



Student Minimum Competency Recommendations 2023

September 2021

After digesting the contents and information requested in the *Site Visit Findings Letter* or preparing the *Progress Report*, preparing an appropriate response is critical. Questions may be: What exactly are they asking for? What specifically do I need to submit? How much detail is expected? Sometimes, to respond to the request for required information, programs send **too much** data that may not be concise or address the citation. This "information overload" can result in further delay in demonstrating satisfactorily meeting the requirement and the need to submit another progress report. The following guidelines are intended to address some of the more common citations.

The primary goal of any Paramedic educational program is to ensure that students are competent at the end of the course of study. Therefore, for many years, the CoAEMSP has required programs to track and report their minimum competencies for various age groups, complaints, and skills as specified initially in the *Student Patient Contact Matrix*. This document was frequently referred to as Appendix G since it was entered in the Self-Study Report on the Appendix G tab. The nomenclature of Appendix G has since been retired.

The required reporting elements were updated in 2017 and were effective for cohorts beginning in July 2019. The recommended minimum numbers resulted from an extensive review of the student data and discussion with educators and medical directors. The resulting document, the *Student Minimum Competency Matrix*, recommended minimum numbers for each competency specified and detailed the recommended progression of learning.

Since the release of the current version in mid-2017, programs and faculty have experienced challenges in implementation and tracking. There was also some confusion regarding what constituted The National Registry Portfolio and the CoAEMSP recommendations. To address these issues and work to simplify competency requirements, in 2020, a working group of CoAEMSP and The National Registry representatives began to examine the existing framework and modify the recommendations. One key goal was to separate the formative assessments from the final competency. The result is the 2023 *Student Minimum Competency Recommendations (SMC)* that still provides guidance on the formative instructional process and identifies the recommendations for 'competency.' Meeting the minimum competency requirements established by the program will satisfy reporting for both the CoAEMSP and the National Registry. While the formative assessments are included in the overall document, it is up to the program to determine the sequencing and format of the formative process.

The recommended minimum competencies were again determined by reviewing student data, reviewing by experienced EMS educators, program directors, and medical directors, using the NHTSA Scope of Practice Model, and using the National Registry's Practice Analysis. The SMC includes tables of recommendations for ages, conditions, ALS skills, capstone field internship, and BLS skills. However, the only report required for CoAEMSP is the final Summary Tracking worksheet. Programs can choose any method to document the student experience but must report the Summary Tracking for cohorts as formatted in that spreadsheet.

The implementation date for the new SMC applies to all students enrolling in a paramedic educational program on or after January 1, 2023. The data tracking points are not new. The updated recommendations have been provided to the vendors that offer tracking solutions who will work with clients on tracking and reporting. Programs may also develop their tracking system or use a commercial technological solution. Programs that wish to be early adopters may implement the new SMC at any time.

Note that the 2023 *Student Minimum Competency Recommendations* provide recommended numbers. The program must determine its specific requirements in conjunction with its communities of interest, which must be approved by the program medical director and endorsed by the Program Advisory Committee. The program can select numbers that are less than the recommended minimums but must be able to demonstrate that graduates are competent through various measures, including certification examination results and graduate and employer surveys. Programs can also specify required minimums that are higher than the recommendations. Whatever minimum competency numbers a program chooses, all students must attain those minimums to successfully complete the program.

Going forward, the SMC will be reviewed by the CoAEMSP and the National Registry every four (4) years, incorporating any potential changes based on current evidence, including the NHTSA Scope of Practice Model, the National Registry's Practice Analysis, and other pertinent information.