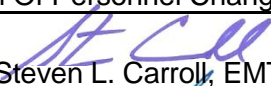



COUNTY OF VENTURA HEALTH CARE AGENCY		EMERGENCY MEDICAL SERVICES POLICIES AND PROCEDURES	
Policy Title: Notification Of Personnel Changes-Provider		Policy Number 342	
APPROVED: Administration:	 Steven L. Carroll, EMT-P	Date: June 1, 2017	
APPROVED: Medical Director:	 Daniel Shepherd, MD	Date: June 1, 2017	
Origination Date:	May 15, 1987		
Date Revised:	May 11, 2017	Effective Date: June 1, 2017	
Last Review:	May 11, 2017		
Review Date:	May 2020		

I. PURPOSE

To define a procedure to assure that the Ventura County Emergency Services Agency is notified of hiring or termination of employment of an EMT or paramedic and MICN.

II. AUTHORITY:

Health and Safety Code, Chapter 1, Article 1.

III. POLICY

Each provider of prehospital EMS services shall notify, Emergency Medical Services Administrative Office, in writing or by e-mail, of hiring or termination of employment of an EMT, paramedic or MICN within 5 days of taking action.