California Code Of Regulations
|->
Title 22@ Social Security
|->
Division 9@ Prehospital Emergency Medical Services
|->
Chapter 3.3@ Emergency Medical Technician-Paramedic
|->
Section 100096.02@ Paramedic Base Hospital

100096.02 Paramedic Base Hospital

(a)

A LEMSA with an ALS system shall designate a paramedic base hospital(s) or alternative base station, pursuant to Health and Safety Code Section 1798.105 if no qualified base hospital is available to provide medical direction, to provide medical direction and supervision of paramedic personnel.

(b)

A designated paramedic base hospital shall be responsible for the provisions of subsections (b)(1) through (b)(13) of this section, and alternate base stations shall be responsible for the provisions of subsections (b)(4) through (b)(13) of this section. (1) Be licensed by the California Department of Public Health as a general acute care hospital, or, for an out of state general acute care hospital, meet the relevant requirements for that license and the requirements of this section where applicable, as determined by the LEMSA which is utilizing the hospital in the local EMS system. (2) Be accredited by a Centers for Medicare and Medicaid Services approved deeming authority. (3) Have a special permit for basic or comprehensive emergency medical service pursuant to the provisions of Division 5, or have been granted approval by the Authority for utilization as a base hospital pursuant to the provisions of Section 1798.101 of the Health and Safety Code. Hospitals meeting requirements in this section shall be referenced in the EMS Plan of the approving LEMSA. (4) Have and agree to utilize and maintain

two-way telecommunications equipment, as specified by the LEMSA, capable of direct two-way voice communication with the paramedic field units assigned to the hospital. (5) Both parties shall maintain a record of all online medical direction between the service provider and base hospital or alternative base station as specified by LEMSA policy. (6) Have a written agreement, which is reviewed every three (3) years, with the LEMSA indicating the concurrence of hospital administration, medical staff, and emergency department staff to meet the requirements for program participation as specified in this Chapter and by the local LEMSA's policies and procedures. (7) Have a physician licensed in the State of California, experienced in emergency medical care, assigned to the emergency department, available at all times to provide immediate medical direction to the MICN or paramedic personnel. This physician shall have experience in and knowledge of base hospital radio operations and LEMSA policies, procedures, and protocols. (8) Assure that nurses giving medical direction to paramedic personnel are trained and authorized as MICNs by the medical director of the LEMSA. (9) Designate a paramedic base hospital medical director who shall be a physician on the hospital staff, licensed in the State of California who is certified or prepared for certification by the American Board of Emergency Medicine. The requirement of board certification or prepared for certification may be waived by the medical director of the LEMSA when the medical director determines that an individual with these qualifications is not available. The base hospital medical director shall be regularly assigned to the emergency department, have experience in and knowledge of base hospital radio operations and LEMSA policies and procedures, and shall be responsible for functions of the base hospital including the EMSQIP. (10) Identify a base hospital coordinator who is a currently licensed in California registered nurse with experience in and knowledge of base hospital operations

and LEMSA policies and procedures. The base hospital coordinator shall serve as a liaison to the local EMS system. (11) Ensure that a mechanism exists for prehospital providers to contract for the provision of medications, medical supplies and equipment used by paramedics according to policies and procedures established by the LEMSA. (12) Provide for CE in accordance with the policies and procedures of the LEMSA. (13) Agree to participate in the LEMSA's EMSQIP which may include making available all relevant records for program monitoring and evaluation.

(1)

Be licensed by the California Department of Public Health as a general acute care hospital, or, for an out of state general acute care hospital, meet the relevant requirements for that license and the requirements of this section where applicable, as determined by the LEMSA which is utilizing the hospital in the local EMS system.

(2)

Be accredited by a Centers for Medicare and Medicaid Services approved deeming authority.

(3)

Have a special permit for basic or comprehensive emergency medical service pursuant to the provisions of Division 5, or have been granted approval by the Authority for utilization as a base hospital pursuant to the provisions of Section 1798.101 of the Health and Safety Code. Hospitals meeting requirements in this section shall be referenced in the EMS Plan of the approving LEMSA.

(4)

Have and agree to utilize and maintain two-way telecommunications equipment, as specified by the LEMSA, capable of direct two-way voice communication with the paramedic field units assigned to the hospital.

Both parties shall maintain a record of all online medical direction between the service provider and base hospital or alternative base station as specified by LEMSA policy.

(6)

Have a written agreement, which is reviewed every three (3) years, with the LEMSA indicating the concurrence of hospital administration, medical staff, and emergency department staff to meet the requirements for program participation as specified in this Chapter and by the local LEMSA's policies and procedures.

(7)

Have a physician licensed in the State of California, experienced in emergency medical care, assigned to the emergency department, available at all times to provide immediate medical direction to the MICN or paramedic personnel. This physician shall have experience in and knowledge of base hospital radio operations and LEMSA policies, procedures, and protocols.

(8)

Assure that nurses giving medical direction to paramedic personnel are trained and authorized as MICNs by the medical director of the LEMSA.

(9)

Designate a paramedic base hospital medical director who shall be a physician on the hospital staff, licensed in the State of California who is certified or prepared for certification by the American Board of Emergency Medicine. The requirement of board certification or prepared for certification may be waived by the medical director of the LEMSA when the medical director determines that an individual with these qualifications is not available. The base hospital medical director shall be regularly assigned to the emergency department, have experience in and knowledge of base hospital radio operations and LEMSA policies and procedures, and shall be responsible

for functions of the base hospital including the EMSQIP.

(10)

Identify a base hospital coordinator who is a currently licensed in California registered nurse with experience in and knowledge of base hospital operations and LEMSA policies and procedures. The base hospital coordinator shall serve as a liaison to the local EMS system.

(11)

Ensure that a mechanism exists for prehospital providers to contract for the provision of medications, medical supplies and equipment used by paramedics according to policies and procedures established by the LEMSA.

(12)

Provide for CE in accordance with the policies and procedures of the LEMSA.

(13)

Agree to participate in the LEMSA's EMSQIP which may include making available all relevant records for program monitoring and evaluation.

(c)

The LEMSA may deny, suspend, or revoke the approval of a base hospital or alternative base station for failure to comply with any applicable policies, procedures, and regulations.