### MOUNTAIN-VALLEY EMS AGENCY POLICIES AND PROCEDURES

POLICY: 435.00

TITLE: CRITICAL CARE PARAMEDIC

GROUND AMBULANCE PROVIDER

AUTHORIZATION

APPROVED: Signature On File In EMS Office EFFECTIVE DATE: 9/1/2015

> **Executive Director** SUPERSEDES:

> > **REVIEW DATE:** 9/2020

Signature On File In EMS Office Medical Director 1 of 4 PAGE:

# CRITICAL CARE PARAMEDIC (CCP) GROUND AMBULANCE PROVIDER **AUTHORIZATION**

#### I. **AUTHORITY**

In accordance with Section 1798.172 of Division 2.5 of the Health and Safety Code, the local EMS agency shall establish guidelines and standards for completion and operation of formal transfer agreements between hospitals with varying levels of care in the area of jurisdiction of the local EMS agency consistent with Sections 1317 to 1317.9a, inclusive, and Chapter 5 (commencing with Section 1798). And the California Code of Regulations, Title 22, Division 9, Chapter 4, Article 7, Section 100168.

#### II. **DEFINITIONS**

- A. "Agency" means the Mountain-Valley Emergency Medical Services Agency
- B. "Mountain-Valley EMS System" means the geographic areas within the member counties of the Agency
- C. "Provider" means an approved transporting Critical Care Paramedic Provider within the Mountain-Valley EMS System
- D. "Critical Care Paramedic (CCP)" means an individual who is educated and trained in critical care transport and holds a Critical Care Paramedic certification by the Board of Critical Care **Transport Paramedic Certification**
- E. "Basic Scope Program" means additional skills approved by the California Emergency Medical Services Authority and Agency to be performed by qualified and approved accredited CCP's of Agency.

#### III. **PURPOSE**

To provide a mechanism whereby Providers may acquire and maintain approval to provide a CCP Basic Scope Program in the Mountain-Valley EMS System.

### IV. POLICY

- A. Program Request and Approval
  - 1. Permitted ALS providers shall submit a letter of intent including the following material to the EMS Agency for approval:
    - a. A copy of the Provider's CCP interfacility transport program to include:
      - i. Name and qualification of the Medical Director. Must be a California registered nurse or a physician knowledgeable in the subject matter. A copy of the proposed Medical Director's Curriculum Vitae and copies of professional credentials
      - ii. Call volume of anticipated interfacility transports that will be provided by the service of CCP transport during a calendar year
      - iii. Equipment identification to include brand name, model number and all pertinent information for the mechanical infusion pump(s) and/or Automatic Transport Ventilator (ATV) that will be utilized by the Provider
      - iv. CCP Quality Assurance Plan that fulfills the requirements under the Agencies Policy 620.10 Quality Improvement Program and the name of the personnel responsible for the providers QI program.
      - v. Procedure for submission of the data to the Agency for all CCP transports as defined by Agency policy 620.30 "EMD Provider Agency Ambulance Provider Data Requirements."
      - vi. Orientation and on-going training program curriculum outline and schedule
      - vii. Draft Patient Care Report (PCR) for approval
      - viii. Draft physician's order form for approval
      - ix. Personnel Information to include number of trained personnel, number of CCP units and proposed start date.
      - x. All Provider policies and procedures relevant to CCP transfers
  - 2. Upon receipt, application materials will be reviewed for completeness. If any required documentation is missing, the applicant will be notified, in writing, within fourteen (14) business days. The missing information shall be submitted within thirty (30) days. Failure to submit the missing information within thirty (30) days will require the applicant to reapply.

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- 3. The applicant will receive written notification within thirty (30) days of Agency receiving application..
- 4. Approval is valid for four (4) years from the authorization. It is the responsibility of the approved Provider to notify the Agency, in writing, of any intent to discontinue the program or any substantial changes in the original application.

## B. Staffing

- 1. A CCP Unit is a fully equipped advanced life support ambulance, staffed with a minimum of two (2) authorized staff that includes at least one (1) Agency accredited CCP and one (1) EMT certified in the State of California.
- 2. CCP's assigned to CCP transfer units shall meet the requirements identified in the Agencies Policy 254.20 "Critical Care Paramedic Accreditation."
- 3. EMTs assigned to CCP units shall meet the following requirements
  - Successful completion of an Agency approved and Provider-delivered training program specific to the skills used to assist CCPs with patient care during CCP transfers.
- 4. The Provider shall maintain a list of all staff working on a CCP transfer unit and submit to the Agency annually or upon request.
- 5. The Provider shall retain on file, at all times, copies of current and valid credentials for all personnel performing service under this program.
- 6. The Provider must be an Agency approved CE provider.

#### C. Medical Direction

- 1. Personnel assigned to a CCP unit work under the existing medical control system and follow all Agency prehospital policies and protocols, as approved by the Agency Medical Director.
- 2. In addition to those optional skills approved for Agency accredited paramedics, CCPs may perform the procedures and administer or monitor the medications listed in CCR, Title 22, Division 9, Chapter 4, Section 100146.:
- 3. The transferring physician specifies standing orders for a patient based on skills and medications included in the Agency Paramedic basic, optional, and CCP expanded scope of practice.

- 4. The Agency Medical Director has overall responsibility for the medical control for all CCP's and EMTs within the Mountain-Valley EMS System.
- 5. When a patient's treatment/care is beyond the CCP scope of practice, that patient may be transported only in accordance with Agency Policy 580.11 Ambulance Transfer Policy.

### D. Documentation

- 1. A PCR must be complete on all patients as outlined in Agency Policy 560.11 Documentation of Patient Contact.
- 2. A copy of each PCR, transferring physician orders and related documentation shall be submitted to the Agency upon request.

# E. Training

- 1. The Provider shall develop an orientation program and a regular training schedule for all CCP personnel. The Agency Medical Director shall approve the orientation program and training prior to providing such training.
- 2. The orientation program shall be no less than eight (8) hours.
- 3. CCP's must attend a minimum of twenty-four (24) hours of annual didactic/skills laboratory trainings per year.
- 4. All EMT's assigned to a CCP ambulance must complete at least twelve (12) continuing education hour's per-year, approved by the Agency and delivered by the Provider, specific to knowledge and skills used on CCP transfers.
- 5. Approved topics are listed in California Code of Regulations Title 22, Division 9, Chapter 4, Article 3, Section 100160.