- TITLE 172 PROFESSIONAL AND OCCUPATIONAL LICENSURE
- CHAPTER 13 EMERGENCY MEDICAL SERVICES TRAINING AGENCY
- <u>001.</u> <u>SCOPE AND AUTHORITY.</u> These regulations govern the credentialing of emergency medical services training agencies under the Emergency Medical Services Practice Act and the Uniform Credentialing Act. Persons providing out-of-hospital emergency care services training must be approved as an out-of-hospital emergency care training agency in Nebraska unless exempt.
- <u>002.</u> <u>DEFINITIONS.</u> Definitions in the Uniform Credentialing Act, the Emergency Medical Services Practice Act, 172 Nebraska Administrative Code (NAC) 9, 11, and 12, and the following definitions apply to this chapter.
 - <u>002.01</u> <u>ACCREDITED</u>. An accrediting body recognized by the United States Department of Education.
 - <u>002.02</u> <u>APPROVED TRAINING AGENCY.</u> A person which is approved to conduct Emergency Medical Service course training by the Department upon recommendation of the Board.
 - <u>002.03</u> <u>CLINICAL TRAINING.</u> The instruction or training in a supervised practice of emergency medical skills in hospital settings such as critical care units, emergency departments, obstetrical units, or operating rooms or in other medical settings such as a clinic or office of an individual licensed to practice medicine and surgery.
 - <u>002.04</u> <u>DIRECT SUPERVISION.</u> The visual monitoring, providing of verbal direction, and overseeing patient care that is being provided by a student
 - <u>002.05</u> <u>FIELD EXPERIENCE</u>. Time in an emergency medical service course when a student is directly supervised while operating with an emergency medical service, hospital, health clinic, or physician's office that provides care to a perceived individual need for medical care and proceeds from observation to providing care commensurate with the student's training.
 - <u>002.06</u> <u>PRIMARY INSTRUCTOR</u>. A licensed emergency medical service instructor who must attend a majority of the class sessions to assure course continuity and who is responsible for identifying that students have the cognitive, affective and psychomotor skills necessary to function at the level being taught.

<u>003.</u> REQUIREMENTS FOR APPROVAL AS AN EMERGENCY MEDICAL SERVICE TRAINING <u>AGENCY.</u> To receive approval, an applicant must meet all statutory requirements, 172 NAC 9 and this chapter and submit a complete application and documentation that the applicant meets the following qualifications:

- (A) Be an accredited community college, college, university, or a school of nursing in this state that awards an academic degree to its graduates;
- (B) Paramedic training programs must be accredited by the Commission on Accreditation of Allied Health Education Program (CAAHEP) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (COAEMSP). Programs holding a current Letter of Review from the Commission on Accreditation of Allied Health Education Program will be deemed to meet this requirement;
- (C) Have a qualified physician to serve as the training agency medical director;
- (D) Have written agreements with hospital(s), health care clinics, or physician offices for clinical training of students for the level of training being conducted;
- (E) Have written agreements with licensed emergency medical services for field experience for the level of training being conducted;
- (F) Direct supervision of students must be performed by an individual who is a licensed out-of-hospital emergency care provider, with an unencumbered license and is the same or higher level of out-of-hospital emergency care provider as the student's course of study or a licensed health care practitioner or under the direction of a registered nurse;
- (G) Meet the standards for operating set in this chapter;
- (H) Emergency Medical Service Instructors must meet the requirements set forth in 172 NAC 11;
- (I) Provide adequate facilities, equipment, apparatus, supplies and staffing;
- (J) Publish a catalog which includes at least the following information:
 - (i) The full name and address of the school;
 - (ii) Names of owners and officers, including any governing boards;
 - (iii) A description of each authorized educational service offered, including courses or programs offered, tuition, fees, and length of courses;
 - (iv) Enrollment procedures and entrance requirements, including late enrollment if permitted;
 - (v) A description of the training agencies placement assistance. If no assistance is offered, the school must state this fact;
 - (vi) Attendance policy including minimum attendance requirements:
 - (vii) A description of how the agency determines a student's progress. The description must include:
 - (1) How student progress is measured and evaluated, including an explanation of any system of grading used;
 - (2) The conditions under which the student may be readmitted if terminated for unsatisfactory progress;
 - (3) An explanation of any probation policy; and
 - (4) Information about the system used to make progress reports to students;
 - (viii) An explanation of the refund policy which also includes the training agencies method of determining the official date of termination; and
 - (xi) A description of its policy that addresses student harassment and training agency action if such harassment takes place;

- (K) Provide resources to support students who may need disability accommodations, student support, and other counseling services; and
- (L) Pass an on-site inspection.

004. TRAINING AGENCY STANDARDS AND COURSES. Training agencies must:

- (A) Provide official verification to individuals who have successfully completed any of the emergency medical service courses. The official verification must include the following:
 - (i) Training agency name and location of central or headquarters office;
 - (ii) Signature and title or position of a training agency individual attesting to the official verification:
 - (iii) Date student successfully completed the emergency medical service course;
 - (iv) Student full name including first and last name;
 - (v) Name of course that was successfully completed;
 - (vi) Total number of hours that the emergency medical service course provided. Advanced emergency medical technician and paramedic courses must include the number of didactic hours, clinical hours, and field internship hours;
- (B) Maintain, for a minimum of five years, the following records for each emergency medical service course taught including:
 - (i) All student records must include:
 - (1) Name and address for each student enrolled in emergency medical service courses:
 - (2) Grades for each cognitive examination;
 - (3) Documentation of successful completion of each student's psychomotor skill, patient contacts and scenario evaluations;
 - (4) Documentation of the Advanced Emergency Medical Technician intravenous starts and non-visualized airway placement; and
 - (5) A copy of each student's documentation of meeting entrance requirements to each course:
 - (ii) All instructor and course records must include:
 - (1) Names and qualifications of the primary instructors;
 - (2) Names and qualifications of other emergency medical service course instructors:
 - (3) Instructor evaluation records completed by students and training agency personnel;
 - (4) Names and qualifications of the psychomotor skills evaluators for the emergency medical service courses;
 - (5) Names and qualifications of the person providing direct supervision for field experience; and
 - (6) Agreements with other entities for use of equipment needed to conduct an emergency medical service course if the equipment is not provided by the training agency;
- (C) Conduct at least one emergency medical service course each calendar year;
- (D) Submit the following information to the Department for each course taught within 30 days of the completion of each course:
 - (i) Course location:
 - (ii) Name of training agency;
 - (iii) Name of instructor(s) of each course;
 - (iv) Name of course:

- (v) Number of students enrolled;
- (vi) Number of students that left prior to course completion; and
- (vii) Number of students who:
 - (1) Completed the course;
 - (2) Total number of didactic hours; and
 - (3) For advanced emergency medical technician and paramedic courses the total number of clinical and field internship hours;
- (E) Obtain at least a 70% aggregate pass rate for each emergency medical service course for a period of two consecutive years on all attempts of the licensure examination as set forth in 172 NAC 11;
- (F) Implement a written quality assurance program for instruction. The quality assurance program must:
 - Include the implementation of written policies and procedures for periodic observation of all instructors including the feedback for strengths and opportunities for improvement;
 - (ii) Include the completion of student evaluations during and after each emergency medical service course taught;
 - (iii) Include the implementation of remediation plan(s) for instructor deficiencies. Documentation of such remediation must be maintained for five years; and
 - (iv) Conducting semi-annual meetings with each emergency medical service course instructor for the purpose of discussing training issues and identifying any instruction needs. Documentation of such meetings must be maintained for five years.
- <u>004.01</u> <u>EMERGENCY MEDICAL SERVICE COURSE.</u> Each emergency medical service course listed below must meet the requirements of the Uniform Credentialing Act, Emergency Medical Services Practice Act, United States Department of Transportation guidelines for Emergency Medical Service Instructors, and the current United States Department of Transportation and National Highway Traffic Safety Administration National Emergency Medical Services Educational Standards, on the date of the adoption of this chapter. The standards are available on the Department's website or may be requested from the Department at 301 Centennial Mall South, Lincoln, NE 68509. Each training agency must:
 - (A) Use primary instructors for the administration, coordination, and teaching of each emergency medical service course;
 - (i) Primary instructors may utilize subject matter experts to assist in the teaching of emergency medical service course.
 - (B) Conduct, at the end of the course, the psychomotor skill component in accordance with the National Registry of Emergency Medical Technicians licensure examination for the emergency medical responder, emergency medical technician, emergency medical responder to emergency medical technician bridge, and pre-hospital emergency medical technician for nurse's courses.
 - (C) Adhere to all components for the psychomotor skills testing of the course that must meet the requirements established by the National Registry of Emergency Medical Technicians Psychomotor Users Guide.
 - (D) Ensure that each student in an Advance Emergency Medical Technician Course completes at least 25 patient contacts, at least 24 intravenous starts, and placement of at least 12 non-visualized airways during a minimum of 150 hours of field experience. These requirements may also be completed in a hospital emergency department, clinic, or physician's office. If the student cannot meet the required

- patient contacts during the field experience because of a low number of emergency or medical requests, these patient contacts may be obtained in a simulated patient encounter laboratory setting. Documentation of each of these must be maintained.
- (E) An Emergency Medical Technician to Advanced Emergency Medical Technician bridge course must meet the requirements in this chapter for an advanced emergency medical technician course specific to the educational material and psychomotor skills not taught in the emergency medical technician course.
- (F) Ensure that each student in an Emergency Medical Technician Course completes a minimum of five patient contacts during field experience. Each student must successfully complete simulated adult and, when applicable, pediatric patient encounters in a laboratory setting that must include a minimum of cardiac, trauma, pediatrics, geriatric, stroke, obstetric, difficulty breathing, altered mental status, and toxicology. If the student cannot meet the five patient contacts during the field experience because of a low number of emergency or medical requests, these contacts may be obtained in a hospital emergency department, clinic, or physicians' office. Documentation of each of these must be maintained.
- (G) An Emergency Medical Responder to Emergency Medical Technician Bridge Course must the requirements in this chapter for an emergency medical technician course specific to the educational material and psychomotor skills not taught in the Emergency Medical Responder Course.
- (H) Pre-Hospital Emergency Medical Technician for Nurses Course is a course of instruction for licensed registered nurses and licensed practical nurses to become emergency medical technicians that must meet the requirements in this chapter for an emergency medical technician course specific to the educational material and psychomotor skills not taught in a nursing course.
- (I) An Advanced Emergency Medical Technician to Paramedic Bridge Course must meet the requirements in this chapter for a paramedic course specific to the educational material and psychomotor skills not taught in the Advanced Emergency Medical Technician Course.
- (J) Pre-Hospital Paramedic for Nurses Course is a course of instruction for licensed registered nurses to become a paramedic that must meet the requirements in this chapter for a paramedic specific to the educational material and psychomotor skills not taught in a nursing course.
- (K) A Nebraska Emergency Medical Service Instructor Course must meet the requirements set out in this chapter.
- (L) Emergency medical service refresher courses must meet the National Continued Competency Program requirements set out as defined in 172 NAC 11.

<u>005.</u> RESPONSIBILITIES AND QUALIFICATIONS OF APPROVED TRAINING AGENCY <u>MEDICAL DIRECTORS.</u> The emergency medical service training agency medical director must be responsible for the medical oversight of the program and the following:

- (A) Responsible for the medical supervision of the curriculum of an approved training agency and verification of entry level competency of the students;
- (B) Review and approve education course content, procedures, and protocols related to medical care for appropriateness, accuracy and evidence-based care;
- (C) Review and approve minimum number of required patient contacts and procedures not addressed in this chapter of regulation;

- (D) Review and approve any evaluation tools and processes used to evaluate student's didactic, laboratory, and field experience;
- (E) Review the progress of each student to assist in determining appropriate corrective action.
- (F) Ensure the cognitive, psychomotor, and affective domains for students; and
- (G) Ensure the effectiveness and quality of any training agency medical director responsibility that is delegated to another qualified physician.

005.01 MEDICAL DIRECTOR QUALIFICATIONS. A medical director must:

- (A) Have a current licensed in Nebraska to practice medicine and surgery;
- (B) Have experience providing emergency care to acutely ill and injured patients;
- (C) Have training or experience in the delivery of out-of-hospital emergency care, including the proper care and transport of patients, medical direction, and quality improvement in out-of-hospital care;
- (D) Be active in the medical community and participate in activities related to out-of-hospital care; and
- (E) Be knowledgeable about emergency medical service education including professional, legislative and regulatory issues regarding emergency medical services education.
- <u>006.</u> <u>CHANGE IN MEDICAL DIRECTOR.</u> Prior to a change in the training agency medical director, the licensee must submit a change in medical director form provided by the Department. A licensee may operate no more than 30 days and notify the Department immediately if a medical director resigns with no notice or due to unforeseen circumstances.
- <u>007.</u> <u>CLOSURE OF A TRAINING AGENCY.</u> A training agency must notify the Department, in writing, a minimum of six months prior to a planned closure of the training agency. The notification must include a plan for completion of the training or transfer of students currently enrolled in the approved training agency and the disposition and storage of the records of the approved training agency. All requirements for operation must be maintained until the approved training agency is officially closed.
- <u>008.</u> <u>DEEMED COMPLIANCE.</u> An approved training agency may be deemed in compliance with this chapter based on accreditation or certification by the Commission on Accreditation of Allied Health Education Programs. The approved training agency may still be selected for inspection.
 - <u>008.01</u> <u>REQUIREMENTS FOR APPROVED TRAINING AGENCY TO BECOME DEEMED.</u> An approved training agency may request the Department to recognize the accreditation. The request must be:
 - (A) Made in writing to the Department;
 - (B) Submitted within 30 days of receipt of a report granting accreditation or certification; and
 - (C) Accompanied by a copy of the accreditation report and certificate.
 - <u>008.02</u> <u>MAINTENANCE OF DEEMED COMPLIANCE.</u> An approved training agency must maintain the accreditation or certification on which the approval was issued. If the accreditation is sanctioned, modified, terminated, or withdrawn, the training agency must notify the Department within 15 days of receipt of notification of the action. After notifying the

Department, the training agency may continue to operate unless the Department determines that the training agency no longer meets the requirements for. If the Department determines the approved training agency no longer qualifies for deemed status, the approved training agency is subject to compliance inspection.

- <u>009.</u> <u>COMPLIANCE INSPECTIONS.</u> Each approved training agency has the responsibility to be in compliance, and to remain in compliance with all requirements. To determine compliance with the statutes and regulations, the Department may conduct announced or unannounced inspections of the approved training agency.
- O10. GROUNDS ON WHICH THE DEPARTMENT MAY DENY APPROVAL OR DISCIPLINE AN EMERGENCY MEDICAL SERVICE TRAINING AGENCY. The Department may deny an application for approval when the applicant fails to meet the requirements. The Department may deny, suspend, or revoke approval or otherwise discipline an applicant or approved training agency for any of the grounds listed in Neb. Rev. Stat. §38-178 or §38-179 or for any of the following grounds:
 - (A) Violation of the regulations promulgated thereto governing the approval of approved training agencies;
 - (B) Misrepresentation of material facts, in procuring or attempting to procure approval as an approved training agency; or
 - (C) Providing an emergency medical service course while the approved training agency's approval is suspended or in contravention of a limitation placed upon the approval.
- O11. PLAN OF CORRECTION PROCEDURE. In lieu of denial or other sanctions when an approved training agency is found to be in violation, the Department may require such agency to submit and complete a plan of correction. When requested, the approved training agency must submit to the Department a plan of correction containing the steps it will take to correct violations and the estimated time for correct. Such plan must be submitted within 30 days from date of mailing of the request from the Department. The estimated time for correction may not exceed one year. The plan of correction must be acceptable to the Department. Failure to submit an acceptable plan is grounds for denial, suspension, or revocation or otherwise discipline the agency's approval. The approved training agency must submit to the Department documentation of completion of the plan of correction. The Department may conduct an inspection to determine if correction has been obtained. If the approved training agency fails to successfully complete an approved plan of correction or to correct a violation, the Department may suspend or revoke or otherwise discipline the agency's approval.
- <u>012.</u> <u>REAPPLICATION REQUIREMENTS AND PROCEDURES FOR AN EMERGENCY MEDICAL SERVICE TRAINING AGENCY.</u> An emergency medical service training agency whose approval has been terminated may apply for a new approval as provided in 172 NAC 13-003.
- <u>013.</u> <u>APPROVED CARDIOPULMANRY RESUSCITATION ORGANIZATIONS.</u> The following are the approved Cardiopulmonary Resuscitation organizations:
 - (A) American Heart Association:
 - (B) American Red Cross:
 - (C) American Safety and Health Institute;
 - (D) American Trauma Event Management;
 - (E) ACLS Certification Institute;

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- (F) Emergency Care and Safety Institute;
- (G) National Safety Council; and
- (H) Pro CPR Organization.

<u>O13.01</u> <u>CARDIOPULMONARY RESUSCITATION ORGANIZATION PROCESS FOR APPROVAL.</u> To become an approved Cardiopulmonary Resuscitation organization an organization's cardiopulmonary resuscitation training program must be substantially equivalent to the approved cardiopulmonary resuscitation organizations listed in this chapter and be approved by the Nebraska Board of Emergency Medical Services