

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

109A



FROM: Community Health Agency/ Department of Public Health

SUBMITTAL DATE:

SUBJECT: Emergency Medical Care Committee (EMCC) Annual Report

RECOMMENDED MOTION: That the Board of Supervisors:

- 1) Receive and file the EMCC's 2010 annual report.

BACKGROUND: Resolution Number 2001-358 requires the EMCC to prepare an annual report to the Board of Supervisors on the current and anticipated conditions of Emergency Medical Services (EMS) within the County. Attached is EMCC's 2010 annual report that was approved for submission at EMCC's April 6, 2011 meeting.

BM /bm

Susan D. Harrington

Susan Harrington, Director
Department of Public Health

FINANCIAL DATA	Current F.Y. Total Cost:	\$ 0	In Current Year Budget:	N/A
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	N/A
	Annual Net County Cost:	\$ 0	For Fiscal Year:	N/A

SOURCE OF FUNDS: N/A	Positions To Be Deleted Per A-30	<input type="checkbox"/>
	Requires 4/5 Vote	<input type="checkbox"/>

C.E.O. RECOMMENDATION:

APPROVE

Debra Cournoyer

Debra Cournoyer

County Executive Office Signature

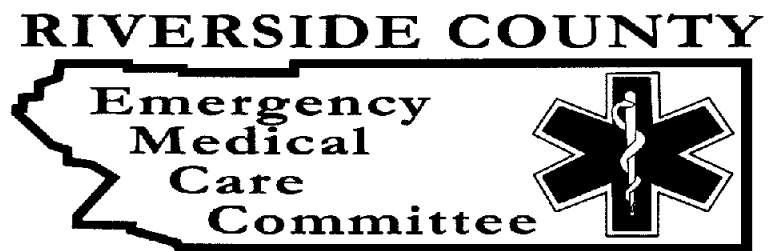
ATTACHMENTS FILED WITH THE CLERK OF THE BOARD

Departmental Concurrence

Dept't Recomm.:
 Per Exec. Ofc.:
 Policy
 Policy



RIVERSIDE COUNTY
EMERGENCY MEDICAL CARE COMMITTEE
2010
Annual Report



INTRODUCTION

This report documents Riverside County Emergency Medical Care Committee's (EMCC) observations and recommendations on EMS matters in Riverside County. By virtue of the EMCC's membership (pursuant to Board of Supervisors Resolution No. 2001-358), these observations and recommendations are composed by a varied group of individuals which forms this EMS advisory group. Reporting these observations and recommendations will help to reinforce positive changes within in Riverside County's EMS System.

EMCC MEMBERSHIP

EMCC Membership is has been established by Board of Supervisors Resolution No. 2001-358 which currently consists of the following individuals:

Prehospital Medical Advisory Committee (PMAC) Physician Representative—Stephen Patterson, MD
Hospital Association Representative (ex-officio)—Christiana Bivona-Tellez
Riverside County Medical Association Representative—Kenneth Nickson, MD
Riverside County Ambulance Association Representative—Peter Hubbard
Riverside County Fire Chief's Association Representative –David Waltemeyer
Coachella Valley Association of Governments Representative—Mike Marlow
Western Riverside Council of Governments Representative—Grant Yates
Riverside County Law Enforcement Agency Admin Assoc Representative—Tom McCreary
PMAC Prehospital Representative—Jim Price
Riverside County Fire Department Representative—Phil Rawlings
Supervisorial District One Representative—Gloria Huerta
Supervisorial District Two Representative—Stanley M. Grube, FACHE (EMCC Chair)
Supervisorial District Three Representative—Mike Norris
Supervisorial District Four Representative—Bary Freet
Supervisorial District Five Representative—Kent McCurdy

STAFFING AND TRAINING

Over the last 10 years requests for EMS have increased by over 20 percent. Between 2008 and 2009 the EMS system experienced the only year-over-year decrease in call volume in a decade. The year of 2008 there were 218,953 responses for EMS; in 2009 there were 215,899. For the 2009/2010 ambulance permit cycle there were 238 ambulances permitted in Riverside County; for the current permit cycle (2010/2011) there are 251 ambulances permitted. For 2009 there were 1,398 EMTs, 857 paramedics and 211 MICNs credentialed in Riverside County's EMS system.

In the 2009 EMS Plan update it was identified that uniform performance standards and objective evaluation tools were needed. Since the time of this update new performance standards have been adopted and incorporated into Riverside County EMS Agency's (REMSA) Protocol, Policy and Procedure Manual. Additionally, train-the-trainer classes have been completed to ensure a

system-wide uniform application of the performance standards and evaluation tools for the January 2011 implementation.

COMMUNICATIONS

REMSA has conducted an assessment of the EMS system's communications infrastructure. This assessment has identified needed communication system improvements. REMSA plans to redesign and develop a radio and data communications system that provides a reliable and comprehensive communications platform that EMS providers can use for daily on-line medical control as well as for hospital destination coordination during large scale incidents. The first phase of this plan has been accomplished with the completion of REMSA's communications center. However, much work needs to be accomplished in order to have a highly functional communications system that will meet Riverside County's EMS communications needs and remain functional during times of high demand. REMSA is currently working with Riverside County Information Technology (RCIT), the County Fire Department and County Sheriff's Department for integration of EMS Communications into the Public Safety Enterprise Communications (PSEC) System.

ALS AMBULANCE EXCLUSIVE OPERATING AGREEMENTS

In 2009 the County agreements with American Medical Response (AMR) and Idyllwild Fire Protection District (IFPD) were amended with modifications.

Highlights of the IFPD agreement amendment include:

- Two separate agreements for Zones 1 & II and Zone III were combined putting them on the same timeline as the master agreement with AMR
- Reduced the annual CSA-38 subsidy from 4 percent annual increases to 2 percent annual increases
- Modified language on ambulance staffing requirements
- Added language requiring IFPD to communicate with the CSA-38 Advisory Board on the status of ambulance services

Highlights of the AMR agreement amendment include:

- Increased regulatory monitoring and reporting requirements
- Improved ambulance backup and mutual aid requirements
- Improved clinical management infrastructure and oversight
- Requirement for additional field supervision
- Clarification of resource command and control during EMS surge and disaster events
- Addition of a third subzone in the Northwest Zone
- Subzone response time requirement increase to 90 percent monthly
- Response time fine penalty increase of response over 5 minutes late
- Response time fine credits for performance over the standards
- Countywide deployment of a new Computer Aided Dispatch (CAD) system with integrated Automated Vehicle Location and Global Positioning System (AVL/GPS)
- Requirement standards for professionalism
- Increased educational and training requirements
- Improved first responder restock agreement requirements
- Increased oversight responsibilities for EMS Zone Administrative Groups

TRANSPORTATION PLAN

Subsequent to the submission of the EMS Plan update, on July 1, 2010, REMSA received a letter from the State EMS Authority (EMSA) stating the following issues in our EMS Transportation Plan needed to be addressed in order to receive their approval: clarification on Indio Fire Department's eligibility for exclusivity, and the completion of a competitive bidding process for the Pass and Mountain Plateau Exclusive Operating Areas. The EMCC has been discussing ways to address these issues.

Other transportation components needing to be addressed are establishing County ALS ambulance agreements with REACH Air, Mercy Air and Cathedral City Fire Department.

HOSPITALS

Base hospital agreements were renewed in 2010 with enhancements. Audits were performed on the seven base hospitals in Riverside County. Three base hospitals passed the audit and three had to make a few minor corrections. Palo Verde Hospital is working on reestablishing their base hospital status which was suspended on October 1, 2010. Receiving Hospital Agreements need to be established with the 15 acute care hospitals in Riverside County.

Riverside County's EMS system now recognizes the following six hospitals as ST Elevation Myocardial Infarction (STEMI) Receiving Centers: Desert Regional Medical Center, Eisenhower Medical Center, Loma Linda University Medical Center (San Bernardino County), Palomar Medical Center (San Diego County), Riverside Community Hospital and San Antonio Community Hospital (San Bernardino County). This program has improved the ability for STEMI patients to be transported directly to a hospital prepared to provide immediate advanced interventions, thereby reducing the time for coronary artery reperfusions.

Emergency Department (ED) ambulance wait times continue to be an issue causing a negative impact on the EMS system. REMSA has been closely monitoring ED ambulance wait times since 2008. While some hospitals have been showing improvement, others struggle in keeping their ED ambulance wait times down. REMSA has been taking a much more assertive approach in getting hospitals to keep their ED ambulance wait times down and is working on language in receiving hospital agreements that would curtail the practice of holding patients on ambulance gurneys in hospital hallways.

MEDICAL CONTROL

Medical control is maintained through REMSA's protocols, policies and procedures, and through on-line direction with base hospitals. REMSA continually updates their Protocol, Policy and Procedure Manual to keep abreast of new developments and improvements in the industry. Additionally, REMSA has been restructuring their Protocol, Policy and Procedure Manual in order to develop better adherence to quality assurance and improvement standards. Through the Continuous Quality Improvement Technical Advisory Group (CQI TAG), REMSA has incorporated performance standards and skills verification forms as part of REMSA's Protocol, Procedure and Protocol Manual. Additionally, base hospital agreements have been updated and modified, and a base hospital policy has been implemented to improve the base hospitals' ability to provide on-line direction to paramedics.

DATA COLLECTION AND EVALUATION

In 2010, the County's agreement for an EMS data collection vendor expired and REMSA completed an RFP for a new data collection system (ePCR) vendor. Sansio emerged as the leader over several vendors being considered for the agreement. Currently, Pechanga Fire Department and Corona Fire Department are using Sansio. Blythe Ambulance Service, Idyllwild Fire Protection District, March Air Force Reserve, Murrieta Fire Department, Norco Fire Department, Palm Springs Fire Department, Riverside City Fire Department and Riverside County Fire Department (CAL Fire) are in the process of implementing their use of Sansio. All providers will be required to submit EMS data to REMSA for evaluation. Through continued development of the data collection program REMSA began submitting both EMS and Trauma data to the California EMS Authority in 2010.

PUBLIC INFORMATION AND EDUCATION

There are many organizations that train members of the public on first aid and CPR making it difficult to attain accurate numbers of laypersons trained in first aid and CPR. Provider Agencies such as American Medical Response and the Riverside County Fire Department continue to support large American Heart Association (AHA) training centers for training in emergency cardiac care and cardiopulmonary resuscitation. REMSA partners with Public Health Injury Prevention Services to provide equipment and training to families with children for the safe use of car seats.

DISASTER RESPONSE

The Department of Public Health Administration saw the need to improve disaster preparedness and response in Riverside County, therefore in 2002, Riverside County Public Health Emergency Preparedness and Response (PHEPR) Branch was established. REMSA and PHEPR work together to improve the County's response to public health emergencies and hazards. For 2010, PHEPR and REMSA have continued to collaborate on emergency preparedness planning and exercises culminating in a successful Golden Guardian exercise in November. The REMSA Director and PHEPR Branch Chief participated on a workgroup lead by the California Department of Public Health (CDPH) and the California EMS Authority (EMSA) to establish the California Public Health and Medical Emergency Operations Manual (PHMEOM), a document that for the first time establishes processes and procedures for the statewide health and medical mutual aid system. The PHMEOM will be used to update Public Health and Medical Disaster Response Plans for the County throughout 2011 and 2012.

CONCLUSION

It is the focus of the EMCC to provide observations and recommendations in order to improve Riverside County's EMS system. This is accomplished through its diverse membership and direct involvement in advising, planning and directing activities that influence Riverside County's EMS system. Riverside County's EMS system continues to be recognized by State Public Health and EMS regulatory agencies as a leading system in the State. We thank the Board of Supervisors for their support in improving Riverside County's EMS system.