Dr. Sam Stratton,

As part of the City of Costa Mesa Fire Departments reorganization and in an effort to maximize resources and improve pre-hospital patient care, the Costa Mesa Fire Department (CMFD) will be placing two Paramedic Assessment Unit's (PAU) in service and redesignating one Advanced Life Support (ALS) paramedic unit on July 1, 2014 at 07:30. By placing the two PAU’s in service along with redeploying the ALS unit CMFD will be adding one paramedic unit to our level of care to the citizens and visitors of Costa Mesa. Currently, CMFD has five (5) ALS units and one (1) PAU in service however, with the redeployment on July 1, 2014 we will have four (4) ALS and three (3) PAU’s in service.

Currently, we have two paramedic engine companies MME81 out of fire station 1 and MME84 out of fire station 4 staffed with one Fire Captain/EMT, one Fire Engineer/EMT and two Firefighter Paramedics respectively. The CMFD plans to re-designate both MME81 and MME84 to PAU’s with one Fire Captain/EMT, one Fire Engineer/EMT and one Firefighter Paramedic assigned. Both ME81 and ME84 as a PAU will be equipped with a full complement of ALS and BLS equipment, supplies and record keeping as defined in OCEMS Policies #325.00 and #330.70. Included in the ALS drug inventory will be Versed, Morphine Sulphate and Adenosine. Both ME81 and ME84 will also abide by OCEMS policy #300.10 pertaining to documentation and reporting. Currently, all CMFD suppression personnel are trained to operate and complete the OC Meds ePCR.

With MME81 becoming a PAU we will place in service an ALS unit with two firefighter paramedics assigned. The designated ALS unit will be assigned to fire station 1 (Royal Palm) and will be known as Mesa Medic 81 (MM81). MM81 responds from the same location as ME81, Costa Mesa Fire Station 1, 2803 Royal Palm Drive, Costa Mesa, CA and the station phone number is (714) 327-7410.

MME84 will become ME84 and will be staffed as a PAU out of fire station 4 (Placentia) and respond from the same location, Costa Mesa Fire Station 4, 2300 Placentia, Costa Mesa, CA and the station phone number is (714) 327-7440.
Attachment “A” of this written application is the CMFD Standard Operating Procedures that relates to staffing and operations of a PA Unit. As mentioned in the attached Standard Operating Procedure, CMFD will staff PA Units with a minimum of one paramedic at all times and the assigned paramedic will have a minimum of one year of experience as a paramedic in Orange County. The paramedic assigned to the PA Unit will be responsible for keeping the unit properly stocked with the appropriate ALS equipment and supplies. All medical aides that a PA unit responds to will also have a paramedic unit assigned to that response. Once on scene, the PA Unit will have the ability to modify the response of additional units as deemed appropriate by the paramedic performing the assessment.

Deputy Fire Chief
Fred Seguin

[Signature]
COSTA MESA FIRE DEPARTMENT
STANDARD OPERATING PROCEDURES MANUAL

SECTION: Emergency Medical Services   O-DATE: January 1, 2014
SUBJECT: Paramedic Assessment Unit (PAU)   R-DATE: N/A

AUTHORITY: This policy is issued by the authority of the Fire Chief.

PURPOSE: To establish a policy covering Paramedic Assessment Units.

SCOPE: This policy applies to all members of the fire department.

RESPONSIBILITY: All members shall adhere to this policy.

POLICY:
A Paramedic Assessment Unit (PAU) shall be continuously staffed with an OCEMSA accredited paramedic with at least one year of experience, an OCEMSA certified EMT Fire Engineer and an OCEMSA certified EMT Fire Captain.

Equipment
- PAU Paramedic is responsible for all EMS related daily, weekly, and monthly inventories and checks.
- Narcotics are handled by the PAU paramedic only. Both oncoming and off going paramedics will inventory narcotics together, and initial the CMFD drug log.

Electronic Patient Care Report (EPCR)
- The Captain or Engineer is responsible for patient documentation and will sign in on the EPCR under their own name at the beginning of each shift.

Note: Following OC EMSA policy a PAU paramedic must be assigned “patient medic”.

Patient Care
- Medical care rendered shall be within the scope and practice of the EMT-P. Care shall be in compliance with the OC EMSA Treatment Guidelines and Policies and Procedures. When appropriate, care shall be directed by the Base Hospital.

- All paramedics assigned to an incident shall have equal input on the care and treatment rendered. If the paramedics on scene cannot agree on the level of care indicated (BLS versus ALS), the more conservative approach (ALS level care and transport) shall be initiated. Company Officers are expected to weigh in under these circumstances.

- On a medical incident, although the paramedic on a PAU makes the decision on whether a patient is ALS versus BLS, the company officer will be responsible for canceling ALS units or requesting additional resources.
• PAU companies may be utilized in any capacity designated by the Incident Commander in the event of an MCI.

• Regardless of which unit arrives first (ALS, PAU, BLS) subsequent companies shall verbally state over the air that they are on scene (i.e. “Mesa E82, MME85 is on scene”) This serves as a notice to the first arriving unit that an additional company will be gathering equipment and arriving within walk time from the apparatus. At no time shall the second arriving unit wait to be cancelled before moving towards the patient.

Medical Supplies
• Medical supplies will be recovered through the CMFD supply system and will only be restocked from an ALS unit as a last resort. The ALS unit must be informed of what comes off their unit.

• Restocking of narcotic medications shall be the responsibility of the PAU and may take place immediately following the call or later as necessary.

Initiation of Patient Care and Transfer of Care
• The personnel on the first arriving company shall initiate the assessment and begin treatment. The following details the process for transferring patient care to other health care providers.

☐ BLS Unit Arrives First On Scene
• When a BLS unit is the first to arrive on the scene of an emergency medical incident, BLS personnel will bring in the appropriate medical equipment based on the nature of the call. An EMT on that unit will begin the patient assessment and initiate treatment. The company officer or engineer will initiate documentation on the EPCR and ensure all assessment findings, interventions and patient responses prior to the arrival of the 2 person paramedic ALS unit are documented.
• If the company officer determines the patient does not require ALS intervention, the responding ALS unit may be cancelled.
• Upon arrival of the responding ALS unit, the two paramedics will immediately assume patient care responsibilities after receiving a report from the on-scene EMT’s. The ALS unit will continue patient care responsibilities for the duration of the event unless it is deemed that the patient does not require ALS level care and care is transferred back to the BLS unit or ambulance personnel.

☐ PAU Unit Arrives First On Scene
• When a PAU unit is the first to arrive on-scene of an emergency medical incident, PAU personnel will bring in the appropriate medical equipment based on the nature of the call. The PAU paramedic will begin the patient assessment and initiate treatment. The company officer or engineer will initiate documentation on the EPCR and ensure all assessment findings, interventions and patient responses prior to the arrival of the 2 person paramedic ALS unit are documented.
NOTE: While documentation is necessary it may be deferred in situations where patient care requires all members on scene to provide direct care to the patient.

- If the PAU paramedic determines the patient does not require ALS intervention, the responding ALS unit may be cancelled.
- Upon arrival of the ALS unit, the PAU paramedic will, in a timely manner, provide a verbal patient report and the patient treatment plan. To avoid unnecessary patient questioning/assessment the two paramedics assigned to the ALS unit shall assume supportive roles (i.e. obtaining a frequency, etc.) until the patient is placed in the ambulance for transport.
- Transfer of patient care from the PAU paramedic to the ALS unit will occur at the most appropriate time to achieve optimal patient care. Patient movement to the ambulance should utilize as many crew members as necessary for the safety of the patient and crew members.

**Note:** The PAU paramedic may accompany a patient to the hospital when appropriate according to their judgment (e.g. prolonged ETA of paramedic van/engine, severe draw down of ALS resources, the need for additional care providers during transport, etc.) as outlined in OC EMSA Policies/Procedures 330.70.

**ALS Unit Arrives First On Scene**

- When an ALS unit is first to arrive on the scene of an emergency medical incident, personnel from this unit will bring in the appropriate medical equipment based on the nature of the call. The ALS unit will begin the patient assessment and initiate treatment. It is the ALS unit’s discretion to cancel the incoming PAU/BLS unit or have them continue their response. If the situation warrants the need for additional resources, the PAU paramedic and EMT’s will assume supportive roles for the on-scene ALS unit.

- If an ALS unit arrives on scene at the same time as a PAU, the ALS unit will bring in the appropriate medical equipment and assume the primary responsibility for patient evaluation and treatment to maintain consistent patient rapport. The PAU paramedic and EMT’s will assume supportive roles for the on-scene ALS unit.