



## SAN DIEGO COUNTY INDIAN GAMING LOCAL COMMUNITY BENEFIT COMMITTEE

### Application Form For FY 2011-2012 Grants

- A. Name of Jurisdiction: San Miguel Consolidated Fire Protection District
- B. Mailing Address of Jurisdiction: 2850 Via Orange Way Spring Valley, CA 91978
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- C. Name of Project: Sharp Grossmont Hospital Cath Lab Equipment Upgrade
- D. Impacts are associated with which casino(s)? all
- E. The following uses are the priorities for receipt of grant money. Please check all the priorities the project satisfies:

Law Enforcement	Fire Services	Emergency Medical Services <b>X</b>
Environmental Impacts	Water Supplies	Waste Disposal
Behavioral Health	Public Health	Planning and Adjacent Land Uses
Roads	Recreation and Youth Programs	Child Care Programs

- F. On a separate sheet, please provide the following: **(Section F. 1-3 ATTACHED)**

- 1) A complete description of the project;
- 2) Evidence showing the relationship between the project and impacts on your jurisdiction associated with the particular casino(s) listed under "D" above, and data linking the percentage of the requested funding to the percentage of impacts associated with particular casinos (include the data source); and
- 3) An explanation of how the proposed project will mitigate impacts of casino(s).

G. Type of grant for which you are applying: (Check each that applies)

1. **60% Nexus Grant (note that only County of San Diego Offices and Departments are eligible for this type of grant)<sup>1</sup>** \_\_\_\_\_

2. **20% Non-Nexus Grant**  \_\_\_\_\_

These "20% Non-Nexus Grants" are intended only for local jurisdictions (County, cities and special districts) impacted by Barona and/or Sycuan Casinos.

3. **20% Non-Nexus Grant**  \_\_\_\_\_

These "20% Non-Nexus Grants" are intended for local jurisdictions (County, cities and special districts) impacted by casinos of Tribes NOT paying into the Special Distribution Fund<sup>2</sup> and for assistance to local jurisdictions for one-time large capital projects.

H. What is the project's estimated time frame? 1 year \_\_\_\_\_

I. Proportionate share of the project expenditure that mitigates the impact from the casino(s): 100% \_\_\_\_\_

J. Amount of funding requested through this application: \$ 619,445 \_\_\_\_\_

K. What will be the total cost of the project? \$ 619,445 \_\_\_\_\_

L. If total cost of the project exceeds amount of funding requested, please name other sources of funding that will be contributed to the project and the amount provided by each source: \_\_\_\_\_  
\_\_\_\_\_

M. On a separate sheet, please describe how you intend to meet the requirement that grant recipients must provide notice to the public, either through a slogan,  
\_\_\_\_\_

<sup>1</sup> County of San Diego is the only "local government jurisdiction" that meets two or more nexus criteria.

<sup>2</sup> Campo, La Jolla (proposed), La Posta, Pala, Pauma, Rincón, San Pasqual, Santa Ysabel and Viejas Bands.

signage or other mechanism, which states that the project has received funding from the Indian Gaming Special Distribution Fund and further identifies the particular Individual Tribal Casino Account from which the grant derives.

**(Section M. ATTACHED)**

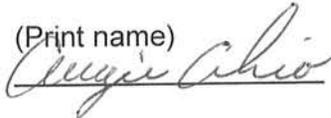
Please e-mail the complete Application to [Eric.Lardy@sdcountry.ca.gov](mailto:Eric.Lardy@sdcountry.ca.gov) **AND** hand-deliver or mail a copy with the page containing the original Authorized Signature to the following address by **March 16, 2012**.

County of San Diego  
Attn. Mr. Eric Lardy  
1600 Pacific Highway  
Room 212, MS A6  
San Diego, CA 92101

I, Augie Ghio, hereby acknowledge that the grant funds requested herein shall be used solely for the purpose that to the best of my knowledge mitigates impacts from casino projects. In compliance with AB 158, I agree to ensure that all grant funds received shall be deposited in a separate interest-bearing account; and at the completion of the project, I agree to return any earned interest or cost savings from the project to the County for reallocation by the Indian Gaming Local Community Benefit Committee.

**Submitted by:** Augie Ghio Title: Fire Chief, San Miguel FPD

(Print name)



(Authorized Signature)

Date: 3-14-12

**CONTACT PERSON:** Name: Darilyn O'Dell, Business Manager, SMFD

Phone: 619-670-0500

Fax: 619-670-0500

E-mail Address: dodell@smgfire.org

F.

1) A complete description of the project:

Through generous 2011-2012 funding from the IGLCBC to the San Miguel Consolidated Fire District, Sharp Grossmont Hospital was able to open a third cardiac catheterization lab as part of the hospital's master plan to expand and meet the continued growth for cardiovascular and interventional services in East County.

Sharp Grossmont Hospital (SGH) has the ability to impact that delivery of care even further through an upgrade to one of its two long-standing cath labs which are 22 years old, and 19 years old, respectively. Necessary improvements to the older of the cath labs will require the purchase of the *Innova 3100-IQ Optima Edition* imaging system to replace the outmoded and nearly unsustainable equipment currently in use.

Currently, the first phases of planning and construction of a new Heart and Vascular Building are well under way at SGH. Three new cath labs will be part of this project, however they will not be ready for nearly 5 years out in the future. During this time of rapid growth and expansion, the hospital will need the aged cath labs to function reliably with upgraded equipment until the new labs are built. The less dated cath lab is now being used as optimally as possible by diverting low fluoro intensive cases in that room (e.g., electrophysiology cases and pacemaker insertions); however the older cath lab has recently broken down twice in one month, taking a whole room out for at least one day each time and rendering it unreliable for cases.

SGH has one of the busiest cath labs (per procedure room) in California. Last year more than 2,230 patients were treated in the cath lab. Of the cath lab interventional patients, over 76 percent are admitted via the Emergency room, whereas the national average is 35 percent. Over 650 patients annually come to the Sharp Grossmont cath labs from the ED and 41 percent are heart attack patients, who need these services emergently. In addition, there are four or five additional urgent cases scheduled daily by physicians. In publicly reported data, Sharp Grossmont Hospital has the highest number of ST-Segment Elevation Myocardial Infarction's (STEMI) reported in the state.

With the increase in patients presenting to the ED with Myocardial Infarction (MI), more commonly known as heart attack, cath lab volume will continue to grow as well. Grossmont is already extending our regular hours of operation to seven days per week to better serve our patients. The number of procedures the cardiac catheterization labs perform each year could reach up to 3,900 annually by next year. Early identification of individuals at high and intermediate risk for MI is crucial because they benefit the most from early and aggressive treatment. The standard of care for acute MI requires immediate access to the cath lab for direct angioplasty and/or stent intervention.

The proposed *Innova 3100-IQ Optima* features a 30-cm x 30-cm detector which is best for high-volume interventional cardiology. It is a big improvement over older equipment that relies on an intensifier to magnify, capture, and process images. As flat panel detectors become more readily available, there are vast improvements in imaging quality. These improvements include much higher resolution, full digital processing, and far less limitations with image magnification, as well as overall improved visualization of patient anatomy. Along with high-quality imaging, the proposed equipment includes important dose-reduction technology. This is important as that the industry predicts a continued focus on reducing radiation exposure over the lifetime of a patient. The FDA is very firm on this. The direction healthcare is going in is less dosage with better image and visualization quality.

SGH has changed the way East County looks at cardiovascular disease. Its cardiac catheterization labs have evolved from performing just diagnostic coronary imaging to performing complex, life-saving cardiac and vascular interventions. The hospital's awards and recognitions include:

- National gold and gold plus recognition by the American Heart Association/American Stroke Association's "Get with the Guidelines" program for exceeding performance measures in treating patients with heart attacks, heart failure and stroke.
- Recognized with the Triple Performance Achievement Award for achievement in all three Get with the Guidelines modules: coronary artery disease, heart failure and stroke.
- Designated a Blue Distinction Center for Cardiac Care by Blue Cross/Blue Shield for meeting quality criteria within a full range of cardiac care services.
- Established as one of 13 San Diego County-designated ST-Segment Elevation Myocardial Infarction (STEMI) centers providing streamlined and optimized treatment for heart attack patients. For these patients, rapid triage to restore coronary blood flow is crucial to prevent permanent damage. Shortening time to treat patients with STEMI within 30 to 45 minutes of symptom onset limits damage and significantly reduces mortality up to 50%. Sharp Grossmont Hospital has the highest STEMI volume in the county and state.
- Exceed national average in performing angioplasty and stent procedures (percutaneous coronary intervention, or PCI) to restore blood flow to the heart within the American Heart Association's guideline of 90 minutes or less.

- 2) Evidence showing the relationship between the project and impacts on your jurisdiction associated with the particular casino(s) listed under "D" above, and data linking the percentage of the requested funding to the percentage of impacts associated with particular casinos (include the data source):

Cardiovascular disease (CVD) refers to a wide variety of heart and blood vessel diseases and conditions, including coronary heart disease, stroke, high blood pressure, and high blood cholesterol, heart valve disease, and heart failure. While much is being done to curb heart disease and improve patient well being with preventive care, a statistical brief released by the American Heart Association (AHA) "Heart Disease and Stroke Statistics—2012 Update," defines ideal cardiovascular health using seven factors: smoking status, weight, physical activity, healthy diet, cholesterol, blood pressure and fasting glucose levels. At least 94 percent of U.S. adults have at least one of these factors at a "poor" level and 38 percent rate poorly for at least three of these factors. Each year over 800,000 Americans will experience a new coronary attack. Stroke is another national epidemic that claims the lives of many each year.

It is a great privilege and honor to work with the IGLCBC, share in the vision of wellness, and assist in the achievement of health goals. Over the past several decades, SGH has strived to make significant improvements in the health and longevity of people throughout East San Diego County; unfortunately CVD and its risk factors are still increasing.

In its 2009 report, "Secondhand Smoke Exposure and Cardiovascular Effects: Making Sense of the Evidence," the committee concludes that data consistently demonstrates that secondhand-smoke exposure increases the risk of coronary heart disease and heart attacks and that smoking bans reduce this risk. Given the prevalence of heart attacks, and the resultant deaths, smoking in casinos can have a substantial impact on public health.

While 19 states have strong smoke-free laws covering all workplaces, including casinos, there are only two smoke-free Indian casinos in California (both in Humboldt County).

Casino employees face higher levels of exposure to secondhand smoke than almost any other profession and, as a result, they more frequently suffer from its devastating health effects. Both Sycuan and Barona casinos have enclosed nonsmoking gambling rooms. But no San Diego County Indian casino is smoke-free. Unhealthy particulates enter the air of nonsmoking areas. Ventilation systems may improve odor, but do not remove the serious health risks caused by secondhand smoke exposure. Air-circulation/ventilation systems and nonsmoking rooms don't satisfy medical experts. A study conducted in Helena, Montana by Dr. Richard Sargent and Dr. Robert Shepard measured numbers of heart attacks before and after a local smoke-free workplace law took effect. Helena's smoke-free law was put in place for several months, and then suspended. This gave the doctors an opportunity to measure heart attack rates before the law took effect, while

workplaces were smoke-free, and after, when workplaces were again filled with smoke. What they found sent a shockwave through the medical community.

In Helena, heart attack rates dropped by 40 percent while the smoke-free law was in place, but increased again once smoking was allowed back in workplaces. The study gained worldwide attention and results were replicated in cities and states worldwide. Based on the results from the Helena study and others, the Centers for Disease Control issued a warning that people at risk of heart disease should avoid exposure to second hand smoke.

Casino gambling has been rapidly expanding across the San Diego region, as it does so too does the increased risk of exposure to secondhand smoke. This in turn increases the potential for cardiovascular emergencies.

Over ten months between May 1, 2011 and February 29, 2012 the numbers of ambulance runs from Barona and Sycuan casinos were as follows:

- Grossmont Base Station ran 310 calls with Sycuan Fire Department, of those calls 166 individuals (54%) came to Sharp Grossmont Hospital's Emergency Department. 74 of those patients were admitted to the hospital and 94 were discharged.
- Grossmont Base Station ran 338 calls with Barona Fire Department, of those 173 individuals (51%) came to Sharp Grossmont Hospital's Emergency Department. 79 of those patients were admitted and 94 were discharged.

The medical diagnoses reported—on average from each casino's ambulance runs—include:

- Chest pain as the highest percentage at 33%
- Altered mental status at 32% which includes cardiovascular-related CVA (strokes) and TIA (mini strokes).

3) An explanation of how the proposed project will mitigate impacts of casino(s):

Times from 911-activation, to casino arrival, to patient EMS care which may include defibrillator shock, and arrival time to the hospital ED are all part of a strong trend to increased survival. Having the optimal cath lab equipment necessary that can be used without delay is all part of increased survival rates. Sharp Grossmont Hospital ambulance-transported emergency cath lab patients are treated on average within 50 minutes from arrival, which is nearly half the 90-minute recommended guideline by the American Heart Association.

A new, third cath lab is now operational at the hospital. This has greatly increased efficiency. The technology helps staff to keep up with the increased volume of cardiac

patients treated; however providing an interim solution with an upgrade to the oldest cath lab will enhance capability and expand capacity until the new Heart and Vascular Building is completed in 2016. In a recent meeting with General Electric (GE) to evaluate our bridging/evaluation plan (until the new Heart and Vascular labs are completed), GE told us our current two older labs (the 22 year old lab in particular) would not likely last four additional years until the brand new labs are completed. The *Innova 3100-IQ Optima* will be a huge asset in helping SGH to meet the East County demand for cath lab services.



The proposed equipment helps to rapidly acquire and reconstruct 3D cardiac and vascular anatomy with the ability to:

- Perform various types of interventional procedures in one room (a wider variety of procedures than can currently be performed in that room)
- Provide 360° patient access with exceptional clinical flexibility for anesthesia and other procedures
- Allow excellent patient access and enables exceptional views
- Image through either end of the table
- Achieve full head-to-toe coverage in a single run
- Save time and contrast and reduce radiation dose
- Register and record up to 64 auto positions
- Clearly image stents and other low-contrast objects during fluoroscopy and high-dose procedures, and help size small vessels, place stents and open arteries with ease.

- M. Describe how you intend to meet the requirement that grant recipients must provide notice to the public, either through a slogan, signage or other mechanism, which states that the project has received funding from the Indian Gaming Special Distribution Fund and further identifies the particular Individual Tribal Casino Account from which the grant derives:

The hospital's marketing department coordinates news releases. Grossmont Hospital Foundation has a quarterly newsletter, website, and e-alerts (electronic publication distributed system wide). Recognition on the hospital's donor wall is done accordingly, as are installing plaques at the site of projects supported. A plaque acknowledging the contribution from the Indian Gaming Special Fund will be displayed in the lobby of the Emergency Department.