

*Kalamazoo County Medical Control Authority*  
System Protocol/Emergency Protocol

PREHOSPITAL CARE PROVIDER CREDENTIALING SUPPLEMENT

Date: April 15, 2021

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**Purpose:** This Emergency Protocol serves as a supplement to the Prehospital Care Provider Credentialing System Protocol and authorizes certain personnel credentialed at the Paramedic I level to staff an advanced life support (ALS) unit in the role of a Paramedic II (with a partner at the EMT II level or higher level).

**Authority:** MCL 333.20919(e)

**Justification:** Kalamazoo County has identified a critical workforce shortage of qualified paramedics which has been further complicated by the current COVID-19 Pandemic. This shortage has significantly impacted the ability to safely and effectively staff ALS ambulances in Kalamazoo County. It has necessitated current paramedics to work longer hours that increase the potential for clinical and operational errors that could threaten the health or safety of patients and the public. This emergency protocol has been determined to be necessary to preserve the health or safety of individuals within Kalamazoo County in response to the present COVID-19 public health emergency. Staffing and crew configurations will continue to comply with all applicable State of Michigan requirements.

**Description:**

1. ALS agencies may identify personnel who are currently credentialed at the Paramedic I level and who have been determined by the ALS agency to have demonstrated sufficient clinical knowledge and skills so as to safely and effectively staff an ALS unit at the Paramedic II level with a partner who is credentialed at the EMT II level, or higher.
2. Personnel proposed to operate at this level must meet the following criteria:
  - a. Current Paramedic I with a minimum of 1 year (FTE) field experience.
  - b. Current licensure, certifications, and competencies as described in Table 1 of the Prehospital Care Provider Credentialing System Protocol.

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- c. Undergo a favorable agency conducted focused quality review of the proposed paramedic's clinical performance over the past 90 days to include, at a minimum:
  - i. Review of at least 10 ALS patient encounters in which the paramedic served as the primary ALS provider and a determination that care was consistent with KCMCA protocols.
  - ii. Review of all Priority 1 transported patients in which the paramedic served as the primary provider and a determination that care provided (including need for lights and siren, if used) was appropriate and consistent with KCMCA protocols.
  - iii. Review of a summary report of all medications administered, procedures performed, and intravenous access success rate (first attempt) during 90-day period. Results should be generally consistent with Paramedic II personnel.
  - iv. Successful oral interview with agency supervisory personnel demonstrating sufficient clinical and operational knowledge to work with an EMT-II or higher partner.
- d. The EMS agency will provide to KCMCA a list of proposed personnel with summary of 2C above.
- e. The KCMCA Medical Director will provide final authorization based upon a review of credentials.
- f. The ALS agency must provide a written plan to provide enhanced quality improvement monitoring of personnel authorized to function at this level.