

**7.27.2.16 APPENDIX C: SPECIAL SKILLS APPLICATION AND REPORTING PROCEDURES:**

**A. Purpose:** Special skills are those skills, procedures, and medications that are requested by an EMS service to enhance emergency treatment capabilities beyond the normal scope of practice, as defined in the EMS Act. Use the enclosed procedures for application, reporting and renewal for special skills. Applications are reviewed and approved or disapproved by the medical direction committee, and once approved, become a legally recognized addition to the service capabilities.

**B. General:** All levels of EMS personnel, including licensed EMS first responders and all levels of licensed EMTs are eligible for special skills consideration for any procedure, skill or medication.

**C. Application Procedure:** The EMS service medical director, or his designee, shall coordinate with the EMS service director, and shall make application for special skills to the EMS medical direction committee.

**D. Application Document:** The application document for a special skill must be tailored to the level of the request. While the degree of detail in each section may vary to match the nature of the skill requested, all applications should include the following elements, in order:

(1) application cover page: titled to state the requested special skill, date of application, name of service, service director name and medical director name;

(2) contact information page: must include address and contact information for the service, service director and medical director;

(3) letters of support: must include individual letters of support from the service director and medical director; additional letters of support from the local medical community or evidence of notification of the local medical community may be required; the need for letters of notification and support from the local medical community and who provides the letters must be adjusted to match the nature of the special skill requested;

(4) service description: provide a concise description of the EMS service; this includes such items as basic call demographics relevant to the applicant, level of licensure of providers and names and locations of the primary receiving medical facilities;

(5) description of the special skill: provide a description of the procedure, medication or requested skill. Include information on risks, benefits, indications and contraindications;

(6) justification and statement of need: provide a statement explaining why the special skill is needed; this should include a description of the current medical intervention or alternative practice to the special skill and a risk or benefit analysis that supports the special skill requested; the estimated number of potential interventions per year, other relevant statistical data and a statement indicating the level of current scientific information/studies to support the requested special skill; the level of scientific justification can be adjusted to match the level of the special skill requested;

(7) protocol: provide a copy of the treatment protocol. Include other operational protocols relevant to the special skill, if applicable;

(8) training: provide a training syllabus; this must include learning objectives and the training hours for initial and continuing education; this section should also include a description of the instructors, how training will be completed, and a description of the method used to initially evaluate the skill;

(9) QA/QI program: provide a description of the QA/QI process for the special skill, including frequency of evaluation, names and qualifications of the personnel involved in the process; include a copy of the evaluation tool or forms that will be used, if applicable;

(10) the application and all supporting documentation shall be submitted to the EMS bureau, attn: state EMS training coordinator.

**E.** Applicants may involve the EMS regional offices when preparing a special skill request and include a letter evidencing regional review. Applicants shall forward a copy of their application to their EMS regional office when completed.

**F.** Upon receipt, the state EMS medical director and state EMS training coordinator will review the application. The service will be notified if the application is found to be incomplete or to contain significant errors.

**G.** Applications must be received at the bureau at least forty-five (45) days prior to the next regularly scheduled medical direction committee meeting to be placed on the agenda of that meeting for consideration by the medical direction committee.

**H.** The medical direction committee shall take action on all special skills applications on the

agenda at their regularly scheduled meeting. The medical direction committee may take the following actions on the application: Approved, approved with limitations or restrictions, denied or tabled with a request for a formal presentation or additional information by the requesting service medical director or their designee.

**I.** The medical direction committee may give an approval subject to specific conditions, limitations or restrictions. This may include a written and/or practical examination.

**J.** Within ten (10) working days following the decision of the medical direction committee, the state EMS training coordinator shall provide a written response to the applicant regarding the action of the medical direction committee.

**K.** Special skills may not be utilized until receipt of these special skill approval letter from the bureau. Any specific conditions or limitations will be evidenced in the approval letter from the bureau.

**L. Monitoring:** It is expected that EMS services with approved special skills will continuously comply with the requirements of their application and approval letter. This includes, but is not limited to, such items as training curricula, approved instructors, quality assurance, protocols and data collection. Any changes to the approved application shall be sent to the state EMS training coordinator for concurrence/coordination with the medical direction committee.

**M.** The medical direction committee may immediately suspend or revoke special skill privileges for an individual or service that loses medical direction, or fails to comply with the stated requirements, or for any other reason to protect the health and welfare of the people of New Mexico.

**N.** If a new medical director assumes control of a service with an active special skill program, the bureau shall receive a letter of support from the new medical director within thirty (30) days or the special skill approval may be withdrawn.

**O.** The service shall maintain a current list of all providers trained and approved to utilize the special skill. This list must be provided to the bureau upon request.

**P. Reporting:** The service shall provide to the state EMS training coordinator periodic written special skill reports. During the first year, the report shall be due semi-annually, occurring on June 1 and December 1. Subsequent reports shall be due annually on June 1.

**Q. Report Document:** The written special skill report shall include the following minimum elements:

(1) report cover page: titled to state the special skill reported, date, name of service, service director and medical director;

(2) contact information page: shall include address and contact information for the service, service director and medical director;

(3) letters of support: Must include individual letters of continued support from the service director and service medical director;

(4) statistics and outcome data: provide data on the utilization and patient outcomes involving the special skill; do not include patient identifiers; all adverse outcomes related to the special skill must be reported;

(5) continuing education: provide evidence of the continuing education program and refresher program;

(6) personnel list: provide a list of all personnel authorized to perform the special skill.

(7) QA/QI program: provide evidence of the ongoing QA/QI program;

(8) renewal: during a regularly scheduled meeting, the medical direction committee shall review all ongoing individual special skills programs on their three- (3) year anniversary and make a determination on renewal;

(9) if the medical direction committee determines not to provide automatic renewal on an ongoing special skill program, the state EMS training coordinator shall provide a written notification to the service director and the service medical director within ten (10) working days;

(10) the special skills program will be placed on the agenda of the next, or subsequent, regularly scheduled meeting of the medical direction committee and final determination regarding renewal will be made.

**R.** Special skills programs will remain active until a final determination regarding renewal has been made.

**S. Special skills application:**

(1) general section;

(2) EMS service name;

- (3) address;
  - (4) service chief/director;
  - (5) contact phone number;
  - (6) physician medical director;
  - (7) physician/medical director contact phone number;
  - (8) special skill proposed;
  - (9) level of licensure necessary for special skill;
  - (10) estimated number of personnel to be trained;
  - (11) estimated date of initial training;
  - (12) training/quality assurance;
  - (13) describe or identify the curriculum, including learning objectives, training hours, etc.;
  - (14) please identify the lead instructor and provide a brief summary of their qualifications or  
attach a resume;
  - (15) resumes required for new instructors;
  - (16) if training/experience is required, provide a letter of commitment from the supporting  
institution;
  - (17) describe or attach a proposed continuing education plan;
  - (18) attach a description of quality assurance plan, including periodic case reviews, ongoing  
problem;
  - (19) identification and steps for remedial action if necessary;
  - (20) signatures; person completing the application, service chief/service director and  
medical director;
  - (21) submit ten (10) copies of the application in its entirety to: EMS bureau, state EMS  
training coordinator, 2500 Cerrillos Rd., Santa Fe, NM 87505;
  - (22) submit one copy to the regional office.
- [7.27.2.16 NMAC - Rp, 7.27.2.16 NMAC, 1/01/2006]