



# KENTUCKY BOARD OF EMERGENCY MEDICAL SERVICES

## EMS Evaluator Training Program

Presented Today By:

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# COURSE OBJECTIVES

**Upon completion of this course the student will be able to:**

- List the regulatory requirements of 202 KAR 7:601, Section 22, to receive an EMS evaluator endorsement from KBEMS
- List the regulatory requirements of 202 KAR 7:601, Section 23, to renew EMS evaluator endorsement from KBEMS
- List EMS evaluator qualifications
- List the regulatory requirements in 202KAR 7:601, Section 24, Educator and Evaluator Oversight
- Identify staffing requirements to conduct practical/skills examinations
- Explain the requirements for Practical /Skill Examination stations for all provider levels and the evaluators role in the skill examination process



# REGULATORY REQUIREMENTS

## ADMINISTRATIVE REGULATIONS

### 202 KAR 7:601

Training, Education, and Continuing Education



# KAR 7:601 SECTION 22. EMS EVALUATOR

Section 22. EMS Evaluator. (1) An applicant for certification (endorsement) as an EMS evaluator shall:

- (a)1. Be currently certified as a Level I, Level II, or Level III EMS educator; or
2. Hold current unrestricted licensure in a state as a physician;
- (b) Have completed a board-approved evaluator training program;
- (c) Have a minimum of two (2) years' patient care experience prior to serving as an evaluator;
- (d) Submit a completed EMS Responder Application; and
- (e) Have paid all fees required by 202 KAR 7:030.



## KAR 7:601 SECTION 22. EMS EVALUATOR (CONTINUED)

(2) The certification (endorsement) period of an EMS evaluator shall be contemporaneous with the expiration date of a certificate or license issued by the board, the KBN or KBML, or the state that issues his or her license.



## KAR 7:601 SECTION 22. EMS EVALUATOR (CONTINUED)

(3) An EMS evaluator shall be certified as:

(a) Level I, which qualifies the evaluator to assess EMR candidates for certification;

(b) Level II, which certifies the evaluator to assess EMT and EMR candidates for certification; or

(c) Level III, which certifies the individual to evaluate paramedic, EMT, AEMT, and EMR candidates for certification or licensure. A licensed physician or registered nurse who is not also a licensed or certified EMS provider shall evaluate paramedics only



## KAR 7:601 SECTION 22. EMS EVALUATOR (CONTINUED)

A person certified as an A-EMT may evaluate A-EMTs, EMTs, and EMRs.

(4) An Individual shall not be endorsed as an EMS evaluator at a level greater than the level at which certified or licensed as an EMS educator.



## KAR 7:601 SECTION 23. RENEWAL OF EMS EVALUATOR ENDORSEMENT

A person who holds an endorsement as an EMS evaluator shall be eligible to renew the EMS evaluator endorsement if the individual:

- (1) Maintains current state certification or licensure as a provider;
- (2) During the certification period, participates in a minimum of two (2) separate evaluations on two (2) separate dates or attends a board-sponsored evaluator class;
- (3) Is not subject to discipline pursuant to KRS Chapter 311A;
- (4) Submits to the board a completed EMS Responder Application; and
- (5) Pays all fees required by 202 KAR 7:030.





# KAR 7:601 SECTION 24. EDUCATOR AND EVALUATOR OVERSIGHT

KBEMS may conduct scheduled or, if part of an official investigation, unscheduled visits to an EMS educator's classroom or to an EMS evaluation site to verify compliance with KRS Chapter 311A and 202 KAR Chapter 7, instructional quality, and evaluative standards required in this administrative regulation.



# IMPORTANT POINTS TO REMEMBER

- Evaluator Endorsement expiration is the same as the certification or licensure expiration
- Expiration of certification or licensure equates to the expiration of the Evaluator Endorsement
- There is no grace period
- Levels are the same as those of an Educator as well as those that the Evaluator can test
- Evaluator level can be no higher than their certification level



# NREMT TESTING GUIDELINES

- References found on [www.nremt.org](http://www.nremt.org)
- Exam Coordinators Manuals

NREMT refers to “Evaluators” as “Skills Examiner”

2011 EMR Users Guide

2011 EMT Users Guide

Advanced Level Certification Coordinator manual

Exam Coordinators Step by Step on line Procedures- Advanced

- This is a resource for ALL Evaluators



# EMS EVALUATOR SELECTION

- Chosen from Appropriate Medical Discipline
- Possess Appropriate Credentials & Acceptable to TEI
- Demonstrated Expertise in the Skill



# EVALUATOR CHARACTERISTICS

- Enthusiastic & Interested
- Fair
- Consistent
- OBJECTIVE!!!
- Respectful
- Reliable
- Impartial in Conduct & Evaluations



# EVALUATOR QUALIFICATIONS

- Currently Certified or Licensed with current endorsement
- Unbiased
- Never should the PRIMARY instructor act as an evaluator
- Casual Instructor staff may be utilized if necessary so long as they are not biased and do not evaluate any skill for which they served as the primary instructor



# EVALUATOR RESPONSIBILITIES

- Conduct Examination-related activities on an equal basis for ALL candidates
- Objectively observe & record each candidate's performance
- Act in a professional, unbiased, non-discriminatory manner
- Be cautious to avoid any perceived harassment of a candidate
- Remember, as an evaluator/skills examiner you are testing for MINIMAL SKILL COMPETENCIES!
- Always remember the "CRITICAL CRITERIA"
  
- KNOW THE CRITICAL CRITERIA FOR EACH SKILL STATION YOU EVALUATE!



# EVALUATOR RESPONSIBILITIES

- Record, Total, & Document Performance on Skill Sheets
- Provide consistent & specific instructions to each candidate
- Thoroughly Read/Know Specific Essay
- Check ALL Equipment/Props/Moulage





# EVALUATOR RESPONSIBILITIES

- Brief Simulated Patients/Assistants
- Assure Professional Conduct Throughout Examination
- Maintain Security of ALL Examination Material



# EVALUATOR RESPONSIBILITIES

- You must give your undivided attention to each and every candidate
- Do not take phone calls, read or send text messages or emails while testing any candidate
- You are not permitted to take photographs, videos or other digital copies of any portion of this examination for any reason
- Evaluating is like driving a vehicle, no distracted Evaluating!



# SHOCK AND DISMAY.....I'M HERE TO TEST WHAT ????





# EVALUATOR RESPONSIBILITIES

- Introduce yourself to the candidate
- Make sure the candidate does not linger in the station while preparing to test
- Take a few moments to print CLEARLY the first and last name of the candidate on the skill sheet (use ink)
- Be sure to record your name and date on the skill sheet
- Be sure to record the scenario or set number if required by skill set
- Read the instructions for the “Psychomotor Skills Candidate” exactly as printed at the end of your essays.



# EVALUATOR RESPONSIBILITIES

- When reading the instructions for the Psychomotor Skills you must read the instructions EXACTLY the same for each and every candidate.
- Give the candidate time to inspect equipment, answer any questions
- If the candidate brings their own equipment, make sure it is inspected, functions correctly and you understand how it operates



# EVALUATOR RESPONSIBILITIES

- Be sure to ask the candidate if they have any questions prior to beginning the skill testing
- If the instructions are posted, be sure to give a brief overview before you begin the testing
- The candidate MUST indicate that they understand the instructions



# EMT ASSISTANTS

- All assistants MUST be certified at a minimum, as an EMT-B and will serve as the trained partner for all candidates testing in the spinal immobilization and other random skills stations
- Assistants cannot be related to the candidate or be biased towards any candidate participating in the testing



# SIMULATED PATIENTS

Should be:

- Familiar with EMS operations
- Familiar with typical signs and symptoms of conditions that will be used in testing scenarios
- Capable of effectively acting out the role of a simulated patient





# SIMULATED PATIENTS

- Must be age appropriate and of average height & weight appropriate to the selected scenario
- Small children may not serve as patients
- Simulated trauma patients must be instructed to wear appropriate undergarments & cut-away clothing must be provided
- Simulated patients will become fatigued and need scheduled rest breaks



# QUESTIONS





# Patient Assessment Management/Trauma



# SUPPLIES FOR STATION

## PATIENT ASSESSMENT—TRAUMA

- One (1) Skill Evaluator
- One (1) Live Simulated Patient

### Equipment List:

- Examination Gloves
- BP Cuff
- Moulage Kit
- Cut-away-Clothes
- Pen Light
- Stethoscope
- Blanket
- Scissors/Tape



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA INSTRUCTIONS TO THE EVALUATOR

## The Station Requires:

- Well versed/rehearsed simulated trauma patient
- Appropriate use of trauma moulage
- Simulated trauma patient that presents with minimum airway, breathing, circulation and associated wound or injury (Scenario will be provided by Skills exam Rep.)
- Consistency of examination process, the testing scenarios should remain same for all candidates



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA INSTRUCTIONS TO THE EVALUATOR

Designed to **evaluate** the Candidate's:

- **ability** to integrate patient assessment and management skills on a moulaged patient with multiple systems trauma
- **ability** to participate in dialogue with the evaluator and the patient during a scenario based skill station
- **explanations and verbalization** of actions throughout assessment



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA INSTRUCTIONS TO THE EVALUATOR

During candidate Assessment

- Appropriate treatments should be verbally initiated
- Clinical information may need to be given by the evaluator to simulate certain signs and symptoms specific to the scenario
- The evaluator may need to remind the candidate that a procedure which has already been done. Sometimes, candidates need to be reminded of their progress through the scenario.



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA INSTRUCTIONS TO THE EVALUATOR

- Evaluate continuously the appropriate and acceptable out-of-hospital treatment protocols for hypovolemia, immediate transport decision and on-going reassessment of simulated patient's condition
- Documentation listing the exact sequence of events on evaluation instrument will insure consistency should questions arise
  - Tip: Take Notes. Document everything!





# PATIENT ASSESSMENT MANAGEMENT/TRAUMA

Instructions to the CANDIDATE



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA INSTRUCTIONS TO THE CANDIDATE

Station is designed to test the ability to:

- perform patient assessment of a patient of multi-system trauma
- “Physically Assess & Voice Treat” all conditions and injuries discovered
- Conduct, demonstrate and palpate the assessment as it would be performed in the field



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA INSTRUCTIONS TO THE CANDIDATE

- The Candidate should:
  - Communicate with patient
  - Remove clothing to shorts and bathing suit if deemed necessary
  - State everything that is being assessed
  - Ask the evaluator for clinical information not obtainable by visual or physical inspection after performance has been proven as to how it would have realistically been obtained.



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA INSTRUCTIONS TO THE CANDIDATE

The Candidate will have:

- two phantom EMTs working with the candidate correctly and carrying out verbal treatments as indicated
- 10 minutes to complete skill station
- Time to ask questions?
- Statement of agreement (*I agree that I have read and understand the instructions for this station and have reviewed the equipment available for my use in completing this skill*)



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA SAMPLE SCENARIO

*Responding to a call to find a 36 year old male supine on the ground outside of the hot zone of a burning building. Fire department on the scene, extricated the patient from the building upon arrival. All Emergency personnel arrived on the scene at the same time. The male is unconscious, and appears to be bleeding profusely from the chest.*

## •Scene Size-Up

- BSI (gloves or simulation)
- Scene safe (yes)
- Mechanism of injury (obvious smoke inhalation and trauma)
- Number of patients (one)
- Additional help needed? (BLS truck may need ALS assist)
- Consider Stabilization of Spine (yes)



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA

- Initial Assessment

- General Impression (not good unresponsive male)
- Responsiveness/level of consciousness (unconscious)
- Chief complaint/ life threats (unconscious male, profuse bleeding)
- Assess (A-B-C) and initiates oxygen interventions (airway management needed, inadequate respirations bpm)
- Assesses/controls major bleeding and assesses the pulse and characteristics (yes pulse, rate 138 bpm, bounding, profuse bleeding Right mid axillary)
- Assess skin and characteristics (pale, ashen, cool diaphoretic)
- Transport Decision (Immediate)



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA

- Selects Focused Physical Exam and History/Rapid Trauma Assessment (rapid)
- Obtain baseline vital signs any time during this section. Depending on individual scenario that has been provided (B/P 120/40 HR 138, Resp. 6 shallow—airway controlled and assisted)
- Obtains S.A.M.P.L.E. History (unconscious, unknown allergies, no medications, unknown)
- Assess, Inspects and Palpates full body exam (Eyes are PEARL, Profuse bleeding puncture wound (gunshot) Right Mid axillary, breath sounds right side dull, paradoxical breathing) No other deficits noted
- Hypovolemic shock treatment required
- Manages secondary wounds appropriately and verbalizes reassessment of vital signs.



# PATIENT ASSESSMENT MANAGEMENT/TRAUMA

- Check the Critical Criteria
- Document in sequence as actions and treatments occur
- Comments of areas that were missed or inappropriate actions should be noted on the reverse side. Documentation is important if a candidate fails to complete the skill station successfully.





# OPEN DISCUSSION FOR QUESTIONS AND ANSWERS





# SPINAL IMMOBILIZATION (SEATED PATIENT)

--One (1) Skill Evaluator

--One (1) Trained Assistant

--One (1) Live Simulated Patient

## Equipment List:

--Examination Gloves

--Cervical Collars

--Long spine Board

--Padding

--Pt. Securing Straps

--Head Immobilizer

--Roller Gauze/Cravats

--Tape

--Short Spine Immobilization Device



# SPINAL IMMOBILIZATION (SEATED PATIENT)

Reference:

**“Instructions to the SKILL  
EVALUATORS—  
Spinal Immobilization (Seated Patient)”**

**NOTE: Level I (DOES NOT PERFORM  
THIS SKILL)**



# SPINAL IMMOBILIZATION (SEATED PATIENT) INSTRUCTIONS TO THE EVALUATOR

Designed to **evaluate** the Candidate's:

- ability to provide spinal immobilization to a sitting patient using a half-spine immobilization device without compromising spinal integrity
- ability to verbally describe the procedure to transfer and immobilize the patient onto a long backboard



# SPINAL IMMOBILIZATION (SEATED PATIENT)

Reference:

“Instructions to the CANDIDATE—  
Spinal Immobilization (Seated Patient)”

**Level-I (DOES NOT PERFORM THIS  
SKILL)**



# SPINAL IMMOBILIZATION (SEATED PATIENT) INSTRUCTIONS TO THE CANDIDATE

Designed to test the **ability** to provide spinal immobilizations on a patient using a half spine immobilization device

- **LEVEL-I** (Exempt, is not required to apply)
- **LEVEL-II** (DRAW: SUPINE OR SEATED )
- **LEVEL-III** (DRAW: SUPINE, SEATED or BLEEDING & SHOCK)



# SPINAL IMMobilIZATION (SEATED PATIENT) SKILL SHEETS

*You arrive on the scene of a vehicle accident with ONE(1) EMT assistant. The scene size-up and initial assessment has been done. You have an isolated problem with an unstable spine on a patient that is **seated** in the car. Using the half spine immobilization device perform the skill to transport this patient*

- Application of Immobilization Device
  - BSI (gloves or simulation)
  - Directs assistant to Maintain head in neutral, in-line position
  - Directs assistant to place Manual immobilization of head
  - Assess motor, sensory and circulation in each extremity
  - Applies Cervical Collar
  - Positions the immobilization device behind patient
  - Secures the device to patient's torso, adjusts as necessary
  - Evaluates and pads behind the head as necessary
  - Secures patient's head to the device
  - Verbalizes moving the patient to a long board
  - Reassess motor, sensory and circulation in each extremity



# SPINAL IMMOBILIZATION (SEATED)

• <http://www.youtube.com/watch?v=gF-YvQ-Kxsw>





# BASIC SKILL SHEETS

## EMR/EMT

• <http://kbems.kctcs.edu/About/Forms.aspx>



# ADVANCED/PARAMEDIC SKILLS EXAMINATIONS: NREMT

• <http://www.nremt.org/>



# SUMMARY

- Always remain fair, unbiased and respectful of all candidates
- Always remain professional
- Remember that you evaluating for “minimum” entry level competency
- Maintain all confidentiality of testing documents
- Document EVERYTHING!



# QUESTIONS/COMMENTS?



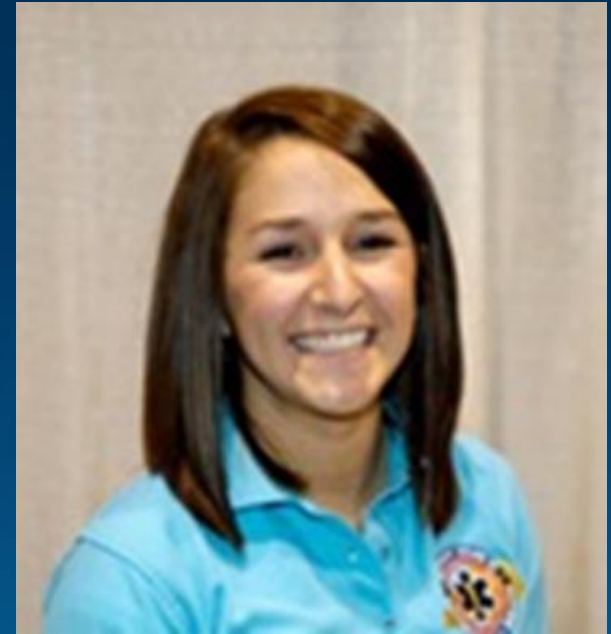


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# THANK YOU FOR YOUR PARTICIPATION!

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