



Multi-jurisdictional Air Service Provider

DEFINITIONS:

1. **Classifying EMS Agency:** “Classifying EMS Agency” or classifying agency” means the agency which categorizes the EMS aircraft into the group identified in CCR Section 100300(c) (3). This shall be the primary EMS agency in the jurisdiction of origin except for aircraft operated by the California Highway patrol, the California Department of Forestry or the California National Guard which shall be classified by EMS Authority. In the case of Multi-jurisdictional Air Providers, the classifying EMS agency shall be the primary EMS agency.
2. **Jurisdiction of Origin.** “Jurisdiction of origin” means the local EMS jurisdiction within which the authorized air ambulance or rescue aircraft is operationally based.
3. **Designated Dispatch Center.** “Designated dispatch center” means an agency which has been designated by the authorizing EMS agency for the purpose of coordinating air ambulance or rescue aircraft response to the scene of a medical emergency within the jurisdiction of the authorizing EMS agency.

GENERAL PROVISIONS:

The classifying EMS agency:

H&S Code 1797.202

(b) The medical director of the local EMS agency may appoint one or more physicians and surgeons as assistant medical directors to assist the medical director with the discharge of the duties of medical director or to assume those duties during any time that the medical director is unable to carry out those duties as the medical director deems necessary.

Note: The Classifying Agency would be responsible for establishing and maintaining an interagency agreement with each of its air service provider agency's Authorizing Agency.

- a. Establishes and maintains the following
 - Medical control
 - (1) Medical flight crew accreditation and authorization.
 - (2) Paramedic flight crew member scope of practice (may include expanded scope).
 - (3) Review and approve medical protocols & standardized procedures.

Note: The medical directors from the air transport provider agency, classifying agency, and authorizing agencies shall collaborate and come to agreement on all aspects of medical control. If at any point in time an agency determines a change is needed in any aspect of medical control policies, procedures or protocols, revisions shall be agreed upon by all agency medical directors.

- Standard drug and equipment list
- QI Plan approval
- Approve data collection process

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- Primary coordination of incident review
 - b. Collaborates through interagency agreements with authorizing EMS agencies to establish the following:
 - QI process
 - Data collection process
 - Incident review process
 - Ensure review of medical protocols & standardized procedures (reference H&S 1797.202)
 - EMS aircraft provider site visit and inspection
 - c. May charge the appropriate fees to cover costs associated with the responsibilities of the Classifying EMS Agency as set forth in Title 22, Chapter 8, § 100300(7)

The local EMS agency may charge a fee to cover the costs directly associated with the classification and authorization of EMS aircraft.

The authorizing EMS agency:

- a. May designate dispatch center(s) within it's jurisdiction to coordinate requests for EMS aircraft
- b. Establishes the destination policy for patient transports originating from or within the authorizing EMS agency's jurisdiction
- c. Receives or ability to access data in universal format
- d. Collaborates with classifying EMS agency through an interagency agreement(s) to establish the following for multi-jurisdictional air service provider(s):
 - QI process
 - Data collection process
 - Incident review process
 - Ensure review of medical protocols & standardized procedures (reference H&S 1797.202)
 - EMS aircraft provider site visit and inspection.

The multi-jurisdictional air service provider:

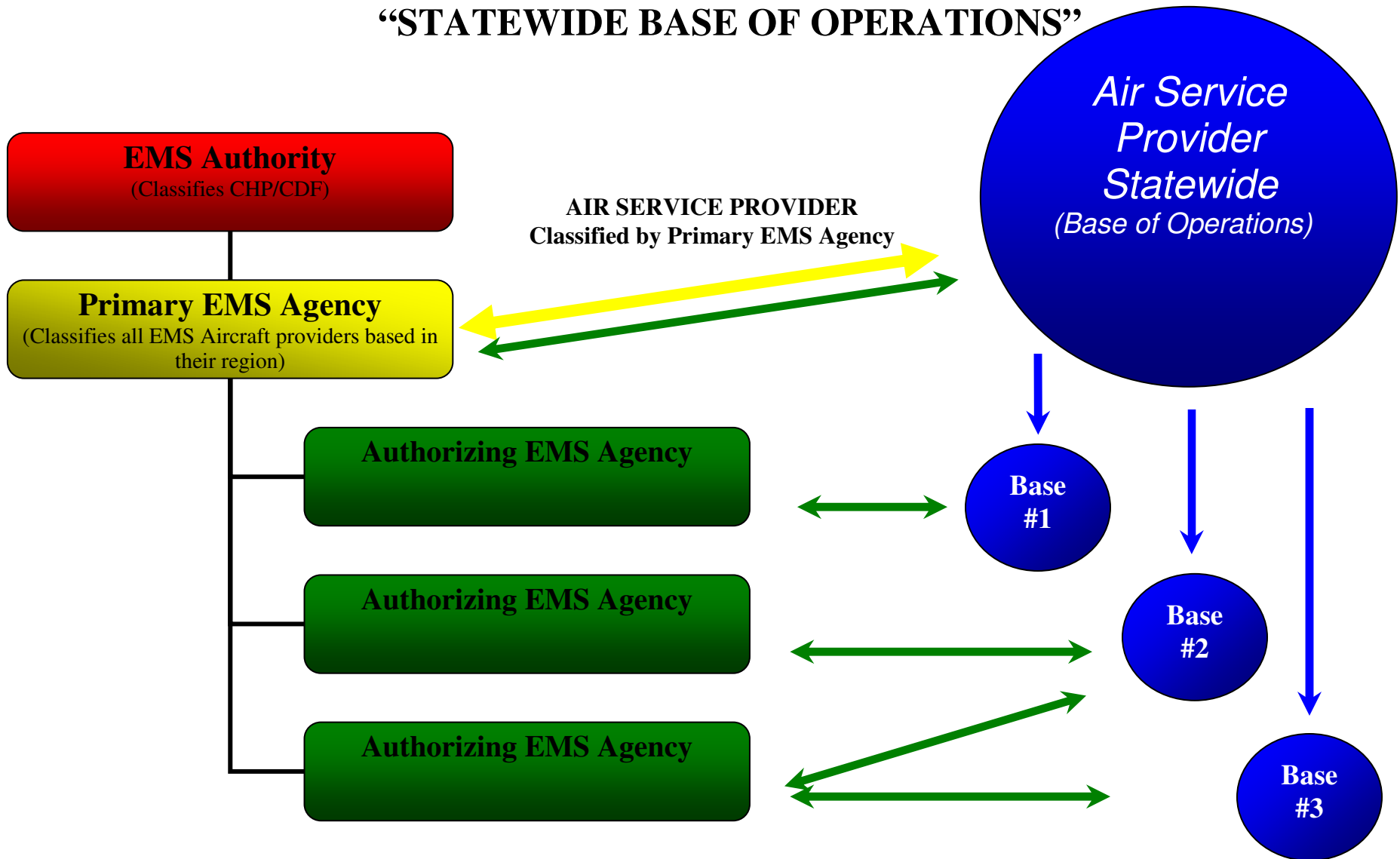
- a. Is classified by the classifying EMS agency and based in its jurisdiction, transporting patients from or within multiple authorizing EMS agency's jurisdictions; this does not include mutual aid providers.
- b. Shall have a provider agreement with each authorizing EMS agency where a base is located or where the provider is assigned primary response to a designated area within an authorizing EMS agency jurisdiction.

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- c. Shall have at a minimum a physician, licensed in the state of California and approved by the classifying EMS agency, which functions as the air service medical director.
 - d. Shall develop in collaboration with the classifying and authorizing medical directors, standardized operating procedures for authorized registered nurses (H&S 1797.56).

1797.56. *"Authorized registered nurse," "mobile intensive care nurse," or "MICN" means a registered nurse who is functioning pursuant to Section 2725 of the Business and Professions Code and who has been authorized by the medical director of the local EMS agency as qualified to provide prehospital advanced life support or to issue instructions to prehospital emergency medical care personnel within an EMS system according to standardized procedures developed by the local EMS agency consistent with statewide guidelines established by the authority. Nothing in this section shall be deemed to abridge or restrict the duties or functions of a registered nurse or mobile intensive care nurse as otherwise provided by law.*

- e. Shall provide data to the classifying and all authorizing EMS agencies in universal format consistent with CEMSIS.

“MULTI-JURISDICTIONAL AIR SERVICE PROVIDER” “STATEWIDE BASE OF OPERATIONS”



STATEWIDE Base of Operations		
	Pros	Cons
EMS A	Implements statewide regulations to support standardization to the air service provider, statewide.	Regulations opened.
		Air ops plan may be needed. (Would ALL EMS agencies coordinate well together in future after initial development?)
LEMS A	Monies to support this model, will be paid to the classifying and authorizing LEMSA by the Air Service Provider.	Significant oversight responsibility for the Classifying EMS Agency.
	Smaller EMS agencies, who can not provide much oversight, may have a collaborative effort with a larger LEMSA, providing more oversight.	LEMAs (regions) would have different provider configurations and scopes of practice, due to Air Service Corporations being based in different Classifying EMS agency jurisdictions.
	Some EMS agencies may see this as a "pro."	Decreased oversight in current EMS agency jurisdictions, roles and responsibilities.
	Interagency agreements promoted; Increased collaboration and communication between LEMAs.	Scope of practice may be more limited or expanded than the authorizing LEMSA would otherwise approve.
Provider	Statewide operations for the air service provider under ONE EMS Agency.	
	Standardization of all aircraft and staff statewide, promoting pt. safety.	
	Standardized MICN SOPs statewide.	
	Standardization of MICP Scope of practice statewide.	