

Emergency Medical Care Committee



Regular Meeting Agenda

Friday, October 8, 2021 - 9:00 a.m. *Location: Computer or Cell phone*

(There will not be a physical meeting at the Hall of Administration (HOA) Commission Hearing Room due to limited space capacity)

Join Zoom Meeting

https://us06web.zoom.us/j/81195086813?pwd=TnU2QVM1Y1NISjV1dkhxMThOVURJdz09

Meeting ID: 811 9508 6813 Passcode: 274600

One tap mobile +13462487799,, 81195086813#,,,,*274600# US (Houston) +17207072699,,81195086813#,,,,*274600# US (Denver)

Note: If you are calling into the meeting (via phone), OCEMS staff ask that you please contact us in advance and give us the phone number you will be using (please send an email to eendo@ochca.com). Due to added security measures, we are unable to give you access without this information. Thank you.

Dial by your location

+1 346 248 7799 US (Houston) +1 720 707 2699 US (Denver) +1 253 215 8782 US (Tacoma) +1 312 626 6799 US (Chicago) +1 646 558 8656 US (New York) +1 301 715 8592 US (Washington DC) Meeting ID: 811 9508 6813 Passcode: 274600 Find your local number: https://us06web.zoom.us/u/kdITJNuRz8

Mission Statement: "to act in an advisory capacity to the County Board of Supervisors and to Orange County Emergency Medical Services on all matters relating to emergency medical services in Orange County."

EMERGENCY MEDICARE CARE COMMITTEE MEETINGS ARE OPEN TO THE PUBLIC. YOU MAY SPEAK ON ANY AGENDA ITEM OR ON A MATTER NOT APPEARING ON THE AGENDA, BUT WHICH IS WITHIN THE SUBJECT MATTER JURISDICTION OF THE COMMITTEE.

1. CALL TO ORDER

2. INTRODUCTIONS/ANNOUNCEMENTS

3. APPROVAL OF MINUTES

• Minutes of July 9, 2021

Recommended Action: Approve July 9, 2021 minutes.

(Attachment #1)



Emergency Medical Care Committee



Regular Meeting Agenda (continued)

5.	OCEMS REPORT/CORRESPONDENCE	4.
	 Medical Director's Report Health Emergency Management Report Hospital Diversion Report (January 1 to September 30, 2021) Ambulance Patient Off-load Time (APOT) Report (July 1 to August 31, 2021) EMS Correspondence 	(Attachment #2) (Attachment #3) (Attachment #4)
6.	EMCC ADVISORY SUBCOMMITTEE AND ADVISORY GROUP REPORTS	(Hear Reports)
	 Facilities Advisory Committee County Paramedic Advisory Committee Transportation Advisory Committee 	
7.	UNFINISHED BUSINESS	
8.	NEW BUSINESS	
	Emergency Medical Services Fee Study	(Attachment #5)
	Action Item:	
	Facility Designations (Continuing) for Specialty Receiving Centers	(Attachment #6)
	Recommended Action: Approve the recommendations for facility designations/ redesignations made by the Facilities Advisory Committee on September 14, 2021	
9.	MEMBER COMMENTS	
10). <u>PUBLIC FORUM</u>	
	At this time, members of the public may address the Chairman regarding any items within matter of this advisory committee's authority provided that NO action may be taken on off-a unless authorized by law. Comments are limited to three minutes per person; unless different are set by the Chairman; subject to the approval of the Committee	igenda items

11. <u>NEXT MEETING</u>

• Friday, January 14, 2022 at 9:00 a.m., (*location to be determined*)

(Attachment #7)

12. ADJOURNMENT



EMERGENCY MEDICAL CARE COMMITTEE



REGULAR MEETING

Friday, July 9, 2021 – 9:00 a.m.

Location: Via Zoom

MINUTES

MEMBERSHIP / ATTENDANCE								
MEMBERS		REPRESENTING	HEALTH CARE AGENCY STAFF					
Michael S. Ritter, MD Arturo Pedroza Lawrence A. Grihalva Timothy Munzing, MD Luis Estevez Ted Heyming, MD Robert Viera Rebecca Gomez Karen Sharp, RN Chief Adam Loeser David Gibbs, MD Michael Killebrew Chief Stu Greenberg (exc)		Orange County Medical Assn. (SOCEP) Board of Supervisors-First District Board of Supervisors-Second District Board of Supervisors-Third District Board of Supervisors-Fourth District Board of Supervisors-Fifth District Ambulance Assn. of Orange County City Selection Committee Hospital Association of S. California Orange County Fire Chiefs Assn. Orange County Medical Assn. Orange County City Managers Assn. Orange County Police Chiefs & Sheriffs Assn.	Steve Thronson Torhon Barnes Carl H. Schultz, MD Gagandeep Grewal, MD Tammi McConnell, MSN Jesse Allured Danielle Ogaz Laura Wallin, RN David Johnson, RN Jason Azuma, NREMT-P Andrew Roberts Rommel Navarro Brianna Hamlet Eileen Endo		Deputy Agency Director, Medical Health Services Chief of Staff, Health Care Agency EMS Medical Director Associate EMS Medical Director EMS Director EMS Assistant Administrator EMS Systems & Standards Chief ALS/CQI Coordinator Facilities Coordinator OC-MEDS Coordinator EMS Specialist Health Care Agency Pharmacist Medical Services, Intern Office Specialist			
		GUEST	S PRESENT					
Julia Afrasiabi, RN Whitney Ayers Drew Bernard Greg Boswell, RN Ruth Clark, RN Todd Costa Ryan Creager Laura Cross, RN Gloria Guerra, RN		UCI Medical Center Hospital Association of S. California Emergency Ambulance Service Fountain Valley Fire Department Orange County Global Medical Center Orange County Fire Authority Mercy Air Service, Inc Mission Hospital St. Jude Medical Center	Randy Harper Vanessa Hayflich Dawn Hazard Jeff Lung, RN Walt Lynch Sharon Richards Chris Waddell, RN Jacob Wagoner		Orange County Sheriff's Department/EMD Mercy Air Service, Inc. Orange Coast Memorial Medical Center Lynch Ambulance Service Hospital Association of Southern California Huntington Beach Hospital Lynch Ambulance Service			

I. <u>CALL TO ORDER</u>

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

II. <u>INTRODUCTIONS/ANNOUNCEMENTS</u>

Dr. Ritter announced the addition of Rebecca (Becky) Firey as the new representative from the American Red Cross and Larry Grihalva, MICP who was appointed to serve as the Second District by Supervisor Katrina Foley.

III. <u>APPROVAL OF MINUTES</u>

Minutes from the April 9, 2021, meeting were approved as submitted.

IV. <u>OCEMS REPORT</u>

• Medical Director's Report

Dr. Schultz reported that Orange County EMS would like to conduct the next meeting as a hybrid meeting with those comfortable in attending the meeting in-person while others may join the meeting via Zoom

Emergency Medical Care Committee Minutes: July 9, 2021 Page 2

video conferencing. The change in the meeting format is dependent on the status of Covid cases in the County.

• Health Emergency Management Report

Dr. Grewal presented the Health Emergency Management Report which included the vaccination efforts in the County, the number of Orange County residents vaccinated. Data indicate that more than 70% of adults in the County have been vaccinated; the case rates; the number of vaccinations conducted by the mobile pods. Currently, the Health Care Agency's Operation Center is currently operating at a Level 2.

• Hospital Diversion Report (January 1 to June 30, 2021)

Attached to the agenda is the Hospital Diversion Report for the period of January 1 to June 30, 2021. Mr. Johnson reported that after high diversion hours in January, ED diversion had leveled off and is now experiencing an increase in diversion hours. ReddiNet now allows the Stroke-Neurology Receiving Centers to go on diversion for neuro.

• Ambulance Patient Off-Load Time (APOT) Report

Attached to the agenda is the Ambulance Patient Off-Load Time (APOT) Report for the period of March 1 to June 30, 2021. Jason Azuma presented a report on the 2021 APOT data via the APOT dashboard. Stable volumes and 90th percentile times remain stable with a slight increase seen during the months of May and June. The dashboard includes links to the monthly APOT reports as well as gauges for the individual hospitals over a 24-hour period.

• EMCC Correspondence

Attached to the agenda is a memorandum announcing that Hoag Hospital Irvine is now providing basic OB services.

V. <u>EMCC ADVISORY SUBCOMMITTEE AND ADVISORY GROUP REPORTS</u>

• Facilities Advisory Committee (May, 2021 meeting)

Dr. Schultz reported Committee members discussed the addition of a new policy which presents all of the data reporting for each of the specialty receiving centers. This gives specialty receiving centers the ability to review a single reference point for data reporting elements for each type of receiving center.

• County Paramedic Advisory Committee (May, 2021 meeting)

Dr. Schultz reported that this Committee discussed hospital diversion, changes made to clinical policies that were changed to many of the items announced year including APOT times, and the implementation of the new policies effective April 1, 2021.

• Transportation Advisory Committee (July 7, 2021)

Committee members discussed the resumption of Health Care Coalition of Orange County meetings inperson and encourages ambulance service representatives to attend the meetings. The next Transportation Advisory Committee will meet on October 6, 2021.

VI. <u>UNFINISHED BUSINESS</u>

• Orange County Ambulance Ordinance

Tammi McConnell reported that Orange County EMS has met with the fire chiefs to address their concerns regarding changes to the ordinance and have met with a small working group. There have been no substantial changes on how the ambulance service providers conduct business. A final version will be

presented once the subgroup has been prepared a finalized document. Once it has been finalized it will be shared with EMCC members.

VII. <u>NEW BUSINESS</u>

• Emergency Ground BLS Ambulance Rates

Attached to the agenda are the Emergency Ground BLS 9-1-1 Ambulance Rates which became effective on July 1, 2021. Ms. McConnell reported the increase to the Emergency Base Rate is based upon the increase in minimum wage and the other rates are increased/decreased based upon the Consumer Price Index.

• Advanced Life Support Change: Anaheim Fire and Rescue

Dr. Schultz reported that OCEMS Policy/Procedure #705.00 addresses the expansion of ALS and paramedic assessment units in the County. Anaheim Fire and Rescue submitted an application for an ALS unit in April. This is being shared with EMCC for review and comment. This is being presented to allow for review and comment seen in the attached documentation. Chief Loeser asked for the purpose of submitted application. Ms. McConnell reported that under regulations, after notifications need to be made to other fire service providers, ambulance service providers, base hospitals, and Orange County Communications are aware of the change.

• Policy Updates

Dr. Schultz outlined the changes that became effective on July 1, 2021. Most of the changes that were made were housekeeping changes. Those policies that were most impacted were those that were revised due to changes made to the American Heart Association guidelines and changes required due to revisions to State regulations. The clinical policies will not go into effect until October 1, 2021 to allow for training of paramedics. Larry Grihalva asked what changed in the definition of "patient" statutorily to determine whether an individual is considered a patient. Luis Estevez asked whether or not drug errors are reported. Ms. McConnell reported that feedback is received by the hospital receiving the patients or via self-reporting of a medication error.

VIII. <u>MEMBER COMMENTS</u>

Chief Loeser commended everyone who was involved in the management of the super PODS to perform COVID testing and to administer COVID vaccinations to public safety personnel and to the public.

IX. <u>PUBLIC FORUM</u>

No public comments from members were received.

X. <u>NEXT MEETING</u>

The next meeting is scheduled for Friday, October 8, 2021at 9:00 a.m. Due to the current pandemic, the meeting may be held via Zoom videoconferencing.

County of Orange Health Care Agency Emergency Medical Services

Ambulance Patient Offload Time (APOT-1) July Report 2021

		2021 Totals			July 2021				
Hospital	Transports	90th Percentile APOT Time (Min:Sec)		Transports		Mean APOT Time (Min:Sec)	Median APOT Time (Min:Sec)	Diversion Hours	
Anaheim Global Medical Center	1,643	31:55	90	312	27:06	12:42	6:57	13	
Anaheim Regional Medical Center	2,849	38:02	116	489	36:05	16:36	11:23	2	
Chapman Global Medical Center	383	10:50	37	51	12:16	8:15	4:03	0	
Children's Hospital of Orange County	1,457	14:01	0	276	14:00	7:11	5:57	0	
Foothill Regional Medical Center	634	32:40	31	87	24:00	11:53	9:51	4	
Fountain Valley Reg Hosp and MC	4,470	24:00	64	719	24:04	12:24	8:49	2	
Garden Grove Hosp and MC	2,351	24:10	72	404	26:11	14:02	9:33	0	
Hoag Hospital Irvine	4,175	16:24	121	688	18:00	9:24	7:49	29	
Hoag Memorial Hosp Presbyterian	10,747	15:19	32	1,749	16:20	9:39	8:44	3	
Huntington Beach Hospital	2,395	31:50	64	429	35:36	16:40	11:00	0	
Kaiser Permanente - Anaheim MC	2,821	32:56	155	390	42:05	20:49	13:26	56	
Kaiser Permanente - Irvine MC	2,587	26:14	20	416	34:02	17:59	13:12	12	
La Palma Intercommunity Hospital	1,500	20:23	110	300	16:01	11:08	0:00	6	
Los Alamitos Medical Center	3,909	41:17	156	558	38:58	21:33	14:58	77	
Mission Hospital - Laguna Beach	1,975	29:08	36	376	32:04	17:29	12:17	22	
Mission Hospital Regional MC	8,034	29:24	354	1,196	31:04	16:23	12:46	135	
Orange Coast Memorial MC	3,033	27:16	156	442	29:52	16:15	12:09	63	
Orange County Global MC	4,366	22:41	99	761	25:13	11:40	7:43	14	
Placentia Linda Hospital	2,390	17:24	32	376	16:19	9:09	7:03	0	
Saddleback Memorial MC	5,195	19:27	108	806	21:03	12:15	10:00	46	
South Coast Global Medical Center	1,204	19:57	38	171	16:11	8:52	6:04	2	
St. Joseph Hospital	6,242	23:13	62	900	24:28	12:27	9:07	17	
St. Jude Medical Center	8,114	35:11	61	1,266	35:27	18:12	12:00	7	
UCI Medical Center	6,816	32:55	235	1,012	34:28	13:55	6:33	139	
West Anaheim Medical Center	4,293	33:33	98	726	39:21	19:01	13:39	4	
Median Hospital 90th Percentile APOT Time 26:14 26:11									

Median Hospital 90th Percentile APOT Time 26:14 InterQuartile Range 25:35, 40:22

18:33, 30:29

OC EMS System Total (Aggregate)	93,583	27:14
OCEMS System Me	13:41	
Stand	+/- 14:51	
OCEMS System Media	09:49	
InterO	5:36, 16:12	

14,900	28:20
	14:06
	+/- 14:50
	10:02
	5:45, 16:52

Diversion Hours653Diversion Days30 of 31Hospitals/Day Range0-8/dayIncidents w/ APOT 30-60min1005Incidents w/ APOT >60min273

County of Orange Health Care Agency Emergency Medical Services

Ambulance Patient Offload Time (APOT-1) August Report 2021

		2021 Totals		August 2021				
Hospital	Transports	90th Percentile APOT Time (Min:Sec)	Diversion Hours	Transports		Mean APOT Time (Min:Sec)	Median APOT Time (Min:Sec)	Diversion Hours
Anaheim Global Medical Center	1,643	32:05	130	334	53:31	20:31	11:26	40
Anaheim Regional Medical Center	2,849	38:21	211	486	57:16	23:37	14:46	95
Chapman Global Medical Center	383	11:10	38	70	7:00	4:33	3:58	2
Children's Hospital of Orange County	1,457	14:07	0	266	14:59	7:53	6:22	0
Foothill Regional Medical Center	634	32:45	43	125	31:00	15:15	9:55	12
Fountain Valley Reg Hosp and MC	4,470	24:06	203	700	42:47	17:42	11:54	138
Garden Grove Hosp and MC	2,351	24:54	124	433	41:49	16:59	10:35	52
Hoag Hospital Irvine	4,175	16:30	271	684	22:19	12:08	9:52	150
Hoag Memorial Hosp Presbyterian	10,747	15:23	117	1,668	18:18	10:50	9:20	85
Huntington Beach Hospital	2,395	32:04	101	506	52:31	24:11	14:06	38
Kaiser Permanente - Anaheim MC	2,821	34:05	235	455	43:02	20:52	13:56	80
Kaiser Permanente - Irvine MC	2,587	26:19	34	475	37:54	19:31	14:56	14
La Palma Intercommunity Hospital	1,500	29:00	112	375	39:38	16:11	9:35	2
Los Alamitos Medical Center	3,909	43:15	409	552	52:01	24:43	18:00	253
Mission Hospital - Laguna Beach	1,975	29:20	115	468	43:09	21:05	14:37	79
Mission Hospital Regional MC	8,034	29:30	624	1,125	37:23	18:22	13:10	270
Orange Coast Memorial MC	3,033	27:29	337	466	33:14	18:02	13:28	182
Orange County Global MC	4,366	22:51	183	788	32:56	15:29	8:54	84
Placentia Linda Hospital	2,390	17:35	32	474	19:32	10:25	8:00	0
Saddleback Memorial MC	5,195	19:28	250	825	27:33	14:33	11:42	142
South Coast Global Medical Center	1,204	20:00	38	227	26:34	12:20	7:58	0
St. Joseph Hospital	6,242	23:34	114	1,092	30:06	15:08	10:56	52
St. Jude Medical Center	8,114	37:15	158	1,207	50:17	22:41	15:24	97
UCI Medical Center	6,816	33:21	521	903	32:37	12:41	6:32	286
West Anaheim Medical Center	4,293	33:40	144	785	55:01	24:14	16:08	46
Median Hospital 90th Percentil	e APOT Time		37:23					

Median Hospital 90th Percentile APOT Time 27:29 InterQuartile Range 20:00, 32:45

27:33, 43:09

OC EMS System Total (Aggregate)	27:14
OCEMS System Mea	13:41
Standa	+/- 14:51
OCEMS System Media	09:49
InterQ	5:36, 16:12

	36:09	15,489
	17:01	
н	+/- 19:29	
Inc	11:13	
I	6:10, 20:04	

Diversion Hours2197Diversion Days31 of 31Hospitals/Day Range4-17/dayncidents w/ APOT 30-60min1512Incidents w/ APOT >60min541



PLACENTIA FIRE & LIFE SAFETY DEPARTMENT LYNCH EMERGENCY MEDICAL SERVICES FY 2020-21 INAUGURAL REPORT

ATTACHMENT 1



A Message From the Chief

It is with great pride that I present to you, the inaugural Placentia Fire and Life Safety Department and Lynch Emergency Medical Services annual report. Inside, you will find updates across the Department regarding personnel achievements, use of equipment, notable calls, and response times to emergency calls.

Thanks to the guidance and support of the City Council, City Administrator Arrula, and other invested community stakeholders, the Placentia Fire and Life Safety Department is happy to celebrate its milestone achievement as we completed our first year as a Department.

With our partners at Lynch EMS, we have been working seamlessly together to continue to provide quality service to Placentia and its residents.

Throughout our inaugural year, we have had many successes and challenges: a Home Town Hero in Mason Ochoa, a worldwide pandemic, and several devastating community incidents.

Through these challenges, the personnel of the Placentia Fire and Life Safety Department have continued to exude professionalism, compassion, and generosity to the Placentia community.

f. Pono Van Gin

J. Pono Van Gieson Fire Chief

2 | INAUGURAL REPORT

ATTACHMENT 1

City Officials



Craig S. Green Mayor District 2



Chad P. Wanke Mayor Pro Tem District 4



Rhonda Shader Councilmember District 1



Ward L. Smith Councilmember District 5



Jeremy B. Yamaguchi Councilmember District 3

City Clerk Robert S. McKinnnell

> City Treasurer Kevin A. Larson

City Administrator Damien R. Arrula



Department Organization



J. Pono Van Gieson Fire Chief



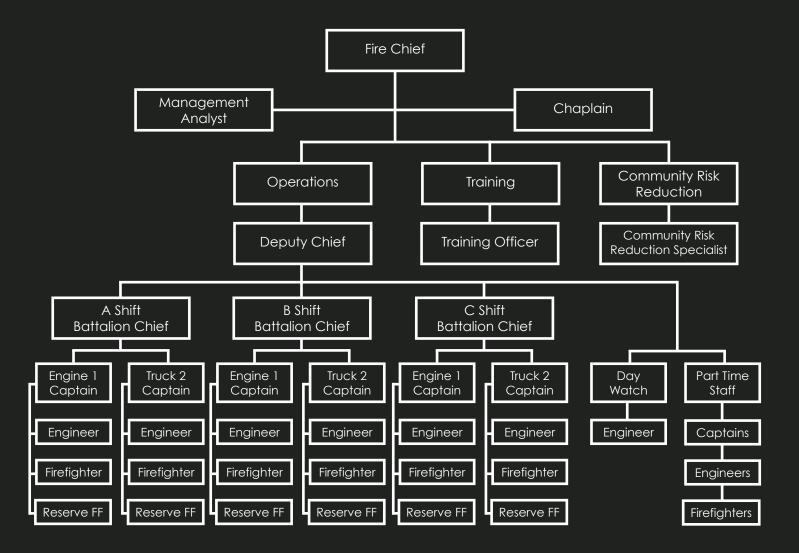
Michael Finnerty Battalion Chief A Shift



Jon Muir Battalion Chief B Shift



Jason Dobine Battalion Chief C Shift



ATTACHMENT 1

Fire Calls

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131

Fire Calls Structure, Vegetation, Vehicle, & Other Outside

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301

Service Calls Smoke Investigation, Odor, & Public Assistance



MASON

298

207 Traffic Collisions

Mutual Aid & Police Assist



341

Other Calls Alarms, Electrical Hazards, Elevator Incidents, & Weather Situations

1,278 Total Calls



A Message From Lynch





On behalf of all of us at Lynch EMS, we are proud to join in this inaugural Placentia Fire and Life Safety Department and Lynch EMS Annual Report. We were honored to be selected to partner with the outstanding professionals in the Department and to provide Paramedic EMS services to the citizens of Placentia.

With the outstanding work of the members of the Fire Department, working shoulder to shoulder with our professional team, the dedication of our Paramedics and support staff, the unparalleled support of the City Council, City Administrator, and Staff, we achieved some notable success in our first year in Placentia. This report clearly highlights some of those remarkable achievements.

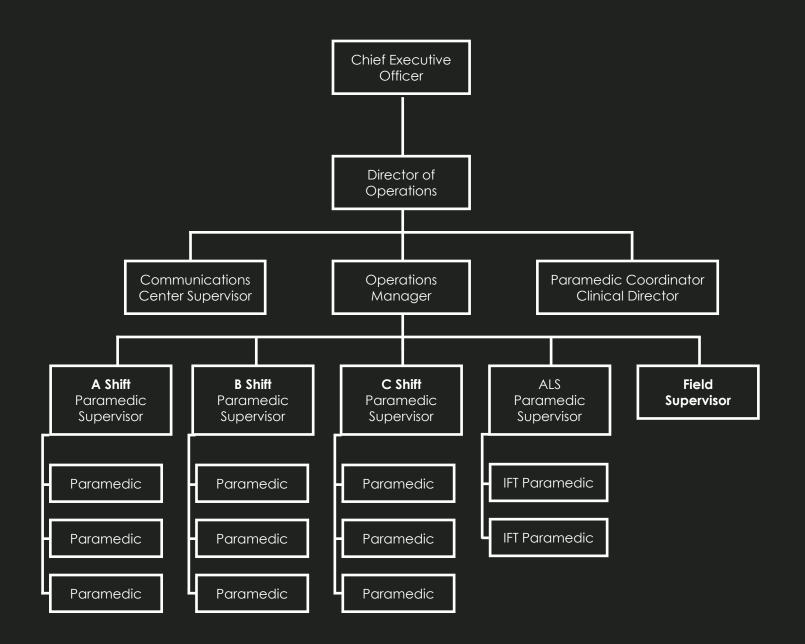
Most importantly, we were able to provide a high level of emergency medical service to a truly special community, while forging bonds along the way.

We look forward to continuing to serve the citizens of the city in partnership with the Placentia Fire and Life Safety Department and achieving measured results that can be a source of great pride for us and for the residents, businesses, and stakeholders in Placentia.

Walt Lynch CEO / Lynch EMS

ATTACHMENT 1

Lynch EMS Staffing



EMS Calls

263

1,016 Breathing & Sick Person

441 Unconscious/Unknown Problem 子 507

147 Bleeding/Traumatic Injuries

P7 Stroke

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174 Psychiatric, Abnormal Behavior, Overdose, & Poisoning

Chest Pain & Cardiac Arrest

440

Other Calls Assault, Choking, Burns, Diabetic Problems

3,085 Total Calls

5min 29sec Average Dispatch To Arrival Time

Comparison From Previous Service Provider

During our inaugural year as a Department, we received 4,361 calls for service. Response times and requests for Mutual Aid in to and out of Placentia are included and compared to the calls received in 2019 by our previous EMS and Fire provider.

2019 Previous Service Provider	2020-21 PFLSD & Lynch EMS	Percentage Change
3,669 Total Calls	4,363 Total Calls	19%
9:30 Average Fire Response Times	6:08 Average Fire Response Times	-35%
9:30 Average EMS Response Times	5:29 Average EMS Response Times	-42%
806 Mutual Aid into Placentia	128 Mutual Aid into Placentia	-84%
457 Mutual Aid out of Placentia	104 Mutual Aid out of Placentia	-77%

Training

PFLSD staff received over 23,000 hours of training in the areas of:

- Fire Tactics & Strategy
- Hazardous Materials Response
- Emergency Medical Training
- Fire Hydraulics
- Firefighter Survival
- Urban Search & Rescue
- Leadership
- Wildland with US Forest Services
- Mercy Air

Lynch staff received training in the areas of:

- Incident Command Systems
- Basic Life Support
- Advanced Cardiac Life Support
- Pediatric Advanced Life Support
- Advanced Airway Competency
 - IV Pump Training
- OCEMS Policy and Protocol
- Mercy Air

EDIC

844292

- Cardiac Arrest Science
- Mass Casualty Incidents
- Automobile Extraction
- Prehospital Trauma Life Support

Accomplishments

Fire & Life Safety Department

- Station renovations
- Transition and installation of Knox Boxes
- Opticom installed at 30 major intersections
- 1st Captains Academy
- Implementation of new software:
 - FIRSTDUE
 - WestNet Dispatch Alerting System
 - Target Solutions



Lynch EMS

- 47% Cardiac Saves (17% higher than national average)
- 1st Private 911-ALS Provider in Orange County
- Reduction of Mutual Aid Requests into Placentia
- Dramatically improved response times
- Recognized by St. Jude hospital at Regional Emergency Advisory Committee (REAC) for excellent assessment and triage of stroke Patients & rapid transport of patient
- Recognized by CHOC at REAC for recognizing abnormal symptoms in a pediatric patient which was a previously undiagnosed congenital condition
- CAAS accreditation



Goals & Objectives

Fire & Life Safety Department

- Hire a Deputy Chief and Training Officer
- Become an accredited Fire Department with Center for Public Safety Excellence
- Move PFLSD Administration to Old City Hall
- Execute in-service agreements with colleges for training
- Explore developing Cadet/Explorer program
- Develop Department Strategic Plan

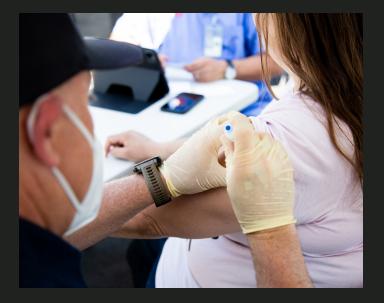
Lynch EMS

- Establish Community Paramedicine
- Vial of Life program
- Enhance partnership with Placentia on community CPR and AED training programs
- Enhance partnership with Placentia on CERT and BERT training programs

COVID-19 Response

Nearly 1,500 hours dedicated to COVID-19 response in Orange County by City of Placentia personnel

- Operation Independence Day
- Super POD Vaccination Sites
- Navigation Center Vaccination Event
- EOC Meetings





Community Outreach

Placentia is not only a pleasant place to live, it's a city that thrives on community connectivity and traditions. This sense of community service truly pushes our Department and our partners at Lynch EMS to provide the utmost care when serving your community.

Participated in over 50 community events:

- Drive-By Celebrations
- Hometown Hero Recognition
- Community Training Opportunities
- LOT 318 Memorial Day Celebration
- L.I.F.E. Files
- Social Media:
 - Facebook, Instagram, & Twitter







"The People Are The City"













FIRE & LIFE SAFETY

GET CONNECTED

401 E. Chapman Ave | placentia.org/fire Placentia, CA 92870 | 714-993-8135



ATTACHMENT 1



EMS Fee Study CY 2022

Orange County Emergency Medical Services



EMS Fee Study – CY2022

- Background
- Methodology
- Fee Calculations (Existing & Subsidized)
- Public Comments/Industry Response
- EMCC Discussion & Endorsement



Background

- February 2, 1982 Board of Supervisors designated Health Care Agency as the County EMS Agency (OCEMS)
- California Health & Safety Code permits counties to offset or recover all or a portion of costs thru fees
- County Agencies responsible to attain full cost recovery
 - Fees last updated in CY 2017



Methodology

- Cost Analysis and Fee Updates
 - Fee Resolution Cost Recovery Analysis every three years
 - Increased operational costs and major system updates
 - Multi-Year Fee Proposal
- Time-Value Study
 - EMS staff workloads based on type of service & hours spent
 - Direct & Indirect Costs
 - Comprehensive hourly rate: \$139.69 (FY 2021-22)



Fee Calculations – Existing Fees

Current EMS Provider Fees	Current	Frequency	Proposed Fees			
	Fee	. equency	2022	2023	2024	
Ambulance Company License	\$2,234	Annual	\$4,207	\$4,410	\$2,234	
Ambulance Company Unit Inspection/per vehicle	\$160	Annuar	\$237	\$249	\$160	
Ambulance Company Unit Re-Inspection/vehicle	\$109	Hourly	\$140	\$146	\$109	
Ambulance Driver/ Attendant License ¹	\$ 85	Biennial	\$140	\$146	\$148	
EMT-1 Certification ^{2,4}	\$125	Biennial	\$125	\$125	\$125	
EMT Lost Card Replacement ⁴	\$ 25	Variable	\$ 25	\$ 25	\$ 2 5	
EMT-P Accreditation (out of county)	\$ 73	variable	\$ 74	\$ 78	\$79	
Mobile Intensive Care Nurse Certification	\$108	Biennial	\$144	\$151	\$153	
Trauma Receiving Center ³	\$9,185	Triennial	\$65,734	\$68,900	\$69,635	
Continuing Education Provider Application	\$325		\$459	\$481	\$486	
EMT Training Program Application	\$923	4 years	\$1,218	\$1,276	\$1,290	
Paramedic Training Program Application	\$932		\$1,083	\$1,135	\$1,147	
Interfacility Transport Service Provider Application	\$1,525	Annual	\$1,938	\$2,052	\$2,074	
Customized Data Report	\$109	Hourly	\$140	\$146	\$148	

¹ License expiration shall not exceed the individual's EMT certification expiration date
 ² Does not include State pass-through fee(s) (\$75 initial; \$37 recertification)
 ³ Does not include American College of Surgeons costs
 ⁴ Continue to be set below full-cost recovery





Fee Calculations – Subsidized Fees

New EMS Provider Fees	Frequency	Proposed Fees			
		2022	2023	2024	
Emergency Receiving Center Designation		\$16,664	\$17,466	\$17,653	
Cardiac Receiving Center Designation	Annual	\$16,464	\$17,257	\$17,441	
Children's Receiving Center Designation		\$16,664	\$17,466	\$17,653	
Stroke/Neuro Receiving Center Designation		\$18,282	\$19,162	\$19,367	



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October 1, 2021

To:

From:

Subject: PROPOSED EMERGENCY MEDICAL SERVICES PROVIDER FEES

This letter serves to advise you of the Orange County Health Care Agency's (HCA) proposed changes of Emergency Medical Services (OCEMS) provider fees. Attached is a summary that provides the background, methodology, current funding, community benefits and proposed fee table.

The OCEMS Division fees were last updated for Calendar Year 2017 to 2019, based on Board Resolution No.17-025. The Board also directed that on or about January 1, 2020, and each three years thereafter, the Auditor-Controller shall perform a cost recovery analysis for the division. HCA shall review and adjust the fee schedule based upon the Auditor-Controller's calculation of actual costs and return to the Board for consideration of the recommended fee schedule.

This issue is agenized for the October 8, 2021 meeting of the Emergency Medical Care Committee (EMCC) for discussion and recommendation to the Orange County Board of Supervisors. All written comments received on the proposed fees will be provided to the EMCC. In addition, you are welcome to attend the EMCC meeting and address this agenda item should you so desire. Any written comments should be directed to Eileen Endo (eendo@ochca.com), Orange County Emergency Medical Services, 405 W. Fifth Street, Suite 301A, Santa Ana, CA 92701 no later than November 1, 2021.

TM:ee#4120

Attachment: HCA/EMS FY2021-22 Fee Study

Chealth9 CARE AGENCY MEDICAL HEALTH SERVICES

Tammi McConnell, MSN, RN, EMS i Wetor PROPOSED EMERCENCE

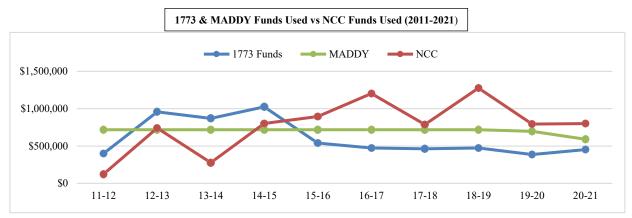
EMERGENCY MEDICAL SERVICES

In 1982, the Board of Supervisors designated the Health Care Agency (HCA) as the County Emergency Medical Services (EMS) Agency, pursuant to California Health and Safety Code Section 1797.200. The Code mandates EMS system responsibilities & also permits counties to offset or recover all or a portion of their costs. The concept of fully recovering costs and the frequency of fee studies are outlined within the County Accounting Manual. As such, each county agency is responsible for the management of its revenue and attaining full cost recovery by updating existing revenue rates with assistance of the Auditor Controller.

The fee study analyzed the services provided by the EMS Division to determine their specific cost. EMS staff workloads based on the type of service and number of hours spent per activity was calculated. The total EMS Division cost was divided by direct hours (fee related & non-fee related) to determine a comprehensive hourly rate for the Division. The use of this method assumes that indirect costs are proportionately rolled into the fees. This hourly rate was then applied to the time value for each individual fee category, to arrive at full cost recovery fees. Additionally, two positions dedicated to county designations of hospitals were added with all costs covered by the hospital industry. This decision was based on a report of the Trauma/EMS system that recommended the County include more positions to support the oversight & development of data systems to complement injury prevention initiatives.

The last fee study, approved by the Board, in 2017 included two directives, first, to "streamline base hospital costs" so that base hospital oversight costs would be borne by the system. As a result, these costs were incorporated into the hourly rate and therefore spread across all fees. Secondly, the Board directed that the Auditor-Controller conduct a cost recovery analysis in three years and Health Care Agency return in three years on or about 1/1/20 to the Board for consideration of the recommended fee schedule.

A fee adjustment is necessary to address increased operational costs related major system enhancements to improve patient care such as Trauma, Cardiac, Stroke, Children's specialty center designations (chart below) and decreasing ability to rely on EMSF funds (1773 (Richey)/SB12 (Maddy)) to support the program. See page 4 for explanation of each fund.



A multi-year fee update is proposed that includes an annual adjustment based on changes to CPI not to exceed actual cost. Further, a survey of similar local EMS agencies was conducted to compare fee structure and included the following LEMSAs: Inland Counties, Los Angeles, Riverside, San Diego, Santa Clara and Ventura.

As a result of the updated fee calculations, there are four new hospital fees recommended for those subsidies that have been ongoing but for which there have been no oversight fees. All of the proposed fees, scheduled to go into effect July 1, 2022 will be presented to the Emergency Medical Care Committee (EMCC) on October 8, 2021. EMS will request a letter of support from the EMCC & schedule a public hearing in January 2022 for Orange County Board of Supervisors consideration.

Hospital / Community / County Benefits from Fees

Trauma Receiving Center (Annual) - Updated to recover the costs associated with a Trauma Nurse position dedicated to conduct ongoing development, implementation and evaluation of Trauma and EMS data systems; conducting a trauma center site visit with the American College of Surgeons (ACS) Verification Team; and ongoing oversight and monitoring of trauma system to ensure medical accountability. This has been an ongoing activity of the EMS Division since 1980 (OCEMS Policy #620.00).

Community/Hospital Benefits

- Assurance that trauma center has trained & capable personnel, adequate facilities, & has been peer-reviewed by experienced clinicians
- o Authorized to receive Trauma designated EMS transported patients; Regional higher level of care resource
- o Improved care, coordination, safety practices & clinical outcomes for severely injured prehospital patients
- Triennial surveys to verify compliance w/ OCEMS Designation process & ACS Verification Program

<u>Mobile Intensive Care Nurse Certification (Biennial)</u> - Updated to recover the costs of developing and approving MICN course curriculum; conducting examination; verifying eligibility and authorizing Registered Nurses employed in Base Hospitals to conduct online medical control (OCEMS Policy #400.00).</u>

Community/Hospital Benefits

- Assures that Base Hospital has trained & capable registered nurses to issue medical orders to prehospital personnel
- o Direct interaction & performance improvement with ALS prehospital system to ensure medical accountability
- o Improved care, coordination, safety practices & clinical outcomes for severely injured prehospital patients
- Provide 24/7 online medical control thru direct radio communication with field paramedics

Emergency Receiving Center Designation (Annual) - Proposed to recover the costs associated with a new Data Analyst position dedicated to provide overall management of EMS/Trauma data and costs associated with the triennial designation process and site visit conducted as the cost of ongoing oversight and monitoring of quality and performance standards to ensure medical accountability. This has been an ongoing activity of the EMS Division since 1982 for which there has not been a fee (OCEMS Policy #600).

Community/Hospital Benefits

- Assurance that all hospital personnel who provide direct patient care in EDs are trained in ACLS
- Authorized to receive EMS transported patients (catchment); Increased hospital revenue
- o Prehospital system engagement & collaboration, including the development of on/off line medical control
- Triennial surveys of the ERCs to verify compliance w/ OCEMS P&P

<u>Children's Emergency Receiving Center Designation</u> (Annual) - Proposed to recover the costs associated with a new Data Analyst position dedicated to provide overall management of EMS/Trauma data and costs associated with the triennial designation process and site visit conducted as the cost of ongoing oversight and monitoring of quality and performance standards to ensure medical accountability.. This designation indicates an enhanced level of pediatric emergency service. This has been an ongoing activity of the EMS Division since 2013 for which there has not been a fee (OCEMS Policy #680).

Community/Hospital Benefits

- Authorized to receive pediatric designated patients(catchment); Increased hospital revenue
- Designation protects the healthcare facilities investment in pediatric emergency and critical care programs
- Ensures skill competencies for care of pediatric patient populations; Serves as recruitment and retention tool for staff
- o Improved care, coordination, safety practices and clinical outcomes for emergent & critically ill children

Hospital / Community / County Benefits from Fees. cont'd

<u>Cardiac Receiving Center Designation</u> (Annual) - Proposed to recover the costs associated with a new Data Analyst position dedicated to provide overall management of EMS/Trauma data and costs associated with the triennial designation process and site visit conducted as the cost of ongoing oversight and monitoring of quality and performance standards to ensure medical accountability. The designation indicates an enhanced level of cardiovascular emergency service (especially in the early stages of heart attack & diagnosis). This has been an ongoing activity of the EMS Division since 2015 for which there has not been a fee (OCEMS Policy #630).

Community/Hospital Benefits

- Allow for early diagnostics and selective triage to CVRC for intervention for acute MI patients.
- o Authorized to receive CVRC designated EMS patients (catchment); Increased hospital revenue
- Designation protects investment in cardiovascular interventional programs to treat for acute cardiac patients
- Improve clinical outcomes with geographically comparable facilities to benchmark performance

<u>Stroke/Neurology Receiving Center Designation (Annual)</u> - Proposed to recover the costs associated with a new Data Analyst position dedicated to provide overall management of EMS/Trauma data and costs associated with the triennial designation process and site visit conducted as the cost of ongoing oversight and monitoring of quality and performance standards to ensure medical accountability. The designation indicates an enhanced level of stroke neurology emergency service (especially in the early stages of stroke diagnosis and treatment) and as a result an improved outcome for patients (quality of care issue). This has been an ongoing activity of the EMS Division since 2009 for which there has not been a fee (OCEMS#650).

Community/Hospital Benefits

- Authorized to receive SNRC designated EMS patients (catchment); Increased hospital revenue
- Designation protects the healthcare facilities investment in comprehensive stroke programs for acute stroke victims
- o Improve clinical outcomes with geographically comparable facilities to benchmark performance
- Stroke care has evolved from a disease dominated by neurological consultation services to one managed with complex pharmacological and mechanical interventional therapeutics; Complex stroke patients require advanced diagnostic imaging & treatment procedures by specially trained physicians and healthcare providers
- Stroke center designations lead and maintain a system of care for cerebrovascular diseases meeting the needs of the acute stroke victim

2021/2022 Proposed Hospital Fee Revenue

	2	2021	2021/2022		County Subsidy if Left at Current Fee (2021 Rev – 2020 Rev) \$250,688 \$2,880
Hospital Fees	Fee	Revenue	Full Cost Recovery Fee	Revenue	Left at Current Fee
Trauma Designation	\$9,185 ¹	\$12,248 ²	\$65,734	\$262,936	\$250,688
Mobile Intensive Care Nurse	\$108	\$8,640	\$144	\$11,520	\$2,880
Emergency Designation	\$0	\$0	\$16,664	\$416,600	\$416,600
Children's Designation	\$0	\$0	\$16,664	\$33,328	\$33,328
Cardiac Designation	\$0	\$0	\$16,464	\$214,032	\$214,032
Stroke/Neuro Designation	\$0	\$0	\$18,282	\$164,538	\$164,538
Total		\$20,888		\$1,102,954	\$1,082,066

¹ Triennial ² \$9,185/3=annual fee \$3,062 x 4 trauma centers=\$12,248

Trauma Receiving Center

- From 2005 to 2016, OC Trauma Centers paid the county designation fee of \$22,339 every three years
- The ACS charge for a consultation fee per visit ranged from \$13,362 to \$19,000 and was paid by the County.
- In 2017 the ACS restructured their fees & Trauma Centers paid for the consultation directly
- This year, OCEMS is proposing an annual Trauma Center Designation fee to cover costs related to OCEMS oversight, monitoring and site visits by current staff and additional FTEs dedicated to trauma system data analysis and reporting.

Orange County Receiving Center (Hospital) Designations & Annual Fees

Facility	Emergency	Trauma	Cardiac	Stroke	Children's	New Annual Fees
Anaheim Global Medical Center	Х					\$16,664
Anaheim Regional Medical Center	Х		Х			\$33,128
Chapman Global Medical Center	Х					\$16,664
Children's Hospital of Orange County*	Peds only	Peds Level II			Х	\$99,062
Foothill Regional Hospital	Х					\$16,664
Fountain Valley Regional Hospital	Х		Х	Х		\$51,410
Garden Grove Hospital	Х					\$16,664
Hoag Hospital Newport Beach*	Х		Х	Х		\$51,410
Hoag Hospital Irvine	Х		Х			\$33,128
Huntington Beach Hospital*	Х					\$16,664
Kaiser Permanente, Anaheim	Х					\$16,664
Kaiser Permanente, Irvine	Х					\$16,664
La Palma Intercommunity Hospital	Х					\$16,664
Los Alamitos Medical Center	Х		Х	Х		\$51,410
Mission Hospital, Mission Viejo*	Х	Level II	Х	Х	Х	\$133,808
Mission Hospital Laguna Beach	Х					\$16,664
Orange Coast Memorial Med Center	Х		Х			\$33,128
Orange County Global Medical Center*	Х	Level II	Х	Х		\$117,144
Placentia Linda Hospital	Х					\$16,664
Saddleback Memorial Med Center, LH	Х		Х	Х		\$51,410
South Coast Global Comm. Hospital	Х					\$16,664
St. Joseph Hospital, Orange	Х		Х	Х		\$51,410
St. Jude Medical Center*	Х		Х	Х		\$51,410
UCI Medical Center*	Х	Level I	Х	Х		\$117,144
West Anaheim Medical Center	Х		Х			\$33,128

*Base Hospital

Health Care Agency Emergency Medical Services FY 2021-22 Fee Study October 2021

Emergency Medical Services Fund (EMSF) Trauma Center Funding

In 1988, SB 12/612 established the requirement for counties to establish an Emergency Medical Services Fund (EMSF) in which was to be deposited a \$2 per \$10 assessment on certain fines and penalties. In 1988, the Orange County Board of Supervisors did establish such a Fund (referred to as the EMSF or Maddy Fund, the bill's author). SB 12/612 was codified under Health & Safety Code 1797.98a and requires that the funds be distributed as follows:

58% to Emergency Physicians25% to Trauma Hospitals17% to Emergency Medical Services

On September 30, 2006, the Governor approved SB 1773 which allows a county board of supervisors to levy <u>an additional</u> penalty in the amount of \$2 for every \$10. 100% of these funds will go into the EMSF in accordance with H&S code 1797.98a with an additional provision that 15% of these new funds are first to be used for pediatric trauma services. The provisions of SB 1773 were approved by the Orange County Board of Supervisors on December 18, 2007, effective February 1, 2008. The provisions of SB 1773 are in effect until January 1, 2027 unless extended by the legislature. The funds are deposited into County Trust Fund 13S and distribution of SB 1773 revenues are as follows:

15% Pediatric Trauma (trauma hospitals based on pediatric trauma runs)

85%: 58% Emergency Physicians

25% Trauma Hospitals

17% Emergency Medical Services

Of the money deposited into the fund and allocated to hospitals pursuant to Government Code 76000, **\$125.000** is distributed to each Orange County trauma center during the fiscal year. The <u>balance</u> of the funds is distributed to these trauma centers plus Long Beach Memorial hospital due to its proximity to the Orange County border, based on the <u>percentage of trauma all</u> <u>runs</u> as reported in the Orange County Trauma Registry.

Of the money deposited into the fund pursuant to Government Code 76000.5, 15% of the funds are distributed to the Orange County trauma centers plus Long Beach Memorial hospital, based on the percentage of <u>pediatric trauma runs</u> as reported in the Orange County Trauma Registry. The remaining amount is then apportioned the physicians and surgeons, hospitals, and local EMS in accordance Health and Safety Code 1797.98a.(b)(5). Of this amount allocated to hospitals, it is distributed to the trauma hospitals based on their percentage of adult trauma runs as reported in the Orange County Trauma Registry.

						EMSF PROGRAM FY 2019-20 Payme							
		ments Made with EMSF balance tribution after FY end	ayments made er the end of the FY			Payments made a fter the end of the FY		ayments made er the end of the FY		Tota	ll Payments for FY19-20	Payme	Year-End ent for FY19-20 ding Base ent)
Hospitals	E	SB 12/612 Base Payments	SB 12/612 Payments	Total SB 12/612 Payments	:	SB 1773 Funds Trauma Payments	s	B 1773 Funds Pediatric Payments	Total SB 1773 Payments			across SB177	Payments Maddy & 3 funds ding base ent)
Amt Avail	\$	500,000.00	\$ 564,178.31	\$ 1,064,178.31	\$	569,303.49	\$	402,012.95	\$ 971,316.44	\$ 2,0	35,494.75		
LB	\$	-	\$ 3,941.13	\$ 3,941.13	\$	4,211.70	\$	1,008.82	\$ 5,220.52	\$	9,161.65	\$	9,161.65
CHOC	\$	125,000	\$ 26,214.47	\$ 151,214.47	\$	3,290.39	\$	196,214.60	\$ 199,504.99	\$ 35	0,719.46	\$	225,719.46
МН	\$	125,000	\$ 178,783.85	\$ 303,783.85	\$	181,168.94	\$	121,562.26	\$ 302,731.20	\$ 60	6,515.05	\$	481,515.05
UCI	\$	125,000	\$ 242,797.31	\$ 367,797.31	\$	258,361.52	\$	70,617.08	\$ 328,978.60	\$ 69	6,775.91	\$	571,775.91
OCGlobal	\$	125,000	\$ 112,441.55	\$ 237,441.55	\$	122,270.94	\$	12,610.19	\$ 134,881.13	\$ 37	2,322.68	\$	247,322.68
TOTALS	\$	500,000.00	\$ 564,178.31	\$ 1,064,178.31	\$	569,303.49	\$	402,012.95	\$ 971,316.44	\$ 2,0	35,494.75		

Health Care Agency Emergency Medical Services FY 2021-22 Fee Study October 2021

EMS Fee Table Current & Proposed

CURRENT FEE TITLE						PROPO	SED		
Res. 17-025	Frequency	CURRENT	Frequency	Effective 7/1/2022	\$ Increase	Effective 7/1/2023	\$ Increase	\$ Effective 1 7/2024	\$ Increase
Ambulance Company License	A	\$ 2,234	A	\$4,207	\$1,973	\$4,410	\$203	4 \$4,457	\$47
Ambulance Company Unit Inspection/per vehicle	Annual	\$160	Annual	\$237	\$77	\$249	\$12	8 \$252	\$3
Ambulance Company Unit Re-Inspection/per vehicle	Hourly	\$109	Hourly	\$140	\$31	\$146	\$6	\$148	\$2
Ambulance Driver/Attendant License ¹	2	\$85	2	\$140	\$55	\$146	\$6	\$148	\$2
EMT-1 Certification	2 years	\$125	2 years	\$125	\$0	\$125	\$0	\$125	\$0
Card Replacement	Variable	\$25	Variable	\$25	\$0	\$25	\$0	\$25	\$0
Paramedic Accreditation	variable	\$73	2 110000	\$74	\$1	\$78	\$4	\$79	\$1
Mobile Intensive Care Nurse Application	2 years	\$108	2 years	\$144	\$36	\$151	\$7	\$153	\$2
Trauma Receiving Center	3 years	\$9,185	Annual	\$65,734	\$62,672	\$68,900	\$3,166	\$69,635	\$735
Continuing Education Provider Application		\$325		\$459	\$134	\$481	\$22	\$486	\$5
EMT Training Program Application	4 years	\$923	4	\$1,218	\$295	\$1,276	\$58	\$1,290	\$14
Paramedic Training Program Application	-	\$932	4 years	\$1,083	\$151	\$1,135	\$52	\$1,147	\$12
Interfacility Transport Service Provider Application	Annual	\$1,525		\$1,958	\$422	\$2,052	\$94	\$2,074	\$22
Customized Data Report	Hourly	\$109	Hourly	\$140	\$31	\$146	\$6	\$148	\$2
NEW FEES									
Emergency Receiving Center Designation				\$16,664	\$16,664	\$17,466	\$802	\$17,653	\$187
Cardiac Receiving Center Designation		¢o	A	\$16,464	\$16,464	\$17,257	\$793	\$17,441	\$184
Children's Receiving Center Designation	Annual	\$0	Annual	\$16,664	\$16,664	\$17,466	\$802	\$17,653	\$187
Stroke Neurology Receiving Center Designation	1			\$18,282	\$18,282	\$19,162	\$880	\$19,367	\$205

¹ License expiration shall not exceed the individual's EMT certification expiration date

² Does not include State pass-through fees (\$75 initial; \$37 recertification)

³ Does not include American College of Surgeons & accommodation costs

The EMS FY21/22 Fee Study/Proposed Fees reflects a 35.14% increase (\$993,283) over CY2019 program cost

• The increase to achieve full cost recovery is due to:

- Adding 4 fees for service that have been on-going but for which no fees were charged
- Staffing, COLA, salary & employee benefit increases
- FTE positions increased from 15.41 to 15.55 included 2 staff added for Trauma System coordination and oversight
- Ongoing maintenance for OC-MEDS (electronic prehospital record that is used by all EMTs, Paramedics & Hospitals)

Health Care Agency Emergency Medical Services FY 2021-22 Fee Study October 2021

FY 2022 to 2024 Emergency Medical Services Fee Study EMS PROGRAM FEES - COMPARISON WITH OTHER LOCAL EMS AGENCIES

		Orange	County							
Type of Fee	Frequency	FY 21/22 Current Fees From EMS Program	FY 21/22 EMS Program Proposed Fee	Frequency	Inland Counties	Los Angeles	Riverside	San Diego	Santa Clara	Ventura
EMT Certification (local, does not include state fee)	2 yrs	\$125	\$125	2 yrs	\$70	\$85	\$25	\$63	\$50	\$57
Card Replacement	Variable	\$25	\$25	Variable	\$25	\$12	\$10	\$0	\$20	\$26
Ambulance Driver/Ambulance Attendant Card	2 yrs	\$85	\$140	2 yrs	\$0	\$0	\$75	\$0	\$0	\$0
Paramedic Accreditation	2 yrs	\$73	\$74	2 yrs	\$120	\$120	\$75	\$63	\$150	\$77
Mobile Intensive Care Nurse (MICN) Application	2 yrs	\$108	\$144	2 yrs	\$235	\$225	\$75	\$63	\$20	\$0
Continuing Education Provider Application	4 yrs	\$325	\$459	4 yrs	\$650	\$0	\$0	\$1,135	\$1,000	\$0
EMT Training Program Approval	4 yrs	\$923	\$1,218	4 yrs	\$1,500	\$0	\$0	\$0	\$1,000	\$472
Paramedic Training Program Approval	4 yrs	\$932	\$1,083	4 yrs	\$1,500	\$0	\$0	\$0	\$5,000	\$675
Ambulance Company License (ground & air)	Annual	\$2,234	\$4,207	Annual	\$2,000	\$4,846	\$3,000	\$3,185	\$6,064	\$0
Ambulance Unit Inspection/vehicle	Annual	\$160	\$237	Annual	\$400	\$374	\$250	\$335	\$1,047	\$0
Ambulance Unit Re-Inspection/vehicle	Per Hour									
Interfacility Transport Service Provider Application	Annual	\$1,525	\$1,958	Annual	\$0	\$4,846	\$6,000	\$483	\$6,615	\$0
Emergency Receiving Center Designation	3 yrs	\$0	\$16,664	Annual	\$0	\$0	\$0	\$0	\$11,025	\$0
Children's Receiving Center Designation	3 yrs	\$0	\$16,664	Annual	\$0	\$0	\$0	\$0	\$11,025	\$0
Trauma Receiving Center Designation	3 yrs	\$9,185	\$65,734	Annual	\$25,000	\$0	\$49,627	\$50,049	\$110,025	\$75,000
Cardiovascular Receiving Center Designation	3 yrs	\$0	\$16,464	Annual	\$17,445	\$11,692	\$33,084	\$0	\$11,025	\$0
Stroke Neurology Receiving Center Designation	3 yrs	\$0	\$18,282	Annual	\$19,045	\$7,196	\$20,678	\$0	\$11,025	\$0
Base Hospital Designation				80.000 (0.000) (0.000)	\$5,000		10.000.000	\$25,000		308
Customized Data Report (*no data from EMS)	Hourly	\$109	\$140							

*Data provided by Jingle Doan at HCA, email dated 04/15/21

*Santa Clara County included as it is more similar to Orange County EMS system

*LA County subsidizes Trauma Centers thru Tax/Measure B Funding

*Orange County proposed includes 2 FTEs dedicated to Trauma System Coordination & Data Analysis





021)

FACILITIES ADVISORY COMMITTEE ORANGE COUNTY EMS FACILITY DESIGNATIONS

September 14, 2021

The following hospitals have applied to Orange County Emergency Medical Services (OCEMS) for Emergency Receiving Center (ERC) and/or Specialty status (Cardiovascular Receiving Center/CVRC, Stroke Neurology Receiving Center/SNRC, and Comprehensive Children's Emergency Receiving Center/CCERC) designation or re-designation. This report summarizes the OCEMS review of their applications noting deficiencies, conditions and recommendations. Today, it is presented to the Facilities Advisory Committee for committee endorsement. Physical site visits have been temporarily suspended but focused surveys were completed including key personnel interviews and applicable documents reviewed.

General Findings: The following facilities currently meet the designation requirements for Emergency Receiving Center and Specialty Center designation when applicable. Endorsement considerations of designation are for one to three-year terms or otherwise specified as recommended by committee.

FACILITIES - CONTINUING DESIGNATIONS

Mission Hospital – Mission Viejo	(Review Period 2018-20
Transa Osatom	
Trauma Center:	
ACS Survey:	6/1 – 6/2 (virtual)
OCEMS Review:	6/2021
Deficiencies:	None
Recommendations:	None
Endorsement Consideration:	<u> Three years (June 2021 – June 2024)</u>
Pasa Haanital	
<u>Base Hospital</u> BH DQ Done:	5/10/2021
Site Survey:	Online Only 8/2018 – 6/2021
Program Review: Criteria Deficiencies:	0/2016 – 6/2021 None
Endorsement Conditions:	None
Recommendations:	None
Endorsement Consideration:	Three years (September 2021 – August 2024)
	Thee years (September 2021 – August 2024)
Comprehensive Childrens Emerg	nency Receiving Center
Site Survey:	11/14/2018
Program Review:	8/2020 - 6/2021
Criteria Deficiencies:	None
Endorsement Conditions:	None
Recommendations:	1. Increase number of pediatric trained ED providers
	2. Consider separating pediatric patients from adult patients
Endorsement Consideration:	Recommend 2 year extension of designation to June 2023.
Emergency Receiving Center	
ERC DQ Done:	8/31/21
Site Survey:	Online Only
Program Review:	8/2018 - 6/2021
Criteria Deficiencies:	None
Endorsement Conditions:	None
Recommendations:	None
Endorsement Consideration:	Three years (September 2021 – August 2024)

Stroke Neuro Receiving Center (SNRC) – Pending CardioVascular Receiving Center (CVRC) - Pending





Hoag Hospital Newport Beach

(Review Period 2018-2021)

	5/31/2021 Online Only y Advisory Committee (REAC) mtgs held quarterly. pproved contingency plan for dissemination of information presented at REAC mtgs when a REAC needs to be cancelled.
Endorsement Consideration:	Three years (September 2021 – August 2024) (conditional)
Cardiovascular Receiving Cente CVRC DQ Done: Site Survey: Program Review: Criteria Deficiencies: Endorsement Conditions: Recommendations:	Update 7/28/2021 Online Only 2018-2021 None None None
Endorsement Considerations: Emergency Receiving Center (El Stroke Neuro Receiving Center (
Emergency Receiving Center (El	RC) – Pending
Emergency Receiving Center (El Stroke Neuro Receiving Center (Huntington Beach Hospital Base Hospital (BH) BH DQ Done: 5/25/2021 Site Survey: Online Or Criteria Deficiencies: Deficiency 1: Required meeting a	RC) – Pending SNRC) - Pending (Review Period 2018 - 2021)

Emergency Receiving Center (ERC) - Pending





Orange County Global Medic	al Center	(Review Period 2018 - 2021)
Trauma Center:		
ACS Survey:	5/24 – 5/25 (virtual)	
OCEMS Review:	6/2021	
Deficiencies:	(CD 11-33)	
Condition 1:	Submit required documentation	
Recommendations:		
Endorsement Consideration:	Three years (June 2021 – June 2024) (conc	ditional)
		<u> </u>
<u>Base Hospital (BH):</u>		
BH DQ Done: 05/11/202	1	
Site Survey: Online On	-	
	ii y	
Criteria Deficiencies:		
Deficiency 1: R equired meeting a	Ittendance by Base Hospital Physicians at R issues are discussed.	EAC or other meetings where OCEMS
Condition 1: Hospital has submitte	d & implemented an approved corrective action	n plan addressing Base Hospital Physician
	meeting attendance.	1 5 1 5
	meeting attendance.	
	3H Physicians to provide one hour of EMS ed d & implemented an approved corrective action requirement to provide one hour of EMS edu	n plan addressing Base Hospital Physician
Endorsement Consideration:	Three years (September 2021 – August 202	24) (conditional)
Emergency Receiving Center (EF Stroke Neurology Receiving Cen Cardiovascular Receiving Center	<u>RC):</u> - Pending <u>ter (SNRC):</u> - Pending	
Stroke Neurology Receiving Cen Cardiovascular Receiving Center	<u>RC):</u> - Pending <u>ter (SNRC):</u> - Pending	
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Stroke Neurology Receiving Center (SNRC): - Pending Cardiovascular Receiving Center (CVRC: - Pending





Obildrenia Users''s Lat O		
Children's Hospital of Orange	e County (CHOC)	(Review Period 2018 - 2021)
Base Hospital	BH DQ Done: 5/11/2021	
Site Survey:	Online Only	
Program Review:	8/2018 – 6/2021	
Criteria Deficiencies:	None	
Endorsement Conditions:	None	
Endorsement Consideration:	<u> Three years (September 2021 – August 20</u>	<u>024)</u>
Emergency Receiving Center (EF	<u>RC)</u> – Pending	
University of California, Irvin	e Medical Center (UCIMC)	(Review Period 2018 - 2021)
Base Hospital:	, , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·
PH DO Donoi	E147/2024	
BH DQ Done: Site Survey:	5/17/2021 Online Only	
Program Review:	8/2018 – 6/2021	
Criteria Deficiencies:	0/2010 - 0/2021	
	Base Hospital Physicians to provide one hour of I	EMS education or bedside case reviews
	annually.	
Condition 1: Hospital has subn	nitted & implemented an approved corrective requirement to provide one hour of EMS education	
Deficiency 2: Designating as a	Base Hospital Coordinator a nurse who did r Coordinator as described in OCEMS Policy 61	
Condition 2 : Hospital utilizes a nu	rse who meets the qualifications for Base Hospi Base Hospital Coordinator meets the requirem approved.	
Endorsement Consideration:	Three years (September 2021 – August 2024)	(conditional)
Emergency Receiving Center (EF	RC): - Pendina	
Cardiovascular Receiving Center		
Stroke Neurology Receiving Cen		
Kaiser Irvine	(Review F	Period 2018-2021)
Emergency Receiving Center (EF	RC)	
ERC DQ Done:	Updated 5/13/2021	
Site Survey:	Online Only	
Program Review Period:	8/2018 – 6/2021	
Criteria Deficiencies:		
	porting of Hospital Discharge Data	
Condition 1: Hospital will sub	mit a corrective action plan addressing com	
	"ERC/Specialty Center Data Reporting Criteria	a″
Endorsement Consideration:	Three years (September 2021 – August 2024)	(conditional)
	,	





Orange Coast Memorial Medical Center

(Review Period 2018-2021)

(Review Period 2018-2021)

Cardiovascular Receiving Center (CVRC)

CVRC DQ Done:	Updated 7/29/2021
Site Survey:	Online Only
Program Review Period:	8/2018 - 6/2021
Criteria Deficiencies:	None
Endorsement Conditions:	None

Endorsement Consideration: Three years (September 2021 – August 2024)

Emergency Receiving Center (ERC): - Pending

South Coast Global Medical Center

Emergency Receiving Center (ERC):

ERC DQ Done:	8/19/2021
Site Survey:	Online Only
Program Review Period:	8/2018 - 6/2021
Criteria Deficiencies:	

Deficiency 1: Data collection/reporting of Hospital Discharge Data

Condition 1: Hospital will submit a corrective action plan addressing compliance to OCEMS Policy # 300.50 "ERC/Specialty Center Data Reporting Criteria"

Endorsement Conditions:

Condtion 1: Diversion hours due to CT downtime with upward trend Hospital will submit corrective action plan demonstrating active initiatives to mitigate diversion hours

Endorsement Consideration: Three years (September 2021 – August 2024) (conditional)

Saddleback Memorial Medi	cal Center	(Review Period 2018-2021)
Stroke Neuro Receiving Center	(SNRC)	
SNRC DQ Done:	7/29/2021	
Site Survey:	Online Only	
Program Review Period:	8/2018 - 6/2021	
Criteria Deficiencies	None	
Endorsement Conditions:	- <i>/</i>	
Condition 1:	Provide contingency plan to provide need is anticipated.	back up neurosurgical coverages when
Endorsement Consideration:	Three years (September 2021 – Augus	t 2024) (conditional)

Emergency Receiving Center (ERC) - Pending Cardiovascular Receiving Center (CVRC) - Pending





West Anaheim Medical Center

(Review Period 2018-2021)

Emergency Receiving Center (ERC)ERC DQ Done:7/2021Site Survey:Online OnlyProgram Review Period:8/2018 - 6/2021Criteria Deficiencies:NoneEndorsement Conditions:None

Endorsement Consideration: Three years (September 2021 – August 2024)

Cardiovascular Receiving Center (CVRC) - Pending

RESOLUTION OF THE BOARD OF SUPERVISORS OF ORANGE COUNTY, CALIFORNIA

February 14, 2017

WHEREAS, the Health Care Agency is proposing to update its Emergency Medical Services Provider fee schedule; and,

WHEREAS, Orange County Emergency Medical Services Division within the Health Care Agency is the Local Emergency Medical Services Agency and, accordingly, is responsible for Emergency Medical System management including direction, coordination, and evaluation of emergency medical services for the County of Orange; and,

WHEREAS, Orange County Emergency Medical Services Division within the Health Care Agency provides oversight to all providers of emergency medical services; and,

WHEREAS, the fees listed herein are authorized by law, including Division 2.5 of the Health and Safety Code and Division 9 of Title 22 of the California Code of Regulations; and,

WHEREAS, this Board has conducted a Public Hearing.

NOW, THEREFORE, BE IT RESOLVED that this Board finds that the fees listed herein are for the purposes of meeting operating expenses and are, therefore, statutorily exempt from California Environmental Quality Act (CEQA) per Section 15273 of the CEQA Guidelines.

IT IS FURTHER RESOLVED THAT this Board finds that these fees meet the requirements set forth in subdivision (e)(1), (e)(2), or (e)(3), as applicable, of Section 1 of Article XIII C of the California Constitution, and are therefore exempt from the definition of a tax as used therein.

BE IT FURTHER RESOLVED that effective January 1, 2017, this Board hereby establishes Emergency Medical Services Provider fees, and hereby rescinds Resolution No. 05-096 dated April 12, 2005, and the following Orange County Emergency Medical Services Division fees are established for CY 2017 (effective January 1, 2017 – December 31, 2017), CY

Resolution No. 17-025, Item No. 45 Emergency Medical Services Fee Update

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2018 (effective January 1, 2018 = December 31, 2018), and CY 2019 (effective January 1, 2019

- December 31, 2019) as follows:

EMS Provider Fee Title	Frequency	CY 2017	CY 2018	CY 2019
Ambulance Company License	A	\$2,140	\$2,207	\$2,234
Ambulance Company Unit Inspection/per vehicle	Annual	\$153	\$158	\$160
Ambulance Company Unit Re-Inspection/vehicle	Hourly	\$104	\$107	\$109
Ambulance Driver/Attendant License ¹	D: 1	\$82	\$84	\$85
EMT OC Certification	Biennial	\$120 ²	\$124 ²	\$125 ²
Card Replacement		\$25	\$25	\$25
Paramedic Accreditation	Variable	\$69	\$72	\$73
Mobile Intensive Care Nurse Application	Biennial	\$103	\$107	\$108
Trauma Receiving Center	Triennial	\$8,818 ³	\$9,079 ³	\$9,185 ³
Continuing Education Provider Application		\$311	\$321	\$325
EMT Training Program Application	4 years	\$884	\$912	\$923
Paramedic Training Program Application		\$893	\$921	\$932
Interfacility Transport Service Provider Application	Annual	\$1,461	\$1,506	\$1,525
Customized Data Report	Hourly	\$104	\$107	\$109

Emergency Medical Services Provider Fee Schedule

License expiration shall not exceed the individual's EMT certification expiration date

² Does not include State pass-through fee(s) (\$75 initial; \$37 recertification)

³ Does not include American College of Surgeons & accommodation costs

BE IT FURTHER RESOLVED that the \$82 fee in CY 2017, the \$84 fee in CY 2018, and

the \$85 fee in CY 2019 for the Ambulance Driver/Attendant License will be waived if the

licensee obtains their EMT OC Certification through Orange County EMS.

BE IT FURTHER RESOLVED that on or about January 1, 2020, and each three years

thereafter, the Auditor-Controller shall perform a cost recovery analysis for the program. The

Health Care Agency shall adjust the recommended fee schedule based upon the Auditor-

Controller's determination of actual costs and return to this Board for consideration of the

recommended fee schedule.

The foregoing was passed and adopted by the following vote of the Orange County Board of Supervisors, on February 14, 2017, to wit:

AYES:

NOES:

Supervisors:

)) TODD SPITZER, LISA A. BARTLETT, ANDREW DO MICHELLE STEEL

Supervisor(s): EXCUSED: Supervisor(s): ABSTAINED: Supervisor(s):

SHAWN NELSON

CHAIRWOMAN

STATE OF CALIFORNIA COUNTY OF ORANGE)

I, ROBIN STIELER, Clerk of the Board of Orange County, California, hereby certify that a copy of this document has been delivered to the Chairman of the Board and that the above and foregoing Resolution was duly and regularly adopted by the Orange County Board of Supervisors

IN WITNESS WHEREOF, I have hereto set my hand and seal.



ROBIN STIELER Clerk of the Board County of Orange, State of California

Resolution No: 17-025

Agenda Date: 02/14/2017

Item No: 45



I certify that the foregoing is a true and correct copy of the Resolution adopted by the Board of Supervisors, Orange County, State of California

Robin Stieler, Clerk of the Board of Supervisors

By: _

Deputy