Tuolumne County
Emergency Medical Services Agency

Title: **ALS Skills Competency Verification**

EMS Policy No. **254.10**

Medical Director Signature: on file

Creation Date: 11-8-2017

Revision Date: 5-25-22

EMS Coordinator Signature: on file

Review Date: 5/2026

I) **Purpose**
The purpose of this policy is to specify the requirement ALS providers shall adhere to in demonstrating competency for infrequently used skills by ALS providers.

II) **Authority**
Health and Safety Code, Division 2.5, Section 1797.220 & 1798 et seq.

III) **Definitions**
A) “Infrequently Used Skills” means ALS procedures that have been identified through the QA/QI process as a skill performed on an infrequent basis within the Tuolumne County EMS system which requires on-going training to maintain competency.
B) “ALS Personnel” means EMT-Ps and Flight Nurses accredited by the Tuolumne County EMS Agency.

IV) **Policy**
A) Demonstration of competency of infrequently utilized skills is to be performed in a training environment using mannequins or other approved training adjuncts.
B) Providers are required to develop a process that affords all ALS personnel the opportunity to demonstrate competency at the required intervals.
C) Providers and ALS personnel shall follow the process specified in EMS Agency Policy when verifying an infrequently used skill.
D) Providers shall track individual employees training records using a spreadsheet or other EMS Agency approved format.
E) Providers shall develop and provide the EMS Agency with a Training Schedule by January 1 each year for that calendar year.
F) Providers shall notify the EMS Agency of any ALS Personnel who fails to complete the requirement of this Policy within 15 days of the completion of each semi-annual training sessions.
G) ALS Personnel failing to complete the requirement of this Policy shall have their Accreditation suspended until the requirements have been completed.
   1) The EMS Medical Director may allow the continued Accreditation of the aforementioned ALS Personnel, for a period not to exceed 15 days, in extraordinary circumstances.
H) Providers shall ensure sufficient training equipment and supplies are available to implement this Policy.
I) Providers shall make records available to the EMS Agency, upon request, to demonstrate compliance with this Policy.
J) Competency of the following infrequently used skills are to document semi-annually:
   1) Adult Endotracheal Intubation
   2) Supraglottic and Periglottic Airways
   3) Needle Cricothyrotomy

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4) Needle Thoracostomy
5) PICC, Tunneled and Non-Tunneled Venous Access

K) Competency of the following infrequently used skills are to be documented annually:
   1) Nasogastric Tube Insertion
   2) Transcutaneous Cardiac Pacing
   3) Intraosseous Infusions
   4) Continuous Positive Airway Pressure
   5) 12 Lead ECG Acquisition
   6) Childbirth

L) The EMS Medical Director may change the frequency of the training intervals of any skill based on his/her medical judgment.

M) Any procedure that is found to be in need of improvement through the QA/QI process may be added at the discretion of the EMS Medical Director.

N) Any procedure that is added to the local Scope of Practice may be added at the discretion of the EMS Medical Director.