

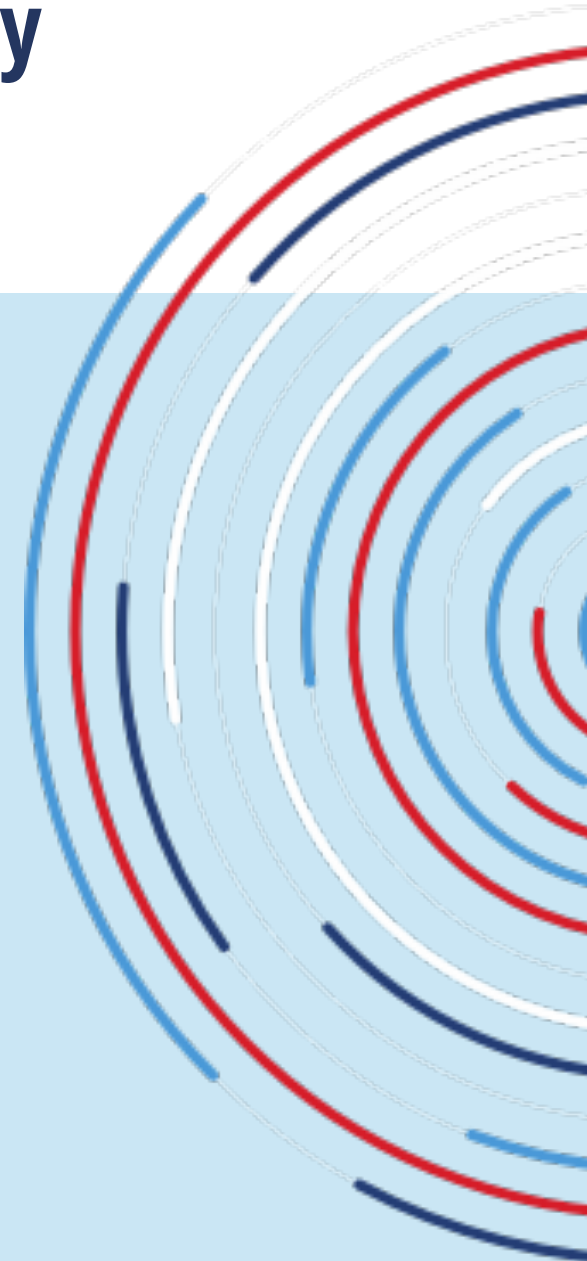
A photograph of three nursing students in blue scrubs working in a clinical setting. They are gathered around a medical device, possibly a ventilator or a pump, which has a screen displaying waveforms. One student is pointing at the device, while the others look on attentively. The background shows various medical supplies and equipment, creating a realistic clinical environment.

Advanced Placement and Prior Learning Assessment

Topics of Conversation

- 1. Review applicable Standards & Policy**
- 2. What is Advanced Placement/PLA**
- 3. Who are prospective students for AP/PLA**
- 4. Is AP/PLA being utilized by programs**
- 5. Implementation considerations**
- 6. Takeaways**

CAAHEP Accreditation Standards & CoAEMSP Policy



Standard V.A.2. Publications & Disclosures

“At least the following must be made known to all applicants and students: ...policies on advanced placement, transfer of credits, and credits for experiential learning...”

Interpretation of Standard

“All students who are accepted for advanced placement (AP) are included in the annual report. Programs demonstrate how advanced placement graduates meet all program minimum competency requirements in didactic, lab, clinical, and capstone field internships. All programs publish a policy on advanced placement for the EMS program whether or not they offer advanced placement.”



CoAEMSP Policies & Procedures

Policy VI.A. Advanced Placement/Prior Learning Assessment (p. 28)

Appendix 6: Advanced Placement/Prior Learning Assessment (PLA), (p. 68)

Policies & Procedures for Programs

*Approved by the CoAEMSP Board of Directors
May 2, 2025*



What is Advanced Placement/Prior Learning Assessment?



Prior Learning Assessment

- “...awards credit for advanced placement through assessment of knowledge acquired and how that knowledge translates into specific courses” (American Council on Education)
- Process designed to identify, demonstrate and document college-level learning with academic integrity

Prior Learning Assessment

- Credit for advanced standing should be awarded only for learning, and not for experience
- PLA means making your case and proving it



**Is a “refresher” or
the NCCP good
enough?**

NATIONAL CONTINUED COMPETENCY PROGRAM

PARAMEDIC EDUCATION UPDATE



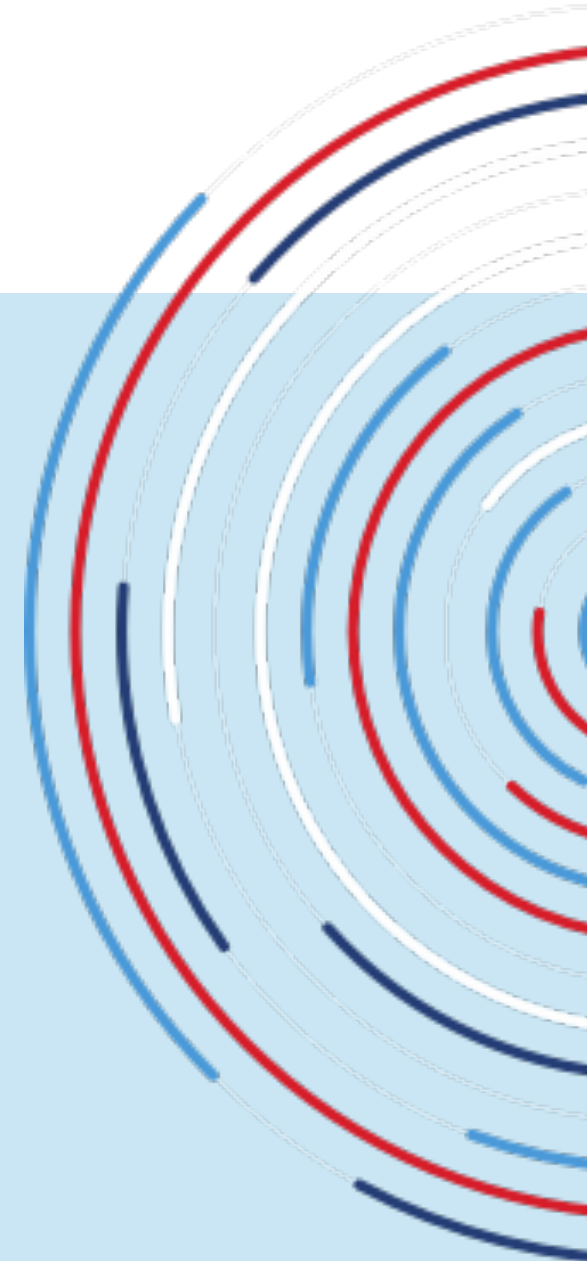
National Registry of
Emergency Medical Technicians®
THE NATION'S EMS CERTIFICATION™

Revised October 2016

Prospective Students for AP

- **Healthcare practitioners (e.g., MD/DO, PA, RN, APRN)**
- **Prior students/graduates, including those from non-accredited programs**
- **International students**
- **Military personnel with medical training**
- **Integration with workplace programs (apprenticeships)**

Is Advanced Placement Being Used?



ADVANCED PLACEMENT PARAMEDIC EDUCATION FOR HEALTH CARE PROFESSIONALS: A DESCRIPTIVE EVALUATION



Authors: William J. Leggio, EdD, NRP, Michael G. Miller, EdD, NRP, RN, and Ashish R. Panchal, MD, PhD, Omaha, NE and Columbus, OH

2015 CoAEMSP Survey

- 31% of programs offered AP for healthcare professionals
- Only 18% had admitted students in the past 5 years

Contribution to Emergency Nursing Practice

- The current literature on advanced placement paramedic education for health care professionals indicates a gap in understanding the outcomes of advanced placement paramedic programs for health care providers.
- This article contributes major findings of high rates of completion (88.9%) and national certification (99.5%) from an advanced placement paramedic education program for nonemergency medical services health care professionals.
- Key implications of this research are that there is an advanced paramedic program for health care professionals wanting to bridge into the delivery of prehospital emergency medical services.

Abstract

Introduction: The delivery of emergency medical services is primarily performed by emergency medical technicians and paramedics in the United States. More recently, nurses and physicians have become more involved in the delivery of emergency

medical services. Advanced placement paramedic education bridging programs have been developed to prepare the workforce, but the success of these programs is unknown. This study evaluated the demographics and performance of nonemergency medical services health care professionals who attended an advanced placement paramedic education program at a Midwestern university.

Methods: This was a retrospective evaluation of student data from 2007 to 2017. Descriptive statistics were used to tabulate demographics, program performance, and individual performance in the National Paramedic Certification Examination.

Results: The program admitted 305 students; registered nurses (95%) were the majority of students. Of the 305 admitted students, 271 (88.9%) fulfilled all program requirements and were eligible to take the National Registry of Emergency Medical Technicians paramedic certification examination. Of these 271 eligible students, 201 (74.2%) took the National Paramedic Certification Examination. A total of 195 (97%) obtained certification at the first test attempt, whereas 200 (99.5%) obtained certification within 3 attempts. Of the 200 who passed the test, 175 (88%) successfully demonstrated entry-level competency in paramedic-level psychomotor testing.

Discussion: The advanced placement paramedic program evaluated in this study had high rates of successful program completion, as well as high first-time and cumulative passing rates for the National Paramedic Certification Examination. Further research is needed to identify the best practices in determining student requirements and the methodologies in delivering advanced placement paramedic education bridging programs.

Key words: Emergency Medical Services; Program Evaluation; Nurses; Curriculum; Paramedic; Emergency

Introduction

Emergency Medical Services (EMS) in the United States is primarily provided by professionals who function at 4 levels of practice, as defined by the EMS Scope of Practice Model.¹

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J Emerg Nurs 2020;46:44-50.

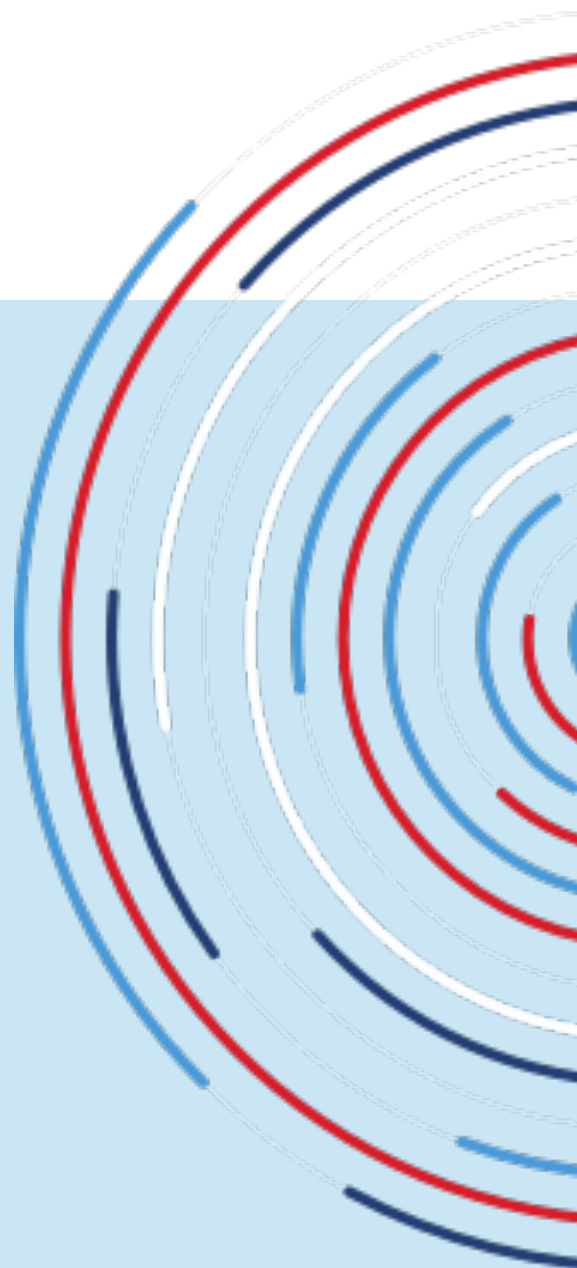
Available online 28 November 2019

0099-1767

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<https://doi.org/10.1016/j.jen.2019.10.010>

Implementation Considerations



Overall Goals of AP

- **Deliberate process to evaluate competency in all learning domains**
- **Evidence for credit must be documented**
- **Evaluate for learning gaps and eliminate redundant education**
- **Ensure all terminal competencies have been accomplished**



Key Principles ^{1/3}

- **All summative competency outcomes evaluated and documented just as for any other student**
- **Educational plan must be tailored to the audience**
- **Complete a “crosswalk” to help identify existing competencies and gaps**

Sample Crosswalk Table

Sample (Simplified) Crosswalk Table			
Paramedic Curriculum Component	RN Education Equivalency	Gap Analysis	Requirement to Address Student Gap
Anatomy & Physiology	Fully covered in RN curriculum.	None.	Credit granted.
Pharmacology	Fully covered in RN curriculum.	Unfamiliar with EMS formulary and possible field procedures for safe medication administration (Crosscheck).	EMS specific pharmacology formulary and procedure module.
Airway Management & Ventilation	Oxygen therapy, BVM, BLS adjuncts, suction, monitor and assess already placed endotracheal tube.	Supraglottic devices, ETI, RSI protocols, transport ventilators, & surgical airway procedures.	Module to address theory, lab/simulation with competency evaluation, and field application.
EMS Operations (ambulance, transportation devices, rescue, ICS, HazMat)	Not included in RN curriculum.	Significant gap in all areas. *If required to be an EMT content would be covered.	Full completion of EMS Operations curriculum content.
Cardiology	ACLS, cardiac monitoring, cardiac pathologies, risk factors, assessment, interventions.	Depending on practice area, Lead II interpretation, 12-lead ECG interpretation (diagnostic), leadership role during resuscitation.	Advanced ECG course including Lead II proficiency, simulated resuscitations in leadership role, and field application.
Clinical & Field Internship	RNs have extensive hospital clinical experience.	No prehospital decision-making, scene management, and practice environment challenges.	Complete all required capstone field internship to demonstrate competency to enter profession.

Credible Education
through Accreditation

Key Principles ^{2/3}

- **Assumptions may be made based on current licensure/certification, BUT verify**
- **Program must ensure competency based on current educational standards and guidelines**
- **Demonstrate progression of learning and attained competency in all learning domains**
- **Be sure you comply with State regulations**
- **Consider institutional accreditation implications**

Key Principles ^{3/3}

- **Medical Director review and approve all aspects of AP pathway(s) offered**
- **Advisory Committee review and support the advanced pathway**
- **PD and MD attestation of successful completion and competency on terminal competency form**

CoAEMSP and NREMT Paramedic

Student Minimum Competency Recommendations Instructional Guide 2021



National Registry of
Emergency Medical Technicians®
THE NATION'S EMS CERTIFICATION™

Implementation

The 2023 CoAEMSP Student Minimum Competency Recommendations are effective January 1, 2023. The program must establish its program specific minimum requirements, based on CoAEMSP Recommendations, have the plan approved by the program Medical Director, endorsed by the program Advisory Committee, and have a documentation and tracking system in place before that date. Competency for students enrolling in a Paramedic program after January 1, 2023 will be evaluated based on the 2023 CoAEMSP Student Minimum Competency Recommendations. Programs may also elect to implement the 2023 Recommendations before the January 1 deadline.

For additional information, please select the link below to access the CoAEMSP Frequently Asked Questions (FAQ) or visit the Program Minimum Numbers section of the Resource Library page of the CoAEMSP website.

Select link ==>

**CoAEMSP Student Minimum Competency Recommendations
Frequently Asked Questions (FAQ)**

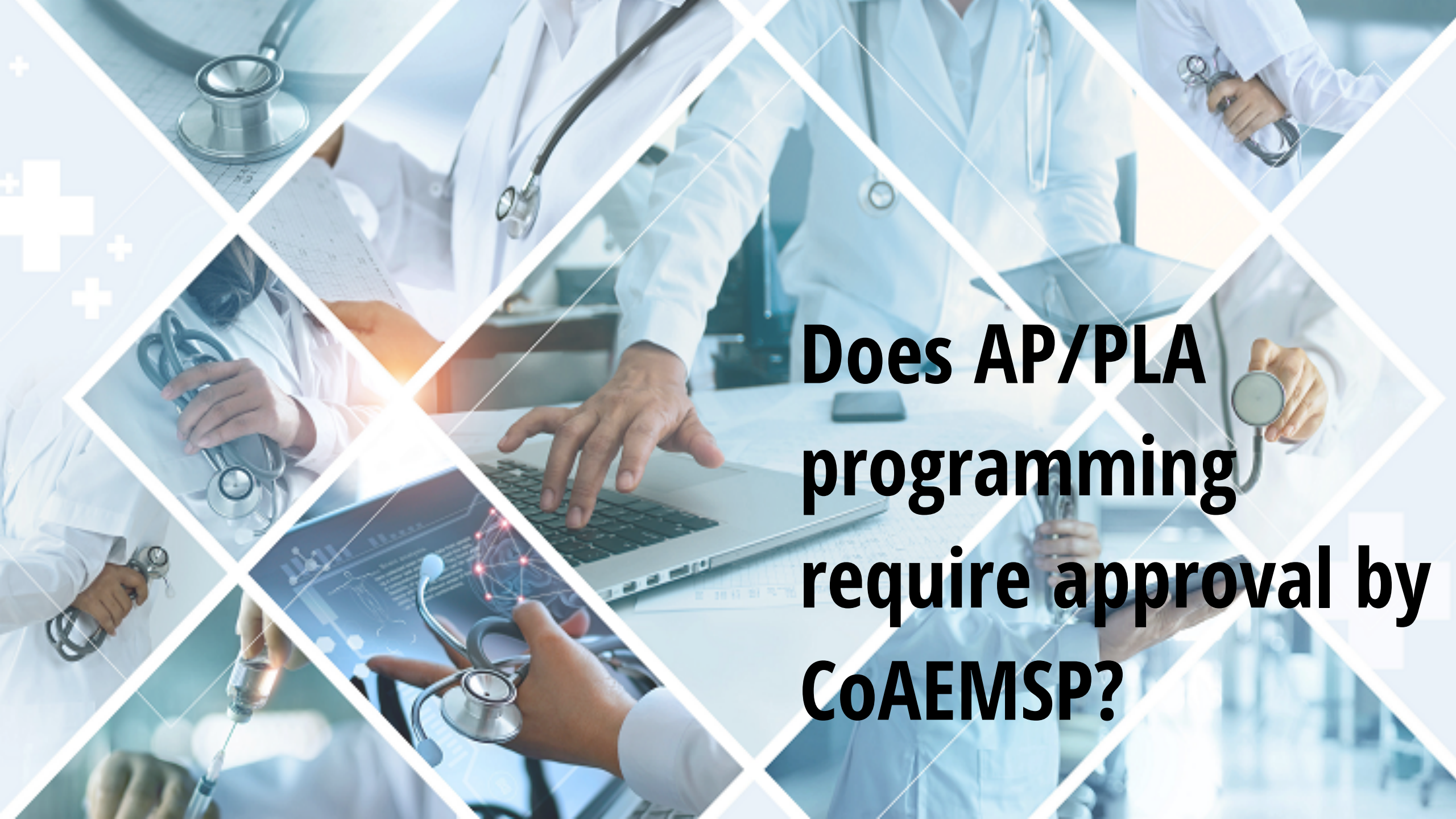
SMC – Paramedic for 10 years in busy EMS system

- **Evidence of current licensure**
- **Medical Director letter attesting to ongoing competency in all skills areas**
- **FTO attests to professional characteristics**
- **Program develops evaluations to validate this information and ensure competency**



Competency Evaluation

- Summative comprehensive written exam
- Summative psychomotor exam
- Summative affective domain evaluation
- Capstone team lead process



**Does AP/PLA
programming
require approval by
CoAEMSP?**



Top Takeaways

[1]

**Supports
innovative
approach to
delivering
paramedic
education
through AP/PLA**

[2]

**No “one size fits
all” approach
when designing
AP/PLA
programming**

[3]

**Commit to
Standards &
educational best
practices in
interest of
optimal patient
care & student
advocacy**

References

Commission on Accreditation of Allied Health Education Programs. (2023). CAAHEP Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions.

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