

## EMT Just In Time Training Modules, COVID-19 Concept Note

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### Background:

1. Emergency Medical Teams (EMTs) are responding nationally and internationally in a variety of roles as part of, or to augment, the capacity of national/local health system overburdened by the COVID-19 response. When preparing to respond and/or deploy, it is generally recommended for teams to conduct Just In Time Training to refresh and update their capability and to address particular training needs relevant to the operational context.

### Current Status:

2. In support of the global COVID-19 response, WHO has published a suite of technical guidance, checklists and online learning materials available to health professionals, including those working in temporary hospitals and community facilities. Many of the materials, however, require adaption to EMT operations and are not yet collated into a single resource point for teams to rapidly access.
3. To bridge such gaps, several EMTs have already achieved initial positive results by developing COVID-specific training activities within their own Just In Time Training programmes. The EMT Secretariat is well placed to draw on these good practices, ensure alignment with wider technical guidance and key considerations, and shape into a user-friendly training product that is made available to all teams, including those working in lower resource settings.

### Training Product Proposal:

4. Aim. This proposal entails a modularized training product known as the '*EMT Just In Time Training Modules, COVID-19*.' The overall aim is for EMTs to select those modules most relevant to their needs and integrate within their own tailored face-to-face training agenda alongside operational briefings and skills refresher activities, confident that their preparations are consistent with global advice specific to COVID-19.
5. Target Audience. The intended target audience within the EMT workforce varies for each module. Some modules are designed for all team members, whereas others are more appropriate for overall team management, clinical leaders, operational support managers or other specialists.
6. Content Organization. Training topics have been selected to focus on knowledge, skill and attitude gaps that are not currently addressed for EMTs through other learning vehicles.<sup>1</sup> There is no recommended sequence in which the modules are to be covered – this is left to the training organizers to determine. Content within each module is expressed as learning outcomes; the end user may choose to modify these outcomes according to context. A brief description for each module is outlined at Annex A.<sup>2</sup>
7. Module Structure. Consistent with the formatting used in other training packages managed by the EMT Secretariat, each module is explained in depth so that EMT trainers are able to implement it in practice. The following is provided:

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<sup>1</sup> Where useful, reference is to be made within the modules to other existing learning programmes available.

<sup>2</sup> This list may be reviewed, enhanced and augmented at a later stage.

- A session plan which includes a purpose description, suggested delivery methods, explanatory facilitator notes, timings, list of equipment and resources. The standard template for session plans is at Annex B;
- For some modules (where relevant), a PowerPoint slide-deck;<sup>3</sup>
- For some modules (where relevant), a sub-folder of reference documents and other supporting materials for both facilitators and participants to utilise as extra learning.

### Evaluation and Continual Improvement:

8. Evaluation of the modules is entrusted to the implementing teams and their providers as per their respective training frameworks. The EMT Secretariat is available upon request to provide further support and advise on delivery and evaluation processes.
9. End users of the modules are also encouraged to provide their feedback on the product so that it can be iteratively improved by the Secretariat for the benefit of all. A feedback form is included at Annex C. Please send all correspondence and feedback to [EMTeams@who.int](mailto:EMTeams@who.int)

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<sup>3</sup> The intended purpose for including slide-decks within the package is to help trainers interpret each corresponding session plan and as an additional record of subject matter content. Consistent with adult learning principles, it is emphasised that sessions are best delivered for participants through participatory engagement, not simply replication of PowerPoint presentations.

## Annex A – Summary of Just In Time Modules

PLEASE NOTE: EMT JUST IN TIME TRAINING MODULES DO NOT REPLACE TECHNICAL GUIDANCE. THE END USER IS RESPONSIBLE FOR ENSURING CONTENT DELIVERED IS ALIGNED WITH APPLICABLE NATIONAL GUIDELINES.

Module Title	Target Audience	Brief Description of Content
A. Layout and planning of COVID community facilities	Team leaders Clinical leaders Operational support managers	Management-level considerations for establishing and repurposing temporary facilities, to include: <ul style="list-style-type: none"> <li>• Key characteristics of community facilities</li> <li>• Main components of healthcare readiness (4 S's)</li> <li>• Site selection and planning</li> <li>• Applying design calculations</li> </ul>
B. Quality improvement and monitoring tools	Team leaders Clinical leaders Selected medical profiles Operational support managers	Quality Improvement, to include: <ul style="list-style-type: none"> <li>• The importance of quality of care mechanisms as applied to EMTs in the COVID response</li> <li>• Basic tools for promoting improved quality of care</li> <li>• Key considerations for sending and receiving EMT staff during COVID operations</li> </ul>
C. Case management and task shifting	Selected medical profiles	Adapting clinical activities for the COVID response within EMT settings, and exploring task shifting options, to include: <ul style="list-style-type: none"> <li>• Checklist of requirements for treatment during the patients' pathway through a health facility</li> <li>• Possible gaps in protocols, staffing, skills and equipment required for treatment of COVID patients</li> <li>• Opportunities and limitations of task shifting, where technically possible, and when required by case load</li> <li>• Dealing with ethical dilemmas in the treatment of COVID patients</li> </ul>
D. Team security for COVID-19	Team leaders Security focal points Operational support managers	Management-level considerations for security concerns arising in COVID affected communities, to include: <ul style="list-style-type: none"> <li>• Duty of Care policies</li> <li>• Channels for reporting security concerns</li> <li>• Security plans and planning for hibernation and extraction</li> <li>• Dealing with criminality in new surroundings</li> <li>• Preventing and defusing crowds and social unrest due to anti-foreigner sentiment</li> </ul>
E. Risk communications and community engagement	All team members	Integrating appropriate and proactive public health messaging, to include: <ul style="list-style-type: none"> <li>• Communicating health messages to the COVID-19 affected communities with which they are working</li> <li>• Effective communications with COVID-19 patients and their families appropriate to the clinical context</li> <li>• Integrating relevant health education communication materials into daily operations</li> </ul>

F. Familiarizing the staff with the disease and its implications	All team members	<p>Updating all staff (including non-clinical staff) on COVID specific background issues, to include:</p> <ul style="list-style-type: none"> <li>• Main features of the disease</li> <li>• Distinguishing between facts and myths</li> <li>• The personal consequences for EMT staff and their household families</li> <li>• Potential roles of EMTs in the response</li> </ul>
G. Techniques for infection protection and control	All team members	<p>Collective actions designed to manage infection within facilities, to include:</p> <ul style="list-style-type: none"> <li>• Decontamination of surfaces, linen and equipment</li> <li>• Rapid detection of infection among EMT staff</li> <li>• Hand hygiene practical</li> </ul>
H. PPE for COVID	All team members	<p>Practical familiarisation and drills, to include:</p> <ul style="list-style-type: none"> <li>• Identifying recommended PPE items and procedures for EMT staff in different clinical settings</li> <li>• Donning (putting on) and doffing (removing) PPE</li> <li>• Performing procedures in PPE</li> <li>• Adapting PPE routines within the EMT based on inventory</li> </ul>

## Annex B – Template of Session Plan Format

### EMT Just In Time Training Modules, COVID-19

#### Module Title

#### LEARNING OUTCOMES

1. XXX
2. XXX
3. XXX

#### MODULE OVERVIEW

No.	Topic	Method	Time
1	XXX	XXX	XXX

#### MODULE PURPOSE

XXX

#### MODULE ACTIVITIES IN DETAIL

Topic	Method	Notes for delivery
XXX	XXX	XXX

#### MODULE LENGTH

XXX mins

#### MATERIAL & EQUIPMENT

XXX

#### SUPPORT DOCUMENTS

XXX

## Annex C – Feedback Questionnaire for End Users on the Just In Time Training Modules

*This questionnaire is provided for EMT managers and their training providers to structure feedback on their use of the EMT Just In Time Training Modules, COVID-19. The more detailed your comments and recommendations, the better the modules can be improved for future use. After completing your training activities, please then return your completed for to [EMTeams@who.int](mailto:EMTeams@who.int)*

### **Details of the End User**

1. Name of EMT organisation using the JIT Modules.
2. Contact details (name & email) of person providing the feedback.
3. Location where the JIT training was delivered.
4. Format of your JIT Training (e.g. face-to-face, online webinars).

### **Purpose of JIT Training**

5. Were you preparing your training participants for national or international operations?
6. In what operational roles were they preparing to work (e.g. community care facility, surge staffing to existing hospital).
7. Which Modules did you utilise from the package? Please list.

### **Relevance of the Training Content**

8. Please rate the relevance of the content in the Modules that you used, 1 – 4.

1 – Not at all relevant to your participants	2	3	4 – High relevance to your participants

9. Please describe how the current JIT Modules could be amended to become more relevant for teams like yours.
10. Are there any ADDITIONAL modules, beyond those in the package, that you think would have high relevance in helping EMTs to conduct their JIT training?

### **Effectiveness of the Training Methodologies**

11. Please rate the effectiveness of the training activities proposed in the Module plans that you used.

1 – Not at all effective	2	3	4 – Highly effective

12. Please describe how the training activities could be made more effective.

### **Any other comments or recommendations in relation to the JIT Modules**