

EMERGENCY MEDICAL TECHNICIAN-I (EMT-I) TRAINING

1. An agency or institution may request approval from the Riverside County EMS Agency as an EMT-I training provider.
2. Any institution/agency requesting approval as an EMT-I training/refreshers provider must meet the qualifications for training providers as outlined in Title 22 Regulations (Section 100065).
3. Provider approval shall be for four (4) years, ending on the final day of the final month of the approval period.
4. Any training/refreshers course offered by an approved provider must be executed within the approved periods. Courses beginning or ending outside of an approval period will not be considered approved courses and certification will not be granted to the participants.
5. Approved training courses will abide by state laws, regulations, and Riverside County EMS Agency policies and procedures.
6. Minimum competency requirements for program participants to successfully complete and pass approved training/refreshers programs or a challenge examination will not be less than 80% on written final examinations and 80% on skills examinations, with 100% of the skills' critical factors attained.
7. Each course offered by an approved training program shall have a designated Principal Instructor (PI) who shall be responsible for covering the approved content as specified by the program, personally instruct a minimum of 51% of the course content, be available for student conferences, and, in conjunction with the Program Director, oversee and approve all student grades.
8. Notification of each course offered by the approved provider shall be given to the EMS Agency using the "Notification of Proposed EMS Course" form, which shall be submitted as early as 60 days but not less than 30 days prior to the beginning of each course.
9. Challenge testing - test only option
 - 9.1 Approved training programs are required to offer an EMT-I challenge exam no less than once each time a course is offered.
 - 9.2 Challenge examinations shall be equivalent to the final written examination of a comprehensive EMT-I training program, with skills testing, to include, but not be limited to, patient assessment (medical and trauma), diagnostics and vital signs, all phases of airway management, spinal immobilization techniques, treatment of hemorrhage and shock, treatment of soft tissue injuries, splinting (to include traction splinting), AED, and childbirth.
10. Refresher classes must be offered no less than once per year.

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11. All qualified institutions/agencies shall submit the following:
 - 11.1 A completed “Application for EMS Training/Refresher Program Approval” (form EMS/TR-APP).
 - 11.2 The **completed** application packet a minimum of 90 days prior to the beginning of the first proposed course offering or 90 days prior to their current program expiration if applying for reapproval.
 - 11.3 The names and qualifications of their Program Director, Clinical Coordinator and Principal Instructor(s) using the appropriate forms.

12. The EMS Agency will notify the submitting institution/agency within ten (10) working days of the receipt of the application packet that:
 - 12.1 It has been received; and
 - 12.2 It is complete or, if not, what information is missing.

13. The EMS Agency will notify the submitting institution/agency in writing of the approval/disapproval decision within 90 days of the receipt of the completed application packet. If approval is not granted, the reasons will be specified in writing.

ADMINISTRATION: Program Approval**Policy: 4110****Date: 2/1/05**

EMT AED SERVICE PROVIDER

1. The purpose of this policy is to establish policies and procedures for Emergency Medical Technician-I Automated External Defibrillator (EMT AED) service provider approval.
2. Riverside County EMS Agency is responsible for reviewing and approving all EMS training programs within its jurisdiction. EMT AED training programs may be presented only by approved providers.
3. Provider agencies seeking approval to implement EMT AED service programs shall submit the appropriate materials and program approval information to the Riverside County EMS Agency, to include:
 - 3.1 A description of the geographical area where AED will be utilized.
 - 3.2 Identification and dispatch location of the units to be equipped and a list of personnel to be trained.
 - 3.3 The specific type (automatic or semi-automatic) and brand name of defibrillation equipment proposed for use.
 - 3.4 Name and qualifications of the Program Coordinator with a letter of commitment from him/her expressing a willingness to comply with Riverside County EMS Agency policies and procedures.
 - 3.5 The procedure(s) for creation and maintenance of patient care records and data collection
 - 3.6 A written quality improvement (QI) process (reference Policies #2130, #2140) within which the AED program would be reviewed, to include:
 - 3.6.1 The methodology for data collection and evaluation.
 - 3.6.2 The defined standards for measurement.
 - 3.6.3 The provision and documentation of training, skills review, and remedial work of all personnel.
 - 3.6.4 The method(s) by which evaluation results will be utilized by/incorporated into the program.
 - 3.7 Provisions for initial training and/or orientation of personnel as well as continued competency training, and documented demonstrations of skills proficiency.
 - 3.7.1 Initial training shall meet the minimum requirements as set forth by state regulations (reference Title 22, Section 100063.1).
 - 3.7.2 An orientation program to include written and skills testing, shall be established for newly hired personnel who have previously received AED training.
 - 3.8 An expression of agreement and willingness to abide by all state regulations and Riverside County EMS Agency policies and procedures.
4. Approved provider agencies shall provide all training and equipment necessary to ensure a sound AED program (e.g., manikins, defibrillation devices, audio-visual aids, etc.)

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5. Approved EMT AED service providers shall agree to provide time for all EMT-I personnel to attend the required education and skills proficiency sessions pursuant to the EMS Agency's policies and procedures and the provider agency's program as outlined in 3.7 above.
6. The provider agency shall provide annual reports to the EMS Agency on the EMT AED program utilizing the forms provided by the EMS Agency. These reports shall include all State and County requirements, including, but not limited to:
 - 6.1 The number of patients who received CPR prior to EMS arrival.
 - 6.2 The number of patients to whom the AED was applied.
 - 6.3 The number of patients who received defibrillatory shocks from the AED.
 - 6.4 The number of witnessed cardiac arrest patients.
 - 6.5 The number of witnessed cardiac arrest patients who received defibrillatory shocks (i.e., were in v tach or v fib)
 - 6.6 The number of defibrillated patients who were discharged from the hospital.
7. Approval by the EMS Agency must be received prior to instituting changes in:
 - 7.1 Program Coordinator.
 - 7.2 Defibrillation equipment - may require additional training / testing to demonstrate proficiency.
 - 7.3 Content of initial training and skills proficiency reviews.
8. The patient care record (PCR) and data collection methodology of the program shall include, at minimum:
 - 8.1 A PCR completed for each patient on whom the defibrillator device is applied. The report shall include, in addition to data normally recorded on a PCR, the following information:
 - 8.1.1 Time of patient collapse.
 - 8.1.2 Time of collapse to initiation of CPR.
 - 8.1.3 EMT-I team member name(s).
 - 8.1.4 Initial (presenting) rhythm identification.
 - 8.2 Each EMT AED run may be recorded on a tape cassette provided as an integral part of the defibrillator device.
 - 8.3 The EMT AED service provider shall maintain all PCRs for a minimum of seven (7) years. Any tape cassette recording produced by the defibrillator equipment is required to be maintained as long as necessary for the provider's QI process but need not be held more than one hundred (100) days.
9. Any and all records and data of the EMT AED program shall be provided to the EMS Agency upon their request.

ADMINISTRATION: Program Approval

**Policy: 4110
Date: 2/1/05**

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10. Each approved EMT AED service provider shall designate an EMT AED Program Coordinator who shall:
 - 10.1 Be a physician, registered nurse, physician's assistant, or EMT-P currently licensed in California.
 - 10.2 Ensure utilization of an AED training module approved by the Agency.
 - 10.3 Oversee the coordination of all clinical / field activities related to AED.
 - 10.4 Conduct a review within thirty (30) days of occurrence of 100% of EMT AED defibrillations.
 - 10.5 Ensure that periodic skills proficiency training and/or structured clinical experience is conducted.
 - 10.6 Ensure that all aspects of the EMT AED service provider program are in compliance with policies and procedures of the EMS Agency.
 - 10.7 Notify the EMS Agency Medical Director in writing of individuals failing to maintain the following:
 - 10.7.1 Continuous certification as an EMT-I.
 - 10.7.2 Acceptable AED field performance.
 - 10.7.3 Affiliation with an approved EMT AED service provider.
 - 10.8 Facilitate coordination between EMT-Ps, and EMT-Is utilizing AED.
 - 10.9 Act as a liaison to the EMS Agency concerning AED matters.

ADMINISTRATION: Program Approval

Policy: 4120

Date: 2/1/05

FIRST RESPONSER – DEFIBRILLATION PROVIDER AGENCY

1. The purpose of this policy is to establish policies and procedures for First Responder Defibrillation provider program approval.
2. Riverside County EMS Agency is responsible for reviewing and approving all EMS training programs within its jurisdiction. Defibrillation programs may be presented only by approved providers.
3. Provider agencies seeking approval to implement defibrillation programs shall submit the appropriate materials and program approval information to the Riverside County EMS Agency to include:
 - 3.1 A description of the geographic area where defibrillation will be utilized.
 - 3.2 The specific type (automatic or semi-automatic) and brand name of defibrillation equipment proposed for use.
 - 3.3 A signed letter of commitment from the proposed Defibrillation Medical Director expressing a willingness and the ability to comply with Riverside County EMS Agency policies and procedures. (All program Medical Director candidates are subject to the approval of the EMS Agency Medical Director.)
 - 3.4. Name and qualifications of the Program Coordinator with a copy of a letter of commitment from him/her expressing a willingness to comply with Riverside County EMS Agency policies and procedures.
 - 3.5 The procedure(s) for creation and maintenance of patient care records and data collection.
 - 3.6 A written quality improvement (QI) process (refer to Policies #2130 and #2140) within which the defibrillation program would be reviewed, to include:
 - 3.6.1 The methodology for data collection and evaluation (reference Medical Director responsibilities).
 - 3.6.2 The defined standards for measurement.
 - 3.6.3 The provision and documentation of training, maintenance of competency, and remedial work of all personnel.
 - 3.6.4 The method(s) by which evaluation results will be utilized by/incorporated into the program.
 - 3.7 Provisions for initial training and orientation of personnel as well as continued competency training.
 - 3.7.1 Initial training shall meet the minimum requirements as set forth by state regulations (reference Title 22 Section 100020).
 - 3.7.1.1 Initial training shall consist of a minimum of four (4) hours of didactic and skills education, including the topics outlined in Title 22, and must be submitted for review and approval by the EMS Agency.
 - 3.7.1.2 The final written and skills exams must be approved by the EMS Agency.

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- 3.7.1.3 Defibrillation instructors must show proof of American Heart Association or American Red Cross defibrillation instructor course completion, OR show proof of successful completion of an approved AED/SAED training course and completion of a course in adult teaching methodologies.
 - 3.7.2 Demonstration of continued competency shall be once every six (6) months.
 - 3.7.3 An orientation program to include written and skills testing, shall be established for newly hired personnel .
 - 3.8 An expression of agreement and willingness to abide by all state regulations and Riverside County EMS Agency policies and procedures.
- 4. Approved provider agencies shall provide all training, equipment, and maintenance necessary to ensure a sound defibrillation program (e.g., manikins, defibrillation devices, audio-visual aids, etc.).
- 5. Approved defibrillation provider agencies shall agree to provide time for all accredited personnel to attend continued competency training sessions pursuant to the EMS Agency's policies and procedures and the provider agency's program as outlined above.
- 6. The provider agency shall provide annual reports to the EMS Agency on the defibrillation program utilizing the forms provided by the EMS Agency. These reports shall meet all State and County requirements, and include, but not be limited to:
 - 6.1 The number of patients who received CPR prior to EMS arrival.
 - 6.2 The number of patients to whom the AED was applied.
 - 6.3 The number of patients who received defibrillatory shocks from the AED.
 - 6.4 The total number of witnessed cardiac arrest patients.
 - 6.5 The number of witnessed cardiac arrest patients who received defibrillatory shocks (i.e., were in v tach or v fib)
 - 6.6 The number of defibrillated patients who were discharged from the hospital.
- 7. Approval by the EMS Agency must be received prior to instituting changes in:
 - 7.1 Program Medical Director.
 - 7.2 Program Coordinator.
 - 7.3 Defibrillation equipment - may require additional training/testing to demonstrate proficiency.
 - 7.4 Content or frequency of competency demonstrations.

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8. The patient care record (PCR) and data collection methodology of the program shall include, at minimum:
 - 8.1 A report completed for each patient on whom the defibrillator device is applied. The report shall include, in addition to data normally recorded, the following information:
 - 8.1.1 Time of patient collapse.
 - 8.1.2 Time of collapse to initiation of CPR.
 - 8.1.3 Defibrillation team member name(s).
 - 8.1.4 Initial (presenting) rhythm identification.
 - 8.2 Each defibrillation run may be recorded on a tape cassette provided as an integral part of the defibrillator device.
 - 8.3 The provider agency shall maintain all written records for a minimum of seven (7) years. Any tape cassette recording produced by the defibrillation equipment is required to be maintained as long as necessary for the agency's QI process but need not be held more than one hundred (100) days.
9. Any and all records and data of the defibrillation program shall be provided to the EMS Agency upon their request.
10. Each approved defibrillation provider agency shall have a Physician Medical Director whose duties shall include the responsibility to:
 - 10.1 Oversee the coordination of all clinical/field activities related to defibrillation.
 - 10.2 Conduct a review within thirty (30) days of occurrence of 100% of defibrillations.
 - 10.3 Notify the EMS Agency Medical Director in writing of individuals failing to maintain the following:
 - 10.3.1 Continuous certification as a First Responder.
 - 10.3.2 Defibrillation skills competency demonstration at required intervals.
 - 10.3.3 Acceptable defibrillation field performance.
 - 10.3.4 Affiliation with an agency approved to utilize defibrillation.
 - 10.3.5 Successful completion of refresher training.
 - 10.4 Facilitate coordination between EMT-Ps , EMT-Is, EMT-Ds and other defibrillation providers.
11. Each approved defibrillation provider agency shall designate a Program Coordinator who shall:
 - 11.1 Be a physician, registered nurse, physician's assistant or EMT-P currently licensed in California.
 - 11.2 Act as liaison to the EMS Agency.
 - 11.3 Assist the program's Medical Director in the completion of his/her duties.
 - 11.4 Ensure utilization of a training program approved by the Agency.
 - 11.5 Ensure that periodic refresher training and/or structured clinical experience is conducted.

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- 11.6 Ensure that demonstration of defibrillation skill proficiency is conducted and documented at intervals not less than agreed upon with the EMS Agency.
- 11.7 Ensure that all administrative and training aspects of the defibrillation training program are in compliance with policies and procedures of the EMS Agency.

ADMINISTRATION: Program Approval**Policy: 4130****Date: 7/1/10**

EMT SKILLS COMPETENCY VERIFICATION

1. The purpose of this policy is to outline those steps required by any prehospital care provider, approved CE provider, or EMS training program within Riverside County that chooses to perform skills competency verification (SCV) for EMTs.
2. Any person authorized as a skills competency verifier (SCVr) must:
 - 2.1 Be a currently certified or licensed as EMT, EMT-P, registered nurse (RN), physician's assistant (PA) or physician (MD/DO) employed by a qualifying agency.
 - 2.2 Receive approved training from the agency designating them as a SCVr.
3. Skills competency verification shall be done by direct observation only.
4. EMTs requesting skills competency verification shall have the authorized person sign the State-approved skills competency verification form (EMSA-SCV (7/03)) at the time that the skill is observed and verified.
5. Designated skills competency verifiers will only sign-off those skills directly observed by them, and that meet the standards as set down by the pre-approved skills sheets.
 - 5.1 SCV forms should be signed in colored ink, preferably blue.
 - 5.2 All five areas corresponding to each skill on the form must be completed by the skills evaluator/SCVr -- name, signature, state license/certification number, affiliation, and date.
 - 5.3 It is not acceptable for SCVrs to complete item 5.2 (above) if sections 1a., 1b., and 1c. on the form have not been completed by the EMT seeking skills verification.
6. Qualifying agencies who wish to perform EMT skills competency verification shall:
 - 6.1 Have an approved skills sheet for each of the REMS-accepted skills in the ten (10) skills categories defined by the State.
 - 6.2 Use the skills sheets of the National Registry (NR) as the standard for skills competency verification. If no NR skill sheet exists for a particular skill, or if a variation of the NR skill sheet is desired, the skill sheet(s) used for verification shall be approved by the EMS Agency prior to implementation.
 - 6.2.1 Review skills sheets annually and update as appropriate for changes in the standard of care.
 - 6.3 Provide and document initial training to designated persons on use of the approved skills sheets.
 - 6.4 Submit a limited list of names of persons in their agency who have met the qualifications and training for SCV and who they wish to designate as skills competency verifiers (SCVrs).
 - 6.4.1 Qualifying agencies shall immediately notify the EMS Agency of any change -- addition or deletion -- in their cadre of qualified, trained, and approved SCVrs, supplying the name and effective date of change.
 - 6.5 Provide annual update / review training to their designated SCVrs.
 - 6.5.1 Attendees shall sign a roster verifying attendance.
 - 6.6 Submit verification of 6.1 - 6.5 to the EMS Agency as requested.

ADMINISTRATION: Program Approval**Policy: 4200****Date: 12/1/05****EMERGENCY MEDICAL DISPATCH (EMD) TRAINING**

1. The purpose of this policy is to define the requirements for emergency medical dispatch (EMD) training programs in Riverside County pursuant to the California Health & Safety Code Section 1797.220.
2. All Riverside County Emergency Medical Dispatch (EMD) Training Programs must meet the minimum requirements as described by the California State Emergency Medical Services Authority in the Emergency Medical Services Dispatch Program Guidelines (March 2003, EMSA #132).
3. Basic EMD training is designed to provide additional training to dispatchers who are already skilled and knowledgeable in dispatch and telecommunication procedures in order to provide medical assistance to callers.
4. Required Basic EMD Training Course Hours
 - 4.1 Basic EMD Training shall consist of not less than twenty-four (24) hours (one classroom hour of instruction shall be defined as fifty minutes).
 - 4.2 In addition, emergency medical dispatchers shall satisfactorily obtain and maintain a record of course completion in adult, child, and infant CPR.
5. The basic EMD training course content shall include instruction to result in competence in the following:
 - 5.1 Introduction:
 - 5.1.1 Emergency Medical Dispatcher role and responsibilities
 - 5.1.2 Legal and liability issues in EMD
 - 5.1.3 Emergency Medical Dispatch concepts
 - 5.2 Information gathering and dispatch
 - 5.2.1 Obtaining information from callers
 - 5.2.2 Resource identification and allocation
 - 5.2.3 Providing emergency care instructions, including Automated External Defibrillation
 - 5.3 EMD protocol reference system and chief complaints
 - 5.3.1 Introduction to the emergency medical dispatch protocol reference system
 - 5.3.2 Introduction to chief complaint types
 - 5.4 Local EMS system overview
 - 5.5 Scenario based skills/practical exercises
 - 5.6 Final examination
6. Course content shall be reviewed and approved by the EMD Medical Director who provides oversight of the program.

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7. EMD Instructor Criteria
 - 7.1 Each training program shall have a principal instructor(s), approved by the EMD Training Program Manager, who:
 - 7.1.1 Is a currently licensed or certified physician, registered nurse, physician assistant, EMT-P, or EMT-II, who has at least two years of practical experience within the last five years in pre-hospital emergency medical services, and with training in emergency medical dispatch; or
 - 7.1.2 Is an emergency medical dispatcher with at least two years of practical experience within the last five years.
8. Course Curriculum Certification
 - 8.1 EMD course curriculum shall be submitted to the training program provider's course curriculum certification agency (POST, CSFM, LEMSA, or EMSA).
 - 8.2 It is the training program provider's responsibility to submit the curriculum as required by their course curriculum certification agency, and to comply with the requisite policies and procedures of that agency.
 - 8.3 The training program provider shall issue a course completion record to each person who has successfully completed an EMD course.
9. An emergency medical dispatcher shall receive a minimum of twenty-four (24) hours of continuing dispatch education (CDE) every two years.
10. CDE shall be coordinated and organized through the EMD Provider Agency, and approved by the EMD Medical Director.
11. CDE shall include issues identified by the EMD continuous quality improvement process, and one or more of the following:
 - 11.1 Medical conditions, incident types, and criteria necessary when performing caller assessment and prioritization of medical calls;
 - 11.2 Use of the EMD protocol reference system;
 - 11.3 Call taking interrogation skills;
 - 11.4 Skills in providing telephone pre-arrival instructions;
 - 11.5 Technical aspects of the system (phone patching, emergency procedures, etc.);
 - 11.6 Skill practice and critique of skill performance; and/or
 - 11.7 Attendance at EMD workshops/conferences.
12. Methodologies for presenting CDE include:
 - 12.1 Formalized classroom lecture;
 - 12.2 Video, CD, Internet;
 - 12.3 Articles;
 - 12.4 Tape Reviews;

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- 12.5 Participation on medical dispatch committee; and/or:
- 12.6 Field observations (e.g. ride-alongs with EMS personnel or Emergency Department observation of communications activities).
- 13. Formalized classroom CDE may be submitted to the training program provider's course curriculum certification agency (POST, CSFM, LEMSA, or EMSA) to count towards continuing dispatch education credits.
 - 13.1 If the training program provider chooses to submit CDE curriculum to their course curriculum certification agency:
 - 13.1.1 It is the training program provider's responsibility to submit the CDE curriculum as required by their course curriculum certification agency, and to comply with the requisite policies and procedures of that agency.
 - 13.1.2 The training program provider shall issue a course completion record to each person who has successfully completed a CDE course.
- 14. Program approval or disapproval will be made by the Riverside County EMS Agency in writing within ninety (90) days of receipt of all required program documentation.
- 15. Program approval will be for a period of, initially, two (2) years, and four (4) years thereafter.
- 16. Noted program deficiencies must be corrected within sixty (60) days of written notification from the Riverside County EMS Agency.
- 17. All programs may be subject to on-site evaluation by the Riverside County EMS Agency.
- 18. Persons or agencies conducting an approved EMD training program must notify the Riverside County EMS Agency, in writing, at least thirty (30) days in advance of any substantial program changes.
- 19. All approved EMD training programs must reapply for approval a minimum of ninety (90) days prior to the program's current approval expiration date. The continuing approval request shall contain:
 - 19.1 A list of any program changes made since the last approval or continuing approval request.
 - 19.2 Any personnel changes made during the last approval period.
- 20. The EMD training program shall have an approved EMD Training Program Manager who is qualified by education and experienced in methods, materials, and evaluation of instruction as well as adult education theory and practice. The EMD Training Program Manager shall be responsible for the administration of the training program and assure that all aspects of the EMD training program are in compliance with these policies and with state guidelines.

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- 20.1 Responsibilities of the EMD Training Program Manager shall include, but not be limited to:
 - 20.1.1 Administering the training program.
 - 20.1.2 Approval of course content.
 - 20.1.3 Approval of all written and skills examinations.
 - 20.1.4 Coordinating all clinical and field activities related to the course.
 - 20.1.5 Ensure that all emergency medical dispatchers employed by the provider meet all continuing education and update requirements, as needed to maintain continuous certification.
 - 20.1.6 Approval of the principal instructor(s) and any teaching assistant(s) utilized.
 - 20.1.7 Signing of all course completion records.
 - 20.1.8 Assuring that all aspects of the training program are in compliance with state and county laws and policies.
 - 20.1.9 Be the authorized point of contact for all matters relating to the EMD training program.
 - 20.1.10 Review their EMD program at least annually, retaining records to that effect for a period of four (4) years.

- 21. Each training program provider shall retain the following training records as provided by local ordinance:
 - 21.1 Records on each course including, but not limited to, course title, course objectives, course outlines, qualification of instructors, dates of instruction, location, participant sign-in rosters, sample course tests or other methods of evaluation, and records of course completions issued.
 - 21.2 Summaries of test results, course evaluations or other methods of evaluation. The type of evaluation used may vary according to the instructor, content of program, number of participants and method of presentation.

ADMINISTRATION: Program Approval

Policy: 4210

Date: 12/1/05

EMERGENCY MEDICAL DISPATCH PROVIDER AGENCY

1. To identify the minimum requirements for an agency to be approved as an emergency medical dispatch (EMD) provider pursuant to the California Health & Safety Code Section 1797.220, and the State of California Emergency Medical Services Dispatch Program Guidelines (March 2003, EMSA #132).
2. Only those agencies operating with a written agreement with the Riverside County Emergency Medical Services (EMS) Agency may operated as an emergency medical dispatch provider.
 - 2.1 No provider agency, public safety answering point or other agency answering requests for emergency medical response shall engage in emergency medical dispatching unless that agency has a written agreement with the Riverside County EMS Agency acknowledging the requirement to operate within the framework of the guidelines issued by the California State EMS Authority and the Riverside County EMS Agency.
 - 2.2 EMD service providers shall provide this service twenty-four hours a day, seven days a week except under certain circumstances such as infrequent dispatcher work overload or under disaster conditions as specified by the State of California Government Code, California Emergency Services Act, Chapter 7, Division 1, Title 2, Section 8558.
3. All EMD providers operating within Riverside shall ensure that their dispatchers have successfully completed an approved EMD Training Program certified by California State Fire Marshal (CSFM), Peace Officers Standards and Training (POST), Local Emergency Medical Services Agency (LEMSA), or Emergency Medical Services Authority (EMSA).
4. The EMD Provider Agency shall establish policies and procedures through its continuous quality improvement program, consistent with the emergency medical dispatcher scope of practice that includes, but is not limited to:
 - 4.1 Ensuring the EMD call answering point maintains direct access to the calling party;
 - 4.2 Providing systematized caller interview questions;
 - 4.3 Providing systematized post-dispatch and pre-arrival instructions;
 - 4.4 Establishing protocols that determine vehicle response mode and configuration based on the emergency medical dispatcher's evaluation of injury or illness severity;
 - 4.5 Establishing a call classification system, for quality assurance and statistical analysis;
 - 4.6 Establishing a written description of the communications system configuration for the service area including telephone and radio service resources;
 - 4.7 Establishing a record-keeping system, including report forms or a computer data management system to permit evaluation of patient care records to ensure emergency medical dispatcher compliance with the Emergency Medical Dispatch Protocol Reference System (EMDPRS), and timeliness of interview questions and dispatch.

ADMINISTRATION: Program Approval

Policy: 4210

Date: 12/1/05

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5. Emergency Medical Dispatch Protocol Reference System (EMDPRS)
 - 5.1 An EMD Program shall include an EMDPRS selected by the EMD Provider Agency and approved by the EMD Medical Director as its foundation.
 - 5.2 The EMDPRS is a medically approved protocol based system used by emergency medical dispatchers to interrogate callers, dispatch aid, and provide dispatch life support instructions during medical emergencies.
 - 5.3 An approved EMDPRS shall include:
 - 5.3.1 Systematized caller interrogation questions;
 - 5.3.2 Systematized dispatch life support instructions;
 - 5.3.3 Systematized coding protocols that allow the agency to match the dispatcher's evaluation of the injury or illness severity with the vehicle response mode (emergency and/or non-emergency) and level of care (ALS/BLS).

6. The emergency medical dispatcher scope of practice includes any or all of the following duties and responsibilities:
 - 6.1 Receiving and processing calls for emergency medical assistance;
 - 6.2 Determining the nature and severity of medical incidents;
 - 6.3 Prioritizing the urgency of the response;
 - 6.4 Dispatching appropriate emergency medical services (EMS) resources;
 - 6.5 Giving post-dispatch and pre-arrival instructions to callers at the scene of an emergency;
 - 6.6 Relaying pertinent information to responding personnel;
 - 6.7 Coordinating with public safety and EMS providers as needed;
 - 6.8 Other medical activities as approved by the EMD Medical Director.

7. Medical Direction and Oversight
 - 7.1 The EMD Provider Agency shall employ, contract, or designate the services of a physician Medical Director (which may include a Local EMS Agency [LEMSA] Medical Director), who shall provide medical oversight for all medical aspects of the EMD program including:
 - 7.1.1 The EMDPRS;
 - 7.1.2 The EMD Training Program;
 - 7.1.3 Continuing Dispatch Education program;
 - 7.1.4 Compliance Standards;
 - 7.1.5 Policies and procedures;
 - 7.1.6 Continuous quality improvement program;
 - 7.1.7 Risk management functions;
 - 7.1.8 Records management.

ADMINISTRATION: Program Approval**Policy: 4210****Date: 12/1/05****EMERGENCY MEDICAL DISPATCH PROVIDER AGENCY**

- 7.2 The EMD Medical Director shall:
 - 7.2.1 Be licensed as a physician in California, board certified or qualified in Emergency Medicine; and
 - 7.2.2 Possess knowledge of EMS systems in California and of the local jurisdiction; and
 - 7.2.3 Be familiar with dispatching systems and methodologies.
- 7.3 The EMD Medical Director shall be responsible for ensuring that the Agency's EMD Program is established in accordance with state and local guidelines and policies.
- 7.4 The EMD Medical Director shall be responsible for the:
 - 7.4.1 Approval of the EMD training program and participating in ongoing evaluation and review of those programs;
 - 7.4.2 Approval and oversight of the continuing dispatch education program;
 - 7.4.3 Design of medical aspects of the emergency medical dispatcher orientation and performance evaluations;
 - 7.4.4 Evaluation of the medical care, post-dispatch and pre-arrival instructions rendered by EMD personnel;
 - 7.4.5 Approval of the EMDPRS to be utilized;
 - 7.4.6 Review of all continuous quality improvement, training and risk management functions in the Agency's Continuous Quality Improvement (CQI) plan, including the establishment and monitoring of programs designed to correct identified medical quality issues;
 - 7.4.7 Participation in the local EMS system CQI process.
- 8. EMD Program Administration
 - 8.1 All EMD providers operating within Riverside County shall employ an EMD Program Coordinator, who shall be a person qualified by education AND experience in the EMD and CQI process. Nothing in this section prohibits the same individual from being responsible for more than one function if so qualified. Duties of the Program Coordinator, in coordination with the case reviewer, shall include but not be limited to:
 - 8.1.1 Administering the dispatch program;
 - 8.1.2 Coordinating all clinical and field activities related to the program;
 - 8.1.3 Ensuring that all emergency medical dispatchers employed by the provider meet all continuing education and update requirements as needed to maintain continuous certification by the provider agency;
 - 8.1.4 Assuring that all aspects of the training program are in compliance with state and county laws and policies;
 - 8.1.5 Be the authorized point of contact for all matters relating to the EMD program;
 - 8.1.6 Review the EMD program at least annually, retaining records to that effect for a period of four years.

ADMINISTRATION: Program Approval

Policy: 4210

Date: 12/1/05

EMERGENCY MEDICAL DISPATCH PROVIDER AGENCY

9. Records Management
 - 9.1 The EMD Provider Agency shall maintain a copy of the basic EMD training program course completion record in the individual emergency medical dispatcher's training file.
 - 9.2 The EMD Provider Agency shall maintain a record of "in-house" EMD CDE topics, methodologies, date, time, location, and the number of CDE hours completed for each session of CDE in the individual emergency medical dispatcher's training file.
 - 9.3 The EMD Provider shall maintain a copy of EMD CDE program course completion records from an approved EMD training program provider in the individual emergency medical dispatcher's training file.
 - 9.4 Each EMD Provider Agency shall retain compliance-to-protocol reports as required by law.

10. EMD providers requesting approval of their Emergency Medical Dispatcher Program in Riverside County must submit an application to the Riverside County Emergency Medical Services Agency in accordance with state guidelines and shall include:
 - 10.1 A complete set of protocols to be utilized by the provider emergency medical dispatchers;
 - 10.2 The name of the Program Coordinator;
 - 10.3 The name (s) of the Case Reviewer(s), if different from above.

11. Program approval or disapproval will be made by the Riverside County EMS Agency in writing within ninety (90) days of receipt of all required program documentation.
 - 11.1 Program approval will be for a period of two (2) years initially, and four (4) years thereafter;
 - 11.2 Noted program deficiencies must be corrected within sixty (60) days of notification;
 - 11.3 All program material is subject to periodic review, as deemed necessary by the EMS Agency.

12. All approved EMD Providers must reapply for program approval a minimum of ninety (90) days prior to the end of the program's two year start date. The approval request shall contain at a minimum:
 - 12.1 Continuing program approval or disapproval will be made by the Riverside County EMS Agency in writing within sixty (60) days of receipt of all required program documentation;
 - 12.2 Continuing review will be four (4) years from the end of the current approval period.

ADMINISTRATION: Program Approval

Policy: 4210

Date: 12/1/05

EMERGENCY MEDICAL DISPATCH PROVIDER AGENCY

13. The Program Coordinator must notify the Riverside County EMS Agency, in writing thirty (30) days in advance of any program operational changes including, but not limited to:
 - 13.1 Any changes in the EMDPRS;
 - 13.2 Any changes in the wording of questions/statements utilized by emergency medical dispatchers.
 - 13.3 A list of substantial program changes not previously submitted since the last approval;
 - 13.4 Any substantial administrative changes not previously submitted during the last approval period;

ADMINISTRATION: Program Approval

**Policy: 4300
Date: 10/1/09**

CONTINUING EDUCATION PROVIDER

1. The purpose of this policy is to establish procedures that allow for the approval of prehospital continuing education (CE) program providers in Riverside County and to assist providers in meeting the standards and requirement for CE providers in Riverside County.
2. Riverside County Emergency Medical Services (EMS) Agency recognizes the importance of uniformity on a statewide level for the process of continuing education and will abide by the most recent versions of the Title 22 (California Code of Regulations, CCR) regulations and State EMS Authority documents related to this issue. Riverside County EMS policy is intended to delineate and clarify the regulations, and in all cases supersedes them.
3. Any individual, agency or company within Riverside County may apply for approval by Riverside County EMS Agency as a recognized provider of prehospital continuing education. Riverside County EMS will approve course providers, not individual courses.
 - 3.1 Approved EMS training centers will be granted CE provider status upon identification and appropriate documentation of CE staff, CE provider-specific documents (course completion certificates, rosters, advertisements), and the signing of the CE provider agreement.
4. The approved provider agrees to follow all policies, guidelines and procedures as established by the Riverside County EMS Agency, the State EMS Authority, and state laws and regulations. Providers will be notified, in writing, a minimum of 30 days in advance of the implementation of any revisions.
5. The approved provider will notify the Riverside County EMS Agency a minimum of one calendar month in advance of all CE course offerings by sending this information to the EMS Agency.
 - 5.1 A Riverside County approved provider offering CE courses in another county must additionally notify THAT county's EMS agency of courses being offered in their jurisdiction.
6. Provider approval shall be for up to four (4) years.
 - 6.1 Provisional approval of up to one (1) year may be granted to an agency whose Program Director is qualified by experience only. Full approval may be granted pending completion of specified educational requirements (reference #16 below).
 - 6.2 Approval expires the final day of the final month of the approval period.
7. Provider approval is non-transferable.
8. Approved providers failing to comply with applicable policies and/or procedures may have their approval suspended or revoked by the EMS Agency.

ADMINISTRATION: Program Approval**Policy: 4300****Date: 10/1/09**

CONTINUING EDUCATION PROVIDER

9. Providers must structure educational activities in accordance with the needs of their participants. ALS level classes will be expected to have both ALS objectives and BLS objectives if the course will be open/advertised to both levels of personnel.
10. Courses jointly sponsored by two or more providers will have only one of those providers responsible for issuing CE and maintaining records. The responsible provider will be the provider whose approval number is on the advertisements, roster and course completion certificates.
11. Providers must maintain CE records in a secure environment and are responsible for the security and integrity of the records they maintain.
 - 11.1 Records shall be maintained a minimum of four (4) years.
 - 11.2 The name, address, and license/certification number of each person receiving a course completion (CE) certificate shall be kept on file and be made available at the request of the EMS Agency or the State EMS Authority.
 - 11.3 Copies of each of the following shall be maintained with each class file:
 - 11.3.1 Course advertisement(s).
 - 11.3.2 Instructor resume(s).
 - 11.3.3 Course roster -- one for each day, if a multi-day course.
 - 11.3.4 Course overview, learning objectives, and detailed/comprehensive outline (teaching outline &/or lecturer's notes).
 - 11.3.5 Copies of any student handouts (controlled notes, articles, etc).
 - 11.3.6 Copy (blank) of the learning evaluation tool(s).
 - 11.3.7 Copies of the completed learning evaluations from the participants, OR a summary/analysis of their scores.
 - 11.3.8 Copies of the completed course evaluations from the participants, OR a summary of their findings.
 - 11.3.9 A copy of the course completion certificate.
12. Determination of CE credit
 - 12.1 Credit may only be issued to a participant upon successful passing of a written and/or skills competency based evaluation specific to the material covered by the course, class, or activity objectives.
 - 12.2 Credit for structured clinical or ride-out, teaching, precepting and field care audit (FCA) will be issued on a 1:1 (hours:credit) basis.
 - 12.2.1 Structured clinical and ride-out credits can only be issued by the agency which provides and reviews the structure (outline) that the individual must complete as part of his clinical/ride-out time. (In most cases this will be a hospital.)
 - 12.2.2 Teaching credits may only be issued by the provider employing the individual
 - 12.2.2.1 Credit may be issued only once during an individual's certification/licensure/authorization cycle for instructing a particular class or topic.

ADMINISTRATION: Program Approval

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CONTINUING EDUCATION PROVIDER

- 12.2.3 Precepting credit may only be issued by the approved training program 'contracted' with the preceptor or his employer.
- 12.3 Partial credit may be issued to a course participant at the provider's discretion provided that:
- 12.3.1 The credit given is not less than one (1) CE hour, nor issued in less than one-half (½) hour increments.
- 12.3.2 The participant has completed all course evaluations.
- 12.3.3 Partial credit is recorded on the course completion certificate, and a record of the partial credit is maintained by the provider.
- 12.4 CE credit shall be issued only for actual class time attended.
13. All CE course advertisements must include, at minimum:
- 13.1 The provider's name and CE approval number (33-XXXX).
- 13.2 A clear, concise description of the course contents and objectives.
- 13.3 The target audience (ALS, BLS or both levels).
- 13.4 The number and type of EMS CE to be granted.
(ex. – "3 hours of ____ CE", the blank to be filled in with one of the following phrases: "instructor-based" or "non-instructor-based")
- 13.5 Cost of course and information on refund policy.
14. Course evaluations are required for all CE offerings and must include, at minimum:
- 14.1 The extent to which the course met its stated objectives.
- 14.2 The adequacy of the instructor's knowledge of the subject matter.
- 14.3 Appropriateness of the teaching techniques/tools used.
- 14.4 Applicability/usability of the information to the participants' practice.
- 14.5 The extent to which the information was presented at a level that the participant could understand and assimilate.
15. Course completion certificates must be issued to all CE participants successfully passing the course.
- 15.1 Certificates must be issued to participants within 30 calendar days of course completion.
- 15.2 Certificates shall be tamper-resistant.
- 15.3 Certificates shall include, at minimum:
- 15.3.1 Provider's name, address and EMS CE approval number (33-XXXX).
- 15.3.2 Name of course.
- 15.3.3 Date of course completion.
- 15.3.4 Number and type of CE granted.
- 15.3.5 Participant's name and license/certification/authorization number.
- 15.3.6 Signature of course instructor or program director.
- 15.3.7 The following statement: "This course has been approved for (number) hours of continuing education by approved California EMS CE Provider 33-XXXX and was: (check one)____ instructor based,____ non-instructor based."
OR " . . . and was (non-)instructor based."

ADMINISTRATION: Program Approval**Policy: 4300****Date: 10/1/09**

CONTINUING EDUCATION PROVIDER

- 15.3.8 The following statement: "This documentation must be retained for a period of four (4) years."
- 15.4 Once a provider's course certificate has been approved by the EMS Agency, it shall not be changed without prior written approval from the EMS Agency.
16. Each approved continuing education provider shall have a Program Director qualified by education and experience in teaching methodology and evaluation of instruction.
- 16.1 Program Directors shall have a minimum of 40 hours of formal instruction in teaching methodologies, curriculum development, adult learning, evaluation of instruction, and other appropriate topics.
- 16.1.1 Courses taken to become an instructor of a particular course (i.e., train-the-trainer type courses) will not be accepted to meet the minimum requirement.
- 16.2 Program Directors shall have a minimum of one year of full-time experience (or equivalent part-time experience) in teaching adults.
17. Each approved continuing education provider shall have a Clinical Director qualified by education and experience in prehospital and/or emergency medical care.
- 17.1 Clinical Directors shall have and maintain a current California license as a physician, registered nurse, physician's assistant or EMT-P.
- 17.2 Clinical Directors shall have a minimum of two years within the last five years of academic, administrative or clinical experience in prehospital and/or emergency medical care.
18. Each approved continuing education provider shall have Instructors as qualified to teach their assigned topics.
- 18.1 Approval shall be made by both the Program Director AND the Clinical Director.
- 18.2 Evidence of qualification in the assigned subject matter shall be determined by proof of specialized training in that subject area, one year of experience within the last two years in the subject area, or demonstration of current knowledge and skill in the subject matter.
19. Each individual, agency, or company wishing to be considered for (re)approval by the EMS Agency will receive an "Application for Authorization as Approved Provider of Prehospital Continuing Education (CE)" (form EMS/CE APP).
- 19.1 Included with this form shall be copies of the Title 22 (CCR) regulations and Riverside County EMS Agency policies and procedures related to continuing education.
- 19.2 Applicants will complete and return the form with those documents as requested and outlined on the application. Those providers applying to renew/continue their approved status must submit documentation as to methods/mechanisms in place and changes made since their last approval to improve program quality.

ADMINISTRATION: Program Approval

Policy: 4300

Date: 10/1/09

CONTINUING EDUCATION PROVIDER

- 20. The completed application packet must be received by the EMS Agency at least 60 days prior to the initiation of the first CE activity offered by the provider, or 60 days prior to the end of the provider's current approval period, if requesting reauthorization.
 - 20.1 CE approval is not retroactive.

- 21. The EMS Agency will notify the provider within 14 days that the application packet has been received and is (in)complete.
 - 21.1 Any materials missing from the application packet must be submitted to the Agency within 30 days of notification.
 - 21.2 Missing materials submitted after 30 days will not be accepted and the application will be denied. A complete reapplication will be necessary.

- 22. The EMS Agency will notify the provider, in writing, of the approval/disapproval decision within 60 days of the receipt of the completed application packet.
 - 22.1 If approval is not granted, the reasons will be specified in writing.
 - 22.2 It will be the discretion of the EMS Agency as to whether corrections of the application packet deficiencies/discrepancies will be considered as part of the initial application process or must be submitted under reapplication.

ADMINISTRATION: Program Approval**Policy: 4400****Date: 10/1/09**

EMERGENCY MEDICAL TECHNICIAN-P (EMT-P) TRAINING

1. An agency or institution shall request approval from the Riverside County EMS Agency to become an EMT-P training provider.
2. Any institution/agency requesting approval as an EMT-P training provider must meet the qualifications for training providers as outlined in Division 9, Title 22, of the California Code of Regulations, Chapter 4, Article 3.
3. Provider approval shall be for four (4) years, ending on the final day of the final month of the approval period.
4. Approved training programs will abide by state laws, regulations, and Riverside County EMS Agency policies and procedures.
5. Any training program offered by an approved provider must be executed within the approved periods. Programs beginning or ending outside of an approval period will not be considered approved programs.
6. Notification of each course offered by the approved provider shall be given to the EMS Agency using the Notification of Proposed EMS Course form, which shall be submitted as early as 90 days but not less than 30 days prior to the beginning of each course.
7. Minimum competency requirements for program participants to successfully complete and pass approved training programs will be not less than 80% on written final examinations and 80% on skills examinations with 100% of the skill's critical factors attained, and shall include the successful completion of all clinical and field internships.
 - 7.1 Students may only sit the state licensing exam after having met all the provisions of the approved paramedic training program, including successful completion of the didactic, clinical, and field training portions.
8. All programs will submit precepting schedule information at least one week prior to students beginning their field time.
 - 8.1 This information will include:
 - Student name
 - Employing agency affiliation (if applicable)
 - Precepting Agency Name & Crew Unit #,
 - Precepting Crew Member names / titles,
 - Schedule -- days assigned (ex: M,W, q.o.F)and hours/shift (12 vs 24)
 - Apparatus type
 - 8.2 Last minute and/or in-process changes may be submitted as updates.
9. All programs will submit to the EMS Agency for immediate review any untoward patient care events, and cooperate in any patient care investigation through the EMS QI Program process.

ADMINISTRATION: Program Approval

Policy: 4400

Date: 10/1/09

EMERGENCY MEDICAL TECHNICIAN-P (EMT-P) TRAINING

10. All programs will submit to the EMS Agency for review and maintain on-going communication on, problematic and/or unresolved student-preceptor exchanges -- ex. - harassment, hazing, unsafe precepting environment.
11. Upon completion of each individual course, the training institution will submit the following:
 - 11.1. A Course Completion Record to the EMS Agency listing all students registered for the course and their status (pass/fail/incomplete).
 - 11.2. A course completion record to each passing student that:
 - 11.2.1 Meets the requirements as established in Title 22.
 - 11.2.2 Has been reviewed and approved by the EMS Agency.
 - 11.3. All course completion records shall be issued within fifteen (15) calendar days of the end of the course.
12. All qualified institutions/agencies shall submit their **completed** application packet a minimum of 120 days (4 months) prior to the beginning of the first proposed course offering or 90 days (3 months) prior to their current program expiration if applying for reapproval. This packet can include, but not be limited to:
 - 12.1. A completed Application for EMS Training/Refresher Program Approval (form EMS/TR-APP).
 - 12.2. The names and qualifications of their Course Director, Medical Director, and Principal Instructor(s) using the appropriate forms and supporting documentation.
 - 12.3. A statement that their program content is equivalent to the National Emergency Medical Services Education Standards, DOT HS 811 077A, January 2009.
 - 12.4. Course materials to include curriculum, class schedule, course objectives, major assignments/projects, all major examinations, skills performance objectives, and operational policies, procedures, and forms.
 - 12.5. Provisions for clinical and field internships to include:
 - 12.5.1 Student evaluation criteria and forms.
 - 12.5.2 Provisions for the training and monitoring of preceptors.
 - 12.5.3 Written agreements/MOUs with the providers of clinical and field internship experiences that express their ability and willingness to comply with the philosophies and policies of the training institution, and with the policies and procedures of the Riverside County EMS Agency, including quality assurance and patient care investigations.
13. The EMS Agency will notify the submitting institution/agency within thirty (30) working days of the receipt of the application packet that:
 - 13.1. It has been received; and
 - 13.2. It is complete or, if not, what information is missing.

ADMINISTRATION: Program Approval**Policy: 4400****Date: 10/1/09**

EMERGENCY MEDICAL TECHNICIAN-P (EMT-P) TRAINING

14. Programs/agencies applying for approval will schedule a facilities evaluation tour by the EMS Agency's program evaluator or his designee(s).
 - 14.1 All approved programs will be subject to scheduled and unscheduled visits by the EMS Agency for the purpose of program evaluation.
15. Program staff, at minimum, must meet the qualifications as established in Title 22 and student/staff ratios shall be maintained.
16. Approved programs shall provide for Clinical and Field Internships as established by Title 22.
 - 16.1 Approved programs must provide mechanisms/options for a student/preceptor reassignment should conflicts arise that are not based on performance/evaluations.
 - 16.2 Approved programs must provide a mechanism/option for an extension of clinical and/or field internships if documentation supports borderline but improving student performance.
17. The EMS Agency will notify the submitting institution/agency in writing of the approval/disapproval decision within 90 days of the receipt of the completed application packet. If approval is not granted, the reasons will be specified in writing.
18. Approved EMT-P training programs shall notify the EMS Agency in writing of any changes in course objectives, hours of instruction, course director, program medical director, principal instructor and/or the provision of hospital clinical and field internship experiences. All such changes are subject to the approval of the EMS Agency.
 - 18.1 It is preferred that notification be made in advance of said changes, but in all cases it shall be no later than within 30 days of the change.
 - 18.2 Notification of changes in staff shall include documentation of new staff qualifications.
 - 18.3 Site additions to the clinical and/or field experiences shall include copies of the agreements/MOUs signed with each institution/agency, and an explanation of how that site will be incorporated into the student experience.