



Inland Counties Emergency Medical Agency

1425 South D Street, San Bernardino, CA 92415-0060 ■ (909) 388-5823 ■ Fax (909) 388-5825 ■ www.icema.net

Serving San Bernardino, Inyo, and Mono Counties
Daniel Munoz, Interim EMS Administrator
Reza Vaezazizi, MD, Medical Director

DATE: September 30, 2021

TO: EMS Providers - ALS, LALS, BLS, EMS Aircraft
Hospital CEOs, ED Directors, Nurse Managers and PLNs
EMS Training Institutions and Continuing Education Providers
Inyo, Mono and San Bernardino County EMCC Members
Medical Advisory Committee (MAC) Members
Systems Advisory Committee (SAC) Members

FROM: Reza Vaezazizi, MD
Medical Director

SUBJECT: ICEMA EMERGENCY DIRECTIVES - EFFECTIVE OCTOBER 1, 2021

The Emergency Directives listed below are effective October 1, 2021.

- 2021.10.01 (NEW)
- 2020.03.27 (DELETE)
- 2020.03.31 (DELETE)
- 2020.12.10 (DELETE)

The ICEMA directives can also be found on ICEMA's website at www.ICEMA.net under the Emergency Directives section.

If you have any questions, please contact Loreen Gutierrez, RN, Specialty Care Coordinator, at (909) 388-5803 or via e-mail at loreen.gutierrez@cao.sbcounty.gov.

RV/jlm

Enclosures

c: File Copy

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Tom Lynch, EMS Administrator
Reza Vaezazizi, MD, Medical Director

Effective Date: October 1, 2021
Supersedes: NA

ICEMA EMERGENCY DIRECTIVE #2021.10.01

Whereas a State of Emergency exists in San Bernardino County as a result of the threat of COVID-19; and

Whereas despite sustained efforts, COVID-19 continues to spread and is impacting all cities and unincorporated areas of San Bernardino County; and

Whereas in response to Governor Newsom's August 16, 2021 Executive Order N-12-21, the California Emergency Medical Services Authority (EMSA) directed Inland Counties Emergency Medical Agency (ICEMA) on August 25, 2021, to extend the following actions in order to ensure continued operation of Emergency Medical Services during the COVID-19 outbreak through December 31, 2021 unless otherwise noted below;

IT IS HERBY DIRECTED THAT:

1. AEMTs, EMTs and paramedics (EMT-Ps) shall be allowed to perform their current scope of practice in hospitals, medical facilities, alternate care sites, shelter care sites, in-home settings, or any additional setting approved by the director of the Authority for purposes of responding to the COVID-19 pandemic.
2. The requirement for a completed skills competency verification by AEMTs/EMTs for renewal or reinstatement is waived.
3. EMTs that have not completed the NREMT skills exam and have an "Active-Restricted" EMT certification status will have six (6) months from the September 30, 2021, termination date to complete the skills exam. EMTs that fail to complete the psychomotor exam within the required timeframe shall have their EMT certification status changed to "Expired".
3. For the duration of the COVID-19 declared State of Emergency, EMT training programs may allow for the use of high-fidelity simulation, scenarios, or other innovative educational environments, during the 24 hours of clinical training that includes 10 clinical contacts when approved by the EMT training program's approving authority.
4. For the duration of the Covid-19 declared State of Emergency, EMT-P training programs with current EMT-P students shall:
 - a. Inform students in writing of the need to extend clinical and/or field internship placement and an estimated timeline of the extension.
 - b. Allow for student participation in the use of high-fidelity simulation, scenarios, and other innovative educational environments as substitutes for the clinical and field internship training if approved in writing by the medical director, program advisory committee and the

EMT-P training program provider approving authority in conjunction with CoAEMSP training and student terminal competency guidance.

- c. Allow students to use high-fidelity simulation to substitute 20 of the 40 required field internship patient contacts and 10 of the 20 required documented experiences performing the role of team lead.
- d. Allow for students to substitute their required field internship to expand beyond a prehospital emergency setting within an organized EMS system to include healthcare settings that approximate the skills experience needed: including a minimum of 40 documented ALS patient contacts and 220 documented team leads when provided under an approved EMT-P preceptor and approved in writing by the program medical director, program advisory committee and the EMT-P program provider approving authority in conjunction with CoAEMSP training an student terminal competency guidance.

Additionally, the following actions referenced in the ICEMA memo, dated July 29, 2020, EMS Credentialing and Training Requirements pertaining to the temporary suspension of the following required for accreditation or reverification shall expire on December 31, 2021. An EMS provider or hospital may choose to require their employees to obtain these certifications sooner. This suspension of requirements does not apply to initial applicants with no prior EMS certification.

- A valid American Heart Association BLS Healthcare Provider, American Red Cross Professional Rescuer CPR card or equivalent.
- A valid American Heart Association Advanced Cardiac Life Support (ACLS) card.

For further details, see <https://emsa.ca.gov/covid19/>.



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Tom Lynch, EMS Administrator
Reza Vaezazizi, MD, Medical Director

Effective Date: December 10, 2020
Supersedes: March 27, 2020

ICEMA EMERGENCY DIRECTIVE #2020.03.27

Whereas a State of Emergency exists in San Bernardino County as a result of the threat of COVID-19; and

Whereas despite sustained efforts, COVID-19 continues to spread and is impacting all cities and unincorporated areas of San Bernardino County; and

Whereas it is imperative that First Responder agencies and transport providers maximize the number of available resources to maintain the ability to meet the anticipated response needs.

IT IS HERBY DIRECTED THAT:

1. The San Bernardino County XBO COVID19 EMS Response Plan will be implemented effective immediately. Implementation will span across the Operational Area within the County of San Bernardino.
 - a. Response plans may not have a transport provider assigned to the initial dispatch.
2. Dispatch Centers may send the closest most appropriate ICEMA approved ambulance without concern for jurisdictional boundaries. This applies to all resources including public and private transport vehicles within the scope of the XBO COVID-19 EMS Response Plan.
 - a. Alternate assessment vehicles may be implemented and shall be fitted with equipment that is equivalent to the Fireline EMT-P (ALS) Pack Inventory (ICEMA Reference #4060).
 - b. Non-Ambulance Alternate Transport Vehicles may be utilized.
3. The newly developed emergency Assess & Refer Protocols will be implemented upon reaching the thresholds outlined in the XBO COVID19 Response Plan. Implementation will allow for the first responders to assess and identify patients whose condition does not require transport by 9-1-1 emergency ambulance.
4. Consideration may be given to decreasing the XBO COVID-19 Response Plan level:
 - a. After 48 hours of decreased call volume.
 - b. Restoration of adequate staffing levels.



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Effective Date: December 10, 2020
Supersedes: March 31, 2020

ICEMA EMERGENCY DIRECTIVE #2020.03.31

Whereas a State of Emergency exists in San Bernardino County as a result of the threat of COVID-19; and

Whereas despite sustained efforts, COVID-19 continues to spread and is impacting all cities and unincorporated areas of San Bernardino County; and

Whereas in response to Governor Newsom's March 30, 2020 Executive Order, the California Emergency Medical Services Authority (EMSA) has directed Inland Counties Emergency Medical Agency (ICEMA), to implement the following actions in order to ensure continued operation of Emergency Medical Services during the COVID-19 outbreak;

IT IS HERBY DIRECTED THAT:

1. All AEMTs, EMTs and paramedics with certifications/accreditations expiring in March, April, May, or June of 2020 shall have their license or certification expiration dates extended until July 31, 2020.
2. AEMTs, EMTs and paramedics shall be allowed to perform their current scope of practice in hospitals, medical facilities, alternate care sites, shelter care sites, in-home settings, or any additional setting approved by the director of the Authority for purposes of responding to the COVID-19 pandemic.
3. AEMTs, EMTs and paramedics whose license or certification has expired between September 30, 2019 and March 30, 2020, will be allowed to function under their previous scope of practice for the duration of the COVID-19 declared State of Emergency, provided that they do not have a history of license or certification discipline.
4. The requirement for a completed skills competency verification by AEMTs/EMTs for renewal or reinstatement is waived for the duration of the COVID-19 declared State of Emergency.
5. During the COVID-19 declared State of Emergency, training programs shall:
 - a. Allow for the use of high-fidelity simulation in place of the 10 clinical contacts for the purposes of training and graduating EMT students.

- b. Allow for the use of high-fidelity simulation in place of 20 of a paramedic's required 40 ALS contacts during the field internship phase of training.
 - c. Suspend EMT skills exams for certification.
 - d. Inform paramedic students in writing of the need to extend clinical and/or field internship placement timelines with an estimated time of doing so.
6. The National Registry of EMTs (NREMT) provisional registrations or a successful completion of the NREMT written (knowledge) Assessment exam shall be accepted for purposes of certification, licensure or reinstatement. EMS personnel with a provisional NREMT registration shall be required to receive a full NREMT registration within 6 months of the NREMT allowing testing. EMS personnel who have successfully completed the NREMT written Assessment exam shall be required to complete the NREMT psychomotor exam within 6 months of the NREMT allowing testing.

For further details, see <https://emsa.ca.gov/covid19/>.



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Tom Lynch, EMS Administrator
Reza Vaezazizi, MD, Medical Director

Effective Date: December 10, 2020
Supersedes: N/A

ICEMA EMERGENCY DIRECTIVE #2020.12.10

Whereas a State of Emergency exists in San Bernardino County as a result of the threat of COVID-19; and

Whereas despite sustained efforts, COVID-19 continues to spread and is impacting all cities and unincorporated areas of San Bernardino County; and

Whereas it is imperative that First Responder agencies and transport providers maximize the number of available resources to maintain the ability to meet the anticipated response needs.

IT IS HERBY DIRECTED THAT:

Until further notice, First Responder agencies and transport providers will continue to utilize the “Assess and Refer Plan” with the following updates:

1. ICEMA Reference #s 8120R1 and 8130R1 have been refined into one (1) comprehensive policy referred to as ICEMA Reference # 8130R2 - Assess and Refer: Emergency Response Plan (San Bernardino County Only).
 - Discontinue use of ICEMA Reference #s 8120R1 and 8130R1.
 - Assess and Refer education will remain the same as on Target Solutions.
2. Prior to the EMS field personnel departing the scene:
 - Provide alternative recommendations and a referral card containing the alternate plan.
 - If patient refuses the referral, request BLS ambulance to respond to scene for transport to the closest most appropriate hospital. If a BLS ambulance is unavailable, an ALS ambulance may be requested to respond and transport.
 - Inform patient and/or family that there may be an extended wait for transport, and that they will be transported when an ambulance resource becomes available.
 - EMS field personnel will document the plan of care, and may choose to go back in service for other emergency responses prior to the arrival of an ambulance transport.