

COUNTY OF VENTURA HEALTH CARE AGENCY		EMERGENCY MEDICAL SERVICES POLICIES AND PROCEDURES	
Policy Title: Emergency Medical Technician Recertification		Policy Number 302	
APPROVED: EMS Administrator: Steven L. Carroll, EMT-P		Date: September 12, 2013	
APPROVED: Medical Director: Angelo Salvucci, M.D.		Date: September 12, 2013	
Origination Date: June 1, 1984		Effective Date: September 12, 2013	
Date Revised: September 12, 2013			
Date Last Reviewed: September 12, 2013			
Review Date: August 31, 2015			

- I. PURPOSE: To identify the procedure for recertification of the Emergency Medical Technician.
- II. AUTHORITY: Health and Safety Code, Sections 1797.220, 1798. California Code of Regulations (CCR), Sections 100080 and 100081.
- III. POLICY: In order to maintain certification, an EMT shall participate in either continuing education courses or complete a refresher course approved by the Agency. Approved continuing education courses shall be accepted statewide.
 - A. In order to recertify, an EMT shall:
 1. Possess a current EMT Certification issued in California.
 2. Obtain at least twenty-four (24) hours of continuing education hours (CEH) from an approved CE provider in accordance with VCEMS policy 1130, or successfully complete a twenty-four (24) hour refresher course from an approved EMT training program. An individual who is currently licensed in California as a Paramedic or certified as an Advanced EMT or EMT-II, or who has been certified within six (6) months of the date of application, may be given credit for CEH earned as a Paramedic, Advanced EMT or EMT-II to satisfy the CE requirement for EMT recertification.
 3. Complete the Ventura County EMS (VCEMS) Personnel Application. VCEMS must be notified within 30 days of any change in personal contact information.
 4. Complete the Ventura County Eligibility Statement (a statement that the individual is not precluded from certification for reasons defined in Section 1798.200 of the Health and Safety Code),
 5. A new applicant to VCEMS, or an applicant whose certification has lapsed, must complete a background investigation via "Live Scan" through the California Department of Justice and Federal Bureau of Investigation for VCEMS as the requesting agency and a secondary notification for the State of California

Emergency Medical Services Authority. Submit the second copy of the "Request for Live Scan Services" form along with EMS application for certification as proof the service has been completed.

6. Have successfully completed a Professional Rescuer or Healthcare Provider level BLS & CPR course, which is consistent with the American Heart Association 2010 Guidelines for CPR and ECC, within the previous two years,
 7. Unless employed by a VCEMS provider, VCEMS will administer a CPR skills evaluation using a recording/reporting manikin; will require a pass rate of 80% prior to EMT recertification. If employed by a VCEMS Provider, will submit printed documentation of successful completion of CPR Skills using a recording/reporting manikin and will require a pass rate of 80% within the previous 90 days.
 8. Provide a government issued form of identification,
 9. Pay the established State and County recertification fee.
 10. Submit a completed skills competency verification form, EMSA-SCV (08/10). Skills competency shall be verified by direct observation of an actual or simulated patient contact. Skills competency shall be verified by an individual who is currently certified or licensed as an EMT, AEMT, Paramedic, Registered Nurse, Physician's Assistant, or Physician and who shall be designated by a VCEMS approved CE, EMT, Paramedic training program, or an approved VC EMS provider agency. Verification of skills competency shall be valid for a maximum of two (2) years for the purpose of applying for recertification.
- B. The individual will be issued a wallet size card after certification requirements are completed.
- C. If the EMT recertification requirements are met within six (6) months prior to the current certification expiration date, VCEMS shall make the effective date of recertification the date immediately following the expiration date of the current certification. The certification will expire two (2) years from the day prior to the effective date.
- D. If the EMT recertification requirements are met greater than six (6) months prior to the expiration date, VCEMS shall make the effective date of recertification the date the individual has applied for recertification. The certification expiration date will be the last day of the month two (2) years from the effective date.
- E. A California certified EMT who is a member of the Armed Forces of the United States and whose certification expires while deployed on active duty, or whose certification expires less than six (6) months from the date they return from active duty deployment, with the Armed Forces of the United States shall have six (6) months from the date they return from active duty deployment to complete the requirements outlined in Section III.

A 2-10 of this policy. In order to qualify for this exception, the individual shall submit proof of their membership in the Armed Forces of the United States and documentation of their deployment starting and ending dates. Continuing education shall be in any of the topics contained in the current National Standard Curricula for training EMS personnel.

F. Recertification of an Expired California EMT Certificate.

1. The following requirements apply to individuals who wish to be eligible for recertification after their California EMT Certificates have expired:
 - a. For a lapse of less than six (6) months, the individual shall complete the requirements outlined in Section III.A 2-10 of this policy.
 - b. For a lapse of six (6) months or more, but less than twelve (12) months, the individual shall:
 1. Complete the requirements outlined in Section III.A 2-10 of this policy,
 2. Complete an additional twelve (12) hours of continuing education.
 - c. For a lapse of twelve (12) months or more, but less than twenty-four (24) months, the individual shall:
 1. Complete the requirements outlined in Section III.A 2-10 of this policy,
 2. Complete an additional twenty-four (24) hours of continuing education, and
 3. Pass the written and skills certification exams.
 - d. For a lapse of greater than twenty-four (24) months the individual shall complete an entire EMT course and comply the requirements of initial EMT certification, as outlined in VCEMS policy 301.



See back of form for instructions for completion

1a. Name as shown on EMT Certificate	1b. Certificate Number	1c. Signature
1d. Certifying Authority	1e. Date	I certify, under the penalty of perjury, that the information contained on this form is accurate.
Skill	Verification of Competency	
1. Patient examination, trauma patient;	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
2. Patient examination, medical patient	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
3. Airway emergencies	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
4. Breathing emergencies	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
5. Automated external defibrillation	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
6. Circulation emergencies	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
7. Neurological emergencies	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
8. Soft tissue injury	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
9. Musculoskeletal injury	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
10. Obstetrical emergencies	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number

INSTRUCTIONS FOR COMPLETION OF EMT SKILLS COMPETENCY VERIFICATION FORM

A completed EMT Skills Verification Form is required to accompany an EMT recertification application for those individuals who are either maintaining EMT certification without a lapse or to renew EMT certification with a lapse in certification less than one year.

1a. Name of Certificate Holder

Provide the complete name, last name first, of the EMT certificate holder who is demonstrating skills competency.

1b. Certificate Number

Provide the EMT certification number from the current or lapsed EMT certificate of the EMT certificate holder who is demonstrating competency.

1c. Signature

Signature of the EMT certificate holder who is demonstrating competency. By signing this section the EMT is verifying that the information contained on this form is accurate and that the EMT certificate holder has demonstrated competency in the skills listed to a qualified individual.

1d. Certifying Authority

Provide the name of the EMT certifying authority for which the individual will be certifying through.

Verification of Competency

1. Affiliation - Provide the name of the training program or EMS service provider that the qualified individual who is verifying competency is affiliated with.
2. Once competency has been demonstrated by direct observation of an actual or simulated patient contact, i.e. skills station, the individual verifying competency shall sign the EMT Skills Competency Verification Form (EMSA-SCV 07/03) for that skill.
3. Qualified individuals who verify skills competency shall be currently licensed or certified as: An EMT, EMTI, Paramedic, Registered Nurse, Physician Assistant, or Physician and shall be either a qualified instructor designated by an EMS approved training program (EMT training program, paramedic training program or continuing education training program) or by a qualified individual designated by an EMS service provider. EMS service providers include, but are not be limited to, public safety agencies, private ambulance providers, and other EMS providers.
4. Certification or License Number – Provide the certification or license number for the individual verifying competency.
5. Date- Enter the date that the individual demonstrates competency in each skill.
6. Print Name: Print the name of the individual verifying competency in the skill.

Verification of skills competency shall be valid to apply for EMT-I recertification for a maximum of two years from the date of verification.

