



County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

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Public Health Laboratory
PH Nursing
Border Health
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Vital Records

CSA-17 Advisory Committee
Barbara Cerny, Chair/Lee Haydu, Vice-Chair
c/o Emergency Medical Services
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CSA-17 SPECIAL ADVISORY COMMITTEE MEETING Minutes Tuesday, August 28, 2012

Members Present

Cerny, Barbara – Torrey Pines Comm. Planning Group
Muir, Mark – City of Encinitas
Nichols, Mike – City of Solana Beach
Sinnott, Terry – City of Del Mar (Alt)
Tanner, John – Rancho Santa Fe Fire (Alt)
Zovanyi, Peter – Member-at-Large

County Staff Present

Beam, Jamie
Cavanaugh, Adria
Haynes, M.D., Bruce
Metz, Marcy
Mulder, Sian
Pate, Rebecca
Yaghmaee, Saman

Recorder

Wolchko, Janet I.

Agency Representatives Present

Austin, David – American Medical Response
Bavario, Adam – Gentle Care Transport Inc.
Davidson, Bret – Rancho Santa Fe Fire Dept
Downs, Yvonne – Symons Ambulance
Gilligan, Matt – Rural Metro
Johnson, Wayne – Rural Metro
Michel, Tony – Rancho Santa Fe Fire Dept
Murphy, Mary – CSA-17 Fire Departments
Murphy, Michael – American Medical Response
Rice, Mike – American Medical Response
Russo, Joe – Rural Metro
Scott, Henry – Encinitas Fire Dept
Soto, Alicia – Symons Ambulance
Twohy, Frank – Elfin Forest/Harmony Grove
Ward, Darrin – Encinitas Fire Dept

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Barbara Cerny, Chair called the meeting to order at 4:00 p.m. Introductions were made.

II. APPROVAL OF MINUTES

A motion was made by Peter Zovanyi, seconded by Terry Sinnott to approve the minutes from the May 1, 2012 CSA-17 meeting. Motion carried.

A motion was made by Peter Zovanyi, seconded by Mark Muir to approve the minutes from the August 7, 2012 CSA-17 meeting. Motion carried.

III. PUBLIC COMMENTS/PETITIONS

There were none present or submitted.

IV. BOARD LETTER

A draft Board Letter was discussed at the previous CSA-17 Advisory Committee meeting to initiate the competitive procurement process and was distributed with the documents for today's meeting. The Board Letter authorizes the County Department of Purchasing and Contracting to initiate the competitive process for Advanced Life Support services in CSA-17. It was decided to address the Board Letter after the Operations Report and Discussion of Services agenda items.

V. OPERATIONS REPORT

Darrin Ward, Encinitas Fire Department and Mary Murphy, CSA-17 EMS Coordinator presented an Operational Overview in a PowerPoint presentation that included the following summary information:

A. CSA-17 background:

- 1969 The County Board of Supervisors formed the CSA-17 District.
- 1992 The area was redesigned as an EMS District to allow Advanced Life Support (ALS) services
- 1993 The District was expanded with the remainder of Rancho Santa Fe Fire District, portions of Del Dios and 4- S Ranch into CSA-17.
- 1999 Most of the fire departments within the CSA-17 with the exception of Elfin Forest all provide ALS First Responder service. Elfin Forest provides Basic Life Support (BLS) First Responder service as well as a BLS ambulance.

The current CSA-17 area model is a combination of First Responder paramedics on fire engines and transport ambulance medics with an EMT. Paramedics require 2,200 hours of training, administer 30 different drugs and provide Advanced Cardiac Care; EMTs require 120 hours of BLS and splinting training.

CSA-17 has 13 ALS engine/truck companies from 4 different fire agencies, each apparatus having one or more paramedics. Elfin Forest has a BLS first responder service. Only part of Elfin Forest is in the CSA-17 service area. Rural Metro currently operates five 24-hour ambulances and one 12-hour ambulance in CSA-17.

After the 2007 contract was awarded, SDMS (Rural Metro) added another 24-hour ambulance to Rancho Santa Fe for optimal coverage and to meet response time requirements in CSA-17. The Encinitas ambulance was re-positioned for improved response.

Demographics were presented for each area along with response time criteria.

B. ESCi Study, 2005

The ESCi Study was conducted with data on community growth, policies, procedures and financial data, emergency incident data, service delivery practices and current service delivery objectives and targets.

At that time, Rural Metro was the ambulance provider; there were three 24-hour ambulances with 2 paramedics on each ambulance. The ambulances were based in Solana Beach, Encinitas Station 5 and Rancho Santa Fe Station 1. Following the report a decision was made to convert the three 2-paramedic ALS ambulances to three 24-hour units and two 12-hour units with 1 paramedic and 1 EMT on each ambulance.

The Deccan Study was then commissioned to establish the optimal positioning for those units.

C. The following issues were identified:

Planning for system change, growth and operations:

2005 - There was a concern due to system demand and increased population in the area. At that time, the call volume was approximately 5,676 and there were 3 ambulances in CSA-17.

2012 – The call volume is approximately 6,932, with 5 24-hour ambulances and 1 12-hour ambulance.

Response times:

The 2005 contract stated that response time was to be within 10 minutes for the entire CSA-17 area as a whole.

In 2012, following the review of the ESCi and Deccan Study findings, the 10 minute response time was applied to each jurisdiction with a 90% or more goal rate with the exception of Elfin Forest. As a result of the new RFP requirements a 6th unit was added.

Financial Inequity:

In 2005, CSA was funded through the “benefit fee” and a share of the property tax. Long term sustainability of services to the CSA-17 area was addressed and the long term costs of operations. Currently, there is a resident fee of \$400 plus mileage for residents in the area which is predicted to balance the financial inequity.

End of Service Contract for Ambulance Services:

There was concern that there was no contingency plan in the event there was an issue with provider coverage. If there was an issue with provider coverage, the County would most likely look to the fire agencies to support the EMS system. The fire agencies were encouraged to react to any sudden changes by creating a joint power agreement to make system improvements.

System Performance:

It was recommended to have more in-depth monthly compliance reports. The report would include alarm processing time, turnout time, travel time and response time.

Deployment of Services:

The study raised concerns because ambulances were co-located with first responders and had an overlap of paramedic resources. There was also a concern with first responder agencies guaranteeing all ALS response times.

ALS First Response:

Deccan International was commissioned in 2005 to review ambulance placement, to look at planning for projected growth of CSA-17, and was tasked to resite the three units that were in service at the time. The goal was to site 2 new peak 12-hour medics focused for 2008, and resite the existing 3 units.

D. Deccan Study Criteria

The Deccan Study examined how to judge response times and to target 90% or more of calls within 10 minutes. The two measures that were used were Incident Score which is the percentage of calls within 10 minutes, and Coverage Score which is the percent of area within 10 minutes.

Over the course of the Deccan study, various scenarios and repositioning of the units were reviewed for the district. Call volume was reviewed and peak time of day was identified as between 0800 and 2000 hours. Deccan looked at 2004 and 2008 projections with population growth and demand, and considered the impact of having and not having San Diego provide mutual aid to the CSA-17 area.

Individual community challenges

Del Mar:

- 1) Secondary calls, dispatch of San Diego Medic Unit 24 from Del Mar Heights assist response.
- 2) If the 12 hour unit is moved from Encinitas Station 2, it would decrease coverage for backup in Solana Beach and Del Mar.
- 3) High impact events which has improved with the recent contract.

Encinitas:

- 1) Has the highest call volume but not the most ambulances.
- 2) Would like to increase services in the Olivenhain area by decreasing ambulance response times.

Rancho Santa Fe Fire:

- 1) Has adequate coverage with the current deployment model.
- 2) Needs the current units for coverage and to meet response time criteria.
- 3) Would like the County to include property tax collection in 4-S Ranch.

Solana Beach:

- 1) Has adequate services
- 2) Has good response time from both fire and ambulance companies

- 3) Backup ambulance call times will decrease if a 12-hour ambulance is moved to Encinitas Station 2.

Elfin Forest:

- 1) Exempt from the 10 minute 90% response time criteria
- 2) They would like the Elfin Forest/Harmony Grove area to be annexed to CSA-17
- 3) The unit placed at RSF Station 4 significantly decreases response time to Elfin Forrest.

E. CSA-17 Operations RFP recommendations

Equipment:

1. EKG monitors the same for all providers and restocked through the ambulance provider.
2. LUCAS CPR devices provided in ambulances for better CPR and increase personnel safety during transport.
3. VHF portable and mobile radios for each ambulance along with 800mhz in order to comply with North Comm Communications policy.
4. Ambulance service to resupply oxygen for all first responder units.
5. No new equipment to be place in ambulances until it has been reviewed by CSA-17 Operations Committee and training has been conducted.

Personnel:

1. Provide 24 hour, 7 day a week supervision of crews.
2. Customer service personnel related issues handled by the supervisor. If it is documented more than once it will be reviewed by the CSA-17 Operations Committee. That committee should have the right to remove the ambulance employee from CSA-17.
3. Employee standards, employees to be neat and professional at all times. Ambulance employees need to abide by the fire agencies blended grooming policy. Tattoos and hair styles are important in the public as they do not always understand that there are separate agencies.
4. The Public Education component needs to be evaluated and more specific i.e. Car seat inspections once a month per jurisdiction, quarterly CPR classes in each community.

Operations:

1. Fire Department Battalion Chiefs should able to move ambulances to cover shortages due to out of place engines i.e. during major incidents.
2. A monthly report should be given on the time the ambulances are out of service and the reason why, i.e. for training or classes.

VI. DISCUSSION OF SERVICES

The following issues regarding services in the CSA-17 areas were discussed:

- 24-hour supervision which is not necessarily located in the CSA-17 area, but within San Diego. The preference would be to have 24-hour supervision available in the CSA-17 area.
- Exemption reports, how they are approved and met.
- Property tax distribution and 4-S ranch contribution. 4-S Ranch contributions to CSA-17 were estimated at approximately \$84,000 to \$100,000.
- Would Del Mar be made an available location for providers to house an ambulance? Response was that an impact study has not been done.

- Provider's responsibility for meeting standards. There is a 2-year contract with optional extensions. A performance clause is in the current contract, however there are no financial penalties associated with not meeting standards.
- How response times are recorded, electronically, and radios are used as back-up. The computer will tell you the route. There is also an automatic location unit.
- RFP bidding process, criteria and competitive process. The State EMS Authority has requirements that the State also reviews and approves. Initial recommendations for Source Selection Committee members are made by the department and approved by the HHSA Director.
- Operational requirements and CSA-17 Advisory Board input into the RFP contract. Recommendations are being recorded and during the open forum recommendations will be taken into consideration with the writing of the RFP.
- Recommendation for Chiefs to create a CSA-17 Operations Comprehensive Manual to orient providers to the CSA
- Operations service if there was a financial cost limit.
- Conflict of interest regarding writing of the RFP.

Barbara Cerny, CSA-17 Chairperson thanked the operation chiefs for their comprehensive presentation.

Draft Board Letter review

A motion was made by Peter Zovanyi to initiate the formality of the RFP process.

Discussion: There was an inquiry as to the Advisory Board statement that was noted in the draft Board Letter. Ms. Metz gave an example of a statement that could be given, "The CSA-17 Advisory Board Committee meeting was held on August 28, 2012 where the Advisory Board discussed the current service delivery model for ALS life support services and provided input for the upcoming RFP.

Contract terms and extensions on the Board letter were reviewed.

There was a second motion by Peter Zovanyi, seconded by Terry Sinnott to have the operations report, contract time and extensions terms forwarded to County staff developing the RFP.

Discussion ensued on performance measurements by the operation chiefs for review, the opportunity to hold the contractor accountable as well as the possibility of financial penalties and if financial penalties would be appropriate. The RFP should be clear and specific on what is expected for performance in addition to the 90% in 10 minutes response time.

The RFP will be kept on the CSA-17 Advisory Board agenda.

A final motion was made by Peter Zovanyi, second by Mark Muir to add a CSA-17 Advisory Committee comment to the Board Letter using Marcy Metz draft example. Motion carried.

Barbara Cerny requested that the operations report is added to the CSA-17 agenda as a standing item.

VII. ADJOURNMENT

Meeting adjourned at 6:08 pm.

The next quarterly CSA-17 Advisory Board meeting is scheduled for Tuesday, November 6, 2012 at 4:00 p.m.

Submitted by

Janet I. Wolchko, Administrative Secretary
County of San Diego Emergency Medical Services