

**California Code of Regulations
Title 22. Social Security
Division 9. Prehospital Emergency Medical Services
Chapter 1.5. First Aid and CPR Standards and Training for Public Safety
Personnel**

The Emergency Medical Services Authority has illustrated changes to the original text in the following manner:

- Final additions to the original text = underline
 - Final deletions to the original text = ~~strikeout~~
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Article 1. Definitions

§ 100005. Automated External Defibrillator or AED.

"Automated External Defibrillator or AED" means an external defibrillator capable of cardiac rhythm analysis which will charge and deliver a shock either automatically or by user interaction after electronically detecting and assessing ventricular fibrillation or rapid ventricular tachycardia.

Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections ~~1797.52~~, 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

§ 100006. Public Safety AED Service Provider. (no change)

§ 100007. Cardiopulmonary Resuscitation.

"Cardiopulmonary resuscitation" ~~or "CPR"~~ (CPR) means establishing and maintaining an open airway, ensuring adequate respiration, ~~either spontaneously or by use of rescue breathing,~~ and ensuring adequate circulation either spontaneously or by means of closed chest cardiac compression, according to standards promulgated by the current American Heart Association (AHA) Guidelines for Cardiopulmonary Resuscitation (CPR) and Emergency Cardiovascular Care (ECC), ~~and/or the American Red Cross.~~

Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

§ 100008. Firefighter. (no change)

§ 100009. Public Safety First Aid.

1 “Public safety ~~F~~first aid” means the recognition of and immediate care for injury or
2 sudden illness, including medical emergencies, by public safety personnel prior to the
3 availability of medical care by licensed or certified health care professionals.

4 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
5 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

6
7 **§ 100010. Lifeguard. (no change)**

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9 **§ 100011. Peace Officer. (no change)**

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11 **§ 100012. Primarily Clerical or Administrative. (no change)**

12
13 ~~**§ 100013. Qualified Instructor.**~~

14 ~~“Qualified instructor” is a trained individual who shall be certified to teach first aid and/or~~
15 ~~CPR by the approving authority specified in Section 100026 of this Chapter.~~

16 ~~Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections~~
17 ~~1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.~~

18
19 ~~**§ 400014**~~ **100013. Regularly Employed.**

20
21 “Regularly employed” means being given wages, salary, or other remuneration for the
22 performance of those duties normally carried out by lifeguards, firefighters, or peace
23 officers.

24 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
25 1797.182 and 1797.183, Health and Safety Code.

26
27 **Article 2. General Training Provisions**

28
29 ~~**§ 400015**~~ **100014. Application and Scope.**

30 Except those whose duties are primarily clerical or administrative, the following regularly
31 employed public safety personnel shall be trained to administer first aid, CPR and use
32 an AED cardiopulmonary resuscitation according to the standards set forth in this
33 Chapter:

34 (a1) lifeguard;

35 (b2) firefighter;

36 (c3) peace officer.

37 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
38 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

39
40 ~~**§ 400016**~~ **100015. Training Programs In Operation.**

41 Training programs in operation prior to the effective date of these regulations shall
42 submit evidence of compliance with this Chapter to the appropriate approving authority
43 as specified in Section ~~400026~~ 100023 of this Chapter within ~~six (6)~~ twenty-four (24)
44 months after the effective date of these regulations.

1 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
2 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.
3

4 **§ ~~400017~~ 100016. Time Limitation for Initial Training.**

5 The initial training requirements specified in Section 100017 of this Chapter shall be
6 satisfactorily completed within one (1) year from the effective date of the individual's
7 initial employment and, whenever possible, prior to assumption of regular duty in one of
8 the personnel categories set forth in ~~Section 400016~~ 100014 of this Chapter.

9 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
10 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.
11

12 **Article 3. Public Safety First Aid and CPR Training Standards**

13
14 **§ ~~400018~~ 100017. Scope of Course Public Safety First Aid and CPR Course**
15 **Content.**

16 (a) The initial course of instruction shall at a minimum consist of not less than ~~ffteen~~
17 ~~(15) hours in first aid and six (6) hours in cardiopulmonary resuscitation~~ twenty-one (21)
18 hours in first aid and CPR.

19 (b) The course of instruction shall include, but need not be limited to, the following
20 scope of courses as described in (c) below, which shall prepare personnel specified in
21 ~~Section 400016~~ 100014 of this Chapter to recognize the injury or illness of the individual
22 and render assistance:.

23 (c) The content of the training course shall include recognition and basic first aid level
24 treatment of at least the following topics and shall be competency based:

25 ~~(1) Emergency action principles which describe the basic problems of decision making~~
26 ~~in first aid; Role of the public safety first aid provider;~~

27 (A) Personal safety;

28 (i) Scene size-up.

29 (B) Body substance isolation, including removing contaminated gloves;

30 (C) Legal considerations;

31 (D) Emergency Medical Services (EMS) access;

32 (E) Integration with EMS personnel to include active shooter incidents;

33 (F) Minimum equipment and first aid kits.

34 (2) Heart attack and sudden cardiac arrest;

35 (A) Respiratory and circulatory systems;

36 (B) Heart attack;

37 (C) Sudden cardiac arrest and early defibrillation;

38 (D) Chain of survival.

39 (3) CPR and AED for adults, children, and infants, following current AHA Guidelines for
40 CPR and ECC at the Healthcare provider level;

41 (A) Basic airway management;

42 (B) Rescue breathing;

43 (i) Mouth-to-mouth;

44 (ii) Mouth-to-mask;

45 (iii) Bag-valve-mask (BVM).

- 1 (C) Chest compressions and CPR/AED:
- 2 (i) Basic AED operation;
- 3 (ii) Using the AED;
- 4 (iii) Troubleshooting and other considerations.
- 5 (D) Single rescuer CPR/AED on adult, child and infant;
- 6 (E) Two rescuer CPR/AED on adult, child and infant;
- 7 (F) Recovery position.
- 8 (4) Management of foreign body airway obstruction on adults, children, and infants:
- 9 (A) Conscious patients;
- 10 (B) Unconscious patients.
- 11 (5) Recognition and identification of adult and pediatric patients for both medical and
- 12 traumatic emergencies;
- 13 (A) Performing a primary assessment;
- 14 (B) Performing a secondary assessment;
- 15 (C) Obtaining a patient history.
- 16 (6) Medical emergencies;
- 17 (A) Pain, severe pressure, or discomfort in chest;
- 18 (B) Breathing difficulties, including asthma and COPD;
- 19 (C) Allergic reactions and anaphylaxis;
- 20 (D) Altered mental status;
- 21 (E) Stroke;
- 22 (F) Diabetic emergencies;
- 23 (i) Administration of oral glucose.
- 24 (G) Seizures;
- 25 (H) Alcohol and drug emergencies;
- 26 (i) Assisted naloxone administration and accessing EMS.
- 27 (I) Severe abdominal pain;
- 28 (J) Obstetrical emergencies.
- 29 (7) Burns;
- 30 (A) Thermal burns;
- 31 (B) Chemical burns;
- 32 (C) Electrical burns.
- 33 (8) Facial injuries;
- 34 (A) Objects in the eye;
- 35 (B) Chemical in the eye;
- 36 (C) Nosebleed;
- 37 (D) Dental emergencies.
- 38 (9) Environmental emergencies;
- 39 (A) Heat emergencies;
- 40 (B) Cold emergencies;
- 41 (C) Drowning.
- 42 (10) Bites and stings;
- 43 (A) Insect bites and stings;
- 44 (B) Animal and human bites;
- 45 (C) Assisted administration of epinephrine auto-injector and accessing EMS.

- 1 (11) Poisoning;
- 2 (A) Ingested poisoning;
- 3 (B) Inhaled poisoning;
- 4 (C) Exposure to chemical, biological, radiological, or nuclear (CBRN) substances;
- 5 (i) Recognition of exposure;
- 6 (ii) Scene safety.
- 7 (D) Poison control system.
- 8 (12) Identify signs and symptoms of psychological emergencies.
- 9 (13) Patient movement;
- 10 (A) Emergency movement of patients;
- 11 (B) Lifts and carries which may include:using soft litters and manual extractions
- 12 including fore/aft, side-by-side, shoulder/belt.
- 13 (14) Tactical and rescue first aid principles applied to violent circumstances;
- 14 (A) Principles of tactical casualty care;
- 15 (i) Determining treatment priorities.
- 16 (15) Orientation to the EMS system, including;
- 17 (A) 9-1-1 access;
- 18 (B) Interaction with EMS personnel;
- 19 (C) Identification of local EMS and trauma systems.
- 20 (16) Trauma emergencies;
- 21 (A) Soft tissue injuries and wounds;
- 22 (B) Amputations and impaled objects;
- 23 (C) Chest and abdominal injuries;
- 24 (i) Review of basic treatment for chest wall injuries;
- 25 (ii) Application of chest seals.
- 26 (D) Head, neck, or back injury;
- 27 (E) Spinal immobilization;
- 28 (F) Musculoskeletal trauma and splinting;
- 29 (G) Recognition of signs and symptoms of shock;
- 30 (i) Basic treatment of shock;
- 31 (ii) Importance of maintaining normal body temperature.
- 32 (H) Internal bleeding;
- 33 (I) Control of bleeding, including direct pressure, tourniquet, hemostatic
- 34 dressings, chest seals and dressings;
- 35 (i) Training in the use of hemostatic dressings shall result in competency in the
- 36 application of hemostatic dressings. Included in the training shall be the following topics
- 37 and skills:
- 38 1. Review of basic methods of bleeding control to include but not be limited to direct
- 39 pressure, pressure bandages, tourniquets, and hemostatic dressings and wound
- 40 packing;
- 41 2. Types of hemostatic dressings.
- 42 (2) First aid for medical emergencies, including sudden illnesses;
- 43 (3) Cardiac and respiratory emergencies, including cardiac and/or respiratory failures in
- 44 victims of all ages;
- 45 (4) First aid for traumatic injuries including wounds, and life threatening bleeding;

- ~~(5) First aid for specific injuries, including care for specific injuries to different parts of the body;~~
- ~~(6) Bandaging, including materials and guidelines used in bandaging;~~
- ~~(7) First aid for environmental emergencies including burns, heat and chemical burns, electrical emergencies and exposure to radiation, or climatic changes;~~
- ~~(8) First aid for injuries to bones, muscles, and joints;~~
- ~~(9) Emergency rescue and transfer;~~
- ~~(10) First aid for obstetrical emergencies.~~

Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections 1797.176, 1797.182, and 1797.183, and 1797.193, Health and Safety Code; and Section 13518, Penal Code.

~~§ 100019. Required Topics.~~

~~The content of the training course shall include at least the following topics and shall be skill-oriented:~~

- ~~(a) Examination and assessment of the victim;~~
- ~~(b) Orientation to the EMS system;~~
- ~~(c) Suspected heart attack or stroke;~~
- ~~(d) Fainting, convulsions, and/or suspected drug abuse;~~
- ~~(e) Heat exhaustion, heat stroke, hypothermia and frost bite;~~
- ~~(f) Mouth to mouth breathing and care for choking victims whether conscious or unconscious;~~
- ~~(g) Types of wounds and control of bleeding;~~
- ~~(h) Shock, and its causes, infection and closed wounds;~~
- ~~(i) Eye, face, scalp, jaw and ear injuries;~~
- ~~(j) Injuries of the head, neck, back, trunk, arms and legs;~~
- ~~(k) Exposure to toxic substances;~~
- ~~(l) Bites and stings by snakes, marine life and insects;~~
- ~~(m) Bandaging techniques, first aid kits and supplies;~~
- ~~(n) Determination of the severity of burns, including first, second, and third degree burns;~~
- ~~(o) Fractures, both open and closed, splinting, and care for fractures, sprains, strains and dislocated joints;~~
- ~~(p) Techniques of cardiopulmonary resuscitation; and~~
- ~~(q) Obstetrical emergencies.~~

Note: Authority cited: Section: 1797.107, Health and Safety Code. Reference: Sections 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

§ 100018. Authorized Skills for Public Safety First Aid Providers

(a) A Public safety first aid provider, after completion of training and demonstration of competency to the satisfaction of the approved training provider for each skill listed in this section, is authorized to perform medical care while at the scene of an emergency including, but not limited to, CPR and AED and may do any of the following:

- (1) Evaluate the ill and injured.
- (2) Provide treatment for shock.

1 (3) Use the following techniques to support airway and breathing:

2 (A) Manual airway opening methods, including head-tilt chin-lift and/ or jaw thrust;

3 (B) Manual methods to remove an airway obstruction in adults, children, and infants;

4 (C) Use the recovery position.

5 (4) Perform the following during emergency care:

6 (A) Spinal immobilization;

7 (B) Splinting of extremities;

8 (C) Emergency eye irrigation using water or normal saline;

9 (D) Assist with administration of oral glucose;

10 (E) Assist patients with administration of physician-prescribed epinephrine devices and
11 naloxone;

12 (F) Assist in emergency childbirth;

13 (G) Hemorrhage control using direct pressure, pressure bandages, principles of
14 pressure points, and tourniquets. Hemostatic dressings may be used from the list
15 approved by the EMS Authority;

16 (H) Chest seals and dressings;

17 (I) Simple decontamination techniques and use of decontamination equipment;

18 (J) Care for amputated body parts;

19 (K) Provide basic wound care.

20 (b) The authorized skills of a public safety first aid provider shall not exceed those
21 activities authorized in this section.

22 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
23 1797.176, 1797.182, 1797.183, and 1797.197, Health and Safety Code; and Section
24 13518, Penal Code.

25
26 **§ 400020 100019. Optional Skills.**

27 (a) In addition to the activities authorized by Section 400049 100018 of this Chapter,
28 public safety personnel may perform any or all of the following optional skills specified in
29 this section when the public safety first aid provider has been trained and tested to
30 demonstrate competence following initial instruction, and when authorized by the
31 Medical Director of the local EMS agency (LEMSA).

32 (b) A LEMSA shall establish policies and procedures that require public safety first aid
33 personnel to demonstrate trained optional skills competency at least every two years, or
34 more frequently as determined by the EMS quality improvement program (EMSQIP).
35 AED when authorized by a public safety AED service provider.

36 (c) Administration of epinephrine by auto-injector for suspected anaphylaxis.

37 (1) Training in the administration of epinephrine shall result in the public safety first aid
38 provider being competent in the administration of epinephrine and managing a patient of
39 a suspected anaphylactic reaction. The training shall include the following topics and
40 skills:

41 (A) Common causative agents;

42 (B) Signs and symptoms of anaphylaxis;

43 (C) Assessment findings;

44 (D) Management to include but not be limited to:

45 1. Need for appropriate personal protective equipment and scene safety awareness.

- 1 (E) Profile of epinephrine to include, but not be limited to:
- 2 1. Class;
- 3 2. Mechanisms of drug action;
- 4 3. Indications;
- 5 4. Contraindications;
- 6 5. Dosage and route of administration;
- 7 6. Side/ adverse effects.
- 8 (F) Administration of epinephrine by auto-injector including:
- 9 1. Site selection and administration;
- 10 2. Medical asepsis;
- 11 3. Disposal of contaminated items and sharps.
- 12 (2) At the completion of this training, the student shall complete a competency based
- 13 written and skills examination for administration of epinephrine which shall include:
- 14 (A) Assessment of when to administer epinephrine;
- 15 (B) Managing a patient before and after administering epinephrine;
- 16 (C) Accessing 9-1-1 or advanced life support services for all patients suffering
- 17 anaphylaxis or receiving epinephrine administration;
- 18 (D) Using universal precautions and body substance isolation procedures during
- 19 medication administration;
- 20 (E) Demonstrating aseptic technique during medication administration;
- 21 (F) Demonstrate preparation and administration of epinephrine by auto-injector;
- 22 (G) Proper disposal of contaminated items and sharps.
- 23 (d) Supplemental oxygen therapy using a non-rebreather face mask or nasal cannula,
- 24 and bag-valve-mask ventilation.
- 25 (1) Training in the administration of oxygen shall result in the public safety first aid
- 26 provider being competent in the administration of supplemental oxygen and use of bag-
- 27 valve-mask ventilation for a patient requiring oxygen administration and ventilation. The
- 28 training shall include the following topics and skills:
- 29 (A) Integrating the use of supplemental oxygen by non-rebreather mask or nasal
- 30 cannula based upon local EMS protocols;
- 31 (B) Assessment and management of patients with respiratory distress;
- 32 (C) Profile of Oxygen to include, but not be limited to:
- 33 1. Class;
- 34 2. Mechanism of Action;
- 35 3. Indications;
- 36 4. Contraindications;
- 37 5. Dosage and route of administration (mask, cannula, bag-valve-mask);
- 38 6. Side/ adverse effects.
- 39 (D) Oxygen Delivery Systems;
- 40 1. Set up of oxygen delivery including tank opening, use of regulator and liter flow
- 41 selection;
- 42 2. Percent of relative oxygen delivered by type of mask;
- 43 3. Oxygen delivery for a breathing patient, including non-rebreather mask and nasal
- 44 cannula;
- 45 4. Bag-Valve-Mask and Oxygen delivery for a non-breathing patient.

- 1 (E) Safety precautions.
2 (2) At the completion of the training, the student shall complete a competency based
3 written and skills examination for the administration of oxygen which shall include the
4 topics listed above and:
5 (A) Assessment of when to administer supplemental oxygen and ventilation with a bag-
6 valve-mask;
7 (B) Managing a patient before and after oxygen administration;
8 (C) Demonstrating preparation of the oxygen delivery system;
9 (D) Demonstrating application of supplemental oxygen by non-rebreather mask and
10 nasal cannula on a breathing patient;
11 (E) Demonstrating use of bag-valve-mask on a non-breathing patient.
12 (e) Administration of auto-injectors containing atropine and pralidoxime chloride for
13 nerve agent exposure for self or peer care, when authorized by the Medical Director of a
14 LEMSA, while working for a public safety provider.
15 (1) Training in the administration of auto-injectors containing atropine and pralidoxime
16 shall result in the public safety first aid provider being competent in the administration of
17 auto-injectors for nerve agent intoxication. The training shall include the following topics
18 and skills:
19 (A) Integrating the use of auto-injectors for nerve agent intoxication based upon local
20 EMS protocols;
21 (B) Assessment and recognition of patients with nerve agent intoxication;
22 (C) Management of patients with nerve agent exposure, including the need for
23 appropriate personal protective equipment, decontamination principles, and scene
24 safety awareness;
25 (D) Profile of atropine and pralidoxime chloride to include, but not be limited to:
26 1. Class;
27 2. Mechanism of action;
28 3. Indications;
29 4. Contraindications;
30 5. Dosage and route of administration;
31 6. Side/ adverse effects.
32 (E) Auto-Injector delivery and types (i.e. Duo-Dote, Mark I):
33 1. Medical asepsis;
34 2. Site selection and administration;
35 3. Disposal of contaminated items and sharps;
36 4. Safety precautions.
37 (2) At the completion of the training, the student shall complete a competency based
38 written and skills examination for the administration of auto-injectors containing atropine
39 and pralidoxime chloride for nerve agent intoxication which shall include the topics listed
40 above and:
41 (A) Assessment of when to administer nerve agent auto-injector;
42 (B) Managing a patient before and after auto-injector administration;
43 (C) Accessing 9-1-1 or advanced life support services following administration of
44 atropine and pralidoxime;
45 (D) Demonstrating preparation, site selection, and administration of the auto-injector;

- 1 (E) Demonstrating universal precautions and body substance isolation procedure during
- 2 medication administration;
- 3 (F) Demonstrating aseptic technique during medication administration;
- 4 (G) Proper disposal of contaminated items and sharps.
- 5 (f) Administration of naloxone for suspected narcotic overdose.
- 6 (1) Training in the administration of naloxone shall result in the public safety first aid
- 7 provider being competent in the administration of naloxone and managing a patient of a
- 8 suspected narcotic overdose. The training shall include the following topics and skills:
- 9 (A) Common causative agents;
- 10 (B) Assessment findings;
- 11 (C) Management to include but not be limited to:
- 12 (D) Need for appropriate personal protective equipment and scene safety awareness;
- 13 (E) Profile of Naloxone to include, but not be limited to:
- 14 1. Indications;
- 15 2. Contraindications;
- 16 3. Side/adverse effects;
- 17 4. Routes of administration;
- 18 5. Dosages.
- 19 (F) Mechanisms of drug action;
- 20 (G) Calculating drug dosages;
- 21 (H) Medical asepsis;
- 22 (I) Disposal of contaminated items and sharps.
- 23 (2) At the completion of this training, the student shall complete a competency based
- 24 written and skills examination for administration of naloxone which shall include:
- 25 (A) Assessment of when to administer naloxone;
- 26 (B) Managing a patient before and after administering naloxone;
- 27 (C) Using universal precautions and body substance isolation procedures during
- 28 medication administration;
- 29 (D) Demonstrating aseptic technique during medication administration;
- 30 (E) Demonstrate preparation and administration of parenteral medications by a route
- 31 other than intravenous;
- 32 (F) Proper disposal of contaminated items and sharps.
- 33 (g) Use of oropharyngeal airways (OPAs) and nasopharyngeal airways (NPAs).
- 34 (1) Training in the use of OPAs and NPAs shall result in the public safety first aid
- 35 provider being competent in the use of the devices and airway control and shall include
- 36 the following topics and skills:
- 37 (A) Anatomy and physiology of the respiratory system;
- 38 (B) Assessment of the respiratory system;
- 39 (C) Review of basic airway management techniques, which include manual and
- 40 mechanical;
- 41 (D) The role of OPA and NPA airway adjuncts in the sequence of airway control;
- 42 (E) Indications and contraindications of OPAs and NPAs;
- 43 (F) The role of pre-oxygenation in preparation for OPAs and NPAs;
- 44 (G) OPA and NPA insertion and assessment of placement;
- 45 (H) Methods for prevention of basic skills deterioration;

1 (I) Alternatives to the OPAs and NPAs.

2 (2) At the completion of initial training a student shall complete a competency based
3 written and skills examination for airway management which shall include the use of
4 basic airway equipment and techniques and use of OPAs and NPAs.

5 ~~(1) Training for the AED shall consist of not less than four (4) hours and shall include~~
6 ~~the following topics and skills:~~

7 ~~(A) Proper use, maintenance and periodic inspection of the AED.~~

8
9 ~~(B) The importance of cardiopulmonary resuscitation (CPR), defibrillation, advanced life~~
10 ~~support (ALS), adequate airway care, and internal emergency response system, if~~
11 ~~applicable.~~

12 ~~(C) Overview of the EMS system, the local EMS system's medical control policies, 9-1-1~~
13 ~~access, and interaction with EMS personnel.~~

14 ~~(D) Assessment of an unconscious patient, to include evaluation of airway, breathing,~~
15 ~~and circulation to determine cardiac arrest.~~

16 ~~(E) Information relating to AED safety precautions to enable the individual to administer~~
17 ~~a shock without jeopardizing the safety of the patient or rescuers or other nearby~~
18 ~~persons.~~

19 ~~(F) Recognition that an electrical shock has been delivered to the patient and that the~~
20 ~~defibrillator is no longer charged.~~

21 ~~(G) Rapid, accurate assessment of the patient's post-shock status.~~

22 ~~(H) The appropriate continuation of care following a successful defibrillation.~~

23 ~~(b) In order to be authorized to utilize the defibrillator, an individual shall pass a written~~
24 ~~and skills examination with a pre-established standard, which tests the ability to assess~~
25 ~~and manage the specified conditions listed in subsection (a) of this section.~~

26 ~~(c) A local EMS agency that approves public safety AED service providers shall:~~

27 ~~(1) Approve and monitor training programs including refresher training within its~~
28 ~~jurisdiction to assure compliance with this Chapter.~~

29 ~~(2) Approve the written and skills exam required for AED training course completion.~~

30 ~~(3) Develop policies and procedures for approval of AED instructors by the local EMS~~
31 ~~agency medical director. To be authorized to instruct public safety personnel in the use~~
32 ~~of an AED, and AED instructor shall either:~~

33 ~~(A) Complete an American Red Cross or American Heart Association recognized~~
34 ~~instructor course (or equivalent) including instruction and training in the use of an AED,~~
35 ~~or~~

36 ~~(B) Be approved by the local EMS agency director and meet the following requirements:~~

37 ~~1. Be AED accredited or able to show competency in the proper utilization of an AED,~~
38 ~~and~~

39 ~~2. Be able to demonstrate competency in adult teaching methodologies.~~

40 ~~(4) Establish policies and procedures for medical control pursuant to Section 1798 of~~
41 ~~the Health and Safety Code.~~

42 ~~(5) Establish policies and procedures for the approval and designation of public safety~~
43 ~~AED service provider(s) which will include requirements that public safety AED service~~
44 ~~providers have policies and procedures, approved by the local EMS agency medical~~
45 ~~director, to~~

- ~~(A) provide orientation of AED accredited personnel to the AED,~~
- ~~(B) ensure continued competency of AED accredited personnel, and~~
- ~~(C) collect and report data, as required by the local EMS agency but no less than annually, to the local EMS agency, pursuant to Section 100021.~~
- ~~(6) Establish policies and procedures to collect, maintain and evaluate patient care records.~~
- ~~(7) Report annually to the EMS Authority on:~~
 - ~~(A) The total number of patients, defibrillated, who were discharged from the hospital alive, and~~
 - ~~(B) The data collected by public safety AED service providers pursuant to Section 100021 of this chapter.~~

Note: Authority cited: Section 1797.107 and 1797.197, Health and Safety Code.
Reference: Sections 1797.52, 1797.58, 1797.74, 1797.90, 1797.175, 1797.176, 1797.182, 1797.183, 1798, 1798.2, 1798.4, 1798.100, 1798.102 and 1797.104, Health and Safety Code; and Section 13518, Penal Code.

§ 100020. Trial Studies.

Public safety personnel may perform any prehospital emergency medical care treatment procedure(s) or administer any medication(s) on a trial basis when approved by the Medical Director of the LEMSA and the Director of the Authority. The Medical Director of the LEMSA shall review the medical literature on the procedure or medication and determine in his/her professional judgment whether a trial study is needed.

(a) The Medical Director of the LEMSA shall review a trial study plan which, at a minimum, shall include the following:

(1) A description of the procedure(s) or medication(s) proposed, the medical conditions for which they can be utilized, and the patient population that will benefit.

(2) A compendium of relevant studies and material from the medical literature.

(3) A description of the proposed study design, including the scope of study and method of evaluating the effectiveness of the procedure(s) or medication(s), and expected outcome.

(4) Recommended policies and procedures to be instituted by the LEMSA regarding the use and medical control of the procedure(s) or medication(s) used in the study.

(5) A description of the training and competency testing required to implement the study. Training on subject matter shall be consistent with the related topic(s) and skill(s) specified in Section 100160, Chapter 4 (Paramedic regulations), Division 9, Title 22, California Code of Regulations.

(b) The Medical Director of the LEMSA shall appoint a local medical advisory committee to assist with the evaluation and approval of trial studies. The membership of the committee shall be determined by the Medical Director of the LEMSA, but shall include individuals with knowledge and experience in research and the effect of the proposed study on the EMS system.

(c) The Medical Director of the LEMSA shall submit the proposed study and a copy of the proposed trial study plan at least forty-five (45) calendar days prior to the proposed initiation of the study to the Director of the Authority for approval in accordance with the

1 provisions of Section 1797.221 of the Health and Safety Code. The Authority shall
2 inform the Commission on EMS of studies being initiated.

3 (d) The Authority shall notify the Medical Director of the LEMSA submitting its request
4 for approval of a trial study within fourteen (14) working days of receiving the request
5 that the request has been received.

6 (e) The Director of the Authority shall render the decision to approve or disapprove the
7 trial study within forty-five (45) calendar days of receipt of all materials specified in
8 subsections (a) and (b) of this section.

9 (f) Within eighteen (18) months of the initiation of the procedure(s) or medication(s), the
10 Medical Director of the LEMSA shall submit to the Commission on EMS a written report
11 which includes at a minimum the progress of the study, number of patients studied,
12 beneficial effects, adverse reactions or complications, appropriate statistical evaluation,
13 and general conclusion.

14 (g) The Commission on EMS shall review the above report within two (2) meetings and
15 advise the Authority to do one of the following:

16 (1) Recommend termination of the study if there are adverse effects or if no benefit from
17 the study is shown.

18 (2) Recommend continuation of the study for a maximum of eighteen (18) additional
19 months if potential but inconclusive benefit is shown.

20 (3) Recommend the procedure or medication be added to the authorized skills for public
21 safety personnel.

22 (h) If option (g)(2) is selected, the Commission on EMS may advise continuation of the
23 study as structured or alteration of the study to increase the validity of the results.

24 (i) At the end of the additional eighteen (18) month period, a final report shall be
25 submitted to the Commission on EMS with the same format as described in (f) above.

26 (j) The Commission on EMS shall review the final report and advise the Authority to do
27 one of the following:

28 (1) Recommend termination or further extension of the study.

29 (2) Accept the study recommendations.

30 (3) Recommend the procedure or medication be added to the authorized skills for public
31 safety personnel.

32 (k) The Authority may require a trial study(ies) to cease after thirty-six (36) months.

33 Note: Authority cited: Section 1797.107 and 1797.170, Health and Safety Code.

34 Reference: Sections 1797.182, 1797.183, and 1797.221, Health and Safety Code.

35
36 **§ Section 100021. Public Safety AED Service Provider.**

37 A public safety AED service provider is an agency or organization that employs
38 individuals as defined in Section ~~400045~~ 100014, and who obtain AEDs for the purpose
39 of providing AED services to the general public.

40 (a) A public safety AED service provider shall be approved by the ~~local EMS~~
41 ~~agency~~ LEMSA, or in the case of state or federal agencies, the EMS Authority, prior to
42 beginning service. In order to receive and maintain AED service provider approval, a
43 public safety AED service provider shall ensure compliance with the requirements of
44 this Chapter.

1 (b) Public safety AED service provider approval may be revoked or suspended for
2 failure to maintain the requirements of this section.

3 (c) A public safety AED service provider applicant shall be approved if they meet and
4 provide the following:

5 (1) Provide orientation of AED authorized personnel to the AED;

6 (2) Ensure maintenance of AED equipment;

7 (3) Ensure initial training and continued competency of AED authorized personnel;

8 ~~(4) Collect and report to the local EMS agency where the defibrillation occurred, as
9 required by the local EMS agency but no less than annually, data that includes, but is
10 not limited to:~~

11 ~~(A) The number of patients with sudden cardiac arrest receiving CPR prior to arrival of
12 emergency medical care.~~

13 ~~(B) The total number of patients on whom defibrillatory shocks were administered,
14 witnessed (seen or heard) and not witnessed; and~~

15 ~~(C) The number of these persons who suffered a witnessed cardiac arrest whose initial
16 monitored rhythm was ventricular tachycardia or ventricular fibrillation..~~

17 ~~(54) Authorize personnel and maintain a listing of all public safety AED service provider
18 authorized personnel and provide upon request to the local EMS agency LEMSA or the
19 EMS Authority.~~

20 ~~(ed) An approved public safety AED service provider and their authorized personnel
21 shall be recognized statewide.~~

22 Note: Authority cited: Section 1797.107, 1797.182 and 1797.183, Health and Safety
23 Code. Reference: Sections 1797.182 and, 1797.183 and 1797.190, Health and Safety
24 Code and Section 13518, Penal Code.

25
26 **~~§ 100022. Testing.~~**

27 ~~(a) The course of instruction shall include a written and skills examination which tests
28 the ability to assess and manage all the conditions listed in Sections 100018 and
29 100019 of this Chapter.~~

30 ~~(b) A passing standard shall be established by the training agency before administration
31 of the examination.~~

32 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
33 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

34
35 **~~§ 100023. Training Instructor Requirements.~~**

36 ~~(a) Training in first aid and CPR for the personnel specified in Section 100016 of this
37 Chapter shall be conducted by an instructor who is:~~

38 ~~(1) Proficient in the skills taught; and~~

39 ~~(2) qualified to teach by education and/or experience.~~

40 ~~(b) Determination of the instructor's qualifications shall be the responsibility of the
41 agency whose training program has been approved by the Authority pursuant to Section
42 100026 of this Chapter.~~

43 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
44 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

1 **~~§ 100024. Validation of Course Completion.~~**

2 ~~(a) Each trainee who successfully completes an approved course of instruction and~~
3 ~~successfully passes a proficiency test shall be given written verification to that effect by~~
4 ~~the institution, organization or agency which provides the instruction.~~

5 ~~(b) Employing agencies which provide approved courses of instruction to their~~
6 ~~employees need not provide individual written verification but shall maintain a record of~~
7 ~~the names of trainees and the date(s) on which training courses have been completed~~
8 ~~for at least three (3) years.~~

9 ~~(c) Such training records shall be made available for inspection by the local EMS~~
10 ~~agency upon request.~~

11 ~~Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections~~
12 ~~1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.~~

13
14 **§ 100025 100022. Public Safety First Aid and CPR Retraining Requirements.**

15 (a) The retraining requirements of this Chapter shall be satisfied every two years by
16 successful completion of either:

17 (1) An approved retraining course which includes a review of the topics and
18 demonstration of skills prescribed in this Chapter and which consists of no less than
19 ~~twelve (12)~~ eight (8) hours of first aid and CPR including AED every two (2) years; or

20 (2) By maintaining current and valid licensure or certification as an EMR, EMT,
21 Advanced EMT, Paramedic, Registered Nurse, Physician Assistant, Physician or by
22 maintaining current and valid EMR, EMT, AEMT or Paramedic registration from the
23 National Registry of EMTs; or

24 (23) Successful completion of a A competency based written and skills pretest of the
25 topics and skills prescribed in this Chapter with the following restrictions:

26 (A) That appropriate retraining be provided on those topics indicated necessary by the
27 pretest, in addition to any new developments in first aid and CPR;

28 (B) A final test be provided covering those topics included in the retraining for those
29 persons failing to pass the pretest; and

30 (C) The hours for the retraining may be reduced to those hours needed to cover the
31 topics indicated necessary by the pretest.

32 (b) The entire retraining course or pretest may be offered yearly by the any approved
33 training course, as defined in Section 100023 training agency, but in no event shall the
34 retraining course including CPR and AED or pretest be offered less than once every
35 ~~three (3)~~ two (2) years.

36 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
37 1797.182 and 1797.183, 1797.210, Health and Safety Code; and Section 13518, Penal
38 Code.

39
40 **Article 4. Public Safety First Aid and CPR Course Approval Requirements**
41 **Training Approval Options**

42
43 **§ 100026-100023. Public Safety First Aid and CPR Approved Courses.**

- 1 The training requirements of this Chapter may be satisfied by successfully completing
 2 any one of the following course options as determined by the employing agency in
 3 accordance with the course content contained in Section 100017 of this chapter:
 4 (a) A course in public safety first aid, including CPR and AED, developed and/or
 5 authorized by the ~~Fire Service Training Program of the Office of the State Fire Marshal~~
 6 California Department of Forestry and Fire Protection (CAL FIRE) and approved by the
 7 EMS Authority; or
 8 (b) A course in public safety first aid, including CPR and AED, authorized by the
 9 Commission on Peace Officer's Standards and Training (POST) and approved by the
 10 EMS Authority. No later than 24-months from the adoption of these regulations, POST,
 11 in consultation with the Authority, shall develop the course curriculum and testing
 12 competency standards for these regulations as they apply to peace officers; or
 13 (c) A course in public safety first aid, including CPR and AED, developed and
 14 authorized by the California Department of Parks and Recreation (DPR) and approved
 15 by the EMS Authority; or
 16 ~~(d) A course in first aid, including CPR, developed and authorized by the California~~
 17 ~~Department of Forestry and Fire Protection and approved by the EMS Authority; or~~
 18 (ed) A course in public safety first aid, including CPR and AED, developed and
 19 authorized by the Department of the California Highway Patrol (CHP) and approved by
 20 the EMS Authority; or
 21 ~~(f) A course in first aid, including CPR, sponsored and/or approved by the American~~
 22 ~~Red Cross; or~~
 23 ~~(g) A course in first aid sponsored and/or approved by the American Red Cross and a~~
 24 ~~course in CPR sponsored and/or approved by the American Heart Association; or~~
 25 (he) The U.S. Department of Transportation's first emergency medical responder (EMR)
 26 course which includes first aid practices and CPR and AED, approved by the ~~local EMS~~
 27 agency LEMSA; or
 28 (if) A course of at least 21 hours in first aid equivalent to the standards of the American
 29 Red Cross and/or healthcare provider level CPR and AED equivalent to the standards
 30 of the American Red Cross and/or American Heart Association in accordance with the
 31 course content contained in Section 100017 of this chapter and approved by the ~~local~~
 32 EMS agency LEMSA; or
 33 (jg) An EMT-I course which has been approved pursuant to Chapter 2 of this division; or
 34 (kh) An Advanced EMT-II (AEMT) course which has been approved pursuant to
 35 Chapter 3 of this division; or
 36 (li) An EMT-P Paramedic course which has been approved pursuant to Chapter 4 of this
 37 division; or
 38 (i) An EMR course approved by the Authority, and developed and authorized by CAL
 39 FIRE, POST, DPR, CHP or other Statewide public safety agency, as determined by the
 40 Authority.

41 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
 42 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

43
 44 **§ 400027100024. Course Approval Process.**

1 (a) For those courses requiring approval, the following shall be submitted to the
2 approving authority as specified in Section 100023 of this chapter when requesting
3 approval:

4 (a1) Name of the sponsoring institution, organization, or agency;

5 (b2) ~~e~~Detailed course outline;

6 (e3) ~~f~~Final written examination with pre-established scoring standards; and

7 (d4) ~~e~~Skill proficiency competency testing criteria, with pre-established scoring
8 standards; and

9 (5) Name and qualifications of instructor(s).

10 (b) Course approval is valid for four (4) years from the date of approval, and shall be
11 reviewed by the approving authority for approval every four (4) years, or sooner at the
12 discretion of the approving authority.

13 (c) The approving authority may request additional materials or documentation as a
14 condition of course approval.

15 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
16 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.
17

18 ~~**§ 100028. Program Review.**~~

19 ~~All course outlines, written tests, and proficiency testing criteria used in an approved~~
20 ~~program shall be subject to periodic review as determined by the approving Authority.~~

21 ~~Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections~~
22 ~~1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.~~
23

24 **§ 100025. Training Program Notification.**

25 (a) The approving authority shall notify the training program submitting its request for
26 training program approval within twenty-one (21) working days of receiving the request
27 that:

28 (1) The request has been received,

29 (2) The request contains or does not contain the information requested in Section
30 100023 and 100024 of this Chapter and,

31 (3) What information, if any, is missing from the request.

32 (b) Program approval or disapproval shall be made in writing by the approving authority
33 to the requesting training program within a reasonable period of time after receipt of all
34 required documentation as specified by LEMSA policy.

35 (c) The approving authority shall establish the effective date of program approval in
36 writing upon the satisfactory documentation of compliance with all program
37 requirements.

38 (fd) The LEMSA shall notify the Authority concurrently with the training program of
39 approval, renewal of approval, or disapproval of the training program, and include the
40 effective date. This notification is in addition to the name and address of training
41 program, name of the program director, phone number of the contact person, and
42 program approval/ expiration date of program approval.

43 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
44 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.
45

1 **§ 100026. Withdrawal of Program Approval**

2 (a) Noncompliance with any criterion required for program approval, use of any
3 unqualified teaching personnel, or noncompliance with any other applicable provision of
4 this Chapter may result in denial, probation, suspension or revocation of program
5 approval by the training program approving authority.

6 (b) Notification of noncompliance and action to place on probation, suspend, or revoke
7 shall be done as follows:

8 (1) A training program approving authority shall notify the approved training program
9 course director in writing, by registered mail, of the provisions of this Chapter with which
10 the training program is not in compliance.

11 (2) Within fifteen (15) working days of receipt of the notification of noncompliance, the
12 approved training program shall submit in writing, by registered mail, to the training
13 program approving authority one of the following:

14 (A) Evidence of compliance with the provisions of this Chapter, or

15 (B) A plan for meeting compliance with the provisions of this Chapter within sixty (60)
16 calendar days from the day of receipt of the notification of noncompliance.

17 (3) Within fifteen (15) working days of receipt of the response from the approved
18 training program, or within thirty (30) calendar days from the mailing date of the
19 noncompliance notification if no response is received from the approved training
20 program, the training program approving authority shall notify the Authority and the
21 approved training program in writing, by registered mail, of the decision to accept the
22 evidence of compliance, accept the plan for meeting compliance, place on probation,
23 suspend or revoke the training program approval.

24 (4) If the training program approving authority decides to suspend, revoke, or place an
25 training program on probation the notification specified in subsection (a)(3) of this
26 section shall include the beginning and ending dates of the probation or suspension and
27 the terms and conditions for lifting of the probation or suspension or the effective date
28 of the revocation, which may not be less than sixty (60) calendar days from the date of
29 the training program approving authority's letter of decision to the Authority and the
30 training program.

31 Note: Authority cited: Sections 1797.107, Health and Safety Code. Reference: Sections
32 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

33
34 **§ 100027. Testing.**

35 (a) The initial and retraining course of instruction shall include a written and skills
36 examination which tests the ability to assess and manage all of the conditions, content
37 and skills listed in Sections 100017 and 100018 of this Chapter.

38 (b) A passing standard shall be established by the training agency before administration
39 of the examination and shall be in compliance with the standard submitted to and
40 approved by the approving authority according to Sections 100023 and 100024.

41 (c) Public safety first aid and/or CPR training programs shall test the knowledge and
42 skills specified in this chapter and have a passing standard for successful completion of
43 the course and shall ensure competency of each skill.

44 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
45 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

1
2 **§ 100028. Training Instructor Requirements.**

3 (a) Training in public safety first aid and CPR for the personnel specified in Section
4 100014 of this Chapter shall be conducted by an instructor who is:

5 (1) Proficient in the skills taught; and

6 (2) Qualified to teach by education and/or experience.

7 (b) Validation of the instructor's qualifications shall be the responsibility of the agency
8 whose training program has been approved by the approving authority pursuant to
9 Sections 100023 and 100024 of this Chapter.

10 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
11 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

12
13 **§ 100029. Validation of Course Completion.**

14 (a) Each trainee who successfully completes an approved course of instruction and
15 successfully passes the competency based written and skills exams shall be given a
16 certificate or written verification to that effect by the institution, organization or agency
17 which provides the instruction.

18 (b) Each certificate or written verification of course completion shall include the following
19 information:

20 (1) Indicate initial or refresher training and number of training hours completed;

21 (2) Date of issue;

22 (3) Date of expiration;

23 (i) Expiration of training shall be 2 years from the date of course completion.

24 (c) Each training program provider shall maintain a record of the names of trainees and
25 the date(s) on which training courses have been completed for at least four (4) years.

26 (d) Such training records shall be made available for inspection by the LEMSA or
27 approving authority upon request.

28 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
29 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

30
31 **§ 100030. Program Review.**

32 (a) All course outlines, written tests, and competency testing criteria used in an
33 approved program shall be subject to oversight and periodic review as determined by
34 the approving authority.

35 (b) Program approval and renewal is contingent upon continued compliance with all
36 required criteria and provisions described in this Chapter, and may be revoked by the
37 approving authority as described in Section 100026 of this Chapter.

38 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections
39 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

