PURPOSE
This policy is part of the system wide EMS Quality Improvement Program (EQIP). It outlines those steps required by any prehospital care provider, approved continuing education (CE) provider, or EMS training program within Riverside County that chooses to perform ALS or EMT skills competency verification (SCV).

AUTHORITY
California Health and Safety Code - Division 2.5: Emergency Medical Services [1797. - 1799.207.]
California Code of Regulations, Title 22, Division 9, Chapter 2, Article 5, Section 100080

Qualifications/ Responsibilities of the Skills Verifier and Verifying Agency
1. Any person authorized as a skills competency verifier (SCVr) must:
   a. Be a currently certified or licensed as EMT, EMT-P, registered nurse (RN), physician’s assistant (PA), or physician (MD/DO) employed by a qualifying agency.
   b. Receive approved training from the agency designating them as a SCVr.

2. Skills competency verification will be done by direct observation only.

3. Skills competency verification will be performed only by authorized providers in a setting (time/place) pre-approved by their designating agency.
   a. Approved SCVrs may only observe and validate that level of skills for which they are credentialed, i.e., ALS skills verifiers may only sign off ALS skills, BLS SCVrs may only sign off BLS level skills. However, ALS personnel who attended training for both levels may be credentialed at both levels.

4. Designated skills competency verifiers will:
   a. Use only approved SCV forms.
      i. ALS must be the REMSA-approved SCV form.
      ii. EMT must be the State-approved (07/17) form.
   b. Only sign-off those skills directly observed by them, and that meet the standards as set down by their designated agency's pre-approved skills sheets.
   c. Sign the SCV form in colored ink, preferably blue.
   d. Complete all five areas corresponding to each skill on the form—signature, printed name, state license/certification number, affiliation, and date.
      i. Signature and date MUST be handwritten.
   e. Not complete item 4.d. (above) if sections 1a. and 1b. on the form have not been completed by the individual seeking skills verification.

5. Qualifying agencies who wish to perform skills competency verification will:
   a. For EMT Skills Verification:
      i. Have an approved skills sheet for each of the REMSA-accepted skills in the 10 skills categories defined by the State.
      ii. Use the skills sheets of the National Registry (NR) as the standard for skills competency verification. If no NR skill sheet exists for a particular skill, or if a variation of the NR skill sheet is desired, the skill sheet(s) used for verification will be approved by the EMS Agency prior to implementation.
      iii. Review skills sheets annually and update as appropriate for changes in the standard of care.
      iv. Updated skills sheets must be REMSA reviewed and approved.
b. For ALS Skills Verification:
   i. Utilize the REMSA Performance Standard Validation sheets for each of the REMSA-accepted skills in the 15 skills categories defined by REMSA.

c. For both EMT and ALS Skills Verification:
   i. Provide and document initial training to designated persons on use of the approved skills sheets.
   ii. Submit a limited list of names of persons in their agency who have met the qualifications and training for SCV and who they wish to designate as skills competency verifiers (SCVrs).
   iii. Provide annual update / review training to their designated SCVrs.
      1. Attendees will sign a roster verifying attendance.
   iv. Immediately notify the EMS Agency of any change -- addition or deletion -- in their cadre of qualified, trained, and approved SCVrs, supplying the name, level of SCV, and effective date of change.
   v. Submit verification of 5a. – c. v. to the EMS Agency as requested.

**Responsibilities of the Individual Seeking Skills Competency Verification**

1. Individuals requesting skills competency verification will have the authorized person sign the REMSA ALS Skills Competency Verification Form or State-approved (EMT) skills competency verification form (EMSA-SCV [07/17]) at the time that the skill is observed and verified.
   a. EMTs/ALS Personnel will complete items 1.a. and 1.b. at the top of the SCV form prior to having approved skills verifier (SCVr) sign for skills completion.
   b. It is not required to perform all skills for competency in a singular setting. However, only one SCV form will be utilized by the individual for obtaining signatures verifying skills competency.
   c. Skill 5, "AED and CPR" on the state EMT SCV form, may be verified by an approved skills verifier or the CPR instructor who observed skills performance at the time of CPR renewal.
      i. The signature of an approved CPR instructor on an applicant's SCV form does not negate the requirement to present an approved BLS/CPR card at the time of recertification.

2. EMTs/ALS personnel are required to submit the completed original SCV form at time of recertification, accreditation reverification and renewal of authorization.
PURPOSE
To facilitate radio communication interoperability, define the standard of radio frequencies for Emergency Medical Service (EMS) providers and describe the guidelines to be observed by prehospital and hospital emergency medical personnel operating in Riverside County.

AUTHORITY
California Health and Safety Code - Division 2.5: Emergency Medical Services [1797. - 1799.207.]

Radio Etiquette
Radio traffic is expected to be professional at all times and to conform to the rules and regulations of the Federal Communications Commission (FCC). Use of frequencies for other than intra-agency or interagency communication or as authorized by those agencies during a specific incident is prohibited.
1. Clear text communication will be utilized during radio communications.
2. Use of the complete radio call sign is important in all radio communication and is particularly essential when interfacing with other agencies and on larger incidents.
   a. Call signs for private ambulance units will coincide with the respective unit or assignment preceded by resource type, e.g.:
      i. BLS units - “Permitted Provider 110”, “BLS Provider 22”
      ii. ALS units - “Permitted Provider Medic 345”
   b. First response agency units will use the assigned call signs designated by their respective agencies.

Radio Communication Procedures
All ambulance resources within the Riverside County operating area must maintain radio communications capability as specified in this policy at all times.
1. Two-way communications between EMS/ambulance dispatch centers and the responsible first response agency will occur for all emergency medical responses requiring a joint response.
2. The responsible first response agency will designate the response frequencies for use by the responding public safety resources and should include them as part of the initial dispatch information communicated to the EMS/ambulance dispatch center.
3. EMS/ambulance dispatch centers will inform the appropriate responsible first response agency of the responding unit’s identifier upon receipt of all dispatch information. This can happen concurrently with acknowledgement of receipt of the call.
4. The permitted provider dispatch center will notify the responding ambulance units of assigned frequencies and responding units will initiate communication and monitor the assigned public safety frequency throughout the response, during staging and while on-scene.
5. Two-way communication between on-scene incident command and ambulance units will occur as needed to facilitate a timely, safe, and effective emergency medical response.
6. All communications initiated by the on-scene Incident Commander to the responding ambulance unit will be acknowledged by the unit.