Sierra – Sacramento Valley EMS Agency Program Policy			
HEMS Aircraft Requesting & Utilization			
	Effective: 06/01/2022	Next Review: 09/2025	**862**
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PURPOSE:

To establish criteria for the requesting and utilization of HEMS aircraft on 911 incidents.

AUTHORITY:

A. HSC, Division 2.5, § 1797.200 – 1797.276, 1798 – 1798.8 & 1798.170.

B. CCR, Title 22, Division 9, Chapters 4 & 8.

DEFINITIONS:

A. **Air Ambulance Coordination Center –** An emergency dispatch center designated by S-SV EMS for the purpose of coordinating air ambulance requests within the S-SV EMS region. The following EMS Aircraft Coordination Centers have been designated by S-SV EMS:

1. CAL FIRE Grass Valley Emergency Command Center: Colusa, Nevada, Placer, Sutter, and Yuba counties.

2. CAL FIRE Oroville Emergency Command Center: Butte, Glenn, Shasta, and Tehama counties.

3. CAL FIRE Yreka Interagency Command Center: Siskiyou County

B. **Public Safety Answering Point (PSAP) –** A public safety dispatch center where a 911 call is first received (primary PSAP) or where a 911 call is transferred/relayed for the purpose of dispatching resources (secondary PSAP).

C. **Helicopter Emergency Medical Services Aircraft (HEMS Aircraft) –** Rotor wing aircraft utilized for the purpose of prehospital emergency response and patient transport. HEMS aircraft include air ambulances and all ALS/BLS rescue aircraft.

D. **Air Ambulance –** Any aircraft specially constructed, modified or equipped and used for the primary purpose of responding to emergency incidents and transporting critically ill and/or injured (life or limb) patients, whose medical flight crew has, at a minimum, two (2) attendants certified or licensed in advanced life support.

E. **Rescue Aircraft –** Aircraft whose usual function is not patient transport but may be used for patient transport when the use of an air or ground ambulance is inappropriate or not readily available. Rescue aircraft are classified as one of the following:

1. **Advanced Life Support (ALS) Rescue Aircraft –** A rescue aircraft whose medical flight crew has, at a minimum, one (1) attendant licensed as a paramedic.

2. **Basic Life Support (BLS) Rescue Aircraft –** A rescue aircraft whose medical flight crew has, at a minimum, one (1) attendant certified as an EMT.

3. **Auxiliary Rescue Aircraft –** A rescue aircraft that does not have a medical flight crew, or whose flight crew does not meet ALS/BLS rescue aircraft requirements.

POLICY:

A. HEMS aircraft utilization criteria:

1. Trauma patients who meet RED Field Trauma Triage Criteria, and transport time to an appropriate level trauma center is ≥30 minutes by ground.

2. Prolonged extrication of an entrapped patient.

3. Multi-casualty incidents with a need for additional resources or distribution of patients to facilities ≥30 minutes by ground from the incident location.

4. Time-sensitive conditions where a decrease in transport time may reduce the risk of long-term disability or death.

5. Significantly reduced transport time for patients with specialty resource needs (significant burns, pediatric trauma, etc.).

6. Patients who are likely to require advanced procedures/medications beyond the scope of practice of ground providers.

7. Delayed accessibility to the scene by ground personnel and/or transport resources.

8. Initial dispatch for significant trauma mechanism or time-sensitive medical condition with ground transport provider time to scene ≥20 minutes.

B. HEMS aircraft transportation should not be used for the following patients:

1. Patients with CPR in progress.

2. Patients contaminated by hazardous materials who cannot be completely decontaminated prior to transport.

3. Patients who are combative, uncooperative, or have behavioral emergencies. However, a patient may be transported at the discretion of the flight crew.

C. The use of HEMS aircraft should provide a significant reduction (≥20 minutes) in arrival time to a receiving facility capable of providing definitive care, including designated specialty care centers.

D. After assessing the incident location, conditions and patient needs, the most medically qualified provider on scene shall be responsible for determining if the patient/event meets HEMS aircraft utilization criteria and shall advise the Incident Commander (IC)/ designee regarding the need for HEMS aircraft. The final authority to request or cancel HEMS aircraft is at the discretion of the IC/designee.

E. The pilot in command shall have the final authority in decisions to continue or abort the response. The pilot may also dictate the need to identify an alternate LZ/ rendezvous location or deviate from S-SV EMS patient destination policies.

F. The most medically qualified provider on scene has the authority/obligation to ensure that the patient meets HEMS aircraft utilization criteria. If the patient does not meet HEMS aircraft utilization criteria, the flight crew may transfer care to the ground ambulance for transport to the most appropriate facility.

G. HEMS Aircraft Requesting and Coordination:

1. For incidents likely meeting HEMS utilization criteria, appropriate HEMS resources should be requested early by applicable dispatch or ground EMS personnel, and may be cancelled prior to lift off, overhead or at scene when appropriate.

2. An air ambulance should be utilized for any incident that does not require the need for air rescue operations. Rescue aircraft may be utilized when, in the opinion of the most medically qualified provider at scene, the patient's condition warrants immediate transport and/or air ambulance resources are not readily available. Consideration should be given to airway stabilization and/or the need for higher level medical procedures.

3. No air ambulance shall respond to an EMS incident in the S-SV EMS region without the request of a designated air ambulance coordination center.

4. HEMS aircraft shall be requested by the IC/designee on scene, through the PSAP of the agency having jurisdiction over the incident. A responding ground EMS provider may request appropriate HEMS resources while enroute to an incident ('rolling request'), if they believe the patient/event meets HEMS utilization criteria.

    - If communication with the IC is not possible or practical, HEMS aircraft shall be requested through the applicable PSAP.

- If a private ambulance arrives on scene before the arrival of public safety personnel, HEMS aircraft shall be requested through the applicable PSAP. If unable to contact the PSAP directly from the field, the private ambulance dispatch center may be used to relay the request to the PSAP.

5. HEMS aircraft requests received from providers still enroute may be overridden by the IC/designee on scene. Excluding safety reasons, the IC/designee shall consult with the most medically qualified provider on scene to determine the necessity for HEMS aircraft.

6. The PSAP shall utilize the following procedures, based on the type and availability of HEMS aircraft resource requested:

    - Air ambulance resource request:
        - Contact the designated air ambulance coordination center for air ambulance resource requesting.
    - Rescue aircraft resource request:
        - The PSAP is responsible for contacting the applicable air rescue provider directly for resource requesting.

7. PSAPs are required to provide the following information to the air ambulance coordination center or air rescue provider for all HEMS aircraft resource requests:

    - Incident or LZ location: the general geographic location will suffice.
    - Nature of call: type of incident and severity of injuries, if known.
    - The designated LZ contact – as follows:
        - Identified by incident name (i.e., ‘Jones Road LZ’), if HEMS aircraft is being requested to respond directly to the incident scene; or
        - Identified by LZ name (i.e., ‘Rood Center LZ’), if HEMS aircraft is being requested to respond to a pre-established local/regional LZ location.
    - Any known aircraft hazards in the area, including hazardous materials, other aircraft, or inclement weather conditions at the scene.

8. The air ambulance coordination center will complete the following for all air ambulance resource requests:

    - Verify the incident/LZ location and identify the closest air ambulance.
    - Contact the closest air ambulance provider to obtain their availability to respond to the incident.
        - If the air ambulance resource is available and accepts the request, they will be assigned to the incident by the air ambulance coordination center.
        - If the air ambulance resource is unavailable/declines the request, the air ambulance coordination center will contact the next closest air ambulance provider to obtain their availability to respond to the incident. This process

will continue until an air ambulance is assigned, or it is determined that no timely air ambulance resources are available to respond to the incident.
    - Air ambulance coordination centers shall consider the location of an available airborne air ambulance in determining the closest resource to the incident when this information is known to the coordination center.
    - Air ambulance providers who have multiple aircraft shall accept/decline the request based on the availability of the specific aircraft resource requested.
    - The air ambulance provider will be allowed up to five (5) minutes to check weather. If the air ambulance provider does not accept/decline the assignment within five (5) minutes, the air ambulance coordination center will re-contact the air ambulance provider to confirm their status prior to contacting the next closest air ambulance provider.
        - If an air ambulance provider declines due to inclement weather at the incident/LZ location, it is unlikely that an alternate air ambulance provider will subsequently accept the request. The IC/designee shall be notified of this information as soon as possible. Personnel on scene may consider appropriate alternatives (utilizing an alternate LZ/rendezvous location; requesting the availability of rescue aircraft which are allowed to operate under different weather minimums; initiating ground ambulance transport; etc.).
- Relay the assigned air ambulance resource identifier and initial ETA to the requesting PSAP.

9. The requesting PSAP shall notify all responding agencies when a HEMS aircraft has been requested/assigned and shall keep responding agencies updated as to the HEMS aircraft status (delays, aborts, etc.).

10. HEMS aircraft personnel are responsible for communicating to the requesting PSAP any response delays or aborts in a timely manner.

11. Once assigned to an incident, HEMS aircraft shall not commit/respond to another assignment unless cancelled by the initial incident requestor.

12. If multiple aircraft are responding to or in the area of the incident, the air ambulance coordination center and/or the requesting PSAP shall notify all agencies of multiple aircraft responders.

13. All parties are responsible for informing HEMS aircraft providers of inclement weather related to the response, including previous HEMS aircraft providers who declined the flight due to weather conditions (at base, enroute, or at scene).

14. CALCORD operational frequency (156.075) should be utilized for air-to-ground communication. The IC/designee will communicate to all responding agencies if an alternate frequency will be utilized for the event.

H. Ground Provider Responsibilities:

1. If the event is a declared MCI, the IC/designee is responsible for notifying all responding HEMS aircraft of such.

2. If required by S-SV EMS policies/protocols, the most medically qualified provider on scene shall contact the appropriate facility for patient destination consultation prior to EMS aircraft arrival (when possible).

3. If ground personnel are at scene, the IC/designee shall assign appropriate personnel to establish/prepare a landing zone (LZ) and assure scene safety during landing. The LZ should meet the following criteria:

   - 100’ x 100’ open area, clear of hazards, obstacles, sloped terrain, loose surface materials, animals, overhead wires, foreign object debris (FOD).
   - If the LZ is on a dirt surface, assure that the area is watered down to reduce the risk of brown out upon aircraft landing.
   - Locate the LZ upwind from any incident with known hazardous materials.

   The pilot has final authority to determine if a landing is appropriate, including instances when no ground personnel are at scene.

4. Ground personnel shall not approach the aircraft under a running/hot rotor unless accompanied by HEMS personnel.

5. If requested, ground EMS personnel may accompany a patient in a rescue aircraft if the appropriate medical equipment is available and they have received an adequate safety briefing prior to transport.

6. S-SV EMS Transfer of Patient Care policy shall be followed, and a verbal patient care report shall be provided to HEMS aircraft personnel.

I. HEMS Aircraft Provider Responsibilities:

1. HEMS aircraft providers are expected be enroute within 15 minutes of incident acceptance. Response delays shall be documented in the PCR.

2. HEMS aircraft providers are expected to transport within 15 minutes from the time patient contact is made. Scene delays shall be documented in the PCR.

3. S-SV EMS Patient Destination policies/protocols shall be followed for all patients requiring HEMS aircraft transport. Patients shall be transported to the closest/most appropriate hospital with an approved helipad or HEMS aircraft landing site.