

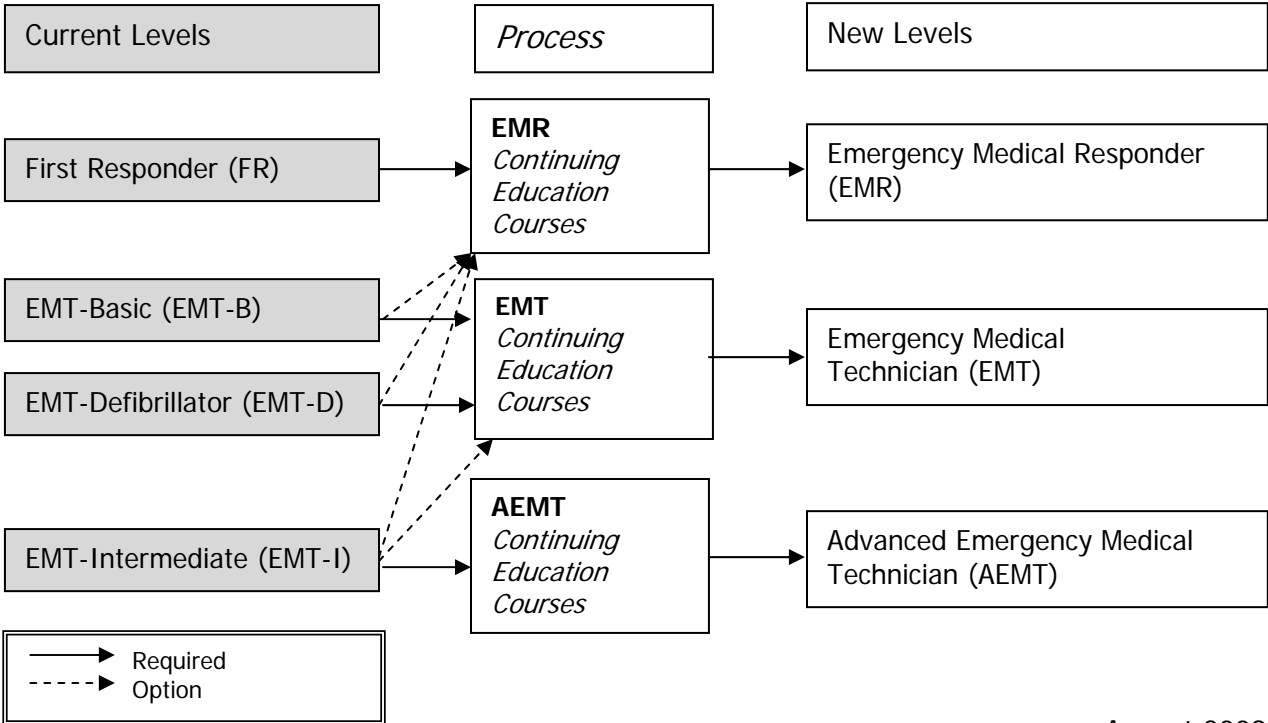
Kansas EMS Transition Overview and FAQ

Overview

In Kansas communities, rural and urban, EMS service providers work to make a difference by providing quality out-of-hospital care. In 2007, the National Highway Traffic Safety Administration ([NHTSA](#)) released an updated [National EMS Scope of Practice Model](#). This Practice Model was designed and based on changes in medical devices, pharmaceuticals, and the current standards of EMS practice.

The Kansas Board of EMS ([BEMS](#)) began studying the updated National Model in early 2008. BEMS assembled a workgroup to review the National Model. The workgroup included representatives from BEMS, the six EMS Regions, EMS and Fire professional organizations, Community and Technical Colleges, and eight members-at-large. The workgroup considered what direction to recommend -- adopting the new National Model, modifying it to meet Kansas state needs, and looking at "blue sky" alternatives. The result was the *EMS Attendant Skills Sets Recommendations* from Kansas EMS Systems Approach to the Future ([KEMSSAF](#)). In August of 2008, BEMS approved these recommendations.

In 2009, BEMS began the scope implementation process. The process calls for the current levels of First Responder, Emergency Medical Technician – Basic, and Emergency Medical Technician – Intermediate to move to Emergency Medical Responder, Emergency Medical Technician, and Advanced Emergency Medical Technician respectively. Any current level may opt to transition to a lower level (see chart). This transition will be done through continuing education courses. Friesen Group is developing the transition courses. The current plan is to offer training to educators in late 2010. General technician training is will be completed by December 2012.



Frequently Asked Questions

Does every technician have to complete the transition continuing education modules successfully to remain certified? What choices do technicians have to make?

Yes. Every certified first responder, EMT, EMT-D, and EMT-I must choose a transition path.

- *First responders must transition to the EMR level.*
- *EMTs and EMT-Ds may choose between transitioning to the new EMT level or down to the EMR level.*
- *EMT-Is may choose between transitioning to the new AEMT level or down to the EMT or EMR levels.*

To transition, each certified attendant will complete a preset curriculum. For the EMR and EMT levels, this curriculum will not exceed the normal number of hours needed for recertification. For AEMTs, the curriculum may exceed the number of hours needed for recertification.

What are my Region's involvement and responsibilities?

We anticipate that Regional EMS Councils will play several roles in the transition process. They will likely host train-the-trainer sessions for educators. They may choose to assist with equipment, courses, and resources. This is a good time to become actively involved in your regional council if you desire them to have an active role in this process.

What role does my local Service Director play in the process?

Service directors need to be aware of the transition process. They will help their attendants make appropriate transition choices. Additionally, most service directors will play a critical role in helping to provide transition courses at their services.

What role does my local Medical Director play in the process?

Your medical director should be made aware of the transition. Informing them of the process is a local responsibility, not the responsibility of the State Board of EMS or Friesen Group. Medical directors will need to decide the scope of practice that attendants will have once they have bridged to the new certification levels. The scope of practice your medical director chooses may be less than the scope of practice defined by Kansas or the same. It cannot exceed the Kansas scope of practice.

When will train-the-trainer courses be offered? Who will be allowed to do the training?

In the fall of 2010, Friesen Group will offer six train-the-trainer courses. There will be one offered in each EMS region. After taking the course, any certified EMS educator (TO 1, TO 2, or I/C) will be able to teach transition courses appropriate to their certification level and as approved by the Kansas Board of EMS.

When will technician training continuing education modules be offered?

*This will be determined locally by each service and by the EMS training programs in the state. The local level (directors and educators) will hold the responsibility to schedule and conduct classes. In addition to local service classes, the community colleges and technical schools **may** hold transition courses to meet demand.*

Who will bear the cost of training and equipment needs?

Ultimately, the cost of this education will be the responsibility of the individual. Your certification is your responsibility. Local services may assume this responsibility if you are on their roster. Before you label this an unfunded mandate, consider that you must recertify every two years. This is not different. You are taking a prescribed course to meet your certification hour requirement. The one exception to this is the AEMT transition. This will be more extensive due to the significant enhancement of the scope of practice. EMT-I technicians will need to consider this as they choose their transition option.

What type of evaluation will be done to determine whether technicians have successfully made the transition to the new level and scope of practice?

Each person taking the transition course will be required to show competency in the new skills. This is the only way that our patients can be certain that certified attendants are qualified to the level of their scope of practice. Evaluation processes will be focused on relevant material. The transition curriculum will give each person transitioning the opportunity to obtain knowledge, skills, and abilities to succeed.

How does the curriculum development process work? What will actually be delivered?

Friesen Group uses a systematic design process. Good Instructional Design (ID) has occurred when a course meets or exceeds the targeted outcomes. In these situations, the right tools within the ID process have been employed, and the wrong tools have been left in the box. Some of the methods we use:

- *Assessing the difference between what students currently know and what the new scope of practice requires*
- *Analyzing the required tasks*
- *Creating goals and objectives*
- *Developing a detailed course outline including instructor and student materials, media, activities, etc.*
- *Constructing an evaluation for each level*

The deliverables include a complete instructor and student manual and six train-the-trainer courses.