

COUNTY REPORT

EMCC Prehospital/Hospital Subcommittee

January 8, 2026



UPDATES

- EMSA Hospital Hub Access
- Implementation of System Changes (January 6)
- Data Collection on International Border Transports
- No-Notice Ambulance Arrival Data Collection
- Vaccination Local Optional Scope of Practice
- System Policies Effective February 1
- AB 40 and APOT Audits



EMSA HOSPITAL HUB ACCESS



EMSA Hospital Hub Access

- EMSA-hosted Hospital Hub is similar to the LEMSIS-hosted Hospital Hub
- EMSA-hosted site allows facility users to view and retrieve ePCRs
 - Would display all ePCRs that were received at the facility regardless of originating county and submitted to CEMSIS
 - LEMSIS Hospital Hub already displays ePCRs from San Diego, Orange, and Riverside

EMSA Hospital Hub Access

- Update to access process
 - EMSA removing stale user accounts
 - Facility users may request an account through the LEMSA
 - Account request form posted on the County EMS LEMESIS webpage

 **California EMS Information System (CEMSIS) Hospital Hub and Patient Registry**

This form is intended for use by any hospital participating as a 911 EMS receiving facility for access to either:
ImageTrend Hospital Hub - ePCR data created by an EMS provider agency utilizing ImageTrend software, transported to your facility
-OR-
ImageTrend Patient Registry - a portal for uploading hospital data specific to specialty care programs for Trauma, STEMI, or Stroke, as defined in California Health and Safety Code and the California Code of Regulations.

Hospital Name: _____ Local EMS Agency:
(where the hospital is geographically located)

ImageTrend Hospital Hub: This database contained electronic patient care reports (ePCR) completed by EMS providers using ImageTrend NEMESIS/CEMSIS compliant software. Individuals granted access will gain access to ePCRs transported to their facility ONLY by any EMS provider agency using ImageTrend software from any LEMSA. Please enter the information required for individuals requesting access below:

Last Name	First Name	Email	Requested User ID	Primary Role



IMPLEMENTATION OF SYSTEM CHANGES

Effective January 6, 2026



MAIN CHANGES

- Updates to the Base Hospital Report (BHR)
- Implementation of provisional quality management policies

BHR UPDATES

- The BHR has been streamlined to focus on documentation of Online Medical Direction (OLMD)
- MICNs are only required to document incidents beyond standard notification, such as when an MICN or Base Hospital Physician directly influences a patient's treatment plan or destination
 - A few examples include:
 - Base Hospital Orders, Base Hospital Physician Orders, or Emergency Protocol Exceptions were requested or given
 - Advice or guidance was provided (e.g., Against Medical Advice or release disposition, physician-at-scene, or suggesting treatments)
 - Destination changes made by the Base Hospital (e.g., specialty diversion)
 - Clinical consultation with physician input
 - Any incident in which the MICN would like radio communication reviewed in the quality management process

BHR UPDATES

- These changes should have no impacts to EMS provider agencies
 - Base Hospital reporting requirements remain the same
 - LEMSIS users should continue to upload PCRs and use the modified radio report as outlined in Policy S-415
- There may be future adjustments to process and procedures in the future as we move forward

QUALITY MANAGEMENT BACKGROUND

- An updated, comprehensive Quality Management Plan was identified as a critical gap in the Base Station Hospital System consultant's report
- Development of the plan was a key priority and a final draft was posted and distributed on November 25, 2025
- The plan was developed through extensive collaboration with the Quality Management Task Force and the EMS Delivery System Redesign Steering Committee
- The document is publicly available and intended to be a living resource that will evolve with system redesign efforts
- Implementation will be supported by ongoing development of policies and processes



COUNTY OF SAN DIEGO
EMERGENCY MEDICAL SERVICES
Emergency Medical Services
Quality Management Plan

County of San Diego
Public Safety Group
San Diego County Fire

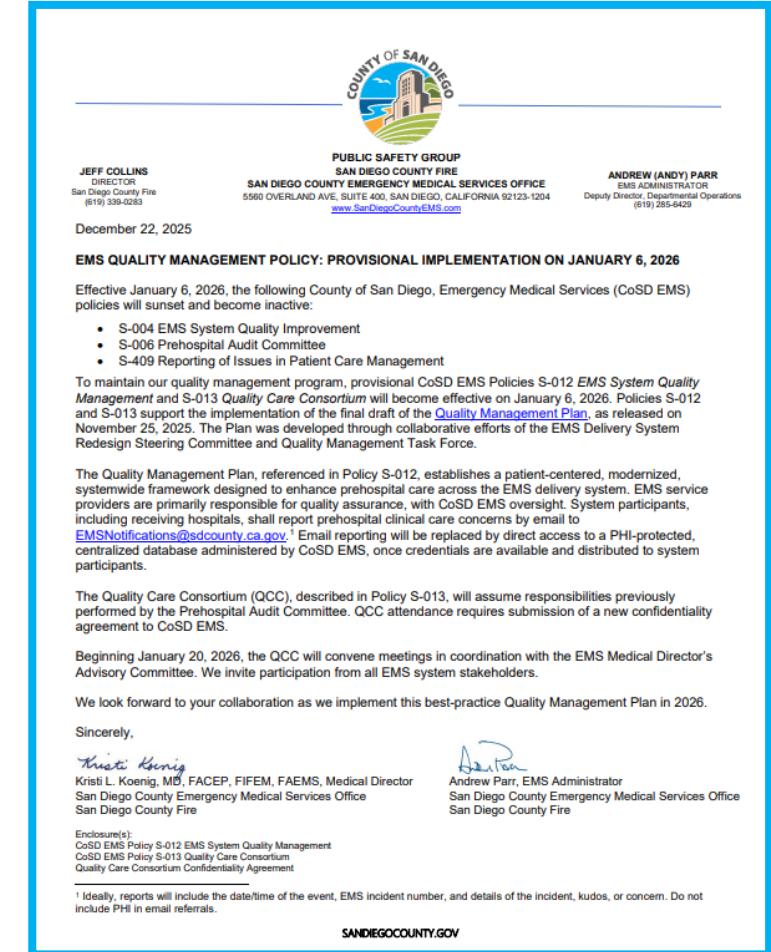
POLICY DEVELOPMENT AND UPDATES

- Policies were developed to support the Quality Management Plan
- Memo distributed on December 22, 2026
- Policy changes effective January 6, 2026
 - Policies sunset:
 - S-004 EMS System Quality Improvement
 - S-006 Prehospital Audit Committee
 - S-409 Reporting of Issues in Patient Care Management
 - Policies implemented:
 - S-012 EMS System Quality Management
 - S-013 Quality Care Consortium
- Policies will be reviewed and adjusted as we trial these new processes

	SYSTEMS	S-012
	EMS SYSTEM QUALITY MANAGEMENT	
	Date: 1/6/2026	Page 1 of 3
I. PURPOSE		
A. To identify primary responsibilities of all participants in the County of San Diego, Emergency Medical Services (CoSD EMS) system for the achievement of optimal quality of prehospital care for patients who access the system.		
B. To improve the quality and effectiveness of the EMS system through ongoing review and evaluation.		
II. AUTHORITY: Health and Safety Code, Division 2.5, Sections 1797.204, 1797.220, 1798, 1798.100, and 1798.102.		
III. DEFINITION(S)		
Quality Management (QM): A systematic, continuous process for evaluating and improving the quality of prehospital care. It encompasses both quality assurance and quality improvement activities, focusing on the structure, processes, and outcomes of care delivery. Quality Management aims to ensure high-quality, equitable, and evidence-based patient care by identifying deficiencies, analyzing root causes, implementing corrective actions, and supporting data-driven system improvements.		
Emergency Medical Services System Quality Management Program (EMS QM Program): Methods of evaluation that are composed of structure, process, and outcome evaluations which focus on improvement efforts to identify root causes of problems, intervene to reduce or eliminate these causes, and take steps to correct the process and recognize excellence in performance and delivery of care.		
Emergency Receiving Center: A general acute care hospital that receives patients from EMS service providers through the 9-1-1 system or interfacility transfers.		
Quality Assurance (QA): A systematic process for reviewing individual patient care encounters to identify, analyze, and address potential or actual deviations from expected clinical standards, with the goal of ensuring safe, effective, and consistent prehospital care.		

INTERIM REPORTING PROCESS

- System participants, including receiving hospitals, shall report prehospital clinical care concerns by email to EMSNotifications@sdcounty.ca.gov
- Ideally, reports will include:
 - Incident date/time
 - Incident number
 - Pertinent details, kudos, or concerns
- Do not include PHI in email referrals
- Email reporting will be replaced in the near future by direct access to a PHI-protected, centralized database administered by CoSD EMS
 - Credentials will be distributed to system participants once available
- Agencies will be notified via email if a case is referred that involves their personnel



INTERNATIONAL BORDER TRANSPORTS

Data Collection



INTERNATIONAL BORDER TRANSPORTS

- Continue to meet regularly with the Medical Emergency Regulatory Center for Tijuana (CRUM)
- Developed an online form to capture information on cross-border transports
 - CRUM will complete the form and provide information such as:
 - Patient age
 - Patient gender
 - Mexican ambulance agency
 - Scene type (911 or IFT)
 - Referring hospital
 - Requested destination
- Data collection began on December 1

Mexican Ambulance
Notifies CRUM

CRUM Notifies County
EMS (Online Form)

County EMS
Reviews Data

NO-NOTICE AMBULANCE ARRIVALS

Status Report



BACKGROUND

Purpose

- To gather information on ambulance arrivals with a focus on no-notice or late notifications to help inform the system redesign process

Goal

- To establish a baseline understanding of how frequently no-notice ambulance arrivals are occurring across the County

Approach

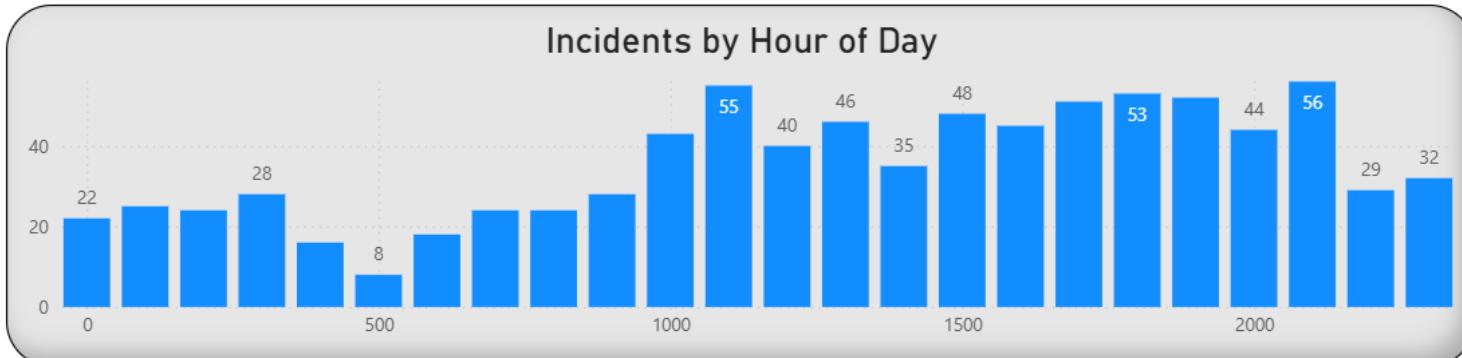
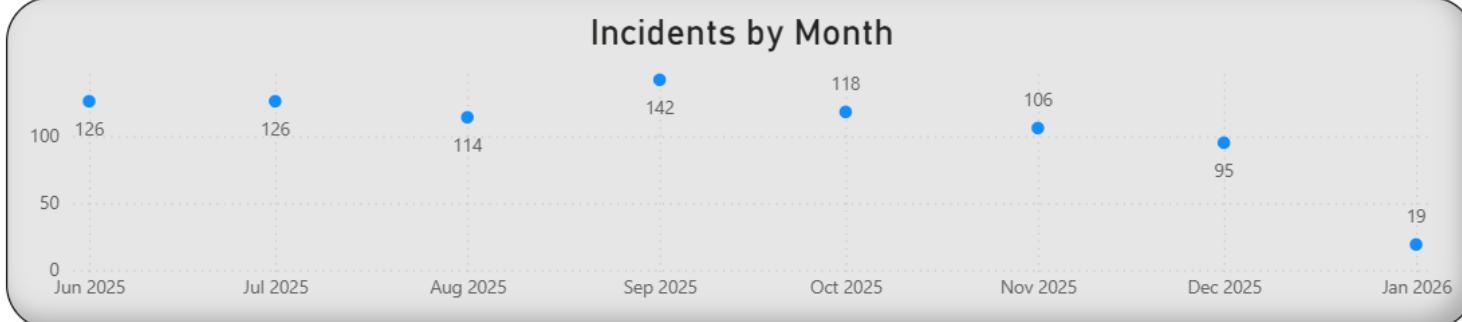
- Develop a simple and standardized reporting process for all receiving centers

Timeline

- Flyer was distributed to receiving centers in June 2025 and data collection will continue throughout redesign process



DATA COLLECTION



NEXT STEPS

- Continue to report no-notice ambulance arrivals
- Data will be used to track improvements when pilots are launched in Spring 2026



 COUNTY OF SAN DIEGO
EMERGENCY MEDICAL SERVICES

No-Notice Ambulance Arrival

Please complete the fields below to report an incident where an ambulance arrived without notification to the emergency department.

When you submit this form, it will not automatically collect your details like name and email address unless you provide it yourself.

* Required

1. Hospital: *

Select your answer

2. Incident Date: *

Please input date (M/d/yyyy)

3. Incident Time: *

Enter in 24-hour format (hh:mm)

Enter your answer

4. EMS Agency *

Select your answer

5. EMS Agency Unit Number (if known):

Enter your answer

6. Did you receive notification after arrival (e.g., from Base Hospital)?

Yes

No

7. Additional comments or feedback:

Enter your answer

Submit

VACCINATION LOCAL OPTIONAL SCOPE OF PRACTICE (LOSOP)

Status Report



VACCINATION LOSOP

- Received approval from EMSA on October 14, 2025 for EMTs, AEMTs, and Paramedics to administer vaccines
- CoSD EMS Medical Director currently authorizing COVID-19 and influenza vaccination for adults and children
 - Possible future expansion (e.g., hepatitis A, mpox, measles)
- There are seven participating agencies so far
 - American Medical Response
 - Chula Vista Fire Department
 - Falck Mobile Health Corp.
 - Lakeside Fire Protection District
 - National City Fire Department
 - San Diego County Fire
 - Santee Fire Department

VACCINATION LOSOP

- 43 vaccinations reported to date
- The LOSOP enables EMS service providers to participate in both internal and external vaccination campaigns
- If interested in participating, email
EMSNotifications@sdcounty.ca.gov
- Approved agencies will receive:
 - Training materials for EMS clinicians
 - CoSD EMS Protocol S-190 Immunization clinical and operational requirements
 - CPDH/WCHA respiratory virus season immunization recommendations

SYSTEM POLICIES

Effective February 1, 2026



SYSTEM POLICIES

- The following policies will go into effect on February 1, 2026:
 - S-070: Special Program Authorizations
 - S-306: Emergency Medical Services Continuing Education
 - S-620: LEMSA Data Use Standards
- Policies are publicly available on the homepage of the CoSD EMS website

AB 40 AND APOT AUDITS



BACKGROUND



Emergency regulations were approved by the EMS Commission on June 18, 2025. OAL approved the emergency regulations which took effect June 23, 2025.



Audit reports became available in the CA EMSA APOT Audit Tool in July 2025.



What are the LEMSA's responsibilities?



APOT audit meetings began at the end of August 2025. Currently all eligible ED receiving facilities have scheduled monthly APOT audits

UPDATES

- EMSA / APOT Audit Tool updates
- Proactive vs. Retrospective
- Future hospital-agency audit meeting scheduling



 COUNTY OF SAN DIEGO

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Monthly APOT Mitigation Meeting
Agenda

I. Welcome and Roll Call

- a. CoSD EMS Office Announcements
 - i. Updates from EMSA
 - ii. How to change times|
 - iii. New Agenda Format
- b. Documentation Updates

II. Healthcare Organization

- a. APOT Trends
 - i. Issues with patient offloading
 - ii. Facility stress and mitigation
 - iii. Challenges with EMS personnel

III. EMS Agencies

- a. APOT Trends
 - i. Issues with patient offloading
 - ii. System stress and mitigation
 - iii. Challenges offloading at ED

IV. APOT Review

- a. Unresolved Audit Review

* We will be reviewing November APOT audit reports

*Agencies included in audit: San Diego Fire & Rescue, AMR, Chula Vista Fire