



RESOLUTION NO.

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO

Ambulance Services Agreements for Critical Care Transport and Interfacility Transport

WHEREAS, County provides pre-hospital Advanced Life Support services and dispatch services under a public utility model to the residents of the El Dorado County; and

WHEREAS, County, through its Local Emergency Medical Services Agency (LEMSA) is responsible for the direct oversight of pre-hospital emergency and non-emergency medical care in El Dorado County; and

WHEREAS, County is the sole provider of these services under a public utility model, which includes the provision of Advanced Life Support service for routine Inter-Facility Transport (IFT) and Critical Care Transport (CCT) services; and

WHEREAS, on February 26, 2013, the County Board of Supervisors approved the County Emergency Medical Service and Medical Transportation Ordinance No. 4991¹ (Ordinance No. 4991) that established exclusive operating areas, standards and requirements for emergency and non-emergency medical services including personnel and training, equipment and supplies, response times, communications and medical transportation in accordance with Health and Safety Code Section 1797.200 et seq.; and

WHEREAS, under Ambulance Ordinance 4991, the County Board of Supervisors also established County Service Area No. 3 – West Shore as a non-exclusive area for all services, County Service Area No. 7 as a non-exclusive area for non-emergency Ambulance transports and Ambulance Interfacility Transports that originate in the County and terminate outside the County, and all areas in the County as non-exclusive for Air Ambulance and Rescue Aircraft services including Air Ambulance Interfacility Transports and Critical Care Transports; and

WHEREAS, County requires that Advanced Life Support service for routine IFT and CCT shall be performed in a manner that meets or exceeds the minimum acceptable standards as established by Health and Safety Code, Division 2.5; California Code of Regulations, Title 22, Division 9; the California Emergency Medical Services Authority; Ordinance No. 4991 and the Medical Control within the County of El Dorado, all incorporated by reference as if fully set forth herein; and

WHEREAS, County has established an application and permitting process for entities located outside the County and utilizing EMS personnel to provide IFT and CCT “as needed” ambulance transportation services at the Advanced Life Support (ALS) level; and

WHEREAS, County has determined that entities located outside the County utilizing EMS personnel to provide IFT and CCT may do so after successfully completing the application and permitting process and entering into an agreement with the County for ALS level of services in areas of the County in which market rights are not exclusively assigned; and

¹ http://www.edcgov.us/Government/EMS/Ambulance_Ordinance.aspx

WHEREAS, the Health and Human Services Agency, working with County Counsel and Risk Management, has developed an IFT/CCT Permit Application/Agreement Template, attached hereto as Exhibit A. The template is specific to services provided by a Permittee utilizing EMS personnel for the purpose of IFT/CCT including all necessary equipment and supplies to provide services at an ALS level under the medical control of the Permittee’s local jurisdiction.

NOW, THEREFORE, BE IT RESOLVED THAT the Board of Supervisors of the County of El Dorado hereby authorizes the Director of the Health and Human Services Agency, or designee, to execute future agreements using the attached “IFT/CCT Permit Application/Agreement Template” for the purpose of routine Inter-facility Transport and Critical Care Transport services, and further authorizes the Director of the Health and Human Services Agency, or designee, to perform any and all administrative responsibilities in relationship to said Agreement.

PASSED AND ADOPTED by the Board of Supervisors of the County of El Dorado at a regular meeting of said Board, held the 28th day of March, 2017, by the following vote of said Board:

Attest:
James S. Mitrisin
Clerk of the Board of Supervisors

Ayes:
Noes:
Absent:

By: _____
Deputy Clerk

Shiva Frentzen, Chair, Board of Supervisors