

# Operations Subcommittee

of the Emergency Medical Care Committee



**Meeting Agenda:**  
**9 A.M., Thursday October 7<sup>th</sup>, 2021**  
**VIRTUAL via ZOOM**

<https://slohealth.zoom.us/j/99489235173?pwd=a245RUU0M1kyY0IyU2tvcFd6QUdqZz09>

**Meeting ID: 994 8923 5173**  
**Passcode: 748337**

**Members**

Jay Wells, *Sheriff's Department, CHAIR*  
 Mike McDonough, *Ambulance Providers*  
 Scotty Jalbert, *Office of Emergency Services*  
 Rhonda Durian, *Med-Com*  
 Adam Forrest, M.D., *Hospitals*  
 Chief Steve Lieberman, *Fire Service*  
 Joe Piedalue, *Ambulance Providers*  
 Rob Jenkins, *Fire Service*  
 Lisa Epps, *Air Ambulance Providers*  
 Aaron Hartney, *Air Ambulance Providers*  
 Steve Neumann, *CHP*  
 Chief Keith Aggson, *Fire Service*  
*TBD, Law Enforcement*  
 Chief Casey Bryson, *Fire Service*  
 Roger Colombo, *Field Provider-Paramedic*

**Staff**

STAFF LIAISON, Mike Groves, *EMS Coordinator*  
 Vince Pierucci, *EMS Division Director*  
 Thomas Ronay, M.D., *Medical Director*  
 Kyle Parker, *EMS Coordinator*  
 Rachel Oakley, *EMS Coordinator*  
 Amy Mayfield, *Administrative Assistant*

AGENDA	ITEM	LEAD
Call to Order	Introductions	Jay Wells
	Public Comment	
Discussion	EMS Update Classes, Implementation of TCP	Kyle Parker
Discussion	Amendments to Policy #350 MICN Initial Authorization	Mike Groves
Discussion	MCI Policy	Vince Pierucci
Discussion	Update on County COVID response and CHADOC operations	Vince Pierucci
Adjourn	Declaration of Future Agenda Items	Jay Wells
	Next Meeting: December 2, 2021, 9:00 A.M. Location: TBD (Virtual or In-Person)	

Draft

Operations Subcommittee  
of the Emergency Medical Care Committee



Meeting Minutes  
9 A.M., June 4, 2021

Members		Staff	
<input type="checkbox"/>	CHAIR Jay Wells, Sheriff's Department	<input checked="" type="checkbox"/>	Vince Pierucci., EMS Division Director
<input checked="" type="checkbox"/>	Mike McDonough, Ambulance Providers	<input type="checkbox"/>	Thomas Ronay, MD, Medical Director
<input type="checkbox"/>	Scotty Jalbert, OES	<input checked="" type="checkbox"/>	Rachel Oakley, EMS Coordinator
<input checked="" type="checkbox"/>	Rob Jenkins, Fire Service	<input checked="" type="checkbox"/>	Mike Groves, EMS Coordinator
<input type="checkbox"/>	Adam Forrest, MD, Hospitals	<input checked="" type="checkbox"/>	Kyle Parker, EMS Coordinator
<input checked="" type="checkbox"/>	Chief Steve Lieberman, Fire Service South County	<input checked="" type="checkbox"/>	Amy Mayfield, EMS Administrative Assistant
<input type="checkbox"/>	Joe Piedalue, Ambulance Providers		
<input checked="" type="checkbox"/>	Lisa Epps, Air Ambulance Providers (Mercy Air)		
<input type="checkbox"/>	Chief Casey Bryson, Fire Service North County		
<input type="checkbox"/>	Steve Neumann, CHP		
<input checked="" type="checkbox"/>	Chief Keith Aggson, Fire Service, Coastal	Guests:	
<input type="checkbox"/>	Roger Colombo, Field Provider, Paramedics		
<input type="checkbox"/>	Rhonda Durian, MedCom		
<input type="checkbox"/>	Vacant, Law Enforcement		

AGENDA ITEM / DISCUSSION	ACTION / FOLLOW-UP
<b>CALL TO ORDER</b>	
Introductions	M. Groves
Public Comment – None	
<b>APPROVAL OF MINUTES</b>	
Approval of Minutes <ul style="list-style-type: none"> <li>No quarum</li> </ul>	
<b>ACTION / DISCUSSION ITEMS</b>	
<p>Amending of Policy #205 and #209, addition of Wildland Engine</p> <p><b>Policy #205</b> K. Aggson added this is a high functioning AED that is currently carried. R. Jenkins asked if this is an AED Pro? M. McDonough asked if it has synchronized cardioversion capabilities. It does not. S. Lieberman – Type 3 wildland, storage is very limited. States he appreciates the request. R. Jenkins – Functions as a 3 lead cable. Allows you to look and see a rhythm, no on the cardiac version. M. McDonough states this is similar to San Diego County R. Jenkins states this is a very common AED for this purpose. M. McDonough states he fully supports project. K. Aggson states this has no cardiac capability and this is the minimum requirement AED. C. Bryson – Fully supports</p> <p><b>Policy #209</b> R. Jenkins spoke regarding splitting inventory. Two on two on foot, rest on vehicle. Doesn't like the split up. Interrupts the care of more than one patient. Example being a burn out. V. Pierucci states it affects Chain of Custody/burn out. Being away from the controlled substance. Don't want to leave unattended. Will take back to Tom Ronay, MD.</p> <p><b>Local Optional Scope of Practice (LOSOP) Unified Scope for Qualified Providers</b> <b>Draft Policy #157 FP-C / CCP-C Unified Scope of Practice</b></p> <p>K. Parker Open up for discussion L. Epps states this is done in other counties, nurses are allowed to do this, paramedics are not. Would like a unified manner.</p>	<p>Members present recommend moving Policy #205 to EMCC for discussion</p> <p>Members present recommend moving Policy #209 with suggested changes to EMCC for discussion</p> <p>Members present recommend moving new Draft Policy #157 to EMCC for discussion</p>

AGENDA ITEM / DISCUSSION	ACTION / FOLLOW-UP
<p><b>Update on County COVID Response and EOC operations</b></p> <p>V. Pierucci – Cases are down. We are in the 50/day range in active cases. Hospitalizations are 2 to 3 per day. In process of demobing the EOC. Putting plans together to activate CHADOC. Big focus is looking for the space. Meeting with Realty Property to discuss. Will be out of EOC end of July. Just trying to wrap up and keeping minimal amount of people. New guidelines should be coming out. In person to resume. Everyone who is vaccinated will not be required to wear masks. There is some concern come Fall. Concerned about a surge on the operations side.</p> <p>M. Groves – Are we moving to the next tier?</p> <p>V. Pierucci – The possibility is slim. The blueprints for that are going away.</p> <p>S. Lieberman – Regarding mask guidance. City HR and Cal OSHA to talk about unvaccinated employees' requirement to wear masks at all times.</p> <p>V. Pierucci – Dr. Penny Borenstein is frustrated regarding this. CALOSHA met yesterday and again this evening to finalize recommendations.</p> <p>M. Groves – Mandatory vaccinations – not required. Emergency Use Authorization should be moved to Full Use Authorization to require.</p>	
<b>ADJOURN</b>	
<p><b>Declaration of Future Agenda Items:</b></p> <p>R. Jenkins – Policy 200 – Scene management. Address communications with ambulance after dispatch.</p> <p>M. Groves – Transcutaneous Pacing</p> <p>K. Parker – October 1<sup>st</sup> memo will go out regarding paramedic EMS yearly training. This will take place July, August &amp; September.</p> <p>S. Lieberman – Skills renewals for EMTs</p> <p>R. Jenkins – Would like to revisit revising MCI policy</p>	
<b>Motion to Adjourn</b>	Adjourned: 0938



**COUNTY OF SAN LUIS OBISPO HEALTH AGENCY**

**PUBLIC HEALTH DEPARTMENT**

**Mike Hill** *Health Agency Director*

**Penny Borenstein, MD, MPH** *Health Officer/Public Health Director*

MEETING DATE	October 7, 2021
STAFF CONTACT	Mike Groves 805.788.2514 <a href="mailto:mgroves@co.slo.ca.us">mgroves@co.slo.ca.us</a>
SUBJECT	Amend Policy #350 MICN Initial Authorization
SUMMARY	<p><b>Policy #350 MICN Authorization:</b></p> <p>We had a request from an ED manager to waive the one-year experience requirement for new ED RNs if they had prior paramedic experience. There are several paramedics who recently completed the Cuesta College nursing program and have been hired as ED nurses. The ED managers would like to use their knowledge and experience in EMS as MICNs immediately on completion of licensing, ED training, and completion of the MICN authorization course. This is particularly important for those new nurses assigned to night shifts where the hospitals have had difficulty in hiring and retaining qualified RNs to act as MICNs. This proposal has the support of all the ED managers, MICN liaisons, and EMS Agency staff.</p>
REVIEWED BY	All County Hospital ED Managers and MICN Liaisons, EMS Staff, Vince Pierucci
RECOMMENDED ACTION(S)	Review and approve to submit to EMCC.
ATTACHMENT(S)	Draft policy #350

**County of San Luis Obispo Health Agency**

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## **ThePOLICY #350: MOBILE INTENSIVE CARE NURSE INITIAL AUTHORIZATION**

### I. PURPOSE

- A. To establish criteria for the initial authorization of Mobile Intensive Care Nurses (MICN) in the County of San Luis Obispo (SLO).

### II. SCOPE

- A. This policy applies to all California licensed Registered Nurses, who work in the Emergency Department (ED) for a Base Hospital in the County of SLO, wishing to obtain authorization as an MICN.

### III. POLICY

- A. A current and valid California Registered Nurse license and local authorization are required to practice as an MICN in the County of SLO.
- B. Only MICNs with a current authorization may represent themselves as an MICN. Individuals not currently authorized as an MICN who represent themselves as such may be subject to discipline as outlined in Emergency Medical Services (EMS) Agency Policy# 300: Investigation and Disciplinary Process.
- C. All initial authorization candidates must complete the following before applying for initial authorization:
  - 1. EMS Agency Initial Authorization Course and pass the written examination with a minimum score of 80%. The course instructor will evaluate any candidate who fails to pass the testing and evaluation process and recommend to the EMS Agency Medical Director further evaluation or training, as required.
  - 2. Complete the following within 3 months of passing the initial MICN authorization course:
    - a. An orientation to Base Hospital radio operation techniques and hardware provided by the Paramedic Liaison Nurse at the candidate's Base Hospital utilizing the EMS Agency Orientation Checklist – Attachment B.
    - b. A minimum of fifteen (15) paramedic radio calls proctored by an authorized MICN, a minimum of ten (10) calls must be advanced life support (ALS). Record each call, utilizing the EMS Agency Proctoring Form – Attachment C, indicating date, time, and nature of the case (e.g., major trauma, syncope, chest pain). The candidate and the proctoring MICN must sign each recorded call.
    - c. Four (4) hours of orientation at the County of SLO Sheriff's Department ambulance dispatch center, MedCom. The dispatcher providing the orientation will complete and sign the EMS Agency MICN Field Orientation Checklist – Attachment D.

- D. Candidates for initial authorization must apply to the EMS Agency in person, by mail, fax or E-mail, and pay the non-refundable application fee.
- E. Candidates whose checks return for insufficient funds may be subject to disciplinary action as outlined in EMS Agency Policy# 101: Fee Collection.
- F. All information on the EMS Agency application is subject to verification. Candidates who supply information found to be fraudulent will be subject to the disciplinary process outlined in EMS Agency Policy# 300: Investigation and Disciplinary Process.
- G. Authorization will be for a maximum of two years:
  - 1. The effective date of authorization will be the date the candidate meets all local requirements as demonstrated to the EMS Agency.
  - 2. The authorization will expire:
    - a. Two years from the completion date of the initial MICN authorization course, or
    - b. On the date, the MICN no longer meets authorization requirements.
- H. Once authorized as an MICN, based on the continuous quality improvement process the employer or EMS Agency Medical Director may determine that a MICN needs additional training, observation or testing. The employer, the EMS Agency Medical Director or his/her designee, may create a specific and targeted program of remediation based upon the identified need of the MICN. If there is disagreement between the MICN, the employer and/or the EMS Agency Medical Director, the decision of the EMS Agency Medical Director will prevail.
- I. If the individual fails to complete this targeted program of remediation the EMS Agency Medical Director may suspend authorization for a minimum of one (1) year and up to two (2) years.
- J. As a condition of continued authorization, a MICN must attend and pass all mandated training as may be required from time to time by the EMS Agency.
- K. It is the responsibility of the MICN to notify the EMS Agency within 7 days of any arrest or change in their eligibility status. Failure to report such actions may result in disciplinary action.
- L. The EMS Agency Medical Director must approve exceptions to any authorization requirements.

#### IV. PROCEDURE

- A. A candidate for initial MICN authorization in the County of SLO must complete the EMS Agency application – Attachment A, and supply documentation establishing eligibility for authorization as follows:
  - 1. Current California Registered Nurse license

2. Current certification as a Cardiopulmonary Resuscitation (CPR) Provider according to the standards for professional rescuers of the American Heart Association or other course approved by the EMS Agency Medical Director.
3. Current Advanced Cardiac Life Support (ACLS) provider certification issued by the American Heart Association or other course approved by the EMS Agency Medical Director.
4. Provide a letter of employment from a County of SLO Base Hospital indicating current employment in their ED with a minimum of one-year experience in ED nursing. ED nurses who have held a California Paramedic License and worked as a Paramedic within two years preceding their MICN application may use that experience in lieu of the one-year minimum experience in ED nursing.
5. Proof of completing the initial MICN authorization course.
6. Completed and signed EMS Agency Orientation Checklist – Attachment B, orientation to Base Hospital radio operations.
7. Completed and signed EMS Agency Proctoring Form – Attachment C, documentation of fifteen (15) proctored radio calls.
8. Completed and signed EMS Agency MICN Field Orientation Checklist – Attachment D, MedCom orientation.
9. Pay the established non-refundable authorization fee.

#### V. AUTHORITY

- Health and Safety Code, Division 2.5, Chapter 2, Section 1797.56; Chapter 3, Article 5, Section 1797.175; Chapter 4, Article 1, Section 1797.210; and Chapter 4, Article 1, Section 1797.213(a)

#### VI. ATTACHMENTS

- A. MICN Authorization Application Form
- B. Base Hospital Orientation Checklist
- C. Base Hospital Proctoring Form
- D. MedCom Orientation Checklist