

 COUNTY OF ORANGE HEALTH CARE AGENCY Regulatory / Medical Health Services EMERGENCY MEDICAL SERVICES 405 W. Fifth Street, Suite 301A Santa Ana, CA 92701



FACILITIES ADVISORY COMMITTEE

Tuesday, May 10, 2022 – 9:00 a.m. *Meeting held via Zoom Video Conferencing*

MINUTES

MEMBERSHIP / ATTENDANCE

MEMBERS □ Peter Anderson, MD (exc.) □ Michael Lekawa, MD □ Chien Sun, MD, MD □ Mary Birkle, RN □ Kenneth McFarland □ Cyndie Strader, RN □ Sheryl Riccardi, RN □ Anabella Anderson, RN □ Bryan Johnson, RN	REPRESENTING OCMA/ED Physicians Trauma Medical Directors Managed Health Care Physicians Base Hospital Administrators ERC Hospital Administrators Base Hospital Coordinators OC ED Nursing Leadership Trauma Program Coordinators Fire Chiefs EMS Committee	Carl Schultz, MD Gagandeep Grewal, MD Laurent Repass, NRP Danielle Ogaz Adrian Rodriguez Vicki Sweet, RN Meng Chung, EMT-P Irma Chavando Jason Azuma, EMT-P Erica Moojen Eileen Endo Lisa Wilson	- EMS Medical Director - Associate EMS Medical Director - EMS Information Systems Chief - EMS Systems & Standards Chief - EMS Performance Chief - ALS/CQI Coordinator - BLS Coordinator - BLS Coordinator - EMS Staff Assistant - OC-MEDS Coordinator - EMS Office Supervisor - Office Specialist - EMS Information Processing Tech
GUESTS PRESENT			
NAME Whitney Ayers Nicolas Berkuta Drew Bernard Shelley Brukman, RN Ruth Clark, RN Todd Costa Laura Cross, RN Ryan Ferguson David Gorin Jeff Lopez	REPRESENTING - Hospital Association of Southern California - OC Heart - Emergency Ambulance Service - Children's Hospital of Orange County - Orange County Global Medical Center - Orange County Fire Authority - Mission Hospital Huntington Beach Fire Department	NAME Julie Mackie, RN Nicole Miller, RN Teressa Polinski, RN Vishal Raj Rhonda Rosati Robert Viera Augustus (Titus) Ynares, RN Heidi Yttri, RN Kim Zaky, RN	REPRESENTING - Mission Hospital - Mission Hospital - UCI Medical Center - Falck Mobile Health Corp. - Brea/Fullerton Fire Department - Care Ambulance Service - Los Alamitos Medical Center - St. Jude Medical Center - Children's Hospital of Orange County

I. CALL TO ORDER

The meeting was called to order by Peter Anderson, MD, Chair.

II. INTRODUCTIONS/ANNOUNCEMENTS

David Johnson has retired, and he will be available in the next few months to help with consultation and help a new hire transition to his position.

III. APPROVAL OF MINUTES

Minutes from March 8, 2022, meeting was approved as submitted.

IV. OCEMS REPORT

OCEMS Report:

Dr. Gagandeep Grewal – COVID-19 positivity case rates are up to 10.8% per 100k. There is a significant increase in hospitalization above 100, with 15 in the ICU. A lot of COVID admissions are incidental findings are still increasing. The main variant is Omicron BA2, and there is a subvariant BA.2.12.1. It is difficult to know where we will peak during this small surge. Influenza is sporadic, with a slight increase. In the last few calls with CDPH over 100 cases of gastroenteritis caused by Adenovirus causing acute hepatitis in children in the US. Within 1 business day of diagnosing hepatitis w/unknown cause in children, report it to the Health Department, and analyze blood and stool samples. The AOC is still activated, supporting logistics Mobile POD vaccinations at a moderate level. Large mission of distributing testing kits; we have

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BinaxNOW professional use kits for staff, visitors, and ED. Please reach out to us. BinaxNOW over the counter kits, we have prioritized for unemployed, vulnerable, and high-risk areas. Public Health manages the distribution of therapeutics as a reminder the preference per treatment is 1) Paxlovid; 2) OP Remdesivir; 3) Bebtelovimab; 4) Molnupiravir for mild to moderate COVID and Evusheld for pre-exposure prophylaxis for high-risk patients. We will send out a training and exercise calendar for coalition members to sign up to various disaster and emergency preparedness training. AOC is doing an inventory of all disaster connex containers at hospitals to make sure we have adequate supplies.

Danielle Ogaz – The Policy and Procedure section of the website has been modified. The upcoming policy follows the current policy. EMT skilled renewal are waived until the end of June. David has retired, so send anything normally sent to David to Danielle. We held the first Stroke CQI meeting earlier this year.

Dr. Carl Schultz – Stroke Policy 300.30 requires information to PCR for every patient. Data must be entered for the hospital. We may have reached a solution. There will be a few more minor revisions within the next two weeks. (Who) The old policy will be replaced with a new policy in the next couple of weeks. Please be patient with EMS. We have lost critical colleagues. Hopefully, we will get some newly hired help by the end of summer.

Dr. Peter Anderson – came across an education module from 1979 about Radiation and Nuclear events. So, we got together with EMS office and used Geiger counts, and we had fallout shelters in place. Geiger counts need to be calibrated every two years.

Dr. Carl Schultz – purchased equipment stored in the warehouse and will be dispersed when needed. Environmental Health is involved with this. San Onofre is decommissioned. There is a level of awareness. However, there is no plan for broad communication with the community. There must be an ongoing process to maintain equipment. We have generators, some battery-operated equipment. Feds will have to get involved and invest in helping us.

Dr. Michael Lekawa asked Dr. Gagandeep Grewal about the Pediatric virus, is this related to COVID? Dr. Grewal said they hadn't found any association.

Specialty Centers (CCERC, SNRC, CVRC, Trauma:

Anabella Anderson at Mission we have our Collaborative meeting with all the Trauma Managers and our data registrar today. We are continuing to work on aligning our mechanism codes with the help of Jason.

Dr. Lekawa reported that the trauma site survey was held at UCI Medical Center in April for adults/peds. The exit interview was extremely positive. All trauma centers are in sync now; we are doing well.

Dr. Grewal at the end of March, we had the Southwest Regional Trauma Committee Grand Rounds. It was very successful. I touched on a few topics; rib fracture management, geriatrics, and research topics, and I will make this a regular event. Try to attend. Stroke & STEMI by EMSA are holding a virtual conference on June 27-28. See the website link: emsa.ca.gov to sign up.

Dr. Lekawa Is the Chair of the Southwest Regional Trauma Coordination Committee project for a 2-year stent; we will do quarterly Grand Rounds. The next meeting is on September 7th from 9-11 am. there are three virtual lectures. Dean Markulees, the Author of the American College Surgeon book, will be one of the speakers and will give an update on Resources for Optimal Care of the Injured latest book. Also, hear about new requirements that will come out.

• Ambulance Patient Off-Load Times (APOT):

Laurent Repass reported that the APOT report for January through March. We are working on the April report. High, reached a peak. There is a column for diversion hours. January had no diversion hours due to being suspended temporarily. March 14,890 EMS transports for the month. 27:49 diversion hours. We monitor APOT daily. 10-11 hospitals have exceeded the 30-minute threshold. So, we see a little increase in APOT.

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Bi-Directional Data Exchange Project

Laurent Repass - The Bi-Directional Data exchange is a CDC grant-funded project to support PCR for 25 hospitals. 22 out of 25 hospitals are willing to participate in the project. EMS met with IT for most of hospitals. \$3 million grant, and 2/3 of that money will be used for hospitals. We are currently working on modifying the Designated Emergency Services contract that supports preparedness & response, hospital designation, radios, and all equipment shared and adding addendum with funding project. We are taking the contracts to the Board of Supervisors for their approval in mid-July 2022.

UNFINISHED BUSINESS

None discussed.

NEW BUSINESS

• Protracted Diversion Hours

Dr. Carl Schultz A stakeholder group in Sacramento meets to review issues related to APOT times and has established the limit of APOT of 20 minutes; our APOT of 30 minutes is derived from our data. The discussion about the system view is that we don't take advantage of one component over another. The overall expectation is that hospital stays under 6%-36 hours – 600 diversion hours total. If County hospitals have less than 36000 hours, we are ok. Keep APOT down go on diversion. Dr. Schultz does not want facilities to be blind-sided. EMS does not fine facilities for APOT but may be required later in the year by the State.

VII. NEXT MEETING - Tuesday, July 12, 2022, at 9:00 a.m.

IX. ADJOURNMENT

With no further business, the meeting was adjourned at 9:49.