

# Community Paramedic Curriculum: Past, Present, and Future



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COMMUNITY  
PARAMEDIC

# History of the Curriculum

- EMTs/Paramedics already know how to deliver care locally
- They know how to assess resources and make decisions
- They could fill gaps in care with enhanced skills through targeted training
- The Development of the Internationally Standardized Community Paramedic Curriculum

# The Community Healthcare and Emergency Collaborative





# The Community

## Paramedic Curriculum Version 1.0

- ⦿ Level 1 – Non-paramedic filling some roles of the Community Paramedic
- ⦿ Level 2 -- Certificate or Associate degree
- ⦿ Level 3 – Bachelor's degree
- ⦿ Level 4 – Master's degree



# Version 1.0 in 2009

- ❁ Minnesota's Pilot Project
- ❁ Phase 1 - Foundational Skills @100 hours
- ❁ Phase 2 - Clinical Skills @15-146 hours
- ❁ 12 Students
- ❁ 100% classroom setting

# Version 2.2 in 2010

- ❁ Colorado's Pilot Project
- ❁ Committee Formed
- ❁ Didactic Module
  - Online 12 weeks
  - Classroom 5 sessions
- ❁ Lab Module
  - Medical Director
- ❁ Clinical Module
  - Phase 1: 100 hours
  - Phase 2: 50 – 100 hours

# Version 2.2 in 2011 & 2012

- Minnesota's 2<sup>nd</sup> & 3<sup>rd</sup> Class
- Hennepin Technical College



# Curriculum 3.0 Update

- Search for funding
- Started in May 2011
- Create a sustainable curriculum
- Education versus Training



# Curriculum Update Team

- Anne Robinson, RN, BSN, Project Coordinator
- Christopher Montera, AAS, NREMT-P, Chief, Western Eagle County Health Service District
- Dan Swayze, DrPH, MBA, MEMS, Vice President, Center for Emergency Medicine of Western Pennsylvania, Inc.
- Niels Tangherlini, NREMT-P, BA, Paramedic Captain, San Francisco Fire Department
- Mike Trujillo, BS EMS, MPH, Director of Allied Health, Colorado Mountain College
- Kyle Bates, MS, NR/CCEMT-P, FP-C, EMS Educator from Tonawanda, NY
- Daryl Boucher, MS, RN, NREMT-P, EMS Coordinator, Northern Maine Community College
- Charlotte Crawford, MBA, MSN, Buffalo, NY

# Update Process

- ❁ April – May 2011: Team Member interviews and engagement
- ❁ June 2011: Strategic Planning meeting
  - Reviewed current curriculum
  - Discussed priority topics
  - Created 7 modules and assigned them to the SME
- ❁ July – November 2011: Modules 1-6
  - Goals and Objectives
  - Content
  - Lesson Plans
  - Design

# Update Process

## ❁ December 2011 – March 2012: Module 7

- Goals and Objectives
- Content
- Lesson Plans
- Design

## ❁ February - April 2012: Review Team



# Curriculum 3.0



# 7 Curriculum Sections

- Role in the health care system
- Social determinants of health
- Role in public health and primary care
- Cultural competency
- Role within the community
- Personal safety, self care, and professional boundaries
- Clinical care of the population's health gaps

# #1 Role in the Health Care System

- CP definition
- Current scope of practice
- Healthcare / Social Service job descriptions
- Role boundaries and limits as it relates to the role
- Professional Advocacy and Liaison
- Documentation / Evaluation
- Financing health care and fiscal support
- How to identify a high risk, high need clients



# #2 Social Determinants of Health

- Health and social determinants of health
- Define social margin
- Identify individual characteristics
- Understand high risk and high need population
- Factors that lead to inequalities of healthcare
- Social networks and social support
- Spirituality
- Environmental
- Policies and regulation
- Culture
- Documentation / Evaluation

# #3 Role in Public Health and Primary Care

- ⊗ Health Promotion
- ⊗ Injury Prevention
- ⊗ Chronic Disease Management
  - Behavior modification
  - Social risk reduction
  - Environment risk reduction
  - Economic risk reduction
- ⊗ Program Evaluation

# #4 Cultural Competency

- Spirituality
- Health Literacy
- Documentation



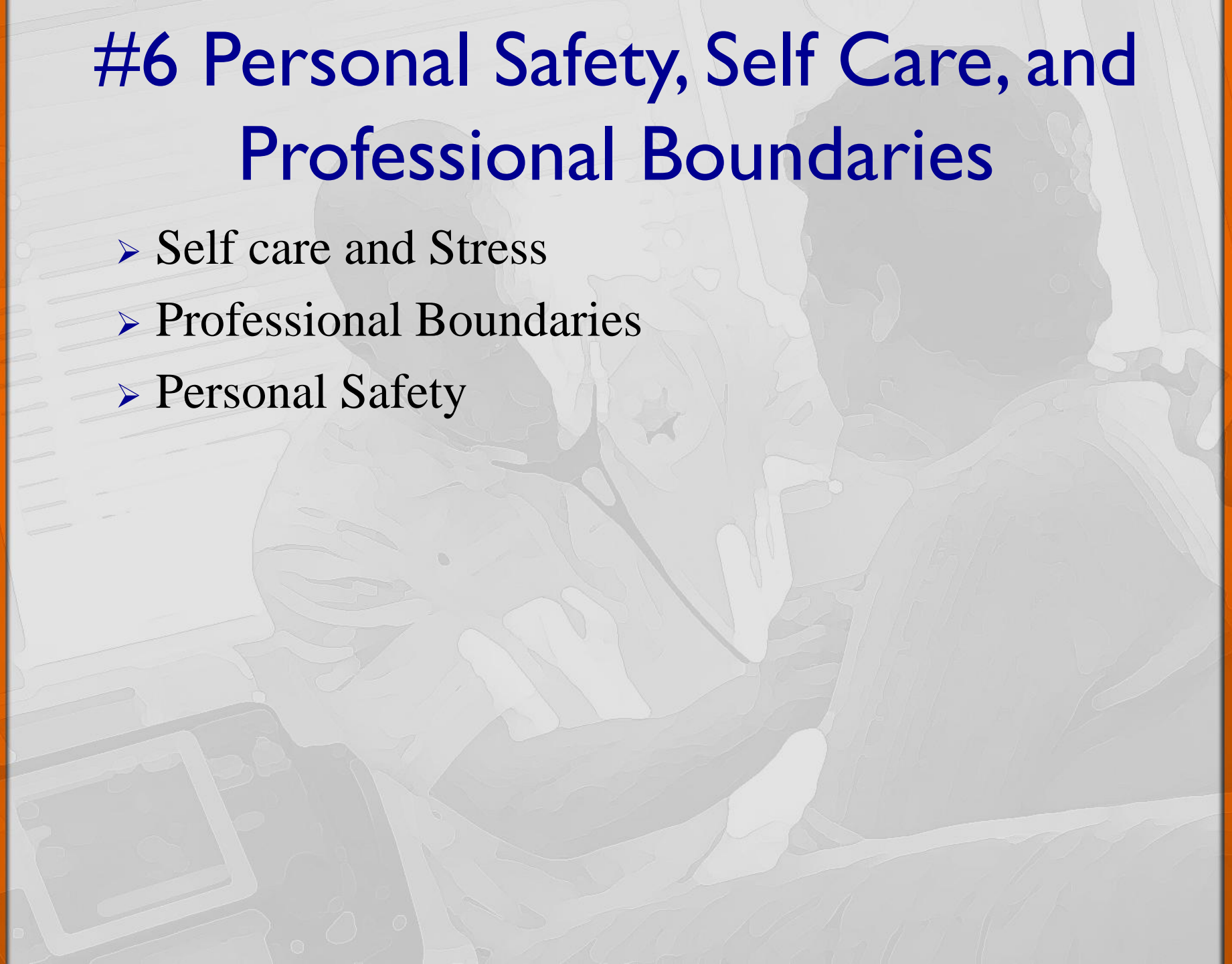


# #5 Role within the Community

- CP will understand community health assessment and mapping
- Community Outreach
- Program Outreach
- Provider Outreach
- Communication
- Case findings
- Patient Navigation
- System Navigation
- Documentation / Evaluation
- Assessment
- Basics of the Service System
- Referral, Tracking and Follow Up

# #6 Personal Safety, Self Care, and Professional Boundaries

- Self care and Stress
- Professional Boundaries
- Personal Safety



# #7 Clinical Care of the Population's Health Gaps

- Lab and Clinical
- Pediatric, Adult, and Geriatric Populations
- Interpretation of lab results and reports
- Home health equipment
- Mental Health / Psychological First Aid
- Substance abuse
- Oral Health
- Immunization
- History and Assessment
- Chronic Conditions



# Curriculum Review Team

- Marvin Birnbaum, MD, PhD, Emeritus Professor of Medicine and Physiology, University of Wisconsin-Madison
- Robert A. McDaniels, MS, NREMT-P, Paramedic Program Director of the Emergency Medical Services Academy in the Department of Emergency Medicine at the University of New Mexico School of Medicine
- Bill Raynovich, NREMT-P, EdD, MPH, Committee Co-Chair, Associate Professor of EMS Education at Creighton University, Omaha, NE
- Jim Upchurch, MD, Rural Family Practice Physician and EMS Medical Director, MT
- Rich Walker, MD, FACEP, Emergency Physician, University of Nebraska Medical Center in Omaha, NE
- Mike Wilcox, MD, Committee Co-Chair, Regional EMS Medical Director, MN
- Bill Young, NREMT-P, Director of EMS Education and Certification for the Kentucky Board of EMS

# Curriculum Review Process

- ❁ Co-Chairs

- Dr. Michael Wilcox and Bill Raynovich

- ❁ Phase 1 – Curriculum Structure

- ❁ Phase 2 – Lesson Plans

- ❁ Phase 3 – Lab and Clinical Module

- ❁ Phase 4 – Final Approval

# The Community

## Paramedic Curriculum Version 3.0

- ⌘ Level 1 – Non-paramedic filling some roles of the Community Paramedic
- ⌘ Level 2 -- Certificate or Associate degree
- ⌘ Level 3 – Bachelor's degree
- ⌘ Level 4 – Master's degree



# 3.0 Curriculum Structure

## ❁ Didactic Module

- Online 12 - 16 weeks
- Group Work

## ❁ Lab Module

- Peds, Adult, Geriatrics
- Optional based on population's need
- 3 - 5 sessions

## ❁ Clinical Module

- Select modules based on population's need
- 100 – 200 hours



# Spring 2012 Pilot

- ❁ 13 States
- ❁ 23 Agencies
- ❁ 107 Students

# Agency Introductions

## ❁ Arizona

- Sierra Vista

## ❁ Arkansas

- Washington County – Central EMS

## ❁ Colorado

- American Medical Response
- Clear Creek EMS
- Kiowa Fire Protection
- Poudre Valley Hospital EMS
- Southwest Health EMS
- Thompson Valley EMS
- Weld County EMS
- Western Eagle County Health Service District

# Agency Introductions

## ☼ Idaho

- Ada County Paramedics

## ☼ Maine

- Crown Ambulance
- North East Mobile Health Services
- North Maine Community College
- St. George Vol. FireFighter's & Ambulance Assoc.

## ☼ Montana

## ☼ Nebraska

- Medics at Home

# Agency Introductions

## ❁ Nevada

- Humboldt General Hospital

## ❁ New York

- Brighton Volunteer Ambulance

## ❁ North Carolina

- Rowan County Emergency Services

## ❁ South Carolina

- Abbeville County EMS

## ❁ Utah

- Salt Lake City EMS

## ❁ Wisconsin

- Baraboo District Ambulance Service



# 3.0 Class Participation Guidelines

- ⊗ Committed EMS Agency
- ⊗ Committed College or University
- ⊗ Site Coordinator
- ⊗ Funding for class
- ⊗ Establish a dialog with stakeholders in the community
- ⊗ Develop local champions
- ⊗ Local Medical Director

# Obtaining the Curriculum

- ⌘ Available FREE of charge
- ⌘ Colleges, Universities, and Regulators
- ⌘ <http://www.communityparamedic.org/Collleges.aspx>
- ⌘ Copyright Agreement

# Contact Information

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