

# **2020 EMS System Education & Training Guidance**

## **Muskegon County Medical Control Authority Education Committee**

### **Purpose**

This document establishes and promulgates policies and procedures for consistent and structured education and training requirements within the Muskegon County Medical Control Authority (MCA) for the 2020 calendar year.

### **Background**

The Medical Control Authority is responsible for the design and oversight of the EMS system, to include the establishment of written protocols which provide for the provision of EMS care. Life Support Agencies are responsible for ensuring licensed personnel are trained on all equipment, policies, procedures and protocols, and are accountable to the Medical Control Authority in the provision of emergency medical services. Both the Medical Control Authority and Life Support Agency are required by statute to maintain a quality improvement program.

As a part of the Quality Improvement process, the MCA evaluates system-wide areas of concern and opportunities for improvement. While the MCA makes efforts to address each of these improvement opportunities, it is our intent to select a few “Principle Subject Areas” each year that warrant the highest level of attention, and to place the bulk of resources toward addressing these opportunities. Other “Additional Subject Areas” are included in this document but will require fewer resources to accomplish. In addition, two optional subject areas have been included for agencies who wish to further their effectiveness and raise the bar in areas of additional training and leadership.

### **Coordinating Instructions**

Life Support Agencies should use this document to plan and build their education calendars. All training and education shall be conducted in accordance with approved Medical Control Authority (MCA) standards (i.e., must be conducted by an approved instructor, through an approved education program, using approved lesson plans and education templates). Before teaching a topic, instructors should attend applicable train-the-trainer sessions with the Medical Control Authority.

All courses taught under these guidelines will be posted to the Medical Control Authority website education calendar once approved by the Medical Control Authority. If providers are unable to attend a required training within their own respective agency/department, they are encouraged to visit the website to locate additional training opportunities at [www.wmrmcc.org/Calendar](http://www.wmrmcc.org/Calendar).

## **Instructors**

All education & training should be taught by qualified instructors who are part of the MCA's CE Consortium, or approved by the Education Committee on a case-by-case basis. Agencies which do not have qualified instructors should review the current list of approved instructors at [www.wmrmcc.org/MCA/Muskegon/CE-SPONSORSHIP/Approved-Instructors](http://www.wmrmcc.org/MCA/Muskegon/CE-SPONSORSHIP/Approved-Instructors) and make arrangements with existing instructors, or submit to the CE Sponsor to have an instructor added. When selecting an instructor, agencies should ensure the instructor is appropriate for the topic being taught (e.g., some topics require specialized knowledge and/or credentials).

Before teaching a topic, instructors should attend applicable train-the-trainer sessions with the Medical Control Authority.

**Note:** It takes at least 30 days to have an instructor added to the CE Sponsor Consortium.

## **Instructional Materials**

It is the goal of the MCA to foster consistent training & education standards. All education & training conducted as a result of this document should be done using existing instructional materials created and/or approved by the Education Committee, including lesson plans, objectives, outlines, presentations, quizzes, tests, etc. Instructors can find these resources at [www.wmrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wmrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

## **Continuing Education Credits**

The Education Committee is committed to ensuring CE credits are available for all education & training, to the extent possible. Credits can be obtained through the CE Sponsor Consortium by following current policies for conducting a course, which can be found at [www.wmrmcc.org/MCA/Muskegon/EDUCATION/CE-SPONSORSHIP](http://www.wmrmcc.org/MCA/Muskegon/EDUCATION/CE-SPONSORSHIP) and clicking on '**Course Policy**' under the "**Policies & Procedures**" section. Unfortunately, for topics that are under 30 minutes credits will not be available.

## **Compliance**

It is the responsibility of both the individual provider and the agency to ensure the provider is up-to-date with current credentialing requirements, which includes attendance of any mandatory system in-service or skills stations (see: **Medical Control Privileges Protocol and Addendum**). Course completion paperwork can typically be submitted by the instructor to the CE Sponsor Consortium, including attendance rosters, which will serve as the primary measurement of compliance. (see: Compliance under each topic area for more specific instructions).

The Medical Control Authority will conduct audits of compliance with these education guidelines. Failure to comply will result in disciplinary action of either the provider and/or agency as outlined in applicable protocol and policies.

This training guidance was formulated based on consensus of both the Education and Advisory committees and was driven by various quality improvement initiatives of the Medical Control Authority.

### **Education Committee Members**

Joe Kinnucan (NSFD)  
April Bisson (PMT)  
Chad Lawton (MCA)

Brian Michelli (FFD)

Dion Stumpo (WLAA)  
Rich Warner (EM)  
Damon Obiden (MCA)

### **Advisory Board Members**

Jonathon Degen  
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This Bulletin is effective the date signed.



Jerry Evans, MD  
Medical Director

# 2020 EMS System Education & Training Guidance

## Introduction

This document is comprised of four sections. The minimum training time this encompasses is approximately 6 hours, depending on the licensure level of agency and participation in certain advanced programs and special studies.

## Principle Subject Areas

This section is the primary focus of the education & training guidelines and contains topics identified as system-level areas of improvement, applicable to all levels.

### Med-Legal

1.5 hrs

- Dead on Scene
- Do-Not-Resuscitate
- Termination of Resuscitation
- Refusal of Care
- No Medical Need
- Determination of Death
- Use of Lights & Sirens

Preparatory

### HP-CPR

3 hrs

- High Performance CPR
- Airway Control / Ventilation
- iGel Airway
- Automated Compression Device
- Overdose

Medical / Peds Medical

### Human Trafficking

1.5 hrs

- What is human trafficking?
- Act
- Means
- Purpose
- Indicators
- Prevalence
- EMS Role

online

Patient Assessment

## Additional Subject Areas

This section contains topics that must be covered on a regular basis, or programs that are new to the MCA and require initial education.

### Enhanced Paramedic

- Chest Tubes
- Ventilators
- IV Pumps
- Expanded Medication List

### ASHER Training

- Full Scale Exercises

### Advanced MFR

- Narcan
- Epi IM
- iGel Airway



ALS ONLY

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FD ONLY

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## Leadership

*Optional*

This section contains leadership training opportunities and is intended for any provider in a leadership position, such as fire officers, field training officers, supervisors, management and command staff. While these trainings are offered as optional, it is our goal to provide EMS leadership training opportunities to help grow the leadership within the EMS system. We should always be working toward grooming our successors.

Just Culture

EQIP

ICS 300 / 400

BDLS / ADLS

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## Recommended

*Optional*

This section contains topics that are strongly encouraged by the MCA, but that are not required.

HazMat Decon

Documentation

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# Principle Subject Areas

## Detailed Instructions

### **Med-Legal**

All agencies shall facilitate for each licensed provider to receive MCA approved education & training regarding current applicable medical-legal considerations affecting EMS, including minimally the topics listed below.

- Dead-on-Scene
- Termination of Resuscitation
- No Medical Need
- Use of Lights & Siren
- Patient Confidentiality
- Do-Not-Resuscitate
- Refusal of Care
- Determination of Death
- EMTALA

**Instructors:** may use any appropriate CE Consortium I/C or SME or Education Committee approved instructor

**Lesson Plan:** available at [www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

**Presentation:** available at [www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

**Compliance:** verified by use of CE Consortium Attendance Roster

**Competency:** to be evaluated through instructor & student interaction

**Credit Category:** 1.5 Preparatory (\*pending State approval)

Completed by: **4<sup>th</sup> quarter**; Minimum training time: **1.5 hours**

### **High-Performance CPR (HP-CPR)**

All agencies shall facilitate for each licensed provider to receive MCA approved education & training on High Performance CPR and associated topics listed below. In an effort to make required training as efficient and time-sensitive as possible, all advanced MFR skills have been built into this training. Agencies have the option of completing those advanced MFR skills they are participating in either within this training, or as a standalone training (see *Advanced Skills* under **Additional Subject Areas** section of this document).

- High Performance CPR
- iGel Airway
- Overdose (Nalxone)
- Airway Control/Ventilation
- Automated Compression Device
- Anaphylaxis (MABEES)

**Instructors:** may use any appropriate CE Consortium I/C or SME or Education Committee approved instructor

**Lesson Plan:** available at [www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

**Presentation:** available at [www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

**Compliance:** verified by use of CE Consortium Attendance Roster

**Competency:** to be evaluated through instructor & student interaction, as well as Skills Evaluation Check sheets

**Credit Category:** 1 Peds Medical; 2 Medical (\*pending State approval)

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Completed by: **4<sup>th</sup> quarter**; Minimum training time: **3 hours**

### **Human Trafficking (online)**

All agencies shall facilitate for each licensed provider to receive MCA approved education & training on Human Trafficking, including the topics listed below.

- What is Human Trafficking
- Act
- Means
- Purpose
- Indicators
- Prevalence
- EMS Role

**Instructors:** n/a

**Lesson Plan:** n/a

**Presentation:** available at [www.wmrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wmrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

**Compliance:** each student must submit a copy of proof of attendance to the MCA

**Competency:** students must pass an end-course quiz to obtain proof of attendance

**Credit Category:** 1.5 Patient Assessment

Completed by: **4<sup>th</sup> quarter**; Minimum training time: **1.5 hours**

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# Additional Subject Areas

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## Detailed Instructions

### **Enhanced Paramedic** **ALS ONLY**

All Advanced Life Support licensed agencies who regularly conduct interfacility transfers shall facilitate for each licensed Paramedic to receive MCA approved education & training at the “Enhanced Paramedic” level, as outlined in current protocol (July 2018). These trainings will include both online eLearning and hands-on practical skills components.

- Antibiotics
- Antivirals
- Blood & blood products
- Colloids, crystalloids, lipids
- Heparin
- Nexium (esomeprazole)  
& Protonix (pantoprazole)
- Nitroglycerine
- Mag. sulfate/Calcium gluconate
- Pepcid (famotidine) & Zantac (ranitidine)
- Potassium (up to 20 mEq)
- Sodium bicarbonate
- TPN (Total Parenteral Nutrition)
- Tranexamic Acid (TXA)

**Instructors:** must be approved by the Medical Control Authority

**Lesson Plan:** available at [www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

**Presentation:** available at [www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

**Compliance:** verified by use of CE Consortium Attendance Roster

**Competency:** short question/answer at conclusion of each training module, as well as written summative evaluation test at end of course and practical skills verification (test results must be provided to the MCA)

Completed by: **4<sup>th</sup> quarter**; Minimum training time: **12 hours**

### **Advanced Skills** **FD & ALS**

All participating agencies shall facilitate for each licensed provider to receive MCA approved refresher education & training in the appropriate application and use of the following:

- **Naloxone Intranasal Administration** (*Narcan*) (MFR, EMT)
- **MABEES\* Intramuscular epinephrine injection** (MFR, EMT)
- **iGel Supraglottic Airway & Capnography confirmation device** (MFR)

**Instructors:** may use any appropriate CE Consortium I/C or SME or Education Committee approved instructor

**Lesson Plan:** available at [www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

**Presentation:** available at [www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

**Compliance:** verified by use of CE Consortium Attendance Roster




**Competency:** written summative evaluation; practical skills test scenario

Completed by: **4<sup>th</sup> quarter**; Minimum training time for each skill: **0.5 hours**

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**ASHER (Active Shooter & Hostile Event Response)**    **ALL DISCIPLINES**

All agencies should participate in a full scale exercise to the extent possible. Goal is to achieve at least 30 percent saturation of all providers. Exercises will be coordinated by the Muskegon County Emergency Manager and Exercise Design Team. Additional details and guidance will be published when available.

**Instructors:** Assigned by the Muskegon County Exercise Design Team

**Lesson Plan:**

**Presentation:**

**Compliance:** verified by use of CE Program Attendance Roster

**Competency:** to be evaluated through instructor & student interaction, as well as formal exercise evaluators and after action reporting

**Credit Category:** 1 Trauma; 1 Operations – Emergency Preparedness (\*pending State approval)

### **Exercise Dates, Times, Locations**

**Orchard View High School**

February 14, 2020  
1:00pm-3:00pm

**Ravenna High School**

February 15, 2020  
10:00am-12:00pm

**Whitehall High School**

February 16, 2020  
4:00pm-6:00pm

\*scheduled dates, times and locations are tentative and subject to change and are intended to give agencies advance notice so they may plan accordingly

Completed by: **1<sup>st</sup> quarter**; Minimum training time: **2 hours**

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# Leadership

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## *Optional*

### **Just Culture**

Just Culture is a leadership program by the Center for Patient Safety that aims to reshape our understanding of accountability, the role of the system, and the role of human behavior. Just Culture helps leadership to establish a culture that encourages open reporting of adverse events and risky situations, yet hold people and organizations accountable in a just manner.

For more information go to [www.wmrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wmrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

### **BDLS/ADLS**

Basic and Advanced Disaster Life Support are courses designed by the National Disaster Life Support Foundation. NDLSF is dedicated to the establishment and propagation of standardized, all-hazards, multi-disciplinary, and competency-based training programs.

**BDLS** is an 8 hour competency-based, awareness-level course that introduces concepts and principles to prepare health professional for the management of injuries and illnesses caused by disasters and public health emergencies. BDLS is a pre-requisite to ADLS.

**ADLS** is an intense 2-day, 15-hour course that allows participants to demonstrate competencies in mass casualty management.

It is the goal of the MCA to see every leader in the system attend an ADLS course within the next three years. The next ADLS course will be announced soon and posted to the MCA education calendar at [www.wmrmcc.org/Calendar](http://www.wmrmcc.org/Calendar). The pre-requisite BDLS courses are routinely scheduled throughout the region. Dates and locations can be found at [www.wmrmcc.org/Calendar](http://www.wmrmcc.org/Calendar), or by contacting Luke Aurner, Region 6 Healthcare Coalition Coordinator. Both courses are free of charge and are pre-approved by the Bureau of EMS, Trauma & Preparedness for several CE credits (see MDHHS Pre-Approved CE Course at [www.wmrmcc.org/MCA/Muskegon/EDUCATION](http://www.wmrmcc.org/MCA/Muskegon/EDUCATION)).

### **ICS 300: Intermediate ICS for Expanding Incidents**

This course provides training on and resources for personnel who require advanced application of the incident command system, and expands upon information covered in the ICS-100 & 200 courses.

Courses will be scheduled locally in Muskegon County and are available throughout Michigan.

Open courses can be found by registering and logging into the MI-TRAIN website at [www.train.org/mi-train](http://www.train.org/mi-train). Local courses will be added to the MCA education calendar throughout the year at [www.wmrmcc.org/Calendar](http://www.wmrmcc.org/Calendar).

## **ICS 400: Advanced ICS Command and General Staff Complex Incidents**

This course provides training on and resources for personnel who require advanced application of the incident command system, and expands on information covered in the ICS-100, 200 and 300 courses.

Courses will be scheduled locally in Muskegon County and are available throughout Michigan.

Open courses can be found by registering and logging into the MI-TRAIN website at [www.train.org/mi-train](http://www.train.org/mi-train). Local courses will be added to the MCA education calendar throughout the year at [www.wmrmcc.org/Calendar](http://www.wmrmcc.org/Calendar).

## **EMS Quality Improvement Program (EQIP)**

This course is designed to provide the EMS leader with the baseline knowledge needed to administer a quality improvement program within their respective agency. The goal of the system is to provide safe, effective, efficient, patient-centered care in a timely fashion. This is accomplished, in part, by providing leadership to the EMS community to establish best practices and collaboration amongst stakeholders to provide the highest quality care to patients through a rigorous EMS Quality Improvement Program.

For more information go to [www.wmrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wmrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

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## Recommended

*Optional*

### **Patient Documentation:** ALS & FD

Patient documentation is a critical aspect of EMS patient care. Quality patient care reports support the clinical, operational, legal, and reimbursement aspects of your agency. EMS agencies and providers should continue to work on improving their patient care reporting. Some of the more common concerns the Medical Control Authority continues to see include the following:

- Poor spelling, bad grammar & use of improper acronyms and abbreviation
- Narrative does not “paint a picture” of patient’s true condition
- Inconsistencies
- Incomplete documentation

Throughout 2020, the Medical Control Authority will continue to work with its agencies and providers to improve our patient care reporting. Education is currently available on our website, and more will be added throughout the year.

Documentation Education is available at: [www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)

### **HazMat Decon:** ALS & FD

The intent of this course is to provide refresher information on recognition and mitigation of a hazardous materials incident, including patient decontamination, with a focus on keeping providers and patients safe from exposure and contamination by toxic substances. While the prevalence of such responses is moderately low, there have been a number of documented incidents where contaminated patients have not received proper decontamination and were transported to local emergency departments, contaminating ambulances and emergency departments in the process, and putting providers at risk.

HazMat Education is available at: [www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING](http://www.wrmcc.org/MCA/Muskegon/EDUCATION/IN-SERVICE-TRAINING)