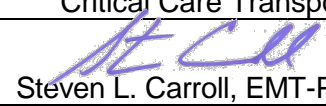



COUNTY OF VENTURA EMERGENCY  
MEDICAL SERVICES

HEALTH CARE AGENCY  
POLICIES AND PROCEDURES

Policy Title: Critical Care Transports		Policy Number: 507
APPROVED: Administration:	 Steven L. Carroll, EMT-P	Date: December 1, 2014
APPROVED: Medical Director	 Angelo Salvucci, M.D.	Date: December 1, 2014
Origination Date:	October 31, 1995	
Date Revised:	October 9, 2014	Effective Date: December 1, 2014
Date Last Reviewed:	October 9, 2014	
Review Date:	October, 2017	

- I. PURPOSE: To establish requirements for nurse-staffed ALS Units
- II. AUTHORITY: Health and Safety Code 1798.170.
- III. POLICY: An ALS Ambulance Company may be approved to employ or contract with Registered Nurses to staff ALS inter-facility transports providing the company adhere to the outlined conditions. This policy applies to interfacility ground transports only.
- IV. PROCEDURE:
  - A. Vehicle Staffing Requirements
    - 1. One registered nurse, currently licensed to practice in the State of California, shall be added to the BLS or ALS Support team, and shall meet the following requirements:
      - a. RN with a minimum of two (2) years experience in a critical care area within the previous three (3) years, prior to employment with the ambulance provider.
      - b. Current BLS and ACLS certification from the American Heart Association.
      - c. Successful completion of an in-house orientation program sponsored by the provider agency.
      - d. For pediatric CCT's only: Pediatric Advanced Life Support (PALS), Pediatric Education for Prehospital Providers (PEPP) or Emergency Nurses Pediatric Course (ENPC).
      - e. Certification in any one of the following: Certified Emergency Nurse (CEN); Critical Care Registered Nurse (CCRN); Mobile Intensive Care Nurse (MICN); Certified Flight Registered Nurse (CFRN), Certified Nurse Anesthetist; Post Anesthesia Recovery Nurse (PAR), Certified Transport Registered Nurse

(CTRN); may challenge/pass Ventura County MICN certification exam.

2. To maintain authorization as a CCT nurse, s/he will:
    - a. Work a minimum of 384 hours in a critical care area (including time worked as a CCT RN) per year, unless employed full time as a critical care transfer nurse.
    - b. Maintain current ACLS certification.
    - c. For pediatric CCT's only: PALS, PEPP or ENPC.
  3. Nurses used to provide ALS in accordance with this policy, may be employed by the ambulance provider or be sub-contracted, at the provider's option.
  4. Ambulance providers shall provide an internal orientation to all personnel participating in nurse-staffed ambulance transports.
- B. Equipment:
1. In addition of the items required by California Administrative Code, Title 13, the ambulance provider shall provide, at a minimum, the following equipment for nurse-staffed ALS units:
    - a. Paramedic Support Vehicle (PSV) equipment List
    - b. Manual defibrillator with external pacemaker
    - c. Infusion pump(s)
    - d. Back-up power source
    - e. Pulse oximeter
- C. Medical Direction: An agency providing CCTs shall have:
1. Medical protocols to be followed by the RN at the ALS level which have been approved and signed by a Physician, and
  2. Either a
    - a. Physician Director  
Provider shall have either full or part-time Physician Director qualified by training and/or experience and recent practice in emergency or acute critical care medicine. The candidate for Physician Director must be approved by the Medical Director. The Physician Director shall:
      - 1) Ensure the ongoing training of all medical personnel involved.

- 2) Ensure the quality of patient transfers being conducted by the provider by conducting patient care audits.
    - 3) Be familiar with applicable patient transfer laws, or
  - b. Nursing Coordinator  
Provider shall have either full or part-time RN employed as Nursing Coordinator qualified by training and/or experience and recent practice in emergency or acute critical care nursing. The Nursing Coordinator shall:
    - 1) Provide ongoing training of all medical personnel involved.
    - 2) Ensure quality of patient transfers being conducted by the provider by conducting patient care audits.
    - 3) Be familiar with applicable patient transfer laws
3. Procedures/Protocols
  - a. Each company providing nurse-staffed ALS units shall develop and maintain procedures for the hiring and training of nursing personnel and vehicle staffing.
  - b. Each provider must develop a manual clearly displaying:
    1. Malpractice insurance coverage.
    2. Identify and accessibility of the Physician Director and Nursing Coordinator.
    3. Vehicle inventory lists
    4. Copies of all related interfacility transfer paperwork
    5. Statement of responsibility of the sending physician for the patient during transfer and in accordance with COBRA and SB317 laws.
    6. Guidelines for change in patient destination due to patient condition
    7. Protocols (Standing Orders) based on ACLS, PALS/PEPP, or NALS guidelines.
  - c. Procedures and protocols shall be subject to review by the VC EMS.
4. CQI
  - a. The Physician Director and/or Nursing Coordinator shall be responsible for performing quality assurance outcome audits.

- b. Patient transport record review shall be performed at least quarterly and involve the use of pre-established criteria.
- c. All transports resulting in adverse patient outcome shall be reviewed and reported to the VC EMS Agency per Policy 150.
- d. Periodic staff conferences on audit and outcomes are required in order to improve or revise protocols.
- e. Records of all these activities shall be kept by the provider and be made available for inspection and audit by VC EMS.
- f. Report (quarterly) to VC EMS. Reports are to include general statistics (number of runs, types of runs, outcomes, intubation statistics, incidents during which paramedic assistance at ALS level is required).

5. Program Approval

Requests for approval must be made in writing sixty (60) days prior to anticipate service starting date, to the administrator of VC EMS, and must include:

- a. Proposed identification and location of the nurse-staffed unit.
- b. Procedures and protocols
- c. Documentation of qualifications of the proposed Physician Director (if applicable).
- d. Documentation of qualifications for the proposed Nursing Coordinator.
- e. Preliminary plan for quality assurance audits.
- f. Agreement to comply with all policies and procedures of VC EMS.

VC EMS shall notify the applicant in writing within ten (10) working days of lack of documentation. The applicant shall be notified in writing within thirty (30) days of receipt of complete package of approval or denial of the program.

6 Program Review

- a. VCEMS may perform periodic on-site audits of records to ensure compliance with this policy.
- b. Non-compliance with this policy may cause VC EMS to suspend or revoke approval to provide nurse-staffed ALS inter-facility transports.