EMERGENCY MEDICAL CARE COMMITTEE MEETING AGENDA

Thursday, May 19th, 2022, at 8:30 A.M. Virtual Meeting Only – ZOOM LINK:

https://slohealth.zoom.us/j/94542469463?pwd=MEFmM3hIQWVhY2M2dUFUUC9sNWdXQT09

Meeting ID: 945 4246 9463

Passcode: 883349

MEMBERS

CHAIR Dr. Rachel May, Emergency Physicians, 2018-22
VICE CHAIR Jonathan Stornetta, Public Providers, 2020-24
Bob Neumann, Consumers, 2018-22
Matt Bronson, City Government, 2020-24
Alexandra Kohler, Consumers, 2020-24
Chris Javine, Pre-hospital Transport Providers, 2018-22
Michael Talmadge, EMS Field Personnel, 2020-24
Jay Wells, Sheriff's Department, 2020-24
Julia Folgelson, Hospitals, 2020-22
Jennifer Sandoval, MICNs, 2018-22
Dr. Brad Knox, Physicians, 2018-22



EX OFFICIO

Vince Pierucci, *EMS Division Director* Dr. Tom Ronay, *EMS Medical Director*

STAFF

Rachel Oakley *EMS Coordinator* Kyle Parker, *EMS Coordinator* Michael Groves, *EMS Coordinator* Sara Nygaard, *Administrative Assistant* Denise Yi, *PHEP Program Manager*

AGENDA	ITEM	LEAD				
Call to Order	Introductions	R. May				
	Public Comment					
	Approval of minutes: March 17th, 2022 Minutes (attached)	R. May				
Receive and File Report	ENGON : 11 7/4/00 0/00/04					
	1st Quarter Ambulance Patient Off-load Time (APOT) report 2021 Core Measures Report 2021 Cardiac Arrest Registry to Enhance Survival (CARES) report	M. Groves				
	COVID Update	V. Pierucci				
Staff Reports	 Health Officer EMS Agency Staff Report EMS Medical Director Report PHEP Staff Report 	P. Borenstein V. Pierucci T. Ronay D. Yi				
Committee Members Announcements or Reports	Opportunity for Board members to make announcements, provide brief reports on their EMS-related activities, ask questions for clarification on items not on the agenda, or request consideration of an item for a future agenda (Gov. Code Sec. 54954.2[a][2])	Committee Members				
Adjourn	Next Meeting: Thursday September 15th, 2022, 0830 **Summer recess July & August**					

Draft

Emergency Medical Care Committee Meeting Minutes Thursday March 17th, 2022. Meeting Held Virtually via ZOOM



Members ☐ CHAIR Dr. Rachel May, <i>Emergency Medicine Physicians</i> ☐ VICE CHAIR Jonathan Stornetta, Public Providers	Ex Officio Vince Pierucci, EMS Division Director Dr. Thomas Ronay, LEMSA Medical Director
 ☑ Bob Neumann, Consumers ☑ Alexandra Kohler, Consumers ☑ Matt Bronson, City Government ☑ Chris Javine, Pre-Hospital Transport Providers ☑ Michael Talmadge, EMS Field Personnel ☑ Dr. Brad Knox, Physicians ☑ Jay Wells, Sheriff's Department ☑ Julia Fogelson, Hospitals ☑ Jennifer Sandoval, MICNs 	Staff ☐ Rachel Oakley, EMS Coordinator ☐ Mike Groves, EMS Coordinator ☐ Kyle Parker, EMS Coordinator ☐ Denise Yi, PHEP Program Manager ☐ Sara Schwall, Administrative Assistant Guests – Rob Jenkins, CalFire; Mike McDonough, CCHD; Aaron Hartney, Cal Star; Dr. Heidi Hutchinson, ER; Natasha Lukasiewich, FHD ED Director
AGENDA ITEM / DISCUSSION	ACTION
CALL TO ORDER	Meeting called to order at 08:36 AM
Introductions	Roundtable
Public Comment	No comments
Approval of January 20 th , 2022 Meeting Minutes –	J. Sandoval Motions. B. Neumann 2nds. All in favor.
Recommendation for Approval Policy changes for policies 350 and 351.	R. Oakley
Policy 350: MICN Initial Authorization:	
 Ride along requirement eliminated. Require a letter of employment/separation No longer needed to submit application in person. MICN liaison will act as coordinator of MICN applicants to mair accuracy. Application fee is waived. Attachment A-D are revised to reflect the above. 	ntain
Policy 341: MICN Reauthorization:	
 Two classes required with proof of attendance MICN liaison will act as coordinator of MICN applicants to mair accuracy. Require a letter of employment Application fee is waived Base Station Meetings reduced from 6 to 4 meetings and requ 6 CEs has been eliminated. 	
Discussion:	
 B. Knox: Shouldn't MICN look at an ambulance at the minimun R. May: Not clear why the ride along was removed and has co MICN not spending time with medics and understanding the fie 	ncerns of

V. Pierucci: COVID eliminated the capacity for hospitals to spare staff for ride along	
J. Fogelson: Suggests MICN have an orientation at the ED bay to familiarize themselves with a rig and medic calls.	
 J. Sandoval: Agrees with J. Fogelson and would like to explore options for MICN who want the orientation. 	
 V. Pierucci: Suggests adding ride along back into requirements at 4 hours instead of 6 plus 4 hours at MEDCOM. It is valuable for MICN to 	
 see pre-hospital care. K. Parker: Suggests use of checklist with orientation requirements. 	
J. Sandoval: Can certain topics be communicated in another format besides a ride along?	
 T. Ronay: In favor of ride along requirements to give MICN regional knowledge and a better understanding of the environment that the patient is being cared for. 	
R. Oakley: We can revise the MICN policy but would need to pass it	
through Ops first. V. Pierucci: We will rework the policy and come back at a future meeting.	No Action Taken
Contract Renewal:	V Pierusei
The 4 year agreement with San Luis Ambulance expires June 30 th , 2022.	V. Pierucci
APOC approved a 2 year extension of the contract with 2 amendments. Amendment 1: SLAS will provide EMSA with patient care record login	B. Knox motions to approve the 2 year
information. Amendment 2: SLAS will provide interoperability with	extension. B. Neumann 2nds. R. May and C. Javine abstain. Motion carries.
Cambria CHD and Fire agencies in 6 months.	davine abstain. Wotton carries.
Helicopter QI Data Report Out:	M. Groves
Data was presented from mid year 2020 until present.	3,0,00
Report: COVID Update:	V. Pierucci
Case numbers are down, hospitalizations are in the single digits, positivity rates are	
down. The Grover Beach, Paso Robles and SLO community testing sites will	
continue testing through April. COVID vaccinations have been incorporated into normal Public Health Clinic operations. Omicron surges continue abroad and the	
BA2 variant makes up about 11% of our county's cases. We may expect an uptick	
in cases with the no mask policy. Overall, looking much improved.	V Piamasi
Staff Report: Dr. Penny Borenstein is acting as interim HA Director. The review process has	V. Pierucci
begun for a new HA Director. We have our new AAIII, Sara Schwall in office. Our	
staff is preparing for the EMS Update course in May and the airway lab in June.	
EMS Medical Director Report:	
We are getting updates for scope of practice from the State for paramedics	Dr. Tom Ronay
vaccinating and have approval. The State is working on best practices for Post-ROSC Bundles of Care. The pediatric readiness assessment is completed and new	
guidance for trauma is coming soon. APOT scores have been spectacular in the	
county! There will be a skills lab at the Paso Airport in June.	
PHEP Staff Report:	
COVID therapeutics distribution continues; the county is working with physicians in	
the county to distribute monoclonal antibodies and other therapeutics. Staff is completing an After Action Report for Public Health.	Denise Yi
Announcements: None.	
Future Agenda Items: None	

Meeting adjourned 10:13 AM





COUNTY OF SAN LUIS OBISPO HEALTH AGENCY PUBLIC HEALTH DEPARTMENT

Penny Borenstein, MD, MPH Health Officer/Public Health Director

MEETING DATE	Virtual Meeting, May 19th, 2022
STAFF CONTACT	Vince Pierucci
	805-788-2512 vpierucci@co.slo.ca.us
SUBJECT	EMCC member nominations
SUMMARY	Per the EMCC by-laws, members are nominated by a specific stakeholder group or the County Health Officer. The member(s) serve 4 year terms with the lone exception of the Hospital Administrator nominee which serves a 2 year term. There are no term limits. Once a member is nominated through the appropriate mechanism, the name(s) are
	submitted to San Luis Obispo County Board of Supervisors for the formal appointment.
	The term for this slate of nominees is a 4 year term which begins July 1, 2022 and concludes June 30, 2026. The nominees are: Brad Knox – Central Coast Medical Association Rachel May – ER Physicians (Health Officer)
	 Chris Javine – Pre-hospital transport providers (Health Officer) Diane Burkey - MICNs (Health Officer)
	Bob Nueman – Consumer Representative (Health Officer)
	The term for the Hospital Administrator is a two year term which beings July 1, 2022 and concludes June 30, 2024. The nominee is:
	Julia Fogelson – Hospital Administrator (Hospital Administrators)
REVIEWED BY	Vince Pierucci
RECOMMENDED ACTION(S)	Receive and File
ATTACHMENT(S)	N/A



COUNTY OF SAN LUIS OBISPO HEALTH AGENCY PUBLIC HEALTH DEPARTMENT

Penny Borenstein, MD, MPH *Health Officer/Public Health Director*

MEETING DATE	N. I. I.M. C. M. 40th 0000
MEETING DATE	Virtual Meeting, May 19th, 2022
STAFF CONTACT	Mike Groves
	805.788.2514 mgroves@co.slo.ca.us
SUBJECT	APOT (Ambulance Patient Offload Times) Qtr. 1 2022
	Core Measures 2021
	CARES (Cardiac Arrest Data) 2021
SUMMARY	APOT Qtr. 1 2022 SLO County continues to have among the lowest APOT times in California. Our APOT-1 90th percentile times remain below the 20 min standard. However, we noted an increase in offload times in January, February, and March from the previous year that seems to coincide with the overall increase in ED visits due to the Omicron surge. The increases were 10%, 20%, and 10% respectively. APOT-2 times showed a small increase in patient offload times between 21 min and 60 min and a small number of offload times between 61 min and 120 min. Each month, we eliminate 1-2% of transported calls due to data entry errors. These are normally failure to properly complete the "Transfer Time" when patients are moved to a hospital bed and the nurse signs the report, often resulting in offload times that are hours long. We also noted a number of offload times less than 1 min resulting from crews getting signatures or entering transfer times when a patient is still on the ambulance gurney. We are addressing these issue currently in the mandatory EMS Update classes. Core Measures 2021 SLO County participates in the State Core Quality Measures project. The following statement is taken from the California EMS System Core Quality Measures Instruction Manual paraphrasing the purpose of the Core Measures Project. "The Core Quality Measures Project allows EMS systems across the state to review their performance and compare their results to other similar regions. Ultimately, the project highlights opportunities to improve the quality of patient care delivered within an EMS system. EMSA continues to utilize the Core Quality Measures Project to collect information on an annual basis."

	As all our EMS providers move to ImageTrend ePCR system, we will more accurately collect the required data elements in the format required by the State.
	CARES Data 2021 2021 cardiac arrest outcomes showed improvement from 2020 but are still a little behind 2019 numbers. SLO County continues to have survival rates above both California and the U.S. for those EMS systems taking part in the CARES data base. Additionally, all cardiac arrest survivors in SLO County were discharged from the hospital with CPC scores or 1 or 2 (neurologically intact).
	There are 3 areas we will take a close look at in the coming weeks. 1. An apparent increase in cardiac arrest resulting from drug overdoses. 2. Look closely at the use advanced airways in ROSC 3. Separating cardiac arrest data by cities or areas We will report these finding to the QI Committee, Clinical Advisory Committee, and EMCC.
REVIEWED BY	EMS Staff, Dr. Ronay, Vince Pierucci
RECOMMENDED ACTION(S)	Receive and File
ATTACHMENT(S)	APOT data from Qtr. 1 2022 Core Measures data from 2021 CARES data from 2021

APOT-1

Ambulance Patient Offload Delay - 2017 Reporting Matrix (Version 05-30-17)									
APOT - 1									
LEMSA:	County of San Luis Obispo								
APOT	20 minutes	·							
Standard:									
Directions:	List all LEMS	A authorized	9-1-1 emerge	ncy ambuland	e receiving Ho	ospitals (add rows as			
	needed). Ent	ter the total 9	-1-1 emergen	cy ambulance	transports (ti	ransport			
				•	•	ad time for that			
						nearest minute.			
	Enter EMS sy	/stem aggreg	ate totals at th	e bottom of	each month.	T			
Hospital	Jan-22	Ţ	Feb-22	_	Mar-22	1			
	Transports	90th	Transports	90th	Transports	90th Percentile			
		Percentile		Percentile		APOT Time			
		APOT		APOT					
		Time		Time					
Twin Cities	411	15:57	356	15:19	347	14:09			
Community									
Hospital Sierra Vista	389	15:01	343	17:33	302	14:16			
Regional	309	15.01	343	17.55	302	14.10			
Medical Center									
French Hospital	287	18:18	231	15:41	192	14:03			
Medical Center	207	10.10		131.11	132	1.100			
Arroyo Grande	260	13:38	207	14:03	229	10:29			
Community									
Hospital									
Marian	86	16:24	74	19:47	55	10:36			
Medical Center									
(Santa Barbara									
Co)									
EMS System	1,433	15:59	1,211	16:02	1,125	13:31			
Total									
(Aggregate)									

APOT-2

	Directions: List all LEMSA authorized 9-1-1 emergency ambulance receiving hospitals adding additional rows as needed, then for the indicated month; Utilizing the same denominator from APOT 1 (total 9-1-1 emergency ambuilance transports)
2.1	Enter the number (transport numerator) and percentage of patients transported by EMS personnel that experience a transfer of care within 20 minutes of arrival at the Hospital Emergency Department
2.2	Enter the number (transport numerator) and percentage of patients transported by EMS personnel that experience a transfer of care between 21-60 minutes of arrival at the Hospital Emergency Department
2.3	Enter the number (transport numerator) and percentage of patients transported by EMS personnel that experience a transfer of care between 61-120 minutes after arrival at the Hospital Emergency Department
2.4	Enter the number (transport numerator) and percentage of patients transported by EMS personnel that experience a transfer of care between 121-180 minutes after arrival at the Hospital Emergency Department
2.5	Enter the number (transport numerator) and percentage of patients transported by EMS personnel that experience a transfer of care more than 180 minutes after arrival at the Hospital Emergency Department

Hospital	Jan-22									
	2.1		2.2		2.3		2.4		2.5	
	transp	%	transp	%	transp	%	transp	%	transp	%
Twin Cities Community	388	94%	23	6	0	0	0	0	0	0
Hospital				%		%		%		%
Sierra Vista Regional	369	95%	19	5	1	0	0	0	0	0
Medical Center				%		%		%		%
French Hospital	262	91%	25	9	0	0	0	0	0	0
Medical Center				%		%		%		%
Arroyo Grande	253	98%	7	3	0	0	0	0	0	0
Community Hospital				%		%		%		%
Marian Medical Center	83	97%	3	3	0	0	0	0	0	0
(Santa Barbara Co)				%		%		%		%

Hospital	Feb-2	2									
	2.1		2.2		2.3		2.4		2.5		
	transp	%	transp	%	transp	%	transp	%	transp	%	
Twin Cities Community Hospital	336	94%	20	6%	0	0%	0	0%	0	0%	
Sierra Vista Regional Medical Center	322	94%	20	3%	1	0%	0	0%	0	0%	
French Hospital Medical Center	218	94%	11	5%	2	1%	0	0%	0	0%	
Arroyo Grande Community Hospital	200	98%	6	3%	1	1%	0	0%	0	0%	
Marian Medical Center (Santa Barbara Co)	66	89%	8	11%	0	0%	0	0%	0	0%	

Hospital	Mar-22									
	2.1		2.2		2.3		2.4		2.5	
	transp	%	transp	%	transp	%	transp	%	transp	%
Twin Cities Community Hospital	333	96%	13	4%	1	0%	0	0%	0	0%
Sierra Vista Regional Medical Center	291	96%	11	4%	0	0%	0	0%	0	0%
French Hospital Medical Center	182	95%	10	5%	0	0%	0	0%	0	0%
Arroyo Grande Community Hospital	225	98%	4	2%	0	0%	0	0%	0	0%
Marian Medical Center (Santa Barbara Co)	55	100%	0	0%	0	0%	0	0%	0	0%

Cardiac Arrest Registry to Enhance Survival (CARES)

- Standardized measure of out-of-hospital cardiac arrest (OHCA)
- Developed in 2004 by CDC and Emory University School of Medicine, Dept of Emergency Medicine
- Measures total outcome and "Utstein" outcome (witnessed OHCA presenting with shockable rhythm)
- Measures only non-traumatic OHCA where resuscitation was attempted (does not include signs of obvious death criteria per policy #601 attachment A)
- SLO County EMS Agency has been collecting the data since 2017

Out of Hospital Cardiac Arrest (OHCA) Survival SLO County 2017 - 2021

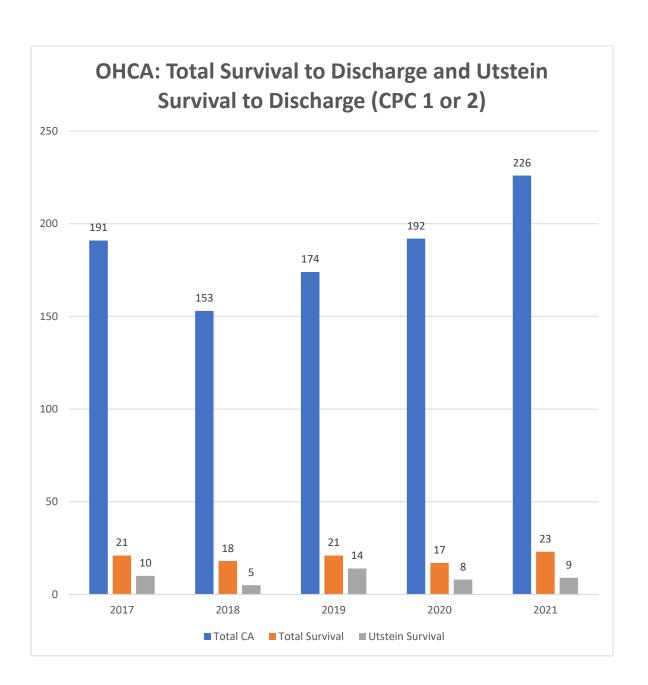
Year	Total OHCA	Discharge Survival Dischar	
2017	191	21/191 11.1%	10/22 45.5%
2018	153	18/153 11.8%	5/30 16.7%
2019	174	21/174 12.1 %	14/28 50%
2020	192	17/192 8.9 %	8/27 29.6%
2021	226	23/226 10.2%	9/23 40.9%

All survivors of OHCA had a CPC of 1 or 2

Utstein: Witnessed by bystander and found in shockable rhythm

Total number of OHCA survivors 2017 – 2021

100



Cardiac Arrest Survival Rates SLO County, California, US 1-1-2017 – 12-31-2021 (CPC 1 or 2)

	Total OHCA	Total Survival to Discharge (%)	Total Utstein Survival to Discharge (%)
SLO County	934	10.7%	35.4%
California	83,803	8.5%	30.5%
US	537,100	9.8%	31.3%

San Luis Obispo County EMS Agency

California Core Quality Measures Data - CY 2021

Measure ID #	Measure Name	Numerator Value (Subpopulation)	Denominator Value (Population)	Reported Value (%)
HYP-1	Treatment Administered for Hypoglycemia	160	180	89%
PED-3	Respiratory Assessment for Pediatric Patients	27	27	100%
RST-4	911 Requests for Services That Included a Lights and/or Sirens Response	22405	25024	90%
RST-5	911 Requests for Services That Included a Lights and/or Sirens Transport	1411	15192	9%

Includes data from San Luis Ambulance and Cambria Ambulance