



COUNTY EOA RESUPPLY OF FIRST RESPONDER AGENCIES

Effective: March 1, 2022
Replaces: June 1, 2018

I. Purpose

The purpose of this policy is to define the process for the resupply of disposable and consumable medical supplies utilized in the delivery of prehospital patient care by first response agencies providing service in the County's Exclusive Operating Area (EOA).

In all cases where medical supply items are resupplied by the County's EOA emergency ambulance service provider (County Ambulance), those supply items (except for expiring medications, multi-dose medications and bulk-supplied items), at a minimum shall be properly assigned or reconciled to the specific County EMS event number in which utilization occurred.

This policy further identifies the one-for-one accounting and reconciliation processes for all disposable and consumable medical supplies used in the delivery of prehospital patient care. This includes provisions for both the on-scene and after-incident resupply process, handling pre-expiring medications and the itemization of the County-approved list of billable items.

II. Applicability

- A. This policy applies to the County's EOA emergency ambulance provider (County Ambulance) under contract to provide emergency ambulance services for the County.
- B. This policy applies to fire/public safety first response providers under contract to provide first response services within the County's EOA.
- C. Fire department emergency ambulances authorized within the Palo Alto Exclusive Operating Area are not subject to the provisions of this policy.
- D. Fire/public safety first response authorized within the Palo Alto Exclusive Operating Area is not subject to the provisions of this policy.

III. On-Scene Resupply Procedures

- A. In nearly all cases, resupply of disposable medical supplies should occur on a one-for-one basis, while on the scene or at the hospital before the end of the event. This provides the best opportunity for all supply items used in the provision of that patient's care to be assigned to that patient for accurate billing.
- B. First responder agency personnel are prohibited from directly removing supplies or equipment from the ambulance. County Ambulance personnel shall assist in facilitating the resupply process.



- C. In the event supply levels on the ambulance are low and providing a supply item to the first responder agency will result in the ambulance going out of service or being in breach of minimum policy requirements, the resupply will occur in accordance with Section IV "After-Incident Resupply Procedures".
- D. Controlled substances (morphine sulfate and midazolam) are not part of the resupply process and will not be exchanged under any circumstances between providers.

IV. After-Incident Resupply Procedures

- A. In circumstances of a critical patient, unsafe scene or the ambulance being cancelled before arrival, on-scene resupply may not be possible. The first responder agency shall use the "After-Incident Resupply Procedure" to obtain those supply items that could not be provided at the time of the event. This procedure also allows County Ambulance to appropriately associate the supplies with the patient they were used on.
 - 1. While the first responder agency provider is completing the electronic patient care report (ePCR) for their patient, and if the resupply of supplies did not occur on the scene for whatever reason, the caregiver shall utilize the "Consumables Tab" portion of the patient's ePCR to document all supplies used during their care but not resupplied on the scene. Only those supplies used during that patient's care and *not* resupplied should be included on that patient's charge page.
 - 2. The consumables tab shall only be completed in those circumstances when one-for-one resupply did not happen at the scene or at the hospital after the event. If resupply did occur, the first responder agency provider will leave the patient's charge page blank.
 - 3. To be eligible for resupply through the after-incident resupply procedure, the ePCR must contain an event number and date of service. It is also requested that an attempt be made to capture the patient's name and address, but this will not be a criterion for resupply.
 - 4. All supplies documented on the consumables tab of the ePCR by first responder agency caregivers on a daily basis will be automatically collected into a report ("After-Incident Resupply Report") that will be immediately available to County Ambulance and the first responder agency through ImageTrend. This report should indicate all supplies used by that first responder agency that was not resupplied at the scene and still needs to be restocked by County Ambulance back to that agency.
 - 5. On an interval to be mutually agreed to by the individual agencies, the County Ambulance Supply Manager shall use the "After-Incident Resupply Report" to order the supplies needed and coordinate delivery of the items owed to each agency. In some cases, an agency may determine that a monthly order fulfillment may be sufficient while another agency may need the resupply items provided more often.



6. On at least a bi-annual basis, representatives from County Ambulance, the EMS Agency and the EMS Section of the Santa Clara County Chiefs Association shall meet to review and audit this process to determine if adjustments are necessary.
- B. In the event resupply is urgent and cannot wait for an order to be delivered through the process described above, the first responder agency's company officer may contact the County Ambulance EMS field supervisor to request an emergency resupply.
 - C. Each first responder agency should designate, at a minimum, a primary supply liaison in order to facilitate a working, ongoing partnership. This supports the process in the following ways:
 1. Keeps supply levels stable on all EMS units.
 2. Anticipation of brand changes; implementation of new products; and training opportunities as they arise.
 3. Planning and preparation for expiring medications or supplies.
 4. Careful tracking and control of high-value/high-demand items.
 - D. County Ambulance shall provide reasonable notification and implementation time for supply and equipment changes.

V. Medications Reaching Expiration

- A. To reduce the waste of pharmaceuticals, County Ambulance and the first responder agencies strive to develop an exchange program where medications nearing the end of their shelf life can be returned to the transport ambulances to increase their opportunity for utilization. This process requires several steps.
 1. Prior to returning any expiring medication, the first responder agency will first need to order new medication to replace what is coming up for expiration. The first responder agency shall submit a "Special Supply Order" to County Ambulance indicating:
 - a. The name and concentration of the drug needed.
 - b. The amount of the drug needed.
 - c. The expiration date of the drugs that will be returned in exchange.
 2. When the new medication is received, the first responder agency will exchange it, one-for-one, for the expiring medication.



3. Expiring medication being returned to County Ambulance must have a minimum of sixty (60 days) remaining shelf life to be eligible for exchange. However, it is recommended that replacement occur at one hundred eighty (180) days or greater.
4. Expiring medications returned within the 60-day window shall be immediately marked by County Ambulance (visible sticker, neon dot, etc.) to avoid that medication returning to the regular supply chain and/or being resupplied back to the agency who just returned it.
5. Medications that are less than 60 days away from expiring or are already expired, will not be accepted and shall not be returned to or transported to any County Ambulance facility.
6. Under no circumstances will the exchange of expiring or expired medications ever occur on the scene of a call or between field crews. The expiring medication exchange program operates under the coordination of the County Ambulance Supply Manager and the Supply Liaison from each individual agency.
7. In cases of national medication shortages, on the scene exchange of medication with less than 60 days left to expiration may be necessary to keep EMS units in service. In cases in which a first responder agency unit receives medication with less than 60 days shelf life, the first responder agency unit is to take the medication. The first responder agency's Supply Liaison will then contact the County Ambulance Supply Manager to arrange an exchange.

VI. Items Provided Through Ordering System

- A. Certain supply items are not reasonable to attempt resupplying on scene. Multi-dose medications, tape, and bulk packaged items are examples of items best resupplied through an ordering process.
- B. At the interval chosen by the fire responder agency, the supply liaison shall submit to County Ambulance an order for "multi-dose/bulk items." County Ambulance shall fill the order and deliver the items to the first responder agency. Examples included in the following table:



Multi-dose Medications/Bulk Supply Items	Distribution Quantity
Aspirin	Bottle
Nitroglycerin Paste	Tube
Nitroglycerin Tablets	Bottle
Glucometer	Unit
Glucometer Test Strip	Box
Band-aids	Box
4"x4", Sterile	Each
4"x4", Non-sterile	Pack (50)
Tape, 2"	Roll
Tape, Transpore	Roll