



# CHARLOTTESVILLE-ALBEMARLE RESCUE SQUAD



## Performance Evaluation

Name: \_\_\_\_\_ Crew: \_\_\_\_\_ Date: \_\_\_\_\_ Month: \_\_\_\_\_

Circle the number that best describes the candidate's demonstration of each specific behavior, using the following key:

- |   |                                       |
|---|---------------------------------------|
| 5 – Consistently performs at this level | 4 – Frequently performs at this level |
| 3 – Occasionally performs at this level | 2 – Seldom performs at this level     |
| 1 – No opportunity to observe           | Y – Yes      N - No                   |

This evaluation should first be completed by the evaluator. The evaluation and recommendation should then be reviewed WITH the candidate. The evaluation should then be given to the candidate for completion of Sections F and G. The candidate should then return the evaluation to the appropriate Committee directly. (Pre-probationary members return to the Membership Committee; Probationary members return to CRAT)

### A. Attendance

The candidate attended each assigned duty	Y	N
The candidate arrived on-time and prepared for duty	5	4 3 2 1
The candidate had no scheduling conflicts with job, school, family, etc., that interfered with attendance	5	4 3 2 1
The candidate attended monthly business and training meetings on the 2d Thursday of each month at 1900	5	4 3 2 1
The candidate participated in stand-by, public relations and/or fund-drive events	Y	N

Comments that support the above evaluation:



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## B. Professional Behavior

Maintains positive interpersonal relations with patients, families and significant others, other rescue squad and fire department personnel, and members of the community through appropriate verbal and non-verbal behavior, maintaining confidentiality of patient information, respecting patient privacy, and demonstrating sensitivity to meeting the patient's and family's concerns 5 4 3 2 1

Solicits and receives feedback from peers on an ongoing basis, and demonstrates ability to receive such feedback constructively, and modify behavior according to that feedback 5 4 3 2 1

Addresses concerns effectively with appropriate personnel (preceptor, Crew Sergeant, Membership Committee contact, etc.) 5 4 3 2 1

Comments that support the above evaluation:

## C. Squad Responsibilities

The candidate insures equipment readiness by initiating inspection at beginning of tour of duty and by cleaning and replacing equipment after calls	5 4 3 2 1
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The candidate actively participated in crew chores without prompting	5 4 3 2 1
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Demonstrates safe and proper use of equipment necessary for patient care	5 4 3 2 1
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Comments that support the above evaluation:	
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## D. Identify the Candidate's Strengths:



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**E. Identify the areas that candidate needs to improve:**

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**Recommendation:**

\_\_\_\_\_ Recommend without reservation

\_\_\_\_\_ Recommend with the following reservations:

\_\_\_\_\_ No recommendation

\_\_\_\_\_ Do not recommend for reasons stated herein

Signed: \_\_\_\_\_ (Printed name: \_\_\_\_\_)

[ ] Crew Captain [ ] Preceptor [ ] Other: \_\_\_\_\_

Dated : \_\_\_\_\_

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**TO BE COMPLETED BY CANDIDATE:**

**F. Candidate's plan to improve any area disclosed in Section E above:**

**G. Candidate's comments:**

Acknowledgment by candidate: \_\_\_\_\_

Dated : \_\_\_\_\_

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Form Disposition:  
For Pre-probationary months 1, 2 and 3 – to the Membership Committee  
For Probationary months 2, 4 and 6 – to the Clinical Resources and Training Committee

**Revision Date: May 1<sup>st</sup>, 2009**