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Date: 30 September 2019

European EMS Championship Rules

Location Scottish Event Campus (SEC), Exhibition Way, Glasgow G3 8YW, UK

Timing Preliminary rounds: Monday 25 and Tuesday 26 May 2020
Finals: Tuesday 26 May 2020

Transport and accommodation

Transport and accommodation are at the expense of the participating teams.

Number of teams/ selections

A total number of 20 teams will be able to compete at the European EMS Championship. Teams must send a short application no later than 2 February 2020. Applications will be reviewed by the Championship Committee. Sponsors will not participate in the selection. Application guidelines is available at www.EMSeurope.org

Registration

Registration for the congress EMS2020 and the Gala Dinner is mandatory for EMS Championship participants. There are no additional costs for entry to the championship.

All teams will receive an answer on the 10 February 2020 in due time to register for the early bird congress rate. Teams that have not registered for the congress before the 21 February 2020 will not be able to compete. Instead the first team on a prioritized waiting list will get the possibility of competing. If this is the case, the team or teams will be contacted shortly after the deadline.

Scope

The championship is about team work, skills, experience and the ability to find a solution when challenged. The competition is restricted to adult and paediatric Prehospital Emergency Medicine.



Composition of teams

Prehospital healthcare professionals from around the world can attend European EMS Championship. All teams must consist of a team leader plus two additional team members. All team members must be registered doctors, paramedics, EMTs, nurses or allied health professionals. An additional team member can be signed up in case of one team member falling sick or not arriving to the congress.

Competition rules

The competition runs in two rounds:

- Round one (preliminary) on day 1 and 2 of the congress
- Finals on day 2 of the congress

In the preliminary round the teams compete in two scenarios and points are combined from these. In the final round the teams compete in one complex scenario. The three teams with the highest score from round one will be selected for the finals.

The team with the 4th place in the preliminary rounds will participate in a trial run for the final scenario behind closed doors.

Each scenario will be presented by an experienced simulation instructor and assessed by two judges (experts in pre-hospital management and human factors) who will circulate during the scenario and monitor the quality of medical performance as well as teamwork. The judges will be independent from the teams to avoid a COI. The teams will be assessed on technical as well as non-technical skills based on standardized assessment forms.

All team members are required to wear uniforms during the competition and at the award ceremony. The award ceremony will be held during the Gala Dinner 26 May 2020.

The championship language is English, therefore scenarios will be presented and run in English and the team leader must be able to communicate in English, team members must understand English. Furthermore, we strongly encourage that teams communicate in English amongst the team, thus to enable the judges in their assessment.

During the scenarios, human patient simulators or patient actors will be used. The following physical parameters can be simulated and viewed on a simulated monitor:

- ECG
- Pulse
- Spo2
- CO2
- Temperature
- Non-invasive blood pressure
- Respiratory rate

In addition, the following procedures can be performed on the human patient simulators:

- CPR



- Airway management
- Surgical airway procedures
- Needle decompression
- IV/IO access
- Defibrillation – manual or AED
- Auscultation of lung and heart sounds

The maximum duration of each scenario in the preliminary round is 15 minutes.

During the preliminary round the teams will compete in two simulated scenarios, both will be within the area of what prehospital healthcare professionals can encounter in a real-life scenario.

The final round will be a full-scale simulation in the congress hall with multiple patients displaying various illnesses or injuries.

In the scenario's CPR can or may be necessary, if so, no mechanical CPR devices are allowed. The use of real time feedback devices is allowed.

Each team can bring their own prehospital kit/ bag. Medications (real drugs or placebos) must be labelled with the correct medication name and dosage. Teams must bring extra medications and supplies to replenish kits/ bags after the preliminary competition.

EMS2020 will provide additional equipment including monitor/defibrillator for all teams to use throughout the competition. A list with the exact equipment will be provided for all teams.

Teams will be allowed 15 minutes during a specific time slot that will be set to allow for familiarisation with manikins and equipment.

After the completion of each scenario/station a short debriefing will be conducted in front of the audience. Judges will not reveal scores at this point but will facilitate reflection using techniques based on Rudolph, J. W et al (2007) Debriefing with good judgment: combining rigorous feedback with genuine inquiry. *Anesthesiology clinics*, 25 (2): 361-376.

Teams are not allowed to share information about the scenarios nor observe other teams or try and obtain information about the scenarios or competition tasks from any source before participating in the competition. Violation of these rules by a team member (or close ally) will result in disqualification of the whole team.

When registering, all teams must sign a fair play agreement prior to participation and a form that allows video or pictures from the competition to be used. Fair play agreement is an integrated part of the online registration procedure.

The schedule of participation for teams and judges will be created in order to avoid any potential conflict of interest through country of origin.



Each team will be sent the EMS competition schedule. The team should appear at the designated area 15 minutes in advance of their allotted time to compete. Failure to attend at the allotted location and time will result in disqualification.

Every scenario is strictly limited for time. The timing for each scenario begins after the instructor explains the scenario to the team and confirms its understanding. When the allotted time has elapsed, the instructor will terminate the scenario and no further marks will be allocated after this point.

During the scenario the team will receive information about the patients' status. Any other information, needed for further treatment, should be obtained either by examining the manikin or from the instructor. All questions must be related directly to the scenario.

All medical interventions will be performed on the manikin/simulated patient and if that is not possible they should be explained in detail and simulated in real time.

Scoring

Preliminary rounds

Scoring will be calculated based on the combination of two elements:

- Detail and degree of assessment and correct treatment
- Detail and degree of good teamwork. Scoring in this element will be based on the Team Emergency Assessment Measurement as described by Cooper et al., (Resuscitation 2010 Apr;81(4):446-52)

The three teams with the highest scores will be entered a final round where they will participate in a multi-patient scenario. Scores will be 'reset' to zero for the final for all teams.

Final round multi-patient scenario

Scoring will be calculated based on the combination of two elements:

- Detail and degree of assessment and correct treatment.
- Team Work / Team Leadership. Scoring in this element will be based on the Team Emergency Assessment Measurement as described by Cooper et al., (Resuscitation 2010 Apr;81(4):446-52)

The highest scoring team in this final scenario will be declared the winner. The judge's decision is final, no appeal is possible.

Outfit

Teams must wear their usual work uniform during the competition as well as the award ceremony.