



SYSTEMS		S-002
LEMSA POLICY AND PROTOCOL APPROVAL PROCESS		
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## I. POLICY STATEMENT

This policy establishes the process for public comment, review, and implementing County of San Diego (CoSD) Local Emergency Medical Services Agency (LEMSA) policies and protocols.

### I. AUTHORITY

Health and Safety Code, Division 2.5, Sections 1797.200, 1797.202, 1797.220 and 1798 *et seq.*  
California Code of Regulations, Title 22, Division 9 *et seq.*, San Diego County Board of Supervisors Policy K-12.

## II. DEFINITIONS

**POLICY:** A written set of rules, requirements, or principles applied to accomplish a course of action

**PROTOCOL:** Written directives and guidance used for patient treatment and disposition

**SAN DIEGO COUNTY EMS OFFICE:** The designated Local EMS Agency (LEMSA) for the County of San Diego. LEMSAs functions, as outlined in California Health and Safety Code, Division 2.5, Sections 1797 *et seq.*, including EMS interagency coordination and medical control, public health surveillance activities, EMS data and quality of care, regulation, and enforcement, trauma registry reporting, and other activities related to the oversight of the prehospital health care system in California. These functions are primarily for the benefit of the county's residents and visitors.

## III. POLICY

- A.** The CoSD EMS Office, as the LEMSAs for San Diego County, is responsible for developing and updating policies and protocols for the administration and operations of the EMS system. By state statute, the CoSD EMS Medical Director retains the final decision through his/her medical authority in matters pertaining to the planning, implementation and evaluation of the EMS system including all EMS policies and protocols. CoSD EMS shall follow the procedures outlined in this policy for public comment and approval of new or revised system policies or patient treatment protocols.
- B.** The CoSD EMS Medical Director, EMS Administrator, or designee, shall approve EMS system policies after review and comment by the Emergency Medical Care Committee (EMCC). Policies shall have a foundation on these principles:
1. Standards and evidence-based practices
  2. Community engagement
  3. Health equity
  4. Transparency

**C.** The CoSD EMS Medical Director shall approve all policies and protocols regarding medical oversight and medical accountability after review and comment by the EMS Medical Director's Advisory Committee (Base Station Physicians' Committee). This includes, but is not limited to:

1. Treatment and triage protocols
2. Prehospital patient reports
3. Patient care reporting requirements
4. Field medical care protocols

**D.** Public Comment Process for System Policy:

1. Public comment of new or revised system policies with substantive or material changes will be posted electronically for review and comment prior to Emergency Medical Care Committee (EMCC) presentation.
2. Written comments are due to CoSD EMS by the date listed on the public comment electronic posting.
3. CoSD EMS allows a minimum of 14 days for public comment.
4. CoSD EMS will notify interested parties via email when draft policies are posted for public comment.
5. All comments received during the comment period will be reviewed by CoSD EMS for inclusion, advisement, or exclusion in the policy. A summary of the comments received, and final policy drafts will be electronically posted following the public comment period.

**E.** Clinical Protocol Review and Public Comment Process:

1. CoSD EMS reviews Clinical Protocols annually.
2. CoSD EMS collects information, including public comments, continuously for review for the following protocol update cycle.
3. CoSD EMS posts notice for public comment submission in the fall of each year.
  - a) Written comments are due to CoSD EMS by the date listed on the public comment electronic posting.
  - b) CoSD EMS allows a minimum of 14 days for public comment.
4. Draft clinical protocols, including relevant public comment, are reviewed by the EMS Medical Director's Advisory Committee (BSPC).

**F.** CoSD EMS will notify EMS system participants a minimum of 60 days prior to new or revised policy implementation, with the following exception:

1. Emergency, time-limited policy changes, including those related to declared states of emergency, may be implemented without 60-day notice.
- G.** Implementation of new or revised policies are preferred to take place annually on July 1.
- H.** Implementation of new or revised protocols shall take place annually on July 1.