



San Luis Obispo County Emergency Medical Services Agency Continuing Education Provider Guide

2156 Sierra Way
San Luis Obispo, CA 93401
805-788-2511 Phone
805-788-2517 Fax
www.sloemsa.org

Continuing Education Provider Guide

Table of Contents

Table of Contents	1
Purpose of the Guide	2
CE Provider Approval Authority	2
CE Provider Approval Process	2
CE Provider – Renewal Application	3
Denial, Suspension or Revocation of CE Provider	3
CE Provider Staff	3
CE Course Requirements	5
Instructional Objectives	5
Instructional Objectives Components	5
CE Course Content	5
Determining CE Hours	6
CE Training Opportunities	7
CE Certificates	7
CE Record and Document Retention	8
CE Provider Annual Reporting Requirement	8
Pre-approved Classes	9
Attachment A – CE Provider Application	
Attachment B – Sample CE Course Evaluation	
Attachment C – Sample CE Certificate	
Attachment D – Sample Course Roster	

CONTINUING EDUCATION PROVIDER GUIDE

Purpose of this Guide

The San Luis Obispo County Emergency Medical Services Agency (EMS Agency) is charged with approving and monitoring jurisdictional Continuing Education (CE) activity in accordance with Title 22 of the California Code of Regulations; Division 9, Chapter 11. **The San Luis Obispo County Continuing Education Provider Guide** was developed to assist qualified organizations and individuals in becoming authorized CE Providers and to maintain that authorization. This Guide will also provide assistance to CE Providers to ensure quality instruction is being presented to local Emergency Medical Technicians (EMTs) and Paramedics.

CE Provider Approval Authority

The EMS Agency, the CE Provider approval authority for San Luis Obispo County, allows CE Providers to offer training opportunities for EMTs and Paramedics for the purpose of recertification, re-licensure and continuing accreditation, or re-establishing lapsed certification or licensure. Local CE Providers may be approved for a period of up to four (4) years and must comply with all California State regulations and San Luis Obispo County policies, procedures and guidelines. The CE Provider must maintain its status as an Approved CE Provider with the EMS Agency in order to provide CE credits.

CE Provider Approval Process

Entities that desire to be a San Luis Obispo County CE Provider are required to submit an Application Packet to the San Luis Obispo County EMS Agency for review and approval. The CE Provider Application Packet should include the following items:

1. Cover letter that includes a written request for approval as a CE Provider.
2. Curriculum Vitae for the Program Director and the Clinical Director.
3. Completed CE Application (See **Attachment A – CE Provider Application**).
4. An example of a CE Course Evaluation Form (See **Attachment B – Sample CE Course Evaluation**).
5. An example of a CE Certificate (See **Attachment C – Sample CE Certificate**).
6. An example of a CE Course Roster (See **Attachment D – Sample CE Course Roster**).
7. Any applicable fees.

The Application Packet must be completed and received by the EMS Agency at least sixty (60) calendar days prior to the first scheduled course of instruction. The EMS Agency will respond to the applicant within fourteen (14) calendar days of receipt of the application to acknowledge receipt of the application. The EMS Agency will respond within thirty (30) calendar days with its decision to approve or deny the application. Upon approval, the EMS Agency will issue a CE Provider Number. The written receipt of approval and issuance of CE Provider Number allows the CE Provider to commence CE instruction.

CE Provider – Renewal Application

An application for renewal must be provided to the EMS Agency at least sixty (60) calendar-days prior to expiration date. The EMS Agency will respond within thirty (30) calendar days with its decision to approve or deny the renewal application. Upon approval, the EMS Agency will re-issue a CE Provider Number; the written receipt of approval and re-issuance of CE Provider Number allows the CE Provider to continue to provide CE Instruction.

Denial, Suspension or Revocation of CE Provider

The EMS Agency is authorized to deny, suspend, or revoke a San Luis Obispo County CE Provider for failing to adhere to Title 22 of the California Code of Regulations; Division 9, Chapter 11, or this Guide.

CE Provider Staff

1. The EMS Agency shall be notified within thirty (30) business days of any change in name, address, telephone number, Program Director or Clinical Director.
2. Approved CE Providers must maintain the following staff. A single individual may fulfill multiple staff positions.

- Program Director

The Program Director shall be qualified by education and experience in methods, materials and evaluation of instruction, which shall be documented by at least forty (40) hours in teaching methodology. These are examples of courses that meet the required instruction in teaching methodology:

- ✓ California State Fire Marshal “Fire Instructor 1A and 1B.”
- ✓ National Fire Academy “Fire Service Instructional Methodology” course.
- ✓ A training program that meets the U.S. Department of Transportation/National Highway Traffic Safety Administration 2002 Guidelines for Education EMS Instructors, such as the EMS Educator Course of the National Association of EMS Educators.
- ✓ Individuals with equivalent experience may be provisionally approved for up to two years by the approving authority pending completion of the above, specified requirements. Individuals with equivalent experience who teach in geographic areas where training resources are limited and who do not meet the above

Program Director requirements may be approved upon review of experience and demonstration of capabilities.

The duties of the Program Director include, but are not limited to:

- ✓ Administering the CE program and ensuring adherence to State and local regulations and policies.
- ✓ Approving the course or activity, the instructional objectives, and assigning the CE hour credit for the course or activity.
- ✓ Approving the course instructor(s).
- ✓ Signing the course completion records and maintaining those records. This may be delegated to the course instructor.

- Clinical Director

The Clinical Director shall be a currently licensed physician, physician's assistant, registered nurse, or Paramedic. The Clinical Director shall have had two (2) years of academic, administrative, or clinical experience in emergency medicine or EMS care within the last five years.

The duties of the Clinical Director include, but are not limited to:

- ✓ Monitoring all clinical and field activities approved for CE credit.
- ✓ Approving the instructor(s).
- ✓ Monitoring the overall quality of the program content.

- Instructor

Each CE Provider instructor shall be approved by the Program Director and Clinical Director as qualified to teach the topics assigned. The instructor shall be knowledgeable, skillful and current in the subject matter of the course or activity. The instructor shall have evidence of specialized training, and advanced degree in a given subject area or at least one year of experience within the last two (2) years in the specialized area in which they are teaching.

CE Course Requirements

1. When two or more CE Providers co-sponsor a course, one CE Provider must be designated as the principal CE Provider responsible for compliance with all State and local CE requirements. The principal CE Provider will coordinate all training activities, complete and submit documentation, and ensure all CE instruction is in compliance with this Guide.
2. The content of all CE training must be relevant, and enhances the practice of prehospital emergency medical care as it relates to the knowledge base or technical-skills required for the practice of prehospital medicine.
3. Classes or activities less than one CE hour in duration are not approved. For courses greater than one CE hour, credit is granted in no less than half-hour increments.

Instructional Objectives

Instructional objectives are to be developed for all CE activities. These objectives are to be stated in behavioral terms. Instructional objectives are the basis for determining the content of the program. The objectives must denote measurable attributes observable in the student completing the program. The objectives explain to the student what proficiency the student should be able to demonstrate at the completion of the course.

Instructional Objective Components

1. Performance refers to what the participant is expected to do.
2. Condition refers to what requirements must be present to meet the objective.
3. Criterion refers to what standard is used to measure the achievement of the objective.
4. Examples of complete instructional objectives are:
 - At the conclusion of the course the participant will be able to identify correct hand placement for adult CPR (performance) on a manikin (condition) according to the standards of the American Heart Association (criterion).
 - Upon completion of this course the participant will identify three essential components of CPR (performance) in writing (condition) with 100% accuracy (criterion).

CE Course Content (per Title 22 California code of Regulations; Division 9, Chapter 11)

1. Individual courses or activities shall be open for scheduled or unscheduled visits by the EMS Agency.
2. EMS personnel should be aware that there are limits on the number of CE hours that may be submitted for certificate, license, or accreditation renewal from certain types of CE credits and educational formats. (Refer to Title 22, Division 9, Chapter 11, Section 100391.1 Continuing Education Delivery Formats and Limitations for details.)

3. The CE course content must be current and designed to include recent developments in the subject being presented.
4. Learning experiences are expected to enhance the knowledge of the participant and to provide opportunity to maintain or improve competence in skills.
5. CE credit may be granted for a variety of formats and learning situations. This includes, but is not limited to:
 - Periodic training sessions or structured clinical experiences in knowledge and skills.
 - Organized field care audits of Patient Care Reports.
 - Applicable courses offered by accredited universities and colleges.
 - Courses and trainings directly related to emergency medical care (e.g.; ACLS, PALS, BTLS, and similar courses).
 - Structured clinical experience with instructional objectives to review or expand the clinical expertise of the individual.
 - Course or training in indirect patient care or medical operations (e.g.; Continuous Quality Improvement, grief support, medical management of HazMat, or rescue techniques).
 - Advanced topics in subject matter outside the scope of practice of the EMT or Paramedic but directly relevant to emergency medical care.
 - Media based or serial productions.
 - Precepting EMS students or EMS personnel as a field preceptor as assigned by an EMS training program or an EMS service provider approved according to Division 9. CE for precepting can only be given for actual time precepting a student.
 - CE credit may be granted for service as an instructor of approved EMS training programs.

Determining CE Hours

CE Providers determine the amount of CE credit to be awarded for the courses they offer on the following basis:

- One CE hour is awarded for every one hour of instruction. The State EMS Authority has defined an hour of instruction as fifty (50) minutes of course time with a reasonable break.
- Courses less than one hour are not approved.
- For courses greater than one CE hour, credit may be granted in no less than half-hour increments.

CE Training Opportunities

Courses approved for CE must be made available to all EMS Providers in San Luis Obispo County. At least one month prior to the commencement of a local CE training opportunity, the CE Provider will provide the EMS Agency the following information:

- Name and description of course.
- Location of course with date and time.
- Number of CE credits offered.
- Name of person and phone number to contact for additional information.
- Any restriction on number of attendees.

Information disseminated by CE Providers publicizing CE must include, at a minimum, the following:

- The CE Provider's policy on refunds in cases of nonattendance by the registrant or cancellation by the CE Provider.
- A clear, concise description of the course, instructional objectives and the targeted audience.
- CE Provider's name and number.
- The number of CE hours to be granted upon successful completion of the course.

CE Certificates

The CE Provider shall issue a tamper-resistant certificate of completion to the student within thirty (30) calendar days of course completion. (See Attachment C – Sample CE Certificate)

The certificate shall contain the following information:

1. CE Provider's name and address
2. Date(s) of course.
3. Name and certification or license number of the participant.
4. Course title.
5. "This course has been approved for ___ hours of continuing education by an approved California EMS CE provider and was ___ instructor-based ___ non-instructor based."
6. "This document must be retained for a period of four years".
7. "(Organization name), California EMS CE Provider # 40- XXXX."
8. Signature of the Program Director, Clinical Director, or Course Instructor. A facsimile signature is acceptable.

CE Record and Document Retention

The CE Provider shall retain the following materials for a minimum of four (4) years:

1. A complete outline for each course given that includes:
 - a) Course title
 - b) Overview
 - c) Instructional objective(s)
 - d) Comprehensive topical outline
 - e) Number of CE credits (hours) given
 - f) Method of evaluation
 - g) A record of participant performance if applicable
2. Resumes and specific qualifications of all instructors.
3. Summary of test (written and practical) results.
4. Course evaluations (See Attachment B – Sample CE Course Evaluation).
5. Attendance/sign-in sheets documenting the name and signature of each attendee. (See Attachment D – Sample CE Course Roster).

All records shall be made available to the EMS Agency upon request. The CE Provider shall be subject to unscheduled/scheduled site visits by the EMS Agency or designated representatives.

CE Provider Annual Reporting Requirement

Each San Luis Obispo County CE Provider will submit an annual summary of all CE courses/activities provided in the previous year to the EMS Agency; the summary is due by the second Monday in the month of January and includes a copy of all class rosters (See **Attachment D – Sample CE Course Roster**).

Pre-approved classes for CE credit.

EMS Prehospital personnel that take the following pre-approved classes may accumulate up to a total of twelve (12) CE hours, in any combination, toward their total number of hours needed for use in the recertification process.

CLASS NAME	CE HOURS
CPR initial or refresher	(hour for hour)
EMT-D initial or refresher	(hour for hour)
SIDS	1
Communicable diseases	1
Auto Extrication	4
Weapons of Mass Destruction	4
Fire Control 5 Aircraft Rescue and Firefighting	4
Fire Control 7 Wild land Firefighting	4
CDF basic Wild land Firefighter	4
Basic Emergency Vehicle Operations	4
Confined Space Awareness	2
Confined Space Operations	2
Hazmat First Responder Awareness	4
Hazmat First Responder Operations	8
Hazmat First Responder Operations, Decontamination	4
Hazmat Incident Commander	6
Low Angle Rescue	4
Personal Watercraft Operations/Rescue	4
River and Flood Rescue	4
Trench Rescue	4
Multiple Casualty Incident Classes	(hour for hour)
S 200 ICS	1
S 300 ICS	1
ICS 400 Advanced ICS	4
S 400 Incident Commander	4
S-430 Operation Section Chief	4
Rescue Systems 1 Basic Rescue Skills	6
Rescue Systems 2 Advanced Rescue Skills	6
Fire Command 1A	4
Fire Command 1B	4
Fire Management	1
S-334 Strike Team Leader – Engines	4
S-339 Division Supervisor	4
S-401 Safety Officer	4
SLO Firefighter Academy	4



CONTINUING EDUCATION PROVIDER APPLICATION

Initial Application Renewal Update

CE PROVIDER NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER: (____) _____ FAX NUMBER: (____) _____

PROGRAM DIRECTOR: _____

EMAIL: _____

CLINICAL DIRECTOR: _____

EMAIL: _____

1. *Enclose resumes of the Program Director and Clinical Director with application.*
2. *Enclose \$300 application fee with application.*

TYPE OF ENTITY (CHECK ONE)

- HOSPITAL
- COLLEGE
- OTHER SCHOOL OR TRAINING PROGRAM: _____
- AMBULANCE PROVIDER
- FIRE DEPARTMENT
- LAW ENFORCEMENT AGENCY
- INDIVIDUAL/PRIVATE BUSINESS
- OTHER: _____

I will comply with the attached requirements for CE Providers as set forth in Title 22, Division 9; Chapter 11 of the California Code of Regulations and the San Luis Obispo County CE Provider Guide, and will assure compliance with all regulations, policies, guidelines and procedures required as a CE Provider. I agree to all audit and review provision requirements and certify that all information on this application is true and correct to the best of my knowledge. I understand that failure to comply with CE Regulations and guidelines may result in revocation of my CE approval status.

Program Director Signature: _____ Date: _____

Completed App. Packet Received	Incomplete - Returned	Approval Date	Expiration Date	CE Provider #:	Fee Paid	Reviewed By
				40-		

Attachment B – Sample CE Course Evaluation

CE Course Evaluation

Date: _____ Course Title: _____

Instructor: _____

Please evaluate this course by using the following 1 -5 scale for the statements below.

1. =Strongly Agree
2. =Agree
3. =Neutral
4. =Disagree
5. =Strongly Disagree
6. N/A = Does not apply to this course

_____ This course met the stated objectives.

_____ The Instructors exhibited mastery of their subject.

_____ The class space, lighting and acoustics were adequate.

_____ The handouts were useful.

_____ The audio-visual materials enhanced learning the subject.

_____ The information provided will be useful.

Please add your comments in the space below. We value student feedback and use it to evaluate and update our courses.

This is a sample evaluation form. Please adapt or create a Course Evaluation Form that will best meet the needs of your organization.

Certificate of Completion

Joe Smith

#P0000 (paramedic state license # or EMT-1 county certification #)

Has Successfully Completed

Class Name

on Date

Administered by CE Provider Agency Name

This activity has been approved for XX hours of continuing education by an approved California EMS CE Provider and was instructor based.
This document must be retained for a period of four years.

Instructor

Date

California EMS CE Provider # 40-XXXX
CE Provider Agency Name
Address

This is a sample course certificate. Please adapt or create a course certificate that will best meet the needs of your organization.

Attachment D – Sample CE Course Roster

CE Course Roster

CE Provider: _____ CE Course Name: _____ Course Location: _____

Date: _____ Total CE Hours: _____ Type of Education: () Instructor Based () Non-Instructor Based

CE Instructor (s): 1. _____ 2. _____ 3. _____

Last Name	First Name	Signature	License/Cert. Number	Provider Agency	Instructor Initial Upon Successful Completion of Course

Instructor Signature: _____

California EMS CE Provider # 40-XXXX

This is a sample course roster. Please adapt or create a course roster that will best meet the needs of your organization