

*The Journal of*  
**COLLEGIATE EMERGENCY MEDICAL SERVICES**

ISSN: 2576-3687 (Print) 2576-3695 (Online) | Journal Website: [www.collegeems.com](http://www.collegeems.com)

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**Citation (AMA Style):** Antazo M, Fonseca M, Khokhar F, Soloman M. Advising Resilient Healthcare Teams: An Overview of the Hiring Procedures of McMaster University's Emergency First Response Team (EFERT). *J Coll Emerg Med Serv.* 2025; 7(1): 10-14. <https://doi.org/10.30542/JCEMS.2025.07.01.02>

**Electronic Link:** <https://doi.org/10.30542/JCEMS.2025.07.01.02>

**Published Online:** September 8, 2024

**Published in Print:** February 21, 2025 (Volume 7: Issue 1)

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# Advising Resilient Healthcare Teams: An Overview of the Hiring Procedures of McMaster University's Emergency First Response Team (EFRT)

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**Keywords:** collegiate-based emergency medical services; hiring, recruitment | **Corresponding Author and Author Affiliations:** Listed at the end of this article

The life of a collegiate EMS provider is unique. Navigating post-secondary education while working long shifts in the prehospital world of complex medical emergencies is undeniably challenging. Treating patients experiencing physical trauma, mental health crises, or sudden medical emergencies requires superb training. More importantly, it demands true resilience to work these often unpaid positions.

Following conversations with student leaders of collegiate EMS teams at a roundtable discussion, at the 2023 National Collegiate Emergency Medical Services Foundation conference, it is clear that the stressful life of a collegiate EMS provider leads to service-level complications. Collegiate EMS leaders reported poor retention levels, which heightens the workload for the remaining service members, thus contributing to burnout. This destructive positive feedback loop also negatively affects patient safety.<sup>1</sup>

Collegiate EMS team leaders have employed strategies in attempt to promote retention. Strategies mentioned at the roundtable discussion included balancing hours, demonstrating appreciation, and offering professional development opportunities. However, we believe the most crucial means of promoting retention is hiring providers who are well-prepared for the life of a collegiate EMS provider—those who are highly resilient and capable of growth. McMaster Students Union's (MSU) Emergency First Response Team (EFRT) has curated a multi-step, highly selective hiring process, which boasts exemplary retention rates.

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This paper outlines the hiring process for the 2024 hiring cycle. This paper may not be completely reflective of EFRT's current hiring process as it is dynamic and changes year-to-year in alignment with the administration of that year. Other collegiate EMS teams may replicate or adapt it to reduce retention complications and promote the quality of care provided to the community.

This article outlines our hiring process at McMaster University's Emergency First Response Team (EFRT). Other collegiate EMS teams may replicate or adapt it to reduce retention complications and promote the quality of care provided to their community.

## Hiring Process Overview

Our hiring process includes four phases, each described below. See Figure 1 for a hiring flowchart.

### *Phase 1: Written Application*

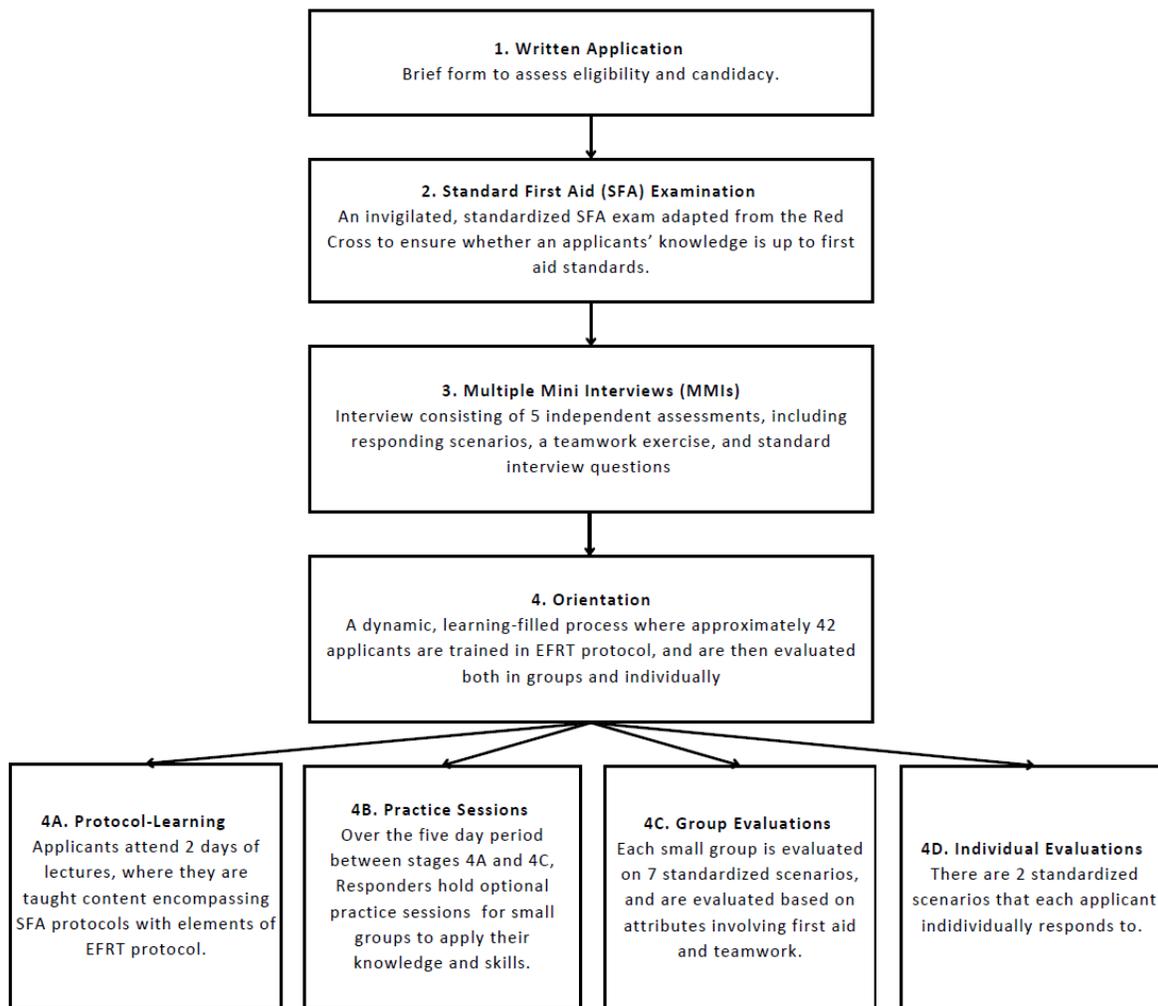
The application process began with an online written application, involving demographic (e.g., program, academic year), eligibility (e.g., full-time student status, certification requirements), and short answer questions. The EFRT requires applicants to hold a valid Standard First Aid (SFA) with CPR-C certification. There is no prerequisite experience necessary. Approximately 90% of applicants advanced to Phase 2, as applicants were only screened out for ineligibility, red flags or evidence of inadequate soft skills as determined by the team.

### *Phase 2: SFA Written Test*

All applicants individually completed a 60-minute SFA written test consisting of 20 multiple choice questions and two situational short answer questions. Multiple choice and short answer questions were created by the EFRT Executive Team. The correct answers to the multiple-choice questions and rubric for the short answer questions was created from the Canadian Red Cross SFA and CPR-C learning standards. The top-scoring 80 applicants were invited to the next phase.

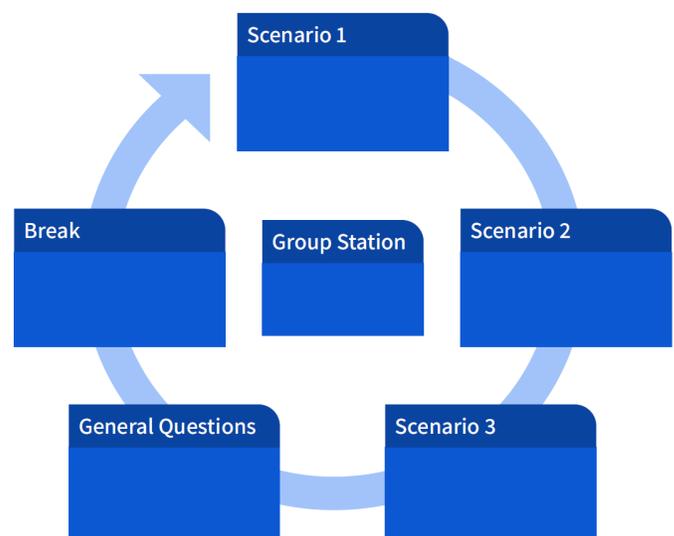
### *Phase 3: Multiple Mini Interviews (MMIs)*

Figure 1: Hiring process flowchart



In MMIs, applicants underwent five interview stations. In each station, applicants were scored based on a standardized rubric that included explicit actions/time limits that would yield a specific score. There were three simulated scenarios involving standardized patients to holistically assess the application of first aid skills alongside soft skills (e.g., active listening, respond empathetically, demeanor). Applicants underwent a “classic interview” with the EFRT Program Director, a student hired by the MSU to manage and oversee all team operations. The interview evaluated their passion for serving the community, and why they want to join the team. For the ‘classic interview’ station, the rubric included, but is not limited to, sections on authenticity, communication skills, and general impressions. Last, there is one group station where the executive team, EFRT responders hired by the Program Director, observed applicants’ teamwork, critical thinking, and problem-solving dynamics. For the group station, the rubric includes, but is not limited to, sections on teamwork, skills/knowledge, communication, and general impression. After the MMIs, the executive team selected approximately 42 applicants to progress to orientation (discussed in-depth in the ‘Selection’ section of the paper). See Figure 2 for a sample MMI schedule.

Figure 2: Sample MMI schedule



### *Phase 4: Orientation*

Orientation included nine days of intensive learning and practicing, giving applicants a glimpse into the nature and workload involved with volunteering on the EFRT. Orientation also allowed the EFRT responders to participate in the holistic evaluation of applicants.

#### *Phase 4A: Protocol Learning (Orientation 1)*

Orientation began with a two-day training, colloquially termed 'orientation 1,' which standardizes applicants' knowledge. Orientation 1 consisted of lectures and small group activities teaching SFA, Basic Life Support (BLS), and elements of the EFRT's protocol. Topics include medical emergencies (myocardial infarction, stroke, anaphylaxis etc.), trauma emergencies, and mental health emergencies. The approximately 42 applicants were assigned into small groups of three applicants. Applicants worked with their small group throughout orientation and ultimately completed the group evaluation together. In small group sessions, the EFRT responders with over one year of experience responding on the team clarified lecture content, discussed case studies, performed demonstrations, and delivered practice scenarios.

Orientation 1 equipped applicants with the knowledge and skills needed for their formal evaluations. By incorporating the EFRT's protocol during orientation, we established foundational skills for our future junior responders and test an applicant's ability to learn and apply new information.

#### *Phase 4B: Practice Sessions*

Over the five days between orientation 1 and the formal evaluations, responders held optional practice sessions for applicants, which allowed applicants to apply their knowledge and improve their technical skills. Sessions included practice scenarios or skills practice. Responders provided constructive feedback and clarified any misunderstandings.

On the final practice session, applicants could attend one optional executive member led individual practice scenario. The standardized scenario represented the difficulty of the individual examination (Phase 4D) and concludes with the executive member providing the applicant with feedback.

#### *Phase 4C and 4D Group Evaluation Group and Individual Evaluation (Orientation 2)*

Final evaluations spanned two days: group evaluations on the first day and individual evaluations on the second. Applicants were expected to demonstrate their growth and learning throughout orientation. Evaluations consisted of simulated scenarios which were similar to Observed Structured Clinical Examinations (OSCEs) seen in various healthcare training programs.<sup>2</sup>

The scenarios used in the group and individual evaluations were created before orientation. For the group evaluations,

responders were split into seven groups to create a scenario. The Training Coordinator, a member of the executive team, reviewed all scenarios and ensured each scenario was standardized. For the individual evaluations, the executive team created and standardized the scenarios.

The small groups from orientation 1 responded to seven simulated scenarios of varying topics that are taught throughout orientation. Applicants are evaluated on everything they are taught during Orientation 1 including a variety of medical emergencies, trauma emergencies, and mental health emergencies. Group evaluations assess applicants' didactic, practical, communication, and teamwork skills in a high-stress environment. All EFRT responders worked together to evaluate scenarios. Similarly, individual evaluations had applicants respond to two simulated scenarios. Members of the executive team ran the individual evaluations to provide insight into each applicant's skills and knowledge.

## **Selection Process**

### *Pre-Hiring Training*

Before the EFRT's application process began, the Assistant Director and Training Coordinator created a presentation for responders taking part in the hiring process. The Assistant Director is a paid student position selected by an MSU hiring committee who sits on the executive team and is appointed to oversee many processes, one of which is orientation. The presentation taught responders to create practice scenarios with intentions (e.g., practicing BLS skills) and explicit 'must-sees' and 'nice-to-sees'. 'Must-sees' are actions that a responder should meet within a set time limit to complete the scenario successfully. These are often actions that are pertinent to the patient's survival. 'Nice-to-sees' are actions that contribute to a positive patient interaction, but do not change the patient's survival outcome. For instance, in a heart attack scenario, a 'must-see' assessing the need to administer aspirin, while a 'nice-to-see' would be loosening tight clothing. The presentation included a discussion of power dynamics and hiring biases to make responders aware of the existing power dynamic between them and applicants.

Responders are trained on how to make decisions based on evidence and are taught about different types of biases to look out for (e.g., Confirmation Bias, Halo Effect, First Candidate Effect).

Responders are expected to be aware of any Conflict of Interests (COIs) they may have with applicants and are instructed to declare COIs to the Assistant Director. Responders do not evaluate COIs.

### *Group and Individual Evaluations*

The group and individual evaluations are scored objectively. Responders who made the scenario standardize the rubric used for evaluations prior to the event (i.e., it should be clear what criteria make a 1/5 different from a 2/5 score). During the scenarios, each applicant is evaluated on three criteria: skills/knowledge,

communication/teamwork, and patient care. Each criterion is evaluated on a Likert Scale from 0 to 5 (e.g., 0 = unsatisfactory, 5 = EFRT responder level).

For the individual evaluations, applicants were evaluated on a pass/fail basis. There were 4 evaluation outcomes: strong fail, weak fail, weak pass, or strong pass. An applicant were evaluated by comparing their performance to the scenarios' 'must-sees' and 'nice-to-sees.' An applicant's performance in their individual evaluation was compared to their scores from the group evaluations. This is used to understand the applicant holistically (i.e., to ensure they perform well individually in addition to in a team).

Once the scores from both days were compiled, the executive team created a list of the top-scoring 24 applicants. The executive team referred to interviews and written applications when creating the list.

#### *Executive Team Selection Meeting*

The executive team selection meeting looked at a combination of the final evaluation scores (indicative of technical skills) and feedback made throughout the evaluations (indicative of soft skills). As seen in the EFRT's 40 years of operations, responders hired off of technical skills alone are likely to respond well at the SFA-level but may not flourish at the Emergency Medical Responder level (in which the EFRT operates). To ensure that the executive team hires applicants that will flourish, a high degree of skills must be demonstrated alongside -soft skills valued by the organization "or maybe" soft skills associated with effective medical professionals. Questions asked during this meeting could include things like:

- Who is most likely to be able to provide optimal patient care?
- Who is most likely to adapt to EFRT clinical practices?
- Who will be committed to training and the time commitment of EFRT?
- Who is open to constructive feedback?
- Who fits the Emergency Medical Responder role while demonstrating strong resiliency?

This meeting culminated to picking 14 applicants to be hired onto the team. Two applicants were put on a waitlist in case of declined offers.

#### *Inclusive & Equitable Hiring*

In an umbrella review by Gomez and Bernet, patient outcomes improve with diverse healthcare teams.<sup>3</sup> The EFRT recognizes that being a group of diverse responders helps provide optimal care for patients. Introduced in 2023 to promote inclusive and equitable hiring, the EFRT has included a self-disclosure section on the written application for applicants to disclose their status within a marginalized community. Disclosures are not mandatory. Applicants can choose when and if they make a disclosure.

Disclosures can be made at any time during the hiring process to any member of the executive team and disclosures are kept confidential, within the executive team.

Self-disclosures do not put applicants at any disadvantage during the hiring process. Rather, self-disclosures may be factored in at points in the hiring process where decisions must be made regarding a tie between applicants. For example, when choosing applicants to progress to MMIs after the written test, if two applicants scored the same, the executive team may choose to pick the applicants that reflects McMaster University's commitment to building an intersectional inclusive community.

#### *Admission and Retention*

Admission into the EFRT is competitive, with an average acceptance rate of approximately 8.5% over the past four years. Approximately 90% of the total applicants who submit a written application are invited to the SFA test, and from there, approximately 52-70% of applicants are invited to the MMIs. After the MMIs, approximately 50% of applicants move on to orientation. The hiring process concludes with 12-14 applicants selected each cycle. See Table 1 for a breakdown of applicants at each stage, including data spanning the past four years (2020-2023).

The EFRT has retention rates ranging from 93-100% in junior cohorts (within the first year of responding), and 83-100% in senior cohorts (the remainder of their time on the team prior to graduation). In our opinion, we attribute our team's high retention to the success of the orientation process, which is two-fold in its realistic portrayal of our responsibilities and commitment as a responder, and its accuracy in identifying individuals with substantial potential as a responder, encompassing both in their soft skills and first-aid proficiency. Firstly, despite the time investment demanded from both applicants and current responders, we believe that the high degree of dedication and time commitment required from applicants accurately portrays what is required of a

Table 1: Admission & Retention

Year	2020	2021	2022	2023
Total Applicants (n)	Data not available	136	171	170
Standard First Aid Examination (n)	127	125	155	143
Multiple Mini Interviews (n)	88	84	80	75
Orientation (n)	36	42	42	42
Offered Position (n)	12	12	14	14
Accepted Position (n)	11	12	14	14
Junior Retention (n, % of accepted)	11, 100%	12, 100%	13, 92.86%	14, 100%
Senior Retention (n, % of accepted)	11, 100%	10, 83.33%	13, 92.86%	Data cannot be assessed until 2025

*Note:* Retention is defined as the Responders who remained on the team. Responders not retained included both those who were terminated and resigned.

collegiate EMS responder. As such, the successful applicants are those who demonstrate dedication and time to practicing and improving their skills. Furthermore, given the comprehensive nature of our five-stage evaluation process, our team believes we possess ample insight into the applicants to comprehend their potential as a responder. See Table 1 for a breakdown of retention rates, including data spanning the past four years (2020-2024).

### Conclusion

MSU EFRT has established a comprehensive and highly selective hiring process to ensure junior responders are resilient and well-prepared to handle the demanding nature of collegiate EMS. Using a multi-phase selection method, we identified applicants with the necessary technical and soft skills. We strongly believe that this method enhanced the quality of care provided to the community and contributed to the EFRT's exemplary retention rates. Other collegiate EMS teams facing retention challenges may find it useful to adopt or adapt our hiring process to build a team of resilient responders that can withstand the demands of their role.

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**Conflicts of Interest/Funding Sources:** By the JCEMS Submission Declaration Form, all authors are required to disclose all potential conflicts of interest and funding sources. All authors declared no conflicts of interest. All authors declared that they did not receive funding to conduct this research and/or associated with this work.

**Authorship Criteria:** By the JCEMS Submission Declaration Form, all authors are required to attest to meeting the four ICMJE.org authorship criteria: (1) Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND (2) Drafting the work or revising it critically for important intellectual content; AND (3) Final approval of the version to be published; AND (4) Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

**Submission History:** Received June 20, 2024; accepted for publication July 29, 2024

**Published Online:** September 9, 2024

**Published in Print:** February 21, 2025 (Volume 7, Issue 1)

**Reviewer Information:** In accordance with JCEMS editorial policy, Advice and Practice manuscripts are reviewed by the JCEMS Editorial Board and, as needed, independent reviewers. JCEMS thanks the Editorial Board members and independent reviewers who contributed to the review of this work.

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