# FIELD TRAINING OFFICER Vol.3

# **NEW HIRE CONSIDERATIONS**

## THEY'RE ADULT LEARNERS

Whether they're fresh out of high school at 18 or seasoned at 80, new hires at MEDIC are all considered adult learners.

Understanding the impact of prior life experiences is crucial in how these adult learners engage with new information. It's essential for Field Training Officers (FTOs) to tailor their teaching methods by providing examples that resonate with each student's unique background and past experiences.

Invest time in getting to know your new hire. By understanding their life experiences, FTOs can develop analogies that make complex concepts more relatable, ultimately enhancing the FTO ride time.

## WHAT CONCERNS TO ANTICIPATE

New hires need to feel a sense of stability, order, and protection to be receptive to learning. Often, they may have concerns such as "I don't want to look stupid," "How does my FTO grade?" "What happens if I disagree?" "How can I please my FTO?" and "How can I avoid making mistakes?"

As mentors and educators, it's crucial to address these concerns and reassure new hires that they are valued members of a team. Providing guidance and support is key to helping them feel more comfortable in their role. Here are some strategies to achieve this:

1. **Open Communication:** Let your new hire know what to expect each day



# JANUARY QUARTERLY FTO MEETING

Unfortunately the weather got the best of us and one of the meetings needed to be canceled.

Starting Monday, February 5th, the FTO meeting will be assigned on the LMS to those who were unable to

attend. Please complete the training by March 1, 2024.

CPM joined us in this meeting to discuss their two days with the new hires and the assessment model. Please send us feedback! We want to know what you think of the assessment model they are presenting and of CPM.

Starting soon, new hires will be getting a third day of CPM training. Clinical Education has begun an auditing process of CPM classes. If you are a FTO interested in auditing a portion of CPM, please contact ElizabethA@medic911.com to make arrangements. You will be paid for your time and assessment.

# SHARE WITH YOUR NEW HIRE

## **High Frequency User Collaborative Team**

The High Frequency User Collaborative is a team of community partners focused on addressing the needs of community members who are demonstrating a high level of dependency on Medic's services. Included on this team is representation from our local hospital systems, housing support, substance use services, law enforcement, and community social services, who work to address emerging concerns about high frequency users of Medic.

# **High Frequency Users**

But, who is a High Frequency User? Medic transports many patients at what a layperson would consider to be a high frequency, and there are thousands of patients each year who are transported more than once monthly for various reasons. Despite this, these are not the patients in which the team's efforts focus. This team intervenes in cases where patients demonstrate an exceptionally high transports in a sustained pattern of overuse.

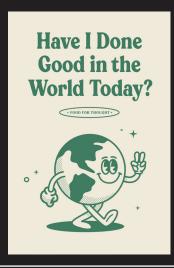
High Frequency patients have varying health histories, medical needs, and socioeconomic resources. The most common factors we see are chronic illness, mental health needs, behavioral health needs, homelessness or housing instability, addiction, and lack of transportation. Any one or combination of these can easily create a dependency by outlining the tasks and goals. This fosters a sense of structure and clarity, helping them focus on their learning objectives.

- 2. Introduction to the Team: Introduce your new hire to other EMS providers, promoting a sense of camaraderie and belonging within the team. Building relationships with colleagues can provide valuable support and mentorship opportunities.
- 3. Emphasize Learning from Mistakes: Remind your new hire that everyone makes mistakes, and it's a natural part of the learning process. Assure them that you are there to provide guidance and support to prevent significant errors.
- 4. **Empathy and Understanding:** Reflect on your own experiences as a newcomer to Medic and the EMS field. Remembering what it was like to be in their shoes can help you empathize with their challenges and provide more effective support.

\*\*source: Nepon, B. & Eberly, B. (2008). Field Training Officer, Tips and Techniques for FTOs, Preceptors and Mentors. Jones &Bartlett Learning, LLC.



The next New Hire Academy will begin on February 6, 2024.



on Medic's 911 system as these patients attempt to use emergency resources as substitutes for other aid (social, medical, or otherwise.)

This team is an effort to put those missing puzzle pieces across the continuum of care in the same room, to address the problem from a unified position, and get patients the support they actually need.

## How we intervene

The collaborative team meets once monthly, on the second Tuesday of the month, allowing participants a chance to connect and discuss patient cases with various contributors to their care. An important note is that Medic does not assign caseloads to case workers. Instead, this team provides a space to support collaborative solutions for patients.

Because 911 overuse is oftentimes a crutch patients lean on when they really need other support services, these patients are very often known by our partner collaborators, and much of the time there are existing relationships in place with referred individuals.

#### **Care Plans**

Hospitals, social service teams, and Medic can implement care plans that direct teams on how to treat, transport, and/or manage a patient's case long term.

Care Plans may be implemented to:

- Protect provider, patient, or public safety,
- Provide treatment and transports that prioritize patient health, or
- Promote appropriate use of Agency and hospital resources

A Medic Care Plan initiates a fixed response, treatment, or transport protocol that is to be followed by Medic staff throughout any encounter with the patient to whom it is applied. Patients can be referred for a Care Plan externally by a patient's Case Worker or HFU Collaborative member, or internally from within the Agency. Plans are approved, written and individualized by Medic's Medical Director and Director of Operations, with input from the Care Plan Team. You should stay up to date on care plans by accessing the HFU Care Plans & Patient List on the High Frequency User group on Viva Engage.

For questions on care plans, high frequency users, or to make a referral, email Gabby Purick Smith at gabriellep1@medic911.com

