



**Southern Tier
Regional
Emergency Medical
Advisory Committee**

Policy Statement

Policy # 06-01

Subject: Credentialing of
Paramedics/Critical Care
Technicians

Issued: 5/1/06
Supercedes:

**Credentialing of Paramedics/Critical Care Technicians by STREMAC
within the Paramedic Services of the STREMS Region**

I. Overview

The four Paramedic Services of the STREMS Region have identified the need to credential their employees who are certified at the level of Paramedic/Critical Care Technician. The intention of credentialing is to ensure Paramedics/Critical Care Technicians remain familiar and competent with regional treatment protocols, policy and procedures, maintain a basic level of competence of treatment skills, and offer a service medical director an avenue to monitor the employees who treat patients under his license to practice medicine.

II. Procedure Paramedics/Critical Care Technicians who are credentialed by STREMAC must maintain a set minimum standard. The standard is broken into three parts:

- a. Education
- b. Skills Maintenance/Verification
- c. Service Medical Director/Service Administration Specific Requirements

Paramedics/Critical Care Technicians who maintain the minimum set standard will be granted an **Active Status**. Paramedics/Critical Care Technicians who do not maintain the minimum set standard will be removed from active status and assigned as **Inactive Status**. A Paramedic/Critical Care Technician who requests to be removed from active status will be assigned as **Inactive Status**.

The Service Medical Director or by a majority vote of STREMAC are the only entities allowed to place a Paramedic/Critical Care Technician on inactive status. Reasons for a Paramedic/Critical Care Technician to be placed on inactive status are as follows but not limited to:

1. Negligence/Misconduct
2. Repeated failure of Treatment Skills

3. Failure to Meet Educational Requirements
4. Failure to meet Skills Maintenance/Verification requirements.

The procedure to reinstate a Paramedic/Critical Care Technician to Active status relies with the Service Medical Director (SMD). The SMD must ensure that the Paramedic/Critical Care Technician has met the minimum set requirements prior to reinstating the Paramedic/Critical Care Technician to active status. The SMD may take additional measures to satisfy himself/herself that the Paramedic/Critical Care Technician is capable of providing care to the public under his/her license to practice medicine. The SMD also has the option of not allowing a Paramedic/Critical Care Technician to return to active status under his/her license to practice medicine.

III. Standards

As stated above the standards are broken into three specific criteria. The criteria are as follows.

A. Education

Paramedics/Critical Care Technicians covered by this proposal are required to maintain a set level of education and training.

- i. NYS EMT-Paramedic/Critical Care Technician Certification
- ii. AHA ACLS (or equivalent)
- iii. AHA PALS (or equivalent)
- iv. CPR Certification
- v. Regional Protocol In-services

B. Skills Maintenance/Verification

Paramedics/Critical Care Technicians must be able to perform proficiently all skills required by STREMS protocol and Service Medical Director requirement. The Paramedic/Critical Care Technician must exhibit proficiency of these skills on a quarterly basis.

- i. Intubation
 - Adult (oral/nasal)
 - Pediatric
- ii. IV Access
 - Peripheral and External Jugular
- iii. Cardiac Monitor/Defibrillator Competence
 - Rhythm Interpretation
 - Defibrillation (unsynchronized/synchronized)
 - External Pacing
 - 12 Lead EKG acquisition
- iv. Medication Proficiency
- v. Needle Thoracostomy
- vi. IO Insertion
- vii. Needle Cricothyrotomy

- C. Service Medical Director/Service Administration Specific Requirements
The Service Medical Director or Service Administration has the authority to place additional requirements on the Paramedic/Critical Care Technician that provides care under his/her license to practice medicine. These requirements may include but are not limited to:
- i. Additional Treatment Skills
 - ii. Regional On-Line In-services
 - iii. Education/Training (ex. BTLS)
 - iv. Additional Medication Knowledge

IV. Records Maintenance

All records generated by a service regarding the credentialing, maintenance of Active status, removal from Active status, remedial training, reinstatement proceedings, and correspondence regarding credentialed status must be maintained by the service. These records are to be considered confidential and not available for public disclosure. Access shall be limited to the Service Medical Director, Service Administration, the Paramedic/Critical Care Technician, and the designee of STREMAC.

V. Service Responsibilities

Each service is responsible to maintain a program that allows each Paramedic/Critical Care Technician employed by the service to maintain his/her credentialed status. This will include a quarterly skills maintenance program. The service must also report any instances of removal from Active Status to Inactive Status, Reinstatement to Active Status, permanent removal from Active Status to the STREMAC designee. The service must report on a quarterly basis, by the last day of January, April, July and October, the status (Active or Inactive) of all its Paramedics/Critical Care Technicians to STREMAC.

VI. Service Medical Director Responsibilities

The Service Medical Director is responsible to ensure that all Paramedics/Critical Care Technicians under his/her license maintain the standards set forth by him/her. The SMD will address any issues regarding the credentialed status of a Paramedic/Critical Care Technician within a timely basis and report all finding of investigations or inquiries to the service and STREMAC.

VII. Appeals Process

An inactive provider may appeal his/her status to the STREMAC by written request. The provider shall, at the discretion of the STREMAC chair, make a verbal and/or written appeal before the STREMAC. The process must begin within 15 days after the provider has received notice of being placed on

involuntary inactive status. The ruling of the STEMAC only has the authority to determine the credentialed status of a provider. The process is as follows:

- A. Notify the STEMAC in writing and delivered by certified mail the intent to appeal the ruling.
- B. The STEMAC will assign a Physician member of the committee to investigate all relevant information regarding the placement of the provider on involuntary inactive status. The Physician will report back to the STEMAC of his/her findings at a committee meeting.
- C. The provider is responsible for any reasonable costs associated with the appeal process.
- D. The provider placed on involuntary inactive status, the physician placing the provider on involuntary inactive status, and the Service (s) of record for the provider will be notified in writing and delivered by certified mail, the final ruling.
- E. Any inquires to EMSTAR/STREMS or the STEMAC in regards to the credentialed status of a provider by a verified EMS agency or other recognized authority will receive only the credentialed status (i.e. Active or Inactive).

IV. Records Maintenance

All records generated by a service regarding credentialing, must be maintained by the service and made available to the STEMAC upon request. On a yearly basis a report regarding credentialed status must be provided to the STEMAC using the following format (see attachment 1). These records are to be considered confidential and not available for public disclosure. Access shall be limited to the Service Medical Director, Service Administration, the Paramedic/Critical Care Technician, and an appointed member of STEMAC.

STEMAC Approved: 2/7/06

STREMS Council Approved: 3/9/06

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