

**Regular Meeting of the OTERAC Education and
Training Committee
Wednesday, February 9, 2022, 9:00 AM
Minutes**

- I. **Call to Order:** Meeting called to order at 9:08 am by Mr. Justin Hunter Chair.
- II. **Welcome and Introductions:**
Chairperson Mr. Justin Hunter welcomed everyone to the meeting. Mr. Hunter asked everyone in attendance to introduce themselves and who they represent.
- III. **Roll Call:**
Members Present: Blake Braden, Jamie Dubose, Rusty Gilpin, Justin Hunter, Gina Riggs, Eugene Sateren. Others present Justin Garrett, Katie Reynolds, Jason Lankford, John Noel, Dale Adkerson, Nena West, David Graham.
- IV. **Approval of minutes – November 4th, 2021:**
Motion to approve minutes made by Jamie DuBose, seconded by Rusty Gilpin. Roll call vote approved unanimously.
- V. **Old Business:**
 - A. Development of psychomotor skill forms for EMR and EMT psychomotor exams.
Mr. Hunter asked the group who was not present for the last meeting. Being there were several Mr. Hunter gave a summary of what the committee discussed about the NREMT pulling all the psychomotor skills forms from their website being they had given that back to the states several years ago. Mr. Hunter stated that at the last meeting the group consensus was that we use a scenario based -psychomotor exam for the EMR and EMT like what the National Registry is currently using for the ALS psychomotor exams. The skills we decided on were Medical Assessment, Trauma Assessment and Cardiac Arrest AED. Mr. Hunter then explained what would be required under each scenario would look like. Rusty Gilpin had submitted modified forms for EMR and EMT psychomotor exam skill sheets from the NREMT ALS psychomotor Integrated out of hospital scenario. Mr. Hunter thanked Mr. Gilpin for working on this since the last meeting and asked him if he would like to discuss the EMR and EMT skill sheets. Mr. Gilpin explained he used the NREMT skill sheets for the ALS psychomotor testing and tried to make them more appropriate for the EMR and EMT levels; Mr. Gilpin asked if anyone had any suggestions or comments. The committee reviewed the EMR skill sheet and made some suggestions to the forms. Most of the committee liked the one form skill sheet. They discussed at the top of the form placing check boxes beside the skill section being tested.

The committee started with EMR skill sheet placing required criteria at the bottom of the check sheet under each skill. Example Medical requires, Trauma requires, Cardiac Arrest requires. Ms. Gina Riggs was asked what she thought, and she stated she was envisioning three skill sheets. Ms. Riggs wanted to make sure they understood how to apply a tourniquet on and AED on etc. After group discussion Mr. Gilpin stated he could work on this and bring it back for the committee to review. We may have to have separate skill sheets for each scenario. During the scenario the EMR should be evaluated on scene management, patient assessment, patient management and interpersonal relation.

Examples under trauma competency – shock management, hemorrhage control/ tourniquet. Medical – must assess for assisting medication administration. Ex. Auto injectors, nitro etc. Cardiac arrest – O2, BVM, airway adjuncts, must shock, CPR. Changed paramedic to EMR and total score to 12. Mr. Gilpin wanted the committee to look at the language from the viewpoint of an EMT testing the psychomotor exam. Mr. Hunter asked if the current curriculum have affective domain in the language. Maybe change to exhibits unacceptable professional affect, with patient or other personnel. Mr. Gilpin asked the committee if there is any additional language to change. Mr. Gilpin states he will rework this and use the same on EMT. Let training programs develop their own scenario's. Mr. Gilpin asked if the committee has talked about establishing program minimums for those individual skills like within their program? The committee agreed they do not need to set minimums. Mr. Braden asked if we would be updating the guidelines the consensus group since it was last updated in 2011. Ms. Riggs states she will work on the EMR part. The Guidelines were put together to help new programs in planning and developing the framework. Mr. Hunter asked the committee to think about you are where an EMR director or agency director in rural Oklahoma and this is sent out once completed what would you think they might get stressed out about, upset with or maybe happy with it. Mr. Gilpin states that it will be new for them like us, but he thinks they will get it. David Graham commented that Dale has suggested once this is completed that the Department would send out some notice and have a virtual setting where we go over this and rule changes and explain this to the agencies and programs. And answer their questions. It will probably also be recorded so they could watch it later if they missed it or want to review it. Mr. Gilpin asked if we must determine what passing is on this. Mr. Hunter asked to let him make an educated guess. He states there should be at least two criteria. One would be a minimum score and the second by each category. The committee suggested that we use a minimum score of eight with a minimum of two in each section. Ms., Riggs asked if we need to keep the time for EMT at 20 minutes. The committee agreed to a max time of 15 minutes.

EMT skill sheet same as EMR with same criteria and probably make the front and back. Ms. Riggs states if we use front and back, we can put some lines for documenting rational for scoring. Scores minimum of 10 with minimum of 2 in each section. Mr. Gilpin asked if David would reach out to the registry if we can use their integrated out of hospital skill sheet. Gina will work on Guidelines and Rusty will work on psychomotor skill sheets.

VI. New Business:

A. Discuss updated National Scope of Practice.

The committee reviewed the Kentucky approved scope of practice that was off the 2019 scope of practice. We are looking at all the levels but mainly for AEMT to see what we might want to put into the Oklahoma Scope of practice.

B. Discussion of building Department psychomotor skill sheets and exam guidelines for AEMT.

Justin Hunter brought up the thought that with the AEMT and Paramedic psychomotor going away in the middle of next year why would the state need to provide psychomotor skill sheets to the training program. He said why don't the training programs create their own skill sheets to verify competencies for their students. The rest of the committee agreed. The decision was made by the group that the training programs would develop their own psychomotor skill sheets for AEMT student verification. The committee also agreed the only documentation they state needs to provide is the NREMT psychomotor final skill sheets for EMR and EMT NREMT psychomotor exams.

VII. Public Comment:


Mr. Hunter let the committee know that he renews by testing each cycle and he wants to let everyone know that the TEI questions are on the test. The registry let you know how many correct answers there are. Ms. Riggs states they asked the National Registry to do this when the nursing test do not. The registry states they already have enough complain about how tough the test is currently. Mr. Gilpin and Ms. Riggs states they are still piloting those questions. They also stated that if you meet the minimum and have questions left, they will get tougher to see what your maximum might be. Mr. Hunter asked how are we preparing our student for these tests? R. Gilpin states we are not and that we will have to write some of those questions on our own until to publishers get caught up. For the registry if you miss one of the correct answers you miss the whole question. Mr. Hunter just wanted to make the committee aware they might want to start working on some of these type test questions to help prepare their students. Ms. Riggs stated that we need to get instructors writing those types of questions and we could possibly do that through a webinar, OEMTA or Medic Update etc. Mr. Braden asked if they would be adding those to the state EMR test. Mr. Gilpin stated he just sat in on a review of that in November or December. They went into and cleaned up that test t were wrong. He does know they are very open to if we say we need to add some of these questions they would be very open to it if we could get a group of people come in and sit down and write some of these questions and sit in on some of the meeting.

Mr. Hunter brought up a question about the distributed education wavier that ends in March do you know if it will be extended. He also asked if the committee knew that does not apply to someone who has lapsed or is somebody is getting their initial EMT through reciprocity. They must take a 20-hour course NCCP course they can only have seven hours that have to be live. Mr. Hunter would like to know why that is.

VIII. Meeting Dates:

Next Meeting May 11, 2022, at 9:00

IX. Adjournment: Motion to adjourn made by Eugene Sateren. Adjourned at 11:30 am.



Chairperson Justin Hunter