style="list-style-type: none"> • Batteries and charging • Auxiliary release switches
			Narcotics and paperwork (if applicable)
			DOT and maintenance
			Fuel tank location, codes, and use
			Kronos <ul style="list-style-type: none"> • Clocking in/out • Changing stations • Vacation/Sick time • Notes

Hospital Radio Codes

Hospital	Code
Greeneville Community Hospital East	---
Johnson City Medical Center (Level 1 Trauma)	---
Morristown Hamblen Hospital	277
Holston Valley Medical Center	---
Indian Path Hospital	---
Mountain Home VA	852
Franklin Woods Community Hospital	842
Unicoi Memorial Hospital	810
UT Medical Center (Level 1 Trauma)	416
Vanderbilt Medical Center (Level 1 Trauma & Burn)	141

Important Phone Numbers

Person	Number
Director TJ Manis	(423) 607-1900
Assistant Director Myron Hughes	(423) 607-1611
Training/QA Officer Greg Franklin	(423) 765-5174
Supervisor On-duty	(423) 620-7930
Red Shift Captain Ken Lawrence	(423) 525-3532
Red Shift Lieutenant Roger East	(423) 754-6024
Blue Shift Captain Jeff Johnson	(423) 552-1728
Blue Shift Lieutenant Clay Dunaway	(423) 823-1573
Green Shift Captain Wes Miller	(423) 914-1510
Green Shift Lieutenant Izaiah Maddox	(423) 754-7886

Station Locations:

Station 1 (Mosheim)	95 W Greene Dr, Mosheim
Station 2 (Greeneville)	321 C C U Blvd, Greeneville
Station 3 (Headquarters)	1027 Forest St, Greeneville
Station 4 (Baileyton)	6530 Horton Hwy, Greeneville
Station 5 (South Greene)	7650 Asheville Hwy, Greeneville
Station 6 (Tusculum)	465 Edens Rd, Afton

Greene County/Greeneville Emergency Medical Services FTEP Program Standardized Evaluation Guidelines

The Standard Evaluation Guidelines shall be applied by the Field Training Officer during the completion of the Daily Observation Report at the conclusion of each shift. The following "1", "3", and "5" rating system is to be used when rating a trainee's behavior in each of the performance categories. Using these guidelines, the program standardization and rating consistency are achieved.

Preparedness- Evaluate physical appearance, uniform, timeliness, and readiness. Guidelines to be provided by agency specific SOG/policies.

- (1) Unacceptable - Uniform is worn improperly, wrinkled or dirty. Non-polishable/dirty shoes. Poor body hygiene. Visible offensive tattoos or unauthorized jewelry. Tardy for start of shift.
- (3) Acceptable - Uniform is neat and clean. Shoes are polished and clean. Hygiene consistent with current policy.
- (5) Superior - Uniform is tailored/pressed. Shoes have a military shine (spit shined.) Has 2nd uniform available on duty.

Driving ability- Evaluate trainee's ability to safely operate medic unit looking at all aspects of driving.

- (1) Unacceptable - Does not show due respect to the importance of operating apparatus in a safe manner. Does not show due regard for public safety while operating apparatus in an emergent setting. Performs any unsafe acts while driving emergent or non-emergent.
- Disobeys any traffic signals, signs or speed limits. Drives in an aggressive and unsafe manner. Drives too fast for current road conditions.

(3) Acceptable - Shows due respect to importance of operating apparatus in a safe manner. Keeps public safety in mind while operating apparatus in an emergent setting. Follows all traffic signs, signals, and speed limits at all times. Is calm and safe while responding to an incident emergent.

(5) Superior - Always operates the apparatus in a safe manner while driving emergent or nonemergent. Understands the liability and dangers of operating emergency apparatus. Always follows traffic signs, signals, and speed limits. Drives while looking ahead and anticipating possible movements of surrounding vehicles.

Scene management – Evaluate the trainee’s ability to manage the aspects of a scene including delegation of tasks related to patient care/patient care priorities, identifies appropriate patient disposition, and patient movement to the ambulance.

(1) Unacceptable – Does not delegate tasks, does not prioritize patient care or recognize need for intervention. Does not identify appropriate patient disposition. Does not initiate an extrication plan or delegate extrication of patient to resources available on scene in a timely manner. Does not incorporate the feedback coming from other team members to develop a treatment plan, or makes no effort to listen to other provider’s report. Makes no effort or is incapable of orchestrating the scene as a whole. Requires FTO intervention to establish appropriate disposition, patient treatment plan, patient extrication and patient care.

(3) Acceptable – Delegates tasks associated with patient care. Prioritizes patient care and interventions. Identifies appropriate patient disposition in a timely manner. Communicates how to move the patient to the ambulance or delegates this task. If this task is delegated then ensures that the steps being taken are appropriate for patient condition and safe for other providers. Orchestrates the scene as a whole openly considering the suggestions from other providers on scene. No FTO intervention required.

(5) Superior – Fluidly delegates patient care tasks. Identifies strengths and weaknesses of the other team members and properly selects the crewmembers most adept to the task at hand. Works as a leader of the team. Takes into consideration the most efficient way to move a patient to the ambulance without compromising the health of the patient or of the responders. Instills a feeling of calm to a chaotic scene with clear concise direction.

Patient assessment- Evaluate trainee’s ability to complete a thorough and complete physical exam while correcting life threatening problems as needed.

(1) Unacceptable - Unable to perform an orderly assessment or develop an appropriate line of questioning for the situation; unable to recognize priority of the patient or distinguish a critical patient from a non-critical patient: develops tunnel vision, neglects to complete a detailed exam, becomes confused and disoriented during the task. Does not elicit and/or record/remember relevant information. Does not establish an appropriate rapport with the patient/family/bystanders.

(3) Acceptable - Able to perform an orderly assessment or develop an appropriate line of questioning for the situation; able to recognize priority of the patient or distinguish a critical patient from a non-critical patient: completes a detailed physical exam in a timely manner and stays on task. Elicits and/or records/remembers relevant information. Establishes an appropriate rapport with the patient/family/bystanders.

(5) Superior - Always performs detailed exam of the patient and the surroundings, even under the most serious and adverse conditions. When applicable, performs extensive evaluation of the patient's complaint and/or injury. Establishes outstanding rapport with patient/family/bystanders. Distinguishes pertinent information from irrelevant information. Elicits all relevant information available in a short period of time and records the same.

EPCR/ report writing skills- Evaluate trainee's ability to accurately document all the aspects of a call in an organized and detailed manner with proper spelling and grammar within an appropriate time frame to the call. Evaluates employee ability to use electronic based system in place for report writing.

(1) Unacceptable - Unable to organize information and reproduce it in the required format. Leaves out pertinent details. Report is inaccurate or incorrect or incomplete.

(3) Acceptable - Trainee completes minimal requirements of EPCR by filling in the required fields and obtaining appropriate signatures. Reports contain the required and necessary information.

(5) Superior - In addition to the acceptable level the trainee provides more information than required. Trainee is able to document a full comprehensive narrative.

Return to Service- Evaluate trainee's ability to put medic unit back in service by properly restocking and cleaning in a timely manner.

(1) Unacceptable - Does not restock items used on the call. Does not make efforts to clean the medic unit after the call. Does not communicate to dispatch availability status in a timely manner.

(3) Acceptable - Restocks items used on the call. Cleans ambulance without prompting. Communicates to dispatch availability status in a timely manner.

(5) Superior - Keeps a running list of items in need of restock after the call. Restocks the ambulance without prompting. Thoroughly cleans the ambulance and all items used using approved cleaning products. Has ambulance restocked and ready for the next call in a timely manner and communicates availability to dispatch without prompting.

Interpersonal communication- Evaluate trainee's ability to communicate effectively and professionally with fellow employees, supervisors and costumers.

(1) Unacceptable - Unable to articulate thoughts in a timely manner. Does not organize thoughts. Uses improper terminology. Does not speak in a respectful, professional manner.

(3) Acceptable - Able to articulate/organize thoughts in a timely fashion. Speaks in polite, respectful tone. Knowledgeable in proper medical terminology.

(5) Superior - Always engages in effective communication with any one he/she comes into contact with. Speaks in a respectful, professional manner at all times.

Greene County/Greeneville EMS Daily Trainee Observation Form

Trainee Name: _____

Field Training Officer Name: _____

Date: _____

	1	3	5	N/A
Preparedness				
Driving Ability				
Scene Management				
Patient Assessment/Treatment				
ePCR Writing				
Returning to Service				
Interpersonal Communication				

Comments:

FTO Signature: _____

Greene County/Greeneville EMS Skills Check Off Sheet Utilization

EMT:

Obtain MANUAL Vital Signs and BGL
12 lead ECG placement & Transmission
Supraglottic Airway Placement
MAD Device Usage
IM Injection
Wound Packing/Hemostatic

AEMT:

IO – Adult/Ped
CPAP and PEEP
IV Insertion
Breathing Treatment with Drug Dosages

PARAMEDIC:

Needle Decompression
Nasogastric Tube Insertion
Surgical Airway
Oral/Nasal Intubation
Mega Code with Rhythm Interpretation

These skills should be checked off as noted above during the new protocol in-service mandatory for all full and part time staff and then for each new employee that joins the service either full or part time as laid out in the FTO packet and/or at any time the Training Officer or Medical Director advise.

Any Paramedic/AEMT experienced in the above skills can sign off on the above Skills Checkoff sheets, however