



**Janet Napolitano**  
Governor

**Joey Ridenour**  
Executive Director

## Arizona State Board of Nursing

### **MEDICATION TECHNICIAN PILOT STUDY STEERING COMMITTEE**

#### **MINUTES**

**MARCH 9, 2006**

#### **MEMBERS PRESENT**

Pamela Randolph, RN, MS, CPNP Co-Chair  
Joey Ridenour, RN, MN Co-Chair  
Kathleen Collins-Pagels  
Helen Houser, RN  
Anamarie McNeese, RN  
Dean Wright, Pharm Board

#### **GUESTS PRESENT**

Paul Dorrance, D&S Diversified Technologies

#### **MEMBERS ABSENT**

Sylvia Balistreri, DHS  
Jane Black, RN, MS  
Joyceen Boyle, RN, PhD  
Kathy Boyle, RN  
Mary Fermazin, MD, MPA  
John Durbin  
Sarah Ellis, RN  
Betty Earp, RN  
Julie Gordon  
Sue Macdonald, RN, MSN  
Patt Rehn, AzNA  
Christine Walker, RN, NHA

### **I. CALL TO ORDER/INTRODUCTIONS/APPROVAL MINUTES**

The Certified Medication Technician Pilot Study Steering Committee was called to order by Pamela Randolph at 9:52 a.m.

Information gathered will be presented to the Board as 'information only' because Committee members present did not constitute a quorum. The January 24, 2006 meeting minutes were neither reviewed nor approved, and will be placed on the next meeting agenda. Members present will be used as a panel of experts to review the manual skills test.

### **II. OVERALL PROGRESS REPORT**

#### **A. Contract**

Kathleen Collins-Pagels reported on the progress of the contract. Financial obligations have been met by each of the participating facilities. A check has been sent to D&S Diversified Technologies. Mr. Dorrance acknowledged receipt. Pagels is in possession of signed contracts and confirmed the return signed contract from the foundation. Silver

Ridge Village expressed concerns regarding staffing patterns and potential staffing changes as Silver Ridge has added a new facility, River Gardens, and does not want to be precluded from participation. Silver Ridge wants reassurance before proceeding. The facility may have some interchange of staff but does not anticipate diminishing nursing positions. Operations may experience some flux during the acquisition of the new site. Pagels advised Silver Ridge Village to be consistent in updating the Board and the CMT Pilot Study Steering Committee of internal changes. Pagels informed Silver Ridge that there would be no opportunity to reduce any positions that were in any way related to the Medication Technician pilot study.

## **B. Education**

The Train-the-Trainer instructors training course was conducted on March 3 and 4, 2006. Sixteen instructors were trained. Two participants trained the first day but were unable to attend the second day. Those participants will receive Day 2 instruction which will bring the total number of instructors trained to 18. Evaluations indicated that participants liked the speakers. The more prepared participants seemed to get more out of the workshop than those who did not clearly understand their role. Participants enjoyed the hands-on groups and noted that administrators and DONs should have participated so that they would understand how much work the CMT training and course development would entail. Evaluations showed that participants particularly liked Rose Wilcox' session on testing and writing test questions.

Participants were told that the Board must be informed every time a training session begins. A master calendar of the training sessions will be kept. Two site-visits will be conducted. One unannounced visit will be conducted during the didactic session and then one announced visit during the clinical session to check on compliance with protocols and supervision.

The lowest evaluation score was 3 on a scale of 1-5. Most were 4 or 5 for the instructors and the objectives. Evaluation feedback included the following:

- handouts were very informative; learned some great teaching tools from the second day when were divided into groups;
- the food was great;
- wanted to see more examples visually sometimes was lost in what was being presented;
- wanted more opportunities to review specifics of course materials;
- liked test development; wanted more teaching on test development;
- great teachers;
- organized;
- syllabus prepared;
- liked best learning to be a test-wise trainer; presentations and notebooks and group activities was great;
- wanted to start later; did not like room;
- wanted more practice sessions, lesson plans and test questions divided into two labs;
- liked reference materials;

- administrators and DONs need to come so they can be aware of the time factor, equipment requirements to get this program running;
- excellent preparation for presenters; liked specifics given to them and the reasons.

### **C. Collection of Data**

Paul Dorrance provided an update on the progress of the observers. Dorrance reported that training took place on March 8, 2006 at Plaza Del Rio. Training included an overview of the eleven errors that will be tracked. Bobbi Sutherland was on hand to go over material. The initial training took approximately four hours. The first medication pass started at 3:30 p.m. The researchers are being synchronized as teams. Sutherland, having had 20 years experience in surveying, led the teams in documenting administration of doses and then led researchers individually on medication passes. This process is taking place to ensure that the researchers are consistent with Sutherland's process. Researchers will be synchronized which enable the team to provide inter-rater-reliability for the study. The actual samples will begin on Monday, March 13, 2006.

There are four teams. Each team will go to each of the six sites, and each will do 125 medication samples or opportunities for error at each of the six sites. The observation is being distributed in order to obtain an equal number of administrations in the a.m. and the p.m. to cover the possibility of divergence of errors between the shifts. Samples will be done on both RN and LPN in the pre data collection.

## **III. TESTING**

### **A. Written Test Progress Report**

Dorrance reported that Arizona has over 500 test questions written to date. Montana has written approximately 400, and Ohio has weighed in with 144 and is continuing to develop questions. There is now a pool of upwards of 900 questions to select from for the medication technician written test in Arizona. The test advisory panel has met to ensure that all questions in the test bank for Arizona reflect the curriculum.

### **B. Manual Skills Test Approval**

D&S Diversified Technologies took the manual skills test to Ohio. The Arizona test questions did not include those based on CNA competencies and those that did not relate in any way to pharmacology. Many physiology and medical terminology questions were not included. The bulk of the test is on medication administration. Questions relative to drug classification and purpose have been included as well.

The skills test has gone through three test advisory sessions, two in Ohio and one in Arizona. Difficulty on skills tasks have been increased from 3-4 to 4-5. As a result, two tasks will be given to the candidates instead of three so there will be a total of 9 points of difficulty every time there is a skill test administered. In order to demonstrate proficiency candidates will now have 5 things to do. Items will be selected randomly by computer so that each student will have a different test.

D&S Diversified Technologies recommended the test advisory panel include in the manual skills portion of the test two otic medications, two eye medications, two nasal medications, multiple tablets, controlled substances, two times for drugs where candidate has to do apical before drug administration, capsules, and oral liquid (multiples and combinations). Certain steps will be identified as critical that the candidate must perform in order to pass that particular skill. There will also steps identified that require the candidate to not miss enough to cause them to fall below a certain percentage (typically set at 80%). Candidates can therefore fail by either missing a critical step or by missing more than 20%.

Members present felt the list provided was consistent with what the test advisory panel determined was critical. Confidentiality issues and Board authority regarding potential action against a license for violating the confidentiality agreement were discussed. Ridenour urged Dorrance to edit the language of the agreement to state that a complaint *may* be filed with the Board rather than to suggest that the Board has the authority to automatically discipline a license for disclosing matters discussed relative to the test.

Manual skills lists were reviewed and edited to maintain consistency with the curriculum and protocols as developed by the Medication Technician Pilot Study Steering Committee and approved by the Board.

The manual skills test will be presented to the Board at the March 20 – 22, 2006 Board meeting for approval. A non-confidential Handbook will be included in the late mailing packet for the Board.

An additional review session with Randolph, Wilcox, Houser, Earp, Macdonald and McNeese is tentatively scheduled for Monday, March 20, 2006 from 9:00 a.m. to noon. Randolph will remind test advisory panel members via e-mail memorandum.

#### **IV. PRESENTATIONS (AzNA)**

Randolph reported that she did a presentation at AzNA on the Medication Technician Pilot Study. There were approximately 30 guests in the audience. The presentation was well received.

#### **V. MICHIGAN PARTICIPATION**

There has been no recent contact with the Michigan Board regarding participation in the Certified Medication Technician Pilot Study.

#### **VI. TIMELINES**

Timelines have been revised to be more realistic.

#### **VII. CALL TO PUBLIC**

There was no call to public.

**VIII. FUTURE TOPICS – DEBRIEFING**

Committee meetings will be held quarterly as there are more administrative decisions being made and less work for Committee members to vote on at this time.

**IX. ADJOURNMENT**

There being no further business, the meeting adjourned at 12:00 p.m.

Minutes Approved by:  05/03/06  
Pamela Randolph, RN, Nurse Practice Consultant/Education Date