



EMS Stakeholder Engagement Process

Medical Control

The CVEMSA understanding of the term “medical control” is based on the language contained within the California Health and Safety Code and relevant sections of the California Code of Regulations. In March of 2018, the EMS Agency requested County Counsel provide a legal viewpoint based on legislation and case law.

The memo Department of Health Services received in response contained this information regarding the definition of “medical control”:

“Section 1797.90 defines “medical control” as the medical management of the emergency medical services system. Section 1798 provides that the medical direction and management of an emergency medical services system shall be under the medical control of the medical director of the local EMS agency. This section adds that this medical control shall be maintained in accordance with standards adopted by the Authority. See Regulation 100170. Finally, section 1797.220 provides that medical control includes dispatch, patient designation policies, patient care guidelines, and quality assurance requirements. The California Supreme Court has interpreted these code sections regarding medical control. The court explained that the Act’s language confirms “the Legislature conceived of ‘medical control’ in fairly expansive terms, encompassing matters directly related to regulating the quality of emergency medical services, including policies and procedures governing dispatch and patient care.” Other subjects of medical control include those policies designed to improve the “speed and effectiveness” of emergency response, as well as “how the various providers will interact at the emergency scene.” As the court summarized, a policy constitutes medical control so long as it is “medically related,” that is, whether it affects patient outcomes. The court distinguished this from providers retaining control of “purely internal administrative matters, such as the level of and deployment of staff.” County of San Bernardino v City of San Bernardino (1997) 15 Cal. 4th 909.”

CVEMSA recognizes this definition may change as additional statutory or case law is developed. CVEMSA will adjust policy and practices to remain compliant with any changes as understood.

CVEMSA also recognizes stakeholders may be aware of additional definitions of “medical control” in law beyond what is reflected within this document. CVEMSA encourages stakeholders to share any additional references to help educate and inform discussion on this topic.