



County of San Diego

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EMERGENCY MEDICAL SERVICES
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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)

Education/Research Subcommittee

6255 Mission Gorge Road, San Diego, CA -92120

Thursday, January 16, 2014

Minutes

IN ATTENDANCE

Members

Abbott, Stephen – District 5
Carlson, R.N., Sharon – Hospital Assoc. of SD/Imperial Counties
Green, R.N., Katy – District 1
Parra, Frank – S.D. County Fire Chiefs Assoc. (Alt)
Rice, Mike – S.D. County Ambulance Association

Agency Representatives

Allington, R.N., Linda – City of Carlsbad
Christison, Brian – City of San Diego
Innis, Steve – First Choice Ambulance
Jensen, Anne – City of San Diego
Johnson, Wayne – Rural/Metro
Phillips, Fred – ARC/Medtrain
Pierce, R.N., Jodie – S.D. Fire Department
Saner, Dan – S.D. Fire Department
Yates, Judith – Hospital Assoc. of S.D./Imperial Counties

County Staff

Ameng, R.N., Diane
Beam, Jamie
Metz, R.N., Marcy
Smith, R.N., Susan

Recorder

Wolchko, Janet

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Mike Rice, EMCC Chairperson called the meeting to order at 2:05 pm. Attendees introduced themselves.

II. ELECTION OF CHAIR AND VICE-CHAIR

According to the EMCC bylaws, Chair and Vice-Chair of the Education/Research Subcommittee will be members of the EMCC Executive Board, Chair or Vice-Chair of the EMCC.

Motion was made by Katy Green, seconded by Frank Parra to nominate Mike Rice for Chair of the EMCC Education/Research Subcommittee. Motion carried.

Motion was made by Mike Rice, seconded by Katy Green to nominate Linda Rosenberg for Vice-Chair of the EMCC Education/Research Subcommittee. Motion carried.

III. COMMUNITY PARAMEDICINE OVERVIEW - Marcy Metz

A. Background

Community Paramedicine is the expanded use of paramedic resources to address local health care needs and is also known as *Mobile Integrated Healthcare*. Expanded roles included six (6) different types of pilot projects that agencies could develop projects for:

1. Transport of patients not needing emergency care to alternate non-emergency department locations.
2. After assessing and treating, refer or release an individual at the scene of an emergency response.
3. Address the needs of frequent 911 callers by helping them access primary care and other social services.
4. Provide follow up care for persons recently discharged from the hospital and at increased risk of a return visit to the emergency department or readmission to the hospital.
5. Evaluate and treat persons with diabetes, asthma, congestive heart failure, or multiple chronic conditions.
6. Partner with community health workers and primary care providers in underserved areas to provide preventive care.

B. Authority

The Office of Statewide Health and Planning and Development (OSHPD) Healthcare Workforce Pilot Projects (HWPP) program allows organizations to test, demonstrate and evaluate new or expanded roles for healthcare professionals or new healthcare delivery alternatives before changes in licensing laws are made by the Legislature.

C. Application

Emergency Medical Services Authority (EMSA) submitted the Community Paramedicine Pilot Project application on December 20, 2013. There were 13 pilot projects provisionally accepted by EMSA to be included in the application. Two pilot projects from San Diego included:

- The City of Carlsbad: *New Methods of Directing Patient Care*.
- The City of San Diego: *Enhanced Resource Access Program (RAP)*.

D. Pilot Project Calendar

1. Submission of OSHPD application - week of December 16, 2013
 2. Advisory Committee convened – January 2014
 3. Expected approval from HWPP – April/May 2014
 4. Core Curriculum Training – June/July 2014
 5. Site Specific Curriculum Training – March.
 6. Final Project Approvals will be issued in August 2014
- E. EMSA will establish a State Community Paramedicine Advisory Committee to review and oversee the individual project sites. The Advisory Committee will provide feedback, direction and monitor any program issues that arise. The Committee will include representation from EMSA and from each project site, including representatives of Local EMS Agencies (LEMSA's), EMS providers and healthcare systems.

IV. CARLSBAD FIRE PROJECT - Linda Allington

A. Background

1. Linda Allington has been a Mobile Intensive Care Nurse (MICN) in San Diego County since 1989. She has been with the fire service for 17 years and the EMS Manager for Carlsbad Fire since 2006.
2. Carlsbad Medical Director is Gary Vilke, M.D.
3. Carlsbad Fire ran 11,000 calls last year, 82% were EMS. Carlsbad Fire has six (6) stations, five (5) engine companies, a truck company, and three 24 hour ambulances staffed with two (2) paramedics. There are 36 full time firefighter paramedics, 91% of line staff are paramedics.
4. 49% of the patients transferred have Medicare or Senior Health Maintenance Organization (HMO) insurance.

B. Project:

1. Transporting patients not needing emergency care to alternate destinations using telemedicine. Collaborating with medical personnel at Kaiser Permanente to transport patients who are Kaiser members to a Kaiser Permanente Urgent Care facility staffed by emergency physicians and nurses.
2. Estimated number of patients for the project would be 100-150 patients per year.
3. Operationally, all 36 paramedics will be trained.

C. Oversight:

- Offload delays are tracked using a third party vendor, First Watch.
- 100% chart review and administration review.
- Continuous Quality Improvement (CQI).

D. Discussion topics included:

- Reimbursement of cost.
- Services for education.
- Addressing offload delays.
- Interfacing with Kaiser DHR system.

V. SAN DIEGO CITY PROJECT - Anne Jensen

A. Background

1. Ms. Jensen has been a paramedic for 15 years, has a degree in Applied Physics, and is a paramedic and RAP Coordinator.
2. Team for the project:
 - Dr. Dunford, City of San Diego
 - Dr. John Serra, Rural Metro Medical Director
 - Dr. Chris Kahn, UCSD
 - Rural Metro - logistics, equipment and budgeting
 - San Diego City EMS Operations

B. Project: Expansion and enhancement of the Resource Access Program (E-RAP) frequent 911 user program.

1. Strategic initiatives
 - Identify vulnerable patients.
 - Monitor people on the watch list.
 - When appropriate, intervene with public safety partners
2. Connect patients with correct resources.
3. Spectrum of vulnerabilities: psychiatric, geriatric, homeless and serial inebriate.
4. Rap associates:
 - Hospitals
 - Case managers
 - Community organizations
 - Clinics
 - Street Services: San Diego Police Department, EMS, Psychiatric Emergency Response Team (PERT), Serial Inebriate Program (SIP), San Diego Medical Services.
5. E-RAP – electronic program street and surveillance.
 - 911 filter/matching algorithm.
 - Alert, 3-5 minute to delivery.
 - Frequent caller dashboard.
6. Pilot proposal
 - Extend management of frequent users.
 - Assess, treat, and refer.
 - Transport to alternate locations.
 - Post hospital visit follow up.
 - Care for chronic conditions (reinforce primary care).

C. Safety Measures

1. First six (6) months review of Community Paramedicine calls.
2. Telemedicine oversight (speaking with physician).
3. Reinforce primary care.
4. No delay of transport.
5. Pre-established patients with parallel to 9-1-1.

D. Discussion topics included:

- Pharmaceuticals and medications.
- Decision in transporting the patient to the ER. Patient's medical home/provider: Medicare/Cal, private insurance, the uninsured and healthcare component programs.
- Medicaid expansion, dually covered/managed care plans, managed care health plans and providers.
- HIE/EMS Hub patient identification.

VI. COMMUNITY PARAMEDICINE CURRICULUM

The State has released a letter regarding the Community Paramedicine curriculum. If the pilot project is *alternate destination* the 8 to 16-hour training curriculum can be used. Core curriculum information can be sent out to the subcommittee.

VII. SUBCOMMITTEE TECHNICAL ADVISORS

A. Payer representative/managed care partnerships:

- Scripps Healthcare (Chris Wells)
- Sharp Healthcare (Sharon Carlson)
- Kaiser
- Health Plans (George Scolari)
- Behavioral Health (Dr. Michael Krelstein)
- ED physicians (EMOC)
- National perspective (Fred Phillips)
- Military (Tri-Care)/Federal. Balboa Medical Director (Cdr. Demers)
- Medical Physicians: Medical Director of the projects, EMS Medical Director
- Subject matter experts

B. Information for the deliverables and readiness reports:

- Leadership and collaboration - advisory committee.
- Scope of practice.
- Membership, roles defined (voting members).

VIII. FUTURE ITEMS

Schedule a recurring meeting for the EMCC Education/Research Subcommittee to meet monthly or every six (6) weeks.

IX. ADJOURNMENT/NEXT MEETING

Meeting adjourned at 3:45 pm.

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