



County of San Diego

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HEALTH AND HUMAN SERVICES AGENCY
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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) Prehospital/Hospital Subcommittee Meeting Chara Cote, R.N., Chair/ (Vacant), Vice-Chair

Minutes Thursday, June 13, 2019

IN ATTENDANCE

Members

Cote, R.N., Chara – Base Hospital Nurse Coordinator
Covell, R.N., Brian – District 2
Moriarty, Douglas – SD County Ambulance Association (Alt)
Parra, Frank – SD Fire Chiefs’ Association
Scott, M.D., Christopher – SD County Medical Society

County Staff

Ameng, R.N., Diane
Calzone, R.N., Lorraine
Christison, Brian
Collins, Siri
del Toro, Nicole (recorder)
Pacheco, R.N., Cheryl
Parr, Andy
Smith, R.N., Susan

Agency Representatives

Duffy, R.N., Jenny – San Marcos Fire
Froelich, Dan – San Diego Fire
Meick, Tyler – Reach Air
Smith, R.N., Zechariah – AMR/CSA17
Sullivan, Don – AMR

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Chara Cote, EMCC Prehospital/Hospital Subcommittee Chair, called the meeting to order at 9:30 AM. Introductions were made. There were no announcements.

II. APPROVAL OF MINUTES

A motion was made by Chris Scott, M.D., seconded by Brian Covell and Chara Cote to approve the May 9, 2019 EMCC Prehospital/Hospital minutes. Motion carried.

III. PUBLIC COMMENTS/PETITIONS

There were no public comments or petitions submitted.

IV. ELECTION TO FILL CURRENT VACANCY OF PREHOSPITAL/HOSPITAL SUBCOMMITTEE VICE CHAIRPERSON (VOTE)

A motion was made by Brian Covell, seconded by Chris Scott, M.D., to elect Brian Covell as Vice Chair of the EMCC Prehospital/Hospital subcommittee. Motion carried.

V. STAFF REPORT

1. Measles Outbreak – No documented cases in San Diego, but cases in Los Angeles and Orange County. Most have been associated with international travel. Agencies may want to consider requesting immunization records for the providers to determine staff who may need to receive the MMR vaccine.
2. Patient Tracking – County of San Diego Emergency Medical Services and the Public Health Preparedness and Response Branch are in the process of designing, building, and implementing a Patient Tracking system in conjunction with the San Diego Healthcare Disaster Coalition. The Patient Tracking system is part of LEMSIS Resource Bridge and is currently in its “Pilot” phase. Four hospitals utilized this system during the drill on May 7th. Over summer and fall of 2019, Patient Tracking will move to the “Go-Live” Phase at which time every hospital will be trained on how to use the system to enter and track patients. Additionally, we are collaborating with the organizations such as Office of Emergency Services, Sheriff, Medical Examiner, and 211 to include patient tracking as a part of the missing persons reconciliation process in our county.
3. LEMSIS Elite
 - Third-Party Vendor Integration Update: Recent changes to the State schematron resulted in a major system update for Elite. When this system update is completed, work on the Third-Party Vendor Integration will resume.
 - CARES Exporting: County EMS is currently in the testing phase between CARES and Image Trend. Once testing is completed (estimated by the end of Summer) agencies using LEMSIS Elite will no longer have to manually enter data into the CARES database, as it will export automatically.
4. Upcoming Procurements – Information regarding upcoming procurements can be found on the County of San Diego EMS website.
 - National City RFP has been paused at the request of National City.
 - San Marcos is active and working its way through the lengthy approval process.
 - USA (3 procurements) is working its way through the lengthy procurement/approval process.
5. Paramedic Regulations – The Emergency Medical Services Authority (EMSA) is proposing modification to Chapter 4 under Division 9, Title 22, of the California Code of Regulations. Chapter 4 contains the standards, policies, and procedures for paramedic training, scope

of practice, licensure, and discipline. The public is invited to submit written comments on modifications to the proposed regulations during the 15-day public comment period from June 11, 2019, through June 26, 2019. Alternate destination is also covered in these modifications, so it is recommended that members of the Prehospital/Hospital subcommittee look over these regulations for potential comment.

6. Policies and Protocols

- We remain on track for ketamine implementation for analgesia, effective July 1st. Reminder that ketamine must be administered *slowly* IV and is NOT approved for use for treatment of agitation or for drug-facilitated intubation. It is recommended that dosing be covered in training of ketamine following expressed concern over the large vial size.
- Reminder that IV acetaminophen is approved for treatment of pain, NOT for fever.
- Stroke and STEMI policies will be reviewed this month at EMCC – updated to reflect new regulations that will be effective July 1st.

7. Fees – The Board of Supervisors have approved the 2019-2020 fee structure for personnel, agency, and hospital designation fees. The approved fees are the same as the proposed fees presented to EMCC in March. For personnel fees, the County fee has increased from \$63 to \$86. Agency and hospital designation fees will be posted on the EMS website shortly.

VI. POLICIES FOR REVIEW

- S-009: Guidelines for the prevention of transmission of contagions and contaminants – Addition of reference links for regulations at section II, B.
 - Diane Ameng, R.N. continues to reach out to hospitals for 24/7 available contact to be easily visible on their websites in accordance to SB-426.

Recommended Changes

- Encourage hospitals to have a policy or use their existing policy to streamline the process with EMS personnel.
- Revise the form and make it fillable as an attachment to the policy.

A motion was made by Christopher Scott, M.D., seconded by Frank Parra, to approve policy S-009 with the recommended changes. Motion carried.

- S-019: Cardiac Advisory Committee – Changes were made to reflect regulations that will take effect on July 1st.
 - A request was made to include representation from non-STEMI centers to provide feedback on the repercussions of recommendations on non-STEMI centers and patients who have “medical homes.”

Recommended change:

- Section II, B: Move up number 4 and add a representative “from a non-STEMI center.”

A motion was made by Christopher Scott, M.D., seconded by Frank Parra, to approve policy S-019 with the recommended changes. Motion carried.

- S-020: ST Elevation Myocardial Infarction Critical Care System Designation – Changes were made to reflect regulations that will take effect on July 1st.

Recommended change:

- Section III, A, 2: Change verbiage from “a currently licensed registered nurse or qualified individual” to “a qualified licensed individual”.

A motion was made by Christopher Scott, M.D., seconded by Douglas Moriarty, to approve policy S-020 with the recommended changes. Motion carried.

- S-021: De-designation of an ST Elevation Myocardial Infarction Critical Care System Center

A motion was made by Frank Parra, seconded by Christopher Scott, M.D., to approve policy S-021 as written. Motion carried.

- S-028: Stroke Critical Care System Designation

A motion was made by Christopher Scott, M.D., seconded by Frank Parra, to approve policy S-028 as written. Motion carried.

- S-029: Stroke Advisory Committee

A motion was made by Christopher Scott, M.D., seconded by Frank Parra, to approve policy S-029 as written. Motion carried.

- S-461: Designation of Stroke Receiving Center

S-461 has changed to S-028 and needs no further action.

VII. POLICIES FOR STATUS UPDATE

- BOS K-9
 - County of San Diego goal to have 30 minute response time throughout the county in difficult in the rural areas.
 - Will retract the need to make adjustments to BOS K-9 and continue to work on goal of making an effort to the 30 minute response time. Will be revisited in 2025 for update.

VIII. OLD BUSINESS

12-lead transmission – Reminder that EMCC tasked the Prehospital/Hospital subcommittee with discussion and advice on the need for 12-lead transmission for hospitals. This topic will be added on to the agenda for next meeting.

IX. ADJOURNMENT/NEXT MEETING

Meeting adjourned at 10:06 AM.
Next EMCC Prehospital/Hospital Subcommittee meeting is on July 11, 2019.