



Contra
Costa
County

To: Board of Supervisors
From: LEGISLATION COMMITTEE
Date: April 17, 2018

Subject: Support for AB 1795 (Gibson): Emergency Medical Services: Community Care Facilities

RECOMMENDATION(S):

ADOPT a position of "Support" on AB 1795 (Gibson): Emergency Medical Services: Community Care Facilities, a bill that would authorize a local emergency medical services agency to submit, as part of its emergency services plan, a plan to transport specified patients to a behavioral health facility or sobering center in lieu of transportation to a general acute care hospital, as recommended by the Legislation Committee.

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☒ APPROVE

☐ OTHER

☐ RECOMMENDATION OF CNTY ADMINISTRATOR

☒ RECOMMENDATION OF BOARD COMMITTEE

Action of Board On: **04/17/2018** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

VOTE OF SUPERVISORS

AYE: John Gioia, District I Supervisor
Candace Andersen, District II Supervisor
Diane Burgis, District III Supervisor
Karen Mitchoff, District IV Supervisor
Federal D. Glover, District V Supervisor

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: April 17, 2018

David Twa, County Administrator and Clerk of the Board of Supervisors

By: June McHuen, Deputy

Contact: L. DeLaney,
925-335-1097

cc:

RECOMMENDATION(S): (CONT'D)

FISCAL IMPACT:

Unknown impact on County revenues and expenditures.

BACKGROUND:

Current law requires paramedics responding to emergency 911 calls to transport all patients who show signs of a non-emergent mental health condition and/or inebriation to an acute care emergency department, even though there may be more appropriate levels of care. While mental health urgent care and sobering centers can accept walk-ins and referrals made from law enforcement, hospitals, and other health care providers, paramedic ambulances are not allowed to transport patients to these alternative community care centers. However, mental health urgent care and sobering centers can offer inebriated patients or those experiencing a non-emergent mental health condition with more timely access to specialized care and to connect them with supportive services.

According to Fire Chief Carman and EMS Director Pat Frost, there is a need for a legislative solution so that paramedics and Emergency Medical Technicians (EMT's) can expand their scope of practice to provide services such as transporting patients to alternative destinations such as sobering centers, psychiatric facilities, etc.) and not just to emergency departments of acute care hospitals. Other states besides California have created such successful programs and regulations. Both Chief Carman and Director Frost recommend the support of AB 1795 (Gibson). At its February 12, 2018 meeting, the Legislation Committee considered the bill and voted to recommend its support to the Board of Supervisors.

AB 1795 is sponsored by Los Angeles County and is currently supported by the EMS Agency State Administrators, California Hospital Association and the California Ambulance Association. The bill was facing opposition from the California Nurses Association (CNA) and California ACEP (American College of Emergency Physicians), though it had been amended on April 2, 2018. No bill analysis has been prepared as yet.

Author:	Mike A. Gipson (D-064)
Title:	Emergency Medical Services: Community Care Facilities
Fiscal Committee:	yes
Urgency Clause:	no
Introduced:	01/09/2018
Last Amend:	04/02/2018
Disposition:	Pending
Committee:	Assembly Health Committee

A copy of the bill as amended on April 2, 2018 is available at:
http://leginfo.ca.gov/faces/billNavClient.xhtml?bill_id=201720180AB1795.

Attachment A include letters supporting and opposing the introduced bill.

LEGISLATIVE COUNSEL'S DIGEST

AB 1795, as amended, Gipson. Emergency medical services: ~~community care facilities.~~
behavioral health facilities and sobering centers.

Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act, establishes the Emergency Medical Services Authority, which is responsible for the coordination and integration of all state agencies concerning emergency medical services. Among other duties, the authority is required to develop planning and implementation guidelines for emergency medical services systems, provide technical assistance to existing agencies, counties, and cities for the purpose of developing the components of emergency medical services systems, and receive plans for the implementation of emergency medical services and trauma care systems from local EMS agencies.

The act also authorizes each county to develop an emergency medical services program and requires local EMS agencies to plan, implement, and evaluate an emergency medical services system. Existing law requires local EMS agencies to be responsible for the implementation of advanced life support systems, limited advanced life support systems, and for the monitoring of specified training programs for emergency personnel. Existing law defines advanced life support as special services designed to provide definitive prehospital emergency medical care, as specified, at the scene of an emergency, during transport to an acute care hospital, during interfacility transfer, and while in the emergency department of an acute care hospital until responsibility is assumed by that hospital. *Existing law makes it a crime to violate the act, or the rules or regulations adopted under the act.*

This bill would authorize a local emergency medical services agency to submit, as part of its emergency *medical* services plan, a plan to transport specified patients *who meet triage criteria* to a ~~community care facility, behavioral health facility or a sobering center, as defined, in lieu of transportation to a general acute care hospital.~~ *defined.* The bill would make conforming changes to the definition of advanced life support to include prehospital emergency care provided before and during, transport to a ~~community care facility, as specified. The bill would also direct the Emergency Medical Services Authority to authorize a local EMS agency to add to its scope of practice for specified~~

~~emergency personnel those activities necessary for the assessment, treatment, and transport of a patient to a community care facility.~~ *behavioral health facility or a sobering center. The bill would authorize a city, county, or city and county to designate, and contract with, a sobering center to receive patients, and would establish sobering center standards.*

This bill would require the authority to adopt guidelines for the triage criteria and assessment procedures by July 1, 2020, and would require the authority to annually analyze administration of local plans and to report, as specified.

By expanding an existing crime, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: MAJORITY Appropriation: NO Fiscal Committee: YES Local Program: ~~NO~~YES

ATTACHMENTS

Attachment A