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**HEALTH AND SAFETY CODE - HSC**

**DIVISION 2.5. EMERGENCY MEDICAL SERVICES [1797 - 1863]** ( *Division 2.5 added by Stats. 1980, Ch. 1260.*  )

**CHAPTER 4. Local Administration [1797.200 - 1797.276]** ( *Chapter 4 added by Stats. 1980, Ch. 1260.*  )

**ARTICLE 3. Emergency Medical Care Committee [1797.270 - 1797.276]** ( *Article 3 added by Stats. 1983, Ch. 1246, Sec. 35.*  )

**1797.270.** An emergency medical care committee may be established in each county in this state. Nothing in this division should be construed to prevent two or more adjacent counties from establishing a single committee for review of emergency medical care in these counties.

(Amended by Stats. 1993, Ch. 64, Sec. 7. Effective June 30, 1993.)

**1797.272.** The county board of supervisors shall prescribe the membership, and appoint the members, of the emergency medical care committee. If two or more adjacent counties establish a single committee, the county boards of supervisors shall jointly prescribe the membership, and appoint the members of the committee.

(Added by Stats. 1983, Ch. 1246, Sec. 35.)

**1797.273.** (a) Notwithstanding Sections 1797.270 and 1797.272, if a local EMS agency within the county elects to develop a community paramedicine or triage to alternate destination program pursuant to Section 1840, the county board of supervisors, or in the case of a city and county, the mayor, shall establish an emergency medical care committee to advise the local EMS agency on the development of the program and other matters relating to emergency medical services. Where a committee is already established for the purposes described in this article, the county board of supervisors or the mayor, as appropriate, shall ensure that the membership meets or exceeds the requirements of subdivision (b).

(b) The board of supervisors or the mayor shall ensure that the membership of the committee includes all of the following members to advise the local EMS agency on the development of the community paramedicine or triage to alternate destination program:

(1) One emergency medicine physician and surgeon who is board certified or board eligible practicing at an emergency department within the jurisdiction of the local EMS agency.

(2) One registered nurse practicing within the jurisdiction of the local EMS agency.

(3) One licensed paramedic practicing within the jurisdiction of the local EMS agency. Whenever possible, the paramedic shall be employed by a public agency.

(4) One acute care hospital representative with an emergency department that operates within the jurisdiction of the local EMS agency.

(5) Additional advisory members in the fields of public health, social work, hospice, substance use disorder detoxification and recovery, or mental health practicing within the jurisdiction of the local EMS agency with expertise commensurate with the program specialty or specialties described in Sections 1815 and 1819 that the local EMS agency proposes to adopt.

(c) The requirements of this section shall apply to any emergency medical care committee established pursuant to this section or Section 1797.270.

(d) This section shall remain in effect only until January 1, 2031, and as of that date is repealed.

(Amended by Stats. 2023, Ch. 270, Sec. 1. (AB 767) Effective January 1, 2024. Repealed as of January 1, 2031, by its own provisions.)

**1797.274.** The emergency medical care committee shall, at least annually, review the operations of each of the following:

(a) Ambulance services operating within the county.

(b) Emergency medical care offered within the county, including programs for training large numbers of people in cardiopulmonary resuscitation and lifesaving first aid techniques.

(c) First aid practices in the county.

*(Added by Stats. 1983, Ch. 1246, Sec. 35.)*

**1797.276.** Every emergency medical care committee shall, at least annually, report to the authority, and the local EMS agency its observations and recommendations relative to its review of the ambulance services, emergency medical care, and first aid practices, and programs for training people in cardiopulmonary resuscitation and lifesaving first aid techniques, and public participation in such programs in that county. The emergency medical care committee shall submit its observations and recommendations to the county board or boards of supervisors which it serves and shall act in an advisory capacity to the county board or boards of supervisors which it serves, and to the local EMS agency, on all matters relating to emergency medical services as directed by the board or boards of supervisors.

*(Amended by Stats. 1988, Ch. 260, Sec. 5.)*