

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

414



FROM: Department of Public Health

SUBMITTAL DATE:
September 3, 2014

SUBJECT: Emergency Medical Care Committee (EMCC) Annual Report. Districts - All [\$0 dollars].

RECOMMENDED MOTION: That the Board of Supervisors:
Receive and file the EMCC's 2013 Annual Report

BACKGROUND:
Summary

Resolution 2013-052 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 the EMCC's 2013 annual report that was approved for submission by the EMCC at their July 16, 2014 meeting.

Departmental Concurrence

BM

Susan D. Harrington

Susan D. Harrington, Director
Department of Public Health

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 0.00	\$ 0.00	\$ 0.00	\$	Consent <input checked="" type="checkbox"/> Policy <input type="checkbox"/>
NET COUNTY COST	\$ 0.00	\$ 0.00	\$ 0.00	\$	

SOURCE OF FUNDS: N/A Budget Adjustment: No
For Fiscal Year: 14/15

C.E.O. RECOMMENDATION: APPROVE
BY: *Jennifer L. Sargent*

County Executive Office Signature Jennifer L. Sargent

MINUTES OF THE BOARD OF SUPERVISORS

- A-30
- Positions Added
- 4/5 Vote
- Change Order

Prev. Agn. Ref.: _____ **District:** All **Agenda Number:** _____

2-9



RIVERSIDE COUNTY
EMERGENCY MEDICAL CARE COMMITTEE
2013
Annual Report



INTRODUCTION

This report documents Riverside County Emergency Medical Care Committee's (EMCC's) observations of EMS matters in Riverside County. By virtue of the EMCC membership (pursuant to Board of Supervisors Resolution No. 2013-052), these observations are composed by a varied group of individuals that make up this EMS advisory group. Reporting these observations will help to reinforce positive changes within Riverside County's EMS system particularly with the implementation of the recommended changes from the EMS system evaluation and strategic planning. Each member of the EMCC has been advised and tasked with communicating the information and actions approved by the EMCC to their respective constituencies.

EMCC MEMBERSHIP

EMCC Membership has been established by Board of Supervisors Resolution No. 2013-052 which currently consists of the following individuals:

Air Ambulance Provider Representative—vacant
Ambulance Association of Riverside County—vacant
Prehospital Medical Advisory Committee (PMAC) Physician Representative—Stephen Patterson, MD
PMAC Prehospital Representative—Jim Price
Hospital Association Representative—Dimitrios Alexiou, FACHE
Majority EOA Ground Ambulance Provider Representative—Peter Hubbard
Riverside County Medical Association Representative—Deepak Chandwani, MD
Riverside County Fire Chiefs' Association Representative--Jason Keeling
Coachella Valley Association of Governments Representative—Randy Bynder
Western Riverside Council of Governments Representative—Vacant
Riverside County Law Enforcement Agency Administrators Assoc. Rep.—Sean Hadden
Riverside County Fire Department Representative—Phil Rawlings
Supervisorial District One Representative—Robert Roy
Supervisorial District Two Representative—Stanley M. Grube, FACHE (EMCC Chair)
Supervisorial District Three Representative—Vacant
Supervisorial District Four Representative—Blake Goetz (Vice Chair)
Supervisorial District Five Representative—Kent McCurdy

STAFFING AND TRAINING

Riverside County maintains an EMS staffing level of approximately 4,000 EMS personnel on a two-year credentialing renewal cycle. For the 2013 calendar year REMSA credentialed 1,488 EMTs, 629 paramedics and 135 MICNs.

For the 2013 calendar year there were 178,205 responses for 9-1-1 ambulance services and 86,920 responses for Interfacility retail ambulance services totaling 265,125 ambulance responses. During the 2013/2014 ambulance permit cycle there were 24 ambulance providers that received a Riverside County Ambulance Operator Permit to provide ambulance services in Riverside County. This decreased from 26 ambulance providers permitted to operate in Riverside County from the previous permit cycle.

In continuing with the established Policy and Procedures Manual's annual update cycle, the 2013 changes became effective April 1, 2014. REMSA and EMS stakeholders and participants work diligently to ensure the appropriate policies are addressed during each update cycle. Additionally, train-the trainer classes are rolled out during each update cycle to ensure there is consistent training among EMS providers.

ALS AMBULANCE EXCLUSIVE OPERATING AGREEMENTS

In 2013, there were no changes to Exclusive Operating Agreements (EOA). However, REMSA has continued to monitor these agreements and holds semiannual EMS Administrative Zone meetings for each EOA to review compliance and refine and modify response time zone requirements. Discussions regarding changing contracts will be take place in 2014 following the EMS system evaluation project.

EMS SYSTEM EVALUATION PROJECT

Much work was done on the EMS System Evaluation Project during 2013. A Steering Committee was established representing a broad group of EMS system stakeholders. Several members of the Steering Committee are EMCC members as well. They have been tasked with providing advice on the EMS System Evaluation Project. For 2013, the EMS System Evaluation Steering Committee had bimonthly meetings in order to provide comments on The Abaris Group's detailed analysis of the current design and performance of Riverside County's EMS system. Later in the year the Steering Committee met monthly in order to provide feedback and give their approval on The Abaris Group's "As-Is" and Recommendations & Observations reports that were presented to the Board of Supervisors on February 11, 2014. All agendas, minutes and reports for the EMS system evaluation and strategic planning process can be accesses at: www.rivcoems.org.

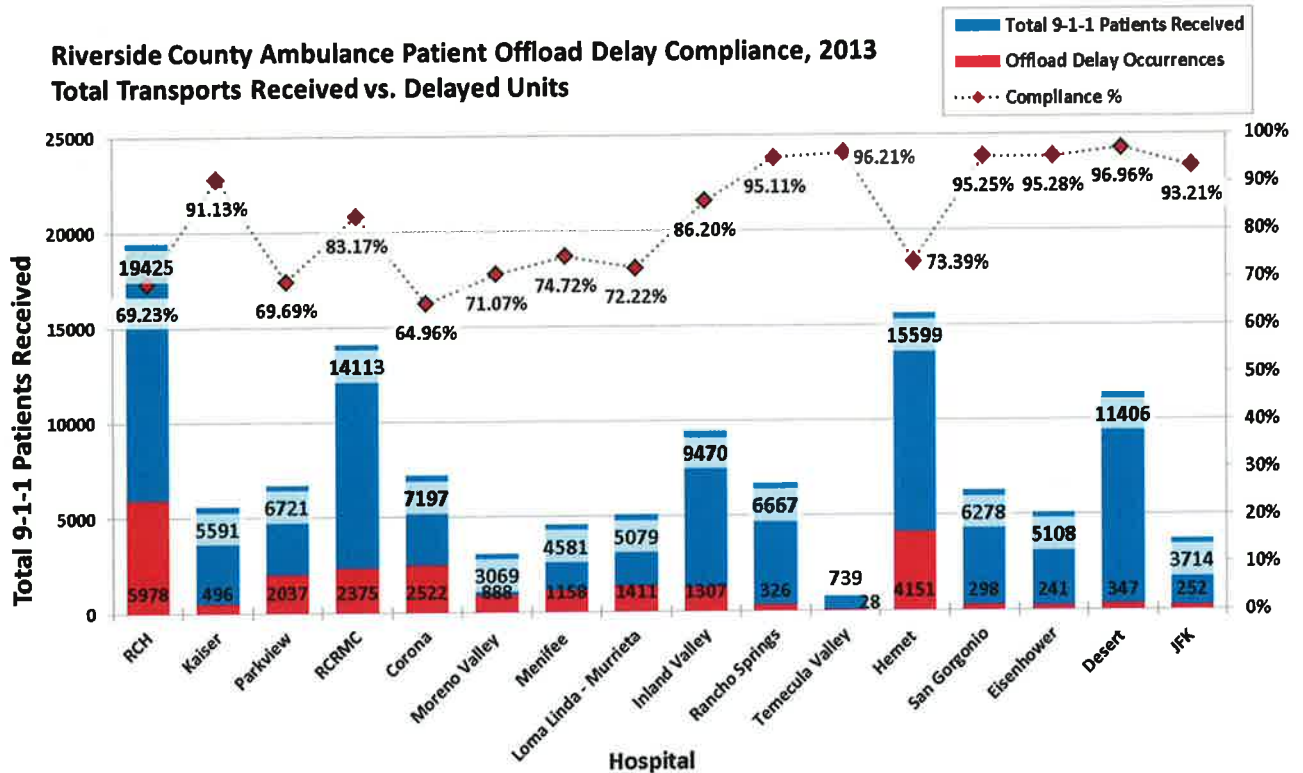
TRANSPORTATION PLAN

Since the last annual report, REMSA has received correspondence from the California Emergency Medical Services Authority (EMSA) regarding Riverside County's EMS Transportation Plan. In this correspondence, EMSA stated that the Riverside County Transportation Plan would not be approved unless the Mountain Plateau Zone and the Pass Zone were identified as non-exclusive. According to EMSA, these zones have gone through competitive bids more than 10 years ago and therefore are not eligible to be "grandfathered" as exclusive pursuant to Health and Safety Code Section 1797.224.

HOSPITALS

For the year 2013, REMSA and system participants have been working on implementing a Prehospital Stroke System by April 1, 2014. This system will allow prehospital 9-1-1 providers to transport patients suffering from strokes to designated Stroke Centers. Several hospitals in Riverside County have been working toward achieving one of the following levels of designation for a Stroke Center: Stroke Ready Hospital, Primary Stroke Center or Interventional Stroke Center. REMSA will recognize Stroke Ready Hospitals until April 1, 2015, by which time they must have achieved a Primary Stroke Center certification from a recognized accrediting organization.

As noted in the 2012 report, the standard for an Ambulance Patient Offload Delay (APOD) was modified from twenty-five minutes (25) up to thirty minutes (30) in 2013, giving the hospital Emergency Departments an additional five minutes (5) to assume care of the EMS patients. Data presented to EMCC shows that delays, delay hours and volume of transports have continued to rise since 2011. For the primary contracted 9-1-1 ALS provider, the 2013 occurrences of ambulance patient offload delays totaled 23,815, which amounts to approximately nineteen (19) percent of their total 9-1-1 transports to hospitals in 2013 which was one hundred twenty four thousand seven hundred fifty seven (124,757). The chart below shows total 9-1-1 transports from AMR ambulances to each of the hospitals, the APOD occurrences at each facility, and that relationship as a percentage. It is also important to note that transport volumes have also continued to increase during the same period with an increase of approximately ten (10) percent in the number of transports, which amounts to an additional ten thousand five hundred twenty one (10,521).



Prepared by T. Douville/P. Shepherd, REMSA

MEDICAL CONTROL

Medical control is maintained through REMSA's Policy Manual and through on-line medical direction with base hospitals. REMSA regularly updates their Policy Manual to keep the system abreast of new developments and improvements in the industry, with policy changes being revived and approved by PMAC and EMCC as appropriate. The 2013 Policy Manual reflected changes made by the Policy Review Forum throughout 2012, and two train-the-trainer sessions were held to ensure widespread consistent interpretation and application of the policy manual

changes. Additionally, Base Hospital physicians and MICNs are required to undergo training to ensure familiarity with Riverside County Prehospital protocols.

DATA COLLECTION AND EVALUATION

The Sansio data collection project continues to be adopted for use by EMS providers in Riverside County. Many of Riverside County's EMS providers are on Sansio HealthEMS Patient Care Report (ePCR) system. However, REMSA has mandated that all EMS first responders and ground ambulance providers must utilize the County contracted ePCR system by January 1, 2015.

In 2013, REMSA implemented a web-based trauma registry. As the central site, REMSA has developed a data dictionary and provides continued training and support to Trauma Centers in Riverside County.

REMSA has participated in the California EMS Authority's Core Measures project since it began in 2013, and has submitted data for the years 2010, 2011, 2012, and 2013. This data will allow Riverside County's EMS system to analyze and compare EMS related patient care outcomes for system-wide improvements.

PUBLIC INFORMATION AND EDUCATION

Due to the many organizations that train members of the public on first aid and CPR it is difficult to attain accurate numbers of laypersons trained in first aid and CPR. Several Riverside County prehospital provider agencies support American Heart Association (AHA) training centers for training the public in emergency cardiac care and cardiopulmonary resuscitation. The EMS system evaluation project has identified that a system-wide coordinated EMS public information and education program is needed.

DISASTER RESPONSE

Public Health Emergency Preparedness and Response (PHEPR) Branch representatives provide reports on disaster preparedness activities and actual events at EMCC's quarterly meetings. For 2013 there were reports given on the status of influenza outbreaks in Riverside County and the use of Urban Areas Security Initiative (UASI) Program funding to improve pediatric disaster surge capacities in Riverside and San Bernardino Counties. This was accomplished by surveying hospitals in Riverside and San Bernardino Counties and providing them with pediatric disaster plan recommendations and pediatric equipment.

CONCLUSION

The EMCC membership allows representatives from diverse EMS system stakeholder organizations to review and discuss Riverside County's EMS system; this thereby facilitates broad collaborative recommendations for system-wide improvement. The EMCC supports the EMS system-wide evaluation and strategic planning project and looks forward to reviewing and discussing the outcomes of this important process. We thank the Board of Supervisors for their continued support in improving Riverside County's EMS system.