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### **Version History**

Version	Date	Details
1	July 2014	This standard supersedes the previous EMT (RCS006-V2) and
		includes course approval criteria previously set out in Council
		Rules (RUL006-V4). Content of standard unchanged.



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## **Role and Professional Responsibility of an EMT**

Emergency Medical Technicians (EMT) are trained emergency care practitioners. The education and training standard at EMT level prepares the course participants for managing patient care in interfacility and pre-hospital emergency care settings. The standard for EMT includes patient assessment skills in addition to more thorough patient care and management skills. An EMT is the minimum practitioner grade that is trained for transporting inter-facility patients who are defined as Acuity Levels "Non acute Care" and partnered with a Paramedic can assist with "Acute Non Emergent Care" (Ref: PHECC's Inter Facility Patient Transfer Standard). EMTs may also be dispatched in response to pre-hospital emergency care patients who are classified as Omega "Minor illness or injury" (Ref: PHECC's EMS Priority Dispatch Standard). EMT will also assist other practitioners at pre-hospital emergency care incidents. In addition, EMTs provide pre-hospital emergency care services at events and other sporting and recreational events nationally.

Successful completion of the EMT standard and assessment leads to the Pre-Hospital Emergency Care Council (PHECC) award of the National Qualification in Emergency Medical Technology (NQEMT) at the level of EMT. This award is required for registration with PHECC at the EMT division. This requirement ensures that the EMT has fulfilled the educational and training requirements as prescribed by PHECC, thereby possessing the knowledge, skills and professionalism in line with the expectations of the public and the profession.

To practice, an EMT is required to maintain their name on the PHECC Register and is also required to ensure their on-going clinical competence by participation in continuous professional competency programmes.

# Learning Outcomes for the EMT Standard

The education and training standard is the expected competency of the student upon completion of a recognised course. A graduate, at the end of a recognised EMT course, will be able to:

- 1. Provide the appropriate standard of patient care for Interfacility transfers and pre-hospital emergency care services.
- 2. Safely and appropriately access, retrieve and transport patients.
- 3. Adopt a professional approach to their practice.
- 4. Demonstrate a commitment to continuous professional competence.

# A number of key domains arise from the course outcomes and are listed below. Note that these domains can cross over into more than one course outcome.

#### Learning Outcome 1

Provide the appropriate standard of patient care for Interfacility transfers and pre-hospital emergency care services, including:

- 1. Recognition and assessment of both life-threatening and common serious medical and trauma conditions.
- 2. Selection of an appropriate patient management plan, application of appropriate interventions, and the correct monitoring of the patient according to PHECC clinical practice guidelines and scope of practice.
- 3. Appropriate on-going maintenance of the patient care record (PCR) and utilisation of best communication practice including patient handover procedures.

#### Learning Outcome 2

Safely and appropriately access, retrieve and transport patients.

#### Learning Outcome 3

Adopt a professional approach to their practice, by:

- 1. Retaining a professional manner and method in the performance of their duties
- 2. Basing their professional practice on a solid foundation of both basic and clinical sciences.
- 3. Utilising best practice as prescribed by standard pre-hospital emergency care operational procedures.

#### Learning Outcome 4

Demonstrate a commitment to continuous professional competence.

- 1. Maintaining personal well-being and professional relationships with colleagues
- 2. Identify with the role of the EMT

The learning objectives in the standard refer to the management of adults and paediatric patients unless stated otherwise. The standard of care management for patients with general medical emergencies and trauma is outlined in PHECC clinical practice guidelines (CPGs) and includes medication administration where indicated. The CPGs may be accessed from the website of the PHECC <u>www.phecc.ie</u>.

# Framework for the EMT Standard

Framework for the Emergency Medical Technician Standard				
Learning Outcome (L)	Educational Domain(D)	Module(s)		
Provide the appropriate standard of patient care for Interfacility transfers and pre- hospital emergency care services	Recognition and assessment of common life-threatening and common serious medical and trauma conditions (L1D1)	<ol> <li>Primary survey</li> <li>Secondary Survey</li> </ol>		
(L1)	Selection of an appropriate patient management plan, application of appropriate interventions, and the correct monitoring of the patient according to PHECC clinical practice guidelines and scope of practice (L1D2)	<ol> <li>Airway and ventilation</li> <li>Respiratory emergencies</li> <li>Cardiac first response<sup>1</sup></li> <li>Cardiovascular emergencies</li> <li>General medical emergencies</li> <li>Bleeding, shock and soft tissue injuries</li> <li>Musculoskeletal, head and spinal injuries</li> <li>Childbirth and neonatal resuscitation</li> <li>Paediatrics</li> </ol>		
	Appropriate on-going maintenance of the patient record and utilisation of best communication practices including patient handover procedures (L1D3)	<ol> <li>Legislation and Information management</li> <li>Communications</li> </ol>		
Safely and appropriately access, retrieve and transport patients (L2)		<ol> <li>Basic patient care</li> <li>Gaining access to the patient at scene</li> <li>Ambulance operations</li> </ol>		
Adopt a professional approach to their practice (L3)	Retaining a professional manner and method in the performance of their duties as a registered EMT (L3D1)	<ol> <li>Professional practice and medico- legal issues concerning the EMT</li> <li>Patient safety and Quality assurance</li> </ol>		
	Basing their professional practice on a solid foundation of both basic and clinical sciences (L3D2)	<ol> <li>Clinical anatomy and physiology</li> <li>Pharmacology</li> <li>Infection prevention and control</li> <li>Intramuscular injection</li> </ol>		
	Utilising best practice as prescribed by standard pre-hospital emergency care operational procedures (L3D3)	<ol> <li>Radio communications</li> <li>Hazardous material incident</li> <li>Major Emergency</li> <li>Civil disorder</li> </ol>		
Demonstrate a commitment to continuous professional competence (L4)	Maintaining personal well-being and professional relationships with colleagues (L4D1)	1. The well-being of the EMT		
	Identify with the role of the EMT (L4D2)	<ol> <li>Continuum of pre-hospital emergency care</li> <li>Continuous professional competence</li> </ol>		

<sup>&</sup>lt;sup>1</sup> The CFR Advanced level is either a pre-requisite or co-requisite.

#### Learning Outcome 1 – Domain 1

Provide the appropriate standard of	Recognition and assessment of common life-
patient care for interfacility transfers	threatening and common serious medical and
and pre-hospital emergency care	trauma conditions
services	

### **Primary Survey**

At the completion of this module the student will be able to describe and demonstrate the elements of a primary survey for the medical and trauma patient while considering pre-arrival information and maintaining scene safety while initiating interventions essential to maintain life in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

- 1. Discuss the components of scene assessment
- 2. List common hazards found at a scene
- 3. Discuss the reason for identifying the total number of patients at the scene
- 4. Explain the reason for identifying the need for additional help or assistance
- 5. Identify the assessments made under the following as part of a primary survey for a medical and trauma patient as appropriate:
  - Airway
  - **c** spine
  - Breathing
  - Circulation
  - **D**isability
  - Exposure
- 6. Differentiate between a clear, partially obstructed and obstructed airway
- 7. State the reason for the management of cervical spine until trauma is ruled out
- 8. Differentiate between normal, abnormal, fast, slow and absent breathing rates and between shallow, laboured and noisy breathing
- 9. Differentiate between regular and irregular, fast, slow and normal pulse
- 10. Discuss the need for assessing the patient for external bleeding
- 11. Differentiate between normal, pale, flushed and cyanosed skin types
- 12. Identify normal and abnormal capillary refill time
- 13. Outline the methods for assessing Disability or AVPU assessment
- 14. List the procedure for Exposure to check for obvious injuries
- 15. Explain the need for consent prior to assessment and or care management
- 16. Differentiate between the categories in a "Clinical Status" decision (on the PCR)
- 17. Define Clinical Impression

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Explain why basic life support airway and ventilation skills take priority over other emergency care skills
- 2. Recognise and respond appropriately to the feelings patients experience during assessment

#### Skills Objectives

- 1. Demonstrate the assessment of various scenarios for scene safety scene survey and scene situation while identifying potential hazards and controls
- 2. Demonstrate the patient assessments skills used as part of a primary survey for a medical and trauma patient
- 3. Demonstrate obtaining consent from a patient prior to commencing emergency care
- 4. State the initial clinical status decision made following the completion of a primary survey

# Secondary Survey

At the completion of this module the student will be able to describe and demonstrate the elements of a secondary survey for the medical and trauma patient while considering findings and initiating care management in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Distinguish between Chief Complaint and Clinical Impression
- 2. Collate a history based on the Pneumonic SAMPLE: <u>Signs & Symptoms, Allergies, Medication,</u> <u>Pertinent medical history, Last intake, Event (SAMPLE)</u>
- 3. Collate a focused history based on the Interview Pneumonic OPQRST: <u>Onset</u>, <u>Provocation</u>, <u>Quality</u>, <u>Region / Referral / Recurrence / Relief</u>, <u>Severity and Time</u> (OPQRST)
- 4. List the components of the detailed physical exam/ head to toe survey
- 5. Describe the methods for assessing Circulation, Sensation and Movement (CSM)
- 6. Outline the precautions to take during and after searching the patient for identification and medical history clues
- 7. Explain normal air entry and identify audible breath sounds associated with wheezing (asthma)
- 8. List the elements to be measured when obtaining a full set of vital signs
- 9. Outline the variables when calculating an early warning score
- 10. State the normal ranges for adults for
  - Pulse rate
  - Respiration rate
  - Temperature
  - Blood pressure

11. Explain how to measure pain on the pain analogue scale (0-10)

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Explain the value of performing the baseline vitals and subsequent vital signs
- 2. Communicate in an appropriate professional and caring manner, during patient assessment, with patients as well as with family members and bystanders
- 3. Explain the need for team work when multidisciplinary pre-hospital emergency services are at an incident
- 4. Recognise that all patients have the capacity to make decisions until the contrary is demonstrated

#### Skills Objectives

- 1. Demonstrate appropriate questioning of a patient to obtain a SAMPLE history
- 2. Demonstrate questioning the patient to obtain a OPQRST history
- 3. Demonstrate obtaining additional information from the family members or bystanders at the scene as appropriate

- 4. Demonstrate assessment of vital signs
- 5. Demonstrate an early warning score calculation
- 6. Demonstrate assessment of the pupils
- 7. Demonstrate the detailed physical exam/ head to toe survey including inspection, palpation and assessment of CSMs as appropriate
- 8. Evaluate a patient's capacity to make decisions
- 9. Demonstrate the pre-hospital emergency assessment of the patient in pain using the pain analogue scale (0-10)
- 10. Demonstrate obtaining a blood glucose level using a glucometer

### Learning Outcome 1 – Domain 2

Provide the appropriate standard of patient care for interfacility transfers and pre- hospital emergency care services	Selection of an appropriate patient management plan, application of appropriate interventions, and the correct monitoring of the patient according to PHECC clinical practice guidelines and scope of				
	practice				

### Airway and Ventilation

At the completion of this module, the student will be able to establish and maintain a patient airway, and be able to oxygenate and ventilate a patient in accordance with the appropriate CPG(s) and scope of practice for an EMT.

Note this module must be considered with the Airway and Ventilation module from the CFR Advanced level course.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Relate the mechanism of injury to opening the airway
- 2. Describe the steps in head-tilt chin-lift and jaw thrust
- 3. List the indications and contraindications for use of an OPA and a supraglottic airway
- 4. Explain the principles of safe operation for an oxygen delivery system
- 5. Outline the different techniques in oxygen administration using appropriate devices such as simple face mask, a venturi mask and nasal cannula
- 6. Explain the benefits and limitations of pulse oxymetry and outline normal values

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

1. State the value of oxygen administration

#### **Skills Objectives**

- 1. Demonstrate head-tilt chin-lift and jaw thrust
- 2. Demonstrate ventilating the patient with a BVM (one and two rescuers)
- 3. Demonstrate the safe preparation and operation of an oxygen delivery system
- 4. Demonstrate oxygen administration for a range of patient scenarios (adult, infant and child) using appropriate oxygen administration equipment including a pulse oximeter

# **Respiratory Emergencies**

At the completion of this module, the student will be able to assess and manage the care of a patient with a respiratory emergency in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Describe the pre-hospital emergency assessment findings and care management for the patient with inadequate respirations; asthma and chronic obstructive pulmonary disease (COPD)
- 2. Describe the pre-hospital emergency assessment findings and care management for the patient in respiratory arrest
- 3. List the signs of respiratory depression secondary to known or suspected narcotic overdose

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Demonstrate a caring attitude towards the patient with airway and breathing problems
- 2. Communicate in a caring and professional manner with a patient with airway and breathing problems, as well as with family members and friends of the patient

#### Skills Objectives

- 1. Demonstrate the pre-hospital emergency assessment and care management for the patient with inadequate respirations; asthma and chronic obstructive pulmonary disease (COPD)
- 2. Demonstrate the pre-hospital emergency assessment and care management for the patient in respiratory arrest

# **Cardiovascular Emergencies**

At the completion of this module, the student will be able to describe the basic underlying cause of major cardiovascular disease and as a result be able to (in accordance with established protocols) assess and manage the care of a patient with a cardiovascular emergency including stroke in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Define the terms: Acute Coronary Syndrome; Myocardial infarction / heart attack, Angina and list the history, signs and symptoms commonly associated with each
- 2. Discuss the pre-hospital emergency care assessment findings and care management of the patient with cardiac chest pain
- 3. Define the role of the EMT in the chain of survival
- 4. Discuss the positions of comfort for patients with various cardiac emergencies
- 5. Explain the importance of pre-hospital Advanced Life Support (ALS) for cardiovascular emergencies
- 6. Explain the pre-hospital emergency assessment findings and care management for the patient with a stroke
- 7. Explain the importance of time critical transport to the appropriate medical facility for cardiovascular emergencies including stroke
- 8. Define defibrillation and explain its effect on the cardiac electrical system
- 9. Discuss the pre-hospital emergency care management for the patient with a persistent shockable rhythm and no available ALS
- 10. Discuss the pre-hospital emergency care management for the patient with a recurrent shockable rhythm and no available ALS
- 11. Discuss the pre-hospital emergency care management for the patient found in a non shockable rhythm and no available ALS
- 12. Identify PQRST on a normal Electrocardiograph (ECG) rhythm strip
- 13. Identify the following rhythms from ECG Lead II: Normal Sinus Rhythm, Sinus Bradycardia, Sinus Tachycardia, Sinus Rhythm with Premature Ventricular Contractions, Ventricular Fibrillation, Ventricular Tachycardia, Asystole
- 14. Explain the function and use of a mechanical assist CPR device
- 15. Outline post resuscitation care
- 16. List the circumstances when a registered paramedic or advanced paramedic can discontinue resuscitation efforts

#### Attitudinal Objectives

- 1. Demonstrate a caring attitude towards the patient with cardiac chest pain
- 2. Communicate in a caring and professional manner with the patient, family members and friends of the patient during a cardiac event

#### Skills Objectives

- 1. Demonstrate the pre-hospital emergency assessment and care management for the patient with cardiac chest pain
- 2. Demonstrate the pre-hospital emergency assessment and care management for the patient experiencing a stroke
- 3. Demonstrate the ability to identify and interpret selected ECG Lead II readings: Normal Sinus Rhythm, Sinus Bradycardia, Sinus Tachycardia, Sinus Rhythm with Premature Ventricular Contractions, Ventricular Fibrillation, Ventricular Tachycardia, Asystole
- 4. Demonstrate competence in the use of a mechanical assist CPR device
- 5. Demonstrate post resuscitation care
- 6. Demonstrate the completion of the AED: Operator's Shift Checklist
- 7. Demonstrate loading a patient in a cardiac arrest onto a trolley stretcher with minimum hands off time

### **General Medical Emergencies**

At the completion of this module, the student will be able to assess and manage the care of a patient with an acute general medical emergency in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

- 1. Explain the pre-hospital emergency care assessment findings and care management for the patient with a general medical complaint
- 2. Describe the mental health issues that may arise in the older patient
- 3. Explain the pre-hospital emergency assessment findings and care management for the patient with an altered level of consciousness
- 4. List the causes of a faint
- 5. Explain the pre-hospital emergency assessment findings and care management for the patient with a faint
- 6. Explain the pre-hospital emergency assessment findings and care management for the diabetic patient with abnormal blood glucose levels
- 7. State normal and abnormal blood glucose levels for adults, infants and children
- 8. Explain the pre-hospital emergency assessment findings and care management for the patient with seizures/ convulsions
- 9. Explain the pre-hospital emergency assessment findings and care management for the patient with an allergic reaction and anaphylaxis
- 10. List various ways that poisons enter the body
- 11. Explain the pre-hospital emergency assessment findings and care management for the patient with poisoning
- 12. Explain the pre-hospital emergency assessment findings and care management for the patient with hypothermia including a submersion incident
- 13. Explain the pre-hospital emergency assessment findings and care management for the patient with an exposure to heat
- 14. Define the terms: deliberate self- harm, parasuicide and suicidal behaviour
- 15. Explain the spectrum of activities related to suicidal behaviour
- 16. Explain the pre-hospital emergency assessment findings and care management for the patient with a behavioural emergency /mental health emergency including de-escalation and breakaway techniques
- 17. Explain the pre-hospital emergency assessment findings and care management for the patient with decompression illness
- 18. Outline the pre-hospital emergency assessment findings and care management for the patient with an epistaxis
- 19. Describe the aetiology of pain

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Communicate in a caring and professional manner with a patient with a general medical complaint, as well as with family members and friends of the patient
- 2. Explain the rationale for modifying your behaviour towards the patient with a behavioural emergency

#### Skills Objectives

- 1. Demonstrate the pre-hospital emergency assessment and care management for the patient with a general medical complaint
- 2. Demonstrate the pre-hospital emergency assessment and care management for the patient with an altered level of consciousness
- 3. Demonstrate the pre-hospital emergency assessment and care management for the patient with a faint
- 4. Demonstrate the pre-hospital emergency assessment and care management for the diabetic patient with abnormal blood glucose levels
- 5. Demonstrate the pre-hospital emergency assessment and care management for the patient with seizures/ convulsions
- 6. Demonstrate the pre-hospital emergency assessment and care management for the patient with an allergic reaction and anaphylaxis
- 7. Demonstrate the pre-hospital emergency assessment and care management for the patient with poisoning
- 8. Demonstrate the pre-hospital emergency assessment and care management for the patient with hypothermia
- 9. Demonstrate the pre-hospital emergency assessment and care management for the patient with an exposure to heat
- 10. Demonstrate the pre-hospital emergency assessment and \*care management for the patient who has deliberately self-harmed
- 11. Demonstrate the pre-hospital emergency management for a suicide death
- 12. Demonstrate the pre-hospital emergency assessment and care management for the patient with a behavioural emergency/mental health emergency including de-escalation and breakaway techniques
- 13. Demonstrate the pre-hospital emergency assessment and \*care management for the near drowning patient
- 14. Demonstrate pre-hospital emergency assessment and care management for the patient with decompression illness
- 15. Demonstrate the pre-hospital emergency care management for the patient with pain
- 16. Demonstrate the pre-hospital emergency assessment and care management for the patient with an epistaxis

# Bleeding, Shock and Soft Tissue Injuries

At the completion of this module, the student will be able to assess and manage the care of a patient with bleeding, shock and soft tissue injury in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. State the definition of a wound
- 2. List and describe the five main types of wounds
- 3. Differentiate between arterial, venous and capillary bleeding
- 4. Describe in sequence the body's response reaction to uncontrolled blood loss
- 5. Explain the pre-hospital emergency assessment findings and care management for the patient with external bleeding
- 6. Outline the pre-hospital emergency assessment findings and care management for the patient with hypovolaemic shock
- 7. List the signs of internal bleeding
- 8. Explain the time criticality of transport of patients that are bleeding severely and show signs of hypovolaemic shock
- 9. State the types of open and closed soft tissue injuries
- 10. Outline the pre-hospital emergency assessment findings and care management for the patient with a soft tissue injuries; open and closed
- 11. Outline the pre-hospital emergency assessment findings and care management for the patient with a penetrating chest injury
- 12. Outline the pre-hospital emergency assessment findings and care management for the patient with an impaled object
- 13. List the functions of dressing and bandaging and the dangers of constricting bandages
- 14. Explain the burn surface area calculation using Wallace's rule of nines
- 15. List the characteristics of superficial, partial thickness and full thickness burns
- 16. Identify the common causes of burns and scalds and the characteristics of each
- 17. Outline the pre-hospital emergency assessment findings and care management for the patient with burns
- 18. Outline the pre-hospital emergency assessment findings and care management for the patient with an eye injury

#### Attitudinal Objectives

- 1. Demonstrate a caring attitude towards the patient with a traumatic injury
- 2. Communicate in a caring and professional manner with patients with a traumatic injury as well as with family members and friends of the patient

#### Skills Objectives

- 1. Demonstrate the pre-hospital emergency care management for the patient with external bleeding
- 2. Demonstrate the pre-hospital emergency assessment and care management for the patient with hypovolaemic shock
- 3. Demonstrate the pre-hospital emergency assessment and care management for the patient with closed soft tissue injuries
- 4. Demonstrate the pre-hospital emergency assessment and care management for the patient with open soft tissue injuries
- 5. Demonstrate the pre-hospital emergency assessment and care management for the patient with a penetrating chest injury
- 6. Demonstrate the pre-hospital emergency assessment and care management for the patient with open abdominal wounds
- 7. Demonstrate the pre-hospital emergency assessment and care management for the patient with an impaled object
- 8. Demonstrate the pre-hospital emergency assessment and care management for the patient with burns and scalds
- 9. Demonstrate the pre-hospital emergency assessment and care management for the patient with an eye injury

# Musculoskeletal, Head and Spinal Injuries

At the completion of this module, the student will be able to describe the basic underlying cause of head, spinal and limb injuries and assess and manage the care of a patient with such injuries in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Define the terms fracture, dislocation, sprain and strain
- 2. List the common causes of injuries to bones, joints and tendons
- 3. Differentiate between an open and a closed painful, swollen, deformed extremity
- 4. Explain how to manually stabilise a fractured limb
- 5. Explain how to assist with repositioning a fractured limb
- 6. List the benefits and possible complications of using a splinting device on upper limbs
- 7. Explain the pre-hospital emergency assessment findings and care management for the patient with a painful, swollen, deformed extremity
- 8. List the common types of head injury
- 9. Describe the consequences and complications that may be associated with head injuries
- 10. State the significance of visible cerebro-spinal fluid
- 11. State the injury mechanism commonly associated with injury of the head and spine
- 12. Explain the pre-hospital emergency assessment findings and care management for the patient with a suspected spinal injury
- 13. Outline the indications and risks associated with rapid extrication
- 14. Outline how to stabilise the cervical spine
- 15. State the indications for sizing and applying a cervical collar
- 16. Outline how to log roll the patient with a suspected spinal injury
- 17. Outline how to move and secure the patient to a long board
- 18. Outline how to assist with immobilising a patient using a vest type extrication device
- 19. Explain the reasons for removal of a helmet
- 20. Explain the preferred methods to remove a helmet
- 21. Explain the pre-hospital emergency assessment findings and care management for the patient with a head injury
- 22. Outline the pre-hospital emergency assessment findings and care management for the patient with maxillo-facial injuries
- 23. Outline the pre-hospital emergency assessment findings and care management for the patient with a traumatic amputation including care of the amputated part

#### Attitudinal Objectives

- 1. State the value of analgesia and patients co-operation prior to immobilisation
- 2. Communicate in a caring and professional manner with patients with traumatic injuries as well as with family members and friends of the patient

#### Skills Objectives

- 1. Demonstrate the pre-hospital emergency assessment and care management for the patient with a painful, swollen, deformed extremity
- 2. Demonstrate the use and assisting with the use of approved splinting and patient moving devices<sup>2</sup>
- 3. Demonstrate assisting with the use of approved extrication devices<sup>3</sup>
- 4. Demonstrate the pre-hospital emergency assessment and care management for the patient with a suspected spinal injury manual stabilisation, cervical collar application, move and secure a patient to a long board
- 5. Demonstrate the pre-hospital emergency assessment and care management for the patient with a head injury
- 6. Demonstrate helmet removal
- 7. Demonstrate the pre-hospital emergency assessment and care management for the patient with maxillo-facial injuries
- 8. Demonstrate the pre-hospital emergency care assessment and care management for the patient with a traumatic amputation including care of the amputated part

<sup>&</sup>lt;sup>2</sup> Approved splinting and patient moving devices are outlined in full in PHECC CPGs.

<sup>&</sup>lt;sup>3</sup> Approved extrication devices are outlined in full in PHECC CPGs.

# **Childbirth and Neonatal Resuscitation**

At the completion of this module, the student will be able to assess and mange in accordance with the appropriate CPG(s) and scope of practice for an EMT the care to a pregnant woman about to deliver a baby in a pre-hospital emergency environment. The student will also be able to deliver basic care, including resuscitation, to the newborn.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. State the indications of an imminent delivery
- 2. Explain the pre-hospital emergency care preparation of the mother pre-delivery
- 3. Explain the pre-hospital emergency care management of assisting with the normal delivery of an infant
- 4. Outline the pre-hospital emergency care management of the mother post-delivery
- 5. Outline the pre-hospital emergency care of the newly born including those requiring resuscitation

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

1. Communicate in a caring and professional manner with mothers during delivery as well as with family members of the patient

#### Skills Objectives

- 1. Demonstrate assisting with the pre-hospital emergency care management of a normal delivery
- 2. Demonstrate the pre-hospital emergency care management for the mother post-delivery care
- 3. Demonstrate the care of the newly born including those requiring resuscitation

### **Paediatrics**

At the completion of this module, the student will be able to identify common paediatric emergencies and as a result be able to assess and manage the basic care of a paediatric patient in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

- 1. Outline the elements of the Paediatric Assessment Triangle
- 2. List the causes of respiratory emergencies in paediatrics
- 3. Outline the presentation of stridor
- 4. Describe the pre-hospital emergency assessment findings and care management for paediatrics with inadequate respirations
- 5. List common causes of seizures in the paediatric patient
- 6. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with seizures/convulsions
- 7. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with pyrexia
- 8. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with allergic reactions and anaphylaxis
- 9. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with external haemorrhage including shock from blood loss
- 10. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with a glycameic emergency
- 11. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with a symptomatic bradycardia
- 12. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with burns
- 13. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with a traumatic injury who requires spinal immobilisation
- 14. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with known or suspected poisoning
- 15. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with signs and symptoms of possible abuse and neglect
- 16. Outline the pre-hospital emergency assessment findings and care management for the paediatric patient with pain including use of the Wong Baker Faces Pain Rating Scale
- 17. Explain the need for critical incident stress support following a difficult paediatric incident
- 18. State the normal ranges for infants and children for
  - Pulse rate
  - Respiration rate
  - Temperature
  - Blood pressure

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Respect the feelings of the family when dealing with an ill or injured paediatric patient
- 2. Appropriately manage the EMTs own emotional response when caring for infants or children
- 3. Demonstrate a caring attitude towards the infant and child with illness or injury who require prehospital emergency care
- 4. Communicate in a caring and professional manner with infants and children with an illness or injury, as well as with family members and friends of the patient

#### Skills Objectives

- 1. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with inadequate respirations including stridor
- 2. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with seizures/ convulsions
- 3. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with pyrexia
- 4. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with an allergic reactions and anaphylaxis
- 5. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with external haemorrhage including shock from blood loss
- 6. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with a glycaemic emergency
- 7. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with a glycaemic emergency
- 8. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with burns
- 9. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with a traumatic injury who requires spinal immobilisation
- 10. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with known or suspected poisoning
- 11. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient who is suspected as suffering from abuse or neglect
- 12. Demonstrate the pre-hospital emergency assessment and care management for the paediatric patient with pain

### Learning Outcome 1 – Domain 3

Provide the appropriate standard of	Appropriate on-going maintenance of the patient
patient care for interfacility transfers and	record and utilisation of best communication
pre-hospital emergency care services	practice including patient handover procedures

### Health Information Management

At the completion of this module, the student will be able to include all the required information on a patient care report (PCR) in accordance with the PHECC Records Management Guidelines and the PHECC Patient Care Report Guidebook.

#### Knowledge Objective

At the completion of this section the student will be able to describe:

- 1. How a completed patient care report is an integral part of pre-hospital emergency care
- 2. The standards of documentation completion
- 3. The importance of adherence with record management guidelines
- 4. The information required to complete each section of the PCR and the format for entry of the information

#### Attitudinal Objectives

At the completion of this section the student will be able to explain:

- 1. Why it is essential to complete a patient care report (PCR) on a patient pre-hospital
- 2. Why patient care documentation should be completed in a timely manner but should not distract from care and communication with the patient

#### **Skills Objectives**

At the completion of this section, the student will be able to be competent in:

- 1. Collecting, analysing and organising information to complete a PCR for a given patient scenario
- 2. Examining their own clinical practice using completed PCRs

### Communication

At the completion of this module, the student will be able to demonstrate the use of effective and appropriate communication skills which improve communication with patients.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Outline the principles of good interaction with patients (ref- Emergency Care and Transportation of the sick and injured By AAOS; 9th Edition)
- 1. Describe how to adapt verbal and non-verbal communication for visually impaired patients
- 2. Describe the principle barriers to effective patient and team communication
- 3. State the personal qualities that make an effective therapeutic communicator
- 4. Define each of the seven elements of the communication process
- 5. Define the term communication and describe each of the three types of communication
- 6. Describe how to adapt communication for auditory impaired patients
- 7. Describe the visual and auditory phenomena concerning perception and interpretation of communications
- 8. State the importance and techniques of active listening to maximise therapeutic communication

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Demonstrate appropriate non-verbal communication to convey a caring attitude
- 2. Demonstrate confidence and professionalism in gaining co-operation from others
- 3. Demonstrate a professional non-judgemental attitude and demeanour throughout the communication process

#### Skills Objectives

- 1. Demonstrate the use of open questioning technique and obtain important and relevant clinical information
- 2. Demonstrate using simple language to aid comprehension when engaging with non-English speaking patients
- 3. Demonstrate a sequential and systematic verbal report of patient information both vertically and horizontally to ensure safe practice and maintain efficiency and continuity of care
- 4. Demonstrate application of each communication skill throughout a range of patient age categories

### Learning Outcome 2

Safely and appropriately	
access, retrieve and	
transport patients (L2)	

### **Basic Patient Care**

At the completion of this module, the student will be able to describe the principles of transporting patients and maintaining care for patients whilst in transit in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Outline the special considerations for a long distance journey
- 2. Outline the special considerations for transporting out- patients
- 3. List and discuss several normal changes in old age
- 4. Describe the effects of reduced mobility on the older patient
- 5. Outline the special considerations for transporting the elderly
- 6. Outline the special considerations for transporting infants in incubators
- 7. Outline the special considerations for mentally and physically challenged population in relation to their needs
- 8. Explain why nursing escorts may accompany the patient in an inter-facility patient transfer

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Describe the need to maintain patient mobility as far as possible
- 2. Describe the importance of encouraging a patient's independence
- 3. Explain the importance of working as a team when lifting and moving patient

#### **Skills Objectives**

- 1. Demonstrate attending to a patient's toilet and hygiene requirements during a patient transport
- 2. Demonstrate a familiarity with common portable devices used in connection with the transportation of patients. This list may include infusion pumps, home nebulisers and oxygen, B/P monitors, artificial limbs, walking aids etc.
- 3. Demonstrate assisting a patient with impaired mobility to ascend and descend steps
- 4. Demonstrate patient lifts, carries and drags appropriate to pre-hospital emergency care practice, using the principles of lifting
- 5. Demonstrate both pushing and pulling an object using safety guidelines

- 6. Demonstrate while working in a team, the transfer, securing and transport of a patient onto each of the approved carrying/lifting devices<sup>4</sup> using the principles of lifting in the pre-hospital emergency care environment
- 7. Demonstrate loading and unloading a vehicle using an ambulance trolley stretcher
- 8. Demonstrate loading a vehicle using an ambulance chair
- 9. Demonstrate approved nursing positions<sup>5</sup> on an ambulance trolley stretcher
- 10. Demonstrate age appropriate moving and handling techniques

<sup>&</sup>lt;sup>4</sup> Approved carrying/lifting devices are outlined in full in PHECC CPGs.

<sup>&</sup>lt;sup>5</sup> Approved nursing positions are outlined in full in PHECC CPGs.

## Gaining Access to the Patient at Scene

At the completion of this module, the student will be able to demonstrate the safe extrication of a patient from an accident scene in accordance with the appropriate CPG(s) and scope of practice for an EMT

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Describe the purpose of extrication
- 2. Identify the stable patient who requires extrication
- 3. State the steps that should be taken to protect the patient during extrication
- 4. Identify the patient who will require rapid extrication
- 5. Outline the steps in rapid extrication

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

1. Explain the concept of Team to ensure a safe and efficient extrication

#### **Skills Objectives**

- 1. Demonstrate the extrication of a simulated patient from a car
- 2. Perform rapid extrication

## **Ambulance Operations**

At the completion of this module, the student will be able to discuss the relevant procedures involved in preparation, despatch and transit both to and from an incident.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. List the functions of a Command & Control Centre
- 2. List the role and responsibility of the EMC (Call taker and dispatcher)
- 3. Describe the pre-arrival instructions
- 4. List the functions of a Medical Priority Dispatch System (MPDS)
- 5. List the time phases of an ambulance call in response to an incident
- 6. Describe the considerations that should be given to a request for a Garda escort for an ambulance
- 7. Explain the PHECC EMS Priority Dispatch classifications and discuss the appropriate response to each one
- 8. Outline the steps necessary to find an address on a map

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

1. Explain the rationale for having the ambulance prepared for response

#### Skills Objectives

At the completion of this section, the student will be able to:

1. Given a location/ patients address indicate the coordinates on a map

#### Learning Outcome 3 – Domain 1

Adopt a professional approach to their practice

### **Professional Practice and Medico-Legal Issues Concerning the EMT**

At the completion of this module, the student will be able to outline their professional code of practice and ethics and describe the ethical and legal framework in relation to patient care.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Outline the pertinent sections of current relevant legislation, highlighting their impact on an EMTs professional practice
- 2. Explain the professional duties of being a registered pre-hospital emergency care practitioner.
- 3. Discuss the PHECC Code of professional conduct and ethics of pre-hospital emergency care practitioners.
- 4. State the conditions necessary for the EMT to have a duty of care
- 5. Define informed and implied consent and discuss the methods of obtaining consent
- 6. Discuss the responsibilities for the EMT in cases of patient refusal of treatment and or transport
- 7. Explain the importance, necessity and legality of patient confidentiality
- 8. List the actions to take to assist in the preservation of a crime scene
- 9. State the conditions that require notification to the Gardaí
- 10. State the procedure following a suspicious death in a public place or in the home

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Explain why it is inappropriate to judge the patient based on a cultural, gender, age or socioeconomic model and to vary the standard of care rendered as a result of that judgement
- 2. Accept and uphold the professional responsibilities of the EMT in accordance with the standards of the PHECC Register

#### Skills Objectives

At the completion of this section, the student will be able to:

1. Demonstrate appropriate verbal communication to satisfy medico-legal consent criteria when seeking consent from a patient for treatment

# **Patient Safety and Quality Assurance**

At the completion of this module, the student will be able to examine their practice and their practice environment in terms of improving the quality of clinical care.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Discuss individual factors that predispose to errors
  - Limited memory capacity
  - Fatigue
  - Stress, hunger, illness
  - Language and cultural factors
  - Hazardous attitudes
- 2. Outline the harm caused by healthcare errors and systems failures
- 3. Outline the clinical audit cycle

#### **Attitudinal Objectives**

At the completion of this section, the student will be able to:

- 1. Participate in adverse events investigations
- 2. Communicate openly when things go wrong

#### **Skills Objectives**

At the completion of this section, the student will be able to:

1. Demonstrate engagement in incident reporting (organisation specific)

#### References:

- 1. Department of Health and Children, Building a Culture of Patient safety, 2007 (Available from <u>http://www.dohc.ie/publications/building culture patient safety.html</u>; accessed October 2010).
- 2. World Health Organisation, Patient safety curriculum Guide for Medical schools, 2009 (Available from <a href="http://www.who.int/patientsafety/education/en/">http://www.who.int/patientsafety/education/en/</a>; accessed October 2010).

### Learning Outcome 3 – Domain 2

Adopt a professional approach to their	Basing	their	professional	practice	on	а	solid
practice	foundation of both basic and clinical sciences						

### **Clinical Anatomy and Physiology**

At the completion of this module the student will be able to outline the basic structure and function of the cardio-respiratory, musculoskeletal and nervous systems of the body.

Knowledge Objectives

At the completion of this section, the student will be able to:

#### The respiratory system

- 1. Describe the position and structure of the anatomical parts or organs of the respiratory system
- 2. Outline the basic physiology of breathing, differentiating between external and internal respiration
- 3. Outline the mechanism of breathing
- 4. Describe the constituent make up of normal air

#### The cardiovascular system

- 1. Describe the functions of arteries, veins and capillaries
- 2. Describe the structure of the heart and its position within the thorax
- 3. Define the coronary circulation
- 4. Outline the circulation of blood through the heart and major blood vessels of the body
- 5. Define the electrical conducting system of the heart
- 6. Define the cardiac cycle
- 7. Define pulse and blood pressure

#### The musculoskeletal system

- 1. List the functions of bone
- 2. Describe the structure of the vertebral column
- 3. Explain the movements of the vertebral column
- 4. Identify the bones of the appendicular skeleton
- 5. Describe the functions of muscles, ligaments and tendons

#### The blood

1. List the functions of blood

#### The skin

1. List the functions of skin

### The nervous system

- 1. State the functions of the nervous system
- 2. State the functions of motor and sensory nerves
- 3. List the functions of cerebrospinal fluid

<u>Attitudinal Objectives</u> No attitudinal objectives identified

<u>Skills Objectives</u> No skills objectives defined

# Pharmacology

At the completion of this module, the student will be able to safely administer the appropriate medication and also correctly monitor medicated patients in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. List the medication which the EMT may administer<sup>6</sup>
- 2. Outline the pharmacology of all EMT medications as per the PHECC medication formulary
- 3. Define the terms: side effects, indications, contraindications and adverse reactions
- 4. Differentiate between trade and generic medication names
- 5. List the pre-administration checks to follow when administering medication
- 6. Explain the importance of establishing if the patient has any medication allergies or is taking complementary therapies e.g. homeopathy
- 7. Explain the dangers associated with inappropriate administration of medication
- 8. List the dose, route of administration, indication, contraindications and side effects of approved medication for use by EMTs
- 9. List the '6 rights' of medication administration
- 10. State they units of measurement used in medication administration

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Explain the rationale for the administration of medication
- 2. Explain the rationale for near miss incidents or medication error reporting

#### Skills Objectives

- 1. Demonstrate the pre-administration checks to be undertaken prior to medication administration
- 2. Demonstrate the administration of all approved medication for EMT use
- 3. Demonstrate the documentation of medication administration on the Patient Care Report
- 4. Demonstrate the assessment and documentation of the patient's responses to medication
- 5. Given a patient's weight calculate the required dose and convert it to the required volume for a specific medication concentration

<sup>&</sup>lt;sup>6</sup> Approved medications as per the PHECC CPGs

### Infection Prevention and Control

At the completion of this module, the student will be able to demonstrate the principles of infection prevention and control whilst carrying out their professional duties in accordance with the appropriate CPG(s) and scope of practice for an EMT.

#### Knowledge Objectives

- 1. Define the terms: chain of infection, source/ routes of infection, means of transmission, susceptible host, contacts, fomites, vector, incubation period, quarantine, endemic, epidemic and pandemic
- 2. Define the terms: pathogens, causative agent, local infection, systemic infection and nosocomial infection
- 3. List the source/ routes of transmission
- 4. Outline standard infection control measures and how they protect people
- 5. Outline transmission based precautions
- 6. List ambulance equipment that are designated single use only
- 7. List ambulance equipment that must be cleaned, disinfected and sterilised
- 8. Describe the steps the EMT should take for personal protection from airborne and blood borne pathogens
- 9. List the personal protective equipment necessary for each of the following situations:
  - Exposure to blood borne pathogens
  - Exposure to airborne pathogens
  - Exposure to biological agents
  - Exposure to ectoparasites
  - Exposure to antibiotic resistant bacteria (e.g. Methicillin Resistant Staphyloccus Aureus (MRSA))
- 10. Describe the safe use and disposal of sharps
- 11. Describe the safe use and disposal of safety engineered sharps/needleless systems
- 12. List the steps to be taken in the event of an inoculation injury; percutaneous and mucocutaneous types
- 13. List the steps in blood and body fluid spills management
- 14. Distinguish between healthcare risk and non-healthcare risk waste
- 15. List the steps to manage linen soiled with blood or body fluids
- 16. Distinguish between the terms cleaning, disinfecting and sterilising
- 17. Distinguish between the different cleaning agents and their application
- 18. Describe how to clean and disinfect an ambulance and ambulance equipment following patient care
- 19. State the importance of vaccinations in protecting personal health

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Demonstrate an appropriate professional, caring to patients irrespective of infective status
- 2. Communicate sensitively with other healthcare professional when transferring care of the patient with a known infectious condition
- 3. Adopt standard infection control precautions as fundamental to patient care

#### **Skills Objectives**

- 1. Demonstrate effective hand washing technique
- 2. Demonstrate glove use and disposal
- 3. Demonstrate the management of blood or body fluids spills
- 4. Demonstrate how to manage an inoculation injury, percutaneous and mucocutaneous types
- 5. Demonstrate standard and transmission based infection control precautions
- 6. Demonstrate the disposal of healthcare risk and non-healthcare risk waste including sharps and soiled linen
- 7. Demonstrate the cleaning and disinfection of an ambulance and ambulance equipment

# **Intramuscular Injection**

At the completion of this module, the student will be able to correctly and safely administer an intramuscular injection in accordance with the appropriate CPG(s) and scope of practice for an EMT.

## Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Identify the preferred sites for intramuscular injection
- 2. Outline the general indications of intramuscular medication administration
- 3. List the equipment required and describe the procedure of drawing up the medication from both a glass and plastic ampoules
- 4. List the common complications of intramuscular injection as well as some basic preventative steps
- 5. List the special considerations for intramuscular injections for the paediatric patient

### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Demonstrate an appropriate professional and a caring attitude for the patient who requires an intramuscular injection
- 2. Demonstrate an awareness of the real fear and anxiety some patients experience about receiving an injection

### Skills Objectives

At the completion of this section, the student will be able to:

- 1. Demonstrate the preparation of an intramuscular injection
- 2. Demonstrate the administration of an intramuscular injection

## Learning Outcome 3 – Domain 3

Adopt a professional approach to their	Utilising best practice as prescribed by standard
practice	pre-hospital emergency care operational
	procedures

## **Radio Communications**

At the completion of this module, the student will be able to correctly operate a radio communication device in accordance with established SOPs.

Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Differentiate between radio and telephone communications
- 2. Differentiate between VHF and UHF
- 3. Describe the components of a typical ambulance service radio net
- 4. Identify factors that lead to poor radio transmission
- 5. Identify the importance of radio call signs to ensure effective radio communication
- 6. List the mandatory radio calls required when responding to an incident:
  - Mobile to scene
  - Arrival at scene
  - Depart scene
  - At destination (hospital)
  - Clear at destination
  - Arrive at station
- 7. List the phonetic alphabet
- 8. List and explain the acceptable radio shorthand words
- 9. List the principles of good voice procedure when transmitting a radio message
- 10. List the steps required for transmitting a long radio message

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

1. Explain the rationale for completing a radio check at the commencement of duty

#### Skills Objectives

At the completion of this section, the student will be able to:

- 1. Operate a mobile radio set
- 2. Operate a hand held radio set
- 3. Demonstrate an organised, concise radio transmission
- 4. Demonstrate a radio transmission utilising the phonetic alphabet
- 5. Demonstrate a radio transmission of a long message
- 6. Demonstrate a radio report on a simulated patient using Age, Sex, History, Incident, Clinical impression (ASHICE) and Estimated Time of Arrival (ETA)

# **Hazardous Material Incident**

At the completion of this module, the student will be able to demonstrate a safe approach when dealing with a hazardous material incident in accordance with the appropriate CPG(s) and scope of practice for an EMT

### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Outline the EMTs role during an incident involving hazardous materials
- 2. List the safety precautions required to ensure EMT and crew safety at a hazardous materials incident
- 3. Explain the methods for preventing contamination of self, equipment and facilities
- 4. Identify the component parts of an ADR hazard warning panel
- 5. Identify the component parts of a Hazchem warning panel

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

1. Explain the role and responsibility of the Gardaí and Fire Service in ensuring scene safety and access to patients

#### Skills Objectives

At the completion of this section, the student will be able to:

1. Identify the UN number and the type of hazard involved, given a hazardous warning panel

# **Major Emergency**

At the completion of this module, the student will be able to perform their duties as an EMT effectively in conjunction with other relevant services at a Major Emergency.

### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Define Major Emergency<sup>7</sup> and identify the factors to be considered before one is declared
- 2. Discuss Major Emergency in relation to: Natural, Manmade, Simple, Compound, Compensated and Uncompensated incidents
- 3. List the roles of the Health Service Executive during a Major Emergency
- 4. List the roles of the Local Authority/ Fire Services during a Major Emergency
- 5. List the roles of an Garda Síochána during a Major Emergency
- 6. Describe how the three Services, Health Service Executive, Local Authority/ Fire Services and an Garda Síochána operate under separate vertical command structures and liaise with each other at the Tactical area during a Major Emergency
- 7. Describe the Strategic, Tactical and Operational levels in relation to Major Emergencies
- 8. Outline the Health Service Executive command structure in relation to Strategic, Tactical and Operational levels
- 9. Discuss the seven key principles for a Major Emergency structured response: Command, Safety, Communications, Assessment, Triage, Treatment & Transport
- 10. Define triage in relation to a multiple casualty incident
- 11. List the components of triage sieve and state where on a Major Emergency site it is carried out
- 12. Sketch a schematic diagram of the patient through flow at a Major Emergency site identifying Operational and Tactical areas
- 13. Identify the tabard worn by the Controller of Operations for each of the three principle response agencies

### Attitudinal Objectives

At the completion of this section, the student will be able to:

1. Explain the concept of the most (help) for the most (patients)

### Skills Objectives

At the completion of this section, the student will be able to:

- 1. At the completion of this section, the student will be able to:
- 2. Given a scenario of a Major Emergency compose a METHANE message
- 3. Given a simulated patient perform a triage sieve and label correctly
- 4. Review the Major Emergency Plan from the student EMTs local area

<sup>&</sup>lt;sup>7</sup> Major Emergency management as per the PHECC CPGs

# **Civil Disorder**

# At the completion of this module, the student will be able to perform their duties as an EMT effectively in conjunction with other relevant services during civil disorder.

### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Identify the fundamental role of the Ambulance Service during civil disorder
- 2. List three types of civil disorder and explain the challenges posed for pre-hospital emergency care providers for each type
- 3. Outline why ambulance staff should be deployed behind Gardaí lines during civil disorder
- 4. Identify the safe procedure for parking and preparedness of ambulances during civil disorder
- 5. Outline the importance of Personal Protective Equipment (PPE) during civil disorder

### Attitudinal Objectives

At the completion of this section, the student will be able to:

1. Explain the importance of neutrality for EMTs during a civil disorder

#### **Skills Objectives**

At the completion of this section, the student will be able to:

1. Demonstrate in pairs the use of carrying sheet to rapidly evacuate the patient in a simulated civil disorder

## Learning Outcome 4 – Domain 1

Demonstrate a commitment to	Maintaining personal well-being and professional
continuous professional competence	relationships with colleagues

## The Well-Being of the Emergency Medical Technician

At the completion of this module, the student will explain and demonstrate the importance of maintaining well-being, in particular managing a balance in personal lifestyle and stressmanagement

### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Discuss measures to be taken to ensure the safety of the patient, Emergency Medical Technician (EMT) and others
- 2. Explain the importance of emotional/ psychological wellbeing in a work context
- 3. Outline the importance of personal hygiene and physical fitness
- 4. List the ways in which people are affected by stress/ pressure
- 5. List commonly occurring work stressors in pre-hospital emergency services
- 6. Describe basic self-care procedures to help reduce/ alleviate stress
- 7. Describe the possible ways in which people are affected by exposure to critical incident/ traumatic stress
- 8. List the possible impact on the EMT when faced with trauma, illness, death and dying
- 9. List the signs and symptoms of critical incident stress
- 10. Describe the role and operation of a critical incident stress management system
- 11. Outline the possible way in which an EMTs family may be affected by his/her stress levels
- 12. Discuss the psychological impact of critical incidents/ trauma/ loss on bystanders or next of kin
- 13. Outline the steps in the EMTs approach to a bystander or next of kin confronted with trauma, illness, death and dying
- 14. Discuss how de-escalation techniques are used in the management of a behavioural disturbed person

### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Explain the importance of recognising the response to trauma, illness, death and dying and communicating effectively with the patient's family
- 2. Explain the importance of being an advocate for the safety of self and others
- 3. Be familiar with the service's information material/ standard operating procedures for critical incident stress management

Skills Objectives

No skills objectives defined

## Learning Outcome 4 – Domain 2

Demonstrate a commitment to	Identify with the role of the EMT
continuous professional competence	

# **Continuum of Pre-Hospital Emergency Care**

At the completion of this module, the student will be able describe the major components of the Irish healthcare system and be able to explain the role and responsibilities of an EMT within this system.

## Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Outline the role and responsibility of the EMT in the continuum of pre-hospital emergency care
- 2. Define medical advice /direction and discuss how it is used to enhance patient care pre-hospital
- 3. Outline the circumstances to request advanced life support
- 4. List the role and functions of the Pre-Hospital Emergency Care Council
- 5. Outline the structures of the Health Service Executive
- 6. Outline the structures of the National Ambulance Service
- 7. Outline the role of the Private, Voluntary, Rescue and Auxiliary Agencies in the care continuum
- 8. List the various methods used to access pre-hospital emergency care
- 9. Describe the EMT's responsibilities to personal safety
- 10. Discuss the role and responsibilities of the EMT with regard to safety for others at the scene of an incident including the patient, emergency crew and bystanders
- 11. Discuss how mortality and morbidity can be reduced by pre-hospital emergency care practitioners

### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Explain the rationale for maintaining a professional appearance when on duty or when responding to calls
- 2. Value a commitment to access, equity and equality principles of healthcare

<u>Skills Objective</u> No skills objectives identified

# **Continuous Professional Competence**

At the completion of this module, the student will be able to set goals for their own continuous professional competence using personal development plans.

#### Knowledge Objectives

At the completion of this section, the student will be able to:

- 1. Define Continuing Professional Competence (CPC) requirements and maintaining registration with PHECC
- 2. Define scope of practice
- 3. Identify own CPC requirements
- 4. State the principles of constructive feedback and how it provides for personal growth

#### Attitudinal Objectives

At the completion of this section, the student will be able to:

- 1. Actively participate and support the adult educational approach of lifelong learning
- 2. Understand the knowledge and practice competently the clinical practice guidelines of PHECC

#### Skills Objectives

At the completion of this section, the student will be able to:

1. Demonstrate use of a learning portfolio

# Approval criteria for the course: Emergency Medical Technician

Council set the requirements for submitting an application as well as maintaining status as a PHECC recognised institution in Council Rules. The detailed course approval criteria are described in subsections below. The information supplied by the Applicant institution against each of the criteria must satisfy Council that arrangements are in place to provide a high quality course ensuring the validity of the PHECC award in National Qualification in Emergency Medical Technology (NQEMT) - Emergency Medical Technician (EMT).

## Note the criteria will be revised in 2015 in line with the Teaching Faculty Framework 2014/5.

- 1. Entry criteria:
  - a) The age for entry to an EMT course is 18.
  - b) Successful completion of the CFR Advanced course is a co-requisite of the EMT course.
- Duration: The EMT course is no less than 120 /4 weeks theoretical instruction and no less than 39 hours/1 week clinical instruction supernumerary on clinical placement, also known as period of internship or clinical placement.
- 3. **The commencement** of each NQEMT course will be notified to PHECC. This notification will list the required faculty for every course.
- 4. **Ratio:** The ratio on an EMT course must not exceed 6/8 students per instructor in a syndicate (or practical skill sessions).
- 5. Assessment: Course participants will take the National Qualification in Emergency Medical Technology (NQEMT) –EMT exams at the end of their EMT course. The institution may in parallel assess students continuously in accordance with in-house assessment schedule. The NQEMT EMT exam schedule is set out in full in *Council policy for National Qualification in Emergency Medical Technology (POL012)* and in the NQEMT Examination handbook (PUB013).
- 6. **Student attendance:** The requirements for students' attendance, continuing progression and successful completion or successful/unsuccessful criteria for each phase of training (as appropriate) will be explicit and available in writing to students prior to course commencement. Details of how a student will compensate for any period of interruption/absence during each phase of the recognised course will be explicit and available in writing. Evidence of this is not currently sought on application but must be made available for inspection by PHECC on request.

- 7. Faculty requirements for EMT courses: The minimum faculty requirement (core faculty) for an institution delivering an EMT course is the equivalent of 4 full time tutors including 1 facilitator and a medical advisor. The standards for assistant tutors/tutors and facilitators are set out in PHECC's Teaching Faculty Framework (STNOOX). Furthermore:
  - a) An assistant tutor must act as the course director responsible for the administration and management of EMT courses.
  - b) Trained mentors and clinical supervisors must be available in numbers appropriate to the EMT class size.
- 8. A medical advisor is required whose responsibilities are but should not be limited to:
  - a) Oversight of the medical education content of the EMT course ensuring that the curriculum conforms to PHECC education and training standards and CPGs.
  - b) Active participation in the evaluation of courses including annual self-assessment and reporting requirements.
  - c) Input in recruitment of faculty members.
  - d) Attendance on PHECC's Medical Advisory Committee or other working groups on request.
- 9. Clinical placement/Internship is a period of EMT training the purpose of which is to facilitate and empower students to observe and acquire actual patient care experience. During this period students will integrate the theory and clinical skills learned during the theoretical instruction with the reality of patient care (incorporating the 24-hour cycle). EMT students are not on the register during this supernumerary period and their scope of practice and role is restricted to clinical observer.
- 10. Types of clinical placement/internship sites may include emergency non-emergency ambulance services and other healthcare providers as appropriate. Ambulance services must be approved/licenced service providers. Acute hospital services include: emergency department, maternity services, coronary and intensive care units, theatre, etc. Consideration will also be given to fire and rescue services, primary care facilities, sporting and other events as appropriate.
- 11. Range of patient clinical status and acuity levels: The ambulance sites selected must demonstrate exposure to the range of patient clinical status and acuity levels as per the *EMS Priority Dispatch (STN001)* and the *Inter Facility Patient Transfer Standard (STN002)* respectively.

- 12. **Approval of sites**. Council considers approval of clinical placement/internship sites on a site-by-site basis. Council welcomes variation and options for sites as rotation of student EMTs through multiple sites maximises opportunities for learning.
- 13. The recognised institution may at any time after initial application submit a list of any additional clinical placement/internship sites subject to the same conditions as above for approval.
- 14. PHECC maintains a record of all clinical placement/internship sites approved on initial application and any subsequent successful applications. The list of sites is frequently required under a targeted information request from PHECC.
- 15. **Mentoring**<sup>8</sup> of EMT students is paramount. Every EMT student must be provided with a named Mentor at the commencement of their course. Mentors who may be tutors or registered practitioners must have completed mentorship training to enable them to assist, support and guide others.
- 16. **Clinical supervision**: The course director will have ultimate responsibility for ensuring that student EMTs are receiving adequate clinical supervision. An EMT student will work alongside other registered EMTs, paramedics or advanced paramedics on ambulance service placements and with a range of healthcare professionals while on other clinical placements. The course director should provide guidance and feedback to the clinical supervisors as appropriate.
- 17. Learning experience in clinical placements: In some instances EMT students may be required to remain longer than one week in clinical practice to ensure learning outcomes/competencies are achieved. This determination is made by the course director on review of the available evidence (learning portfolio and other).
- 18. Ongoing monitoring and quality review of approved sites must be undertaken by a responsible person in the recognised institution. The monitoring should include an evaluation of the sites for adequacy of skill/learning opportunities and clinical supervision. This evaluation must be reported on in the Recognised Institution Self-Assessment Report (RISAR) submitted to PHECC annually as part of the Quality Review Framework.
- 19. The Learning Portfolio is a tool to support EMT students and PHECC registrants/practitioners commit to and engage in lifelong learning after the NQEMT has been awarded and PHECC registration achieved. Gathering evidence of patient experiences during early clinical placement/internship is a critical factor of the learning process and EMT

<sup>&</sup>lt;sup>8</sup> **Mentoring** is defined by PHECC as the formal passing on or transfer of knowledge, skills and expertise through appropriate goals, objectives and activities from mentor to mentee.

students must be guided by faculty members to attain this. Every student must start using their learning portfolio early in the course and its design should include a reflective diary or learning log. The learning portfolio, which may include a log book (used to record and verify attendance at sites), must be maintained by the student with guidance from tutors and clinical supervisors/mentors during training. Council accepts there will be variation in the types or formats of learning portfolios available, however the following principles must be adhered to by the Institution when designing one suitable for use by students:

- a) The design used is either hardcopy or electronic and is user friendly and student centred.
- b) The portfolio should record the knowledge applied to clinical cases and the rationale for actions including reference to the appropriate CPG.
- c) The learning outcomes to be achieved (site specific) should be incorporated.
- d) The portfolio should allow for positive feedback and areas for improvement form tutors and clinical supervisors.
- e) Requirements of patient privacy and confidentiality are fully complied with.
- f) The learning portfolios will be available for inspection by PHECC.
- g) The portfolio remains the property of the individual EMT student.
- 20. **Design of the EMT course and teaching methods:** The applicant institution must design the course to:
  - a) Balance theory and practice to achieve the learning outcomes (course and domain specific) and competencies specified in the standard.
  - b) Utilise a range of teaching/learning strategies providing a balance between presentations, small group interactions, demonstrations, practical and self- directed learning. Electronic learning and blended learning approaches are welcomed.
  - c) Promote a commitment to self-directed and lifelong learning and be dynamic to reflect ongoing changes in pre-hospital emergency care delivery such as revisions in PHECC clinical practice guidelines (CPGs).
  - d) Prepare students to understand and meet the registration requirements including the Code of Professional Conduct and Ethics (POL005) of the Pre-Hospital Emergency Care Council
  - e) Promote a commitment to ongoing registration requirements such as *continuous professional competency (CPC) (STN007)*.
- 21. **Course Information:** The Applicant must provide course information set out in the current application form. Such information includes but is not limited to:

- a) Copy of recognition of prior learning procedures for EMT candidates to support the institution's RPL policy.
- b) Tutors and other faculty members including mentors and clinical supervisors.
- c) Sample lesson plans, timetable and materials to be used.
- d) Couse aims and methodology of theoretical and clinical instruction.
- e) Assessment and awards procedure.
- f) Library and ICT facilities including access to internet enabled PCs and access to online journals for students and tutors.
- 22. **Course Information- Internship:** The Applicant institution must apply for approval for every clinical placement/internship site proposed for use by student EMTs. To make a successful application Council requires specific information for every site. The Applicant must provide course information set out in the current application form. Such information includes but is not limited to:
  - a) Evidence of compliance with the requirements of the National Vetting Bureau (Children and Vulnerable Persons) Act 2012 (applies to institution's tutors, mentors, supervisory staff and students as applicable).
  - b) Evidence of formal agreements (letters, MOU and MOAs) in place between the responsible persons at both the institution and the sites. The agreements must name the responsible persons and the terms and conditions agreed to secure highquality learning experiences for students.
  - c) A comprehensive set of learning outcomes, appropriate and specific to the learning environment (site) and facilitate applying clinical judgement. The practice of ticking boxes on a list of technical tasks should be avoided.
  - d) A document outlining evidence of anticipated (prospective) and actual (retrospective) exposure to categories of patients and role specification of the student EMT in the proposed non-ambulance site <u>and</u> evidence of anticipated (prospective) and actual (retrospective) exposure to categories of patients and role specification of the student EMT in the proposed ambulance site/s as per the EMS Priority Dispatch (STN001) and Inter Facility Patient Transfer Standard (STN002) respectively.
  - e) A document detailing adequate numbers of clinical supervisors for every site. The role of the clinical supervisor is to assist with the creation of suitable learning environments with opportunities for EMTs to observe clinical practice. Acceptable professional qualifications of clinical supervisors are: registered practitioners,

assistant tutors, tutors, registered nurses/midwives and registered medical practitioners appropriate to the site.

- f) A document showing evidence of numbers of mentors available for EMT students during their course.
- g) A copy of quality assurance procedures to support the institution's policy. The procedure must specifically address how the quality of learning experiences for students/ interns during clinical placements is monitored, by whom and how deficits will be addressed.
- h) A sample learning portfolio including a methodology for reflection.