



**RECOMMENDATION FOR CONSIDERATION**

Board Meeting Date: December 9, 2015

Subject: BLS Psychomotor Exams

VTR#: 1215-05

Committee/Task Force: EMS Education Task Force

Recommended Goal

Recommended Policy Change

Other:

**Recommendation:**

The Department should allow BLS Education Institutes the option to conduct their own Psychomotor Exams with Regional Council oversight

**Rationale [Background]:**

This VTR was previously submitted to the Board at the June 2015 Board of Directors meeting as VTR 0615-05 and subsequently tabled due to lack of information regarding regulatory oversight and quality assurance concerns. Implementation considerations regarding regulatory oversight were added to address this concern. All other information and the intent of the VTR remain the same.

Currently all BLS Psychomotor Examinations are conducted by the Regional Councils. While this process has been in practice for many years, it does not always meet the needs of the BLS education institutes in terms of testing their candidates in a timely fashion. Scheduling of BLS psychomotor exams across the Commonwealth varies greatly by region, and thus available testing dates do not always align well with the end of BLS certification courses. This can result in unnecessary time delays between when a student finishes a course and when they can take a psychomotor exam. Education institutes have observed a correlation between time elapsed from course end to test date and overall student success in passing the psychomotor exams.

The Bureau of EMS and Chester County Regional EMS Council have been engaged in a pilot program with Good Fellowship Ambulance and EMS Training Institute, allowing Good Fellowship to conduct their own psychomotor exams with regional oversight. Good Fellowship reports being satisfied with the outcomes and feels that the additional expense that they incur in conducting their own tests is worth the value added in being a “one stop shop” for students seeking certification.

The task force emphasizes this should be optional for education institutes. The task force also encourages those who opt to conduct their own exams to allow them to be “open” for students from other programs to participate. This will provide more availability for testing and retesting. The task force strongly supports regional oversight of the testing and evaluation process to prevent the perception of impropriety by EMS Education Institutes conducting their own psychomotor exams.

**Fiscal Concerns:**

The recommendation is to allow BLS education institutes the option to conduct their own psychomotor exams, this would result in increased expenses for the program, but at their option. As training institutes choose to conduct their own examinations, it is believed that regional councils would see cost savings in reduced staffing needs for BLS psychomotor exams. This change would also afford regional councils the needed time to focus on other educational needs of the system.

**Educational Concerns:**

Beyond procedural changes, no educational concerns exist, as current BLS psychomotor exam evaluators could be utilized to conduct the examinations. In addition, a standardized curriculum has been developed and approved by the Bureau of EMS to train new examiners.

**Implementation Considerations:**

Members of the Board previously voiced concerns that the VTR lacked detail regarding regulatory oversight. After consultation with the Bureau of EMS, the following implementation considerations are offered in regards to regulatory oversight:

- Regional Councils should supply the training institutes with exam materials for each exam. This could be done in a similar to fashion to the NREMT box currently used for ALS psychomotor exams.
- Evaluators should be required to take a standardized training.
- Evaluators should not be faculty who taught the students being tested.
- Training institutes should use evaluators from a list of region approved evaluators
- Regional council staff should be present for all exams during an “introductory period” to be determined by the Bureau of EMS.
- Following the introductory period, Regional staff should conduct an onsite audit of psychomotor examinations at a minimum of once per accreditation period.
- In addition to regular onsite audits prescribed above, onsite audits should also be performed based on the following triggers:
  - o Fail rates one standard deviation above or below the statewide average for all training institutes
  - o Legitimate complaints as received by the Bureau of EMS
  - o Administrative failures identified by the Bureau of EMS – i.e. incomplete/inaccurate paperwork

These are merely suggestions and do not change the intent of the VTR. The Bureau should conduct regulatory oversight consistent with current standards of the Department of Health

The PEHSC Committee/Task Force offers consultation to the Department in regard to the content of this Vote to Recommend (VTR) and its attached documents. The PEHSC Committee/Task Force specifically offers staff or member support to participate in Department deliberations regarding this recommendation in an effort to convey committee/task force discussions.

**Board Meeting Comments/Concerns:**

No board comments or concerns expressed.

Signed: \_\_\_\_\_

President

Date \_\_\_\_\_

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For PEHSC Use Only – PA Department of Health Response

Accept: \_\_\_\_\_

Table: \_\_\_\_\_

Modify: \_\_\_\_\_

Reject: \_\_\_\_\_

Comments:

Date of Department Response: \_\_\_\_\_