

**Commission on Peace Officer Standards and Training**

1601 Alhambra Blvd
Sacramento, CA 95816-7083
www.post.ca.gov

Date: November 12, 2014

Bulletin: No. 2014-20

Subject: Changes to First Aid/CPR Standards for Peace Officers

As noted in POST Bulletins 2014-10, 2014-14, and 2014-17, the California Emergency Medical Services Authority (EMSA) and POST have begun to develop curriculum to meet the new First Aid/CPR training standards for public safety personnel (peace officers, firefighters and lifeguards) required in the California Code of Regulations (CCR), Title 22, Division 9, Chapter 1.5.

EMSA and POST are working with the leadership of the California State Sheriffs' Association (CSSA), California Police Chiefs Association (CPCA), California Peace Officers Association (CPOA), and Peace Officers Research Association of California (PORAC) as well as other respective disciplines to address these changes.

This undertaking will also require POST to amend regulations, to include changes of both basic and in-service first aid/CPR training and to create instructor qualifications and training. The effective date of the new standards is tentatively set for April 1, 2017. **In the meantime, the existing regulations related to peace officer first aid/CPR remain in effect.**

EMSA and POST have become aware that some agencies have taken the initiative to start providing their personnel with first aid training and equipment related to areas authorized in the revised EMSA regulations. While commendable, it presents a potential risk to agencies if the training has not been approved by EMSA and the agency's local EMSA (LEMSA).

For example, agencies may be training and authorizing their personnel to use or administer epinephrine by auto-injector, supplemental oxygen therapy, auto-injectors containing atropine and pralidoxime chloride, Naloxone (Narcan), oropharyngeal or nasopharyngeal airways, hemostatic dressings, and/or other procedures which under current regulation for peace officers may be beyond the skills authorized by EMSA and LEMSAs. Agencies may be providing individual first aid kits (IFAKs) that include the above described items; however, authorization to use or administer them requires approval by the EMSA/LEMSAs. Without the supporting regulations and authorization by the LEMSAs for local law enforcement and EMSA for state law enforcement agencies, agencies may be at risk.

Much like peace officer authority established in the Penal Code, the authority for Public Safety Personnel to provide specified patient care procedures is codified in CCR, Title 22.

As an example, Public Safety First Aid Providers (i.e., law enforcement, firefighters and lifeguards) or Emergency Medical Responders are not authorized to use hemostatic dressings, as these items are not in their scope of practice pursuant to the CCR (unless they independently hold an EMT certificate or above). The LEMSA Medical Director, pursuant to Health and Safety Code 1798 and 1797.220, is the final authority regarding the authorization to use these items in the LEMSA region. Only individual officers trained to a higher standard and consequently authorized to perform specified interventions and use specified equipment (e.g., EMT or Paramedic, among others) while on-duty may provide this higher standard of treatment.

EMSA and POST encourage agencies that desire to provide additional training and authorize a higher level of first aid to seek guidance from their local EMSA and legal counsel.

EMSA and POST are mindful of the dynamic conditions first responder's encounter in the field, and the fact that public safety personnel often do not have the luxury of time and accessible resources as they respond to calls for service. Neither EMSA nor POST desires to discourage life-saving measures performed by public safety personnel, particularly in exigent circumstances. However, EMSA and POST want to ensure law enforcement agencies are informed regarding existing and proposed first aid training standards to minimize liability.

The text of the changes to Title 22 Regulations, First Aid and CPR Standards and Training for Public Safety Personnel may be found at www.emsa.ca.gov. A copy of the regulations is also attached to this Bulletin.

If you have further questions regarding the progress of the First Aid/CPR training standards for public safety revision project, please contact POST Senior Consultant Phil Caporale, Basic Training Bureau, at (916) 227-2519 or by email at phil.caporale@post.ca.gov.

Questions regarding the specific content of the proposed regulations and authorized skills should be directed to Sean Trask, EMS Personnel Division Chief, Emergency Medical Services Authority, at (916) 431-3689 or Sean.Trask@EMSA.ca.gov.

ROBERT A. STRESAK
Executive Director

Attachment

**California Code of Regulations
Title 22. Social Security
Division 9. Prehospital Emergency Medical Services
Chapter 1.5. First Aid Standards for Public Safety Personnel**

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.

“Public Safety AED Service Provider” means an agency, or organization which is responsible for, and is approved to operate, an AED.

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

§ 100007. Cardiopulmonary Resuscitation.

“Cardiopulmonary resuscitation” or “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 American Heart Association 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.

“Firefighter” means any regularly employed and paid officer, employee or member of a fire department or fire protection or firefighting agency of the State of California, or any city, county, city and county, district or other public or municipal corporation or political subdivision of California or any member of an emergency reserve unit of a volunteer fire department or fire protection district.

Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Section 1797.182, Health and Safety Code.

§ 100009. First Aid.

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

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.

§ 100010. Lifeguard.

“Lifeguard” means any regularly employed and paid officer, employee, or member of a public aquatic safety department or marine safety agency of the State of California, or any city, county, city and county, district or other public or municipal corporation or political subdivision of California.

Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Section 1797.182, Health and Safety Code.

§ 100011. Peace Officer.

“Peace officer” means any city police officer, sheriff, deputy sheriff, peace officer member of the California Highway Patrol, marshal or deputy marshal or police officer of a district authorized by statute to maintain a police department or other peace officer required by law to complete the training specified in this Chapter.

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

§ 100012. Primarily Clerical or Administrative.

“Primarily clerical or administrative” means the performance of clerical or administrative duties for ninety percent (90%) or more of the time worked within each pay period.

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.

§ 100013. Qualified Instructor.

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

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.

§ 100014. Regularly Employed.

“Regularly employed” means being given wages, salary, or other remuneration for the performance of those duties normally carried out by lifeguards, firefighters, or peace officers.

Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections 1797.182 and 1797.183, Health and Safety Code.

ARTICLE 2. GENERAL TRAINING PROVISIONS

§ 100015. Application and Scope.

Except those whose duties are primarily clerical or administrative, the following regularly employed public safety personnel shall be trained to administer first aid, and cardiopulmonary resuscitation, according to the standards set forth in this Chapter:

- (a) lifeguard;
- (b) firefighter;
- (c) peace officer.

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.

§ 100016. Training Programs in Operation.

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

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.

§ 100017. Time Limitation for Initial Training.

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

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.

ARTICLE 3. TRAINING STANDARDS

§ 100018. Scope of Course.

(a) The initial course of instruction shall at a minimum consist of not less than fifteen (15) hours in first aid and six (6) hours in cardiopulmonary resuscitation.

(b) The course of instruction shall include, but need not be limited to, the following scope of course which shall prepare personnel specified in Section 100016 of this Chapter to recognize the injury or illness of the individual and render assistance:

(1) Emergency action principles which describe the basic problems of decision making in first aid;

(2) First aid for medical emergencies, including sudden illnesses;

(3) Cardiac and respiratory emergencies, including cardiac and/or respiratory failures in victims of all ages;

(4) First aid for traumatic injuries including wounds, and life threatening bleeding;

(5) First aid for specific injuries, including care for specific injuries to different parts of the body;

(6) Bandaging, including materials and guidelines used in bandaging;

(7) First aid for environmental emergencies including burns, heat and chemical burns, electrical emergencies and exposure to radiation, or climatic changes;

(8) First aid for injuries to bones, muscles, and joints;

(9) Emergency rescue and transfer;

(10) First aid for obstetrical emergencies.

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.

§ 100019. Required Topics.

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

(a) Examination and assessment of the victim;

(b) Orientation to the EMS System;

- (c) Suspected heart attack or stroke;
- (d) Fainting, convulsions, and/or suspected drug abuse;
- (e) Heat exhaustion, heat stroke, hypothermia and frost bite;
- (f) Mouth to mouth breathing and care for choking victims whether conscious or unconscious;
- (g) Types of wounds and control of bleeding;
- (h) Shock, and its causes, infection and closed wounds;
- (i) Eye, face, scalp, jaw and ear injuries;
- (j) Injuries of the head, neck, back, trunk, arms and legs;
- (k) Exposure to toxic substances;
- (l) Bites and stings by snakes, marine life and insects;
- (m) Bandaging techniques, first aid kits and supplies;
- (n) Determination of the severity of burns, including first, second, and third degree burns;
- (o) Fractures, both open and closed, splinting, and care for fractures, sprains, strains and dislocated joints;
- (p) Techniques of cardiopulmonary resuscitation; and
- (q) Obstetrical emergencies.

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.

§ 100020. Optional Skill.

(a) In addition to the activities authorized by Section 100019 of this Chapter, public safety personnel may perform AED when authorized by a public safety AED service provider.

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

(A) Proper use, maintenance and periodic inspection of the AED.

(B) The importance of cardiopulmonary resuscitation (CPR), defibrillation, advanced life support (ALS), adequate airway care, and internal emergency response system, if applicable.

(C) Overview of the EMS system, the local EMS system's medical control policies, 9-1-1 access, and interaction with EMS personnel.

(D) Assessment of an unconscious patient, to include evaluation of airway, breathing, and circulation to determine cardiac arrest.

(E) Information relating to AED safety precautions to enable the individual to administer a shock without jeopardizing the safety of the patient or rescuers or other nearby persons.

(F) Recognition that an electrical shock has been delivered to the patient and that the defibrillator is no longer charged.

(G) Rapid, accurate assessment of the patient's post-shock status.

(H) The appropriate continuation of care following a successful defibrillation.

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

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

(1) Approve and monitor training programs including refresher training within its jurisdiction to assure compliance with this Chapter.

(2) Approve the written and skills exam required for AED training course completion.

(3) Develop policies and procedures for approval of AED instructors by the local EMS agency medical director. To be authorized to instruct public safety personnel in the use of an AED, and AED instructor shall either:

(A) Complete an American Red Cross or American Heart Association recognized instructor course (or equivalent) including instruction and training in the use of an AED, or

(B) Be approved by the local EMS agency director and meet the following requirements:

1. Be AED accredited or able to show competency in the proper utilization of an AED, and

2. Be able to demonstrate competency in adult teaching methodologies.

(4) Establish policies and procedures for medical control pursuant to Section 1798 of the Health and Safety Code.

(5) Establish policies and procedures for the approval and designation of public safety AED service provider(s) which will include requirements that public safety AED service providers have policies and procedures, approved by the local EMS agency medical director, to

(A) provide orientation of AED accredited personnel to the AED,

(B) ensure continued competency of AED accredited personnel, and

(C) collect and report data, as required by the local EMS agency but no less than annually, to the local EMS agency, pursuant to Section 100021.

(6) Establish policies and procedures to collect, maintain and evaluate patient care records.

(7) Report annually to the EMS Authority on:

(A) The total number of patients, defibrillated, who were discharged from the hospital alive, and

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

Note: Authority cited: Section 1797.107, Health and Safety Code. Reference: Sections 1797.52, 1797.58, 1797.74, 1797.90, 1797.175, 1797.176, 1797.182, 1797.183, 1798, 1798.2, 1798.4, 1798.100, 1798.102 and 1798.104, Health and Safety Code; and Section 13518, Penal Code.

§ 100021. Public Safety AED Service Provider.

A public safety AED service provider is an agency or organization that employs individuals as defined in Section 100015, and who obtain AEDs for the purpose of providing AED services to the general public.

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

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

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

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

(2) Ensure maintenance of AED equipment;

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

(4) Collect and report to the local EMS agency where the defibrillation occurred, as required by the local EMS agency but no less than annually, data that includes, but is not limited to:

(A) The number of patients with sudden cardiac arrest receiving CPR prior to arrival of emergency medical care,

(B) The total number of patients on whom defibrillatory shocks were administered, when cardiac arrest was witnessed (seen or heard) and not witnessed; and

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

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

(d) An approved public safety AED service provider and its authorized personnel shall be recognized statewide.

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

§ 100022. Testing.

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

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

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.

§ 100023. Training Instructor Requirements.

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

- (1) Proficient in the skills taught; and
- (2) qualified to teach by education and/or experience.

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

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.

§ 100024. Validation of Course Completion.

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

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

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

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.

§ 100025. Retraining Requirements.

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

(1) An approved retraining course which includes a review of the topics and demonstration of skills prescribed in this Chapter and which consists of no less than twelve (12) hours; or

(2) A competency based written and skills pretest of the topics and skills prescribed in this Chapter with the following restrictions:

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

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

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

(b) The entire retraining course or pretest may be offered yearly by the training agency, but in no event shall the retraining course or pretest be offered less than once every three (3) years.

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.

ARTICLE 4. TRAINING APPROVAL OPTIONS

§ 100026. Approved Courses.

The training requirements of this Chapter may be satisfied by successfully completing any one of the following course options as determined by the employing agency:

(a) A course in first aid, including CPR, developed and/or authorized by the Fire Service Training Program of the Office of the State Fire Marshal and approved by the EMS Authority; or

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

(c) A course in first aid, including CPR, developed and authorized by the California Department of Parks and Recreation and approved by the EMS Authority; or

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

(e) A course in first aid, including CPR, developed and authorized by the Department of the California Highway Patrol and approved by the EMS Authority; or

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

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

(h) The U.S. Department of Transportation's first responder course which includes first aid practices and CPR approved by the local EMS agency; or

(i) A course in first aid and/or CPR equivalent to the standards of the American Red Cross and/or American Heart Association and approved by the local EMS agency; or

- (j) An EMT-I course which has been approved pursuant to Chapter 2 of this division; or
- (k) An EMT-II course which has been approved pursuant to Chapter 3 of this division; or
- (l) An EMT-P course which has been approved pursuant to Chapter 4 of this division.

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.

§ 100027. Course Approval Process.

For those courses requiring approval, the following shall be submitted to the approving authority when requesting approval:

- (a) Name of the sponsoring institution, organization, or agency;
- (b) course outline;
- (c) final written examination with pre-established scoring standards; and
- (d) skill proficiency testing criteria, with pre-established scoring standards.

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.

§ 100028. Program Review.

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

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.