

5802

Community Assessment and Transport Team (CATT) Pilot Program



Administrative Policy

Last Reviewed: October 6, 2021 Last Revised: July 1, 2025

PURPOSE

To establish a program to refer individuals who are experiencing a crisis to approved destinations and resources through the use of a Community Assessment and Transport Team (CATT).

Initial Requirements

Personnel

- 1. Emergency Medical Technicians: will meet all training, license, and certification requirements per REMSA policy.
- 2. Behavioral Health Specialist or Clinical Therapist: will meet all training, license, and certification requirements per Riverside University Health System Behavioral Health (RUHS BH) policy.
- 3. All CATT personnel will receive at least eighty (80) hours of training on:
 - a. EMS Specific Curriculum
 - i. CPR, AED, naloxone administration, basic first aid and bleeding control
 - b. Crisis intervention curriculum:
 - i. De-escalation techniques, crisis health assessments, community resources and client navigation
 - c. All other training as required by RUHS BH and/or REMSA.

Vehicles

All vehicles will be agreed upon by REMSA and Ambulance Contractor prior to use in this program. These vehicles will conform to the highest standards for crash safety ratings and passenger safety systems. An interior partition or barrier will be installed in the vehicle to provide separation between the driver and passenger compartments for vehicle occupant safety. All vehicle exterior colors, lettering, graphics, and markings will be approved by REMSA.

Equipment

Vehicles utilized by CATT personnel will be considered **Light Response** for the purposes of determining the appropriate standard equipment and minimum quantities that must be carried. Refer to REMSA policy #3303 (Drug and Equipment List).

Additional equipment for CATT personnel will include naloxone, a glucometer, and a pulse oximeter.

Continuous Requirements

In addition to the maintenance of personnel, vehicle and equipment criteria listed above, Contractor will ensure the following criteria are also continuously met:

Documentation

A REMSA electronic patient care report (ePCR) will be completed for every incident as outlined in REMSA Policy #7701 (Patient Care Records).

CQI

- 1. Provide targeted continuing education activities to further the knowledge base of the field personnel who provide care as part of this program.
- 2. Develop criteria for evaluation of field personnel who provide care as part of this program, to include, but not be limited to:
 - a. Timely audits for 100% of ePCRs for CATT unit.
 - b. Direct observation, as needed.
 - c. Routine quarterly and annual performance evaluations.
 - d. Design of corrective action plans for individual deficiencies.

- 3. Develop a process for identifying trends in the quality of field care by:
 - a. Submitting reports as specified by REMSA
 - b. Designing and participating in educational offerings based on problem identification and trend analysis.
 - c. Making approved changes in internal policies and procedures to comply with REMSA policies.
 - d. Track and report all requests for and utilization of CATT unit

Procedure for Requesting CATT Unit Response

For an individual in crisis, law enforcement or EMS personnel on scene will determine, if the individual would benefit from a response by CATT team and will contact Ambulance Contractor Dispatch Center directly to request CATT unit response. Ambulance Contractor will manage all requests for, and aspects of, CATT unit deployment. CATT Unit Response Time should be less than thirty (30) minutes from the time the available unit is notified by dispatch (eTimes.03) to the time the unit arrives on scene (eTimes.06). Exceptions on the time requirement are made due to circumstances limiting availability of the CATT unit (e.g., already deployed on another call, after hours request, or remote location).

Before placing an individual on a WIC 5150 or 5585 hold, attempts should be made by law enforcement to request a CATT unit response.

Procedures for CATT Personnel

Change in patient condition or recognition of a life-threatening illness or injury

An ALS Ambulance will be requested immediately if at any time during the patient encounter, a life-threatening illness or injury is recognized or if there is a change in patient condition.

For respiratory depression or respiratory arrest with suspected narcotic overdose, an ALS ambulance shall be requested immediately, and CATT personnel shall administer naloxone according to the treatment algorithm below:

<u>Adults</u>: Naloxone 1 mg IN ONLY. MAY REPEAT PRN. TITRATE TO IMPROVEMENT OF RESPIRATORY DEPRESSION, NOT RESOLUTION OF AMS.

All other patients

- 1. On arrival at the scene, a crisis assessment and health screening will be performed by CATT personnel. This screening will include, but not be limited to:
 - a. A crisis assessment and triage by a licensed clinician
 - b. A review of the individual's past medical history, allergies, and current medications
 - Obtaining baseline vital signs to include, but not be limited to heart rate, respiratory rate, blood pressure, SpO2 level, blood glucose and pain severity level.
- 2. Based on assessment findings, a determination will be made if the individual is appropriate for transport or referral by CATT unit.

Individuals That May Be Appropriate for Transport by CATT Unit

The following individuals may be eligible for transport by CATT unit if they meet all (ALL) criteria listed below:

- 1. Have current capacity to make medical decisions or with written parental consent if patient is a minor
- 2. Are cooperative, compliant, not requiring restraints, and able to ambulate without assistance
- 3. Are negative for any signs/symptoms of life-threatening illness or injury

Approved Destinations

As determined by the results of the crisis assessment and health screening, an appropriate destination will be chosen by the Clinical Therapist based on bed availability, patient coverage and patient preferences if any. If the individual has no preference, the destination will be the closest appropriate facility. All destinations must be approved by Riverside County Mental Health Crisis Services and Riverside County EMS Agency. Examples of possible destinations include, but are not limited to, Crisis Residential Treatment Facilities, emergency departments, Mental Health Urgent Care Centers (MHUC), Psychiatric Emergency Services, shelters, sobering centers, and Veteran Affairs.