

COUNTY OF ORANGE HEALTH CARE AGENCY REGULATORY / MEDICAL HEALTH SERVICES EMERGENCY MEDICAL SERVICES 405 W. Fifth Street, Suite 401A Santa Ana, CA 92701



TRANSPORTATION ADVISORY COMMITTEE

Wednesday, January 4, 2023 – 9:00 a.m.

Held via Zoom Videoconferencing

MINUTES

MEMBERS			
NAME	CATEGORY REPRESENTED	ORANGE COUNTY EMS STAFF	
	 Ambulance Association of Orange County Base Hospital Coordinators Ambulance Service Provider non-9-1-1 Orange County ED Nursing Leadership Ambulance Service Provider 9-1-1 Air Transport Provider Fire Service Provider (with transport) Fire Service Provider (non- transport) 	Carl H. Schultz, MD Mike Noone, NRP Laurent Repass, NREMT-F Philip Grieve, EMT-P Meng Chung, EMT-P Genise Silva, RN Jason Azuma, NRP Juan Alvarez, EMT Drew Bernard, EMT Maria Nava, EMT Kirstin Wong, EMT Eileen Endo Erica Moojen	 EMS Medical Director Assistant EMS Director EMS Information Systems Chief ALS/CQI Coordinator BLS Coordinator Facilities Coordinator OC-MEDS Coordinator EMS Specialist EMS Office Supervisor
GUESTS PRESENT			
<u>NAME</u>	REPRESENTING	<u>NAME</u>	REPRESENTING
Josh Dean Lance Lawson Walt Lynch Julia Afrasiabi Armen Akopyan Nicholas Berkuta Shelley Brukman, RN Ruth Clark, RN Kim Zaky, RN	 Premier Ambulance Service APA Lynch Ambulance Service UCI Medical Center Horizon OC City of San Clemente CHOC Orange County Global CHOC 	Patrick Powers Heidi Yttri, RN Stefano Gaitan Lance Lawson Jacob Maier Alejandro Martinez Meghann Ord, RN Teressa Polinski, RN Jacob Wagoner Dennis	 City of Placentia St. Jude Medical Center Los Alamitos Medical Center APA Huntington Beach Hospital Horizon OC Hoag Memorial Hospital UCI Medical Center Lynch Ambulance Service

I. CALL TO ORDER

The meeting was called to order at 9:02am by the new Chair, Jim Karras.

II. INTRODUCTIONS/ANNOUNCEMENTS

New EMS Facilities Coordinator, Genise Silva, RN, was introduced by Dr. Carl Schultz.

III. APPROVAL OF MINUTES

The minutes from January 4, 2023, were approved. 1st by Jacob Wagoner from Lynch; 2nd by Ryan Creager from Mercy Air

IV. OCEMS REPORT

OCEMS Report: by Dr. Carl Schultz

Need pharmaceutical distribution related to COVID. Paxlovid is still being done through the County. Number of kids transported is less for COVID. Influenza is going up and down in small increments. 200 diversion hours per month might be the new normal for our system but we can probably live with it.

Bi-Directional Data Exchange: by Laurent Repass.

UCI is the most advanced secured connection testing data exchange. CHOC, Providence and Prime are working on business agreements. Letter went out yesterday regarding NEMSIS. Federal government

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requires all vendors to update system to version 3.5.Request changes to run forms and other things. We have 12 months to do it. State deadline for final transition is 1/1/2024. Must be off current NEMSIS that we are using.

Patrick Powers: Will a new template will be provided regarding the NEMSIS update?

Laurent Repass: Elite Software will need to be reconfigured. Run Forms will be developed based on new standard. NEMSIS 3.5 is different enough to require new run forms. If there are system demands, then we will address that.

Patrick Powers: Will there be any small workgroup regarding dialogue?

Laurent Repass: We will create a county form and work individually with agencies to tailor to what is required to meet their own needs. Several agencies use the county form. Seems to be an easier way to go. Several providers use a third party system. Agencies need to work with their vendors to comply well before 3rd quarter.

Jim Karras suggested to send memo from EMS to third party vendor.

OCEMS Reports and Dashboard Access: by Laurent Repass

Jim Karras asked for the OCEMS Reports and Dashboard Access to be on the agenda.

Meng Chung – Update on ambulance inspections for the group. Between August and December, 418 annual inspections were completed. There are 390 permitted ambulances in Orange County. Frontline EMS is a new provider. County approved 21 vehicles per extension program. Medline does radio checks quarterly. Completion was 93% for last year.

V. <u>UNFINISHED BUSINESS</u>

Informational Item Only: by Meng Chung
 Orange County EMS Policy/Procedure #714:00: Maximum Emergency Ground Ambulance Rates.

VI. <u>NEW BUSINESS</u>

#4477 Refresher Memo EMS Interventions by Carl Schultz
 If your nearest emergency receiving center is hospital X and their APOT time is 92 minutes, then you can bypass hospital X for hospital Y if it has a lower APOT.

Jim Karras: It's hard to go to a facility that you just cleared from knowing the local hospital wait time is long.

Dave Barry: Sixty minutes wait time; can we shorten this to 20 minutes? Facility says it has no beds, but no ambulances on the wall and 90% APOT is low (no wait time). Can we bypass waiting that hour?

Carl Schultz: Short answer is no. The idea is that we do not want to disadvantage one member of system over another member. It would be helpful to have data on how many times this has happened. Facilities are stressed and we are seeing increasing bad behavior. One facility slashed a cot and this is not good practice. Vandalized, they had to pay for cot. Substantial consequences jeopardized. We understand that multiple people have short fuses. To make it more onerous at this point will create more difficulty for the system. EMS is trying to meet all needs. Hoping with more data can give an idea to make a better decision.

Dave Barry will collect data points for Carl Schultz. He will work with Laurent to see what data we know.

Carl Schultz: Not data driven, but certainly data driven policy standard for APOT is 30 minutes. We are concerned where the State might be doing, suggesting the standard 90% APOT should be 20 minutes and doubling State 20 minute recommendation to 40 minutes would be the limit. Fines are the consequences that would occur at 40 minutes. When patient can be put in a chair, waiting makes no sense. This may be

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a local problem. Using 911 system to transport patients not based on medical situation. Most hospitals are playing by rules. Helps to know if this is system wide or only one or two hospitals.

VII. <u>NEXT MEETING</u>

The meeting scheduled for April 5, 2023, at 9:00am was cancelled on March 22, 2023.

The next meeting is scheduled for Wednesday, July 5, 2023, at 9:00 am.

VIII. ADJOURNMENT

Meeting adjourned at 9:41am.