

# Ambulance Patient Offload Time (APOT) Committee Report

*Solutions-based recommendations for mitigation of  
Ambulance Patient Offload Delays (APOD)*

June 29, 2022

Voting Package

## Background

The Ambulance Patient Offload Time (APOT) Committee was established on November 1, 2021 for key stakeholders across the state to provide advisory recommendations to the California Department of Public Health (CDPH) and the Emergency Medical Services Authority (EMSA) on how best to mitigate ambulance patient offload delays (APOD). Those recommendations are collated in the below report.

The recommendations in this report are those of the APOT committee and do not necessarily represent the views or opinions of EMSA or CDPH.

## Mission

The mission of the APOT Committee is to develop advisory recommendations, including legislative or regulatory changes, that will assist in the preservation of the Hospital and Emergency Medical Services (EMS) system. The committee will seek to protect California's healthcare consumers through the identification and sharing of successful pre-hospital and hospital system efficiencies that reduce or eliminate APOD in the transfer of care from EMS providers to receiving hospital emergency clinicians.

Ultimately, all future decisions should be based on patient care and patient care outcomes.

## Purpose and Timeline

The stakeholders who participated on the committee provided advisory recommendations to inform potential future actions for the mitigation of APOD beyond twenty (20) minutes. EMSA established June 30, 2022, for completion of the committee's work, and the committee members voted on June 29, 2022.

## Voting Members

Non-Voting Member		
Committee Chair	Sean Trask	
California Department of Public Health-LNC-HQ	Cassie Dunham	
Voting Members		Attendance
Affiliation	Primary Representative	
Ambulance Alliance	Brian Henricksen	x
California Fire Chiefs Association	Ray Gayk	x
California Metropolitan Fire Chiefs Association	Todd Harms	x
California Ambulance Association	Carley Alley	x
California American College of Emergency Physicians	Larry Stock	x

California Hospital Association	Sheree Lowe	x
California Professional Firefighters	Kevin Greene	x
Children's Hospital Representative	Frank Maas	x
Emergency Medical Services Commission	Atila Uner	x
Emergency Nurses Association	Stephanie Jensen	x
EMS Medical Directors Association of California	Kevin Mackey	x
EMS Administrators' Association of California	Trevor Douville	x
Hospital Association of Southern California	George Greene/Adena Tessler	x
Hospital Council of Northern and Central California	Bryan Bucklew	x
HMO Hospital Organization - Kaiser	Gregory Smith	x
California Nurses Association/National Nurses United	Victoria Bermudez	x

## Definitions

- **Definition of APOT:** “ambulance patient offload time” is defined as the interval between the arrival of an ambulance patient at an emergency department and the time that the patient is transferred to an emergency department gurney, bed, chair, or other acceptable location and the emergency department assumes responsibility for care of the patient.
- **Definition of APOD:** a “nonstandard patient offload time” means that the ambulance patient offload time for a patient exceeds a period of time designated in the criteria established by the local EMS agency pursuant to policies and procedures for calculating and reporting ambulance patient offload time.

# Table of Contents

<b>BACKGROUND</b> .....	<b>I</b>
<b>MISSION</b> .....	<b>I</b>
<b>PURPOSE AND TIMELINE</b> .....	<b>I</b>
<b>VOTING MEMBERS</b> .....	<b>I</b>
<b>DEFINITIONS</b> .....	<b>II</b>
<b>PLANNING ASSUMPTIONS</b> .....	<b>1</b>
<b>RULES OF ENGAGEMENT FOR RECOMMENDATIONS</b> .....	<b>1</b>
<b>VOTING SUMMARY</b> .....	<b>2</b>
<b>RECOMMENDATIONS</b> .....	<b>3</b>
EMERGENCY MEDICAL SERVICES SYSTEM RECOMMENDATIONS .....	<b>3</b>
<i>Recommendation #1: Electronic Signature Documentation</i> .....	<b>3</b>
<i>Recommendation #2: Implement Multiple Options for Patient Transport</i> .....	<b>5</b>
<i>Recommendation #3: Promulgation of Statewide APOT Standard</i> .....	<b>7</b>
<i>Recommendation #4: Enforcement of the Emergency Medical Treatment and Labor Act (EMTALA) and Other State and Federal Patient Safety Protections Regulation Creation</i> .....	<b>8</b>
<i>Recommendation #5: Federal Advocacy for Reimbursement of Transport to Alternate Destination</i> .....	<b>9</b>
<i>Recommendation #6: Operational Monitoring</i> .....	<b>10</b>
HOSPITAL SYSTEM RECOMMENDATIONS.....	<b>11</b>
<i>Recommendation #1: Modify Legislation to Allow Paramedics to Work in General Acute Care Hospitals (GACH)</i> .....	<b>11</b>
<i>Recommendation #2: Increase Throughput Efficiency by Reducing Door-To-First Provider (DTFP) and APOT Times</i> .....	<b>12</b>
<i>Recommendation #3: Public Data Reporting</i> .....	<b>14</b>
<i>Recommendation #4: General Acute Care Hospital Should Staff EMS Arrival Team</i> ...	<b>15</b>
<i>Recommendation #5: Hospital Reimbursement to Providers</i> .....	<b>16</b>
<i>Recommendation #6: Rescheduling of Elective Surgeries</i> .....	<b>17</b>
OTHER RECOMMENDATIONS.....	<b>18</b>
<i>Recommendation #1: Develop Local APOT Committees</i> .....	<b>18</b>
<i>Recommendation #2: Joint Plans</i> .....	<b>20</b>
<i>Recommendation #3: Health Information Exchange</i> .....	<b>21</b>
<i>Recommendation #4: Workforce Development Program</i> .....	<b>22</b>
<i>Recommendation #5: Community ED RN Training Program</i> .....	<b>23</b>
<i>Recommendation #6: Community Education</i> .....	<b>24</b>
<i>Recommendation #7: Review and Update the 'Toolkit'</i> .....	<b>25</b>

## Planning Assumptions

- Extended APOT time ties up ambulances in the Emergency Department, during which time they are unavailable to respond to 9-1-1 calls, and therefore impacts the EMS provider agency's ability to respond to 911 calls in a timely manner.
- Extended response times may increase morbidity and mortality of critical care patients.
- Emergency department and hospital overcrowding with all associated and underlying causes is the basis of the problem for APOT and extended APOT in California.
- There is a cost to extended APOT times for EMS providers.
- Retrospectively, not all patients transported by ambulance to the emergency department need emergency care. However, Emergency Medical Treatment and Labor Act (EMTALA)<sup>1</sup> allows the patient to dictate if they have an emergency or not.
- Lack of health care services and timely access to those services across the continuum of care significantly impacts the crowded hospitals, emergency departments and APOT. This is particularly true for behavioral health services and services for the uninsured and Medi-Cal patients.

## Rules of Engagement for Recommendations

- There were 16 voting members on the APOT committee.
- Each recommendation was discussed at length, and given to each voting member to review and provide written feedback every two weeks.
- The recommendations were finalized when the official vote was cast, and a majority or tie of votes were received for the recommendation.
- The final vote for all recommendations was held on the last day of the APOT committee meetings (June 29, 2022).
- Every recommendation included in the final package, notes the vote count next to the recommendation.
- If there are major implementation considerations, a tie or discord, these are noted under the recommendations.

---

<sup>1</sup> The Emergency Medical Treatment and Labor Act (EMTALA) is a federal law that requires anyone coming to an emergency department to be stabilized and treated, regardless of their insurance status or ability to pay.

## Voting Summary

Emergency Medical Services Systems Recommendations				
Recommendation	Yes	No	Abstain	Decision
Recommendation 1: Electronic Signature Documentation	16	0	0	Endorsed
Recommendation 2: Implement Multiple Options for Patient Transport	14	2	0	Endorsed
Recommendation 3: Promulgation of Statewide APOT Standard	9	6	1	Endorsed
Recommendation 4: Enforcement of the Emergency Medical Treatment and Labor Act (EMTALA) and Other State and Federal Patient Safety Protections Regulation Creation	10	6	0	Endorsed
Recommendation 5: Federal Advocacy for Reimbursement of Transport to Alternate Destination	13	2	1	Endorsed
Recommendation 6: Operational Monitoring	13	3	0	Endorsed
Hospital System Recommendations				
Recommendation	Yes	No	Abstain	Decision
Recommendation 1: Modify Legislation to Allow Paramedics to Work in General Acute Care Hospitals (GACH)	10	6	0	Endorsed
Recommendation 2: Increase Throughput Efficiency by Reducing Door-To-First Provider (DTFP) and APOT Times	15	1	0	Endorsed
Recommendation 3: Public Data Reporting	7	9	0	Not Endorsed
Recommendation 4: General Acute Care Hospital Should Staff EMS Arrival Team	11	5	0	Endorsed
Recommendation 5: Hospital Reimbursement to Providers	9	7	0	Endorsed
Recommendation 6: Rescheduling of Elective Surgeries	1	15	0	Not Endorsed
Other Recommendations				
Recommendation	Yes	No	Abstain	Decision
Recommendation 1: Develop Local APOT Committees	15	1	0	Endorsed
Recommendation 2: Joint Plans	16	0	0	Endorsed
Recommendation 3: Health Information Exchange	14	2	0	Endorsed
Recommendation 4: Workforce Development Program	14	1	1	Endorsed
Recommendation 5: Community ED RN Training Program	16	0	0	Endorsed
Recommendation 6: Community Education	16	0	0	Endorsed
Recommendation 7: Review and Update the "Toolkit"	16	0	0	Endorsed

# Recommendations

## Emergency Medical Services System Recommendations

### Recommendation #1: Electronic Signature Documentation

- A CEMSSIS definition requirement should be established to have an electronic signature between the emergency department medical personnel at the receiving facility and the EMT, AEMT or EMT-P, which captures the points in time when the hospital receives notification of ambulance arrival, and when transfer of care is executed for documentation of APOT.
  - *The signature would be collected when physical transfer of the patient occurs and the report is given to hospital staff, while notating ambulance arrival time at the hospital.*
  - *Bilateral data transfers are critical to this recommendation (i.e., ePCR and HIE) and should be considered in any subsequent implementation.*
  - *Technology is available – ReddiNet, First Watch, and Image Trend, for example, allow for better tracking and should be encouraged. EMSA encouraging the use of technology will improve the accuracy of the data and remove subjectivity.*
  - *EMSA should develop an audit tool/program to improve data accuracy of transfer of care (TOC) with validation from both hospitals and LEMSAs.*
  - *A funding source may be needed for small rural hospitals and (volunteer) EMS providers to finance.*

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		

Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Recommendation #2: Implement Multiple Options for Patient Transport

- The state should open/update or create regulations/pilot programs which directly impact ambulance patient offload time, including but not limited to:
  - Community Paramedicine & Alternate Destinations
    - *In its current form, the regulation limits CP and triage to AD. The state should expand the scope to allow triage to other alternative destinations and provide other options for CP.*
  - Assess and Refer
    - *Safety and efficacy of Assess and Refer policies needs to be studied to ensure community safety. Once determined to be safe, implementation should be accomplished by creating local optional scope of practice and an equity metric which can be reported during implementation.*
    - *There should be clear articulation around which patients are qualified for assess and refer.*
  - Telemedicine Programs
    - *Telemedicine technology exists which could allow direct, online evaluation by a physician while still in the field. This could provide services to patients without requiring transportation to an emergency department. These patient interactions should be billable as physician services.*
  - Nurse Navigation Services
    - *Create a pathway for pilot programs (similar to nurse triage line).*

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock		x	
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene	x		

Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez		x	

### Recommendation #3: Promulgation of Statewide APOT Standard

- Legislation should be considered authorizing a statewide standard of 20 minutes 90 percent of the time for APOT calculations of all California LEMSAs.
  - *Subsequent actions still need to be delineated for penalties, fines, etc. and waivers or flexibilities should be considered for long-term implementation.*
  - *Recommendations #1 & #3 should be implemented in coordination in order to standardize the "time stamp" for APOT.*

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe		x	
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas		x	
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen		x	
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene		x	
Hospital Council of Northern and Central California	Bryan Bucklew		x	
HMO Hospital Organization - Kaiser	Gregory Smith		x	
California Nurses Association/National Nurses United	Victoria Bermudez			x

## Recommendation #4: Enforcement of the Emergency Medical Treatment and Labor Act (EMTALA) and Other State and Federal Patient Safety Protections Regulation Creation

- EMSA, in coordination with CDPH, should develop in regulation an EMTALA reporting standard, as well as reporting other patient safety violations that may be observed in the transport and handoff process for ambulance personnel and develop a standard document for submission to CDPH. The document should allow for easy submission of the complaint, in the event of an APOD that does not meet the regulatory guidance standards.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe		x	
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas		x	
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen		x	
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene		x	
Hospital Council of Northern and Central California	Bryan Bucklew		x	
HMO Hospital Organization - Kaiser	Gregory Smith		x	
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Recommendation #5: Federal Advocacy for Reimbursement of Transport to Alternate Destination

- The state should work with Centers for Medicaid and Medicare Services (CMS) for reimbursement of patient transport to an alternate destination.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey		x	
EMS Administrators' Association of California	Trevor Douville			x
Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez		x	

## Recommendation #6: Operational Monitoring

- The Regional Disaster Medical Health Coordinators and Specialist (RDMHS) needs to monitor real-time emergency department and ambulance patient offload times (APOT) so that ambulances can be directed to ensure one facility is not being inundated while others are operating under capacity.
  - Consider the model used by Labor & Delivery and Neonatal Intensive Care Units.
  - A technological challenge exists for real time data in making informed decisions.
  - Explore technology that can provide real time APOT data which can be utilized by hospitals, LEMSAs and providers which enables real-time, informed decision making.
  - This data should include availability at all possible destinations including sobering centers and psychiatric facilities, not just emergency departments.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atila Uner		x	
Emergency Nurses Association	Stephanie Jensen		x	
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville		x	
Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Hospital System Recommendations

### Recommendation #1: Modify Legislation to Allow Paramedics to Work in General Acute Care Hospitals (GACH)

- There should be a change in legislation to permanently allow paramedics to work in all hospitals (as hospital staff) not just those GACHs with a rural designation, specifically in emergency departments.
  - Paramedics should be allowed to work at their full scope of practice in a hospital ED environment and are currently prohibited from doing so by their licensure regulations.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen		x	
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley		x	
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas		x	
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen		x	
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville		x	
Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez		x	

## Recommendation #2: Increase Throughput Efficiency by Reducing Door-To-First Provider (DTFP) and APOT Times

- The state should provide targeted funding in the state budget for hospitals to implement evidence-based strategies to improve emergency department wait time, throughput and output including but not limited to:
  - Funding for cost of space expansion for Rapid Medical Evaluation and/or Fast-track ED of patients triaged as low acuity for care by Nurse Practitioners, Physicians, or PAs.
  - Funding for cost of building co-located offices for 24-hour primary, geriatric, and pediatric nurse to address the low-acuity needs of both the under one-year population as well as elderly persons who present to the ED for care.
  - Funding for expansion or conversion of emergency department space and laboratory equipment for 24-hour point-of-care lab testing in the emergency department.
  - Funding for expansion of Acute Psychiatric Hospital and Psychiatric Health Facilities for the creation and provision of Psychiatric Emergency Services.
  - Funding for standby emergency medicine specialists and backup panel specialists that can be called in during times of surge
- Hospitals should develop standards and training of ED RNs for Nurse Initiated Protocol Standardized Procedures based on a patient's chief complaint so that lab testing, x-rays, EKGs, etc. can be ordered before examination by a physician, nurse practitioner, or physician assistant.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atila Uner	x		
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey	x		

EMS Administrators' Association of California	Trevor Douville			x
Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez	x		

### Recommendation #3: Public Data Reporting

- The state should require GACHs to post ED wait times.
  - EMSA should review HCAI/CHA data and collect any additional data needed to understand who is utilizing EDs and why, or obtain access to this data if collected locally/regionally. Retrospective data and analysis should be made available to all government and commercial insurance plans and public health offices semi-annually.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock		x	
California Hospital Association	Sheree Lowe		x	
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas		x	
Emergency Medical Services Commission	Atilla Uner		x	
Emergency Nurses Association	Stephanie Jensen		x	
EMS Medical Directors Association of California	Kevin Mackey		x	
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene		x	
Hospital Council of Northern and Central California	Bryan Bucklew		x	
HMO Hospital Organization - Kaiser	Gregory Smith		x	
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Recommendation #4: General Acute Care Hospital Should Staff EMS Arrival Team

- Receiving hospitals should establish a policy for triage of ambulance arrivals to facilitate offload and continue care in compliance with regulation under Title 22, Division 5, and Chapter 1 General Acute Care Hospitals until bed is available.
  - *Transfer of care to a rapid medical evaluation team made up of a physician, NP, or PA following triage would relieve ambulance personnel of responsibility for the patient, allow the ambulance to return to service, and reduce wait time to treatment for low acuity emergency department patients as well as patients who will require placement in an emergency department bed for stabilization medical and nursing care.*

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe		x	
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas		x	
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen		x	
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene		x	
Hospital Council of Northern and Central California	Bryan Bucklew		x	
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Recommendation #5: Hospital Reimbursement to Providers

- CDPH and EMSA should establish a joint oversight program which requires hospitals to reimburse ambulance providers for wait times exceeding the current standard.
  - Reimbursement should be provided at the current EMSA ambulance strike team rate schedule.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock		x	
California Hospital Association	Sheree Lowe		x	
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas		x	
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen		x	
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene		x	
Hospital Council of Northern and Central California	Bryan Bucklew		x	
HMO Hospital Organization - Kaiser	Gregory Smith		x	
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Recommendation #6: Rescheduling of Elective Surgeries

- CDPH and EMSA should establish a joint program which requires the rescheduling of elective surgeries for patients who would require post-procedure inpatient care when boarded emergency department patients are repeatedly linked to APODs and/or hospitals are consistently unable to meet ambulance patient offload time minimum standards.
  - *This recommendation should be a part of the local surge plan and should be implemented in accordance with Recommendation #2: Joint Plans.*

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen		x	
California Fire Chiefs Association	Ray Gayk		x	
California Metropolitan Fire Chiefs Association	Todd Harms		x	
California Ambulance Association	Carley Alley		x	
California American College of Emergency Physicians	Larry Stock		x	
California Hospital Association	Sheree Lowe		x	
California Professional Firefighters	Kevin Greene		x	
Children's Hospital Representative	Frank Maas		x	
Emergency Medical Services Commission	Atilla Uner		x	
Emergency Nurses Association	Stephanie Jensen		x	
EMS Medical Directors Association of California	Kevin Mackey		x	
EMS Administrators' Association of California	Trevor Douville		x	
Hospital Association of Southern California	George Greene		x	
Hospital Council of Northern and Central California	Bryan Bucklew		x	
HMO Hospital Organization - Kaiser	Gregory Smith		x	
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Other Recommendations

### Recommendation #1: Develop Local APOT Committees

- Require local APOT subcommittees to be established between LEMSA Administrators, LEMSA Medical Directors, all EMS provider administrators within a LEMSA, Emergency Department Medical Directors, and hospital CEO/Executive Leadership to address APOT within each LEMSA.
  - *The local Emergency Medical Care Committee (EMCC) shall be mandatory and the APOT subcommittee shall report to the EMCC as a long-term implementation consideration.*
  - *At any time, an APOT subcommittee meeting can be called with two weeks' notice by any one member. Any one member/group can call no more than two additional meetings per year, and total additional meetings can be no more than four per year.*
  - *APOT findings broken down by hospital and EMS providers within each LEMSA must be made available to the public in regular intervals, e.g., semi-annually.*
  - *Low EMS staffing and number of rigs in the field would also need to be captured.*
    - *Additionally, data on the number of patients awaiting transfer to lower levels of care – inter-facility transfer delays - which impact the availability of inpatient beds to decompress the emergency department will need to be tracked and reported.*

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville		x	
Hospital Association of Southern California	George Greene	x		

Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Recommendation #2: Joint Plans

- CDPH and EMSA should require the development of a joint LEMSA/Hospitals surge plan.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez	x		

### Recommendation #3: Health Information Exchange

- The state should require each LEMSA to use electronic platforms (such as SAFR) to improve communication to hospitals on patients that are being transported so a hospital can pre-register or provide expedited care of patients in each ambulance.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atilla Uner		x	
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith		x	
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Recommendation #4: Workforce Development Program

- The CDPH and EMSA should collaborate with local EMS training programs and EMS providers to establish a workforce development program through the schools (and other) system to mitigate the medical and mental health staffing workforce issue in California.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey		x	
EMS Administrators' Association of California	Trevor Douville			x
Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Recommendation #5: Community ED RN Training Program

- Increase hospital emergency department registered nurse staffing by establishing and sponsoring regional community emergency department registered nurse training programs (similar to community ICU training programs).
  - Such a program could be open to any RN, if space is available, who is interested in receiving a certificate of completion in the didactic and skills training portion of the ED training. An RN who completes the didactic and skills training portion of the ED program could seek employment at a GACH where supervised clinical experience would complete training as a specialty emergency department RN.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atilla Uner	x		
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Recommendation #6: Community Education

- The state and local public health departments should provide education to the public/beneficiaries related to use of the 911 system and other tools at for access to care. This should include public service announcements and educational material.
  - *This recommendation is not meant to discourage beneficiaries of the 911 system not to use it, but rather to educate future patients on other ways to access care.*

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atila Uner	x		
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez	x		

## Recommendation #7: Review and Update the 'Toolkit'

- The state should establish a working group of well-balanced stakeholders representing hospital administration, EMS providers, LEMSAs, and hospital employees in the ED and in the inpatient setting to review, update and publish a new Toolkit to Reduce Patient Offload Delays (APOD) in the Emergency Department.

Non-Voting Member		Yes	No	Abstain
Committee Chair	Sean Trask	N/A	N/A	N/A
California Department of Public Health-LNC-HQ	Cassie Dunham	N/A	N/A	N/A
Voting Members		Yes	No	Abstain
Affiliation	Primary Representative			
Ambulance Alliance	Brian Henricksen	x		
California Fire Chiefs Association	Ray Gayk	x		
California Metropolitan Fire Chiefs Association	Todd Harms	x		
California Ambulance Association	Carley Alley	x		
California American College of Emergency Physicians	Larry Stock	x		
California Hospital Association	Sheree Lowe	x		
California Professional Firefighters	Kevin Greene	x		
Children's Hospital Representative	Frank Maas	x		
Emergency Medical Services Commission	Atila Uner	x		
Emergency Nurses Association	Stephanie Jensen	x		
EMS Medical Directors Association of California	Kevin Mackey	x		
EMS Administrators' Association of California	Trevor Douville	x		
Hospital Association of Southern California	George Greene	x		
Hospital Council of Northern and Central California	Bryan Bucklew	x		
HMO Hospital Organization - Kaiser	Gregory Smith	x		
California Nurses Association/National Nurses United	Victoria Bermudez	x		