

NM JOE EMT Basic Testing Guidelines

The purpose of guidelines is to align NM EMT psychomotor testing with how students will be expected to perform in the field and also with what the NREMT standards are moving towards. The current NREMT plan is that Paramedics will be tested using the Paramedic Psychomotor Competency Portfolio beginning August 1, 2016.

Option 1:

Traditional 'National Registry style' test site at the end of the course, with 6 skill stations and 9 total attempts to correctly perform the skills. This is clearly laid out in the current JOE testing standards approved 3/3/2011 and will not change if this proposal is accepted.

Option 2:

Portfolio testing.

- Candidates will perform skills over the course of the semester, initially with peer evaluations.
- Required number of peer evaluations will be designated by the individual programs.
- Once they have met that requirement, students will be formally tested out by an instructor.
- After this test out, the skill is liable to be retested at any time during the semester.

Failure to correctly perform the skill after the test out will result in the student entering a remediation program, as designed by the institution, and being retested on the individual skill.

Skills to be tested are:

1. Patient assessment
 - a. Trauma
 - b. Medical
2. Medication administration
 - a. IM

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- b. SQ
 - c. IN
 - d. SL
 - e. PO
 - f. SVN
3. Airway management
 - a. Supraglottic airways
 - b. OPA/NPA/Suction
 4. Splinting
 - a. Long bone
 - b. Joint
 - c. Traction
 5. Bleeding control and shock management
 6. Spinal Immobilization
 - a. Supine
 - b. Seated

Institutions are responsible for ensuring that all candidates have instructor sign-offs on each of the skills listed above prior to final testing.

At the end of the semester, institutions will test candidates out in a scenario format, with the candidates performing the skills dictated by the scenario. In this format, candidates will be evaluated in both the 'team member' and the 'team leader' role.

FINAL TESTING

Candidates will test four stations:

1. Medical assessment
2. Trauma assessment
3. Cardiac (non-arrest) assessment
4. Cardiac arrest management

Candidates will be divided into groups of three.

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With the candidates taking turns functioning as team members and team leaders, they will rotate together through the stations. The first three stations will be tested in a group format, with the same group staying together throughout all three. The fourth is a solo station.

Each team member will be evaluated individually in their role, so all candidates will clearly identify what role they are filling every time they enter a station. There will be a minimum of two proctors per station, ideally three, with one assigned to observe and evaluate a team member.

Each team will be assigned the same equipment which they will use to provide care for the patient in their scenario. This equipment will be theirs for the duration of testing and they are responsible to ensure they have the assigned equipment. They must be provided with time to restock their equipment in between stations.

While scenarios do not need to be written to use specific supplies or technical skills, they should require candidates to perform skills and make meaningful medical decisions. The purpose of the scenarios is to mimic 'real' calls as closely as possible and to allow proctors to evaluate candidate's decision making processes and critical thinking skills.

Examples of good base scenarios:

- Anaphylaxis
- AMI/Angina
- Hypoglycemia with altered LOC (but a patent airway)
- Asthma
- CHF exacerbation with Pulmonary Edema
- Fractured femur
- Penetrating trauma to the chest
- Narcotics OD

GRADING:

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Candidates must successfully perform in all four of the stations in order to pass the psychomotor exam. They will be permitted to retest the same day if they are unsuccessful in two of the stations. If they are unsuccessful in three or four stations, they are unsuccessful at the psychomotor exam and must find another exam to attend (if available). Candidates must be successful in both Team Leader and Team Member roles, so if they have to retest, the institutions must ensure they've successfully performed each role.

The responsibilities of each role are:

TEAM LEADER:

- Direct all aspects of patient care
- Ensure patient safety and provide appropriate care
- Clearly communicate with team members
- Appropriately manage interactions with patient and any family members
- Appropriately respond to patient care or safety concerns raised by team members

CRITICAL FAILURES FOR TEAM LEADER:

- Failure to manage patient care or the scene as a competent EMT
- Directing a dangerous or inappropriate intervention (mitigated if corrected by a team member)
- Poor communication or affect with team members
- Poor interactions or affect with family or bystanders
- Failure to respond to patient care or safety concerns raised by team members
- Care is dictated by repeated (more than one) prompts or suggestions from team members
- Failure to recognize and address incorrectly performed skills
- Abdicating leadership role to a Team Member

TEAM MEMBER:

- Follow directions from the Team Leader

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Perform skills, as directed, correctly

Raise any relevant patient safety concerns with the Team Leader

Assist in patient care

CRITICAL FAILURES FOR TEAM MEMBERS:

Failure to follow directions

Incorrect performance of individual skills

Not recognizing or raising patient care or safety concerns with Team Leader

Poor affect

Attempting to function in the Team Leader role

A candidate may not 'mix and match' their psychomotor skills exams.

If they have passed a portion of the 'traditional' exam format but need to retest and do so at a 'portfolio package' exam site, they must retest the entire exam. The same holds true going from portfolio to traditional.

RETESTING:

- If a candidate is unsuccessful in one or two stations, they must repeat those stations, functioning in the same role (either Team Member or Team Leader) they were initially unsuccessful in.
- The retest scenarios must be different than the initial scenarios.
- The teams may change based on other individual's success in the initial round of testing, but they should remain in teams of three.
- Each candidate must successfully perform as a Team Member and a Team Leader at least once.
- During retests, test site proctors and program faculty may fill the role of Team Member if there are not adequate candidates needing that station.
- If a candidate is unsuccessful in three or four stations, they are not permitted to retest the same day and must repeat all stations at a later date.

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- Candidates have two full attempts to successfully complete all aspects of the testing process. Any candidate who is not successful after two full attempts is required to retake the course to be eligible to license.
- A “full attempt” is defined as one test ‘site’ or testing day in which candidates are permitted the two retests.
 - Retesting individual stations the same day is a part of the “full attempt”.