



# County of San Diego

**NICK MACCHIONE, FACHE**  
AGENCY DIRECTOR

**HEALTH AND HUMAN SERVICES AGENCY**  
EMERGENCY MEDICAL SERVICES  
6255 MISSION GORGE ROAD, MAIL STOP S-555  
SAN DIEGO, CA 92120-3599  
(619) 285-6429 • FAX (619) 285-6531

**WILMA J. WOOTEN, M.D., M.P.H.**  
PUBLIC HEALTH OFFICER

## **MISSION STATEMENT**

**“As advisors to the San Diego County Board of Supervisors, the Mission of the Emergency Medical Care Committee is to be an advocate for the community through the development of strategies for continuous improvement of the emergency medical services system.”**

## **EMERGENCY MEDICAL CARE COMMITTEE (EMCC) MEETING**

Daryn Drum, Chair/ Christine Wells, R.N., Vice-Chair

### **Minutes**

**Thursday, January 28, 2016**

### **Members Present**

Abbott, Stephen – District 5  
Adler, Fred – District 3  
Blacksberg, David – Hospital Assoc. of SD/Imp. County (Alt)  
Carlson, R.N., Sharon – Hospital Assoc. of SD/Imp. County  
Drum, Daryn – County Paramedic Agency Committee  
Green, Katy – District 1  
Kahn, M.D., Christopher – District 4  
Maxwell, Paul – SD Co. Paramedic Association  
Meadows-Pitt, R.N., Mary – District 2  
Parr, Andy – SD County Fire District Association  
Rice, Mike – Ambulance Association of SD County  
Rosenberg, R.N., Linda – Emergency Nurses Association  
Wells, R.N., Chris – Base Hospital Nurse Coordinators

### **In Attendance**

Broyles, Linda – RCCP/AMR  
Donafrio, M.D., Joelle – UCSD Fellow  
Foreman, Kelly – Mercy Air  
Hartsock, Ryan – Advantage Ambulance  
Peltier, Patricia - AMR

### **County Staff**

Ameng, R.N., Diane  
Haynes, M.D., Bruce  
Mahoney, R.N., Meredith  
Smith, R.N., Susan  
Wolchko, Janet I. (Recorder)

### **Vacant Positions**

League of California Cities  
San Diego County Medical Society  
San Diego Emergency Physicians' Society  
Bi-National Emergency Care Committee

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## **I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS**

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Chris Wells, Vice-Chair called the meeting to order at 9:05 am.  
Attendees introduced themselves.

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## **II. PUBLIC COMMENTS/PETITIONS**

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There were no public comments or petitions submitted.

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### III. APPROVAL OF MINUTES

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A motion was made by Stephen Abbott, seconded by Linda Rosenberg to approve the minutes from October 22, 2015. Motion carried.

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### IV. STANDING COMMITTEE REPORTS

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#### A. Prehospital/Hospital Subcommittee – Mary Meadows-Pitt, R.N.

1. The EMCC Prehospital/Hospital Subcommittee discussed offload delays.
2. Policy review included:
  - S-411 Reporting of Suspected Child, Dependent Adult or Elder Abuse/Neglect. Suggested changes will be made and brought back to the subcommittee for further review. Reporting time frame for elder/dependent abuse has changed since 2015.
  - S-416, Supply and Resupply of Designated EMS Agencies and Vehicles. Suggested edits by the subcommittee will be forwarded to the Base Station Physicians Committee (BSPC) for approval and then to County Counsel.
  - A-475, Air Medical Support Utilization. Suggested changes will be forwarded to BSPC for review and will be brought back to the Prehospital/Hospital Subcommittee.
3. Prehospital/Hospital Chair and Vice-Chair were elected.  
Chris Wells was elected Chair and Mary Meadows-Pitt was elected Vice-Chair for 2016.

#### B. Education and Research Subcommittee – Diane Ameng, R.N.

The Subcommittee did not meet in January due to the Martin Luther King Holiday and will not meet on February 15<sup>th</sup> due to Presidents Day. A combined meeting for January and February has been scheduled for February 29<sup>th</sup>, 10:00 – 11:30 am.

- County Paramedicine (CP) pilot projects have started: City of Carlsbad has two (2) patients enrolled and City of San Diego has 11-12.
- In March the prehospital and EMT training program policies will be reviewed. Program directors have been notified.

#### C. Disaster/Operations Subcommittee – Sharon Carlson, R.N.

The Subcommittee met last week but a quorum of members was not present to vote on agenda items.

1. The EMCC Bylaw memberships were reviewed.
2. The Spring Community drill has been changed from March to May 4<sup>th</sup>. Public Health Services (PHS) and the County will be setting up an alternative care site in Carlsbad at the safety center. The exercise scenario is an evacuation surge drill due to El Niño including mudslides and flooding curtailing traffic. Children's and Mary Birch Neonatal Intensive Care Unit (NICU) will be practicing evacuation.

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### V. EMS MEDICAL DIRECTOR - Bruce E. Haynes M.D.

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- A. Bob Metz is doing well. He has had a tracheostomy which will be removed today. An automatic implantable cardioverter defibrillator (AICD) was placed a couple of days ago. Marcy Metz and their family are very thankful for everyone's support.
- B. The buyout of Rural Metro (RM) by American Medical Response (AMR) continues. AMR is adding resources to help with response times.

- C. Zone 2 ambulance response zone was open for bid. EMS is researching the area that abuts with Zone 1 which is an AMR zone. The Mutual Aid agreement shares a border on what was previously Zone 1 and is now Zone 2. Mercy is the contractor for Zone 2 and has had good response times. Map borders and population data are being reviewed.
- D. Aeromedical Dispatch Protocols will be reviewed by EMCC Prehospital/Hospital Subcommittee.
- E. Base Hospital Physicians
1. A BSPC Subcommittee has been established to review and improve the survival rate of cardiac arrest in the County. Brad Schwartz, MD will be the Chair and Diane Ameng, R.N. will be the EMS contact. The subcommittee will be reviewing:
    - CARES outcome data.
    - Contact Dispatch regarding their assisted CPR.
    - CPR hands only campaign and events.
    - Encourage police defibrillation in areas where appropriate and where there are longer response times.
    - Interest in ALS and hospital care.
  2. The BSPC Subcommittee will be meeting each month. Reporting will be brought to EMCC.
- F. Stroke Consortium is close to releasing their five (5) year report on the Stroke system since it started.
1. Intravenous thrombolytics and identifying a Stroke patient in the field has been up to the well time of four (4) hours. With the new endovascular treatments to remove clots with a device, the consortium has recommended to move the time to six (6) hours.
  2. Triage criteria will be reviewed. The idea is to identify large volume stroke patients to make sure they are taken to a Stroke hospital.
  3. The endovascular survey showed half of the hospitals in the County have the ability to do endovascular surgery. That will be reviewed for transport and patient destination. Stroke patients should go to the closest Stroke hospital to receive the proper imaging.
- G. Treatment guidelines regarding spinal immobilization on patients with spinal injuries, and uses of spine (hard) boards for anything but extrication.
1. Expanding on the intent, following the protocol in all cases and understanding what the intent is.
  2. Discussion topics included:
    - Dr. Kahn added that trauma surgeons requested for revisions to be made part of the protocol or part of the skills list. In response, the protocols do have referrals to the issue and are to be followed.
    - Clarification on the use of backboards as part of the training and interpretation of the policies.
    - Litigation and evidence of benefit and harm and confusion on the position of using backboards for extrication and/or for mechanism of injury.
- H. The Health Information Exchange (HIE) Federal Grant is to help close the gap between EMS and information exchanges. The San Diego Health Connect organization is submitting an application to the State for the grant which will involve County EMS, hospitals and field providers as well as Imperial County.

- I. SB867 is a Legislative bill to extend payment through the Maddy Fund to physicians and hospitals for patients who do not pay on their own for Pediatric Trauma Care. The bill will continue the funding and will not require extending funding every few years.
- J. Love your Heart is on February 11, 2016. The event is an HHS sponsored program where the community can receive blood pressure (BP) screenings. Last year there was a total of 21,000 BP's taken. People are also encouraged to be aware of their BP numbers, their numbers on cholesterol, etc. so they know what their risk factors are.
- K. Statewide required response time data collection is occurring. Everyone has been cooperative in submitting the data.
- L. Sidewalk CPR through the American Heart Association (AHA) is moving to May. Sue Dickinson is the EMS contact working on sidewalk CPR.

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**VI. EMS STAFF REPORT – Diane Ameng, R.N.**

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- A. There are 728 documented cases of flu as of this week, last week the number of flu cases was 548. There were eight (8) ICU cases last week and ten (10) cases this week. There have been four (4) deaths since October. Individuals that have passed away from the flu are in the high risk, comorbid and elderly.
- B. Certification:
  1. Same Day certification will not be available due to staff shortage and volume of certifications. Customers are able to come in six (6) months in advance of the expiration of certification.
  2. Discussion ensued on the provisional issuance of certification and using the receipt as proof of certification until a card is issued.
  3. Timeline is three (3) to five (5) days for cards, pickup or mailed.

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**VII. OLD BUSINESS**

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- A. EMS Fees

There is no additional information to report on the updated EMS fee implementation. The item is estimated to go on the Board of Supervisors November 2016 agenda. Any increase will most likely go into effect next fiscal year.
- B. Offload Delays
  1. Hospital CEOs met and discussed the topic of offload delays and the impact on hospitals and agencies in the field.
  2. Palomar is working with their field representatives and has used their capacity plan; for example, delaying elective surgery. Tri-City has also done the same.
  3. Daryn Drum provided a policy memo that was sent to the San Joaquin County hospitals from Dan Burch, San Joaquin County EMS Administrator. The memo addresses what their EMS System would like to see enacted by the hospitals to help offload delays and to expedite moving the ambulance back in service.
  4. Discussion topics after review of the document:
    - Offload issues are a system issue. Hospital Association of San Diego and Imperial County (HASDIC) has had a discussion with the hospitals regarding the issue.
    - Hospital CEOs are aware of the situation and are utilizing every space allowed by licensing. There is a shortage of hospital beds in the County.

- The Affordable Care Act (ACA) has allowed more people access to healthcare; therefore, there are more people seeking medical care and do not have a medical home.
- Suggestion was to have a forum with stakeholders to meet and address the issue and concerns from both the hospital and EMS standpoint.
- Impact of patients requesting to go to their medical home and hospitals accepting those patients when they are on bypass. Those patients may need to be diverted to the next hospital.
- Ambulance transportation of patients, and appropriate level of care transport to the ER or urgent care. Ability to transport the patient to a clinic if they are not doing paramedic intervention, such as a downgrade from ALS to BLS.
- Psychiatric patients taking bed space is an issue for the hospitals. Dr. Haynes added that the County has provided six (6) million to behavioral health funds.
- Public safety issue on providing 911 emergency services. Duty officers have taken calls from units that have been on extended offload delays and are working with the charge nurses and hospital administration on moving patients.
- Physician order, oversight, liability and patient care. Public education regarding the use of 911 and public service messages.

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#### **VIII. NEXT MEETING/ADJOURNMENT**

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- A. In January, Sharp opened up eight (8) quick care beds. It is designed to be used during peak hours, 1-9 pm.
- B. North County during an active shooter MCI drill has used school buses for transporting patients off scene. Law Enforcement transport by police vehicle was discussed and if that mode of transport would be used during a real active shooter MCI.

The next EMCC meeting is scheduled on February 25, 2016.  
The meeting adjourned at 10:36 am.