

ERC Course Rules

Version 7.0. Approved by the DC Edu (19.02.2026)

- | | | | |
|------|--|------|---|
| 1. | PURPOSE AND SCOPE | 7. | ASSESSMENT |
| 2. | ROLES, RULES AND RECERTIFICATION | 7.1 | Assessment in hands-on part |
| 2.1 | Provider (P) | 7.2 | Re-assessment |
| 2.2 | Instructor Potential (IP) (for Advanced Courses) | 8. | CERTIFICATION OF PROVIDERS |
| 2.3 | Instructor Candidate (IC) | 9. | COURSE TYPES AND SPECIFIC RULES |
| 2.4 | Instructor (FI) | 9.1 | Basic Life Support (BLS) course |
| 2.5 | Instructor Trainer Candidate (ITC) | 9.2 | Immediate Life Support (ILS) course |
| 2.6 | Instructor Trainer (IT) | 9.3 | Advanced Life Support (ALS) course |
| 2.7 | Course Director Candidate (CDC) | 9.4 | Paediatric Basic Life Support (PBLIS) course |
| 2.8 | Course Director (CD) | 9.5 | European Paediatric Immediate Life Support (EPILS) course |
| 2.9 | National Course Director (NCD)/National Educator | 9.6. | European Paediatric Advanced Life Support (EPALS) course |
| 2.10 | Educator Candidate (EdC) | 9.7 | Newborn Life Support (NLS) course |
| 2.11 | Educator (Ed) | 9.8 | Basic Instructor course (BIC) |
| 2.12 | Educator Trainer (EdT) | 9.9 | Generic Instructor Course (GIC) |
| 2.13 | Course Centre (CC) | 9.10 | Educational Instructor Day (EID) |
| 2.14 | Course Organiser (CO) | 9.11 | Educator Master Class (EMC) |
| 3. | DEFINITIONS | 10. | INSTRUCTOR DEVELOPMENT FLOWCHART |
| 3.1 | Faculty | 11. | APPENDICES |
| 3.2 | Self-Sufficiency (Appendix 5) | | ERC Policy for Disabled Candidates |
| 3.3 | Science and Education Committee(s) (SEC) | | ERC Instructor Potential Appraisal Form |
| 3.4 | Development Committee Education (DC-Edu) | | ERC Permission Form: Umbilical Cord Parts |
| 3.5 | Course System (CoSy) | | ERC policy handling misconduct |
| 3.6 | Recertification – Lifelong Learning | | ERC Self-Sufficiency |
| 3.7 | Basic Courses | | ERC Code of Conduct |
| 3.8 | Advanced Courses | | Complaints procedure |
| 3.9 | Instructor Courses | | |
| 3.10 | Refresher Seminar (RS) | | |
| 3.11 | Recertification modules | | |
| 4. | GENERAL RULES | | |
| 5. | COURSE ORGANISATION AND COURSE CENTRE | | |
| 5.1 | Course Organisation | | |
| 5.2 | Course Centre (CC) | | |
| 6. | TRANSITION TO ERC | | |
| 6.1 | Resuscitation Council UK (RC UK) courses | | |
| 6.2 | American Heart Association (AHA) | | |

1. Purpose and Scope

1.1 Purpose

The purpose of these Course Rules is to define the minimum requirements, roles, responsibilities, and quality standards for the organisation, delivery, governance, and certification of European Resuscitation Council (ERC) courses, ensuring consistency, educational quality, and compliance across all ERC-accredited courses.

1.2 Scope

These Course Rules apply to all ERC courses, irrespective of course type, format, or delivery model, and are binding for Course Centres, Course Organisers, Course Directors, Faculty, and any other individuals involved in the planning, delivery, assessment, administration, and certification of ERC courses.

They govern, among others, course organisation and administration, faculty qualifications and responsibilities, participant assessment and certification, use of ERC educational materials and systems, and quality assurance processes. These Course Rules replace all previous versions and apply from the date of publication.

These Course Rules are established in support of the ERC mission to **preserve human life by making high-quality resuscitation available to all.**

2. Roles, rules and recertification

2.1 Provider (P)

A Provider is an individual who has successfully completed a provider course (BLS, ILS, ALS, PBLS, EPILS, EPALS, NLS).

2.1.1 Providers may recertify in 1 of 2 ways:

- Successfully completing a full Provider Course.
- Successfully completing a recertification course within the recertification deadline.

For EPALS, EPILS, ALS, and ILS courses, the recertification consists of a hands-on course and a separate online e-learning module, both of which must be successfully completed.

2.2 Instructor Potential (IP) (for Advanced Courses)

An Instructor Potential is an individual who has completed an Advanced Provider or Recertification Course. In addition, they must fulfil the criteria necessary (attachment "IP Selection Form") to qualify as a future instructor and have been recommended for IP status by the Faculty of that course.

2.2.1 Participants who show ability and aptitude during an Advanced Provider or Provider Recertification Course may be considered for Instructor training (GIC).

2.2.2 Participants are eligible for consideration for instructor training based on the IP selection form (see attachment).

2.2.3 Recommendations for IP should be unanimous, but if one faculty member objects, the CD may make the final decision.

2.2.4 IPs are eligible to undertake the relevant Instructor Course within 3 years.

2.3 Instructor Candidate (IC)

An Instructor Candidate is an individual who has completed an Instructor Course (Basic Instructor Course or Generic Instructor Course).

2.3.1 While teaching, an IC should always be supervised by an instructor.

2.3.2 The IC must be present for the entire course.

- 2.3.3 ICs should be given feedback on their performance in all teaching sessions.
- 2.3.4 Existing Instructors who are recommended as having IP on a different course type will become IC for that course type.
- 2.3.5 An Instructor Candidate may be considered for upgrade only after receiving satisfactory evaluations in 2 courses as IC. A maximum of 3 courses may be undertaken in the IC role. If the candidate has not been upgraded after 3 courses or within 3 years, their IC status will be withdrawn.
- 2.3.6 Instructor qualifications for one specific course type do not extend the IC validity of another course type.

2.4 **Instructor (FI)**

An instructor has successfully completed their instructor training.

- 2.4.1 Instructors must teach at least 2 courses per 3 years.
- 2.4.2 They must attend 1 Educational Instructor Day per 3 years.
- 2.4.3 FI must be present for the entire course.
- 2.4.4 They must be reassessed at least every 6 years. Following an unsatisfactory assessment, a second assessment under the oversight of a different CD should take place, within 1 year. If the second assessment is unsatisfactory or not completed within the specified time, they will lose their instructor status.
- 2.4.5 If they do not meet the requirements for re-certification their status will be reverted to IC. To regain instructor status will require successful completion of 1 course as IC.
- 2.4.6 Recertification programme for EP/ILS-EP/ALS Instructors:
 - Teaching 4 onsite recertification modules in 3 years equals 1 EP/ILS course.
 - An EP/ILS instructor may recertify by teaching on:
 - o Either 2 EP/ILS courses in 3 years;
 - o Or on 1 EP/ILS course and 4 recertification modules in 3 years.
 - An EP/ALS Instructor may recertify by teaching on:
 - o Either 2 EP/ALS courses in 3 years;
 - o Or 1 EP/ALS and 2 EP/ILS courses in 3 years;
 - o Or 1 EP/ALS and 1 EP/ILS and 4 recertification modules in 3 years.
- 2.4.7 Directing a course also counts as instructing a course for recertification purposes.

2.5 **Instructor Trainer Candidate (ITC)**

An Instructor Trainer Candidate is an individual who is invited to teach on an instructor course (BIC, GIC) as candidate.

- 2.5.1 To be eligible to be selected as an ITC, an instructor needs to have taught on at least 4 courses as Instructor.
- 2.5.2 While teaching, an ITC should always be supervised by an instructor trainer (IT).
- 2.5.3 Once selected as an Instructor Trainer Candidate (ITC), an instructor is eligible for upgrade to Instructor Trainer only after successfully completing 2 Instructor courses of the same type as ITC, with satisfactory evaluations from the Course Director and Educator (if applicable) for both courses. A maximum of 3 courses may be undertaken in the ITC role, and the upgrade must be achieved within 3 years. Failure to do so will result in withdrawal of ITC status.
- 2.5.4 The ITC must be present throughout the entire Instructor course.

2.6 **Instructor Trainer (IT)**

Instructor Trainers teach on an Instructor Course.

- 2.6.1 Instructor trainers must teach at least 2 courses per 3 years.

2.6.2 They must attend 1 Educational Instructor Trainer Day per 3 years.

2.6.3 They must be reassessed at least every 6 years. Following an unsatisfactory assessment, a second assessment under the oversight of a different CD /educator should take place, within 1 year. If the second assessment is unsatisfactory or not completed within the specified time, they will lose their instructor trainer status.

2.6.4 If they do not meet the requirements for re-certification their status will be reverted to ITC. To regain instructor status will require successful completion of 1 course as an ITC.

2.7 Course Director Candidate (CDC)

A Course Director Candidate is an experienced instructor who is completing their course director training.

2.7.1 In order to be eligible to be selected as a CDC, an instructor needs to have taught at least four entire courses of the same type as an instructor or IT and be invited by a CD to act as CDC on a course.

2.7.2 CDC may not act as an instructor during a course.

2.7.3 Once an instructor or IT has been selected as CDC, they must complete 2 courses of the same type as CDC within 3 years, with 2 different Course Directors, and receive satisfactory evaluations for both courses before they can be considered for upgrade to CD. A maximum of 3 courses may be undertaken in the CDC role, and the upgrade must be achieved within 3 years. Failure to do so will result in withdrawal of CDC status.

2.7.4 The upgrade to CD needs the approval of the National Resuscitation Council of the CDC's residency, self-sufficient for that type of course or, in the absence thereof, by the SEC co-chair of that course.

2.7.5 A course can have a maximum of 1 CDC.

2.7.6 The CDC must be present throughout the entire course.

2.8 Course Director (CD)

A Course Director takes overall responsibility for the course and ensures that the course is run according to ERC guidelines and rules.

2.8.1 A course can have maximum 1 CD. The role of CD is compatible with the role of CO. A person can fulfil both roles during 1 course.

2.8.2 The CD sets out the course programme.

2.8.3 The CD approves the results of the course participants and instructors.

2.8.4 The CD is responsible for ensuring that the course fully complies with the course rules.

2.8.5 In advanced ERC courses the CD must be present throughout the entire course.

2.8.6 Course directors must direct at least 2 courses per 3 years.

2.8.7 They must attend 1 Educational Instructor Day per 3 years.

2.8.8 They must be reassessed at least every 6 years. Following a unsatisfactory assessment, a second assessment under the oversight of a different CD should take place, within 1 year. If the second assessment is unsatisfactory or not completed within the specified time, they will lose their course director status.

2.8.9 if they do not meet the requirements for re-certification their status will be reverted to CDC. To regain course director status will require successful completion of 1 course as an CDC.

2.8.10 Recertifying as a CD automatically implies an extension as Instructor and provider for the same type of course and the same period of time as the CD qualifications.

2.8.11 A person who is qualified as a CD for different types of courses and who recertifies as a CD for one course type will automatically have their qualification as a CD extended to each

other course type for which they have instructed at least one course in the past three years.

2.8.12 The signature of the Course Director is mandatory on all ERC Certificates. The Course Director is responsible for ensuring that their signature is added to the certificates.

2.9 National Course Director (NCD)/National Educator

A National Course Director (NCD) or, for GIC courses, a National Educator, is an experienced Course Director endorsed by the relevant National Resuscitation Council (NRC). The NCD/National Educator acts as the national point of contact and coordinator for the relevant ERC course type within their country and is responsible for supporting and overseeing faculty and courses at national level.

An NCD / National Educator must meet the following profile:

- Full ERC member.
- Established course director/educator for this type of course.
- Good communication skills (including e-mail)
- Attend international meetings of ERC for NCDs.
- Develop the specific course type in their country.

2.10 Educator Candidate (EdC)

An Educator Candidate is an individual who completed an Educator Master Class.

2.10.1 To become an Educator, the EdC needs to take part in the faculty of 2 GICs, under the guidance of experienced Educators, and approval of the SEC IES.

2.10.2 Once an Educator candidate has been selected, they need to complete at least 2 courses, within 3 years, with 2 different EDs, as EDC, to the satisfaction of the ED before they can be upgraded to ED.

2.10.3 The upgrade to ED needs the approval of the SEC IES.

2.10.4 A course can have a maximum of 1 EDC.

2.10.5 The EDC must be present throughout the entire course.

2.11 Educator (Ed)

An educator has successfully completed their educator training. The key role of the Educator is to assure educational quality standards of the course; specific tasks include:

- To oversee the education process for the course
- To communicate key points of educational theories
- To share expertise in medical education
- To observe, critique, and guide participants and faculty
- To focus on learning goals and achievement of the aims
- To facilitate teaching
- To assess recertification

2.11.1 Educators must be present for the entire GIC.

2.11.2 Educators must take part in at least 2 GIC per 3 years.

2.11.3 They must attend 1 ERC Educator meeting or medical education conference in 3 years.

2.11.4 Educators who are also GIC Directors cannot undertake the role of Educator in the same course.

2.12 Educator Trainer (EdT)

Faculty on an Educator Master Class are called Educator Trainers.

2.13 Course Centre(CC)

A Course Centre is the entity that administers the organisational, managerial, financial and logistical aspects of an ERC course.

2.14 Course Organiser (CO)

The Course Organiser is an entity who is responsible for the administration of the courses.

3. Definitions

3.1 Faculty

Faculty are individuals who are qualified, trained, and authorised by the European Resuscitation Council (ERC) to contribute to the delivery of ERC courses. Faculty members support the educational process by teaching, instructing and assessing participants in accordance with ERC standards.

3.2 Self-Sufficiency ([Appendix 5](#))

A National Resuscitation Council is considered as self-sufficient for a certain type of course if:

- It has the resources, expertise and experience to run courses without external support.
- It can manage the quality of the courses according to ERC standards.
- There is a formal written agreement of partnership between the ERC and the NRC.
- Nevertheless, all ERC courses are organised under supervision of the respective Science & Education Committee(s).

3.3 Science and Education Committee(s) (SEC)

The SECs are responsible for the development and quality management of their type of course and oversee these courses. Each SEC operates according to a Terms of Reference (ToR), which outlines the committee's purpose, responsibilities, structure, and ways of working. The ToR is available upon request.

3.4 Development Committee Education (DC Edu)

The DC EDU is responsible for the coordination of educational branches of the SECs. The DC EDU operates according to a Terms of Reference (ToR), which defines its role, responsibilities, structure, and working methods. The ToR is available upon request.

3.5 Course System (CoSy)

CoSy is a software platform designed by ERC to facilitate the creation, delivery, management, and tracking of educational courses and training programs.

3.6 Recertification – Lifelong Learning

Recertification is the process of renewing a course-related ERC qualification, as part of a lifelong learning trajectory. Recertification typically demands regular educational activity via online learning and a condensed hands-on recertification module, with or without assessment and within a predefined time period.

3.7 Basic Courses

Basic Life Support (BLS) and Paediatric Basic Life Support (PBLs) are Basic Courses.

3.8 Advanced Courses

Advanced Life Support (ALS), Immediate Life Support (ILS), European Paediatric Advanced Life Support (EPALS), European Paediatric Immediate Life Support (EPILS) and Newborn Life Support (NLS) are Advanced Courses.

3.9 Instructor Courses

The BIC and the GIC are Instructor Courses. The BIC is the relevant instructor course for Basic Courses. The GIC is the relevant instructor course for the Advanced Courses.

3.10 Refresher Seminar (RS)

A Refresher Seminar is a short modular skills training, organised for the public with prior experience in resuscitation, being an ERC provider or not.

3.11 Recertification-modules

Recertification modules aim to keep CPR providers competent over time and one of the options for providers to re-certify and keep their respective certificate up to date, as outlined in [3.6](#).

4. General rules

- 4.1 Everybody attending ERC courses must abide by the ERC Code of Conduct. ([Appendix 6. ERC Code of Conduct](#))
- 4.2 ERC courses should preferably be registered and completed in the [CoSy](#) platform, or alternatively in another platform used by National Resuscitation Councils (NRCs) that is linked to the ERC.
- 4.3 Content and structure of the ERC courses are defined by SECs.
- 4.4 Each course must be led by a CD who is qualified for the relevant course type.
- 4.5 Where local circumstances require the inclusion of additional skills, optional modules may be added to the core course content. This can increase the course duration.
- 4.6 Pilot courses that aim to implement changes in structure and/or content of ERC courses, are overseen by DC EDU.
- 4.7 For disabled candidates the [ERC policy for disabled candidates](#) is followed. (Attached to this document)
- 4.8 Holding qualifications as a faculty member, implies the preparedness to receive the relevant information from the ERC and, if applicable, the NRC related to the ERC courses and faculty development. Receiving such information is a prerequisite to maintain their relevant faculty qualifications.
- 4.9 Holding qualifications as a faculty member implies the obligation to provide complete and accurate personal and professional information, including the city of affiliation, as required by the ERC. Providing this information is a prerequisite for maintaining the relevant faculty qualifications.
- 4.10 Participants cannot successfully complete the course unless they are present throughout the full course.
- 4.11 All faculty members are entitled to teach ERC courses in other countries.
- 4.12 It is the responsibility of the holder of an ERC certificate to maintain their skills. This can be achieved via recertification.

5. Course organisation and Course Centre

5.1 Course Organisation

5.1.1 The maximum group size should not exceed 6 candidates in advanced and instructor courses. In case a CC must increase the group size for advanced and instructor courses, the specific reasons must be presented to the NRC or the SEC for approval.

5.1.2 The CD is responsible for the composition of the faculty.

The minimum criteria are:

- The number of ICs should never exceed the number of Instructors, with a maximum of 1 IC per group.
- The minimum faculty for BLS and PBLs courses is 1 instructor per 8 participants.
- The minimum faculty for BIC, ILS & EPILS courses is 1 Instructor per 6 participants.
- The minimum faculty for ALS, EPALS, NLS & GIC courses is 1 Instructor or IC per 3 participants.
- In case a CC has to increase the ratio, the specific reasons must be presented to the NRC or the SEC for approval.
- All Advanced Courses should have a multidisciplinary faculty.
- The CD and the CDC do NOT count as Instructors in advanced courses with more than 6 participants.

5.1.3 Course details need to be completed within a period of 2 weeks after the course.

5.1.4 Equipment must be available in accordance with the provided equipment list and be in sound working order.

5.1.5 For Advanced Courses, pre-course materials must be made available to participants at least 4 weeks in advance, along with advice on preparation. Participants should familiarise themselves thoroughly with the content of these materials. Passing the pre-course assessment is mandatory before attending the hands-on course.

5.1.6 For Basic Courses, pre-course materials should be made available to participants in advance (recommended at least 1 week before the course), together with advice on preparation. Participants are encouraged to review the materials before attending the course to support their learning.

5.1.7 Participants in advanced courses must normally come from healthcare environments.

5.1.8 Participants should complete the online post course survey.

5.2 Course Centre (CC)

5.2.1 Organisations or individuals applying for CC permissions:

- In a country with a self-sufficient NRC for the specific course type, the decision is made by that NRC.
- In a country with a none-self-sufficient NRC, the decision is made by the relevant SEC co-chair(s) in cooperations with the NRC.
- In a country without an NRC: the decision is made by the SEC co-chair.

5.2.2 The rules below indicate when CC permissions granted for one course type also apply to another:

- CC permissions for ALS also apply for ILS and BLS
- CC permissions for ILS also apply for BLS
- CC permissions for EPALS also apply for EPILS and PBLs
- CC permissions for EPILS also apply for PBLs

5.2.3 CC permission is granted for a period of up to 2 years at the end of which the CC will be evaluated by the Self-Sufficient NRC or the relevant SEC Co-chair.

5.2.4 In case of complaints an extra ordinary evaluation of the CC can be performed at any time.

5.2.5 CC permissions can be removed following negative evaluation.

5.2.6 CCs must meet the following criteria:

- a) Provide sufficient number of qualified instructors to run the ERC courses.
- b) Provide suitable infrastructure to organise ERC courses.
- c) Comply with this ERC Course Rules document.
- d) Grant access to the course materials for participants and instructors
- e) Accept ERC and/or NRC quality management measures
- f) Organise at least 2 courses every year.
- g) Keep a record of detailed participant results for the duration of validity period of their qualification, with a maximum of 3 years.
- h) Organise ERC courses efficiently including the following:
 - Provide adequate equipment in time.
 - Register courses in advance.
 - Provide correct and complete data.
 - Send course information to participants and instructors in time
 - Generate ERC certificates and letters of attendance via CoSy.
 - Handle the financial obligations related to courses:
 - Reimburse travel and other expenses incurred by instructors in a timely manner.
 - Settle ERC and NRC invoices related to courses by the due dates.
 - Inform participants about the possibility of buying printed manuals, at printing price and shipping costs.
 - Organise the necessary course catering.
 - Encourage all participants to fill in ERC online course evaluation forms, to consider such evaluations, and to take appropriate action to rectify any shortcomings reported.
 - Accept, as far as possible, ICs and CDCs from within and from outside the CC's own organisation, as a faculty member on their courses, free of charge.
 - Ensure that faculty members are indemnified for civil liability.
 - Comply with the [ERC Data Protection Policy](#) and other GDPR requirements.
 - Accept the relevant information from the ERC and, if applicable, the NRC related to the ERC courses. Receiving such information is a prerequisite to maintain Course Centre permissions. Unsubscribing from such mailing lists automatically implies termination of the Course Centre permissions.

6. Transition to ERC

6.1 Resuscitation Council UK (RC UK) courses

6.1.1 All RCUK certificates are equal for ERC.

6.2 American Heart Association (AHA)

6.2.1 Instructor qualifications: AHA ACLS and PALS Instructors are respectively considered ERC ALS and EPALS IPs.

6.2.2 CD qualifications: To convert AHA CD of any course type, to ERC CDC they must follow an ERC GIC.

6.3 Transition courses

6.3.1 The Transition Course is for new countries organising ERC courses for the first time. It supports the conversion of instructors trained by other organisations and focuses on ERC educational principles. The course is delivered by senior Instructor Trainers (ITs) appointed by the SEC and DC-Edu Chair. For more information, contact support@erc.edu.

7. Assessment

7.1 Assessment in hands-on part:

7.1.1 Assessments must be carried out by at least 1 full Instructor. IC's can be part of the procedure; the FI has the final decision.

7.1.2 The SECs are defining the assessment procedures.

7.2 Re-assessment

7.2.1 Each course participant will be entitled to an immediate re-assessment during the hands-on part.

7.2.2 If a participant fails the re-assessment, they have not completed the course successfully. They will not receive a certificate, but a letter of attendance.

8. Certification of Providers

8.1 An official ERC Certificate will be issued to successful participants once the Course Centre has completed the course details in the designated system, within a maximum period of two weeks following the course.

8.2 It is the responsibility of the holder of the certificate to maintain their knowledge and skills. To be eligible for the ERC recertification trajectory, they must do a recertification module. The recertification module comprises the online e-learning and a condensed hands-on training module within 3 years.

8.3 Recertifying as an instructor/Course Director automatically renews the provider certificate for the same course type and for the same duration as the instructor/Course Director certification.

9. Course types and specific rules

9.1 Basic Life Support (BLS) course

The objectives of the BLS courses are to enable participants to gain competency in cardiopulmonary resuscitation (CPR) and the use of an automated external defibrillator (AED). BLS courses are appropriate for everybody.

9.1.1 The assessment for becoming a provider is either continuously formative during the practical sessions and/or summative at the end of the course, at the discretion of the CD.

9.1.2 ICs of Adult Advanced courses can act as BLS IC. They must teach on 2 BLS courses, to the satisfaction of the CD, before becoming BLS Instructor.

9.1.3 Instructors of Adult Advanced Courses need to do 1 course as BLS IC before being upgraded to BLS Instructor.

9.1.4 PBLIS instructors who attend a BLS provider course are upgraded to BLS IC.

9.1.5 The CD may supervise the course remotely. In case CDC or instructor assessment is needed, the CD needs to be present.

9.1.6 ALS Course Directors or ALS Course Director Candidates can become BLS Course Director Candidates. They are required to teach on 1 BLS course as a Course Director Candidate before they can be upgraded to BLS Course Director.

9.2 Immediate Life Support (ILS) course

The ILS course aims to train healthcare providers in advanced resuscitation enabling them to manage patients in cardiac arrest until the arrival of a resuscitation team and to participate as members of that team. That includes: the ABCDE approach to the deteriorating patient, CPR, simple airway management and safe defibrillation (manual and/or AED).

9.2.1 Assessment is continuous and is guided by the assessment forms provided.

9.2.2 ALS Instructors can instruct and direct on ILS courses. ALS Instructors who are active on ILS courses will automatically receive the relevant ILS qualifications.

9.2.3 ALS and ILS ICs can instruct on ILS courses and be listed as ILS IC. If they teach 2 courses successfully under direct supervision of an ALS or ILS Instructor, they should be upgraded to ILS Instructors, but these courses do not count towards their ALS upgrade.

9.2.4 At the discretion of the faculty, participants who have failed an ILS course can be awarded an BLS provider certificate, based on their performance during the first day of the course.

9.3 Advanced Life Support (ALS) course

The ALS course comprises all ILS objectives with an additional focus on team related non-technical skills. Following the ALS course candidates know about the relevant factors and skills necessary leading the resuscitation team and will be able to lead the resuscitation team.

That includes to highlight the causes of cardiac arrest, identify patients in danger of deterioration and manage cardiac arrest and the immediate peri-arrest problems encountered in and around the first hour or so of the event. The target candidates for this course are doctors, nurses and paramedics working in emergency areas in or out of the hospital or Emergency Medical Systems (EMS), and those who attend cardiac arrests on a regular basis or may be expected to lead a cardiac arrest team. It can also be suitable for individuals who are regularly members of resuscitation teams or regularly working in the EMS.

9.3.1 At least 25 % of the faculty members must be experienced medical doctors.

If the CD is not medically qualified, there should be a nominated medical co-director who may be one of the faculty. The Medical Director must be a full instructor for that specific course type and cannot be included in the teaching on the course but is there in a supervisory position.

9.3.2 It is good practice for the backgrounds of the instructors to be representative of the candidate group they are teaching. However, it is recommended to have a medical doctor available for each group of participants.

9.3.3 At the discretion of the faculty, participants who have failed an ALS course can be awarded an ILS and/or BLS provider certificate, based on their performance during the first day of the course.

9.3.4 An ALS Instructor must instruct on 2 courses in 3 years, to maintain Instructor status. However, teaching on 2 ILS courses may count as 1 of these. This is outlined in course rules 2.4.6.

9.3.5 As an alternative to a standard ALS course, a split ALS course is organised on 2 separate days, the first day being a full ILS course, as long as the maximum period between the 2 course days is 12 months. The Advanced Seat applies for the participants of such courses, and no refund is possible if participants do not participate in the second day.

9.4 Paediatric Basic Life Support (PBLIS) course

The aim of the PBLIS course is to prevent and manage cardiorespiratory arrest in children and to enable each candidate to gain competency in cardiopulmonary resuscitation (CPR) and the use of an automated external defibrillator (AED). PBLIS courses are appropriate for everybody.

9.4.1 The assessment may be undertaken either continuously formative during the practical session or during a separate summative assessment at the end of the course, at the discretion of the CD.

9.4.2 ICs of paediatric Advanced courses can act as PBLIS IC. They must teach on 2 PBLIS courses, to the satisfaction of the CD, before becoming PBLIS Instructor.

9.4.3 Instructors of paediatric Advanced Courses need to do 1 course as PBLS IC before being upgraded to PBLS Instructor.

9.4.4 EPALS Course Directors or EPALS Course Director Candidates can become PBLS Course Director Candidates. They are required to teach on 1 PBLS course as a Course Director Candidate before they can be upgraded to PBLS Course Director.

9.4.5 BLS instructors who have successfully completed a PBLS provider course are upgraded to PBLS IC.

9.4.6 The CD may supervise the course remotely. In case CDC or instructor assessment is needed, the CD needs to be present.

9.5 European Paediatric Immediate Life Support (EPILS) course

EPILS is aimed at training healthcare providers to recognise and manage critically ill children and children in cardiorespiratory arrest whilst awaiting the arrival of a resuscitation team in the first minutes. EPILS will also train the candidate to participate as members of that team.

9.5.1 Assessment is continuous formative and is guided by the assessment forms provided.

9.5.2 EPALS Instructors can instruct and direct on EPILS courses. EPALS Instructors who are active on EPILS courses will automatically receive the relevant EPILS qualifications.

9.5.3 EPALS and EPILS ICs can instruct on EPILS courses and be listed as EPILS IC. If they teach 2 courses successfully under direct supervision of an EPALS or EPILS Instructor, they should be upgraded to EPILS Instructors, but these courses do not count towards their EPALS upgrade.

9.5.4 Participants who have failed an EPILS course can be awarded a PBLS certificate based on their performance during the first day of the course, at the discretion of the faculty.

9.6 European Paediatric Advanced Life Support (EPALS) course

The EPALS course is designed for healthcare professionals who are involved in the resuscitation of a child, infant or newborn, whether in or out of hospital. The course aims to provide caregivers with the knowledge, skills & attitude for the management of the critically ill child during the first hour of illness and to prevent progression of diseases to cardiac arrest.

9.6.1 At least 50% of the faculty must be involved in the clinical care of children during their daily professional occupation. 1 of the faculty members must be an experienced medical doctor.

9.6.2 It is good practice for the backgrounds of the faculty instructors to be representative of the candidate group they are teaching. It is recommended to have a medical doctor available for each group of participants.

9.6.3 As an alternative to a standard EPALS course, a split EPALS course is organised on 2 separate days, the first day being a full EPILS course, as long as the maximum period of time between the 2 course days is 12 months. The Advanced Seat applies for the participants of such courses, and no refund is possible if participants do not participate in the second day.

9.6.4 An EPALS Instructor must instruct on 2 courses in 3 years, in order to maintain Instructor status. However, teaching on 2 EPILS courses may count as 1 of these.

9.6.5 Participants who have failed an EPALS course can be awarded an EPILS and/or PBLS certificate based on their performance during the first day of the course, at the discretion of the faculty.

9.7 Newborn Life Support (NLS) course

The NLS course aims to provide the detailed knowledge and practical instruction in resuscitation of babies at birth. It is designed for all healthcare workers, regardless of their profession, who may be called upon to resuscitate a newborn.

9.7.1 One of the faculty members should be an experienced medical doctor.

9.7.2 All instructors should have on-going clinical experience of care and potential resuscitation of babies at birth.

9.7.3 If human umbilical cords are to be used it is the Course Director's responsibility to follow the local rules in relation to written consent of the parent(s). For further guidance please see the sample parental consent letter and requirements for the use of umbilical cords: [Appendix 3 Permission Form: Umbilical Cord Parts for Use in Resuscitation Training](#)

9.8 Basic Instructor course (BIC)

This course is for candidates who have attended BLS or PBLIS provider courses and subsequently want to become instructors themselves. For this reason, the ERC has developed a Basic Instructor Course. Candidates for this course must hold the ERC BLS or PBLIS provider certificate.

9.8.1. Assessment is continuous formative and is guided by the assessment forms provided.

9.8.2 GIC Instructor Trainers need to teach 1 course as BIC Instructor Trainer before being upgraded to BIC Instructor Trainer.

9.9 Generic Instructor Course (GIC)

This course is for candidates who have attended an ALS, EPALS, ILS, EPILS, NLS provider course and been recommended as having Instructor Potential (IP) by the respective course faculty. The course focuses on teaching educational background knowledge and skills.

9.9.1 Assessment is continuous formative and is guided by the assessment forms provided.

9.9.2 In order to be eligible to be selected as a GIC CDC, a candidate needs to be qualified as a CD of an Advanced course type.

9.9.3 The presence of an Educator is mandatory for the GIC.

9.10 Educational Instructor Day (EID)

The aim of the EID is to strengthen the contact between faculty and their NRCs and to address any concerns or difficulties they experience whilst instructing ERC courses. An EID can take a variety of forms: a hands-on course, a meeting, a conference, etc. The NRCs are free to choose the format and the topics which are discussed or dealt with.

9.10.1 It is the responsibility of the National Resuscitation Councils to ensure the organisation of sufficient EIDs and to inform their Course Directors and Instructors about them.

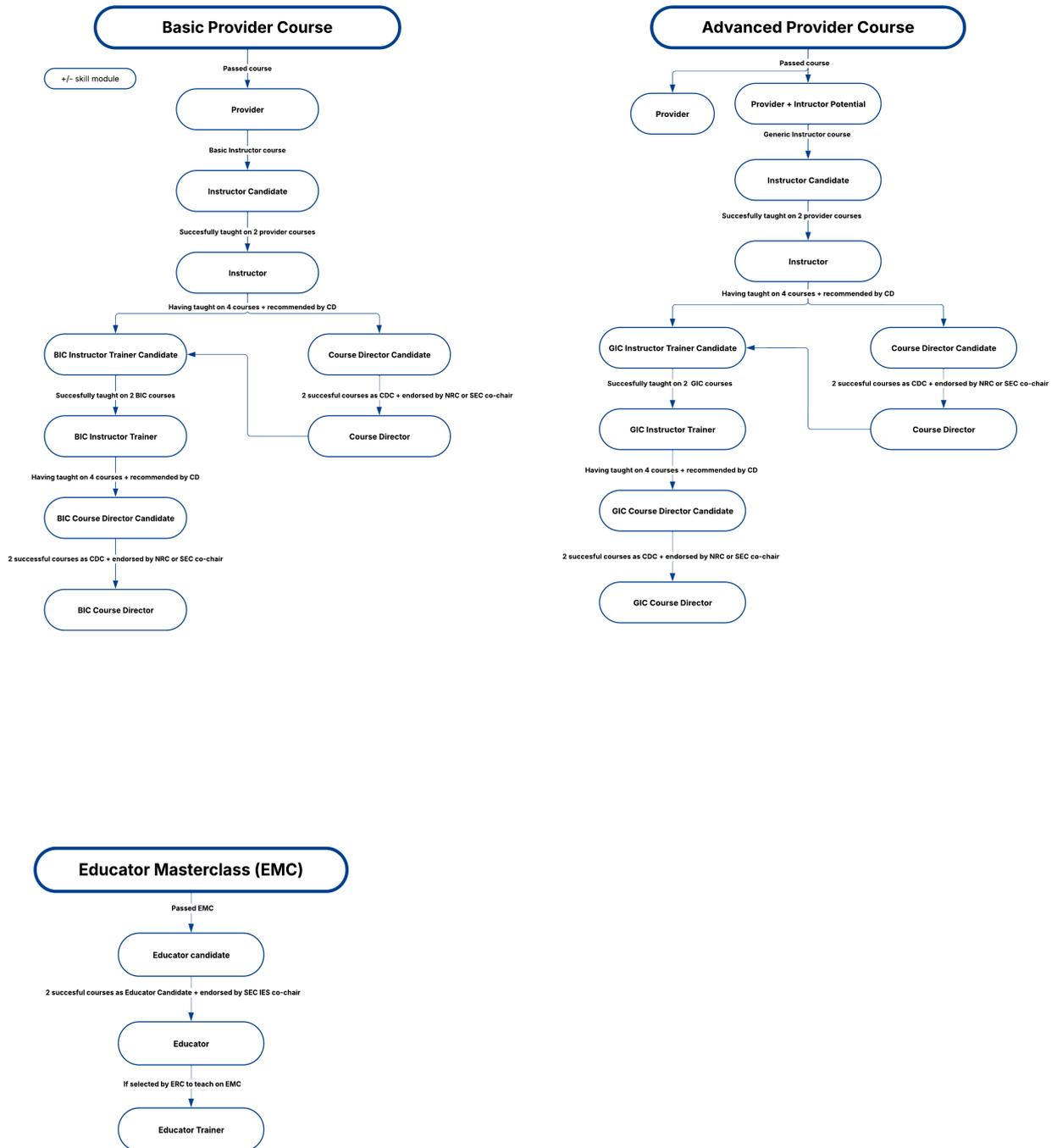
9.10.2 In the absence of a National Resuscitation Council, it is the responsibility of the Course Centre to organise an EID for its faculty members to ensure continued professional development and alignment with ERC standards.

9.11 Educator Master Class (EMC)

The Educator Master Class trains selected participants with an educational and resuscitation background, to become an ERC Educator Candidates (EdC).

9.11.1 The EMC can only be organised by the DC-Edu.

10. Instructor Development Flowchart



11. Appendices

N°	Document	Version
Appendix 1	<u>Policy for Disabled Candidates</u>	09.08.2025
Appendix 2	<u>IP Selection Form</u>	19.02.2026
Appendix 3	<u>NLS 11 use of parts of the umbilical cord</u>	19.02.2026
Appendix 4	<u>ERC policy handling misconduct during courses</u>	19.02.2026
Appendix 5	<u>Self-sufficiency in running ERC courses</u>	19.02.2026
Appendix 6	<u>Code of Conduct</u>	19.02.2026
Appendix 7	<u>Complaints procedure</u>	19.02.2026

ERC Policy for Disabled Candidates

Version approved by the DEI Committee on 09.08.2025

Candidates with disabilities are eligible to undertake ERC life support courses.

The ERC is committed to ensuring that its life support courses are inclusive, equitable, and accessible to all, including candidates with disabilities. In line with the United Nations Convention on the Rights of Persons with Disabilities, the ERC recognizes the right of persons with visible and invisible disabilities to equal access to education and training, including reasonable accommodations to ensure full and effective participation.

This policy outlines the principles and procedures for supporting candidates with disabilities throughout the course experience, while maintaining the integrity and objectives of ERC training. The ERC will do everything it can to assist those with a disability and will ask its Course Centre, Course Organisers, and faculty members to do the same.

Candidates who may require reasonable accommodations are encouraged to contact the Course Centre as early as possible before the start of the course. While accommodation requests will be treated with discretion and sensitivity, information relevant to the candidate's participation may need to be shared with course faculty. This ensures that appropriate adjustments can be prepared and implemented across the course.

For example, the Course Centre may be able to make changes to the physical surroundings or, if a disabled candidate is physically unable to undertake a task, it may be possible to allow the candidate to instruct a proxy instead. However, any such changes should not cause a deterioration in the experience or training of the other candidates.

The Course Director will engage in a respectful and collaborative dialogue with the candidate to identify feasible adjustments that support meaningful participation in line with the course's learning objectives. To facilitate informed preparation, the Course Centre will provide advance information about the physical accessibility and the learning environment.

The award of an ERC certificate (whilst not a certificate of competence nor a licence to practice) indicates that a candidate has successfully completed a course and by inference has undertaken active participation. In some situations, a disabled candidate might successfully pass all the theoretical aspects of a course but, due to a disability, be unable to complete all of the physical course requirements.

If a course faculty feels a candidate's knowledge is sound and they have the qualities to become an instructor candidate, having a disability should not preclude their nomination. This assumes the Course Director feels this disability will not impact the learning of future candidates and that the candidate has successfully passed the course.

While the ERC ensures inclusive access to its training and assessment processes, it remains the responsibility of employers to evaluate the full scope of their staff's clinical competencies for their specific practice setting. Accordingly, they must not rely to any extent on the holding by an individual of a certificate from the ERC as lessening their responsibility in that respect.

The ERC Policy for Disabled Candidates aims to ensure that healthcare education complies with inclusive values and evolving best practices. The ERC will continue to review and improve its practices to ensure inclusive access and encourages feedback from candidates, instructors, and Course Centre to help identify and remove barriers to participation.

ERC Instructor Potential Appraisal Form

Version approved by the DC Edu on 19.02.2026

With the aid of the Provider Course Results Sheet, an instructor on the faculty may nominate any candidate for Instructor Potential selection at the final faculty meeting. Another Instructor must second this nomination before the candidate can be considered and before this form is required and subsequently completed.

Provider Course Type & Centre		Course Date	
Course Director			
Candidate Name			
Nominated by		Seconded by	

To be successfully put forward for Instructor Potential (IP), the candidate **must score a minimum total of 16. Any score of unacceptable excludes the candidate from being selected.** A copy of each completed form should be included with the Course Director’s report to the relevant National Resuscitation Council course co-ordinator.

To be nominated as an IP the candidate should be healthcare provider.

Please read the notes overleaf for further guidance, then circle the appropriate number for each characteristic in the table below.

	Unacceptable	Average	Outstanding
Pre-test	1	2	3
Score	< 80%	80 – 86%	87% +
Communication	1	2	3
Enthusiasm	1	2	3
Engagement in feedback	1	2	3
Interactivity/Team working	1	2	3
Credibility	1	2	3
TOTAL SCORE			
Comments			

Overall Recommendation (tick one) IP Not Suitable

Course Director’s Signature and Date	
	Date

Candidates not directly involved with resuscitation on a regular basis require confirmation of credibility (as described below) by the Course Director. This should be in the comments section.

Return form to the resuscitation council with other course documents. Retain a copy for your records.

Explanation of skills and characteristics

This is a guide only.

Score 1	Score 2	Score 3
Communication		
Some difficulty with communicating with fellow candidates / faculty	Good communication skills with fellow candidates / faculty	Clear and articulate communication skills with fellow candidates / faculty
Limited self-awareness of non- verbal communication skills	Good non-verbal behaviour (e.g., eye contact, body language, facial expression)	Excellent non-verbal behaviour
Some difficulty in communication across different staff groups	Ability to communicate with different staff groups	Excellent communication skills with different staff groups
Enthusiasm		
Minimal interest in resuscitation	Good interest in relevant area of resuscitation	High level of interest in relevant area of resuscitation
Little interest in learning to teach	Interest in learning to teach	High level of interest in learning to teach. Interested in becoming an instructor
Engagement in feedback		
Minimal engagement with feedback process	Takes opportunities to join in with feedback for self and others	Uses contributions to enhance feedback discussions for self and others
Interactivity/ Team Working		
Limited interaction with faculty and participates fully during sessions	Good interaction with faculty and participates fully during sessions	Excellent interaction with faculty and participates fully during sessions
Works in isolation rather than part of the team	Works with and in support of the team	Excellent engagement and support to the team
Credibility		
Registered professional with little/no prior exposure or clinical experience of resuscitation in relevant area.	Registered professional with regular and substantiated exposure and clinical experience of resuscitation in relevant area Medically qualified instructors will be expected to have relevant specialist qualification or to be providing second on-call cover	Registered professional with extensive, and substantiated exposure and clinical experience of resuscitation in relevant area Medically qualified instructors will be expected to have relevant specialist qualification or to be providing second on-call medical cover.

ERC Permission Form: Umbilical Cord Parts for Use in Resuscitation Training

Version approved by the DC Edu on 19.02.2026

RE: Use of parts of the umbilical cord in resuscitation training

Dear Parent

The umbilical cord contains blood vessels, which connect the baby to the placenta (afterbirth) in the womb. Shortly after birth the umbilical cord is clamped close to the baby’s tummy and is then cut to separate the baby from the rest of the cord and the placenta.

Occasionally some newborn babies become very ill and need resuscitation and treatment. At times it can be difficult to put a drip into a vein in the very small arms and legs of these sick babies in order to deliver life-saving treatment. In these circumstances it is usual to place a drip into the vein in the umbilical cord at the belly button. This is a difficult and tricky procedure, which takes time to learn.

As you might expect it is not possible for doctors or nurses to learn or to practice this skill on well babies. One way to learn is to allow doctors and nurses to practice on parts of the umbilical cord that would otherwise be disposed of. The cord and placenta are normally destroyed after birth.

During recognised training courses a segment of umbilical cord taken from the placenta can be used to help doctors and nurses practice getting drips into the vein. The short lengths of umbilical cord are only used for a few hours and are then destroyed appropriately afterwards. They are not retained nor are they used for any other purposes.

We would be grateful if you would give permission for the use of a section of your baby’s cord for use as described above. You do not have to give permission.

If you do decide that you are happy for a part of your baby’s cord to be used for training as described above, please sign below.

If you have any further questions either now or in the future, please do not hesitate to contact the person obtaining consent from you.

Yours sincerely

Clinical Director, Special Care Baby Unit

NLS Course Director

I give my permission for my baby’s umbilical cord to be used as described above.

Date	
Name parents	
Signatures	

Name mid-wife/doctor	
Signature	

ERC policy handling misconduct during courses

Version approved by the DC Edu on 19.02.2026

Pre-test Examinations: Information to be given to candidates and guidance for managing malpractice

European Resuscitation Council Statement:

The European Resuscitation Council takes all allegations of malpractice (including cheating) very seriously and any candidate suspected of committing malpractice will be investigated by the Course Director, whose report will be sent to the relevant chair of the science and education committee (SEC).

Where malpractice is considered to have occurred based on the balance of probability, the National Resuscitation Council, through the Course Director/Course Medical Director or chair of the corresponding SEC, will refer the incident to the candidate's appropriate professional director within their area of employment (e.g. Director of Medical Education, Director of Nursing). In some cases, depending on the specific circumstances, the National Resuscitation Council will refer the matter directly to the candidate's professional body.

General Guidance

Prevention of malpractice can start before the pre-test assessment has begun. This guidance describes the actions to be taken by all European Resuscitation Council course centres to ensure that the final pre-test paper is taken under examination conditions and that all candidates are aware of their responsibility to act honestly and with integrity. It is the responsibility of the Course Director and Course Medical Director to ensure that the pre-test paper is undertaken under examination conditions, with an invigilator present throughout.

Information for candidates

Candidates must be informed at the start of the examination that:

- o they are not permitted to refer to any materials or multi-media devices, such as mobile phones and tablets, which must be turned off and must not be placed on the examination desk;
- o they must not confer or communicate with other candidates and that silence must be maintained during the examination;
- o any queries regarding the question or answer sheets must be directed to the invigilator;
- o the European Resuscitation Council takes cases of malpractice (including cheating) very seriously and any candidate suspected of committing malpractice will have their course result suspended until a full investigation has been completed.

Where malpractice is considered to have occurred automatic failure of the course will result and the matter will be referred to the candidate's appropriate National Resuscitation Council and professional director within their area of employment (e.g. Director of Medical Education, Director of Nursing) and in some cases to the candidate's professional body.

Guidance for managing malpractice

The invigilator must monitor and watch all the candidates and occasionally walk around the room. If they observe behaviour that could result in an act of malpractice the invigilator should be proactive and approach the candidate (or candidates) and remind them that the pre-test must be completed under strict examination conditions and that any queries must be directed to the invigilator.

Should the invigilator continue to have concerns and suspect that the candidate(s) is/are engaging in malpractice, he/she must make detailed written notes of all that they observe and inform the Course Director and/or Course Medical Director at the earliest opportunity, to enable the Course Director or Course Medical Director to inform the candidate of the situation and ask whether what has been observed is admitted or denied.

In weighing the candidate's response and any mitigating circumstances, where a case of malpractice is considered likely, the Course Director or Course Medical Director must obtain witness statements from all those who observed the incident (this may include other candidates) and collect copies of the answer paper(s). The incident must be documented in detail within the course report and reported to the National Resuscitation Council at the earliest opportunity.

The appropriate course SEC will convene a panel comprising 3 persons (which may include him/herself) to consider the incident. On reviewing the evidence, where malpractice is considered to have occurred based on the balance of probability the National Resuscitation Council, through the Course Director, Course Medical Director or SEC, will refer the matter to the candidate's appropriate professional director. In some cases, depending on the specific circumstances, the National Resuscitation Council will refer the matter to the candidate's professional body.

Where there is no National Resuscitation Council or no self-sufficiency in the course, these actions may be administered through the relevant European Resuscitation Council SEC.

Where the candidate feels there are grounds to question any decision reached regarding matters of malpractice/cheating then they may do so through the ERC appeals procedure within the course rules.

Self-Sufficiency in running ERC courses

Version approved by the DC Edu on 19.02.2026

Introduction

Self-sufficiency is defined in the ERC Course Rules as follows:

A National Resuscitation Council is considered as self-sufficient for a certain type of course if:

- It has the resources, expertise, and experience to run courses, and has demonstrated an ability and commitment to maintain the quality of training agreed with the ERC in accordance with the document Self-Sufficiency^[1]_{SEP}
- There is a formal written agreement of partnership between the ERC and the NRC in which the responsibility for the national supervision and quality control rests with the National Resuscitation Council.

Nevertheless, all ERC courses are organised under supervision of the respective Education Committee.

The current document further defines and refines the different aspects of self-sufficiency.

Characteristics of self-sufficiency

From the definition of self-sufficiency, the following characteristics can be deduced:

1. Self-sufficiency is granted by the ERC per type of course.
2. Only National Resuscitation Councils ("NRC" s), having an Agreement or a Memorandum of Understanding (of cooperation) with the ERC, qualify to be (come) self-sufficient.
3. Self-sufficiency only refers to ERC courses (registered in CoSy).
4. Those NRCs being self-sufficient, take care of the quality control of the relevant courses in their country, where the ERC can set minimum criteria.
5. The ERC – via the Education Committees – may organise supervision on the quality and quality control of the courses.

To become self-sufficient for a certain type of course

In order for an NRC to become self-sufficient, the NRC makes an application to the ERC – via the ERC Office - for each type of course for which self-sufficiency is requested, using the attached form which includes information about:

- The identity of the NRC.
- The type of course.
- Concrete description how the quality control will be organised, including resources.
- Commitment to comply to the ERC Course Rules and the criteria to maintain self-sufficiency.

Based on this information plus the data in CoSy – including feedback of faculty, participants and CO collected by the ERC via surveys - the decision about self-sufficiency will be made by the SEC co-chair of the relevant type of course, having collected feedback from education members within his/her SEC.

This decision will be motivated to the NRC.

An appeal against this decision will be judged by the DC Edu, which acts as a last resource.

A new request for self-sufficiency can only be submitted 12 months after the previous request.

Self-sufficiency is granted for an indefinite period of time, but can be withdrawn by the relevant SEC co-chairs, with appeal possibility at a DC Edu level as a last resource.

To maintain self-sufficiency for a certain type of course

1. The NRC aims for maintaining and improving the quality of ERC training.
2. The NRC promotes this ERC course as the official CPR course of the NRC for that type of course.
3. The NRC – and their local network of Faculty members and Course Centre - have the capacity (as to resources, expertise and experience) to run this type of course without structural support from other countries.
4. The NRC is capable of
 - a. dealing with all responsibilities of self-sufficient NRCs as included in the Course Rules;
 - b. organising an audit by two unbiased experienced and qualified instructors on location in the following situations:
 - serious allegations regarding the quality of teaching about faculty members or Course Centre;
 - upon instruction via CoSy (based on background criteria including previous audits, user feedback and chance) and with a maximum of four of such audits per course type per year;
 - at the discretion of the NRC;and the NRC reports the result of these audits to the ERC via CoSy;
 - c. assessing a Course Centre before their 2-year CO permissions are renewed;
 - d. making an objective assessment of complaints related to courses (for which the NRC is self-sufficient) in the country of the NRC;
 - e. support all the above actions with documentation in view of a possible audit of the quality control systems by the ERC.
5. The NRC accepts and recognises audits from the ERC of individual courses.
6. The NRC submits an annual standardised report on the national activities of quality control to the ERC.

ERC Code of Conduct

Version approved by the DC Edu 19.02.2026

The European Resuscitation Council [ERC] recognizes the contribution made to the organisation by all instructors (including instructor candidates and instructor potentials), educators (including educator candidates), and course organisers across all courses. The time and commitment given to teaching is valued by the organisation and there is an understanding of the value of this to the health care community and in particular to the chance of survival from cardiac arrest. However, to maintain the integrity and standard of all teaching, there must be checks and balances in place, which are clear and transparent to all concerned.

This Code of Conduct applies to all instructors (including instructor candidates and instructor potential), educators (including educator candidates), course organisers and administrators, as well as to those who otherwise assist on courses held under the auspices of the ERC.

It is important, therefore, that those accredited by the ERC:

- FULLY UNDERSTAND that accreditation and continuing accreditation is dependent on adhering to this Code as well as completing the necessary requirements for re-certification.
- ENSURE that ERC courses are run in accordance with its Course Rules currently in force, including the use of (online, pdf, or printed) manuals, blended learning tools, and other materials to ensure that consistent standards of knowledge and skills are achieved.
- BEHAVE, at all times, while participating in courses, or social events related to courses which are run under the auspices of the ERC, in a responsible manner and adhere to the European Convention for the Protection of Human Rights and Fundamental Freedoms, as well as any other applicable professional codes of conduct.
- COMMUNICATE in a polite and constructive manner, with the orientation of finding solutions to issues.
- PRIORITISE the learning experience of the participants when balancing interests of different stakeholders.
- OPERATE within the social media environment and other online platforms in a professional manner that does not bring the ERC, by association or otherwise, into disrepute.
- CO-OPERATE with other faculty colleagues (teaching and administrative) and recognise and respect their individual contributions.
- UPHOLD the reputation of the ERC at all times by promoting the guidelines, values and work of the ERC in order to maintain the trust and confidence of the members and wider public. Where there is a difference of opinion in relation to ERC guidelines these should be addressed through the Guideline process.
- AVOID any abuse of their position.

Any data collected during ERC courses is confidential and those accredited by ERC to teach on its courses must ensure that the information is kept confidential, and that candidate, instructor

and/or centre confidentiality is not compromised. Any photographs must be taken only with the full informed consent of the subjects. Those accredited by ERC to teach on its courses must adhere to appropriate data protection regulations.

The ERC has a zero tolerance to all forms of discrimination. Those accredited by ERC to teach on its courses must not discriminate, or make unfair judgments on grounds of race, colour, religion, gender, nationality, ethnic origins, language, age, political conviction, sexual orientation, or disability.

Failure to comply with any aspect of this Code of Conduct may result in loss of accreditation by the ERC. In addition, any conduct that brings ERC into disrepute, either through instructional or professional error, or misconduct, may also result in loss of accreditation by ERC.

Complaints procedure

Version approved by the DC Edu on 19.02.2026

1. Complaints related to a specific course:

A complaint can be submitted, within 2 weeks of the completion of the course or of a relevant event that occurred after the course:

- by any individual(s) or organisation directly involved in the course: to the CD
- by the CD: to the NCD or - if no NCD was appointed - to the NRC or - if the NRC is not self-sufficient for that course type - the SEC Co-chair
- if the CD is the subject of the complaint: to the NCD or - if no NCD was appointed - to the NRC or - if the NRC is not self-sufficient for that course type - the SEC co-chair. However, if the person who should receive the complaint is directly involved, the complaint should be submitted or immediately be referred to the higher level.
- In the first instance, the CD (or NRC) decides within 4 weeks of having received the complaint.
- If the solution is not considered acceptable, any of those involved may launch an appeal in writing within 2 months of the end of the course or of a relevant event that occurred after the course has been completed, to the National Resuscitation Council (if Self-Sufficient), or otherwise, to the SEC Co-chair for that course type.
- That NRC or SEC Co-chair will decide on the appeal within 2 months of receiving it, in line with the rules as described in this document and with a copy to the ERC Office.
- If this decision is not considered to be in line with the rules as described in this document, any of those involved may elevate the situation, within 1 month of having received the decision, to the DC-Edu via the ERC office (cassation). The DC-Edu has 6 months to judge and has the power to revoke and request that the deciding authority provides an alternative solution that abides by the rules.

2. Removal of CC permissions and/or CD/Instructor qualifications:

The removal of CC permissions and/or CD/Instructor qualifications can only be discussed:

- during the appeal procedure of a complaint related to a specific course (1)
- following a complaint related to a specific course by a CD involved in that course (1)
- following a complaint by a NCD about a CD related to a specific course (1)
- based on an independent quality control report.
- In the first instance, the Self-Sufficient NRC of the country of residence of the person making the complaint, or otherwise, the SEC co-chair decides within 3 months of having received the complaint.
- Any of the parties directly involved may give notice of appeal to the DC-Edu via the ERC Office. The appeal procedure is suspending the first judgement, except when the DC-Edu Chair decides that the risk of recurrence is a too high a risk for individuals, for the quality of the courses or for the organisation.
- The DC-Edu will reconsider the decision taken by the Self-Sufficient NRC or SEC Co-chair, may ask any party involved for their opinion and will take a final decision, preferably within a time frame of 6 months after the appeal has been received.
- If this decision is not considered to be in line with the rules as described in this document, any of those involved may elevate the situation to the Board via the ERC office (cassation). The Board has the power to revoke and request that the DC-Edu provides an alternative solution that abides by the rules.

Overview complaints procedure:

	Basis	1st	Appeal	Cassation
Course related	Complaint	CD	ERC office- NRC/ DC- Edu	DC-Edu
	Complaint by CD	NCD		
	Complaint about CD	(ERC office- NRC)		
Withdrawal related	Complaint or QC (not individual)	ERC office- NRC/ DC- Edu	DC-Edu	Board
Declined CC permissions by NRC	Appeal lodged by declined CC	ERC office	DC Edu	Board