PURPOSE
To define and establish criteria for permitting Advanced Life Support Interfacility Transport (ALS IFT) service providers within Riverside County.

AUTHORITY
California Health and Safety Code - Division 2.5: Emergency Medical Services [1797.206.]
California Health and Safety Code - Division 2.5: Emergency Medical Services [1797.208.]
California Health and Safety Code - Division 2.5: Emergency Medical Services [1797.214.]
California Health and Safety Code - Division 2.5: Emergency Medical Services [1797.218.]
County of Riverside Ordinance 756 (Ambulance Ordinance)

Procedures
1. Application of Policy
   a. Authorization as an ALS IFT service provider is in addition to a Riverside County Emergency Medical Services Agency (REMSA) ambulance permit.
   b. ALS IFT service providers are authorized to conduct advanced life support (ALS) interfacility transports (IFT) that are requested by medical order of a California licensed physician or licensed medical provider representing a California authorized healthcare provider organization or agency.
   c. ALS IFT is those that can be conducted within the scope of practice of California licensed and REMSA accredited paramedic.
   d. Any ambulance provider agency that wishes to obtain authorization must submit ALS IFT ambulance permit application that addresses items of sections below to REMSA.

2. Criteria - General
   a. Agreement to provide ALS IFT service response on an uninterrupted daily, continuous 24-hour basis.
   b. Other than still alarms, ALS IFT service providers are not authorized to respond to Public Safety Answering Point (PSAP) generated 9-1-1 calls unless it is through a mutual aid request from a Riverside County Exclusive Operating Area (EOA) ambulance provider.
   c. No ALS IFT service provider shall advertise a seven (7) or (10) digit or 800 number to replace a request for a 9-1-1 emergency response.
   d. ALS IFT service provider shall, without delay, notify REMSA in advance any known or foreseeable interruptions, suspensions, delays in services or significant operational changes.
   e. ALS IFT service providers who choose to provide event medical services shall notify REMSA of scheduled event coverage and submit Incident Action Plan (IAP) within 30 days prior to the event or as soon as possible if the provider was requested for service less than 30 days from the event.
   f. ALS IFT service provider shall identify the number of ALS IFT ambulances in service and identify a geographical zone area (Northwest, Southwest, Central, San Jacinto, Pass, Desert, Mountain Plateau, and Palo Verde) for proposed ALS IFT services. (Reference Attachment A for zone areas)
   g. ALS IFT service providers shall participate and be available as a mutual aid backup 9-1-1 emergency and/or medical disaster resource for the Riverside County emergency medical services system.
   h. Comply with all applicable federal/state/local laws.

3. Criteria – Operational
   a. ALS IFT service providers shall develop and update policies and procedures manuals or standard operating procedures (SOP) that cover all aspects of ALS IFT service program.
   b. Medical Oversight
i. Comply with REMSA policies and procedures including but not limited to policy #6401 (Interfacility Transfer).

ii. ALS IFT service providers shall employ full or part-time (or per diem) physician advisor for medical oversight.
   1. ALS IFT service providers shall designate a physician advisor to conduct medical oversight over the ALS IFT service provider program.
   2. The physician advisor shall be a full or part-time physician licensed in the State of California and qualified by training and experience with recent, within last five (5) years, practice in an emergency or acute critical care medicine.

iii. ALS IFT service providers shall designate an ALS coordinator to oversee and manage the ALS IFT service provider program.
   1. ALS coordinator shall at minimum possess a valid CA State paramedic license or valid CA State Registered Nursing License and minimum of three years of prehospital and/or interfacility transport experience.
   2. The duties of an ALS coordinator shall at minimum perform the following but not limited to:
      a. ALS coordinator shall oversee initial and ongoing education and training for all medical personnel involved in the ALS IFT program.
      b. Develop and maintain a REMSA approved ALS IFT CQI plan as defined by REMSA policies and procedures.
      c. Assure that ALS IFT personnel adhere to BLS and ALS IFT Standing Orders approved by the REMSA Medical Director.
      d. Assure that ALS IFT personnel adhere to REMSA protocols, policies and procedures.

   c. Paramedics
      i. Maintain all necessary licenses and certification as identified by REMSA.
      ii. Maintain Riverside County paramedic accreditation as identified in REMSA policies.
      iii. ALS IFT service providers shall assure staff’s current paramedic license, accreditation, and certification as described in REMSA policy #3202 (Transport Services), through its maintenance program.
      iv. ALS IFT service providers shall submit for approval a paramedic accreditation program.

   d. Emergency Medical Technicians (EMT)
      i. All EMTs staffing ALS IFT ambulance shall complete “EMT Out-of-County Acknowledgment” application within Riverside County EMS Credentialing process if they obtained EMT certification outside of Riverside County.
      ii. ALS IFT service providers shall assure staff’s current EMT certification, license, and certification through its maintenance program.

   e. ALS IFT ambulance staffing
      i. Ambulance performing services under this policy shall be staffed according to Riverside County Ambulance Ordinance 756 – ALS Ambulance, REMSA policies, and REMSA EMS Plan.

   f. Employee health and wellness
      i. All training and education required by the Occupational Safety and Health Administration (OSHA) for EMS field personnel shall be adhered to at initial hire and annually thereafter.

   g. Facilities
      i. ALS IFT service providers shall deploy and operate its ambulances from a physical location within Riverside County. This facility will be sufficient to provide crew housing and vehicle re-supply.

   h. Development of required reporting policies
      i. Upon discovery, the ALS IFT service provider shall report to REMSA, or the REMSA Duty Officer if outside of business hours/days, immediately any instance in which:
         1. A patient dies, is injured, or is otherwise harmed due to actions of commission or omission by a member of the ALS IFT service provider;
         2. An authorized EMS response vehicle operated by the ALS IFT service provider is involved in a motor vehicle crash in which a patient, member of the crew or other person is killed or injured to the extent requiring hospitalization or care by a physician;
         3. EMS personnel are killed, or injured to the extent requiring hospitalization or care evaluation by a physician, while on duty;
         4. Patient care equipment fails while in use, causing patient harm;
         5. It is alleged that any member of the service has responded to an incident or treated a patient while under the influence of alcohol or drugs;
6. Any changes to the geographic area coverage for ALS IFT service provider.
7. The timely reporting of infectious disease exposures to other healthcare providers and facilities possibly exposed and methods for timely care and prophylaxis, as appropriate, for ALS IFT service provider and other service provider personnel.
8. ALS IFT service provider shall notify REMSA immediately of any expiration, suspensions or revocation of Commission on Accreditation of Ambulance Services (CAAS) accreditation.

4. Criteria - Communications
   a. Communication Center
      i. ALS IFT service providers shall operate a dispatch center and maintain all hardware and software necessary to receive and fulfill requests for ALS IFT services. ALS service providers shall be capable of receiving and replying to requests for ALS IFT service by voice and by Computer Aided Dispatch (CAD). ALS IFT service provider’s dispatch center shall be capable of dispatching all ambulance units to provide ALS IFT services.
      ii. ALS IFT service provider’s communication center shall operate uninterrupted daily, continuous 24-hour basis.
      iii. Radio communication
          1. ALS service providers shall be compliant with REMSA Policy #2201 (Radio Communication Standard).
          2. Unit Mobile Radios – ALS IFT service providers are responsible for the communications equipment on ambulances used in the performance of mutual aid back up of ALS 9-1-1 emergency and ALS IFT ambulance services.
          3. REMSA approved radio equipment shall be installed in conformance with existing REMSA policies prior to assignment.
          4. ALS IFT service providers shall operate communications equipment in conformance with all applicable rules and regulations of the Federal Communication Commission, and in conformance with all applicable REMSA policies and operating procedures.
          5. Base hospital/paramedic receiving hospital - Communications equipment used for an ambulance to hospital communication shall be configured so that personnel providing patient care are able to directly communicate with a base hospital or receiving hospital staff regarding the patient.
          6. ALS IFT service provider shall conduct initial and ongoing training of ALS IFT personnel on the use of mutual aid radios including but not limited to:
             a. Accessing proper radio channels for mutual aid responses
             b. Training of annual update of VHF Radio Dot frequencies
             c. Proper radio etiquette
      iv. ALS IFT service provider must use criteria-based dispatch protocols approved by REMSA that determine the appropriate level for dispatching of incoming calls, including BLS level, ALS level, CCT level and referral to the 9-1-1 system for emergency medical service requests.
      v. ALS IFT service provider shall have and enforce written policies concerning authorization and protocols for an ALS IFT communication center to send a referral service when the service cannot respond.

5. Criteria – Continuous Quality Improvement
   a. Standard of care – ALS IFT service providers shall cooperate with REMSA and collaborate with EMS System participants to develop, implement and continuously improve clinical standards of care that optimize patient outcomes. ALS IFT service providers agree to continuously maintain the optimal effort to improve core indicators of quality service as established by REMSA with the goal to consistently provide excellent patient care and patient satisfaction.
   b. ALS IFT service providers shall comply with REMSA policy #7101 (CQI System) and #7102 (Unusual Occurrence / Incident Review Process).
   c. Maintain ALS medical equipment and supplies as defined in REMSA policy #3303 (Drug and Equipment List).

6. Criteria – Training and Education
   a. ALS IFT service providers shall develop and implement a clinical education and training program that is linked to its CQI plan and is congruent with REMSA EMS Quality Improvement Program (EQIP).
b. New hire/reclassification training requirements: Prior to a field assignment, all newly hired/reclassified EMT and paramedic employees shall complete an orientation that is designed to prepare them to be fully functioning EMTs or paramedics in Riverside County. This orientation shall be approved by REMSA and will include, but not be limited to:
   i. A review of all REMSA plans, programs, policies, protocols, and procedures as appropriate for the individual’s level of credentialing and job duties
   ii. Demonstration of skills proficiency as identified in REMSA policies, protocols, procedures, performance standards and EQIP
   iii. Geography and maps of Riverside County
   iv. Prehospital Receiving center (PRC), trauma centers and specialty care centers including designated patient catchment areas
   v. Mandated reporting and associated documentation
   vi. ICS 100, 200, 700 and 800 within 6 months of hire date.

c. On-going training requirements: Paramedics – required training may be modified by changes in REMSA plans, programs, policies, protocols, and procedures. Education/training required for paramedics include:
   i. Advanced Cardiac Life Support (ACLS) or equivalent as determined by REMSA.
   ii. Pediatric Advanced Life Support (PALS) or equivalent as determined by REMSA.
   iii. Prehospital Trauma Life Support (PHTLS) or equivalent as determined by REMSA.
   iv. CPR for the professional rescuer.
   v. Demonstration of skills proficiency as identified in REMSA policies, protocols, procedures, performance standards and EQIP
   vi. Quarterly 9-1-1 patient assessment ride-a-longs: ALS IFT service provider will partner/enter into agreement with ALS 9-1-1 emergency service provider to obtain paramedic(s) employed by ALS IFT service provider the necessary 9-1-1 patient contact experience (non-treatment) for paramedics employed by ALS IFT service provider. A minimum of 5 ALS patient contacts will be required per quarter per paramedic assigned to an ALS IFT service provider. Records of each ALS IFT’s paramedic ride-a-longs will be kept in personnel training files. The ride-a-long log should have at minimum a date of ride-along, hours of ride-along, 9-1-1 emergency service provider name and number of ALS patient contacts, and signature of authorized 9-1-1 emergency service provider’s paramedic provider. These records will be kept up to four years. Records will be subject to inspection upon REMSA’s request.

d. On-going training requirements: EMT - Required training may be modified by changes in REMSA plans, programs, policies, protocols, and procedures. Education/training required for EMTs include:
   i. CPR for the Professional Rescuer
   ii. Demonstration of skills proficiency as identified in REMSA policies, protocols, procedures, performance standards and EQIP
   iii. Training to support ALS IFT ambulance operations
      e. Driver’s Training/Safety
         i. All field personnel that operates emergency vehicles shall complete the following:
            1. Driver’s training that meets all of the components and requirements of CAAS accreditation.

7. Data Collection
   a. ALS IFT service providers shall comply with REMSA policy #7101 (CQI System) #7703 (REMSIS Authorization and Security).

   a. ALS IFT service provider ambulance permit will be concurrent with the Riverside County Ambulance permit cycle.
   b. ALS IFT service provider ambulance permit renewal shall be made within the Riverside County Ambulance permit renewal application process.
   c. All components set forth in the Riverside County Ambulance Ordinance 756 and its approval process shall apply to the ALS IFT service provider ambulance permit process.
d. Annual Evaluation – REMSA reserves the right to evaluate the performance of the ALS IFT service providers on an annual basis which may be done by a site visit, annual report submissions or any other methods deemed necessary by REMSA.

e. Ambulance service rates – ALS IFT service rates shall not be less than Centers for Medicare & Medicaid Services (CMS) allowable rates.

f. Observation and Inspections – REMSA may, at any time, and without notification, directly observe and/or inspect all aspects of the operations of the ALS IFT service providers.

g. ALS IFT service provider shall maintain current Commission on Accreditation of Ambulance Services (CAAS) in order to maintain the current status of ALS IFT service provider in Riverside County.

h. The REMSA medical director shall discontinue approval of ALS IFT service provider if that provider presents a threat to community health and safety.