

Community Paramedicine Updates

EMERGENCY MEDICAL CARE COMMITTEE MEETING

JANUARY 25, 2023

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STATE OF COMMUNITY PARAMEDICINE IN SAN DIEGO COUNTY

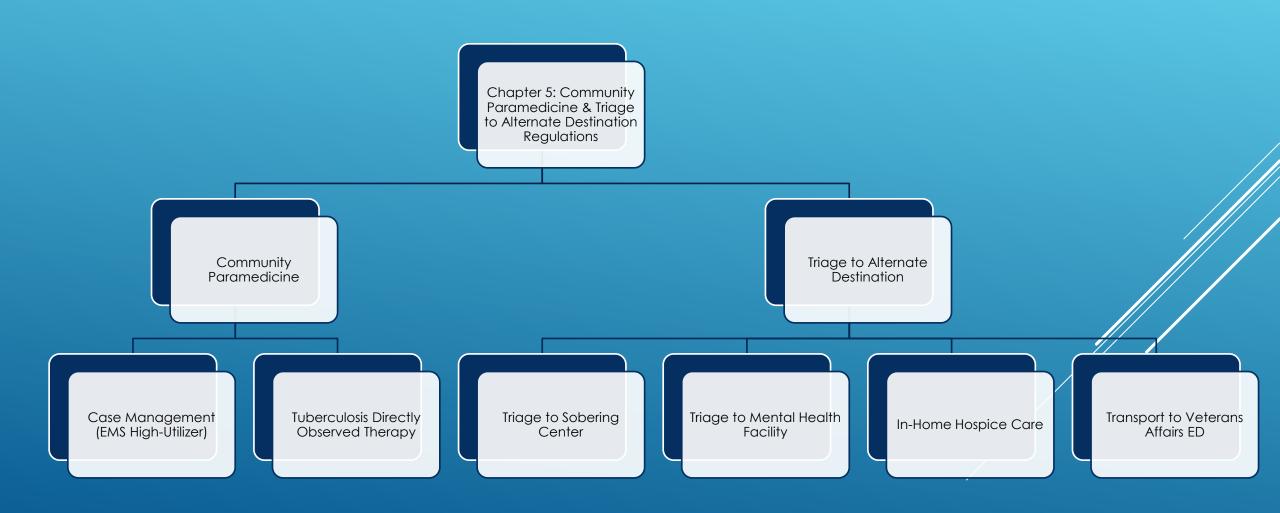
Authority

- ► AB 1544 signed September 25, 2020
- ▶ Bill went into effect on Jan 1, 2021, which became the purview of EMSA
- ► EMSA Office of Administrative Law (OAL) approved regulations on October 31, 2022 following revisions
- Regulations became effective on November 1, 2022
- Pilot program continues operation

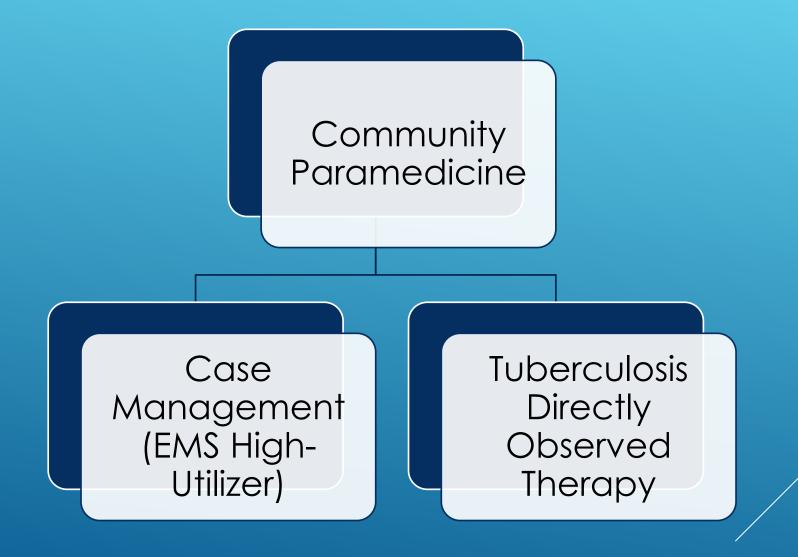


Regulations available at https://emsa.ca.gov/public_comment/

AB-1544 MODELS OVERVIEW



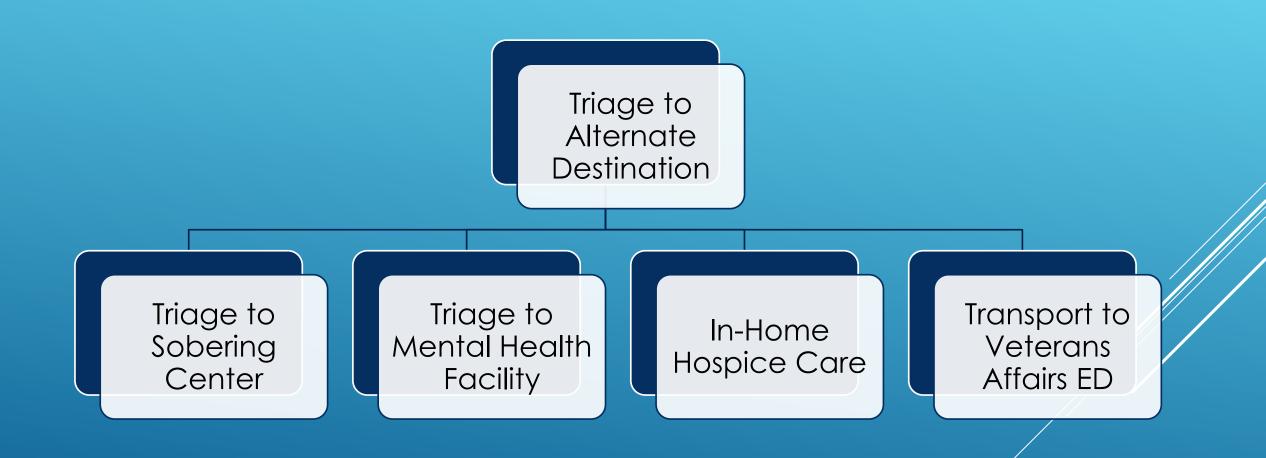
CP MODELS



PROTOCOLS IN PROGRESS – COMMUNITY PARAMEDICINE

- ▶ New P-XXX: Community Paramedic & Triage Paramedic Accreditation in San Diego County
- Updated S-XXXA: Designation of Authorized Providers of Continuing Education of Prehospital CE in SD County
- ▶ New P-XXXA: Community Paramedic Student Eligibility
- ▶ New P-XXX: Community Paramedic Training Program Requirements and Procedures for Approval
- ▶ New P-XXXA: Community Paramedic Training Program Application Form
- ► New P-XXX: Community Paramedicine Directly Observed Therapy (DOT) for Tuberculosis (Adult)
- ► New P-XXX: Community Paramedicine Directly Observed Therapy (DOT) for Tuberculosis (Pediatric)
- ▶ New P-XXXA: Scope of Practice of Community Paramedics in San Diego County
- ▶ New S-XXX: Community Paramedicine: Assess, Treat, & Refer
- ▶ New S-XXXA: Community Paramedicine Documentation Standards and Transferral of Prehospital Care Record (PCR) Information
- ▶ **New P-XXX:** Designation of Providers of Community Paramedicine Providers
- ► Updated: CoSD Quality Improvement Plan

PROGRAM MODELS



PROTOCOLS IN PROGRESS – TRIAGE TO ALTERNATE DESTINATION

- ▶ New P-XXX: Community Paramedic & Triage Paramedic Accreditation in San Diego County
- ▶ Updated S-XXXA: Designation of Authorized Providers of Continuing Education of Prehospital CE in SD County
- ▶ New P-XXXB: Triage Paramedic Student Eligibility
- New P-XXX: Transfer to Alternate Destination Program Requirements and Procedures for Approval
- ▶ New P-XXXA: Transfer to Alternate Destination Program Application Form
- ▶ **New P-XXX:** Community Paramedicine Hospice Patient Care Medications
- ▶ New P-XXX: Community Paramedicine Hospice Patient Care (Adult)
- ▶ New P-XXX: Community Paramedicine Hospice Patient Care (Pediatric)
- ▶ New P-XXXA: Scope of Practice of Triage Paramedics in San Diego County
- ▶ New S-XXXA: Community Paramedicine: Triage to Alternate Destination
- ▶ New S-XXXB: Community Paramedicine: Medical Clearance Criteria & Screening Tool for Transport to Sobering Centers
- ▶ New S-XXXC: Community Paramedicine: Medical Center Clearance Criteria & Screening Tool for Transport to Behavioral Health Centers
- New S-XXXD: Community Paramedicine: Medical Clearance Criteria & Screening Tool for Transport to Veterans Affairs (VA) Emergency Departments
- ▶ New S-XXXB: Triage to Alternate Destination Documentation Standards and Transferral of Prehospital Care Record (PCR) Information
- ▶ New S-XXX: Community Paramedicine: Designation of a Receiving Sobering Center
- ▶ New S-XXX: Community Paramedicine: Designation of a Receiving Mental Health Facility
- ▶ New P-XXXB: Designation of Providers of Triage to Alternate Destination Providers
- Updated: CoSD Quality Improvement Plan

LATEST UPDATES

- ▶ Next steps
 - ► Establish a Community Paramedicine Steering Sub-Committee through the Emergency Medical Care Committee
 - Advance initial draft policies
 - ▶ Identify data collection/reporting elements and pathways
 - ▶ Onboarding additional EMS Office staff to support the process

COMMUNITY PARAMEDICINE/TAD STEERING COMMITTEE

One emergency medicine physician

- Must be board certified or board eligible AND
- practicing at an emergency department within the jurisdiction of the local EMS agency.

One registered nurse

 practicing within the jurisdiction of the local EMS agency

One licensed paramedic

- practicing within the jurisdiction of the local EMS agency
- Whenever possible, the paramedic shall be employed by a public agency

One hospital representative within the jurisdiction of the local EMS agency

 This acute care hospital must have an emergency department

Note: Additional advisory members may be added from the fields of public health, social work, hospice, substance use disorder detoxification and recovery, or mental health practicing within the jurisdiction of the local EMS agency with expertise commensurate with the program specialties described in Sec 1815 and 1819.