

# EMERGENCY MEDICAL CARE COMMITTEE



# **REGULAR MEETING**

Friday, April 8, 2022 – 9:00 a.m. Location: Via Zoom

# MINUTES

MEMBERSHIP / ATTENDANCE					
<b>MEMBERS</b>		REPRESENTING	HEALTH CARE AGENCY STAFF		
Michael S. Ritter, MD	_	Orange County Medical Assn. (SOCEP)	Steve Thronson	_	Deputy Agency Director Medical Health Services
			Regina Chinsio-Kwong	_	County Health Officer
Arturo Pedroza	_	Board of Supervisors-First District	Tammi McConnell	_	EMS Division Director
Lawrence A. Grihalva	_	Board of Supervisors-Second District	Carl H. Schultz, MD	_	EMS Medical Director
Timothy Munzing, MD	_	Board of Supervisors-Third District	Gagandeep Grewal, MD	_	Associate EMS Medical Director
Luis Estevez (absent)	_	Board of Supervisors-Fourth District	Rommel Navarro, PharmD	_	Chief Pharmacist
Ted Heyming, MD	_	Board of Supervisors-Fifth District	James Gee, PharmD	-	Pharmacist
Robert Viera	_	Ambulance Assn. of Orange County	Laurent Repass, NREMT-P	_	EMS Information Systems Chief
Becky Firey (absent)	_	American Red Cross	Adrian Rodriguez	_	EMS Performance Chief
Rebecca Gomez	_	City Selection Committee	Danielle Ogaz Denamarie Baker	_	EMS Systems & Standards Chief
Chief Adam Loeser	_	Orange County Fire Chiefs Assn. Orange County Medical Assn.		_	Sr. Emergency Management Program Coord. BLS Coordinator
David Gibbs, MD Michael Killebrew	_	Orange County Medical Assn.  Orange County City Managers Assn.	Meng Chung Jason Azuma, NREMT-P	_	OC-MEDS Coordinator
Chief Stu Greenberg	_	Orange County City Managers Assn.  Orange County Police Chiefs & Sheriffs Assn.	Justin Newton	_	EMS Specialist
Chief Stu Greenberg	_	Orange County I once Chiefs & Sherris Assir.	Andrew Roberts	_	EMS Specialist
			Kirstin Wong	_	EMS Specialist
			Erica Moojen	_	EMS Office Supervisor
			Eileen Endo	_	Office Specialist
			Lisa Wilson	-	Information Processing Technician
		CHEST	S PRESENT		
Julia Afrasiabi, RN	_	UCI Medical Center	Soraya Peters	_	Hospital Association of Southern California
Drew Bernard	_	Emergency Ambulance Service	Jonathan Robinson		D /F 11 / F' D / /
Dan Brothman Ruth Clark, RN	_	Huntington Beach Hospital Orange County Global Medical Center	Rhonda Rosati, RN Robert Selway	_	Brea/Fullerton Fire Department St. Joseph Hospital
Chief Sean DeMetropolis	_	City of Orange Fire Department	Karen Sharp, RN	_	Saddleback Memorial Medical Center
Chad Druten	_	Emergency Ambulance Service	Cyndie Strader, RN	_	Hoag Memorial Hospital Presbyterian
Elena Giardino	_	Ambulnz Health	Christine Waddell, RN	_	Huntington Beach Hospital
Eric jJohnson	_	i mooniz Houtii	Jacob Wagoner		Lynch Ambulance Service
Jim Karras	_	Shoreline Ambulance Service	Bill Weston	_	Emergency Ambulance Service
Kimberly Nichols, RN	-	Placentia Linda Hospital	Scott White –		Falck Mobile Health Corp.

# 1. CALL TO ORDER

The meeting was called to order by the Chair, Dr. Michael Ritter, MD.

# 2. <u>INTRODUCTIONS/ANNOUNCEMENTS</u>

Special presentations by Eileen Endo. Certificate of awards for Karen Sharp, RN, Michael Killebrew and Rob Viera/25 years of service.

# 3. APPROVAL OF MINUTES

Dr. Schultz mentioned the misspelling of one of the two anti virals mentioned in the Medical Director's Report minutes: Paxlovid and Lomaviere should be Molnupiravir.

Minutes from the January 14, 2021, meeting were approved with the correction noted and submitted.

# 4. OCEMS REPORT

• Medical Director's Report

Page 2

Dr. Schultz reported the new policies are posted in a new setting. Some people like to compare the current policy with the up and coming policy. The top policy will say current. The upcoming policy will say optional for 6 months. They will be listed simultaneously. Six new policies have been posted. Two more policies will be posted next week.

David Johnson has retired and is travelling. Mike Ritter acknowledged that he worked with David for 25 years at the hospital. He experienced the loss when David moved to EMS.

#### • Health Emergency Management Report

Dr. Grewal reported that the COVID 19 case rate has flattened out. Only 100 cases per 100,000. Decreasing since last week of 243 per 100,000. Hospital trend is 78 hospitals out of 100 and 2 ½ months ago it was 1200 shows a significant drop. Trending in the right direction. We don't know what the BA2 variant will do. AOC is still activated M-F. Supporting mobile vaccination PODs. Training with coalition members this summer.

Dr. Ritter asked to let the state know to help hospitals by sending a comment to the state pharmacy board doctors. All prescriptions are electronic. RX cannot be transferred electronically to pharmacies like CVS to another pharmacy. Paper prescription is not accepted. Doctors need to find out where the drugs are. Who has medications today? So when they write a Rx, the patient can pick up the medications and not be stuck without a source to get them. Retail pharmacies are scared of being cited by Pharmacy board.

### • Hospital Diversion Report (January 1 to March 31, 2022)

Danielle Ogaz, presented the Hospital Diversion Report for the first quarter of 2022. Diversion was still suspended in January 2022. During the last surge OCEMS worked with ReddiNet and LA County to implement EDLA which divered LA County Traffic from being transported to the border hospitals in Orange County. The hours for this diversion were included in the report.

# • Ambulance Patient Off-Load Time (APOT) Report: January 1 to December 31, 2021

Laurent Repass reported the number of transports during the month of January and February. March report was posted yesterday. Winter through February was drastic effect on APOT. Most ambulance transports in January than ever seen before 44:05 90<sup>th</sup> percentile. February 15 + >30minutes. 10+ > 60 minutes. Trend is down. Decline in 911 ambulance transports. March APOT time declined. We are close to normal baseline. At 27 minutes 49 seconds for March APOT times. Ambulance volume returned to normal. 5% lower than baseline APOT dashboard.

# • Bi-Directional Exchange Project

Laurent requested this to be a standing item on committee meetings. It is a grant funded project by CDC One million dollars 2/3 data software, tech, IT, departments and 1/3 for hospital costs. EMS is amending contracts, adding what you need to get signed by each facility CEO to reimburse for hospital expense costs. This will take 2-3 months per hospital. July 2023 the project should be done and paid. EMS would like the technical side done by May 2023 to invoice and make sure all get paid.

#### **EMCC Correspondence** – *Attachment #4*.

Dr. Schultz presented these letters to committee for awareness. No action in required.

# V. EMCC ADVISORY SUBCOMMITTEE AND ADVISORY GROUP REPORTS

#### • Facilities Advisory Committee (March 8, 2022 meeting)

Danielle Ogaz reported that FAC approved the hospital redesignations that will be presented later in this meeting. Next Facilities meeting is on May 10, 2022.

# • County Prehospital Advisory Committee (March 9, 2022 meeting)

Next CPAC meeting is May 11, 2022.

## • Transportation Advisory Committee (April 6, 2022 meeting)

Transportation Advisory Committee took place on April 6, 2022. Next meeting will be held July 6, 2022.

#### VI. UNFINISHED BUSINESS

## VII. <u>NEW BUSINESS</u>

#### • Ambulance Patient Off-Load Times Discussion

Dr. Schultz Policy 310.96 are Guidelines for diversion status and APOT standard. It is a source for information regarding 30 minute standard APOT time to establish a baseline. Created Emergency options for ambulance wall times. VIII: amp interventions for prolonged APOT items. Worked well with patients on cots. State is looking at APOT times put burden on hospitals system of healthcare in order to make the entire system work. 30 minutes as standard is a good first start. This applies to BLS and ALS monitor. If patient needs to be on a cardiac monitor when they arrive if in hallways then patient should be on a cardiac monitor on cot. It is the hospital's decision. State recommendation is 20 minutes APOT. Hospital cannot use ambulance as a sole source of patient, either. Patient should be the center of decisions that are made.

Tammi McConnell Policy is specific to patient criteria. Cot is only for patient/ambulance for at least 60 minutes. This patient is not critical. If patient is stable in hallway for an hour – EMT is to monitor if patient is not a high level of care. Hospital could have elected to go on diversion, but they did not. The solution is basically to keep ambulance on the wall. Have ambulance company and hospital work together on a standard system to make it safe for the patient. These guidelines are options to help ambulance and hospital during APOT. Dr. Schultz wishes it was implemented before this policy came out. Relationship will be carried by ambulance. Karen sharp will bring up at ED Nurse meeting. Robert Viera experienced a lot of cooperation from hospitals working with the charge nurse. Implementing this trying to avoid cots as outliers. Optional- not a mandate. It is a tool to help with what is best for the patient. Opportunity to gain leverage on what is best. Looking for input if changes are needed. Suggest review change language. Put in review for next meeting.

Dr. Mike Ritter would like Policy #310.96 to be posted as an up and coming unfinished business item for the next meeting. Eileen Endo, please send the policy 310.96 to committee for review.

#### **Action Item:**

# • Facilities Designation (Continuing) for Specialty Receiving Centers

Danielle Ogaz presented designation for facilities:

Los Alamitos 3 year redesignations, CVRC conditional 3 years, ERC conditional 3 years. Conditional items are outlined.

Fountain Valley CRC 3 year

Garden Grove ERC 3 year

St. Joseph ERC 3 year

Kaiser Anaheim ERC 3 year

The Emergency Medical Care Committee Chair, Mike Ritter, MD accepted first and second motions for approval.

# VIII. MEMBER COMMENTS

# IX. PUBLIC FORUM

#### X. NEXT MEETING

The next meeting is scheduled for Friday, July 8, 2022 at 9:00 a.m. (location to be determined)

#### XI. ADJOURNMENT

With no further business, the meeting was adjourned.