

DEPARTMENT OF HEALTH SERVICES  
COUNTY OF LOS ANGELES

SUBJECT: **SPECIALTY CARE TRANSPORT PROVIDER**

REFERENCE NO. 414

PURPOSE: To define the criteria to be approved as a Registered Nurse/Respiratory Specialty Care Transport (SCT) Provider in Los Angeles County.

AUTHORITY: Health and Safety Code, Division 2.5, Sections 1797.52, 1797.178, 1798.170  
Business and Professions Code, Section 3700  
Emergency Medical Treatment and Labor Act of 2006  
Los Angeles County Code, Title 7. Chapter 7.16. Ambulances  
Los Angeles County Code, Title 7 Chapter 7.08. Denial or Revocation Conditions

DEFINITIONS:

**Advanced Life Support (ALS) Transport:** A ground or air ambulance transport of a patient who requires or may require skills or treatment modalities that do not exceed the paramedic scope of practice. An ALS transport may be required for either a non-emergency or emergency transport.

**Basic Life Support (BLS) Transport:** A ground or air ambulance transport of a patient who requires skills or treatment modalities that do not exceed the Los Angeles County EMT scope of practice. A BLS transport may be sufficient to meet the needs of the patient requiring either non-emergency or emergency transport.

**Registered Nurse-Staffed SCT (RN-SCT):** A ground or air ambulance interfacility transport of a patient who may require skills or treatment modalities that exceed the paramedic scope of practice, but do not exceed the RN scope of practice. A nurse-staffed SCT may be required for either a non-emergency or emergency interfacility transport.

**Respiratory Care Practitioner Staffed SCT (RCP-SCT):** A ground or air ambulance interfacility transport of a patient who requires the skills or treatment modalities that exceed the Los Angeles County EMT scope of practice but does not exceed the RCP scope of practice. A RCP-staffed SCT may be required for either a non-emergency or emergency interfacility transport.

**Specialty Care Transport (SCT):** An interfacility transport of a critically injured or ill patient by a ground vehicle, including the provision of the medically necessary supplies and services, at a level of service beyond the scope of practice of the paramedic.

PRINCIPLES:

1. A private ambulance provider must be licensed by the County of Los Angeles as a basic life support (BLS) provider in order to be eligible for approval as a SCT provider.

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SUPERSEDES: 07-01-18

APPROVED:

  
Director, EMS Agency

  
Medical Director, EMS Agency

2. A BLS private ambulance provider must be approved by the EMS Agency to employ registered nurses (RNs) and/or respiratory care practitioners (RCPs) to staff and provide interfacility SCTs.
3. Staffing a SCT vehicle/unit consists of a minimum of one RN and/or RCP and two EMTs. Physicians, RNs, RCPs, perfusionists, or other personnel may be added to the SCT team as needed.
4. RCPs may be utilized to perform duties commensurate with their scope of practice; however, additional transport personnel (EMTs, RNs, physicians, or paramedics) must accompany the RCP based on the level of acuity and anticipated patient care requirements.
5. This policy does not apply when RNs and/or RCPs employed by a healthcare facility are utilized by an ALS or BLS provider agency to provide interfacility patient transport (i.e., emergent situations, specialized transport teams, etc.).
6. Any violation of this policy or ordinance could result in a program request denial or the cancellation of a provider's SCT program.

**POLICY:**

**I. Eligibility Requirements**

A BLS ambulance provider licensed by Los Angeles County may be approved to utilize RNs and/or RCPs to provide interfacility transports if the eligibility requirements outlined in this policy are met.

**A. Transport Medical Director**

1. Provider shall have a medical director who is currently licensed as a physician in the State of California, qualified by training and/or experience, current practice in acute critical care medicine and board certified or eligible by the American Board of Emergency Medicine or in their corresponding specialty.
2. The Medical Director or designee of the EMS Agency must approve all Transport Medical Director Candidates.
3. The Transport Medical Director shall:
  - a. Sign and approve, in advance, all medical protocols and SCT policies and procedures.
  - b. Oversee the ongoing training of all SCT medical personnel.
  - c. Be familiar with the Emergency Medical Treatment and Active Labor Act (EMTALA) and the Health Insurance Portability and Accountability Act of 1996 (HIPAA) requirements.
  - d. Attend the EMS Orientation Program within six months of

employment as a Transport Medical Director.

- e. Participate in the development, implementation, and ongoing evaluation of a quality improvement (QI) program.
- f. Sign and submit Ref. No. 701.1, Provider Agency Drug Authorizing Physician Confirmation of Agreement to Purchase Drugs and Medical Supplies for the SCT provider.
- g. Sign and submit Ref. No. 702.4, Provider Agency Medical Director Notification of Controlled Substance Program Implementation for the SCT provider (if applicable).

**B. Transport Coordinator**

- 1. **RN Coordinator:** Providers utilizing RNs to staff SCTs shall have a Coordinator who is currently licensed in the State of California as a RN, meets all minimum requirements of a transport RN, has a minimum of one year experience in ambulance transports, and current practice in emergency medicine, critical care nursing or specialty care transports (minimum of 96 working hours annually).
- 2. **RCP Coordinator:** Providers utilizing RCPs to staff SCTs shall have a RCP Coordinator who is currently licensed in the State of California as a RCP, meets all minimum requirements of a transport RCP, has a minimum of one year experience in ambulance transports, and current practice in acute respiratory care or specialty care transports (minimum of 96 working hours annually).

The RN Coordinator may function as the RCP Coordinator; however, the RCP Coordinator may NOT function as the RN Coordinator.

- 3. The Transport Coordinator shall:
  - a. Sign and approve, in advance, all policies and procedures to be followed for SCTs.
  - b. Maintain documentation indicating that all SCT personnel have been oriented to the RN/RCP-staffed SCT program.
  - c. Maintain documentation of all applicable licensure, certification and/or accreditation requirements for all SCT personnel.
  - d. Be familiar with EMTALA and HIPAA.
  - e. Ensure the development, implementation and ongoing evaluation of a QI program in collaboration with the Transport Medical Director.
  - f. Attend the EMS Agency Orientation Program within six months of employment as Transport Coordinator.

- g. Perform annual skills competency evaluation of all medical personnel.
- h. Submit a written and signed affirmation of adherence to all federal, state, and local rules, regulations and laws, including Los Angeles County prehospital care policies and procedures as outlined in Title 7, Chapter 7.16, Ambulances.

C. Transport Personnel

- 1. Two EMTs comprise the BLS interfacility transport team; additional personnel (physicians, RNs, and/or RCPs) shall be added to the BLS team based on the acuity and anticipated needs of the patient during transport.

Staffing exceptions must be approved by the EMS Agency prior to utilization by the ambulance provider.

- 2. RNs, RCPs and EMTs shall:
  - a. Be currently licensed or certified for unrestricted practice in California.
  - b. Be currently certified by AHA or equivalent in healthcare provider level cardiopulmonary resuscitation (CPR).
  - c. Successfully complete a RN/RCP Staffed Interfacility SCT Program Orientation sponsored by the provider agency and approved by the EMS Agency.
  - d. Successfully complete an annual skills competency evaluation conducted by the provider agency and approved by the EMS Agency.
  - e. Be familiar with EMTALA and HIPAA.
  - f. Submit a written and signed affirmation of adherence to all federal, state, and local rules, regulations and laws, including Los Angeles County prehospital care policies and procedures as outlined in Title 7, Chapter 7.16, Ambulances.
- 3. In addition to the requirements listed in Section I. C. 2. all transport RNs shall:
  - a. Have a minimum of two years nursing experience in a critical care area relevant to the type of SCT transports the RN will provide (pediatric vs. adults), within the previous 24 months prior to employment as a transport nurse.
  - b. Be currently certified in Advanced Cardiac Life Support (ACLS)

and, if participating in pediatric transports, currently certified in Pediatric Advanced Life Support (PALS).

- c. For full-time transport nurses, complete a total of 30 continuing education (CE) contact hours approved by the California Board of Registered Nursing (BRN) annually, that are relevant to their clinical setting and types of transports performed.
  - d. For part-time (working less than 32 hours per week as a transport RN), complete 96 hours of documented critical care experience per year or complete a total of 30 CE contact hours approved by the California BRN annually, that are relevant to their clinical setting and type of transports performed.
  - e. Recommendation: Certified Emergency Nurse (CEN), Critical Care Registered Nurse (CCRN), Mobile Intensive Care Nurse (MICN), or Certified Flight Nurse (CFRN).
4. In addition to the requirements listed in Section I. C. 2., all transport RCPs shall:
- a. Have a minimum of two years respiratory care experience in an acute care or respiratory care hospital, relevant to the type of SCT transports the RCP will provide (pediatric vs. adults), within 18 months prior to employment as a transport RCP or have successfully passed the Adult Critical Care Specialty (ACCS) Examination and are in good standing with the National Board for Respiratory Care (NBRC).
  - b. Be current in ACLS and, if participating in pediatric transports, be current in PALS.
  - c. For full-time transport RCPs, complete 30 CE contact hours approved by the Respiratory Care Board of California annually, that are relevant to their clinical setting and type of transports performed.
  - d. For part time transport RCPs (working less than 32 hours per week as a transport RCP), complete 96 hours of documented critical care experience per year or complete a total of 30 CE contact hours approved by the Respiratory Care Board of California annually, that are relevant to their clinical setting and type of transports performed.
- D. Subcontracting SCT Services
1. If the licensed BLS provider intends to subcontract SCT services, the EMS Agency must be notified in advance for approval.
  2. The subcontracting company must submit program information through the licensed BLS provider to the EMS Agency for approval prior to

providing SCT services.

3. Subcontractors must meet the same standards/requirements as the ambulance provider, including insurance.

E. Insurance Requirements

1. It is the ambulance provider agency's responsibility to ensure insurance requirements are maintained as required by the Los Angeles County Code of Ordinance.
2. Minimum insurance levels must be maintained as outlined in Title 7, Chapter 7.16, Ambulances, with the exception of Professional Liability. Professional Liability limits must be maintained at \$2,000,000 per claim and \$3,000,000 per aggregate.

F. Policies and Procedures

Provider shall have a policy and procedure manual that includes, at a minimum, the following:

1. A description of the interfacility transport orientation program and process utilized to verify skill competency for registered nurses, EMTs, RCPs and, if applicable, other medical personnel.
2. Identify the Transport Medical Director, and RN and/or RCP Transport Coordinator. The EMS Agency shall be notified in writing of any changes in these key personnel utilizing Ref. No. 621.1, Notification of Personnel Changes.
3. Procedures for contacting the Transport Medical Director and SCT Coordinator if needed during a patient transport.
4. Interfacility transfer paperwork that complies with Title 22, Section 70749.
5. Record retention procedures which meets the requirements listed in Ref. No. 608, Retention and Disposition of Prehospital Patient Care Records.
6. The sending physician's Statement of Responsibility for the patient during transfer in accordance with EMTALA.
7. Procedures to be followed for changes in destination due to unforeseen changes in the patient's condition or other unexpected circumstances.
8. Current patient care protocols which have been approved by the Transport Medical Director.
9. A controlled drug policy which meets the requirements of Ref. No. 701, Supply and Resupply of Designated EMS Units/Vehicles and if applicable, Ref. No. 702, Controlled Drugs Carried on ALS Units.

G. Quality Improvement (QI) Program

1. The Provider Agency shall have a QI Program that meets the standards outlined in Ref. No. 618, EMS Quality Improvement Program Committees, and Ref. No. 620, EMS Quality Improvement Program.
2. Records of QI activities shall be maintained by the provider and available for review by the EMS Agency.

H. Required Equipment

1. Each transport vehicle shall include as minimum standard inventory all items required by Ref. No. 710, Basic Life Support Ambulance Equipment.
2. RN staffed SCT vehicles shall also be equipped with the standardized inventory specified in Ref. No. 712, Nurse Staffed Critical Care Inventory.
3. RCP staffed SCT vehicles shall also be equipped with the standardized inventory specified in Ref. No. 713, Respiratory Care Practitioner Staffed Critical Care Inventory.
4. In addition, each transport vehicle shall have equipment and supplies commensurate with the scope of practice of any additional transport medical personnel (e.g. balloon pump technicians, neonatal intensive care unit transport teams, etc.) staffing the SCT unit. This requirement may be fulfilled through the utilization of appropriate kits (cases/packs), which must be removed if the vehicle is being utilized for BLS transport purposes.
5. Biomedical equipment used for patient care must show evidence of ongoing maintenance and safety certification (e.g., service agreements, calibration logs, etc.).
6. If a dedicated ambulance (unit) is not being utilized strictly for SCT transports, and the provider is utilizing "jump bags" or its equivalent to store medical equipment and medication for the unit, the "jump bag" or its equivalent must be numbered/assigned a unique identifier. Additionally, that numbering must be marked on the individual bag(s).
7. Provider agencies may request to place additional SCT units (or jump bags) into service and shall notify the EMS Agency for inventory inspection and approval. Requests and inventory inspections shall be done prior to deployment.

II. Application Process and Program Review

Request for approval of a SCT program must be made in writing to the Director of the Los Angeles County EMS Agency and shall include the following:

- A. Specify the type of SCT services the provider will supply (RN-SCT, RCP-SCT or

both).

- B. Proposed identification and location of the SCT units.
- C. Procedures and protocols as outlined in Section I. F.
- D. Documentation of qualifications of the proposed Transport Medical Director (resumé/curriculum vitae, copy of medical license and applicable board certification).
- E. Documentation of qualifications of the proposed SCT Coordinator(s) (resumé(s) or curriculum vitae, copy of current license(s) and certifications).
- F. Copy of the current QI Plan (include specific indicators which will be utilized to monitor the SCT program) as outlined in Section I. G.
- G. Statement acknowledging agreement to comply with all policies and procedures of the EMS Agency, including immediate notification in writing of a change in Transport Medical Director, or SCT Coordinator (Ref. No. 621.1).
- H. The documents needed for approval of a SCT program are due to the EMS Agency as a **complete** packet within 30 (thirty) days of receipt of letter from the EMS Agency acknowledging the request for approval. If a complete packet (application) is not received within a 30 (thirty) day period, the request will be denied. A subsequent request for approval will not be accepted for 90 (ninety) days. This will result in the providers' inability to provide SCT services until approved by the EMS Agency.

### III. Program Review

- A. The EMS Agency shall perform periodic on-site audits of transport records, QI processes, equipment/vehicle inspections, and personnel qualifications to ensure compliance with this policy.
- B. Non-compliance with this policy may lead to the EMS Agency suspending or revoking approval of the SCT program.
- C. SCT programs that do not operate for a period of 6 consecutive months or greater, may result in program suspension or termination.

### CROSS REFERENCE:

#### Prehospital Care Manual:

- Ref. No. 414.41 **Verification of Employment Letter**
- Ref. No. 421 **Private Ambulance Operator Medical Director**
- Ref. No. 517, **Provider Agency Transport/Response Guidelines**
- Ref. No. 608, **Retention and Disposition of Prehospital Patient Care Records**
- Ref. No. 618, **EMS Quality Improvement Program Committees**
- Ref. No. 620, **EMS Quality Improvement Program**
- Ref. No. 701, **Supply and Resupply of Designated EMS Units/Vehicles**
- Ref. No. 702, **Controlled Drugs Carried on ALS Units**



Ref. No. 710, **Basic Life Support Ambulance Equipment**  
Ref. No. 712, **Nurse Staffed Critical Care Unit Inventory**  
Ref. No. 713, **Respiratory Care Practitioner (RCP) Critical Care Unit Inventory**  
Ref. No. 802, **Emergency Medical Technician (EMT) Scope of Practice**  
Ref. No. 803, **Los Angeles County Paramedic Scope of Practice**

Business and Professions Code:

**California Nursing Practice Act, Section 2725**

**California Respiratory Care Practice Act, Sections 3700 et al-3700**

**Centers for Medicare & Medicaid Services, Department of Health and Human Services**

**Title 22, California Code of Regulations Division 5, Section 70749**