DEPARTMENT OF HEALTH SERVICES
COUNTY OF LOS ANGELES

SUBJECT: EMERGENCY MEDICAL SERVICES COMMISSION
ORDINANCE NO. 12332 – CHAPTER 3.20 OF
THE LOS ANGELES COUNTY CODE

REFERENCE NO. 206

LOS ANGELES COUNTY CODE

LOS ANGELES COUNTY

EMERGENCY MEDICAL SERVICES COMMISSION

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APPROVED: [Signatures]
Director, EMS Agency
Medical Director, EMS Agency
EMERGENCY MEDICAL SERVICES COMMISSION

Sections:

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Note to Chapter 3.20.0

*For statutory provisions on county emergency medical care committees, see Health & Safety Code §1750 et seq. Editor’s note: Ordinance 12332, passed April 7, 1981, entirely amended the provision of Ord. 4099 Art. 107, the Emergency Medical Services Commission, with the effect of discontinuing six sections. Legislative history for the discontinue sections includes: 20505a Ords. 12023 § 3 (part), 1979; 12040 § 1 (part), 1979. 20509 to 20511 Ords. 11179 § 1 (part), 1975; 12023 § 3 (part), 12201 § 1 (part), 1980. 20512 Ords. 12023 § 3 (part), 1979; 12040 § 1 (part), 1979; 12201 § 1 (part), 1980.

Section 3.20.010 Continuation – Composition.

A. The Los Angeles County Emergency Medical Services Commission, which shall be referred to in this chapter as the “Commission”, is continued in accordance with California Health and Safety Code Sections 1751 and 1752.

B. The Commission shall have 19 positions. A member of the Commission shall be appointed to a vacant position by, and serve at the pleasure of, the Board of Supervisors, which shall be referred to in this chapter as the “Board”.

C. Each person who is a member of the Commission on the effective date of this amendment shall serve at the pleasure of the Board for the remainder of his or her term of four years (Ord. 2011-0062 § 1, 2011: Ord. 90-0086 § 12(a), 1990: Ord. 12332 § 1 (part), 1981: Ord. 12201 § 1 (part), 1980: Ord. 12040 § 1 (part), 1979: Ord. 12023 § 3 (part), 1979: Ord. 11179 § 1 (part), 1975: Ord. 4099 Art. 107 § 20501, 1942.)

Section 3.20.020 Length of service – Vacancy. The provisions of this section shall become applicable to a position on the Commission at the expiration of the term of the member occupying that position on the effective date of the amendment codified in this section.

A. Each member of the commission shall serve at the pleasure of the Board.

B. No member of the Commission may serve more than two consecutive full periods of service as specified in subsection A of this section. The Board may, by order, extend this length of service or waive this limit for individuals or the Commission as a whole.
C. A member’s position on the Commission shall become vacant upon his or her death, resignation, or removal by the Board. In the case of such a vacancy, the Board shall appoint a successor to serve until the position next becomes vacant under subsection A of this section.


Section 3.20.040 Composition. The Commission shall be composed as follows:

A. An emergency medical care physician in a paramedic base hospital nominated by the California Chapter of the American College of Emergency Physicians;

B. A cardiologist nominated by the American Heart Association, Western States Affiliate;

C. A mobile intensive care nurse nominated by the California Chapter of the Emergency Nurses Association;

D. A hospital administrator nominated by the Hospital Association of Southern California;

E. A representative of a public provider agency nominated by the Los Angeles Chapter of California Fire Chiefs Association;

F. A representative of a private provider agency nominated by the Los Angeles County Ambulance Association;

G. An trauma surgeon who practices in Los Angeles County at a designated trauma center nominated by the Southern California Chapter American College of Surgeons;

H. A psychiatrist nominated by the Southern California Psychiatric Society;

I. A physician nominated by the Los Angeles County Medical Association;

J. A licensed paramedic nominated by the State Firefighters Association, Emergency Medical Services Committee.

K. Five public members, one nominated by each member of the Board of Supervisors. No public member shall be a medical professional or affiliated with any of the other nominating agencies;

L. A law enforcement representative nominated initially by the California Highway Patrol. After the first term of office for this position is completed, the law enforcement representative shall be nominated by the Los Angeles County Peace Officers Association;
M. A city manager nominated by the League of California Cities, Los Angeles County Chapter;

N. A police chief nominated by the Los Angeles Police Chiefs' Association; and

O. A representative nominated by the Southern California Public Health Association.


Section 3.20.060 Chairperson. The chairperson shall be appointed by the Commission members in accordance with the Commission's rules and regulations. (Ord. 12332 § 1 (part), 1981: Ord. 12201 § 1 (part), 1980: Ord. 12040 § 1 (part), 1979: Ord. 12023 § 3 (Part), 1979: Ord. 4099 Art. 107 § 20505(a), 1942.)

Section 3.20.070 Functions and duties.

A. The Commission shall perform all of the functions of the emergency medical care committee as defined in Health and Safety Code Sections 1750, et seq., and shall have the following duties:

1. Act in an advisory capacity to the Board of Supervisors and the Director of Health Services regarding county policies programs, and standards for emergency medical care services throughout the county, including paramedic services;

2. Establish appropriate criteria for evaluation and to conduct continuous evaluation on the basis of these criteria of the impact and quality of emergency medical care services throughout the county;

3. Conduct studies of particular elements of the emergency medical care system as requested by the Board of Supervisors, the Director of Health Services or on its own initiative; to delineate problems and deficiencies and to recommend appropriate solutions;

4. Acquire and analyze the information necessary for measuring the impact and the quality of emergency medical care services;

5. Report its findings, conclusions, and recommendations to the Board of Supervisors at least every 12 months;

6. Review and comment on plans and proposals for emergency medical care services prepared by County departments;
7. Recommend, when the need arises, that the County engage independent contractors for the performance of specialized temporary or occasional services to the Commission which cannot be performed by members of the classified service, and for which the County otherwise has the authority to contract;

8. Advise the Department of Health services and its Director on the following matters;
   a. Policies, procedures, and standards to control the certification of mobile intensive care nurses and paramedics;
   b. Proposals of any public or private organization to initiate or modify a program of paramedic services or training;

9. To arbitrate differences in the field of paramedic services and training between all sectors of the community, including, but not limited to, county agencies, municipalities, public safety agencies, community colleges, hospitals, private companies, and physicians.

B. A decision of the Commission regarding a matter which the Commission hears under its arbitration function pursuant to subparagraph 9 herein above will be final and binding upon the parties who appeared before the commission on the matter unless the Board of Supervisors at any time promulgates policy which is inconsistent with such determination. The Commission shall refer to the Board of Supervisors and any other affected provider agency any such decision of the Commission which will either affect the budget of the county, or any other provider agency, for the paramedic program, or operate to change an existing county-approved policy. Such decision shall not become final and binding unless adopted by the Board of Supervisors. Additionally, any such decision of the Commission shall be advisory only if its implementation will affect any County paramedic program matter which the County Health Officer, the local Emergency Medical Services Agency, or Board of Supervisors has power to regulate pursuant to Health and Safety Code Sections 1480 and 1797.200. (Ord. 12332 § 1 (part), 1981: Ord. 12201 § 1 (part), 1980: Ord. 12040 § 1 (part), 1979: Ord. 12023 § 3 (part), 1979: Ord. 11909 § 1, 1979: Ord. 11179 § 1 (part), 1975: Ord. 4099 Art. 107 § 20505, 1942.)

Section 3.20.080 Self-government – Meetings. The Commission shall prepare and adopt rules and regulations for the internal government of its business and designating the time and place of holding its meetings, provided that such rules and regulations are not inconsistent with this or any other ordinance or statute. (Ord. 12332 § 1 (part), 1981: Ord. 12201 § 1 (part), 1980: Ord. 12040 § 1 (part), 1979: Ord. 12023 § 3 (Part), 1979: Ord. 11179 §1 (part), 1975: Ord. 4099 Art. 107 § 20507, 1942.)

Section 3.20.090 Staff. The Director of Health Services shall provide the staff for the Commission and subcommittees thereof. (Ord. 12332 § 1 (part), 1981: Ord. 12201 § 1 (part), 1980: Ord. 12040 § 1 (part), 1979: Ord. 12023 § 3 (part), 1979: Ord. 11179 §1 (part), 1975: Ord. 4099 Art. 107 § 20508, 1942.)

CROSS REFERENCES:
Prehospital Care Manual:
Ref. No. 201, Medical Management of Prehospital Care
Ref. No. 214, Base Hospital and Provider Agency Reporting Responsibilities
Ref. No. 310, Prehospital Care Coordinator
Ref. No. 411, Provider Agency Medical Director
Ref. No. 610, Retention of Prehospital Care Records
Ref. No. 620, EMS Quality Improvement Program (EQIP)
Ref. No. 620.1, EMS Quality Improvement Program (EQIP) Plan
Ref. No. 1013 EMS Continuing Education (CE) Provider Approval and Program Requirements