



## Policy 305: Agency Approval for EMT Optional Skills

Revision 1/11/18  
Effective 1/1/19

### I. Purpose

- A. To establish training, evaluation and skills maintenance standards leading to EMS provider agency authorization for local EMT optional scope of practice for EMTs in Santa Cruz County as defined by Policy 208: EMS Responder Scope of Practice and by the California Code of Regulations Title 22, Division 9, Chapter 2, Sections 10063 and 10064.
- B. Authority: Sections 1797.107 and 1797.170, Health and Safety Code. Reference: Sections 1797.8, 1797.52, 1797.58, 1797.90, 1797.170, 1797.173, 1797.175, 1797.176, 1797.202, 1797.208, 1797.212, 1798, 1798.2, 1798.100, 1798.102 and 1798.104, Health and Safety Code.

### II. Definitions

- A. Emergency Medical Technician.
  1. "Emergency Medical Technician," "EMT-Basic," or "EMT" means a person who has successfully completed an EMT course that meets the requirements of this Chapter, has passed all required tests, and has been certified by a California EMT certifying entity.
- B. EMT Local Accreditation
  1. "Local accreditation" or "accreditation" or "accredited to practice" means authorization by the LEMSA to practice the optional skill(s). Such authorization assures that the EMT has been oriented to the LEMSA and trained in the optional skill(s) necessary to achieve the treatment standard of the jurisdiction.
- C. Santa Cruz County EMS provider agency
  1. An EMS Provider agency is a public or private sector organization that utilizes EMTs. This includes, but not limited to, locally permitted ambulance services, fire agencies, lifeguard services, and law enforcement agencies, and park personnel who have established training and quality assurance programs.
- D. EMT AED Service Provider.
  1. An AED service provider means an agency or organization which is responsible for, and is approved to operate, an AED.

### III. EMT Optional Scope Program Authorization

- A. Santa Cruz County EMS Provider agencies may apply to the Santa Cruz County EMS agency for authorization allowing their EMT personnel to perform EMT optional scope procedures as defined by Policy 208: EMS Responder Scope of Practice

### IV. Application Process



- A. A Santa Cruz County EMS Provider agency may apply for program authorization for each of the optional skills under section IV by providing a written plan for each optional skill requested
  - 1. A description of the need for the use of the optional skill.
  - 2. A description of the geographic area within which the optional skill will be utilized.
  - 3. A description of the training and evaluation used that meets the minimum standards for each optional skill, as defined in this policy.
  - 4. A description of the data collection methodology which shall also include an evaluation of the effectiveness of the optional skill.
  - 5. A description of the skills maintenance plan such as ongoing refresher training.
  - 6. A description of a skills evaluation program that requires the accredited EMT to demonstrate skills competency at least every 2 years.
  - 7. An estimate of the number of EMTs who will be applying for optional scope accreditation per Policy 208: EMS Responder Scope of Practice.
- B. The Santa Cruz County EMS Agency Medical Director will review the submitted application and will either approve application or provide feedback on areas of deficiency.

V. Optional Skills Program Requirements

- A. Use of perilyngeal airway adjuncts
  - 1. Training
    - a) Training in the use of perilyngeal airway adjuncts shall consist of not less than five (5) hours to result in the EMT being competent in the use of the device and airway control. Included in the above training hours shall be the following topics and skills:
      - (1) Anatomy and physiology of the respiratory system
      - (2) Assessment of the respiratory system.
      - (3) Review of basic airway management techniques, which includes manual and mechanical.
      - (4) The role of the perilyngeal airway adjuncts in the sequence of airway control.
      - (5) Indications and contraindications of the perilyngeal airway adjuncts.
      - (6) The role of pre-oxygenation in preparation for the perilyngeal airway adjuncts
      - (7) Perilyngeal airway adjuncts insertion and assessment of placement.



- (8) Methods for prevention of basic skills deterioration.
- (9) Alternatives to the perilyngeal airway adjuncts.

2. Evaluation

- a) At the completion of initial training a student shall complete a competency-based written and skills examination for airway management which shall include the use of basic airway equipment and techniques and use of perilyngeal airway adjuncts.

B. Administration of epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe for suspected anaphylaxis and/or severe asthma.

1. Training

- a) Training in the administration of epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe for suspected anaphylaxis and/or severe asthma shall consist of no less than two (2) hours to result in the EMT being competent in the use and administration of epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe and managing a patient of a suspected anaphylactic reaction and/or experiencing severe asthma symptoms. Included in the training hours listed above shall be the following topics and skills:
  - (1) Names of the medication
  - (2) Indications
  - (3) Contraindications
  - (4) Complications
  - (5) Side/adverse effects
  - (6) Interactions
  - (7) Routes of administration
  - (8) Calculating dosages
  - (9) Mechanisms of drug actions
  - (10) Medical asepsis
  - (11) Disposal of contaminated items and sharps
  - (12) Medication Administration

2. Evaluation



- a) At the completion of this training, the student shall complete a competency based written and skills examination for the use and/or administration of epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe, which shall include:
  - (1) Assessment of when to administer epinephrine,
  - (2) Managing a patient before and after administering epinephrine,
  - (3) Using universal precautions and body substance isolation procedures during medication administration,
  - (4) Demonstrating aseptic technique during medication administration,
  - (5) Demonstrating preparation and administration of epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe, and
  - (6) Proper disposal of contaminated items and sharps.
- C. Administer the medications listed in this subsection.
  1. Using prepackaged products, the following medications may be administered:
    - a) Atropine
    - b) Pralidoxime Chloride
  2. Training
    - a) This training shall consist of no less than two (2) hours of didactic and skills laboratory training to result in competency. In addition, a basic weapons of mass destruction training is recommended. Training in the profile of medications listed in subsection (A) shall include, but not be limited to:
      - (1) Indications
      - (2) Contraindications
      - (3) Side/adverse effects
      - (4) Routes of administration
      - (5) Dosages
      - (6) Disposal of contaminated items and sharps
      - (7) Medication administration
  3. Evaluation



- a) At the completion of this training, the student shall complete a competency based written and skills examination for the administration of medications listed in this subsection which shall include:
  - (1) Assessment of when to administer these medications,
  - (2) Managing a patient before and after administering these medications
  - (3) Using universal precautions and body substance isolation procedures during medication administration,  
Demonstrating aseptic technique during medication administration,
  - (4) Demonstrating the preparation and administration of medications by the intramuscular route, and
  - (5) Proper disposal of contaminated items and sharps.

VI. EMT Accreditation

- A. In order to be accredited to utilize an optional skill, an EMT shall demonstrate competency through passage, by pre-established standards, approved by the LEMSA, of a competency-based written and skills examination which tests the ability to assess and manage the specified condition.
- B. Initial Training
  1. Each Agency that is approved to provide EMT optional skills shall provide a list of all EMTs that have successfully completed the initial Optional Skills training and evaluation for each of the skills listed in Section VI. For each EMT the list should include:
    - a) Name of the skill(s) learned.
    - b) Date training and evaluation completed.
  2. Based on this documentation, the EMS Medical Director will provide accreditation for each EMT for a maximum period of 2 years.
- C. Refresher Training
  1. At least every two years, or more often as deemed necessary by the LEMSA Medical Director, the Santa Cruz County EMS Provider agency shall provide refresher training of sufficient duration to ensure that the EMT can demonstrate competency through a written and skills evaluation. For each EMT the list should include:
    - a) Name of the skill(s) reviewed.
    - b) Date refresher training and evaluation completed
- D. During a mutual aid response into another jurisdiction, an EMT may utilize the scope of practice for which s/he is trained, certified and accredited according to the policies and procedures



## Santa Cruz County EMS Agency System Providers

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established by his/her certifying or accrediting LEMSA.