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EMERGENCY MEDICAL CARE COMMITTEE (EMCC)
Prehospital/Hospital Subcommittee Meeting
Brian Covell, RN, Chair / Julie Phillips, MD, Vice Chair
c/o SD County Emergency Medical Services Office
County Operations Center | 5560 Overland Ave, Rm 172, San Diego 92123
Thursday, April 9, 2026

Minutes

IN ATTENDANCE

Members

Cochran, Jennifer – County Paramedic Agencies Committee (Alt)
Covell, RN, Brian – Base Hospital Nurse Coordinators' Committee
Forney, Paul – SD County Ambulance Association
Phillips, MD, Julie – SD County Medical Society
Rauto-Shin, Roxanne – County Paramedic Agencies Committee

County Staff

Assof, Michael
Christison, Brian
del Toro, Nicole
Gonzalez, Evelin
Trousdale, Brad

Agency Representatives

Chandler, Craig – Stryker
Kahn, MD, Christopher – SDFD/UCSD
Killy, Kecia – Stryker
Scott, MD, Christopher – Kaiser
Sullivan, Don – AMR

I. CALL TO ORDER/ INTRODUCTIONS/ ANNOUNCEMENTS

- A. Brian Covell, Chair, called the meeting to order at 9:30 am.
B. There were no introductions.
C. There were no announcements.

II. APPROVAL OF MINUTES

A motion was made by Roxanne Rauto-Shin, seconded by Brian Covell to approve the meeting minutes from February 12, 2026. Motion carried.

III. PUBLIC COMMENTS/ PETITIONS

There were no public comments or petitions.

IV. COUNTY REPORT – Michael Assof, EMS Coordinator

- Health Services Capacity Plan Level: Plan Level 5 – Baseline Surveillance Southern California Fire Preparedness Level: Plan Level 1
- EMSA Regulation Updates:
The Emergency Medical Services Authority (EMSA) announced that the Office of Administrative Law (OAL) did not approve the submitted Chapter 6 – Specialty Care Program regulation package because of issues with clarity and procedural compliance. EMSA is currently revising the regulatory package to resolve these concerns.

EMSA posted updated draft Ambulance Patient Offload Time regulations for a 15 day public comment. These regulations support the AB-40 APOT statute. Updates include minor modifications to data collection and the hospital data audit process, as well as modifications to address other issues identified during the first months of the new state process. The public comment period for both packages concludes April 17.

- New EMSA Centralized Registry System went live on April 1.
This new system aims to simplify processes, increase transparency, improve data accuracy, and deliver a more efficient user experience for certifying entities, training programs, and EMS professionals statewide. The updated Centralized Registry System will act as a single platform for managing credentials, tracking records, generating reports, and ensuring compliance, promoting greater consistency and accountability throughout the EMS system. More details can be found on the EMSA website.
- National Pediatric Readiness Survey:
The National Pediatric Readiness Project (NPRP) is performing a new national assessment to evaluate how prepared Emergency Departments are to care for children. The assessment opened on March 3, and local ED leadership should have received an email from EMSA requesting their participation. EMSA's goal is to have 100% of California hospitals to complete the survey. The survey should be completed by the ED Manager, along with ED leadership, Pediatric Emergency Care Coordinators, and trauma coordinators. It typically takes about 30-45 minutes to finish, though extra time might be needed for preparation. For more details, visit the NPRP website at www.PedsReady.org
- EMS Fees will increase July 1, 2026:
The fiscal arm of County Fire has announced that we are entering the third year of a planned three-year staggered fee schedule increase to all County Fire Programs. Fees are being increased for Fire Marshal plan reviews, Fire inspections and EMS Office Fees. The County Fire fee schedule will be considered by the Board of Supervisors on May 6, 2026, and then again on May 20, 2026.
- EMS System Redesign Process Policy Modification Listing:
The EMS System Redesign is underway. On January 6, the new Quality Management process commenced, shifting from a fragmented legacy system to a centralized, countywide monitoring process managed by the EMS Office, with EMS agencies responsible for case dispositions.

Earlier this month, EMS launched two of three Prehospital Notification Pilot platforms. Users in the pilot areas are providing feedback on the information, advice, strengths, and weaknesses of the tested products. The Core Group and Steering Committee are monitoring these pilots closely. The final Pilot Study is planned to start around May 1, pending final agreements from all participants.

The Trauma Center Catchment (TCC) Task Force has been gathering information and working with FirstWatch to create a tool that assists a communication center to assist paramedics in identifying the most accessible Trauma Center under a study project. Although more work is needed, considerable progress has been made. A reminder: the consultant's final reports to the Board, group charters, and periodic updates are accessible on the San Diego County Engage Page.

- EMS Treatment Protocol Updates:
We are preparing to implement significant updates to EMS protocols this year, focusing on three key areas:

- 2025 AHA Guidelines
- Obstetrical emergencies
- Trauma care, with specific revisions to the trauma decision algorithm

As part of these changes, magnesium sulfate will be introduced as a new medication for ALS providers to treat preeclampsia and eclampsia. These draft protocols were developed in collaboration with the EMS Protocol Workgroup and reviewed by the EMS Medical Director's Advisory Committee in January and February.

Effective July 1, 2026:

- ALS first responder units and ALS ground ambulances must carry one (1) unit of magnesium sulfate (5 gm/10 mL), which can be a vial or prefilled syringe.
- BLS ground ambulances must be equipped with an oxygen saturation monitoring device, including one adult probe and one pediatric probe.
- No Notice Arrival:
San Diego County EMS collects data on ambulance arrivals at emergency departments, focusing on no-notice and late notifications that can indicate short transports or operational issues. This data will guide the EMS System Redesign. Data collection occurs through two channels: one from emergency departments and another from field providers. ED staff can complete a 30-second survey by phone or browser, or download a QR code flyer. If EMS providers encounter Communication Failure, they should still use the P-405A Report, available via Elite EPCR or mobile app. Over 900 reports have been received so far.
- A. Supraglottic Airway Device Survey
- B. Quality Management Process
- C. Cyanide Poisoning LOSOP

Michael Assof, EMS Coordinator, shared the following presentation with the group that covered the above topics A.,B., and C.: [County Report Updates](#)

- D. Policy P-401 – Michael Assof, EMS Coordinator

The draft update to Policy P-401, reflecting the addition of magnesium sulfate as an approved medication for paramedic use, was presented to the committee. Members agreed that this revision is non-substantive and serves only to align the policy with treatment protocols taking effect in July; therefore, no public comment period or further committee action is required.

V. SYSTEM POLICY REVIEW (VOTE)

- A. S – 060: Online Medical Recordings and Maintenance – Brian Christison, Group Program Manager

Policy S-060 draft was brought to this group in February. Comments were received and currently working through them before posting this policy for another round for public comments. More to come.

VI. NEW BUSINESS

No new business.

VII. OLD BUSINESS

- A. Spare Wheel Exemption Process and Strategy – Brian Christison, Group Program Manager

California Highway Patrol (CHP) regulations require privately owned ambulances to maintain a number of specific items, including a spare wheel. State regulations also allow the Board of Supervisors for each county to request waivers from the CHP Commissioner for certain items on the list. The Board of Supervisors has requested authorization every three years for ambulances,

including public ambulances, to not carry the regulation-required spare wheels.

Years ago, CHP informed the San Diego County EMS Office that requesting exemptions for publicly owned ambulances was no longer necessary, so those requests ceased.

However, the San Diego County EMS Office has continued to seek waivers on behalf of three private entities.

At the last meeting, the group was asked for their input and recommendations on how our LEMSA should handle this time-consuming process needed to maintain this exemption. Group discussion ensued.

ACTION: The group will continue to research through networks.

VIII. NEXT MEETING/ADJOURNMENT

The next EMCC Prehospital/Hospital Subcommittee meeting is scheduled for June 11, 2026, at 9:30 am at 5560 Overland Avenue, Rm 172, San Diego 92123. Meeting adjourned at 10:17 am.