

**EMERGENCY MEDICAL SERVICES AUTHORITY**

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**DATE:** June 18, 2014

**TO:** Commission on EMS

**FROM:** Howard Backer, MD, MPH, FACEP  
Director

**PREPARED BY:** Lisa Witchey, Manager  
Personnel Standards Unit

**SUBJECT:** Chapter 1.5 Regulations: First Aid Standards for Public Safety Personnel

**RECOMMENDED ACTION:**

Receive information on proposed amendments to Chapter 1.5 Regulations: First Aid Standards for Public Safety Personnel.

**FISCAL IMPACT:**

None.

**DISCUSSION:**

The EMS Authority has proposed revisions to the Chapter 1.5: First Aid Standards for Public Safety Personnel regulations to address areas of the regulations that are outdated. The proposed regulations add a basic first aid scope of practice, and add optional skills that may be approved by the local EMS agency Medical Director.

Proposed changes to the regulations include replacing the outdated First Responder course curriculum with the current National EMR instructional guidelines; adding optional skills such as epinephrine, oxygen, naloxone, oropharyngeal airways, hemostatic dressings and tourniquets; and adding training elements of Tactical First Aid for public safety first aid personnel to the basic course content.

The EMS Authority anticipates opening rulemaking with the Office of Administrative Law in May 2014, with a 45-day public comment period available from May 23, 2014 through July 7, 2014 to solicit feedback from stakeholders and the public. Based on comments received during the pre-public comment period (December 20, 2013 – February 2, 2014), the following critical areas were identified:

- Requirement for LEMSA approval of courses that meet the basic course content contained in this chapter and are equivalent to the training standards of the American Red Cross or American Heart Association and are at least 24-hours in length;

Commission on EMS  
June 18, 2014

- Increase in minimum training hours required from 21 hours to 24 hours;
- AED training incorporated into the basic course content;
- Use of nasopharangeal airways added to the basic course content; and,
- Training in tactical first aid principals added to the basic course content.

*Estimated Regulation and Rulemaking Timeline*

- May 13, 2014                      Open rulemaking file with OAL
- May 23-July 7, 2014            45-day public comment period
- July 21-August 4, 2014        15-day public comment period (if needed)
- September 17, 2014            Seek Commission approval
- October 1, 2014                Submit to OAL for review and approval
- November 15, 2014            Regulations approved, filed with Secretary of State
- January 1, 2015                Regulations are effective

We will keep the commission informed on the progress of revisions to the Chapter 1.5 regulations.

The following document is attached:

- Proposed Chapter 1.5 Regulations: First Aid and CPR Standards and Training for Public Safety Personnel.

**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**

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

- Additions to the original text = underline
  - 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’s (AHA) Emergency Cardiovascular Care (ECC) Guidelines. 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.**

“Public Safety First Aid” means the recognition of and immediate care for injury or sudden illness, including medical emergencies, by public safety personnel prior to the availability of medical care by licensed or certified health care professionals.

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 **§ 100010. Lifeguard. (no change)**

5  
6 **§ 100011. Peace Officer. (no change)**

7  
8 **§ 100012. Primarily Clerical or Administrative. (no change)**

9  
10 **~~§ 100013. Qualified Instructor.~~**

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

13 ~~Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections~~  
14 ~~1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.~~

15  
16 **§ 100014. Regularly Employed. (no change)**

17  
18 **Article 2. General Training Provisions**

19  
20 **§ ~~100015~~ 100013. Application and Scope.**

21 (a) Except those whose duties are primarily clerical or administrative, the following  
22 regularly employed public safety personnel shall be trained to administer first aid, and  
23 cardiopulmonary resuscitation CPR, and use an AED according to the standards set  
24 forth in this Chapter:

- 25 (a1) lifeguard;  
26 (b2) firefighter;  
27 (c3) peace officer.

28 (b) The requirements in subsection (a) may be met by successfully completing training  
29 described in section 100020 at least every two years in Public Safety First Aid and  
30 CPR/AED or EMR, current California certification or licensure as an EMT, Advanced  
31 EMT, Paramedic, Registered Nurse, Physician Assistant, Physician or by maintaining  
32 current and valid EMR, EMT, AEMT or Paramedic registration from the National  
33 Registry of EMTs.

34 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections  
35 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

36  
37 **§ ~~100016~~ 100014. Training Programs In Operation.**

38 Training programs in operation prior to the effective date of these regulations shall  
39 submit evidence of compliance with this Chapter to the appropriate approving Authority  
40 as specified in Section ~~100026~~ 100021 of this Chapter within six (6) months after the  
41 effective date of these regulations.

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

44  
45 **§ ~~100017~~ 100015. Time Limitation for Initial Training.**

1 The initial training requirements specified in Section 100016 of this Chapter shall be  
2 satisfactorily completed within one (1) year from the effective date of the individual's  
3 initial employment and, whenever possible, prior to assumption of regular duty in one of  
4 the personnel categories set forth in Section 400046 100013 of this Chapter.

5 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections  
6 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

### 7 8 **Article 3. Public Safety First Aid and CPR/AED Training Standards**

#### 9 10 **§ ~~400018~~ 100016. Scope of Course Public Safety First Aid and CPR/AED Course** 11 **Content.**

12 (a) The initial course of instruction shall at a minimum consist of not less than ~~fifteen~~  
13 ~~(15) hours in first aid and six (6) hours in cardiopulmonary resuscitation~~ twenty-four (24)  
14 hours in first aid and CPR/AED.

15 (b) The course of instruction shall include, but need not be limited to, the following  
16 scope of courses which shall prepare personnel specified in Section 400046 100013 of  
17 this Chapter to recognize the injury or illness of the individual and render assistance;.

18 (c) The content of the training course shall include recognition and treatment of at least  
19 the following topics and shall be skill oriented:

20 (1) Emergency action principles which describe the basic problems of decision-making  
21 in first aid; Role of the Public Safety First Aid provider;

22 (A) Personal safety;

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

24 (C) Legal considerations;

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

26 (E) Integration with EMS personnel;

27 (F) Minimum equipment and First Aid kits;

28 (2) Heart attack and sudden cardiac arrest;

29 (A) Respiratory and circulatory systems;

30 (B) Heart attack;

31 (C) Sudden cardiac arrest and early defibrillation;

32 (D) Chain of survival;

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

35 (A) Basic airway management;

36 (B) Use of nasopharyngeal (nasal) airways (NPAs);

37 (i) Insertion and assessment of placement;

38 (ii) Indications and contraindications;

39 (C) Rescue breathing;

40 (i) Mouth to mouth;

41 (ii) Mouth to mask;

42 (iii) Bag valve mask (BVM).

43 (D) Chest compressions and CPR;

44 (E) AED;

45 (i) Basic AED operation;

46 (ii) Using the AED;

- 1 (iii) Troubleshooting and other considerations;
- 2 (F) Single rescuer CPR/AED on adult, child and infant;
- 3 (G) Two rescuer CPR/AED on adult, child and infant;
- 4 (H) Recovery position;
- 5 (4) Management of foreign body airway obstruction on adults, children, and infants;
- 6 (A) Conscious patients;
- 7 (B) Unconscious patients;
- 8 (5) Examination and assessment of adult and pediatric patients for both medical and
- 9 traumatic emergencies;
- 10 (A) Performing a primary assessment;
- 11 (B) Perform physical assessment;
- 12 (C) Obtaining a patient history;
- 13 (6) Medical Emergencies;
- 14 (A) Pain, severe pressure, or discomfort in chest;
- 15 (B) Breathing difficulties, including asthma and COPD;
- 16 (C) Allergic reactions and anaphylaxis;
- 17 (D) Altered mental status;
- 18 (E) Stroke;
- 19 (F) Diabetic emergencies;
- 20 (G) Seizures;
- 21 (H) Alcohol and drug emergencies;
- 22 (I) Severe abdominal pain;
- 23 (J) Obstetrical emergencies;
- 24 (K) Sudden Infant Death Syndrome (SIDS);
- 25 (7) Burns;
- 26 (A) Thermal burns;
- 27 (B) Chemical burns;
- 28 (C) Electrical burns;
- 29 (8) Facial Injuries;
- 30 (A) Objects in the eye;
- 31 (B) Chemical in the eye;
- 32 (C) Nosebleed;
- 33 (D) Dental emergencies;
- 34 (9) Environmental Emergencies;
- 35 (A) Heat emergencies;
- 36 (B) Cold emergencies;
- 37 (C) Drowning;
- 38 (10) Bites and Stings;
- 39 (A) Insect bites and stings;
- 40 (B) Animal and human bites;
- 41 (11) Poisoning;
- 42 (A) Ingested poisoning;
- 43 (B) Inhaled poisoning;
- 44 (C) Exposure to chemical, biological, or radiological substances;
- 45 (i) Recognition of exposure;
- 46 (ii) Scene safety;

- 1 (D) Poison control system;
- 2 (12) Management of Psychological Emergencies;
- 3 (13) Patient Movement;
- 4 (A) Emergency movement of patients;
- 5 (B) Lifts and carries;
- 6 (14) Tactical and Rescue First Aid Principles Applied to Special Circumstances;
- 7 (A) Principles of tactical emergency casualty care;
- 8 (B) Extrication and movement of patients using soft litters and manual extractions
- 9 including fore/aft, side-by-side, shoulder/belt;
- 10 (C) Basic airway management;
- 11 (D) Medical threat assessment and planning;
- 12 (E) Integration between EMS and law enforcement for active shooter incidents;
- 13 (15) Orientation to the EMS System, including;
- 14 (A) 9-1-1 access;
- 15 (B) Interaction with EMS personnel;
- 16 (C) Orientation to local EMS and trauma systems.
- 17 (16) Trauma Emergencies;
- 18 (A) Soft tissue injuries and wounds;
- 19 (B) Amputations and impaled objects;
- 20 (C) Chest and abdominal injuries;
- 21 (i) Review of basic treatment for chest wall injuries
- 22 (ii) Application of chest seals;
- 23 (D) Head, neck, or back injury;
- 24 (E) Spinal immobilization;
- 25 (F) Musculoskeletal trauma and splinting;
- 26 (G) Recognition of signs and symptoms of shock;
- 27 (i) Basic treatment of shock;
- 28 (ii) Importance of maintaining normal body temperature;
- 29 (H) Internal bleeding;
- 30 (I) Control of bleeding, including direct pressure, tourniquet, hemostatic
- 31 Dressings, chest seals and dressings;
- 32 (i) Training in the use of hemostatic dressings shall consist of not less than one (1) hour
- 33 resulting in competency in the application of hemostatic dressings. Included in the
- 34 training shall be the following topics and skills:
- 35 (1) Review of basic methods of bleeding control to include but not be limited to direct
- 36 pressure, pressure bandages, tourniquets, and hemostatic dressings and wound
- 37 packing;
- 38 (2) Types of hemostatic dressings.
- 39 (2) First-aid for medical emergencies, including sudden illnesses;
- 40 (3) Cardiac and respiratory emergencies, including cardiac and/or respiratory failures in
- 41 victims of all ages;
- 42 (4) First-aid for traumatic injuries including wounds, and life threatening bleeding;
- 43 (5) First-aid for specific injuries, including care for specific injuries to different parts of
- 44 the body;
- 45 (6) Bandaging, including materials and guidelines used in bandaging;

1 ~~(7) First aid for environmental emergencies including burns, heat and chemical burns,~~  
2 ~~electrical emergencies and exposure to radiation, or climatic changes;~~  
3 ~~(8) First aid for injuries to bones, muscles, and joints;~~  
4 ~~(9) Emergency rescue and transfer;~~  
5 ~~(10) First aid for obstetrical emergencies.~~  
6 Note: Authority cited: Section 1797.107 and 1797.193, Health and Safety Code.  
7 Reference: Sections 1797.176, 1797.182 and 1797.183, Health and Safety Code; and  
8 Section 13518, Penal Code.

9  
10 **§ 100019. Required Topics.**

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

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

33 ~~Note: Authority cited: Section: 1797.107, Health and Safety Code. Reference: Sections~~  
34 ~~1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.~~

35  
36 **§ 100017. Scope of Practice for Public Safety First Aid Providers**

37 (a) A Public Safety First Aid provider during training, or while at the scene of an  
38 emergency, is authorized to perform medical care including, but not limited to, CPR and  
39 AED and may do any of the following:

- 40 (1) Evaluate the ill and injured;
- 41 (2) Provide treatment for shock.
- 42 (3) Use the following techniques to support airway and breathing:
  - 43 (A) Manual airway opening methods, including head-tilt chin lift and/ or jaw thrust;
  - 44 (B) Manual methods to remove an airway obstruction in adults, children, and infants;
  - 45 (C) Use nasopharyngeal (nasal) airways (NPAs);
  - 46 (D) Use the recovery position.

- 1 (4) Use the following during emergency care:  
2 (A) Spinal immobilization;  
3 (B) Splinting of extremities;  
4 (C) Emergency eye irrigation using water or normal saline;  
5 (D) Assist with administration of oral glucose;  
6 (E) Assist patients with administration of physician-prescribed epinephrine devices and  
7 naloxone;  
8 (F) Assist in emergency childbirth;  
9 (G) Hemorrhage control using direct pressure, pressure bandages, principles of  
10 pressure points, and tourniquets. Hemostatic dressings and wound packing may be  
11 used when approved by the LEMSA Medical Director and from the list approved by the  
12 EMS Authority;  
13 (H) Chest seals and dressings;  
14 (I) Simple decontamination techniques and equipment.  
15 (b) The scope of practice of a Public Safety First Aid provider shall not exceed those  
16 activities authorized in this section.  
17 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections  
18 1797.176, 1797.182, 1797.183, 1797.220 and 1798, Health and Safety Code; and  
19 Section 13518, Penal Code.

20

21 **§ 400020 100018. Optional Skills.**

22 (a) In addition to the activities authorized by Section ~~400049~~ 100017 of this Chapter,  
23 public safety personnel may perform any or all of the following optional skills specified in  
24 this section when the public safety first aid provider has been trained and tested to  
25 demonstrate competence following initial instruction, and when authorized by the  
26 Medical Director of the LEMSA.

27 (b) A LEMSA shall establish policies and procedures that require public safety first aid  
28 personnel to demonstrate trained optional skills competency at least every two years, or  
29 more frequently as determined by EMSQIP. ~~AED when authorized by a public safety~~  
30 ~~AED service provider.~~

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

32 (1) Training in the administration of epinephrine shall consist of no less than two (2)  
33 hours to result in the public safety first aid provider being competent in the  
34 administration of epinephrine and managing a patient of a suspected anaphylactic  
35 reaction. Included in the training hours listed above shall be the following topics and  
36 skills:

37 (A) Common causative agents;

38 (B) Signs and symptoms of anaphylaxis;

39 (C) Assessment findings;

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

41 (E) Need for appropriate personal protective equipment and scene safety awareness;

42 (F) Profile of epinephrine to include, but not be limited to:

43 1. Class;

44 2. Mechanisms of drug action;

45 3. Indications;

46 4. Contraindications;

1 5. Dosage and route of administration;  
2 6. Side/ adverse effects;  
3 (G) Administration of epinephrine by auto-injector;  
4 1. Site selection and administration;  
5 2. Medical asepsis;  
6 3. Disposal of contaminated items and sharps.  
7 (2) At the completion of this training, the student shall complete a competency based  
8 written and skills examination for administration of epinephrine which shall include:  
9 (A) Assessment of when to administer epinephrine;  
10 (B) Managing a patient before and after administering epinephrine;  
11 (C) Accessing 9-1-1 or advanced life support services for all patients suffering  
12 anaphylaxis or receiving epinephrine administration;  
13 (D) Using universal precautions and body substance isolation procedures during  
14 medication administration;  
15 (E) Demonstrating aseptic technique during medication administration;  
16 (F) Demonstrate preparation and administration of epinephrine by auto-injector;  
17 (G) Proper disposal of contaminated items and sharps.  
18 (d) Supplemental oxygen therapy using a non-rebreather face mask or nasal cannula,  
19 and bag-valve-mask ventilation.  
20 (1) Training in the administration of oxygen shall consist of no less than two (2) hours to  
21 result in the public safety first aid provider being competent in the administration of  
22 supplemental oxygen and use of bag-valve-mask ventilation for patient requiring oxygen  
23 administration and ventilation. Included in the training hours listed above shall be the  
24 following topics and skills:  
25 (A) Integrating the use of supplemental oxygen by non-rebreather mask or nasal  
26 cannula based upon local EMS protocols;  
27 (B) Assessment and management of patients with respiratory distress;  
28 (C) Profile of Oxygen to include, but not be limited to:  
29 1. Class;  
30 2. Mechanism of Action;  
31 3. Indications;  
32 4. Contraindications;  
33 5. Dosage;  
34 6. Side/ adverse effects;  
35 (D) Oxygen Delivery Systems;  
36 1. Set up of oxygen delivery including tank opening, use of regulator and liter flow  
37 selection.  
38 2. Percent of relative oxygen delivered by type of mask;  
39 3. Oxygen delivery for a breathing patient, including non-rebreather mask and nasal  
40 cannula;  
41 4. Bag-Valve-Mask and Oxygen delivery for a non-breathing patient;  
42 (E) Safety precautions.  
43 (2) At the completion of the training, the student shall complete a competency based  
44 written and skills examination for the administration of oxygen which shall include the  
45 topics listed above and:

- 1 (A) Assessment of when to administer supplemental oxygen and ventilation with a bag-  
2 valve-mask;  
3 (B) Managing a patient before and after oxygen administration;  
4 (C) Demonstrating preparation of the oxygen delivery system;  
5 (D) Demonstrating application of supplemental oxygen by non-rebreather mask and  
6 nasal cannula on a breathing patient;  
7 (E) Demonstrating use of bag-valve-mask on a non-breathing patient.  
8 (e) Administration of auto-injectors containing atropine and pralidoxime chloride for  
9 nerve agent exposure for self or peer care, when authorized by the medical director of a  
10 LEMSA or the Authority, while working for a public safety provider.  
11 (1) Training in the administration of auto-injectors containing atropine and pralidoxime  
12 shall consist of no less than two (2) hours, to result in the public safety first aid provider  
13 being competent in the administration of auto-injectors for nerve agent intoxication.  
14 Included in the training hours listed above shall be the following topics and skills:  
15 (A) Integrating the use of auto-injectors for nerve agent intoxication based upon local  
16 EMS protocols;  
17 (B) Assessment and recognition of patients with nerve agent intoxication;  
18 (C) Management of patients with nerve agent exposure, including the need for  
19 appropriate personal protective equipment, decontamination principles, and scene  
20 safety awareness;  
21 (D) Profile of atropine and pralidoxime chloride to include, but not be limited to:  
22 1. Class;  
23 2. Mechanism of action;  
24 3. Indications;  
25 4. Contraindications;  
26 5. Dosage and route of administration;  
27 6. Side/ adverse effects;  
28 (E) Auto-Injector delivery and types (ie Duo-Dote, Mark I)  
29 1. Medical asepsis;  
30 2. Site selection and administration;  
31 3. Disposal of contaminated items and sharps;  
32 4. Safety precautions.  
33 (2) At the completion of the training, the student shall complete a competency based  
34 written and skills examination for the administration of auto-injectors containing atropine  
35 and pralidoxime chloride for nerve agent intoxication which shall include the topics listed  
36 above and:  
37 (A) Assessment of when to administer nerve agent auto-injector;  
38 (B) Managing a patient before and after auto-injector administration;  
39 (C) Accessing 9-1-1 or advanced life support services following administration of  
40 atropine and pralidoxime.  
41 (D) Demonstrating preparation, site selection, and administration of the auto-injector;  
42 (E) Demonstrating universal precautions and body substance isolation procedure during  
43 medication administration;  
44 (F) Demonstrating aseptic technique during medication administration;  
45 (G) Proper disposal of contaminated items and sharps.  
46 (f) Administration of naloxone for suspected narcotic overdose.

- 1 (1) Training in the administration of naloxone shall consist of no less than two (2) hours  
2 to result in the public safety first aid provider being competent in the administration of  
3 naloxone and managing a patient of a suspected narcotic overdose. Included in the  
4 training hours listed above shall be the following topics and skills:  
5 (A) Common causative agents  
6 (B) Assessment findings  
7 (C) Management to include but not be limited to:  
8 (D) Need for appropriate personal protective equipment and scene safety awareness  
9 (E) Profile of Naloxone to include, but not be limited to:  
10 1. Indications  
11 2. Contraindications  
12 3. Side/adverse effects  
13 4. Routes of administration  
14 5. Dosages  
15 (F) Mechanisms of drug action  
16 (G) Calculating drug dosages  
17 (H) Medical asepsis  
18 (I) Disposal of contaminated items and sharps  
19 (2) At the completion of this training, the student shall complete a competency based  
20 written and skills examination for administration of naloxone which shall include:  
21 (A) Assessment of when to administer naloxone,  
22 (B) Managing a patient before and after administering naloxone,  
23 (C) Using universal precautions and body substance isolation procedures during  
24 medication administration,  
25 (D) Demonstrating aseptic technique during medication administration,  
26 (E) Demonstrate preparation and administration of parenteral medications by a route  
27 other than intravenous.  
28 (F) Proper disposal of contaminated items and sharps.  
29 (g) Use of oropharyngeal (oral) airways (OPAs).  
30 (1) Training in the use of OPAs shall consist of not less than one (1) hour to result in the  
31 public safety first aid provider being competent in the use of the devices and airway  
32 control. Included in the above training hours shall be the following topics and skills:  
33 (A) Anatomy and physiology of the respiratory system;  
34 (B) Assessment of the respiratory system;  
35 (C) Review of basic airway management techniques, which includes manual and  
36 mechanical;  
37 (D) The role of OPA airway adjuncts in the sequence of airway control;  
38 (E) Indications and contraindications of OPAs;  
39 (F) The role of pre-oxygenation in preparation for OPAs;  
40 (G) OPA insertion and assessment of placement;  
41 (H) Methods for prevention of basic skills deterioration;  
42 (I) Alternatives to the OPAs.  
43 (2) At the completion of initial training a student shall complete a competency-based  
44 written and skills examination for airway management which shall include the use of  
45 basic airway equipment and techniques and use of OPAs.

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

- 3 ~~(A) Proper use, maintenance and periodic inspection of the AED.~~
- 4 ~~(B) The importance of cardiopulmonary resuscitation (CPR), defibrillation, advanced life~~  
5 ~~support (ALS), adequate airway care, and internal emergency response system, if~~  
6 ~~applicable.~~
- 7 ~~(C) Overview of the EMS system, the local EMS system's medical control policies,~~  
8 ~~9-1-1 access, and interaction with EMS personnel.~~
- 9 ~~(D) Assessment of an unconscious patient, to include evaluation of airway, breathing,~~  
10 ~~and circulation to determine cardiac arrest.~~
- 11 ~~(E) Information relating to AED safety precautions to enable the individual to administer~~  
12 ~~a shock without jeopardizing the safety of the patient or rescuers or other nearby~~  
13 ~~persons.~~
- 14 ~~(F) Recognition that an electrical shock has been delivered to the patient and that the~~  
15 ~~defibrillator is no longer charged.~~
- 16 ~~(G) Rapid, accurate assessment of the patient's post-shock status.~~
- 17 ~~(H) The appropriate continuation of care following a successful defibrillation.~~

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

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

- 23 ~~(1) Approve and monitor training programs including refresher training within its~~  
24 ~~jurisdiction to assure compliance with this Chapter.~~
- 25 ~~(2) Approve the written and skills exam required for AED training course completion.~~
- 26 ~~(3) Develop policies and procedures for approval of AED instructors by the local EMS~~  
27 ~~agency medical director. To be authorized to instruct public safety personnel in the use~~  
28 ~~of an AED, an AED instructor shall either:~~
- 29 ~~(A) Complete an American Red Cross or American Heart Association recognized~~  
30 ~~instructor course (or equivalent) including instruction and training in the use of an AED,~~  
31 ~~or (B) Be approved by the local EMS agency director and meet the following~~  
32 ~~requirements:~~
- 33 ~~1. Be AED accredited or able to show competency in the proper utilization of an AED,~~  
34 ~~and~~
- 35 ~~2. Be able to demonstrate competency in adult teaching methodologies.~~
- 36 ~~(4) Establish policies and procedures for medical control pursuant to Section 1798 of~~  
37 ~~the Health and Safety Code.~~
- 38 ~~(5) Establish policies and procedures for the approval and designation of public safety~~  
39 ~~AED service provider(s) which will include requirements that public safety AED service~~  
40 ~~providers have policies and procedures, approved by the local EMS agency medical~~  
41 ~~director, to~~
- 42 ~~(A) provide orientation of AED accredited personnel to the AED,~~
- 43 ~~(B) ensure continued competency of AED accredited personnel, and~~
- 44 ~~(C) collect and report data to the local EMS agency, pursuant to Section 100021.~~
- 45 ~~(6) Establish policies and procedures to collect, maintain and evaluate patient care~~  
46 ~~records.~~

1 ~~(7) Report annually to the EMS Authority on:~~  
2 ~~(A) The total number of patients, defibrillated; who were discharged from the hospital~~  
3 ~~alive, and~~

4 ~~(B) The data collected by public safety AED service providers pursuant to Section~~  
5 ~~100021 of this chapter.~~

6 Note: Authority cited: Section 1797.107 and 1797.197, Health and Safety Code.

7 Reference: Sections ~~1797.52, 1797.58, 1797.74, 1797.90, 1797.175, 1797.176,~~  
8 ~~1797.182, 1797.183, 1798, 1798.2, 1798.4, 1798.100, 1798.102 and 1797.104~~, Health  
9 and Safety Code; and Section 13518, Penal Code.

10  
11 **§ Section ~~100021~~ 100019. Public Safety AED Service Provider.**

12 A public safety AED service provider is an agency or organization that employs  
13 individuals as defined in Section ~~400045~~ 100013, and who obtain AEDs for the purpose  
14 of providing AED services to the general public.

15 (a) A public safety AED service provider shall be approved by the local EMS agency, or  
16 in the case of state or federal agencies, the EMS Authority, prior to beginning service. In  
17 order to receive and maintain AED service provider approval, a public safety AED  
18 service provider shall ensure compliance with the requirements of this Chapter.

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

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

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

24 (2) Ensure maintenance of AED equipment;

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

26 (4) Patient Care Reports (PCRs) shall document information required by and consistent  
27 with local EMS agency requirements. Collect and report to the local EMS agency where  
28 the defibrillation occurred, as required by the local EMS agency but no less than  
29 annually, data that includes, but is not limited to:

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

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

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

36 (5) Authorize personnel and maintain a listing of all public safety AED service provider  
37 authorized personnel and provide upon request to the local EMS agency or the EMS  
38 Authority.

39 (c) An approved public safety AED service provider and their authorized personnel shall  
40 be recognized statewide.

41 NOTE: Authority cited: Section 1797.107, 1797.182 and 1797.183, Health and Safety  
42 Code. Reference: Sections 1797.182 and, 1797.183 and 1797.190, Health and Safety  
43 Code and Section 13518, Penal Code.

44  
45 **§ ~~100022~~. Testing.**

1 ~~(a) The course of instruction shall include a written and skills examination which tests~~  
2 ~~the ability to assess and manage all the conditions listed in Sections 100018 and~~  
3 ~~100019 of this Chapter.~~

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

6 ~~Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections~~  
7 ~~1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.~~

8  
9 **~~§ 100023. Training Instructor Requirements.~~**

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

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

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

14 ~~(b) Determination of the instructor's qualifications shall be the responsibility of the~~  
15 ~~agency whose training program has been approved by the Authority pursuant to Section~~  
16 ~~100026 of this Chapter.~~

17 ~~Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections~~  
18 ~~1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.~~

19  
20 **~~§ 100024. Validation of Course Completion.~~**

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

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

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

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

32  
33 **~~§ 100025 100020. Public Safety First Aid and CPR/AED Retraining Requirements.~~**

34 ~~(a) The retraining requirements of this Chapter shall be satisfied by successful~~  
35 ~~completion of either:~~

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

39 ~~(2) Peace Officers may successfully complete a A competency based written and skills~~  
40 ~~pretest of the topics and skills prescribed in this Chapter with the following restrictions:~~

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

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

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

1 (b) The entire retraining course or pretest may be offered to Peace Officers yearly by  
2 ~~the~~ any approved training course, as defined in Section 100021 training agency, but in  
3 no event shall the retraining course or pretest be offered less than once every three (3)  
4 years.

5 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections  
6 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.  
7

8 **Article 4. Public Safety First Aid and CPR/AED Course Approval Requirements**  
9 **Training Approval Options**

10  
11 **§ ~~100026~~-100021. Public Safety First Aid and CPR/AED Approved Courses.**

12 The training requirements of this Chapter may be satisfied by successfully completing  
13 any one of the following course options as determined by the employing agency in  
14 accordance with the course content contained in Section 100016 of this chapter:

15 (a) A course in public safety first aid, including CPR and AED, developed and/or  
16 authorized by the ~~Fire Service Training Program of the Office of the State Fire Marshal~~  
17 California Department of Forestry and Fire Protection (CAL FIRE) and approved by the  
18 EMS Authority; or

19 (b) A course in public safety first aid, including CPR and AED, authorized by the  
20 Commission on Peace Officer's Standards and Training (POST) and approved by the  
21 EMS Authority; or

22 (c) A course in public safety first aid, including CPR and AED, developed and  
23 authorized by the California Department of Parks and Recreation (DPR) and approved  
24 by the EMS Authority; or

25 ~~(d) A course in first aid, including CPR, developed and authorized by the California~~  
26 ~~Department of Forestry and Fire Protection and approved by the EMS Authority; or~~

27 ~~(ed)~~ (e) A course in public safety first aid, including CPR and AED, developed and  
28 authorized by the Department of the California Highway Patrol (CHP) and approved by  
29 the EMS Authority; or

30 ~~(f) A course in first aid, including CPR, sponsored and/or approved by the American~~  
31 ~~Red Cross; or~~

32 ~~(g) A course in first aid sponsored and/or approved by the American Red Cross and a~~  
33 ~~course in CPR sponsored and/or approved by the American Heart Association; or~~

34 ~~(he)~~ (h) The U.S. Department of Transportation's first emergency medical responder (EMR)  
35 course which includes first aid practices and CPR and AED, approved by the local EMS  
36 agency; or

37 (if) A course of at least 24 hours in first aid and/or healthcare provider level CPR and  
38 AED equivalent to the standards of the American Red Cross and/or American Heart  
39 Association in accordance with the course content contained in Section 100016 of this  
40 chapter and approved by the local EMS agency; or

41 (jg) An EMT-I course which has been approved pursuant to Chapter 2 of this division; or

42 (kh) An Advanced EMT-II (AEMT) course which has been approved pursuant to  
43 Chapter 3 of this division; or

44 (i) An ~~EMT-P~~ Paramedic course which has been approved pursuant to Chapter 4 of this  
45 division; or

1 (j) An EMR course approved by the Authority, and developed and authorized by CAL  
2 FIRE, POST, DPR, CHP or other Statewide public safety agency, as determined by the  
3 Authority.

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 **§ 100027100022. Course Approval Process.**

8 (a) For those courses requiring approval, the following shall be submitted to the  
9 approving authority as specified in section 100021 of this chapter when requesting  
10 approval:

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

12 (b2) eCourse outline;

13 (c3) fFinal written examination with pre-established scoring standards; and

14 (d4) sSkill proficiency competency testing criteria, with pre-established scoring  
15 standards; and

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

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

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

23 **§ 100028. Program Review.**

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

26 ~~Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections~~  
27 ~~1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.~~  
28

29 **§ 100023. Training Program Notification.**

30 (a) The approving authority shall notify the training program submitting its request for  
31 training program approval within fifteen (15) working days of receiving the request that:

32 (1) The request has been received,

33 (2) The request contains or does not contain the information requested in Section  
34 100021 and 100022 of this Chapter and,

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

36 (b) Program approval or disapproval shall be made in writing by the approving authority  
37 to the requesting training program within a reasonable period of time after receipt of all  
38 required documentation. This time period shall not exceed three (3) months.

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

42 (f) The LEMSA shall notify the Authority concurrently with the training program of  
43 approval, renewal of approval, or disapproval of the training program, and include the  
44 effective date. This notification is in addition to the name and address of training  
45 program, name of the program director, phone number of the contact person, and  
46 program approval/ expiration date of program approval.

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 **§ 100024. Withdrawal of Program Approval**

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

9 Notification of noncompliance and action to place on probation, suspend, or revoke shall  
10 be done as follows:

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

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

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

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

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

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

34 Note: Authority cited: Sections 1797.107, Health and Safety Code. Reference: Sections  
35 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

36  
37 **§ 100025. Testing.**

38 (a) The initial and retraining course of instruction shall include a written and skills  
39 examination which tests the ability to assess and manage all of the conditions listed in  
40 Sections 100016 and 100017 of this Chapter.

41 (b) A passing standard shall be established by the training agency before administration  
42 of the examination.

43 (c) Public safety first aid and/or CPR/AED training programs shall test the knowledge  
44 and skills specified in this chapter and have a passing standard that shall be  
45 demonstrated for successful completion of the course and skills assessment using the  
46 Public Safety First Aid and CPR/AED Skills Verification Form EMSA-PSSCV (12/2013).

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 **§ 100026. Training Instructor Requirements.**

5 (a) Training in Public Safety first aid and CPR/AED for the personnel specified in  
6 Section 100013 of this Chapter shall be conducted by an instructor who is:

7 (1) Proficient in the skills taught; and

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

9 (b) Determination of the instructor's qualifications shall be the responsibility of the  
10 agency whose training program has been approved by the approving authority pursuant  
11 to Sections 100021 and 100022 of this Chapter.

12 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections  
13 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

14  
15 **§ 100027. Validation of Course Completion.**

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

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

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

23 (2) Topics completed;

24 (3) Date of issue;

25 (4) Date of expiration;

26 (i) Expiration of training for Firefighters and Lifeguards shall be 2 years from date of  
27 course completion;

28 (ii) Expiration of training for Peace Officers shall be no greater than 3 years from the  
29 date of course completion, in accordance with Section 13518, Penal Code.

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

32 (d) Such training records shall be made available for inspection by the local EMS  
33 agency or approving authority upon request.

34 Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections  
35 1797.182 and 1797.183, Health and Safety Code; and Section 13518, Penal Code.

36  
37 **§ 100028. Program Review.**

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

41 (b) Program approval and renewal is contingent upon continued compliance with all  
42 required criteria and provisions described in this Chapter, and may be revoked by the  
43 approving authority as described in Section 100024 of this Chapter.

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.

46

