(Effective until September 30, 2024)

- WAC 246-976-163 The OTEP method of recertification. (1) Ongoing training and evaluation programs (OTEP):
- (a) Must provide knowledge and skill evaluations following completion of each topic presentation to determine student competence of topic content.
- (i) Must record practical skill evaluations on skill evaluation forms from nationally recognized training programs, or on department-approved practical skill evaluation forms, for the level of certification being taught.
- (ii) If an evaluation form is not provided, a skill evaluation form must be developed and approved by the MPD and the department to evaluate the skill;
 - (b) Must be conducted at least on a quarterly basis;
- (c) Must be approved by the MPD and the department. Any additions or major changes to an approved OTEP requires documented approval from the county MPD and the department;
- (d) Must be presented and evaluated by course personnel meeting the following qualifications:
 - (i) Evaluators must:
- (A) Be a currently certified Washington EMS provider who has completed at least one certification cycle. Certification must be at or above the level of certification being evaluated;
- (B) Complete an MPD approved evaluator's workshop, specific to the level of certification being evaluated, which teaches participants to properly evaluate practical skills using the skill evaluation forms identified in (a) of this subsection. Participants must demonstrate proficiency to successfully complete the workshop;
 - (C) Complete the evaluator application, DOH Form 530-012;
 - (I) Be approved by the county MPD and the department; and
- (II) Submit the MPD approved EMS evaluator application to the department.
- (D) Meet education and participation requirements as identified by the county medical program director;
- (E) Be recommended for reapproval by the county medical program director upon EMS credential recertification.
 - (ii) Instructors must:
- (A) Be a currently approved EMS evaluator at or above the level of certification being taught;
- (B) Be approved by the county MPD to instruct and evaluate EMS topics;
- (iii) Guest lecturers, when used, must have specific knowledge and experience in the skills of the prehospital emergency care field for the topic being presented and be approved by the county MPD to instruct EMS topics;
- (e) May use online training to provide all or a portion of an OTEP when:
- (i) Online training provides sufficient topic content to meet all annual and certification period requirements;
- (ii) Each didactic training topic requires an online cognitive evaluation after the training. Successful completion of the topic evaluation is required to receive credit for the topic;
- (iii) Instruction and demonstration of all practical skills are provided in person by an SEI or qualified EMS evaluator approved by the MPD to instruct the practical skills;

- (iv) Each practical evaluation is completed and scored in the presence of a state approved EMS evaluator or SEI. Each evaluation must be successfully completed to receive credit for the practical skill.
- (2) To complete the OTEP method of recertification, the EMS provider:
- (a) Must complete a county MPD and department-approved OTEP that includes requirements indicated in Table A of this section, for the certification period, appropriate to the level of certification;

Table A Education Requirements for Recertification

	EMR	EMT	AEMT	Paramedic			
Annual Requirements							
Cardiovascular education and training	X	X	X	X			
Spinal immobilization	X	X	X	X			
Patient assessment	X	X	X	X			
Certification Period Requirements							
Infectious disease	X	X	X	X			
Trauma	X	X	X	X			
Pharmacology		X	X	X			
Other pediatric topics	X	X	X	X			
* Total minimum education hours per certification period:	15 hrs	30 hrs	60 hrs	150 hrs			

[&]quot;X" Indicates an individual must demonstrate knowledge and competency in the topic or skill.

* Individuals obtaining education through the CME method must complete the total number of educational course hours indicated above. However, due to the competency-based nature of OTEP, fewer class hours may be needed to complete these requirements than the total course hours indicated above.

(b) Complete and document the skills maintenance requirements, indicated in Table B of this section, appropriate to the level of certification. Skill maintenance requirements may be obtained as part of the OTEP.

Table B
Skills Maintenance Requirements for the OTEP Method

		EMR	EMT	AEMT	Paramedic
Firs	t Certification Period or Three Years				
	First Year				
	IV starts		EMT w/IV therapy skill 12	12	12
	Human endotracheal intubations				4
	Intraosseous infusion placement		EMT w/IV therapy skill X	X	X
	Second and Third Years				
	IV starts over the two-year period		EMT w/IV therapy skill 12	24	24
	Human endotracheal intubations over the two-year period				8
	Intraosseous infusion placement		EMT w/IV therapy skill X	X	X
Dur	ing the Certification Period	'		<u> </u>	
	Pediatric airway management		EMR & EMT	X	X

		EMR	EMT	AEMT	Paramedic
			X		
	Supraglottic airway placement		EMT w/supraglottic airway skill	X	X
			X		
	Defibrillation	X	X	X	X
Late	r Certification Periods	•			
	Annual Requirements				
	IV starts		EMT w/IV therapy skill	X	X
			X		
	Human endotracheal intubation				2
	Intraosseous infusion placement		EMT w/IV therapy skill	X	X
			X		
	During the Certification Period				
	Pediatric airway management		EMR & EMT	X	X
			X		
	Supraglottic airway placement		EMT w/supraglottic airway skill	X	X
			X		
	Defibrillation	X	X	X	X

- "X" Indicates an individual must demonstrate proficiency of the skill to the satisfaction of the MPD.
- (c) EMS providers using the OTEP method meet skill maintenance requirements by demonstrating proficiency in the application of those skills to the county MPD during the OTEP.
- (d) Any EMS provider changing from the OTEP method to the CME method must meet all requirements of the CME method.
- (3) Skill maintenance requirements for applicants requesting reciprocal certification:
- (a) Reciprocity applicants credentialed less than three years must meet Washington state's skill maintenance requirements for the initial certification period identified above.
- (b) Reciprocity applicants credentialed three years or more must meet Washington state's skill maintenance requirements for second and subsequent certification periods.
- (c) The county MPD may evaluate an EMS provider's skills to determine proficiency in the application of those skills prior to recommending certification. The MPD may recommend that an EMS provider obtain specific training to become proficient in any skills deemed insufficient by the MPD or delegate.
- (4) Definitions of selected terms used in Tables A and B of this section:
- (a) Cardiovascular education and training for adults, children, and infants includes:
- (i) Nationally recognized training programs for CPR, foreign body airway obstruction (FBAO), and defibrillation and patient care appropriate to the level of certification;
- (ii) The use of airway adjuncts appropriate to the level of certification; and
 - (iii) The care of cardiac and stroke patients.
- (b) Endotracheal intubation: Proficiency includes the verification of proper tube placement and continued placement of the endotracheal tube in the trachea through procedures identified in county MPD protocols.

- (c) Infectious disease: Infectious disease training must meet the requirements of chapter 70.24 RCW.
- (d) Intraosseous infusion: Proficiency in intraosseous line placement.
- (e) IV starts: Proficiency in intravenous catheterization performed on sick, injured, or preoperative adult and pediatric patients. With written authorization of the MPD, IV starts may be performed on artificial training aids.
- (f) Supraglottic airway placement: Proficiency includes the verification of tube placement and continued placement of the supraglottic airway, in a skill lab setting, through procedures identified in county MPD protocols.
- (g) Other pediatric topics: This includes anatomy and physiology and medical problems including special needs patients appropriate to the level of certification.
- (h) Patient assessment: This includes adult, pediatric, and geriatric patients appropriate to the level of certification.
- (i) Pharmacology: Pharmacology specific to the medications approved by the MPD (not required for EMRs).
- (j) Proficiency: Ability to demonstrate and perform all aspects of a skill properly to the satisfaction of the MPD or delegate.
- (k) Spinal immobilization and packaging: This includes adult, pediatric, and geriatric patients appropriate to the level of certification.
- (1) Trauma: For adult, pediatric, and geriatric patients appropriate to the level of certification.

[Statutory Authority: Chapters 18.71, 18.73, and 70.168 RCW. WSR 11-07-078, § 246-976-163, filed 3/22/11, effective 5/15/11.]

(Effective September 30, 2024)

- WAC 246-976-163 The OTEP method of recertification. (1) To recertify using the OTEP method, an EMS provider must complete a county MPD and department-approved OTEP that meets requirements in WAC 246-976-026, 246-976-161, and this section. Due to the competency-based nature of OTEP, fewer class hours may be required to complete the requirements than the recommended hours identified in WAC 246-976-161.
- (2) The EMS provider must complete requirements appropriate to the level of certification for each certification period and maintain competency in knowledge and skills. The EMS provider must demonstrate competency in knowledge and the ability to perform a skill properly to the satisfaction of the MPD or approved MPD delegate.
- (3) An EMS provider may transition from the CME to the OTEP method of recertification within their certification period if the provider meets all the following:
 - (a) Has at least one year remaining in their certification cycle;
- (b) Meets all requirements in WAC 246-976-161 by the end of their certification cycle;
- (c) Meets all of the requirements in this section by the end of their certification cycle;
- (d) Has completed and submitted the department continuing medical education and ongoing training gap tool to the MPD;
- (e) Has received an MPD approved education plan to meet any deficiencies; and

- (f) Has been approved by the MPD to transition recertification methods.
- (4) An EMS provider must transition from OTEP to CME if they are unable to meet the requirements of the OTEP method of recertification.

[Statutory Authority: RCW 18.71.205, 18.73.081, 43.70.040, 70.168.050, 2017 c 70, 2017 c 295, 2020 c 76, 2021 c 276, 2019 c 314, 2021 c 69, and 2022 c 136. WSR 24-15-104, § 246-976-163, filed 7/22/24, effective 9/30/24. Statutory Authority: Chapters 18.71, 18.73, and 70.168 RCW. WSR 11-07-078, § 246-976-163, filed 3/22/11, effective 5/15/11.]