

# Emergency Communications Registered Nurse (ECRN) Course Student POLICIES - 2018

# I. Course description

The Northwest Community Emergency Medical Services System (NWC EMSS) Emergency Communications Registered Nurse (ECRN) course presents components of the National EMS Education Standards with an emphasis on applying these principles to the NWC EMSS Standard Operating Procedures (SOPs), policies, protocols, and procedures in compliance with the Illinois EMS Act and Trauma Center Code. The course is facilitated by the NWC EMSS EMS Administrative Director (Connie Mattera) and is assisted by EMS Educators from System hospitals.

#### II. Registration and tuition

Course applications and verification of ECG course completion must be received in the NWC EMSS office prior to commencement of class so a student file can be opened.

Tuition: \$200.00 payable to Northwest Community Hospital; cost center: 17496-533990.

Payment is due on or before the first day of class unless alternative arrangements have been made in advance with the course facilitator.

## III. Course Prerequisites

Current unrestricted license as a registered professional nurse in the State of Illinois.
An employee in good standing at a System hospital <b>who has completed their probationary period</b> in the emergency department.
Successful completion of an ECG interpretation course or ECG interpretation competency. Such a course should include recognition of dysrhythmias and 12 L ECGs. Attach written documentation of successful completion/competency measurement to the application.
Completion of the ECRN needs assessment exam is optional.

### IV. Course completion criteria

Students must demonstrate at least minimum acceptable mastery of all cognitive, psychomotor and affective objectives as measured by written and practical examinations and direct observation.

Class attendance is strongly encouraged to optimize learning opportunities but is not mandatory from the System's perspective. Please confirm your employer's attendance expectations before class begins. Continuing education (CE) credits will only be awarded for class hours attended.

**GRADING CRITERIA:** Students are allowed one month following the last day of class to take and retake (if necessary) the final written exam, ECG rhythm interpretation exam, and all practical exam stations. Students must achieve a minimum of 80% on each component.

Final written exam: 150 multiple choice questions blueprinted to the entire SOP.

#### **Practical exam**

- ECG rhythm interpretation exam: Each candidate is given one minute/strip to correctly identify 15 rhythms; may miss no lethal rhythms
- Simulated cardiac run
- Simulated medical run
- Simulated respiratory run
- Simulated trauma run: Must calculate an accurate GCS and determine appropriate destination per Region triage protocols

**Retest option:** If the nurse scores < 80% on the first attempt, they will be allowed one retake of each component. They may not retake the written or ECG rhythm interpretation exam on the day of initial testing. They must document remediation before retaking any portion of the exam(s).

Practical exams shall be given by the EMS Coordinator at the nurse's hospital of employment.

Extensions may be granted based on individual circumstances. If the nurse fails to successfully complete any portion of the exams within one month following the last day of class and has not been granted an extension, he or she will receive a failing grade for the course.

Passing all exams confers **Provision ECRN** status with temporary on-line medical control (OLMC) privileges while under the direct preceptorship of a licensed ECRN or physician.

If a student fails to meet the criteria for successful course completion, the following options are available:

- Repeat the course at a later time
- Attend educational offerings addressing the areas of ongoing learning need and retest the written and practical exams in their entirety
- Complete the provisions of a corrective action plan agreed to by the student, their employer and the EMS Administrative Director

**Interim status:** The nurse will not be authorized to direct prehospital care until all course requirements are successfully achieved.

**Tutoring** is available and encouraged for those finding it difficult to master course objectives. You may either schedule dates and times with the course facilitator or your hospital's EMSC.

## V. Field observation experience

The Provisional ECRN must be scheduled by their hospital EMS Coordinator (EMSC) to ride as an observer with an EMS Provider Agency within the NWC EMSS for a minimum of one eight hour shift. During this time, the nurse must observe at least one Advanced Life Support (ALS) call. If this is not achieved during the initial shift, the nurse must be rescheduled for one additional shift. They may leave as soon as an ALS run is completed on the second shift day. If they do not observe an ALS run during the second shift, contact the EMS Administrative Director and an alternative method will be negotiated to achieve the field observation objectives.

## VI. On line Medical Control internship

Upon successful completion of all course requirements, the Provisional ECRN may begin a precepted OLMC internship.

**Opening a file:** Each provisional ECRN must make an appointment to meet with their hospital's EMSC or their designee to open a file prior to commencing the internship. During this meeting, the EMSC/Educator will review the provisional internship process and that hospital's expectations. A Provisional ECRN Internship Agreement will be signed at that time.

Scope of practice: No provisional ECRN has independent OLMC privileges during the internship.

During the internship, each Provisional ECRN is to provide OLMC within the System standards of practice as defined by the NWC EMSS SOPs, policies and procedure manual while under the direct supervision of an ECRN preceptor or an approved ED physician who must be present throughout each call, and approve all orders. Supervision is interpreted as approving the provisional ECRN's orders to protect patient safety and coaching as necessary, but not taking over the call. Those runs where orders were initiated by someone other than the provisional ECRN DO NOT qualify as acceptable in building the portfolio demonstrating ECRN competency.

The preceptor must co-sign all Communication logs documented by the Provisional ECRN.

**Time requirements:** The internship shall be completed when all objectives are achieved. While there is no minimum time frame, the maximum allowable time is 12 months from the date of successful testing unless a written extension request is submitted and approved.

**Internship phases:** There are two phases with specific objectives for each that are listed on the evaluation forms. Phase I must be successfully completed before advancing to Phase II.

 The ECRN Preceptor is responsible for validating all competencies achieved prior to the phase meetings with the EMSC/Educator. A minimum of eight ALS calls of varying natures must be completed during each phase. Communications Logs, EMS patient care reports (PCRs), and ECG strips that have been redacted of all Protected Health Information (PHI) under HIPAA must be submitted to the hospital EMSC/Educator at least one week prior to the phase meetings. Pediatric calls may be simulated if an actual call of this nature was not completed.

**Progress/phase meetings:** The provisional ECRN must meet at least twice with the EMSC/ Educator to evaluate the nurse's progress and/or to plan for the next phase of the internship or declare the objectives to be achieved and recommend ECRN licensure.

### **COMPLETION OF THE INTERNSHIP**

When the nurse has satisfactorily achieved all objectives, the ECRN candidate shall schedule a final meeting with the EMSC/Educator to complete a cumulative performance appraisal. All must agree that the nurse has demonstrated the skills and knowledge required for safe entry-level practice as an ECRN. If the team is in agreement, submit the following to the EMS Administrative Director:

Cover letter from the EMSC recommending ECRN certification
<b>Certification check list</b> : Includes the nurse's name, mailing address, date of birth, ECRN training site, final exam testing date and site code number (if other than the NWC EMSS) and date of course completion.
<b>Phase One Progress Report</b> ; completed and signed. Include the 8 ALS runs with all Communication logs, EMS patient care reports, and ECG strips attached.
<b>Phase Two Progress Report</b> ; completed and signed. Include the 8 ALS runs with all Communications logs, EMS patient care reports, and ECG strips attached.
Cumulative Performance Appraisal: Completed and signed
Field experience form: Completed and signed
Signed IDPH Child Support Statement
<b>Certified check or money order</b> made payable to the Illinois Department of Public Health in the amount of \$55.00

**If the runs are evaluated as unsatisfactory**, a corrective action plan shall be developed with further objectives and time frames for the nurse to follow in order to complete the internship.

**Extensions:** If an extension is needed beyond the 12 month period, a written extension request must be submitted by the provisional ECRN to the EMS Administrative Director at least 30 days prior to the expiration of the provisional period. Any nurse who completes the internship after an extension may be required to complete additional testing which may cover each section of the SOPs.

## VII. RECOGNITION of ECRN STATUS

If all objectives are achieved and approval is granted by the EMS Administrative Director or her designee, an IDPH transaction card, letter recommending ECRN certification, the signed child support form, and secured check or money order will be submitted to IDPH. The nurse will receive a license from IDPH with an ECRN number and date of expiration. They should provide a copy of this license/certificate to their EMSC/Educator and maintain the original in a place that allows for easy retrieval if necessary.

Nurses who successfully complete all certification requirements may use "ECRN" after their licensing title.

#### VIII. Name/address/employer changes

Changes in name or employer must be reported to the NWC EMSS office within 20 days of the change. Contact Connie Mattera at cmattera@nch.org.

The nurse much enter address changes directly into the IDPH database and work with IDPH Division of EMS to execute name changes on their ECRN license per the attached Renewal Instructions.

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