

NONRULE POLICY DOCUMENT

TITLE: EMS – Continuing Education Standards

DOCUMENT #: 2023-2-EMSC

DATE ADOPTED: July 14, 2023

ADOPTED BY: Indiana Emergency Medical Services Commission (EMSC)

Overview

The Indiana Department of Homeland Security (IDHS) and the Indiana Emergency Medical Services (EMS) Commission develop this policy to provide guidance for consideration of EMS continuing education. This nonrule policy is designed to offer guidance to EMR, EMT, Advanced EMT, Paramedic, and Primary Instructor providers for recertification continuing education hours.

Background

This policy addresses all individual certifications continuing education standards for EMS certified or licensed personnel.

[836 IAC 4-3-2](#) Emergency Medical Responder (EMR)

[836 IAC 4-4-2](#) Emergency Medical Technician (EMT)

[836 IAC 4-5-2](#) Primary Instructor (PI)

Advanced Emergency Medical Technician (AEMT)

Current: Emergency Rule, LSA #12-393(E), Section 50-51

Pending New Rule: [836 IAC 4-7-5](#)

[836 IAC 4-9-4](#) / [836 IAC 4-9-5](#) Paramedic

Definitions

1. Certification Level means the level for which an individual is currently certified or licensed or can be used as the focus for an educational offering.
 - EMR means Emergency Medical Responder
 - EMT means Emergency Medical Technician
 - AEMT means Advanced Emergency Medical Technician
 - Paramedic means a Paramedic
 - PI means a Primary Instructor
 - EVOC means Emergency Vehicle Operator Certification
 - EVOC Instructor means Emergency Vehicle Operator Instructor Certification
2. Continuing Education Course means an organized EMS educational offering that consists of objectives, outline, agenda/schedule, audio visual media, handouts, and reference materials that cover the National EMS Scope of Practice, the National EMS Core Content, and the National EMS Education Standards or Indiana EMS Commission approved material.
3. Continuing Education Class means a scheduled continuing education course of an approved continuing education course offered at a particular time and location, with the required complement of resources for the class size.
4. EMT Initial Education Course means an educational program intended to prepare the student for an entry-level position in emergency medical services at the basic provider level. The course addresses the Indiana approved curriculum for the EMT. The course material is presented through lectures, skill labs, cognitive and psychomotor evaluation, self-study, and actual clinical observation.
5. Learning Management System means an internet-based website operated for the purposes of initial and continuing education, and management of EMS credentials.
6. EMT Refresher Course means a continuing education course that includes all didactic materials and a demonstration of a minimum cognitive and psychomotor skill competencies, as defined in the National EMS Scope of Practice, National EMS Core Content, and the National EMS Education Standards. The current Refresher Program is comprised of Courses A, B, and C.

EMS continuing education is a common term that can have differing interpretations. For instance, many EMS certified persons are also National Registry of EMTs certified which has their own certification and continuing education requirements.

This policy is developed to provide guidance on both what education is acceptable as well as what record keeping is needed for various courses.

A. Basic Requirements for Submission of Continuing Education

1. The Indiana recertification paperwork is available on the IDHS website and should be utilized to track continuing education. Alternately, if a provider organization or other online service tracks continuing education, those reports may be submitted IF the submission sufficiently correlates to the approved forms, e.g., staff must be able to quickly review the continuing education status.
2. Staff may reject continuing education submitted for an audit if there is no complete approved Indiana EMS recertification form. Staff is not required to sort through paperwork to calculate the hours of an individual; the recertification form should be a summary of the hours.
3. All continuing education hours and skills must be obtained during the certification period which is being renewed.
4. Instructors for education courses or offerings may include those hours as continuing education hours for any of the instructor's EMS certifications (EMT, AEMT, paramedic, or primary instructor) so long as the following conditions are met:
 - a. The preferred method of recording hours on the provider levels certification is to obtain the signature of a verifying individual, such as a co-instructor or the training officer for the provider organization or a training institution official, if the individual is affiliated. Other acceptable signatures include verifiable individuals related to the training, for instance, if the individual instructs for another department, then the training officer or similar individual could sign the verification of hours.
 - b. If no signature can be obtained, then the individual should have verification of completion of hours by submitting evidence of the course or lecture, such as an agenda or announcement coupled with a roster of attendance that includes the individual listed as the instructor. Note that these forms should clearly denote the following:
 - i. Title of education offering
 - ii. Date of education offering
 - iii. Location of offering
 - iv. Listing of individual as an instructor
 - v. Recording of the time/hours of the offering
 - c. If the continuing education hours are for primary instructor recertification teaching hours, then the affiliated Training Institution should establish procedures for recording since there are no signatures on the primary instructor continuing education form, but the Training Institution Official must sign the recertification paperwork accepting the hours.

B. EMS Continuing Education–Didactic/Lecture Requirements

1. Original signatures from presenters are the preferred method of attendance verification.
2. If an individual did online education or utilized a learning management system, then the individual should list the course continuing education course details on the continuing education form and for signature list "online." To verify participation, the individual must have a written verification from the online source, such as a certificate of attendance.
3. While the content must be EMS related and link back to the curriculum level of the provider as the basic state requirement, an affiliated individual must take didactic content that complies with and is approved by the affiliated provider, whether a provider organization, supervising hospital, or training institution.

C. EMS Continuing Education–Psychomotor Skills Competency Verification

1. Skills competencies for EMR and EMT are the EMS Commission approved psychomotor skills for their certification level. Skills competencies for EMR and EMT may be verified within the following parameters:
 - a. The psychomotor skills sheets are a tool for evaluation of competency but are not required for a verification of competency.
 - b. To conduct a verification of competency for a skill, the recommended equipment (see EMS Training Manual) for that skill must be included and utilized. For instance, to evaluate bleeding control and shock management, a tourniquet must be available and utilized versus verbally discussing how to apply a tourniquet in theory.
 - c. Skills competency verification do not need to be conducted as stand-alone skills check-offs, and several skills may be incorporated into a scenario-based evaluation.
 - d. Skills competency verification may occur through real patient interaction so long as the person attesting to the skill personally observed the performance and gave feedback on the performance.
 - i. A verification of skills competency must be conducted by someone that is trained on and is currently certified or licensed to perform the same skill.
 - ii. The affiliated provider organization may dictate how skills patient interaction skills are obtained, including who may do the skills verification.

- e. A verification of skills competency must be conducted by someone that is trained on and is currently certified or licensed to perform the same skill.
 - f. For affiliated individuals that are EMR or EMT, the affiliated provider organization may dictate how skills are obtained, including who may do the skills verification.
2. Skills competency requirements and the acceptable process for obtaining for the Advanced EMT and Paramedic providers are governed by their Medical Director.

D. EMS Continuing Education Offerings—Initial Education Courses

1. A provider may attend or audit any initial education course continuing education course for their own certification level to obtain continuing education credit.
2. A provider may attend or be enrolled in a higher certification level initial education course and count hours attended as continuing education for their current certification level as long as the topics are rooted in the current certification level. For instance, an EMT attending a paramedic course can count anatomy & physiology attended as continuing education hours for the EMT certification but would not be able to count cardiac dysrhythmias as EMT continuing education.
3. To count didactic or lecture credit from attending an initial education course offering, an individual should be listed on the class attendance roster for the session and obtain a verification signature from one of the instructors for that session.
4. To obtain psychomotor or practical skills credit from attending and participating in an initial education course offering, the individual should be listed on the class attendance roster for the session and that roster or corresponding syllabus should include a psychomotor skills session. The skills verification should be conducted by and signed by a currently certified or licensed individual approved by the training institution for that course.

E. EMS Continuing Education Offerings—EMS Developed Offerings

1. Continuing education offerings should be developed to promote the EMS curriculum and address the educational needs of the target audience.
2. The content of each continuing education course should be governed by the course objectives. Course objectives should be derived from:
 - a. National EMS Education Standards, as adopted by the Indiana EMS Commission;
 - b. National EMS Core Competencies, as adopted by the Indiana EMS Commission; and
 - c. National EMS Scope of Practice, as adopted by the Indiana EMS Commission.
3. A continuing education course may cover different certification levels. However, for an individual to count continuing education, the course must contain a sufficient base of the individual's provider level.
4. Continuing education offerings must track attendance of those present either in traditional paper sign-in or electronic means of recording who is present. Said recording should include the following basic information:
 - a. Title of presentation.
 - b. Any skills that were covered and practiced.
 - c. Name of presenter(s).
 - d. Date, time, and location of offering.
 - e. The list of attendees, preferably with PSID numbers listed.

F. EMS Continuing Education Offerings—Specific Content Certification Courses

1. Specific content certification courses are those that are derived from a regional or national organization based on commonly accepted EMS practices and include:
 - a. Cardiopulmonary resuscitation (CPR) certification courses that are based on current national standards.
 - b. American Heart Association (AHA) offerings, such as Cardio-pulmonary resuscitation Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS).
 - c. National Association of Emergency Medical Technicians (NAEMT) Advanced Medical Life Support (AMLS), Prehospital Trauma Life Support (PHTLS), and Tactical Combat Casualty Care (TCCC).
 - d. American Academy of Pediatrics Pediatric Education for Prehospital Professionals (PEPP).
 - e. International Trauma Life Support (ITLS).
 - f. Emergency Vehicle Operators Course (EVOC).
2. Continuing Education hours from a content certification course should be determined by the amount of time spent in each area. For instance, for ACLS, hours should be divided among airway and medical hours.
3. Verification may be done via either of the following:
 - a. An instructor signature must verify any skills performed in the course—a course certificate is not a verification that the skills were performed.
 - b. Instructor signature verifying didactic/lecture hours is the preferred method of verifying continuing education from specific content certification courses.
 - c. Alternately, a course certificate of completion and a course agenda may be used for verification of

attendance if the paperwork clearly addresses the following:

i. The Course Completion Certificate should include:

1. Participant that completed the certification.
2. The date of the course continuing education course or issue date of the certificate that is within the certification period being renewed.
3. A clear indication of the course name and course sponsor (e.g., organizations like AHA or NAEMT).
4. The instructor of the course offering.

ii. The Course Agenda should include:

1. Title of the course
2. Date of the course
3. Location of the course
4. A breakdown of the topics with a time allocation for each topic.

d. The hours must be recorded in the appropriate categories on the EMS continuing education forms—it is not acceptable to submit various course completion or certification cards under the presumption that the individual's continuing education hours have been met.

G. EMS Continuing Education Offerings—Other Discipline Offerings

1. Other non-EMS course offerings may be utilized for continuing education if the continuing education course is sufficiently related in material to the EMS curriculum. Common disciplines that offer courses that may have EMS content include fire service, law enforcement, and general medical, such as nursing.
2. The time claimed for any other discipline offerings should be comparable to the amount of time included in the curriculum, but because the continuing education course may expand upon curriculum principles, the time claimed may be up to three (3) times the curriculum. For example, a commonly claimed credit is for rope rescue. That is consistent with operational guidelines that are included in the EMR curriculum. However, often an EMR will attempt to meet 16 hours of their required 20 hours with a two-day rope rescue course. It would be appropriate for an EMR to claim 3 hours of EMS continuing education from the 16-hour fire service rope rescue course.

H. EMS Continuing Education Offerings—Distance Education Courses

1. Distance education offerings include training and education that is conducted not at a physical location but through electronic means, such as online trainings, webinar, podcasts, and learning management systems.
2. All distance offerings must be verifiable by IDHS staff so staff may request information on the source, including website, etc.
3. Generally, all distance offerings shall be approved by the individual provider's affiliated provider organization, medical director, supervising hospital, and/or training institution. Organizations may limit the source, types, and number of hours of distance education courses that their affiliated individuals may obtain.
4. General requirements for consideration of approval for organizations and considerations for submissions to IDHS as continuing education from individuals without an affiliation include:
 - a. Whether the material is offered from a qualified source for the subject matter.
 - b. Whether the distance offering requires a log-on or some registration to track that the individual did participate.
 - c. Whether the distance offering produces a certification of completion or tracks the participation and completion for verification.
5. Participation and recording of distance education offerings should be recorded on the approved recertification forms for the individual. Verification should include a signature accepting the distance course from an approved individual from the affiliated provider organization or training institution or from documentation from the source. Documentation from the source can be a certificate of completion or a listing of course completions on the user profile but must include the following:
 - a. Name of the distance education course.
 - b. Date that the distance education course was taken.
 - c. Name of the attendee on the verification.
 - d. Total hours of participation.

I. EMS Continuing Education—Primary Instructor Special Requirements

1. Indiana Primary Instructors must have both adult education techniques as well as teaching hours as part of their continuing education requirements.
2. "Adult education techniques" refers to topics of educational philosophy and techniques, including:
 - a. basic coaching and motivational techniques used in an instructional situation.
 - b. adaptation of lesson plans or materials to specific instructional situations.
 - c. learning styles of students and how an instructor could adapt teaching styles.
 - d. types of learning disabilities and methods for dealing with them.

- e. methods of dealing with disruptive and unsafe behavior.
 - f. communication skills necessary to be an effective instructor.
 - g. how to provide evaluation feedback to students, given evaluation data, so that the feedback is timely, specific enough for the student to make efforts to modify behavior, objective, clear, and relevant and includes suggestions based on the data.
 - h. use and limitations of teaching methods and techniques.
 - i. how to supervise other instructors and students during training, given a training scenario with increased hazard exposure, so that applicable safety standards and practices are followed and instructional goals are met.
 - j. development of student evaluation instruments to support instruction and the evaluation of test results.
 - k. conducting a needs assessment for an organization, an individual, or a set of students.
 - l. instructor liability and legal issues related to education, such as harassment.
 - m. instructor courses that produce a completion certificate.
 - n. education offerings or update meetings by IDHS and the NREMT about education policies and practices.
3. "Teaching hours" are educational sessions for public safety or based upon the emergency medical service curricula, which in content are either less than or equal to the primary instructor's level of clinical certification. While traditional classroom or virtual classroom sessions are acceptable, it may also include presentation at conferences or to groups so long as the topic is EMS-based, and the primary instructor is the one presenting or part of the presenters. While public safety presentations are permissible, the majority of teaching hours should be based upon EMS curricula items.
4. Adult education techniques and teaching hours must be approved by the affiliated training institution.

J. Record Keeping

The approved training officer or training institution official is responsible for ensuring accurate and complete record keeping for all educational courses and classes.

Records for educational courses and classes shall be maintained electronically, or in hard copy by the assignee, for a minimum of seven (7) years. All provider organizations and training institutions should develop a written policy for record storage management that ensures participant confidentiality and in accordance with organizational policy or applicable state or federal laws.

An individual provider should keep their continuing education records for their current certification cycle and the immediately preceding prior certification cycle at a minimum.

All educational course and class records are subject to review, evaluation, and audit by IDHS.

Posted: 08/02/2023 by Legislative Services Agency

An [html](#) version of this document.