

SIERRA-SACRAMENTO VALLEY EMS AGENCY PROGRAM POLICY

REFERENCE NO. 475

SUBJECT: EMT / PUBLIC SAFETY AED PROGRAM: APPLICATION AND APPROVAL PROCESS

PURPOSE:

To establish the initial application process and procedure for approval of EMT / Public Safety Automatic External Defibrillation (AED) Service Providers in the S-SV EMS region.

AUTHORITY:

California Health & Safety Code, Division 2.5, Section 1797.80, 1797.90, 1797.170, 1797.177, 1797.182, 1797.220, 1798.2 and 1798.104.

California Code of Regulations, Title 22, Division 9, Chapters 1.5 and 2

POLICY:

An EMT / Public Safety AED Service Provider shall meet all requirements set forth by State law, regulations and S-SV EMS policy.

A. EMT / PUBLIC SAFETY AED PROGRAM APPLICATION FOR APPROVAL REQUIREMENTS:

1. Any service provider requesting to utilize automated external defibrillation (AED) as a skill for EMT and/or an optional skill for Public Safety employees shall submit an S-SV EMS EMT / Public Safety AED Service Provider: Application for Approval, packet to the S-SV EMS Agency (Reference No. 475-A).
2. All applicant agencies shall fully complete the application packet. Incomplete applications will not be processed. The required information/documentation of a complete application includes the following:
 - a. **A letter of intent** to provide AED services from an AED Service Provider chief officer expressing willingness to abide by all S-SV EMS Agency policies, procedures and AED program requirements.
 - b. **A description of the geographic area** within which EMT / Public Safety AED will be utilized.

Effective Date: 12/01/2011
Next Review Date: 07/2014
Approved:

Date last Reviewed / Revised: 07/11
Page 1 of 3

SIGNATURE ON FILE
S-SV EMS Medical Director

SIGNATURE ON FILE
S-SV EMS Regional Executive Director

**SUBJECT: EMT / PUBLIC SAFETY AED PROGRAM:
APPLICATION AND APPROVAL PROCESS**

- c. **Training program** – outline, objectives and name of S-SV EMS authorized AED instructor(s). (Policy Reference No. 474).
- d. **Letter of support** from the local base / modified base hospital or the local ALS provider documenting acceptance of the AED program. The base / modified base hospital or the ALS provider will be responsible for reviewing all AED uses for QI purposes.
- e. Specify the **type** (automatic or semiautomatic) **and the brand name of the AED equipment** proposed for use.
- f. A written service provider **Continuous Quality Improvement (CQI)** Program, including name(s) of personnel responsible for the program. (Policy Reference No. 620)
- g. AED service provider **policies and procedures** (Policy Reference No. 474) to:
 - Provide orientation of AED authorized personnel to the AED.
 - Ensure continued competency of AED authorized personnel.
 - Collect and report data to the S-SV EMS Agency.
 - Provide for collection, disposition and retention of all pertinent medical records.
- h. Personnel information:
 - Number of proposed EMT / Public Safety AED personnel to be employed.
 - Number of vehicles staffed with EMT / Public Safety AED personnel.
 - Proposed number of EMT / Public Safety personnel to be trained / authorized to utilize an AED.
 - Proposed target date for beginning service.

B. EMT / PUBLIC SAFETY AED PROGRAM APPROVAL PROCESS:

1. The S-SV EMS Agency shall notify the service provider submitting its application for AED service provider approval within seven (7) days of receiving the request that:
 - a. The application has been received;
 - b. The application contains or does not contain the requested information; and
 - c. What information, if any, is missing from the application.

**SUBJECT: EMT / PUBLIC SAFETY AED PROGRAM:
APPLICATION AND APPROVAL PROCESS**

2. Program approval or disapproval shall be made, in writing, to the applicant within a reasonable period of time, after receipt of all required documentation. This time period shall not exceed thirty (30) days.

**C. EMT / PUBLIC SAFETY AED PROGRAM IMPLEMENTATION
REQUIREMENTS**

1. Prior to implementation of an S-SV EMS approved EMT / Public Safety AED Program; the service provider shall complete and maintain a list of all EMT / Public Safety Authorized Personnel, to include the following information:
 - EMT / EMR certification or public safety first aid expiration date.
 - American Heart Association Healthcare Provider, American Red Cross, or equivalent CPR expiration date.
 - Proof of completion of an initial four (4) hour AED training program and successful completion of written and skills examinations.
(Required only for personnel not certified as an EMT)

Note: This information shall be provided to the S-SV EMS Agency upon request

2. An approved EMT / Public Safety AED service provider and their authorized personnel shall be recognized statewide.

CROSS REFERENCES:

Prehospital Care Policy Manual

EMT / Public Safety AED Program: Base Hospital Medical Control Requirements, Reference No. 375.

EMT / Public Safety AED Program: Service Provider Requirements and Responsibilities, Reference No. 474.

Continuous Quality Improvement Process, Reference No. 620.

AED Treatment Guidelines, Reference No. 895.