PURPOSE: To outline the criteria to be approved as a paramedic provider in Los Angeles County.

AUTHORITY: Health and Safety Code, Division 2.5, Sections 1797.52, 1797.94, 1797.178, 1797.180, 1797.201
California Code of Regulations, Title 22, Sections 100166, 100167, 100169, 100400 and 100402

PRINCIPLE:

I. Providers applying for paramedic provider status must complete the application process in its entirety, including written approval from the EMS Agency prior to commencing operations.

POLICY:

I. Eligibility Requirements

   A. In order to apply for paramedic provider status, a fire department must be authorized by the governing body of the jurisdiction to provide 9-1-1 emergency services.

   B. A private ambulance company must be licensed by the County of Los Angeles as a basic life support (BLS) provider for a minimum of twenty-four months prior to requesting approval for paramedic provider status.

   C. In addition to the requirements outlined in B above, the private ambulance company must not be in violation of any applicable provisions, standards, or requirements of state statute or regulation, or of the Los Angeles County code or local policies and procedures for a period of one year prior to applying for paramedic provider status. Each of the companies’ ambulance vehicles that operate within the County of Los Angeles shall be licensed by the County on a continuous basis.

II. Application Process

   A. The applicant shall submit a written request for approval of paramedic provider status to the Director of the Los Angeles County EMS Agency. The request shall include the following:

      1. The desired implementation date.
2. The number of advanced life support (ALS) units desired and the proposed location for each unit.

3. The preferred base hospital assignment, subject to EMS Agency approval.

4. Other information pertinent to the proposed paramedic program, e.g., number of personnel licensed and accredited as paramedics, the number of personnel requiring paramedic training, and the name and contact information for the EMS educator, paramedic coordinator and nurse educator, if applicable.

5. The name and contact information for the Provider Agency Medical Director, or Drug Authorizing Physician, under whose license the provider agency will procure equipment, pharmaceuticals (both scheduled and non-scheduled), and medical devices.

B. Provider Agency Responsibilities

1. Provide emergency medical service response on a continuous 24-hour per day basis unless otherwise approved by the EMS Agency. Approved ALS providers may submit a written request, including justification, to the EMS Agency for consideration to waive the 24-hours/day requirement. Waivers will be granted on a case-by-case basis.

Submit to the EMS Agency a complete packet within 30 (thirty) days of receipt of letter and application packet from the EMS Agency acknowledging the request for approval. If a complete application packet is not received within the 30-day period, the request is denied, and a subsequent request for approval will not be accepted for a 90 (ninety) day period.

A complete packet includes the following:


b. Description of the communications equipment that will be used.

c. A controlled substance policy that outlines how scheduled pharmaceuticals will be procured, stored, secured, and distributed. The policy shall include the procedure for handling any lost, broken, or tampered scheduled pharmaceuticals.

d. Signed and dated copies of Ref. No. 701.1, Physician Confirmation of Agreement to Purchase Drugs and Medical Supplies, and 702.1, Provider Agency Medical Director Notification of Controlled Substance Program Implementation.

e. A supply/resupply policy outlining the method for purchasing and storing non-scheduled pharmaceuticals and medical devices.
f. A plan ensuring that all personnel involved in the ALS program are oriented to the base hospital’s operation.

g. A policy/procedure to ensure that all ALS units and paramedic personnel are visibly identified as such.

h. A list of all the ALS, Assessment and Reserve units, numerical unit designation, physical address, and contact number for the location of each unit.

3. Utilize and maintain communications as specified by the EMS Agency.

4. Arrange for a base hospital orientation. (This may be facilitated in conjunction with the EMS Agency.)

5. Procure and maintain equipment, supplies, and pharmaceuticals for each ALS, Assessment, and Reserve unit(s) as outlined in the applicable policies. Each ALS, Assessment, and Reserve unit shall undergo a unit inventory inspection and be approved by the EMS Agency prior to deployment.

6. Ensure that all deployed unit(s) ALS, Assessment, and Reserve are fully stocked at all times.

7. Private providers shall maintain a written agreement with the Los Angeles County EMS Agency to participate in the ALS program. This agreement shall be reviewed every two years and may be changed, renewed, canceled, or otherwise modified as necessary.

8. Appoint a Paramedic Coordinator to act as the liaison with the EMS Agency and the assigned base hospital.

9. Ensure that the paramedic coordinator attends EMS Agency Orientation within six (6) months of being appointed. EMS Agency Orientation dates are prescheduled and held on a quarterly basis).

10. Staff each approved ALS unit with a minimum of two licensed and locally accredited paramedics in accordance with Ref. No. 408, Advanced Life Support Unit Staffing.

11. A public provider will only be considered for approval for the assessment unit configuration if a paramedic program consisting of a two-paramedic ALS unit response configuration is in place. The provider shall comply with Reference No. 416, Assessment Unit.

C. EMS Agency Responsibilities:

1. Acknowledge the applicant’s request in writing and furnish a generic copy of the applicable EMT-Paramedic Service Provider Agreement or Medical Control Agreement. A finalized agreement will be mailed under separate
cover for execution. A fully executed agreement must be in place prior to program implementation.

2. Approve or reject the request for paramedic provider status approval based on the EMS Agency's review of the documents submitted by the applicant as outlined in "Provider Agency Responsibilities".

3. Coordinate initial EMS Patient Care Record (PCR) training with the paramedic coordinator or their designee.

4. Periodically perform surveys and reviews, including field observation, to ensure compliance with state law and regulations, local policies, and if applicable, the EMT-Paramedic Service Provider Agreement.

5. Deny, suspend, or revoke the approval of a paramedic provider for failure to comply with applicable policies, procedures, and regulations.

6. Conduct ALS, Assessment, and Reserve unit inventory inspections prior to approving ALS, Assessment, and Reserve units for deployment.

III. Program Updates/Modifications:

A. Provider agencies may request to place additional ALS, Assessment, and Reserve units into service and shall notify the EMS Agency for inventory inspection and approval. Requests and inventory inspections shall be done prior to deployment.

B. Provider agencies shall notify the EMS Agency for any long-term relocation of existing ALS units or reduction in the number of ALS units.

C. Private provider agencies that have been operational as an ALS provider for at least one year may request approval from the EMS Agency to implement the 1:1 staffing configuration (one EMT/one paramedic) for interfacility transports. In order to be considered for the 1:1 staffing configuration, the provider agency must successfully complete a six-month probationary period for their ALS program and pass an ALS site review conducted by the EMS Agency. The 1:1 staffing configuration is contingent on meeting all the specific program requirements and EMS Agency approval.

D. Provider agencies desiring to change unit configurations shall notify the EMS Agency for inventory inspection and approval.

CROSS REFERENCES:

Prehospital Care Manual:
Ref. No. 214, Base Hospital and Provider Agency Reporting Responsibilities
Ref. No. 408, Advanced Life Support (ALS) Unit Staffing
Ref. No. 409, Reporting ALS Unit Staffing Exceptions
Ref. No. 411, Provider Agency Medical Director
Ref. No. 620, EMS Quality Improvement Program
Ref. No. 701, Supply and Resupply of Designated EMS Provider Units/Vehicles
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<thead>
<tr>
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Los Angeles County Code, Title 7. Business Licenses, Chapter 7.16, Ambulances