

**NEMSAC Recommendations to NHTSA for Minimal Updates to the
EMS Education Agenda for the Future: A Systems Approach**

The *EMS Education Agenda for the Future: A Systems Approach (Education Agenda)* is now nearly fifteen years old. While much of the current Education Agenda has been accomplished, the ongoing need to assess our progress and its alignment with our educational goals is plain. At the suggestion of many national EMS leaders, the National Emergency Medical Services Advisory Council (NEMSAC) convened a national “Roundtable on the *EMS Education Agenda for the Future*” on March 28, 2012, to obtain input from EMS stakeholders across the entire spectrum of EMS education and clinical practice. The message from our colleagues was clear: many states and localities have only recently begun to experience the full impact of the evolution toward a nationally integrated system of education for EMS personnel; a major revision or change in direction of the *Education Agenda* could interfere with its ongoing implementation.

The NEMSAC therefore concluded that the *Education Agenda* should be updated with minor revisions to ensure that it is contemporary, and invited public comment from EMS stakeholders regarding the breadth and depth of these minimal updates. Specifically, the NEMSAC sought public comment on key educational issues that were not yet part of the EMS landscape in June 2000 when the *Education Agenda* was first published. The NEMSAC does not intend to propose fundamental changes to the structure of the current EMS education system as outlined in the *Education Agenda*. Examples of updates that were discussed during the NEMSAC deliberations included, for example, addressing patient and provider safety, as well as disaster preparedness and public health.

To this end, the NEMSAC established a working group to review public comments that were received prior to the deadline date of February 1, 2014. This document represents the results of the deliberations of the working group and its preliminary recommendations to the NEMSAC, which in turn, will consider these recommendations before making final recommendations to the NHTSA.

1. Recommended changes to the Vision section of the Education Agenda:
 - a. Add a statement emphasizing the importance of implementing Evidence-Based Guidelines and “Model EMS Clinical Guidelines” within the EMS educational framework at the State level.
 - b. Add a chart of milestones to track all future updates of the Education Agenda and its components. This will encourage and facilitate future document revisionists to concomitantly update the table.
 - c. The Agenda should articulate a vision for the preparation and professional development, mentorship, and utilization of EMS educators.
2. There are no recommended changes to the Executive Summary section of the Education Agenda.

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3. Recommended changes to the Introduction section of the Education Agenda:
 - a. Update the section titled “Opportunities for Improvement” (beginning on page 11) to reflect the current state of EMS. This would include a brief discussion of mobile integrated healthcare and expanded scope of practice.
 - b. Add language that emphasizes the dynamic nature of this and all component documents. This language should include a recommendation for developing a plan for reviewing and updating the documents.
 - c. Add language that emphasizes the important role that data and information analysis, e.g., NEMSIS, evidence based research, practice analysis, and other sources can play in shaping current and future clinical practice and provider education.
 - d. Add the statement ... “Implementation of the Education Agenda benefits the EMS professions and the nation by promoting the consistency and quality of EMS education across the land. It benefits the States by avoiding duplication of effort, and by facilitating reciprocity of EMS provider licensure or certification across State lines. However, it is recognized that each State ultimately retains the authority to regulate EMS education within its borders.

4. Recommended changes to the National EMS Education System section of the Education Agenda:
 - a. Add language to further emphasize the importance of ensuring that science is the driving force for patient care and EMS education delivery.
 - b. Add language to address the number of existing training programs offering associate degrees and baccalaureate degrees in EMS. To maintain currency, this language would document general trends instead of numbers.
 - c. Add a broad statement emphasizing the importance of high quality continuing education and add language encouraging continuing education providers to move toward a competency-based approach that actively involves student participation.

5. Recommended changes to the National EMS Core Content section of the Education Agenda:
 - a. Add language to develop a revision plan to review and update the Core Content that is not too prescriptive.

6. Recommended changes to the National EMS Scope of Practice Model section of the Education Agenda:
 - a. Add language that emphasizes the dynamic nature of this Model and include in the revision plan (see 5a above) to review and update the Scope Model that is not too prescriptive.

7. Recommended changes to the National EMS Education Standards section of the Education Agenda:
 - a. Add language that emphasizes the dynamic nature of the Standards and include in the revision plan (see 5a and 6a above) to review and update the Standards that is not too prescriptive.

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- b. Add language that addresses current trends in EMS education that lie outside the scope of the published National EMS Education Standards, such as patient/provider/public safety, and disaster and emergency prepared including both traditional and non-traditional response models (e.g., to improvised explosive devices and active shooter incidents)... This language would encourage improvement to existing EMS course objectives/requirements through the use of existing Federal and national resources without the need for states or EMS agencies to incur additional expense.
5. Recommended changes to the National EMS Education Program Accreditation section of the Education Agenda:
 - a. Add language comparing raw program accreditation numbers and the number of States requiring CoAEMSP accreditation at the Paramedic program level from 2000 to 2014.
 6. Recommended changes to the National EMS Certification section of the Education Agenda:
 - a. Add language comparing raw certification numbers and the number of States requiring NREMT certification from 2000 to 2014.

“Parking Lot” Issues

During the public comment period and the NEMSAC Education Agenda Revision Committee’s deliberations, there were several important issues raised that were deemed to be significant changes to the *Education Agenda* and not minor revisions. NEMSAC recommends NHTSA provide this list to those tasked with doing a more substantial revision of the *Education Agenda* in the future.

- Minimum of National EMS Certification required for every State
- Move toward Paramedics holding a minimum of an Associate of Applied Science degree.
- Designate a Federal lead agency for EMS.
- During the public comment, there was significant support for utilizing the single national accreditation and certification agencies. There were also some concerns expressed regarding this approach due to monopoly and cost control issues. This may be a subject for future discussion.
- Explore how simulation-based training and distributive and distance learning (e. g. telehealth) may improve EMS education delivery.
- Encourage growth and development of individuals with terminal degrees to enhance the overall development of the EMS profession and ascertain the appropriateness and feasibility of a future doctorate in EMS.
- Explore opportunities to transition other healthcare providers (nurses, military medics, physician assistants, respiratory therapists, etc.) into the EMS profession.