

EMS Coordinator Course

National EMS Education Standards

Deb Cason

June, 2015



Objectives

1. What was the big deal about the 2000 *EMS Education Agenda: A Systems Approach*?
2. What are the components of the *Education Agenda*?
2. Why did we need *National EMS Education Standards*?
3. List the 4 components of the *National EMS Education Standards* and how you should use them.

EMS Agenda for the Future

1996 Project/Document

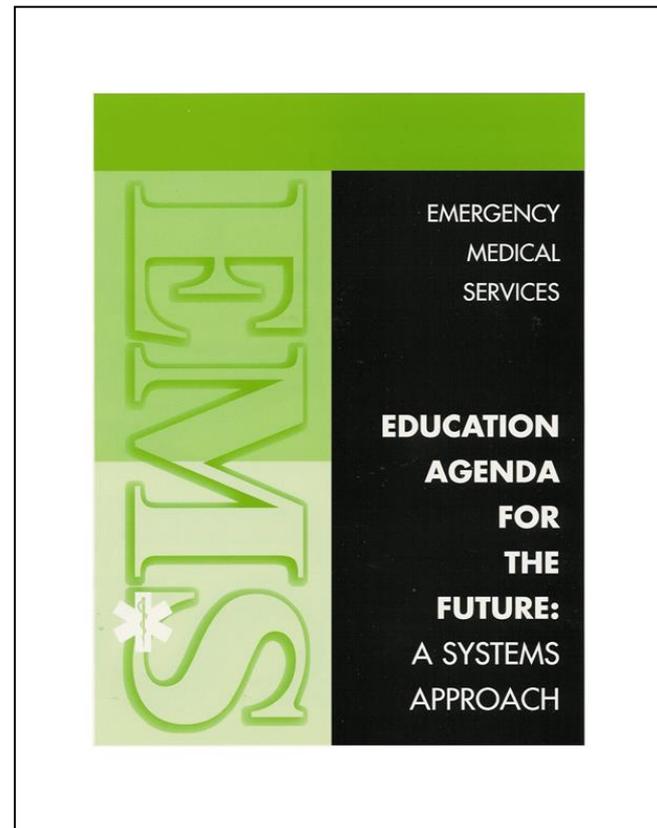
The best way to predict the future is to create it.

Peter Drucker



2000

EMS Education Agenda for the Future: A Systems Approach

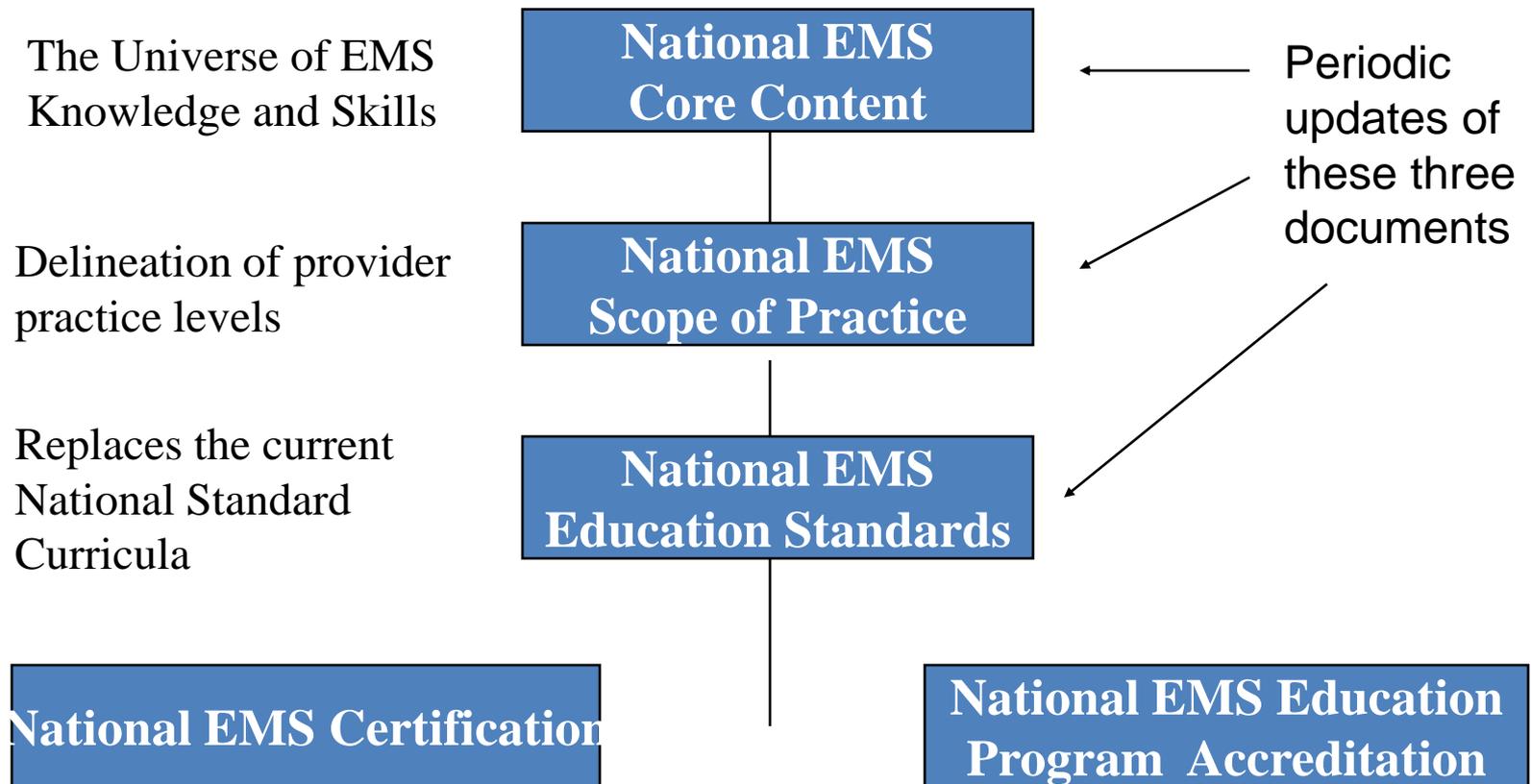


Why did we need an *Education Agenda?*

- NO SYSTEM or MASTER PLAN!
- No plan to allow for change in curricula (Paramedic NSC was from 1998)
- Little flexibility to improve delivery with technical advances
- Little standardization from state to state

- Curricula drove Scope of Practice
- Little mobility of personnel/Variations in licensing and education standards
- Difficulty bridging from one level to another
- Infrequent update

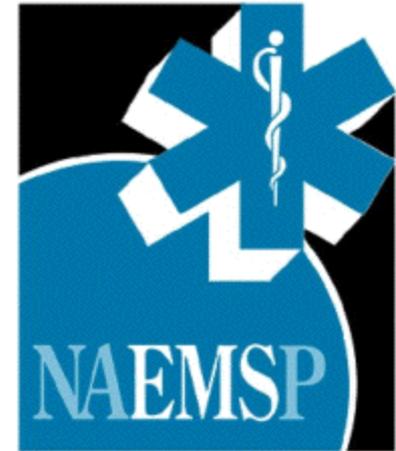
The EMS Education Agenda for the Future: A Systems Approach



A single agency for each function- Standard exam, minimum competence, consumer protection

CORE CONTENT

- Led by
NAEMSP
and ACEP
- Identifies the ENTIRE
DOMAIN of EMS



 American College of
Emergency Physicians®



CORE CONTENT

Procedures and Skills

Airway: adjuncts, cricothyrotomy, O2 delivery systems

Diagnostic procedures: blood chemistry analysis, capnography, pulse oximetry

Resuscitation : CPR for all ages

CORE CONTENT

Medically UNacceptable skills

Burr holes

Demand valve devices without flow-restricted heads

EOA/EGTA

Ipecac

Field amputation

Perimortum C-section



THE NATIONAL EMS SCOPE OF PRACTICE MODEL



Led by State Directors and Training
Coordinators

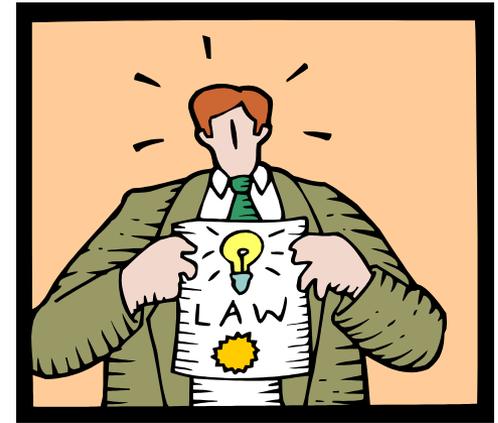
What is a “Scope of Practice?”



- A **legal** description of what a licensed person can, and cannot, do
- Does **NOT** describe
 - what *should* be done
 - *how* it should be done
 - what *must* be done

So, what is a *National* EMS Scope of Practice Model?

- A template for states
to create SOP
laws or regulations



- States may choose to deviate from the SOP
model to accommodate unique local needs and
circumstances

Who defines a “Scope of Practice?”

States

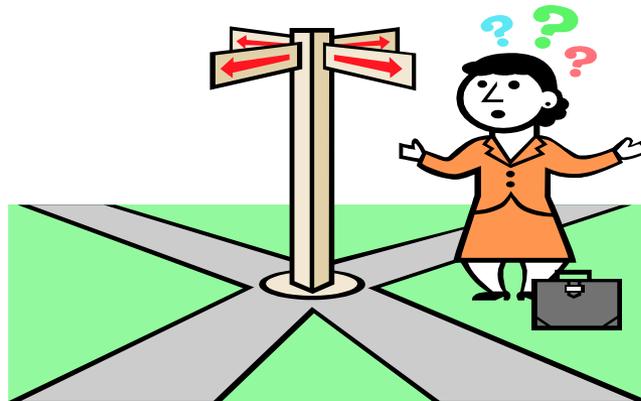
have the *authority* and *responsibility* to set
scopes of practice

Is a National EMS Scope of Practice Model a **floor** or a **ceiling**?

- **SOP model defines *minimum* competencies for the nationally recognized EMS licensures levels**
- **States set the *outer boundaries* of what is in a particular level's scope of practice**

Scope of Practice Model

- **Provides direction for Education Standards**
- **Names and identifies role of each provider level**
- **Identifies skills for each level**



Example: EMR

- Basic airway maneuvers
- Oropharyngeal airway
- Positive pressure ventilation BVM
- Supplemental o₂ therapy nasal cannula, non rebreather mask
- Manual CPR; AED
- Manual stabilization of C-Spine injuries

Example: EMT

- Supplemental oxygen therapy
 - Humidifiers
 - Partial-rebreather mask
 - Venturi mask
- Assessment
 - Pulse oximetry
 - Automatic BP



EDUCATION STANDARDS

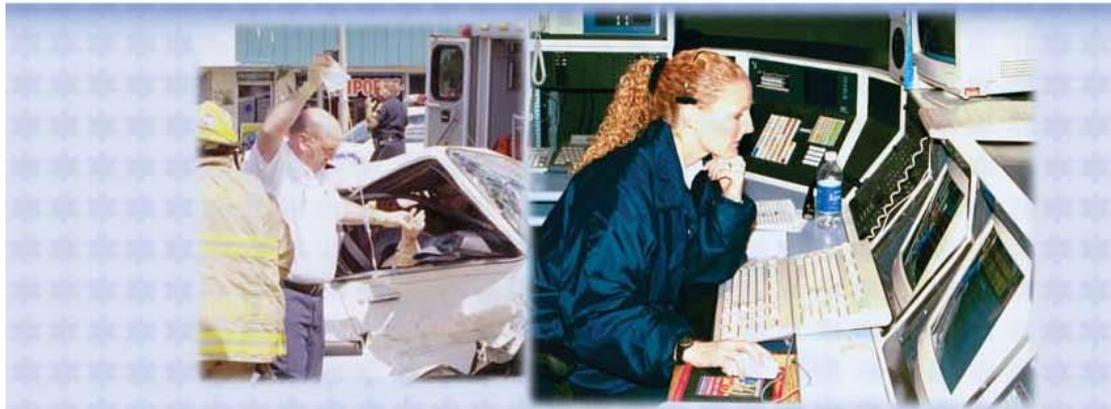
NHTSA & HRSA (EMS-C) contract
with



The National Association of EMS Educators



NATIONAL EMERGENCY MEDICAL SERVICES EDUCATION STANDARDS



Why the Switch to *Education Standards?*

- Curricula—not science—currently drives practice
- Updates to curricula are time consuming and tedious
- Practice not keeping pace with evidence
- Designed to increase EMS education program **flexibility**
- Encourage **creativity**
- Improve and facilitate **alternative delivery methods**

WHAT ARE EDUCATION STANDARDS?

“...the document which provides minimal terminal objectives for each provider level.”

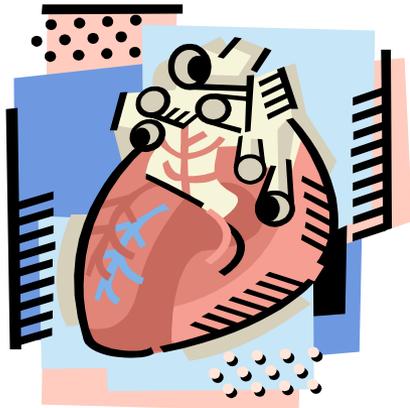
“guide program personnel in making appropriate decisions about what material to cover in class”



EDUCATION STANDARDS

“used by **publishers** to develop instructional material”

HAS REPLACE NSC DOT



GLOSSARY ISSUE

“**EMT**” is specific to that provider level,
NOT generic!

“**EMS Personnel**” or “**EMS Professional**”
is the generic term



- **Medical direction for ALL levels**



- **Student evaluation in all domains, all levels**
- **Course Length = competency based**

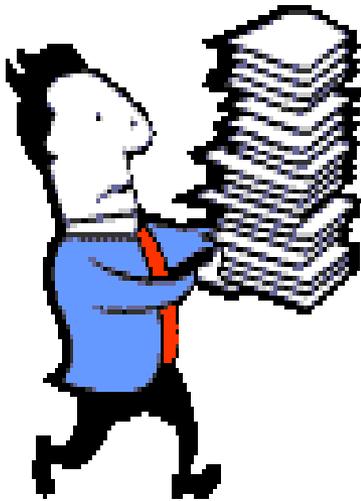
EDUCATION STANDARDS

Are broad and identify the depth & breadth of content



AND

Instructional Guidelines (IG)



- Companion document
- More specific with **elaboration of content**
- Will need frequent update
- Provide **short-term** guidance
- **NOT** intended to be part of standards

National EMS Education Standards

Components

- 1. Competency: minimum competency required for entry level at each level
(these are yellow in the standards)**

see page 19--ASSESSMENT

National EMS Education Standards

2. Knowledge required to achieve competency: elaboration of knowledge in the competency

see page 19- 20: Scene size up, Primary Assessment, History Taking, Secondary Assessment

National EMS Education Standards

- **Clinical behaviors/judgments: essential for each level**

See page 53-55: Professionalism, Decision Making, Record Keeping, Patient Complaints, Scene Leadership

National EMS Education Standards

- **4. Educational Infrastructure: support standards to conduct training**

See page 56- 59

Paramedic: CoAEMSP/CAAHEP standards

**Hospital/clinical experience, field experience,
student evaluation**

NATIONAL CERTIFICATION



WHAT IS NREMT?

Mission: to serve as the national EMS certification organization by providing a valid, uniform process to assess the knowledge and skills required for competent practice required by EMS professional throughout their career.



NREMT Exams Reflect Practice

- Practice Analysis completed every 5 years to develop a clear and accurate picture of the current job
- Practicing EMS professionals rate various tasks they are required to perform
 - Frequency (1/3)
 - Potential of Harm (2/3)
- Just published 2009 analysis test plans

WHY NREMT?

- **Non-profit**
- **Multidisciplinary Board of Directors**
- **NOCA Accredited**
- **NREMT has certified over 1,000,000 providers since 1970**
- **Currently over 270,000 providers certified**

National Registration

NREMT

2014 EMT

National 1st time pass rate: 68%

TEXAS 1st time pass rate: 70%

National *average pass rate: 79%

TEXAS over all pass rate: 79%

National Registration NREMT

2014 PARAMEDIC

National 1st time pass rate: 75%

TEXAS 1st time pass rate: 74%

National average* pass rate: 86%

TEXAS over all pass rate: 84%

* “National Average” is the cumulative pass within 3 attempts

National Accreditation

- Commission on Accreditation of Allied Health Education Programs (CAAHEP)
- Committee on Accreditation of EMS Professions (CoAEMSP) (formerly JRC EMTP)

National Accreditation CoAEMSP/CAAHEP



2015

Accredited programs:	459
LOR's:	215
On Hold:	<u>15</u>
	689

National Accreditation CoAEMSP/CAAHEP



2009: 100 Paramedic programs in **TEXAS**
only **15** accredited

2015: **43** accredited
17 LOR's

God Bless Texas