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2 this Agreement to remove the inappropriate provision(s); provided, however, that if the amendment
3 cannot be made in a manner which preserves all essential parts of the consideration for any party,
4 such party may terminate this Agreement as soon as is reasonably practicable or as required by law.

5 **Section 21. Authority to Execute Agreement**

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7 Each party warrants that it has all requisite power and authority to conduct its business and
8 to execute, deliver, and perform the Agreement. Each party also warrants that the individuals who
9 have signed this Agreement have the legal power to make this Agreement and bind each respective
10 party hereto.

11 **Section 22. Counterparts**

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13 This Agreement may be signed in one or more counterparts, each of which shall constitute
14 an original.

15 **Section 23. HIPAA Compliance**

- 16 a. The Parties agree to take reasonable steps to maintain the confidentiality of all health
17 care files and client data, and shall use appropriate safeguards to prevent
18 inappropriate use of disclosure of individually identifiable patient information except
19 as permitted by this contract or as required by law. Each Party shall immediately
20 report to the other any impermissible use of disclosure that occurs as to such files and
21 data. Each Party agrees to destroy, in a secure manner, or return to the other all
22 patient health information shared upon termination of this Agreement as determined
23 by the other. Breach of this provision may serve as ground for termination of the
24 Agreement.
- 25 b. The Parties agree that in the event that either subcontracts their duties and/or
26 obligations created by this Agreement, said subcontractors shall be required to
27 comply with Section 23.a. above.
- 28 c. The Parties agree that the Agreement may be amended as necessary to comply with
any federal regulations issued under the Health Insurance Portability and

1 Accountability Act (HIPAA) of 1996 or other law or regulation promulgated for
2 HIPAA's purpose.

3 **Section 23. State/Federal Participation.**

4 Each Party warrants that neither it nor its employees are listed by a federal or state
5 agency as debarred, excluded, or otherwise ineligible for participation in any state or
6 federal health care program(s).

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ANNUAL PERFORMANCE EVALUATION – STAFF

Position Title: Paramedic Liaison Nurse / RN

Department: Emergency Department

Employee Name:

Date of Review:

Appraisal Period: From

To:

DRAFT

Origination Date: 1/1/2004

Revision Date:

Population Served: Patients, Family Members, Visitors, Physicians, Co-Workers

Mark all applicable patient age ranges served:

Neonate/Infant	Birth to 12 months	<input checked="" type="checkbox"/>
Toddler	1 – 2 years	<input checked="" type="checkbox"/>
Pre-School	3 – 5 years	<input checked="" type="checkbox"/>
School Age	6 – 11 years	<input checked="" type="checkbox"/>
Adolescent	12 – 18 years	<input checked="" type="checkbox"/>
Adult	19 – 70 years	<input checked="" type="checkbox"/>
Geriatric	71 and beyond	<input checked="" type="checkbox"/>

Position Specific Standards – Staff – 40%	U	RI	C	ER	SER
1. AGE SPECIFIC STANDARDS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEE ATTACHED AGE-SPECIFIC COMPETENCIES					
COMMENTS:					
2. ASSESSMENT: Performs patient assessment according to hospital/unit policy/procedure.	U	RI	C	ER	SER
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>a. Performs assessments appropriate to the patient's clinical presentation/diagnosis, care setting, age, development level, and cultural and religious orientation in a timely manner.</p> <p>b. Performs completely and accurately including, but not limited to, physical (i.e. assessment for pain, skin breakdown, risk for falls), psychological (i.e. cognitive and communicative skills or development), social status and other patient needs.</p> <p>c. Identifies and prioritizes the need for further assessment based on the patient's clinical presentation/diagnosis, care setting, desire for care and responses to any previous care.</p> <p>d. Initiates discharge planning for each patient upon admission as appropriate.</p>					

COMMENTS:

3. PLANNING: Develops a Patient Plan of Care that:

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- a. Is individualized for each patient based on assessment of needs that include input from the patient, family and other multi-disciplinary health care team members.
- b. Includes plan for discharge/transfer.
- c. Identifies specific nursing diagnosis relevant to assessment findings.
- d. Identifies interventions, for each nursing diagnosis, specific to identified patient needs.

COMMENTS:

4. IMPLEMENTATION:

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- a. Performs intervention identified for each nursing diagnosis on the Interdisciplinary Plan of Care.
- b. Demonstrates the ability to effectively communicate patient care needs to all members of the multidisciplinary health care team.
- c. Conducts patient/family education that:
 - Is appropriate to the patient's age, learning needs, level of understanding, and readiness to learn.
 - Includes the family/significant others when appropriate.
- d. Documents nursing intervention and patient teaching on designated forms.

COMMENTS:

5. EVALUATION:

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- a. Evaluates and documents the patient's response to the Plan of Care and to interventions.
- b. Revises and updates the Plan of Care as evidenced by documentation.
- c. Documents patient's response to teaching on designated form.

COMMENTS:

6. CRITICAL THINKING SKILLS LEADERSHIP SKILLS	U	RI	C	ER	SER
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>a. Accountable for own conduct and independent decisions made in the course of job performance.</p> <p>b. Participates in unit activities designed for improvement of services.</p> <p>c. Acts as preceptor for new health care team members and student nurses when asked.</p> <p>d. Effectively delegates tasks to appropriate health care team members.</p> <p>e. Provides input for policy/procedure development.</p> <p>f. Demonstrates sound judgment and effective decision making in following the nursing process.</p> <p>g. Triage/prioritizes multiple patient interventions.</p> <p>h. Changes priorities based on new assessment data.</p> <p>i. Identifies supplies, equipment, and additional personnel necessary to complete a given assignment.</p> <p>j. Analyzes data collected, weighs alternatives, and acts appropriately.</p> <p>k. Facilitates systems/processes in response to situations that have the potential to negatively impact patient/family outcomes.</p>					
COMMENTS:					
7. CORE COMPETENCIES	U	RI	C	ER	SER
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>a. Follows the five rights of medication administration and maintains transcription accuracy.</p> <p>b. Administers blood products per hospital policy.</p> <p>c. Administers IV therapy per hospital policy.</p> <p>d. Able to function effectively during an emergency patient care situation.</p> <p>e. Demonstrates appropriate interventions regarding the use of restraints per hospital policy.</p> <p>f. Performs waived testing following hospital policy.</p> <p>g. Assumes responsibility for maintaining a high level of clinical expertise and adapts to new information, technology and changing trends in nursing practice.</p>					

- h. Maintains required certifications.
- i. Is competent to monitor the patient undergoing “moderate” (conscious) sedation (if applicable).

COMMENTS:

8. UNIT SPECIFIC COMPETENCIES: EMERGENCY DEPARTMENT	U	RI	C	ER	SER
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- a. Demonstrates understanding of COBRA/EMTALA regulations.
- b. Is able to monitor hemodynamic status of patient and correctly interpret the results.
- c. Demonstrates knowledge of cardiac monitoring identifies dysrhythmias and treats appropriately.
- d. Accurately assigns triage categories.
- e. Maintains current knowledge of medications and their current administration based on age of patient and their clinical condition.
- f. Is able to assist emergency room physician with diagnosis and interventional procedures, i.e., central lines, closed reductions, advanced airway management.
- g. Is competent to monitor the patient undergoing “moderate” (conscious) sedation.

IVMC – MICN’s ONLY

- a. Accurately completes documentation (run forms, logs, etc.).
- b. Complies with county procedures for treatment and guidelines.
- c. Accurately seeks direction from base MD, PLN, Manager and Charge RN.

9. Paramedic Liaison Specific	U	RI	C	ER	SER
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- a. Actively monitors and reviews Pre-hospital calls for appropriateness of protocols.
- b. Evaluates all MICN’s and Base Hospital Physician annually for competencies.
- c. Participate in remediation and educational opportunities for MICN’s and pre-hospital personnel that deviate from protocols.
- d. Educates staff, MICN, EMT’s and Pre-hospital personnel.
- e. Maintains all current Certifications and education.
- f. Coordinates Base Hospital meetings, tape reviews and field care audits.

POSITION SPECIFICATIONS

1. ESSENTIAL KNOWLEDGE / SKILLS

- Effective written and verbal communication skills in the English language.
- Ability to calculate figures and amounts such as proportions, percentages, area (BSA), circumference, and volume.
- Ability to define problems, collect data, establish facts and draw valid conclusions.
- Ensure that each MICN and Base Hospital Physician maintains annual competencies.
- Develops a plan for identifying and reviewing calls that deviate from Riverside County EMS protocols.
- Provide education for MICN's, Paramedics, Base Hospital Physicians and EMT's.

2. MINIMUM ESSENTIAL EXPERIENCE

- Five years (5) emergency room experience
- Three years (3) MICN in Riverside County experience
- Knowledge of Riverside County Policies and protocols

3. MINIMUM ESSENTIAL EDUCATION

- High School Diploma.
- Completion of an accredited Registered Nursing program.

4. REQUIRED LICENSURE / CERTIFICATIONS

- Registered Nurse with current California RN license.
- Current BLS certification.
- ACLS certification.
- PALS.
- MICN and TNCC
- CEN encouraged.

5. WORK ENVIRONMENT

- Ability to work in high volume, fluctuating census environment.
- Subject to many interruptions.
- Subject to irregular work hours.
- Ability to work in fast-paced environment where noise levels fluctuate.
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6. PHYSICAL REQUIREMENTS

Lifting Level I	0 – 10 lbs.	<input type="checkbox"/>
Lifting Level II	10 – 50 lbs.	<input type="checkbox"/>
Lifting Level III	Over 50 lbs.	<input checked="" type="checkbox"/>

During a typical work shift, does this job involve the following?

F = Frequently – means more than 65% of the time
O = Occasionally – means between 33% and 64% of the time
S = Seldom – means less than 33% of the time

(Check Appropriate Boxes)

	<u>Yes</u>	<u>No</u>	<u>F</u>	<u>O</u>	<u>S</u>
Sitting	X			X	
Standing	X		X		
Walking	X		X		
Kneeling	X			X	
Crouching / Stooping	X			X	
Squatting	X			X	
Crawling	X				X
Twisting Upper Body	X		X		
Climbing Hand-Over-Hand		X			
Object Manipulation, i.e. grasp, pinch, twist, turn, reach	X		X		
Does this job involve activities not described below? If so, please describe below:		X			
1.					
2.					
3.					
4.					

7. BLOOD-BORNE PATHOGENS EXPOSURE CATEGORY

Category I	Exposed to blood-borne or potentially infectious material.	<input checked="" type="checkbox"/>
Category II	Sometimes exposed to blood-borne or potentially infectious material.	<input type="checkbox"/>
Category III	Not exposed to blood-borne or potentially infectious material.	<input type="checkbox"/>

**** The above statements are intended to describe the general nature and level of work being performed. They are not intended to be construed as an exhaustive list of all responsibilities, duties and skills required of personnel so classified.**