# CHAPTER 28 - EMERGENCY AND PRE-HOSPITAL MEDICAL SERVICES SYSTEM

## Article I. - General.

### Sec. 28-1. - Title.

The ordinance codified in this chapter shall be known as the "Emergency and Pre-Hospital Medical Services System Ordinance of Sonoma County."

(Ord. No. 4386 § 1, 1991.)

### Sec. 28-1.5. - Geographical scope.

This chapter shall apply to the area subject to the local EMS plan except as may otherwise be limited or modified by court order or state law.

(Ord. No. 4386 § 1, 1991.)

### Sec. 28-2. - Purpose.

(a) This chapter is to provide for the public health, safety and welfare in the use of ambulance and other pre-hospital emergency care resources by the establishment of effective standards for the operation, equipment and personnel of ground ambulance and air ambulance services. It is intended to be consistent with and in furtherance of the public purposes expressed by the legislature in the Emergency Medical Services Act and other enactments. It is intended to improve the availability and quality of emergency medical services within the EMS area under the jurisdiction of the Sonoma County EMS agency. It is intended to apply to limited advanced life support services, advanced life support services, paramedic and emergency medical technician services, and all emergency ambulance services, to the extent permitted by law. This chapter does not cover wheelchair vans, gurney cars or similar dedicated non-ambulance vehicles. This chapter applies to vehicles or aircraft requiring an emergency vehicle license from the California Highway Patrol, or an air carrier operating certificate from the Federal Aviation Administration. This chapter shall be liberally construed for the accomplishment of these purposes.

(b) This chapter is not intended to increase the obligations upon publicly owned and operated fire department or fire district ambulance services beyond the obligations already established and observed between the fire department or fire district ambulance services and the county EMS agency on or before January 1, 1991. While fire department and fire district ambulance services shall not be required to secure permits, the ambulances and their personnel shall be subject to all requirements established within this chapter, the Emergency Medical Services Act, the California Code of Regulations, and the policies, practices and procedures adopted pursuant to this chapter by the Sonoma County EMS agency.

(Ord. 4476 § 3, 1991; Ord. No. 4435 § 2, 1991: Ord. No. 4386 § 1, 1991.)

### Sec. 28-3. - Definitions.

Unless otherwise specified, for the purposes of this chapter words and terms are defined as follows:

(1) "Advanced life support (ALS)" (See also: Limited advance life support)

(2) "Advanced life support engine company" means any fire apparatus staffed and equipped to meet the minimum level requirements of the local EMS agency to provide nontransport advanced life support care.

(3) "Ambulance" means any privately or publicly owned vehicle specially designed, constructed, modified or equipped, and used for responding to emergency calls, providing advanced life support services, as defined herein for the purpose of transporting sick, injured, convalescent, infirm or otherwise incapacitated persons.

(4) "Ambulance personnel" means a qualified person (EMT-P, EMT-I, RN, MD) acting as an attendant responding to an emergency call who occupies the patient compartment while transporting any individual in apparent need of medical attention.

(5) "Ambulance driver" means a licensed person who operates an ambulance as specified by this chapter.

(6) "Ambulance service" means a private or public organization providing an ambulance for use in ALS service, emergency service or a situation which has the potential of becoming an emergency.

(7) "Base hospital" means a hospital which, upon designation by the local EMS agency and with a written contractual agreement with the local EMS agency, is responsible for directing the advanced life support system or limited advanced life support system assigned to it or them by the local EMS agency.

(8) "Basic life support" has the meaning as defined in Health and Safety Code Section 1797.60. Emergency first aid and cardiopulmonary resuscitation procedures which, as a minimum, include recognizing respiratory and cardiac arrest and starting the proper application of cardiopulmonary resuscitation to maintain life without invasive techniques until the patient may be transported or until advanced life support is available.

(9) "Board" means the board of supervisors, county of Sonoma.

(10) "Certificate" means a specific document issued to an individual denoting competence in the named area of pre-hospital emergency medical service.

(11) "Class of services" means the level or levels of complexity of field emergency medical services that may be provided by permittee and/or certified person and will be specified as:

(i) First Responder—person dispatched in accordance with local EMS system policies who meets minimum training requirements specified in State EMS First Responder Guidelines.

(ii) Basic life support (BLS)—provided by EMT-I personnel conforming to regulations established pursuant to California Health and Safety Code, Section 1797 et seq.

(iii) Limited advanced life support (LALS)—provided by EMT-II personnel certified by the EMS agency medical director.

(iv) Advanced life support (ALS)—provided by EMT-paramedic personnel certified by the EMS agency medical director.

(12) "County" means the county of Sonoma, state of California.

(13) "Code 1 call" means any non-Code 3 or non-Code 2 request for ambulance service which is scheduled or unscheduled (i) where a physician, emergency medical personnel, or public safety agency has determined a need for an ambulance because of a potential for an emergency or (ii) where ALS services are requested or may be required.

(14) "Code 2 call" means any request for ambulance service in a situation designated as non-life-threatening by dispatch personnel in accordance with county policy, requiring the immediate dispatch of an ambulance without the use of lights and sirens.

(15) "Code 3 call" means any request for ambulance service in a situation perceived or actually life-threatening, as determined by EMS dispatch personnel, in accordance with county policy, requiring immediate dispatch with the use of lights and sirens.

(16) "Computer-aided dispatch" or "CAD" means computer-aided dispatch system consisting of associated hardware and software to facilitate call taking, unit selection, resource dispatch and deployment, event time stamping, creation and real time maintenance of incident database and providing management information.

(17) "Contract compliance committee" means a committee which evaluates ambulance contract compliance and reviews levies of penalties for noncompliance.

(18) "Emergency" means any apparent sudden or serious illness or injury requiring, or having the potential of requiring, immediate medical or psychiatric attention under circumstances that delay in providing such services may aggravate the medical condition or cause the loss of life; furthermore, any case declared to be an emergency, or having the potential to be declared an emergency, as determined by psychiatric observation under Welfare and Institutions Code Section 5150 due to the potential for an emergency.

(19) "Emergency call" means a request for an ambulance to transport or assist a person in apparent sudden need of medical attention or to assist a person who has the potential for sudden need of medical attention, or in a medical emergency as determined by a physician, to transport blood, any therapeutic device, accessory to such device or tissue or organ for transplant.

(20) "Emergency medical care committee (EMCC)" means the emergency medical care committee of Sonoma County appointed by the Sonoma County board of supervisors pursuant to California Health and Safety Code Section 1750, et seq.

(21) "Emergency medical services" means medical services utilized in responding to a medical emergency.

(22) "EMS area" means all that geographical area within and governed by the Sonoma County EMS plan except as may otherwise be limited or modified by court order or state law.

(23) "EMS plan" or "emergency medical services plan" means a plan for the delivery of emergency medical services consistent with state guidelines addressing the components listed in Section 1797.103.

(24) "EMS dispatch" means the emergency medical services dispatch center operated by the Sonoma County sheriff.

(25) "Emergency medical services system" means a specially organized arrangement of resources including, but not limited to, First Responders and ambulances which provide the personnel, facilities and equipment for the effective and coordinated delivery of ALS and emergency medical care services.

(26) "Emergency Medical Technician-I (EMT-I)" means an individual trained in all facets of basic life support conforming to regulations adopted pursuant to California Health and Safety Code, Section 1797, et seq. and who has a valid certification issued pursuant to those regulations.

(27) "Emergency Medical Technician-I (D)" means an individual who meets all of the requirements of an EMT-I with additional training in defibrillation as approved by the local EMS agency.

(28) "Emergency Medical Technician-II (EMT-II)" means an EMT-I with additional training in limited advanced life support conforming to regulations adopted pursuant to California Health and Safety Code, Section 1797, et seq. and who has a valid certification issued pursuant to those regulations.

(29) "Emergency Medical Technician-P (EMT-P)" means an individual who is trained in advanced life support conforming to regulations adopted pursuant to California Health and Safety Code, Section 1797, et seq. and who has a valid certification/accreditation issued pursuant to those regulations.

(30) "Exclusive operating area" means an EMS area or subarea for which the local EMS agency restricts operations to one or more ambulance service or provider of advanced life support services.

(31) "Fire EMS subcommittee" means a subcommittee of the Sonoma County Fire Chiefs Association.

(32) "First Responder" means a person dispatched in accordance with local EMS system policies who meets minimum training requirements specified in state EMS First Responder guidelines.

(33) "First Responder (D)" means a person who meets all of the requirements of a First Responder and who has completed an additional training program in defibrillation approved by the local EMS agency.

(34) "Medical control" means the medical management of the emergency medical services system pursuant to the provisions of Chapter 5 (commencing with Section 1798) of the California Health and Safety Code.

(35) "Mobile intensive care nurse (MICN)" means an authorized registered nurse who has been certified by the local EMS agency in conformation with the recommendations of the California Conference of Local EMS Agency Medical Directors definition of mobile intensive care nurses as qualified in the provision of emergency cardiac and noncardiac care and the issuance of emergency instruction to EMT-IIs and EMT-P field personnel.

(36) "Patient" means a sick, injured, wounded, invalid, expectant mother, convalescent or otherwise incapacitated person.

(37) "Permittee" means an organization which has initially been granted a permit by the board of supervisors to operate an ambulance service in the county of Sonoma. After initial approval by the board of supervisors, annual permit renewals may be granted by the local EMS agency.

(38) "Person" means any individual, firm, corporation, association, or group or combination acting as a unit.

(39) "PSAP (public safety answering point)" means the primary answering location of an incoming 911 call.

(40) "Receiving facility" means a general acute-care facility which has been assigned a role in the EMS system by the local EMS agency.

(41) "Service" means ambulance service.

(42) "Service area" means area of responsibility to provide pre-hospital care, may include, but not be limited to, permit area, dispatch area or area included in exclusive operating area.

(43) "Limited advanced life support (LALS)" means the services described in Health and Safety Code Section 1797.92 (limited advanced life support defined) and in Title 22 of CCR, Section 100106 (scope of practice of Emergency Medical Technician - II), or successor statutes and regulations. Such services shall only be performed by a person certified as an Emergency Medical Technician-P (paramedic) who is performing those services in the course of employment by an approved EMT-P service provider.

Incorporated by reference are all definitions of Health and Safety Code 1797.50 et seq.

(Ord. No. 4435 § 2, 1991; Ord. No. 4386 § 1, 1991.)

Sec. 28-4. - Administrative authority.

This chapter shall be administered by the Sonoma County director of public health with medical direction provided by the EMS agency medical director and/or his/her designee. The Sonoma County public health department is designated as the EMS agency for Sonoma County pursuant to the Emergency Medical Services System and Pre-hospital Emergency Care Personnel Act of 1980.

(Ord. No. 4386 § 1, 1991.)

Article II. - Ambulances.

Sec. 28-5. - Permits and permittees.

(a) Permits. It shall be unlawful for any person, either an owner, agent or otherwise, to operate, conduct, advertise, or otherwise engage in or profess to be engaged in, the business or service of the transportation of emergency medical patients in the county of Sonoma without possessing a valid permit to do so from the county. A permit shall not be required for:

(1) Fire district or fire department owned and operated ambulances;

(2) Vehicles operated as ambulances at the request of local authorities during any "state of war emergency," duly proclaimed "state of emergency," or "local emergency" as defined in the California Emergency Services Act (Chapter 7 of Division 1 of Title 2 of the Government Code) as amended.

(b) Temporary Permit. A temporary operating permit may be authorized by the EMS agency for ambulance services based outside the county and properly licensed by the California Highway Patrol or Federal Aviation Administration for up to thirty (30) days for special activities. Such temporary operating permit shall conform to the requirements of Section 28-5(e) and shall contain such additional conditions and restrictions as the EMS agency medical director deems appropriate for the operation. Temporary permit fees shall be as determined by the board of supervisors.

(c) Nontransferable. Permits issued in conformance to this section are nontransferable.

(d) Duration. Permits are valid for one (1) fiscal year (July 1st—June 30th).

(e) Permit Fees. Permit fees shall be those set by resolution of the board of supervisors, county of Sonoma. All permits shall be issued for a fiscal year from date of issuance. Upon demonstration of financial hardship, permit fees may be waived for public agencies.

(f) Application for a Permit or Renewal of a Permit. Prerequisites for the issuance of a permit or renewal of a permit for an applicant shall include filing an application in writing on approved forms which shall provide the following minimum information:

(1) Name and description of the applicant;

(2) Business address and residence address of record of the applicant;

(3) Trade or firm name, or DBA as registered with the county clerk;

(4) If a corporation, a joint venture or a partnership or limited partnership, the names of all partners, or the names of corporate officers and owners, their permanent addresses and their percentage of participation in the business;

(5) A statement of facts showing the experience of the operator and the operations of an ambulance service and that the applicant is qualified to render efficient twenty-four (24) hour ambulance service. For ground ambulances, a photocopy of the license issued by the commissioner of the California Highway Patrol to privately owned ambulances in accordance

with Section 2501, California Vehicle Code, and Title 13, California Code of Regulations, shall be appended to the application. For air ambulances, a photocopy of the air carrier operating certificate issued by the Federal Aviation Administration shall be appended to the application;

(6) The approximate geographical area proposed to be served by the permittee;

(7) A statement of facts that the applicant owns or has under his control, in good mechanical condition, required equipment to adequately conduct an ambulance service in a territorial service area for which he is applying which meets the requirements established by the California Vehicle Code, applicable California Code of Regulations, and this chapter, and that the applicant owns or has access to suitable and safe facilities for maintaining his ambulance in a clean and sanitary condition;

(8) A declaration provided under penalty of perjury, amended as required during the year, for any changed, substituted, loaned or leased vehicles, giving a complete description of each ambulance vehicle operated by the applicant, including the patient capacity thereof, and a copy of the most recent ambulance inspection report issued by the California Highway Patrol for each vehicle;

(9) A declaration under penalty of perjury, that each permitted ambulance and its appurtenances conform to all applicable provisions of this chapter, the California Vehicle Code, and the California Code of Regulations, and any other state or county applicable directive shall be provided to the department prior to the start or renewal date of ambulance operations;

(10) A covenant that the applicant employs sufficient certified personnel adequately trained to deliver emergency medical services of good quality at all times at the applicant's proposed level of service;

(11) A covenant amended as required during the permit year for any personnel changes for renewal applications, giving a description of the level of training and record of completed required annual training for each ambulance employee, and a copy of each certificate or license issued by the state and county establishing qualifications of such personnel in ambulance operations shall be provided to the EMS agency medical director prior to the start or renewal of ambulance operations;

(12) A schedule of rates, including any special rates, to be charged by the permittee for ambulance services provided under this chapter;

(13) A covenant signed by the applicant that as a condition of the county issuing a permit, applicant agrees to appear and defend all actions against the county arising out of the exercise of said permit, and shall indemnify and save the county, its officers, employees and agents harmless from all claims, demands, actions or causes of actions of every kind and description resulting directly or indirectly, arising out of, or in any way connected with, the exercise of this permit;

(14) Such other facts or information as the EMS agency medical director may require.

(g) Investigation by Local EMS Agency. Upon the receipt of a completed application, the local EMS agency may conduct an investigation to determine if the applicant meets all the requirements of this chapter. Upon completion of this investigation, the director of public health/EMS agency medical director shall recommend to the board of supervisors that a permit be granted, denied or conditioned for the requested ambulance service area, as set forth below.

(h) Issuance or Denial of Permit.

(1) The board of supervisors may order the issuance of a permit to conduct an ambulance service in a specified area upon finding that the applicant meets all requirements of this chapter.

(2) The board of supervisors may order the denial of a permit if the applicant or any partner, officer or director thereof:

(i) Was previously the holder of a permit issued under this chapter which permit has been revoked or not reissued and the terms or conditions of the suspension have not been fulfilled or corrected;

(ii) Is committing any act which if committed by a permittee would be ground for the suspension or revocation of a permit issued pursuant to this chapter;

(iii) Has acted in the capacity of a permitted person or firm under this chapter without having a permit therefor;

(iv) Has entered a plea of guilty to, or been found guilty of, or been convicted of a felony or a crime involving moral turpitude, and the time for appeal has lapsed or the judgment of conviction has been affirmed on appeal, irrespective of an order granting probation following such conviction suspending the imposition of sentence or of a subsequent order under the provisions of Section 1203.4 of the Penal Code allowing such person to withdraw his plea of guilty and to enter a plea of not guilty or setting aside the plea or verdict of guilty, or dismissing the accusation or information.

(i) Corrective Action. The provision of ALS and emergency medical services is critical to the public health and safety. The purpose of corrective action under this chapter is to correct violations which may affect public health and safety; it is not punitive. This provision shall be construed so as to maximize the safety and welfare of patients.

(j) Permit Denial, Revocation or Suspension Grounds. A permit may be revoked or suspended if the applicant permittee or its employees, partners, officers or directors commits or has committed any of the actions listed in Health and Safety Code Section 1798.200 (a) through (k). In addition, a permit may be revoked or suspended for the following:

(1) A person knowingly makes any false statement or fails to disclose or suppresses another from disclosing material facts in an application, report or other document furnished to the local EMS agency;

(2) In the case of an applicant or permittee, said applicant or permittee is not the real party in interest in the business;

(3) Is required to register as a sex offender under the provisions of Section 290 of the California Penal Code;

(4) Habitually or excessively uses or is addicted to the use of narcotics or dangerous drugs;

(5) Habitually or excessively uses intoxicating beverages;

(6) In the case of a driver has been culpably involved during the preceding year in any motor vehicle accident causing death or bodily injuring or in three (3) or more motor vehicle accidents;

(7) Has been convicted during the preceding seven (7) years of any offense involving moral turpitude, including fraud or intentional dishonesty for personal gain;

(8) Has been convicted during the preceding seven (7) years of theft or any felony involving force, violence, threat, or intimidation;

(9) Aids or abets an unlicensed person to evade compliance with provisions of this chapter;

(10) Permits operation of ambulance service in violation of any provision of this chapter or any other law, regulation, or policy of the county, state or federal government pertaining to the operation of an ambulance;

(11) Knew or should have known of falsified data supplied to the county EMS agency during the course of operations, including, but not limited to, dispatch data, patient report data, response time data, financial data, or falsification of any other data permittee is required to submit to the Sonoma County EMS agency;

(12) Failure to maintain equipment in accordance with safe industry standards;

(13) Failure of permittee's employees to conduct themselves in a professional and courteous manner, where reasonable remedial action has not been taken by permittee;

(14) Failure to comply with any applicable service response time standards. "Failure" is defined as failure to meet or exceed such standards according to the terms outlined in the agreement for service;

(15) Any other wilful acts or negligent omissions of permittee which endanger the public's health and safety;

(16) When the EMS agency medical director determines that grounds for corrective action may exist, he shall conduct an investigation. He shall notify the applicant or permittee in writing that he believes grounds may exist for corrective action and shall specify the nature of the grounds. He shall notify the permittee that he is investigating whether corrective action is necessary to preserve public health and safety, and shall afford the permittee a reasonable opportunity to be interviewed during the course of the investigation;

(17) At the conclusion of the investigation the permittee shall be notified as to whether or not a violation exists and, if so, shall specify the nature of the violation(s). If the violation is curable in the determination of the EMS agency medical director, a reasonable period to correct the violation shall be authorized;

(18) If the EMS agency medical director concludes that revocation, suspension or imposition of conditions is warranted, he shall so notify the permittee specifying the grounds for said action. The permittee shall have twenty (20) days from the mailing of said notice to request a hearing before an investigative review panel (hereinafter "IRP"). Said IRP shall be comprised of a base hospital physician, a mobile intensive care nurse, and an Emergency Medical Technician-P. The IRP shall be aided by a nonvoting presiding officer, an attorney, who shall consider the admissibility of evidence as well as preliminary questions regarding the conduct of the hearing including, but not limited to, good cause for postponements and extensions of time beyond the times permitted in the California Code of Regulations for IRPs or those set forth in this chapter. Procedures related to this hearing shall be, to the extent applicable, identical to those set forth for similar investigative review panels in the California Code of Regulations, except that the findings and conclusions of the IRP shall be or are subject to judicial review pursuant to Section 1094.5 et seq. of the Code of Civil Procedure;

(19) Permit Summary Action. Other corrective action notwithstanding, the EMS agency medical director shall have the power to take summary action against any permit, if it appears in the exercise of reasonable judgment by the EMS agency medical director that the failure to take action against the permit presents an immediate threat or danger to the public health, safety or welfare. The EMS agency medical director shall immediately give notice to the board of the action and the reasons for it. At any time during the effective period of the summary action, but not more than once during any single summary action effective period, the permittee may request a hearing by submitting a written request to the EMS agency medical director. Upon receipt of such a request, the EMS agency medical director shall schedule a hearing before the board of supervisors to be conducted at a regular or special meeting. At the hearing, the board shall consider whether the summary action shall remain in effect pending full investigation and an IRP, as specified above. The hearing shall be scheduled as soon as possible following the EMS agency medical director's receipt of a written request, but not later than thirty (30) days following the receipt of request. Appeal procedures for emergency actions of the EMS agency medical director are the same as those delineated in Section 28-26 of this chapter.

(k) Renewal of Permits.

(1) Permits shall be renewed annually by the EMS agency upon application of the permittee if it is determined that the permit holder has during the period of the expiring permit operated in

conformity with the provisions of this chapter and adopted rules and regulations thereto and that the permittee is capable of continuing operation in conformity.

(2) Annually, or more often if requested by the EMS agency medical director, each permittee shall submit compiled patient and ambulance operation information pursuant to Section 28-7(a).

(l) Amendment of Permits.

(1) Upon request by the permittee, the EMS agency may amend the conditions specified in the permit when such changes are in substantial compliance with the provisions of this chapter.

(2) Such amendments shall not affect the expiration date of the existing permit.

(3) Such amendments shall not authorize a change in ownership from that specified in the original permit.

(4) Change in level of service shall not be allowed unless in compliance with the Sonoma County EMS plan.

(5) A permittee must conform with the requirements of the permit unless revision is approved by the board of supervisors or EMS agency medical director as may be applicable.

(m) Conditional Operation and Temporary Variance.

(1) In the event of a change in ownership of any kind or nature, any interruption of service of more than twenty-four (24) hours duration, or any substantial change in staffing or equipment of the ambulance service which causes the ambulance service to be carried out differently than specified in the current operating permit, the permittee shall notify the EMS agency medical director immediately in writing, stating the facts of such change.

(2) Upon request by the permittee, the EMS agency medical director may grant a temporary waiver from the condition so specified in the original permit if he finds that such change is in substantial compliance with the provision of this chapter and is not a threat to public health and safety. If the EMS agency medical director finds that such change is not in compliance with this chapter, he may suspend or revoke the permit. In all cases when a change of ownership occurs in an ambulance service, an application for a new permit shall be filed with the department within thirty (30) days. In no case shall any temporary variance be valid for more than sixty (60) days without written approval of the board of supervisors.

(n) Responsibilities and Duties of Permittees. In addition to the other requirements and obligations set forth in this chapter, permittees shall:

(1) Render services required under this chapter on a twenty-four (24) hour a day basis. Such service shall commence five (5) days after the issuance of a permit unless time extension is granted by the EMS agency medical director or board of supervisors;

(2) Not discontinue any services to the service area or any portion thereof without first giving written notice to the EMS agency at least ninety (90) days prior to the proposed discontinuance;

(3) Notify the EMS agency within five (5) days after the receipt of the results of all vehicle inspections conducted by the state and of any disciplinary action taken by any state agency regarding any ambulance license;

(4) Notify the EMS agency in writing within five (5) days after being informed of any disciplinary action being taken by the state against any ambulance driver or attendant employed by the permittee;

(5) Notify the EMS agency medical director in writing within thirty (30) days of any other changes in the information set forth in any application, certification document required by this chapter;

(6) Notify the EMS agency and other affected public safety agencies beforehand of any known or foreseeable interruptions, suspensions or delays in services which may endanger the health, safety and welfare of the residents of the service area or portion thereof, served by the permittee.

(o) Bonding of Applicant. Before any permit is issued under the provisions of this chapter, the board shall require the applicant, as a condition to the issuance of the permit, to post with the clerk of the board a cash bond in the sum of one hundred thousand dollars ($100,000.00) or a surety bond in the same amount furnished by a corporation authorized to do business in the state of California, payable to the county of Sonoma. The bond shall be conditioned upon the full and faithful performance by the permittee of his obligations under the applicable provisions of this chapter and shall be kept in full force and effect by the permittee throughout the life of the permit and all renewals thereof. The board of supervisors may by resolution establish additional or lower bond requirements. The bond requirement shall be waived by resolution of the board of supervisors if public need and necessity require it or the applicant has demonstrated his ability to meet the obligations of this chapter by three (3) or more years of providing emergency medical services in Sonoma County. The bonding requirement may be instituted for cause. The bonding requirement shall be waived for municipal ambulance providers. The bonding requirement shall be waived for fire district or fire department ambulance services.

(p) Liability Insurance.

(1) General Liability for Vehicle Operation. The permittee shall obtain, and keep in force during the term of said permit, public liability and bodily injury insurance, issued by a company approved by the county of Sonoma and authorized to do business in the State of California, insuring the owner and also naming the county as an additional insured of such ambulance against loss by reason of injury or damage that may result to persons or property from negligent operation or defective construction of such ambulance, or from violation of this chapter or of any other law of the state of California, or the United States. Said policy shall be in the sum of not less than one million dollars ($1,000,000.00) combined single limit for personal injury and property damage for each vehicle in any one accident. Workers' compensation insurance shall be carried covering all employees of the permit holder. Copies of the policies, or certificates evidencing such policies, shall be filed with the EMS agency medical director before a permit is issued. All policies shall contain a provision requiring a minimum of fifteen (15) calendar days' notice to be given to the county prior to cancellation, modification or reduction in limits. The amounts of public liability insurance for bodily injury or property damage shall be subject to review and adjustment by the board annually at the board's option. Municipal fire department and fire district ambulance services may submit their self-insurance programs for review and approval by the county.

(2) Medical Liability. The permittee shall defend, indemnify and hold harmless the county, its agents and employees, from and against any and all claims and actions for damages or losses to persons or property arising out of or in connection with the activities of the permittee, his/her agencies or employees, in which the claim or action against the county is in any way derived from or vicariously based upon the activities of the permittee, his/her agencies or employees. Said defense and indemnification shall include, but not be limited to, any and all costs, expenses, attorneys' fees and liability incurred in defense of such claims or actions whether same proceeds to judgment or not. Permittee shall maintain comprehensive medical liability insurance in the amount of one million dollars ($1,000,000.00) and shall furnish the EMS agency medical director with a certificate of insurance prior to issuance or renewal of an operational permit. Said policy shall name the county as co-insured and shall require a minimum of fifteen (15) calendar days notice to be given to the county prior to cancellation, modification or reduction in limits. The amount of liability coverage shall be subject to review and adjustment by the board annually at the board's option. Fire department and fire district ambulance services may submit self-insurance programs for approval by Sonoma County.

(Ord. No. 4435 § 2, 1991; Ord. No. 4386 § 1, 1991.)

Sec. 28-5.5. - Ambulance services not required to secure permits.

Fire district and fire department ambulance services shall be subject to all the responsibilities and duties of permittees set forth under subsection (n) of Section 28-5. Corrective action shall be available against such ambulance services to the extent available under state law and to the extent the procedures herein are in adherence to the policies and procedures of the local EMS agency.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-6. - Ambulance operation.

(a) Ambulance Staffing. Each ambulance being operated to render medical care shall be staffed at all times by a driver who shall at a minimum be an EMT-I, and an attendant who shall at a minimum be an EMT-P. Any exceptions to this staffing level must be requested in writing to the local EMS agency. The EMS agency medical director will review requests for changes in staffing patterns and notify requesting provider within ten (10) working days of his/her decision. The exception shall be Bodega Bay fire protection district which shall be excluded until such time as it becomes an advanced life support provider, and then the Bodega Bay fire protection district shall be subject to this section. The attendant of an ambulance responding to a call shall occupy the patient compartment while transporting a person in need of medical attention. The requirement need not apply during a "state of emergency," "state of war emergency," or "local emergency" as defined in the Government Code of the state of California.

(b) Emergency Service Availability. Each ambulance service operator shall provide emergency ambulance service on a continuous twenty-four (24) hours per day basis, excluding acts of God or labor disputes. If for any reason an operator stops emergency ambulance service on a continuous twenty-four (24) hour per day basis, he shall immediately stop any advertisement or any other solicitation of emergency services which have been discontinued and immediately notify the EMS agency medical director. Each permittee shall maintain availability of the minimum number of ambulances identified in the permit as being available for twenty-four hour emergency services, within the meaning of Section 28-9(b)(1). Transfers originating in Sonoma County or ending in Sonoma County may be permitted by EMS dispatch on a case-by-case basis. A ground ambulance assigned an emergency response area in Sonoma County may not be used for a transfer originating outside of Sonoma County which also has a destination outside of Sonoma County.

(c) Ambulance Safety and Emergency Equipment. Ambulances and safety and emergency equipment shall be maintained at all times in good mechanical repair and in a clean and sanitary condition.

(1) Minimum Equipment. All ambulances shall be equipped with all safety and emergency equipment required for ambulances by the EMS agency medical director. This shall not be less than that required under the California Vehicle Code and the California Code of Regulations and regulations promulgated thereunder.

(2) ALS and LALS Ambulance Equipment. In addition to the equipment required under subsection (c)(1) above, ALS and LALS ambulances shall be equipped as required by administrative rules of the EMS agency.

(3) Maintenance of Emergency Equipment and Supplies. Dressings, bandaging, instruments and other medical supplies used for care and treatment of patients will be protected so they are sterile when ready for use. Provisions shall be made to assure autoclaving or resterilization of emergency equipment when required.

(4) Inspection.

(i) Ambulances shall be inspected for Sonoma County and state of California vehicle requirements not less than annually. This inspection shall normally be carried out

by the EMS agency and the California Highway Patrol. A record of the California Highway Patrol inspection shall be presented to the EMS agency medical director upon demand. The local EMS agency shall inspect ambulances for compliance with local requirements and reserves the right to require further inspection beyond California Highway Patrol criteria.

(ii) Ambulances and aircraft shall be inspected not less than annually by the EMS agency staff. Inspection by the California Highway Patrol shall also be carried out.

(iii) No person shall operate an ambulance in the county unless the vehicle contains a valid ambulance certificate. An ambulance certificate shall be issued by the EMS agency medical director upon the vehicle's compliance with this chapter.

(iv) Relationship to First Responders. When emergency medical services are initially provided by nonambulance services, such as fire or police agencies, transition of patient care shall include adequate historical and medical information to ensure continued appropriate services are rendered. In conjunction with an approved program by the local EMS agency, nothing in this section shall preclude the use of non-transport ALS engine companies by fire departments.

(v) Destination of Emergency Patients. In the absence of specific instructions from the patient(s), a responsible relative, law enforcement personnel or another responsible person, patients shall be transported to the nearest appropriate California licensed emergency-receiving facility which is equipped, staffed and prepared to receive emergency cases and administer emergency medical care appropriate to the needs of the patient, in accordance with a point-of-entry plan approved by the EMS agency medical director.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-7. - Other provisions.

(a) Data Collection and Reporting.

(1) Each ambulance service its equipment and premises, vehicle maintenance records and records of calls shall be open to inspection and audit by the EMS agency during usual EMS agency hours of operation.

(2) Ambulance service shall maintain accurate records of all calls requiring ambulance services and calls responded to. A run report, relating pertinent information, shall be prepared after the finalization of each call responded to. EMS agency copies of all run reports shall be delivered to the EMS agency office within one (1) week of completion of the call. All forms shall be sorted by date and type of call. All related records shall be kept current and retained for a period of not less than three (3) years, and shall be available at all reasonable times for review by the EMS agency for the purpose of enforcing this chapter. Records shall contain information such as, but not necessarily limited to, the following, and shall be prepared within seventy-two (72) hours after having received the original request for service:

(i) Time of request;

(ii) Name and address of person requesting;

(iii) Nature of request;

(iv) Dispatcher: if EMS dispatch give run number;

(v) Identification of ambulance, driver and attendant;

(vi) Time of patient pickup;

(vii) Time and place patient delivered;

(viii) Location of ambulance when dispatched to call;

(ix) Level of service rendered;

(x) For Code 1 calls, the name of the physician, emergency medical personnel or public safety agency determining that a potential for emergency existed. If the determination is made by an employee of an ambulance which is required to have a permit, the report shall state the reasons for the determination;

(xi) Other information as required.

(3) All information required in this section shall be recorded on forms approved by the EMS agency medical director.

(4) Any information gathered in conformance with this section may be used as the basis for determining compliance with this chapter.

(b) Ambulance Based Outside Sonoma County. Ambulances based and properly licensed outside Sonoma County may transport patients within Sonoma County without compliance with this chapter provided:

(1) They do not operate within any of the designated exclusive operating areas within Sonoma County unless given express permission to do so by the board of supervisors.

(2) The patient is being transported to a residence or facility within Sonoma County from a residence or facility outside of the county, or

(3) The patient is being transported through Sonoma County to a destination outside the county, or

(4) The patient was transported into the county by the same operator and is to be transported back to the county of origin, or

(5) An agreement exists between contiguous counties for emergency medical services by ambulances.

(Ord. No. 4386 § 1, 1991.)

## Article III. - Communications and Dispatch.

### Sec. 28-8. - Central dispatch.

(a) EMS Dispatch Responsibility. EMS dispatch shall be responsible for overall coordination of emergency ambulance dispatch. Unless Section 28-10 applies, all Code 2 and Code 3 ambulance calls for service shall be dispatched by the EMS dispatch center.

(b) Required Communication Equipment. Each ambulance certified under this chapter shall be equipped with appropriate and properly maintained communications equipment approved by the EMS agency to maintain continuous communication with EMS dispatch. Each ambulance crew shall be equipped with a personal paging receiver to facilitate communication with EMS dispatch. Each ambulance certified under this chapter shall be equipped with appropriate and properly maintained communications equipment to communicate with acute care hospitals. All communication equipment shall be maintained by the owner or franchisee.

(c) Dispatch Policy Approval. Medical dispatch policies shall be reviewed by the fire EMS committee and the sheriff, and approved by the EMS agency. General dispatch policies affecting ambulance services shall be reviewed by the EMS agency and the fire EMS committee, and approved by the sheriff.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-9. - Ability to respond.

(a) EMS Dispatch Advisory. Ambulance services shall keep EMS dispatch advised at all times of any circumstances which may change the level of service or capability of its service to provide emergency response. This includes, but is not limited to, changes in personnel and equipment status.

(b) Availability of Ambulances.

(1) An ambulance available for emergency service is one which has a crew of at least two (2) certified persons with the ambulance and which is ready at that time to be dispatched. An ambulance may also be considered available for emergency service when its crew is capable of reaching the ambulance and can depart to the scene within three (3) minutes of receiving a call from EMS dispatch. An ambulance which is occupied by a patient is not considered available for emergency service and will not be dispatched under this policy except in dire emergency when no other ambulance is available to be dispatched or the estimated time of arrival to the scene by another ambulance is excessive and the patient's well-being will not be adversely affected.

(2) Each ambulance company is to immediately notify EMS dispatch every time it does not have at least one (1) ambulance available for emergency service.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-10. - City and fire district dispatch.

Ambulances owned and operated by cities or fire districts within the county EMS area may utilize their own dispatch systems in coordination with Sonoma County EMS dispatch. All calls not received in a PSAP will be dispatched by Sonoma County EMS dispatch, unless written permission granted through the director of public health allows for an alternate arrangement. Ambulance personnel will maintain communication with EMS dispatch to keep them informed of the call status throughout the call. If EMS dispatch is aware of ambulance resources which are closer to a call than those dispatched by a city or fire district, EMS dispatch may cancel the responding unit and send the closest unit. Cities which do not operate municipal ambulance services receiving EMS calls through their PSAP will transfer the call to EMS dispatch.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-11. - Code 3 operation (red light and siren).

A decision to use Code 3 shall be made by the ambulance attendant is conformance with California Highway Patrol regulations. EMS dispatch shall be notified of Code 3 and any change in code level.

(Ord. No. 4386 § 1, 1991.)

Article IV. - EMS Personnel.

Sec. 28-12. - General.

(a) Personnel Categories. This article shall apply to EMS personnel categories First Responder, First Responder (D), EMT-I, EMT-I (D), EMT-P and MICN.

(b) Training Program Approval. All EMS personnel training and testing programs for persons employed within Sonoma County shall be approved by the local EMS agency in conjunction with state guidelines.

(c) Competency examination. An examination for competency shall be required in accordance with State EMS Authority regulations.

(d) Additional requirements. The local EMS agency may require additional training or qualifications which are greater than those required by state law and regulation for advanced life support personnel.

(e) Certification/Accreditation. The EMS agency medical director shall issue an appropriate certificate indicating class of service capability upon successful completion of an approved training program and successful passage of an approved final examination.

(f) Procedures. Procedures for certification, accreditation, recertification, suspension, revocation and appeal shall be developed and implemented by the local EMS agency in conformance with state regulations.

(g) Identification. All ambulance EMS personnel while responding to a call, shall wear a name tag during duty hours which indicates the name, the class of service he/she is entitled to perform and the company/organization the employee is affiliated with.

(h) Appearance and Demeanor. EMS personnel shall maintain professional appearance and demeanor at all times on duty or in uniform.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-13. - Ambulance driver.

Every person responding to a call shall comply with this chapter and the California Code of Regulations for ambulance drivers. Each ambulance permittee shall utilize an orientation program for drivers which is in conformance with the defensive driving section of the California Highway Patrol Ambulance Service Handbook.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-14. - Public safety and fire agency certification.

Public safety agencies may certify and recertify public safety personnel as First Responders and EMT-1s. The State Fire Marshal may certify and recertify fire service personnel as EMT-1 and First Responders those persons who have completed a program of training approved by the State EMS Authority and the local EMS agency.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-15. - Fees for certification, authorization, accreditation and recertification.

Fees may be charged for certification/accreditation authorization, and recertification of EMT-Ps, MICNs, and EMT-Is in accordance with a fee schedule adopted by the board of supervisors. Such fees shall not exceed the actual cost of operation of the certification/accreditation or recertification service.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-16. - Continuing education.

Each certified/accredited authorized EMS person shall be required to successfully complete the minimum number of continuing education hours specified in accordance with State EMS regulations.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-17. - Cooperation with emergency department.

Ambulance personnel shall thoroughly familiarize themselves with the care rendered in emergency departments to ensure adequate and effective procedures on their part. It shall be the responsibility of ambulance personnel to meet with emergency department personnel of hospitals where they regularly deliver patients to discuss areas of concern to both hospital and ambulance company. If an impasse is reached in the resolution of problems, either party may request the EMS agency medical director to intervene and mediate differences.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-18. - Briefing of hospital personnel.

Whenever a patient is delivered to any facility, the ambulance personnel shall brief a facility staff member on the patient's condition and treatment rendered, unless the patient is being delivered to a base hospital which has been directing treatment. The ambulance personnel shall not be available for dispatch until necessary briefing has occurred. In the case of an interfacility transfer, all transfer paperwork must accompany the patient and shall be delivered to the receiving facility.

(Ord. No. 4386 § 1, 1991.)

Article V. - Medical and EMS Systems Control.

Sec. 28-19. - Policies and procedures.

The EMS agency medical director shall, in consultation with medical care providers and in conformance with accepted medical and administrative practices and state law, develop and implement policies and procedures for basic and advanced life support services within the EMS system. These policies and procedures shall include, but not be limited to, patient evaluation and treatment and EMS system operation and evaluation.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-20. - Base hospitals.

(a) The EMS agency medical director, with input from appropriate advisory committees, shall develop and implement criteria for the designation, operation, monitoring and evaluation of base hospitals.

(b) Base hospitals shall direct and be responsible for pre-hospital advanced life support on-line medical control.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-21. - Ambulance service franchise agreements.

(a) Exclusive Operating Areas. The local EMS agency may provide for emergency LALS and/or ALS ambulance services under a local plan which creates one (1) or more exclusive operating areas. A competitive process shall be utilized at periodic intervals to select the provider(s) of EMS for each exclusive operating area.

(b) Competitive Process. The EMS agency shall develop the request for proposal document. Notice of the competitive process shall be mailed prior to the time set for submission of all proposals, to each current ambulance service operator in the county, to all emergency medical care committee (EMCC) members and any other interested parties who have requested in writing to the EMS agency. A

pre-bid conference will be held for qualified bidders. Only bidders who attend this public conference will be able to submit proposals. Any proposal received after the time set for submission shall not be considered. An evaluation committee chosen by the director of public health shall review all proposals and submit a written report and recommendation to the director of public health, who shall consider the evaluation committee recommendation. The director of public health will submit a written report and recommendation to the board of supervisors who will approve or disapprove any proposed contract with the winning bidder.

In selecting an exclusive provider under this chapter, the EMS agency shall consider the comparative value of competing proposals, including the consideration of:

(1) The quality of the service to be provided;

(2) The level of service to be provided;

(3) The rates charged to the public for services provided;

(4) The cost, if any, to the county, cities or district;

(5) Documented evidence of ability to work effectively with local agencies;

(6) Experience in the provision of ambulance services;

(7) The financial stability of service to be provided;

(8) Labor considerations such as wages and benefits to field personnel.

(c) Specification of Exclusive Operating Areas. All ambulance service contracts shall specify the area within which the operator may provide ambulance services. No ambulance service operator may provide ambulance service for requests originating outside the area designated in the contract unless requested to do so by the central dispatch or under provisions outlined in written mutual aid agreements.

(d) Effect of Chapter on Exclusive Operating Areas. This chapter is not intended to supersede or otherwise modify the performance standards set forth in any agreement between the county of Sonoma and the recipient of any exclusive operating area.

(e) This section is intended to be consistent with and to carry out the purposes of the Emergency Medical Services and Prehospital Care Personnel Act (Health and Safety Code section 1797 et seq., and in particular sections 1797.8) and to assist the department of health services in carrying out its functions as the designated local EMS Agency. Except as provided in state law, nothing in this section is intended to limit the authority of the board of supervisors, including, but not limited to, the authority to enter into contracts. All references to the Sonoma County public health department or its director contained in this Chapter 28 shall be deemed to be references to the Sonoma County department of health services or its director.

(Ord. No. 5173 § 2, 1999: Ord. No. 4435 § 2, 1991; Ord. No. 4386 § 1, 1991.)

Sec. 28-22. - Briefing of new employees.

All new ambulance company and hospital personnel involved in the provision of pre-hospital care shall receive an orientation on the operations, capabilities and constraints of the EMS system before functioning in the system. Responsibility for the orientation shall be that of the employing entity. Content and format of the orientation shall be approved by the hospital medical director and EMS agency medical director.

(Ord. No. 4386 § 1, 1991.)

Article VI. - Miscellaneous Provisions.

Sec. 28-23. - Emergency and disaster operations.

During any "state of war emergency," "state of emergency" or "local emergency," as defined in the California Emergency Service Act (Chapter 7 of Division 1 of Title 2 of the Government Code), as amended, each ambulance service operator shall provide equipment, facilities, and personnel as required by the EMS agency medical director.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-24. - User complaints.

Complaints regarding emergency and ALS pre-hospital care services and/or charges shall be resolved at the lowest possible level. Any person who contends that he/she has received inadequate or inappropriate services or excessive or inappropriate charges shall be directed to attempt resolution of the dissatisfaction by meeting and discussing with the involved person, agency or entity involved. If this effort is unsuccessful, the complainant may file a written complaint with the EMS agency medical director. The EMS agency medical director shall refer the allegations to the service provider or other responsible person for a response within ten (10) county working days. If the matter cannot be resolved to the satisfaction of the complainant and EMS agency medical director, or if a response does not occur within ten (10) county working days, the EMS agency medical director shall submit the matter to an appropriately constituted subcommittee of the EMCC for recommendation or resolution. The EMCC subcommittee shall consist of an unbiased membership constituted to provide adequate professional expertise and consumer protection. If the EMCC cannot resolve the matter to the satisfaction of all parties, the complainant must resort to private legal resources for further resolution of the matter. The EMCC shall provide a response within thirty (30) county working days.

(Ord. No. 4435 § 2, 1991: Ord. No. 4386 § 1, 1991.)

Sec. 28-25. - Suspension and revocation of permits or certificates.

The EMS agency medical director may revoke any permit or certificate issued under provisions of this chapter when it has been found that any permittee or certificate holder violates any section of this chapter (or the rules and regulations promulgated thereunder) which related to his/her permit or certificate. With regard to certificate holders, all action taken by the medical director of the local EMS agency will be in conformance with state guidelines, local EMS agency policy, and California Code of Regulations Title 22.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-25.1. - Subpoena power.

Subpoenas, including subpoenas duces tecum, requiring a person to attend at a particular time and place to testify as a witness, may be issued in connection with any formal hearing involving the suspension or revocation of permits or certificates issued under the provisions of this chapter. Said subpoenas shall be issued at the request of the EMS agency medical director, the permit/certificate holder, investigation review panel, hearing officer or the EMS agency director. A subpoena duces tecum shall be issued only upon the filing with the clerk of the board of supervisors of an affidavit or declaration showing good cause for the production of the matters or things desired to be produced, setting forth in full detail the materiality thereof to the issues involved in the proceedings, and stating that the witness has the desired matters or things in his or her possession or under his or her control, and a copy of such affidavit or declaration shall be served in person or by certified mail, return receipt requested, and must be served at least five (5) days before the hearing for which the attendance is sought. Service by certified mail shall be presumed complete within five (5) days after mailing. Any subpoena or subpoena duces tecum issued

pursuant to the provisions of this chapter shall be deemed issued by and in the name of the board of supervisors of the county of Sonoma.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-26. - Appeal procedure.

The decision of the EMS agency medical director in any matter involving medical control or medical quality assurance shall be final and binding upon the permit/certificate holder. In any matter where this chapter provides that an administrative hearing body or the board of supervisors shall have administrative authority over appeals of non-medical issues, the body's or board's decision shall be final and binding upon the permit/certificate holder on the thirtieth day after the decision is rendered. Said final decisions shall be subject to the provisions of Code of Civil Procedure Section 1094.5 et seq. unless otherwise indicated herein.

(Ord. No. 4386 § 1, 1991.)

Sec. 28-27. - Enforcement.

Section 1-7 of the Sonoma County Code will apply to any and all violations of this chapter.

(Ord. No. 4386 § 1, 1991.)