



## **Welcome to the First Response Ontario EMS Observer Program**

The Observer Program is designed to give aspiring emergency service professionals a unique opportunity to spend time with a Paramedic crew and to observe our EMS providers in action. Participation in the Observer Program is at the sole discretion of FRO's management. Those who wish to participate should complete Observer Program Application and Waiver of Liability included with this packet.

### **About First Response Ontario**

First Response Ontario is a non-governmental Paramedic service provider to high and low risk special events. These may include motorbike racing to community fairs or festivals. Our staff is comprised entirely of Ontario Ministry of Health certified Paramedics and supervised Paramedic students. FRO has grown to include the following branches:

- First Response Ontario EMS | Paramedic services for special events
- Xtreme Medical Service | Powersport specialists
- FRO Training & Development | Advanced first aid training and career preparation
- First Response Ontario | Safety consulting and emergency planning

### **Application**

In order to participate in the FRO Observer Program you must do the following:

1. Complete the attached application and liability waiver.
2. Provide us with a copy of your driver's license and proof of current First Aid & CPR certification of any level.
3. Complete a 45 minute orientation session.

Before you can participate, your completed application must be reviewed and approved by a member of FRO's management.

### **Duration of Participation**

The FRO Observer Program was created with many objectives, including exposing community members to Emergency Medical Services, providing experience for FRO's Trainees and supplementing the classroom experience of First Responder students. Due to this program being in high demand we must sometimes limit the duration of your participation in the program. Participation in the Observer Program is at the sole discretion of FRO although the following criteria will be considered:

- Opportunity for the participant to experience emergency calls.
- Reason for participation in the Observer Program.
- Conduct while on duty.

Those who wish to continue with the program are encouraged to contact the Director of Paramedic Services via email. Requests to be reinstated will be honoured when possible.

**Patient Confidentiality**

Observers may not read Patient Care Reports or other materials containing information about emergency calls, other than the forms for calls in which they participated. Any and all information regarding calls, patient information and condition, etc. is strictly confidential and may not be discussed with anyone at anytime but the crew from that call, and the FRO Director of Paramedic Services. Violation of these conditions will lead to removal from the Observer Program and the possibility of a sizeable personal fine by the Privacy Commissioner for violation of the *Personal Health Information Protection Act*. This is not just company policy, it's the law.

**Dress Code**

FRO is a professional Paramedic service and our appearance affects the public's perception of this professionalism. The uniform from your agency is to be worn in accordance with the General notes beginning on page 3 of FRO Policy 3.2 - Uniforms. In lieu of a uniform, a collared shirt with dark pants other than jeans must be worn. CSA approved safety footwear is to be worn in clean and polished condition, unless otherwise indicated. The shirt must always be tucked in. An identification card will be provided and must be worn throughout the shift on the outer most layer of clothing so that it is visible at all times. The Observer will be required to have protective eyewear on their person at all times and don during all emergency calls. FRO will provide the Observer with any other required PPE as needed. You may not wear any clothing that identifies you as a member of any other EMS service. The FRO team lead may remove any Observer whose overall appearance would, in their opinion, present an unprofessional image of our service.

**Role of Observers**

While on calls, Observers may be asked to assist the Paramedic crew with tasks that they feel are appropriate, such as assisting with lifting and carrying of patients, carrying equipment, or performing CPR compressions. Observers who are First Responder certified or higher may do any of the above, as well as assisting with obtaining vital signs, patient assessment, or any other tasks that the Paramedic crew deems appropriate. You are in no way obligated to perform any tasks you are uncomfortable with. Please make an effort to discuss what you would and would not like to do with your crew members at the start of your shift.

**Safety**

As with everything we do, safety is our number one priority. Every effort will be made to keep you as safe as possible during your observation time. For this reason, your crew has the right to refuse to take you on any call that they feel could endanger you, such as known disease or chemical exposure, violent situations, etc.

**Miscellaneous**

As an Observer, you are not a member of First Response Ontario. Under no circumstances can you present yourself as being a FRO employee at any time, on or off call. Doing so is grounds for immediate removal from the program. Participation in the Observer Program is a privilege. FRO and its members reserve the right to refuse to take an Observer on a call for any reason. The Director of Paramedic Services reserves the right to revoke an Observer's participation at any time.

|                                                         |                            |                   |
|---------------------------------------------------------|----------------------------|-------------------|
| Applicant name:                                         |                            | Date of birth:    |
|                                                         |                            | d d / m m m / y y |
| Address:                                                | City:                      | Postal code:      |
|                                                         |                            |                   |
| Primary phone:                                          | Email address:             |                   |
|                                                         |                            |                   |
| Emergency contact                                       | Relationship to applicant: |                   |
|                                                         |                            |                   |
| Phone:                                                  | Alternate phone:           |                   |
|                                                         |                            |                   |
| Why do you wish to participate in our Observer Program? |                            |                   |
|                                                         |                            |                   |
|                                                         |                            |                   |

Please check the appropriate boxes:

Complete this statement: I am ...

Which certifications do you hold:

|                                                                 |                                                       |
|-----------------------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> An Ontario Fire Academy Alumnus        | <input type="checkbox"/> Standard First Aid & CPR/AED |
| <input type="checkbox"/> An applicant for employment with FRO   | <input type="checkbox"/> First Responder & CPR/AED    |
| <input type="checkbox"/> Interested in evaluating an EMS career | <input type="checkbox"/> Emergency Medical Responder  |
| <input type="checkbox"/> Other:                                 | <input type="checkbox"/> AEMCA                        |
|                                                                 | <input type="checkbox"/> AEMCA pending                |

Have you ever been convicted of a Criminal offence for which a pardon has not been granted?

|                             |                                                          |
|-----------------------------|----------------------------------------------------------|
| <input type="checkbox"/> No | <input type="checkbox"/> Yes, please explain with dates: |
|-----------------------------|----------------------------------------------------------|

I, the undersigned, have requested permission to observe and participate in the activities of First Response Ontario, including but not limited to, training, response to, and operations at service calls, medical aid, fire, rescue and other emergencies. This permission is granted with the understanding that I do so at my own risk and without remuneration. First Response Ontario is not responsible for accident, injury, illness, exposure to infectious disease, death, loss of income, or loss or damage to my personal property that may occur within the life of the waiver period; and I understand that there is no accident, worker's compensation, or liability insurance coverage for me while participating with First Response Ontario.

Therefore I, for myself, my heirs, executors, administrators or assigns hereby waive any or all claims against First Response Ontario, any FRO clients, and any member or employee therefore, now and hereafter to accrue for, on account of, or because of any illness, exposure to infectious disease, injury, or damage that I sustain because of, in conjunction with, or on account of this observation and participation opportunity given to me for the purpose of professional and personal betterment. I hereby release the above named organizations and individuals from any and all liability for damages for any injury occurring as a result of my voluntary participation. If I have any physical, medical or psychological limitations or problems that may prevent me from fully participating, I will list them on the reverse of this page.

Please read each of the statements below and initial to indicate your agreement and understanding.

- \_\_\_\_\_ (initial) I have received a copy of the First Response Ontario Observer Guidelines, which I have read, understand, and agree to follow.
- \_\_\_\_\_ (initial) Observers are **not** members, volunteers, or employees of First Response Ontario and may never present themselves as members, volunteers, or employees.
- \_\_\_\_\_ (initial) I understand that the First Response Ontario Observer Program is in high demand and that participation is at the sole discretion of FRO management. All Observers will eventually be removed from participation in the program in order to make room for other participants. In the event that I am removed from the Observer Program I can request to be reinstated by contacting the Director.
- \_\_\_\_\_ (initial) I understand that any information obtained as an Observer is confidential per First Response Ontario policy and federal law. Disclosure of this information to anyone outside of First Response Ontario may subject me to criminal prosecution or a lawsuit. I will direct questions to the FRO team lead.

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date