

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

FACILITIES ADVISORY COMMITTEE

Tuesday, November 8, 2022 – 9:00 a.m.

MINUTES

MEMBERSHIP / ATTENDANCE			
MEMBERS ▷ Peter Anderson, MD (exc.) □ Vacant ▷ Michael Lekawa, MD ▷ Chien Sun, MD, MD □ Alaine Schauer, RN □ Vacant ▷ Meghann Ord, RN ▷ Titus Ynares, RN ▷ Mary Slattery, RN □ Bryan Johnson, RN	REPRESENTING OCMA/ED Physicians Base Hospital Physician Directors 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 David Johnson, RN Jason Azuma, EMT-P Erica Moojen Eileen Endo	OCEMS STAFF PRESENT - EMS Medical Director - Associate EMS Medical Director - EMS Facilities Coordinator - OC-MEDS Coordinator - EMS Office Supervisor - Office Specialist
GUESTS PRESENT			
NAME Kristen Karpow, RN Jill Patt, RN Sandra Schulz Julie Mackie Julia Afrasiabi Ryan Creager	REPRESENTING Orange County Global Medical Center Huntington Beach Hospital OCFA Mission UCI Medical Center Mercy Air	NAME Laura Cross Benjamin Grunbaum Heidi Yttri, RN Amy Waunch, RN Mary Ellen Lowrey Genise Silva	REPRESENTING - Mission Hospital - Hoag Memorial Hospital - St. Jude Medical Center - Children's Hospital of Orange County - TIP - Orange County Global Medical Center

I. CALL TO ORDER

Meeting called to order by Peter Anderson, MD, Chair.

II. INTRODUCTIONS/ANNOUNCEMENTS

• Trauma Intervention Program (TIP) Orange County presentation by MaryEllen Lowrey, Executive Director

III. APPROVAL OF MINUTES

Approved Minutes from September 13, 2022, meeting.

IV. OCEMS REPORT

OCEMS Report:

Dr. Carl Schultz – Ebola in Uganda. People are passing through. They did not land where Ebola is manifested. Orange County is at low risk. No one is in quarantine. Should anything change, we are in communication with Public Health.

Current issue RSV is culprit. Health Emergency last week. Capacity at maximum. The state is pondering our request. They are aware of our situation here in Orange County. We can start to be more deliberate about sending Pediatric patients to other facilities than Choc. We are asking Base Hospital Coordinators to notify MICN about any kid that seems reasonably stable. All Emergency Rooms should have some readiness should things continue to get worse for lower risk older patients. Twelve- to Fourteen-year-olds might be sent to other hospitals like Kaiser Anaheim. We are thinking past Choc holding 480 patients currently. The normal high is 300. We will have to expand. Transfer to out of county is a non-starter. Dr. Gagandeep Grewal – Covid case rates are coming down lower than one month ago. Case rate is 5 per 100,000, from 40 per 100,000. Course of this surge is longer. One variant swap out for another variant. Covid trend is down while more variants are cropping up. Main omicron variant 60%. Variants against

monoclonal variants. Remdesivir, Paxlovid, Molnupiravir. Vaccines work better. Encourage providers and kids 5 years and older to be vaccinated. According to the modeling team, there may be another surge late November and December. Monkey Pox case rates are declining. Modeling complete elimination as baseline. Issue is on-going, watch out for rash. Bell curve is well on the down slope. Respiratory virus RSV is part of a big issue. It is an out of season sneak on virus. Numbers are worse than prior week. It is an early RSV season, higher in admission rates. On downturn, still higher than normal. Influenza season in Australia is higher than last 5 years HN32 very early than prior years. Reported green in September CDC charts, and then yellow, now we are in dark orange. It is a significant season. Adults are more affected than kids are. There are space issues at hospital.

Dr. Gagandeep Grewal - AOC is still helping support vaccination pods. Test supplies are available, as well as gowns, masks & shields. Outpatient Binax test kits are available. There are no flu tests at this time. Health Emergency Management has hired new team members. They are working on drills & exercises. November 17 is a Radiation Dispersal Exercise. It is not large scale but will cover some details. Environmental health has a team training from SONGS nuclear plant.

ReddiNet needs HEM reports to be accurate & on time. Looking to increase use of that system. David Johnson mentioned the 9:00am time due demand for report information from ReddiNet. Everyone wants it now, state, other facilities, LEMSAs need data. If we get in the habit of doing it right from the get-go, then an extra poll will not be such a burden.

EMSA website, emsa.ca.gov has a planned HIC survey that is due on November 30, 2022. Please fill out the survey located at <u>https://emsa.ca.gov/disaster-medical-services-division-hospital-incident-command-system-resources/</u>

• Specialty Centers (CCERC, SNRC, CVRC, Trauma):

Amy Waunch - CHOC ERC surge ICU level care, if discharged, can get relief of this sort. There are recordbreaking numbers. Calls are up.

Laura Cross - Mission is also reporting high numbers of pediatric admits.

• <u>Ambulance Patient Off-Load Times (APOT):</u>

Jason Azuma reported APOT high volume. 911 calls elevate increase. 911 volume APOT 98%. The October report should be out later this week.

Bi-Directional Data Exchange Project

Jason Azuma - The Bi-Directional Data project is underway. We are working on contracts. 75% of Orange County Hospital Receiving Centers are participating in this project. UCI established connection. We are working to give them the data they need and what we need.

V. UNFINISHED BUSINESS

None discussed.

VI. <u>NEW BUSINESS</u>

• Pediatric Surge Plan by Carl Schultz

Children's Miller in San Diego. Mutual Aid may not exist much longer. Must rely on resources we have. State is willing to make our jobs easier to utilize systems. Kaiser and Choc are all aware. Should things get really bad, send patients to a pediatric hospital. Hopefully they have enough beds to manage the community. If clinics close, then send patients to hospital. Family practitioners have some comfort level. We will look at what we have and what can be done. EMS has a concept of what we have and what we can do so it does not stop. Eventually Choc may close then other hospitals may see more patients. We can do some things without a state declaration. It is better to have someone with medical background than none.

During COVID-19 in Texas, ran out of space and brought ER Physicians in to come see the patients. Dr. Anderson suggested that Dr. Schultz put a white paper to all hospital and service providers. Dr. Schultz has sent out a letter to providers and hospitals. He wants to give all a sense of what might happen. This is not the end of it. There is more to come. Dr. Anderson asked if Russia pushes a button and there is nuclear exchange of weapons. Does this agency involve in efforts to determine the radiation level? Dr. Schultz answered that we do have some capacity to screen for radiation. Impact is so massive. We know the risks.

<u>Updated Hospital Designations</u>

David Johnson updated the hospital designations. Majority of hospitals completed designation last year. Hoag Irvine has now met all criteria and submitted data for ERC and CVRC. Recommendation is to re-designate Hoag as an ERC and CVRC. Committee voted and approved recommendation for redesignation.

• ED Diversion & CVRC and SNRC ReddiNet Diversion

Dr. Gagandeep Grewal – ED diversion APOT came down somewhat improved above standard. When you go down for ED diversion, you are also down for that specialty. This does not apply to Trauma; spoke hospitals for stroke & SNRC. A question was asked if all three going down, St. Joe & UCI put down for cardiac. Rule all three down everybody open could not differentiate if was a cath lab issue. Is there a way to differentiate we are open, but physically not? Update ReddiNet. Medics make contact with patient. We are going to override cardiac then down. Go into Tab & make a note. Base Hospital Coordinator has ability to override any closures. Buttons are helpful.

A Los Angeles overburdened hospital shifted to Orange County typically for borderline hospitals will stay an option in an extreme situation.

Ebola

Ebola Public Health people are in touch with hospital. No Ebola assessment centers in Orange County. Only treatment center in area is Cedars Sinai. They will only take confirmed cases of Ebola. If a suspected case gets sick, they can come to hospital. Do not plan to refuse patients that come to hospital. Public health will send to geographic location. Call Public Health first. This variant of Ebola is not covered by current Ebola vaccine.

No one in Orange County is quarantined with Ebola. If there is, we will notify hospital, no name, but aware of patient. A question was asked if we are screening for Ebola. David Johnson answered that Emergency Rooms are doing that.

<u>NPR National Pediatric Readiness Survey</u>

David Johnson - National Pediatric Readiness Survey (NPR). Email was sent to all OC ED directors. 25 hospitals participated in the surveys. Tabulated confidential reports are available to all hospitals. If you want a copy, contact state for your own report. Overall, scores for OC county includes all 25 hospitals. In regard to state and region the Average regional score 75% of all questions. State (209 facilities) 76%. Median 72%. This was a national survey PI project. Majority of scores were average. Below average scores in red were having a nurse coordinator for pediatric patients. Out of 25, only 11 had that specific duty or position. Position coordinator, Competency RN, 22 out of 25. Physician 16 out of 25. Nurse Coordinator 4 out of 25. Red Adult mental improvement guidelines for policy, immunization, involving family in immunization process, Policy & Procedure Pediatric specific. Pediatric equipment was all green. We are not the worst, not the best, we are average. A question was asked about EDAPs, and this is something you have to think about carefully. A few hospitals do not prioritize pediatric care. An ERC has to be able to handle pediatrics, OB, Trauma and Psych. CCERC certification is a higher-level expectation for specialty centers. Dr. Shaikh and Dr. Grewal are resources. A question was asked about sharing the county results. Individual hospitals would need to share their own and this is Highly sensitive with hospitals. Best approach would be to bring through committees and utilized the PI process in the appropriate ones.

Strong support UCI Providence, St. Jude. Protected information - good information. .

Gagandeep Grewal – Theme is got stuff, got staff, hospitals are not doing anything about it. Pediatric Champion Policy in Place.

VII. NEXT MEETING – Tuesday, January 10, 2023, at 9:00 a.m.

IX. ADJOURNMENT

With no further business, the meeting was adjourned at 10:15 a.m.