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Education of medical rescue teams` employees in Poland

Kształcenie pracowników zespołów ratownictwa medycznego w Polsce

Key words: education, medical rescue teams, doctor, nurse, paramedic.

Słowa kluczowe: kształcenie, zespół ratownictwa medycznego, lekarz, pielęgniarka, ratownik medyczny.

Streszczenie. Funkcjonowanie systemu Państwowego Ratownictwa Medycznego w Polsce ma na celu zapewnienie pomocy osobom znajdującym się w stanie nagłego zagrożenia zdrowia bądź życia oraz minimalizowanie negatywnych skutków zdrowotnych wynikających z zaistniałych sytuacji. Wysoka jakość świadczeń opieki zdrowotnej udzielanych w ramach systemu Państwowego Ratownictwa Medycznego przez zespoły ratownictwa medycznego wymaga odpowiedniego wykształcenia kadry medycznej.

W niniejszym artykule przedstawiony został przebieg procesu kształcenia poszczególnych grup zawodowych wchodzących w skład zespołów ratownictwa medycznego w Polsce: lekarzy systemu, pielęgniarek systemu oraz ratowników medycznych. Nabycie uprawnień do pracy w zespołach ratownictwa medycznego wymaga spełnienia wymogów określonych w wielu aktach normatywnych. Edukacja lekarzy systemu, pielęgniarek systemu i ratowników medycznych różni się pod względem czasu trwania i rodzaju nabywanych umiejętności zawodowych. Pomimo odmiennych programów nauczania kształcenie ukierunkowane jest na ratowanie zdrowia i życia pacjentów.

Introduction. Functioning of the society is inextricably related to appearing threats of human life and health, being the result of illnesses, any kind of accidents, toxicosis or other sudden occurrings (guidelines of Polish Resistutation Council, 2010).

From the rules of law included in the Constitution of the Republic of Poland come that supreme authorities of the country have the duty to organise and provide help in the situations of danger of the citizens (Constitution of the Republic of Poland).

Government administration organs are obliged to provide efficiently functioning system, which in case of sudden health conditions, will vitally contribute to elimination and minimalisation of the outcomes resulting from appearing situations. One of the elements enabling fulfilling of foregoing premise and shaping security

awareness among members of population is proper organisation of health care, guaranteeing immediate help of emergency service.

For providing health and life protection, Emergency Medical Services have been established in Poland, whose current working is regulated by the laws included in statutory law from 8th September 2006 about Emergency Medical Services. These regulations define the rudiments of organising, functioning and financing the system and the rudiments of educating the staff giving aid to the people being in abrupt health threat. (Wojcieszak, "For the rescue", 5/12) Existance of medical emergency system is oriented on the quickest getting to the ill and injured people with help, undertaking rescue actions at the place of happening, and then transporting patients (continuing medical actions and qualified first aid) to specialised hospital units, providing continuity, consistency and effectiveness of treating process, without time loss on each of steps (both pre-hospital and in-hospital).

The statute of Emergency Medical Services in the law included in art. 32 points hospital emergency departments and medical emergency crews (including aviation emergency groups) as so-called system units. Medical emergency crews are divided into specialised ones, partaining of at least three people entitled to perform medical rescue actions (including a system doctor and nurses or a paramedic) and basic teams, consisting of at least two persons eligible to perform medical rescue actions (including a system nurse or a paramedic). (Statute of EMS) Performing medical rescue actions (outside of hospital) for people being in the threat of life and health is associated with necessity of obtaining proper education level and qualifications by the medical staff.

In the light of the actual laws obtaining in Poland depending on which occupational group we deal with within the framework of EMS system (doctors, system nurses and paramedics) there is a separate way of attaining involved qualifications within each of them. Educational process functioning within each of these groups is diversified both when it comes to its duration and ways of getting competencies.

Training system doctors. Following a doctor profession consists in giving (by a person having needed qualifications, validated with proper documents) health renditions, such as: examining patient's health, diagnosing illnesses and preventing them, treating and rehabilitating the ill, giving advice and medical opinions. For doing doctor's job it is also considered conducting research works in the field of medical sciences or health promotion, teaching the job, leading treating persons and also employing in the units obligated to finance health care renditions from public means (Statute of doctor's and dentist's occupation).

Getting doctor title in Poland is possible by finishing graduate studies (where the number of theoretical and practical classes equals to at least 5700). The curriculum is within medical education, health education or physical culture (Ordinance of education for school curricula). After being awarded with a graduation diploma on medical studies, doctor is bound to do a postgraduate internship spanning not shorter than 12 months, finishing with submitting colloquium from the range of theoretical knowledge and capabilities defined properly with a frame program of this practice. Doing postgraduate internship and passing final medical examination stipulate

a condition of obtaining the right to perform doctor's occupation. (Regulation of the Minister of Health into doctor's and dentists's postgraduate internship)

To a person meeting the criteria defined with regulations included in 5th article of the statute from 5th December 1996 of the doctor's and dentist's occupation (after positively considered instance), Local Medical Council grants a right to perform doctor's occupation and effects an entry on the Local Chamber of Physicians and to local physician and dentist register. The document "a right to follow doctor profession" is marked with a serial number and is the only document validating warrant for a doctor/dentist to do the job on the territory of Poland. (Resolution number 30/10/VI of the Superior Physician Council).

Within specialised paramedic groups, medical rescue actions can be performed by the system doctor. Comprehending the law included in article 3 of the statute about EMS implies that for the system doctor is acknowledged a physician being entitled a specialist in the field of emergency medicine or a doctor who has finished at lest second year in this specialisation.

In accordance with obtaining laws, till 31th December 2020 a doctor can become a system doctor when has specialist title or have finished at least second year in the field of: inner illnesses, general surgery, paediatric surgery, anaesthetics or intensive therapy, orthopaedics and traumatology of human musculoskeletal system, orthopaedics and traumatology, paediatry. Until that time a doctor can also become system doctor, who has work experience in the dimension of 3000 hours doing job in an emergency department, a medical emergency team, an aviation medical emergency team or an admission room. In this situation, a physician is bound to start specialised training in the field of emergency medicine till the day of 1st January 2018 (otherwise the physician will lose system doctor status) (statute about EMS).

Educating system nurses. Following a nurse profession means performing, by a person validated to, preventing, diagnostic, treating, rehabiliting renditions and medical emergency actions (both self-reliantly and at doctor's behest). Furthermore such person is priviliged to opinion on a kind and rage of protective-nursing renditions, health education and promoting health, teaching nurse job, conducting scientific and research works and working on management and administrative posts in the units associated with doing health renditions. (Statute about occupations of a nurse and a midwife)

Education of nurses having maturity examination, who have graduated from medical high school, post-high school or post-matura school studying the nurse job may last shorter than 3 years. That kind of situation may take place provided the knowledge, abilities and qualifications acquired through education in the forenamed places is equal to the ones learned in the university.

Both when it comes to doctors and nurses, performing occupational actions, it involves possessing a right to do the job. In the case of nurse occupation, document "the right to perform the job" is awarded within a resolution by the proper local nurse and midwive's council for a particular place (after meeting condictions included in articles 28, 29 and 30 of the statute about nurse and midwife occupation). Its issue is

tied with effecting an entry to the Central Register of Nurses and Midwives run in the electronic form by the National Council of Nurses and Midwives.

In the light of currently obtaining laws, the system nurse is a nurse possessing a specialist title or specialising in the field of emergency, anaesthetic, intensive care, surgery, cardiology or paediatric nursing and also a nurse having finished qualification course in the field of emergency, anaesthetic and intensive care, surgery, cardiology or paediatric nursing. Moreover it is condition for the nurse to acquire status of the system nurse to have at least 3-year internship in the departments of mentioned specialisations, interim aid departments, admission rooms and emergency service. (Statute about EMS)

Specialisation aims a nurse to acquire technical knowledge and abilities in a particular field of nursing (in case of system nurse these specialisations are defined in statutory law included in article 3 of the 6 statute of EMS) or in an area applying to health protection and acquiring specialist title in that field. The conditions to proceed to the specialisation is a right to do the job, at minimum 2-year long occupational work in the last 5 years and getting positive result from the qualification proceeding conducted via the System of Monitoring Medical Workers' Education (SME). A nurse after doing specialisation and achieving positive results in national examination attains specialist title. The exception occurs when a nurse has at least Doctor's Degree or proper scientific and occupational works in the particular field. In this situation, by the Minister's of Health affair, a person going to achieve specialist title can be excused fully or partially from the duty of doing specialisation.

Qualification course is a type of education, which in accordance with a law included in article 71 of the 1st statute from 15th June 2011 about occupations of a nurse and midwife, has an aim for a nurse or midwife to acquire knowledge and skills to perform health renditions coming within the sphere of the particular field in nursing or the field applying to health protection. The condition for a nurse to apply for studying within the framework of such course is the right to do a job, at least 6-month seniority within the profession and a positive result in qualification proceeding via SME. The course is finalised with a theoretical exam (conducted orally or written) or practical (Statute about the occupation of a nurse and a midwife).

Understanding regulations above, some inadequacies can be noticed. Namely, system nurse according to the statute from 8th September 2006 is a person after specialisation or qualification course or specialising in the field of medical professions mentioned above. Therefore law-giver does not make difference between specialised nurse, nurse whose specialisation is in progress and a person after qualification course (which passing is obligatory to attain a status of system nurse). Hence, to began specialisation, passed qualification course is not needed. It means that a nurse without qualification course, but at the beginning of specialisation training can be a system nurse, but the nurse pending a qualification course cannot be one.

Education of paramedics as the most numerous occupational group in emergency rescue teams. Paramedic job was established on demand of the emergency systems instituted to save health and life of domestic citizens. (Sowizdraniuk, "Na Ratunek", 1/2016) The service actions, performed by a paramedic include: delivering

health renditions (among them medical emergency actions) unassisted and under the supervision of a doctor, providing security for the injured at the place of accident, undertaking actions preventing enlarging the number of people whose life and health is in danger and transporting patients providing them mental support. Moreover, for following a profession of paramedic is also meant: teaching medical emergency, first aid, qualified first aid, medical rescue actions, conducting scientific research, managing and leading paramedics or medical dispositors and work at the administration posts associated with delivering health renditions in the area of medical emergency.

In the light of currently obtaining laws, the occupation of a paramedic can be performed by a person, who has the full right to legal activity, whose health condition enables doing such a job, speaks polish at the level high enough for the profession and is an undergraduate, whose education program involved at least 2455 hours of studying the curriculum of medical emergency. Persons, who begin studies within the range of emergency after the day of 30 September 2016 are obliged to do an occupational practice, and also to submit National Medical Emergency Examination. (NMEE)

Full internship program includes 960 learning hours (45 minutes) fulfilled within a period of at least 6 months. (Ładny, "Na Ratunek", 1/2014) However, there is a possibility to shorten the time of it taking place (by no more than a half of its lasting time). It occurs within an application submitted to the internship supervisor, judged definiately by a manager of organisation unit university running education, where the higher education is led within a curriculum associated with medical emergency.

National Medical Emergency Examination organised by Medical Examination Centre includes issues defined by the educational program on the curriculum of medical emergency. It is organised within a single-choice test exam, which partains of 100 questions to which 5 answers are proposed. When a candidate gets at least 56% of the maximum score from the test, the result is acknowledged positive.

Achieving occupational title of a paramedic on the day before 1st March 2013 was possible both by finishing undergraduate studies and post-high school in that field. Currently candidate recruitment for paramedics by post-high schools has been closed within establishing the Statute of Medical Emergency Services. In the case of people possessing a diploma achieved within this way of education, warrant to perform paramedic job is still valid (Ładny, "Na Ratunek", 1/2014).

A vital thing is the fact that the law-giver does not diffrentiate priviliges to do a paramedic job among those who finnished post-high school and undergraduates from the curriculum of medical emergency. In my opinion, the lack of regulations re occupational rights, which could have been maintained by different ways of education, presently implies a disproportion among paramedics' abilities. The term of recruitment for undergraduate studies educating in the curriculum of emergency education is having a maturity exam by the candidate. Moreover, universities running enrolment for this curriculum, not rarely stipulate a minimal number of points being a condition to become accepted by the university. In the case of graduates of post-high schools, the vast majority does not have the maturity exam (matura exam passed). Additionally, education involved far lesser amount of learning hours (at minimum 1180), than in the case of higher education (at least 2455). Despite existing differences being a result of

separate ways of awarding warrant of doing paramedic job, the law-giver does not diffrentiate the range of competencies and duties of paramedics, who have obtained the right to do a job with other ways of education.

A person who has earned a diploma of a paramedic has a right and an obligation to occupational cultivation, fulfilled within 5-year accounting (educational) periods. During an accounting period the worker is obligated to achieve at least 200 education points, which are earned through participation in many kinds of occupational development events (refresher courses, seminars, autodictatism). (Regulation into occupational development of paramedics) Enforcing the duty of occupational development is conditioned with an attitude of a particular unit holder. In the case of not achieving required education points, employer can terminate an employment contract, prelong educational period with an aim to earn missing points or do not undertake any sanctions against the worker (Ladowska, Nawrot, "na Ratunek", 2/2014).

If a person having the right to work as a paramedic does not perform service actions in the area of delivering health renditions by a period longer than 5 years within the last 6 years, and is going to undertake paramedic job, is bound to have a proper training. The training lasts 6 months and is fulfilled within the full dimension of working hours. It is based on delivering health renditions in an assistance of another paramedic, system nurse or system doctor, having at least 5-year experience in the job (Statute about EMS).

Conclusion. Human life and health are the most important goods, which injure or decline very often trigger irreversible consequences. (Bujok, Grochowicz, Emergency Medical Service. Ratownictwo Medyczne, 2016, vol. 3, page 2). For their protection the Emergency Medical Services have been established in Poland. The indicator of its functioning effectiveness is the quality of renditions delivered by paramedic teams. Depending on the type of team (specialised or basic), abilities of its members are diverse. Ways of education and achieving statutory defined rights to work in the system of medical emergency are various, both when it comes to the duration and the range of acquired capabilities. The process of educating the staff (system doctors, system nurses and paramedics) delivering health renditions in the cases of life and health threats has been regulated with statutory laws, which were discussed in this article. In my opinion, basing on my own experiences acquired during 3-year work in the medical emergency teams (both specialised and basic), the abilities of people being their parts were different in terms of possessed knowledge and skills. This fact may come from the existance of diverse ways of getting occupational warrants. The conclusion should be propounded, that foregoing paramedic abilities acquired in the way outside of higher education system (post--high schools) might be insufficient concerning the duty to perform a wider range of medical rescue actions, implied by the Amendmend of the Statute about Medical Emergency Services.

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