## **AB-40 OVERVIEW & IMPLEMENTATION**





Local Responsibilities, Benchmarks, and Timelines

### **AB-40: RESPONSIBILITIES FOR HOSPITALS**



Licensed general acute care hospitals with an emergency department are responsible for the following:

- Developing an APOT reduction protocol that addresses:
  - Notification of key hospital staff that the APOT standard has been exceeded for one month
  - Mechanisms to improve hospital operations to reduce APOT
  - Systems to improve general hospital coordination with the emergency department
  - Direct operational changes designed to facilitate a rapid reduction in APOT to meet the standard
- File the APOT reduction protocol with EMSA and report any revisions yearly

#### **AB-40: RESPONSIBILITIES FOR LEMSA**



The San Diego County EMS Office is responsible for the following:

- Developing a standard not to exceed 30 minutes, 90% of the time, for ambulance patient offload time and report the standard to EMSA
- In development of the standard, the LEMSA may engage various stakeholders
- Delivering APOT times via CEMSIS
- Helping with the validation of EMSA audit tools to improve data accuracy

#### **AB-40: RESPONSIBILITIES FOR EMSA**

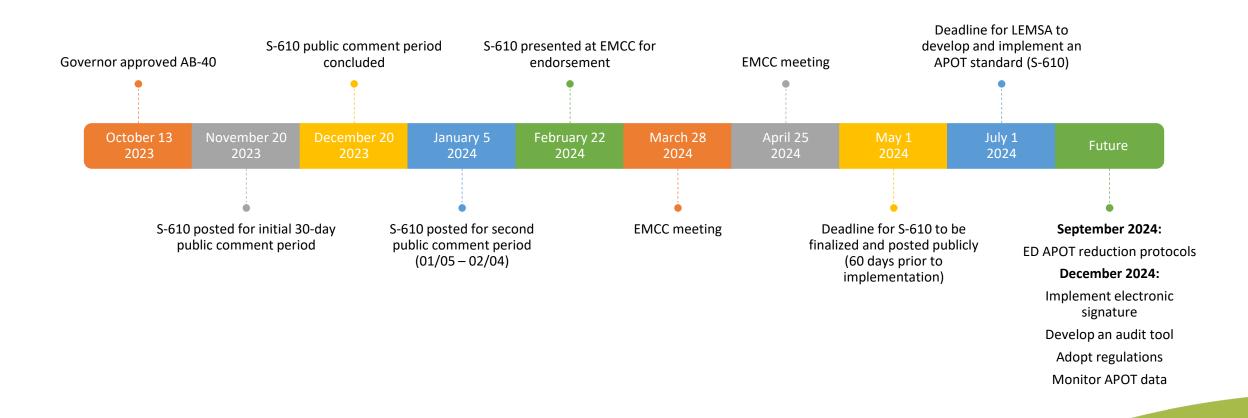


The California EMSA is responsible for the following:

- Developing and implementing a CEMSIS requirement for electronic signature for use between ED medical personnel and EMS personnel that captures when the ambulance arrives and when transfer of care is complete
- Developing and implementing an audit tool to improve the data accuracy of transfer of care
- Adopting emergency regulations to implement these H&S Code revisions
- Monitoring monthly APOT data for each hospital
  - If a hospital exceeds the APOT standard for the previous month, EMSA will:
    - Report the APOT time exceedance to the LEMSA
    - Direct LEMSA to alert all EMS providers in the jurisdiction
    - Direct the hospital to implement the APOT reduction protocol
    - Host, at minimum, bi-weekly calls with the hospital administration, including ED leadership, EMS providers, LEMSA, and hospital employees

### **AB-40: BENCHMARKS AND TIMELINES**





#### S-610 TRANSFER OF CARE GUIDELINES



#### Goals and Objectives:

- Revise S-610 to become compliant with AB-40
  - Define APOT standard
- Adopt EMSA APOT definitions for statewide standard
- Better define transfer of care to align with AB-40 and statewide standards
- Outline APOT calculations and reporting
- Incorporate APOT QA component

#### **EMSA APOT Resources:**

- NEMSIS 3.5 APOT-1 Specifications
- NEMSIS 3.5 APOT-2 Specifications
- Standardized Methods for Data Collection and Reporting

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# **QUESTIONS?**