

EMSAAC Board of Directors' Meeting

March 27, 2007

Sheraton Gateway LAX
6101 West Century Blvd
Los Angeles, CA 90045

Agenda Item	Discussion	Action
1) Call to Order	EMDAC President David Ghilarducci, MD, called the meeting or order at 0902. Carol Meyer was delayed, but arrived shortly.	<ul style="list-style-type: none"> Meeting called to order.
2) Welcome & Introductions	EMSAAC members, EMDAAC members, EMSA Staff, and visitors introduced themselves.	<ul style="list-style-type: none"> No Action.
3) EMS Authority Report Joint Session with EMDAAC	<p>In a joint session with EMDAC, EMSA Director Cesar Aristeiguieta, MD, provided the following briefing:</p> <p>1) <u>New Staff members at EMSA:</u> Randy Linthicum – new in Disaster Medical Services. Works on ESAR-VHP program Charles Teddington – New Chief of Enforcement Division. Robin Robinson – New executive assistant. Reba Anderson – Works in purchasing administration.</p> <p>2) <u>Paramedic Licensing and Enforcement Program</u> There have been numerous newspaper and media stories, primarily in LA and Sacramento, focusing on paramedic discipline and criminal histories. More stories are expected statewide. In his veto of AB 2554 last year, the Governor identified that he wanted CDHS to lead the development of a program to assure standardized rehabilitation of EMTs and Paramedics statewide. EMSA is receiving the most public records act requests in history, up over 1200% over past year.</p> <p>Paramedic licensure program is operating with only 5% financial reserves, the minimum allowed. Improvements in programs, such as implementation of an impairment rehabilitation program, will require an increase in paramedic licensure fees. These fees have not been increased since their inception, 13 years ago.</p> <p>EMSA distributed draft guidelines on licensing paramedics with drug or alcohol arrest/convictions. All EMS Administrators should review this document. Workplace monitoring has been well received by some employers. Two paramedics were identified through the EMSA program, before</p>	

the employer identified the problem. The American Society of Addiction Medicine (ASAM) will certify those physicians who provide primary care services or psychiatric services, have substantial experience in addiction medicine, complete specific CE, and pass a board exam. There are about 600 physicians in the state certified by ASAM.

Discussion regarding implications of current and proposed paramedic discipline policy. Michael Petrie requested that EMSA propose/support legislation to initiate statewide certification of EMTs by EMSA. Dr. Aristeiguieta voiced his support to conduct statewide EMT certification by EMSA.

3) LEMSA's EMT Discipline Policies

Twenty-seven of 31 LEMSA have submitted their EMT-1 discipline policy to EMSA. Twenty-one or 22 of these policies have been approved by EMSA. **The remaining 4 LEMSAs should submit their EMT discipline policy to EMSA ASAP.**

4) Scope of Practice

The scope of practice committee will review any changes to medications or patient care adjuncts.

Dr. Aristeiguieta would like the scope of practice committee to review the current practice and scope of practice of mutual aid teams and other EMS providers working throughout the state, with the goal of improving inter-county coordination. Specifically mentioned were teams that support CDF fires (which currently are DMAT Teams), helicopter providers, and ground ambulance providers working in numerous counties.

5) EMSA Legal Staff

Rae DeLong, EMSA Staff Counsel has resigned. EMSA is hiring an attorney. In interim, EMSA is contracting with Health Quality Agency of Attorney General's office for legal services relating to paramedic discipline.

6) Disaster Medical Services

Dr. Aristeiguieta thanked the EMSAAC Disaster Subcommittee members for their work with EMSA DMS.

The ESAR-VHP program still being developed. EMSA is purchasing ESAR-VHP IT system. The system should be implanted by June 30, 2007.

EMSA is processing the purchase order Mobile Field Hospitals. EMSA is purchasing 3 MFH from is Blu-Med, which should be delivered by June 30, 2007.

EMS is developing the CalMAT Team program. Caches are being created, team members are being recruited, and policies

	<p>are being written.</p> <p>The ambulance strike team program being developed. Disaster Ambulance Support Units are being received and prepared to distribute to LEMSAs.</p> <p>The annual Rough and Ready exercise will occur August 25, 2008 in Orange County.</p> <p>EMSA requested support from LEMSAs to participate in Price-Waterhouse consulting program regarding medical/health surge. Due to the short time frame, limited EMSA staff, and scope of the project, active LEMSA participation is critical.</p>
<p>4) Consent Agenda</p> <ul style="list-style-type: none"> • Approval of Agenda • Approval of Minutes 	<p>Carol Meyer added the following topics to the agenda: 1) Director's Advisory Group; 2) Director/LEMSA meeting.</p> <p>Larry Karsteadt requested to move Trauma Plan to unfinished business, and to discuss EMS Plans.</p>
	<ul style="list-style-type: none"> • Agenda approved as modified. Minutes approved as presented. M/S/C/Spies/LaPolla.
<p>5) Budget Report</p>	<p>The EMSAC Budget report was provided via e-mail, but Art Lathrop was not present to discuss report. The EMSAAC financial report will be reviewed at the next meeting.</p>
	<ul style="list-style-type: none"> • EMSAAC financial report to be discussed at next meeting.
<p>6) Legislation CHEAC Contract</p>	<p>Carol Meyer and Virginia Hastings voiced their strong support for the CHEAC contract, by which CHEAC provides legislative advocacy services for EMSAAC.</p> <p>Virginia Hastings distributed a summary of legislation and letters by EMSAAC supporting and opposing legislation. For specific information regarding legislation, please review this summary.</p> <p>Jeff Rubin asked that EMSAC carefully review AB 64, which would allow volunteers into California with minimal oversight. This bill also provides that OES maintain many registries, including the EASR-VHP registry. Virginia said that the EMSAAC legislation subcommittee should change from soft support to watch on this bill.</p> <p>SB 583 (Rideley –Thomas) Bill regarding EMT discipline. Barbara Pletz met with the author's representative and</p>
	<ul style="list-style-type: none"> • Motion that EMSAAC lead in the revision of the EMT-1 task force. Barbara Pletz to coordinate task force for EMSAAC, President and President Elect to represent EMSAAC on task force, to influence SB 583, or create spot bills to develop statewide EMT-1 licensure. M/S/C Lee/Frenn.

	<p>the California Professional Firefighters (CPF) lobbyist. EMSAAC does not support two clauses in this bill: 1) That the LEMSA would comply with the APA due process requirement; and, 2) The LEMSA could not take discipline, if discipline had been taken by fire department managers. Extensive discussion followed. Many EMSAAC members remain concerned about this bill, and recommended that EMSAAC switch our position to oppose unless our aforementioned concerns are met.</p> <p>Dr. Aristeiguieta or EMSA cannot lead an EMT-1 Task Force, but would participate in such a committee, if EMSAAC, EMDAC, CalChiefs, and other organizations participated. Carol Meyer recommended reinstating the EMT-1 Task Force. Discussion regarding the appropriateness of inviting CPF to the task force. There was a consensus that all participating agencies be invited to participate in the reformed EMT-1 Task Force.</p> <p>Motion that EMSAAC lead in the revision of the EMT-1 task force. Barbara Pletz to coordinate task force for EMSAAC, President and President Elect to represent EMSAAC on task force, to influence SB 583, or create spot bills to develop statewide EMT-1 licensure. M/S/C Lee/Frenn.</p>	
<p>7) Regional Issues</p>	<p>ICEMA trying to get augmentation for regional funding. Meeting with Dr. Aristeiguieta scheduled for April 30 to discuss redundant reporting requirements. Dan Smiley noted that regional augmentation will not be possible in FY 07-08, due to state budget issues.</p> <p>Discussion regarding changes in submitting EMS Plan. Bonnie Sinz, from EMS Authority, noted that she is developing a template for submitting EMS Plan updates on-line.</p>	<ul style="list-style-type: none"> • Larry Karsteadt to lead a small group to streamline the EMS planning process. Nancy LaPolla and Bonnie Sinz will participate.

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Old Business		
8) California Interoperable Communications (Cal-SIEC)	Carol Meyer reviewed the LEMSA/EMSAAC representation on this committee, which discusses communications interoperability.	<ul style="list-style-type: none"> Information only
9) Disaster Subcommittee/ASTs/CHDS Surge Committee	<p>Michael Petrie briefed on the status of the Disaster Subcommittee, noting the following:</p> <ul style="list-style-type: none"> EMSA DMS, RDMHS, and EMSAAC Disaster Subcommittee are working on CD-MOM, using scenario-based planning. The plan should be complete by August 31, 2007. The group has committed to an ambitious meeting schedule. The next EMSA DMS – RDMHS – EMSAAC Disaster Subcommittee meeting will be held on April 4, 2007 from 1000 to 1500 hours at EMSA in Sacramento. EMSA is hiring a consultant to support the development of the CD-MOM. This consultant should start by late April or early May. Monthly conference calls were implemented in January. Next disaster conference call is scheduled for April 12. Conference call minutes are distributed to EMSAAC board members by end of week following the meeting. <p>Jeff Rubin announced that Michael Petrie will represent EMAAC/LEMAs on CHDS Surge Task Force. Michael will update EMSAAC members via e-mail.</p> <p>Carol Meyer distributed the CHDS Surge Planning/Price Waterhouse workgroups. This project includes 9 focus areas and 24 workgroups. Jeff Rubin will advise EMSAAC via Carol as these focus areas and work groups are</p>	<ul style="list-style-type: none"> Jeff Rubin will advise EMSAAC via Carol as CHDS focus areas and work groups are formed. Carol Meyer to notify EMSAAC members via list serve, to solicit volunteers for committee service.

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10) Emergency Healthcare Access Taskforce Update (Ambulance Diversion)	<p>Bruce Lee distributed the Emergency Healthcare Access Task Force “Proposed Guidelines for the Management of Emergency Department Ambulance Diversion”. This was a consensus based document of stakeholders interested in diversion of ambulances from EDs. The key points from this document are:</p> <ul style="list-style-type: none"> • Any hospital that desires to divert ambulances from its emergency department must develop an internal diversion mitigation plan and submit it to the LEMS for review and verification of implementation. • Ambulance diversion must be limited to periods of critical patient overload resulting in emergency department resource depletion and a compromise in patient safety. • Diversion episodes must be time limited. • Any hospital that does not comply with some or all of the guidelines may have its diversion privileges suspended. <p>Discussion followed. While diversion hours have been reduced, many EMS systems are having problems with ambulances being held by EDs for long periods. This is typically called patient parking. This is a serious and growing problem statewide.</p>	<ul style="list-style-type: none"> • Information only.
11) EMSA Director and EMS Administrator’s Meeting	<p>The last LEMSA Administrator/EMSA Director meeting, scheduled for March 15, was cancelled. The next meeting will be held with Dr. Aristeiguieta on May 10, 2007 This meeting is open to Administrators and Directors only. No subordinate staff may substitute at this meeting.</p>	<ul style="list-style-type: none"> • EMS Administrators to attend May 10 meeting with Dr. Aristeiguieta.
12) EMT-1 Disciplinary Policies	<p>Carol Meyer distributed a list with the current status of each LEMSA’s EMT-1 discipline policy. This issue was also</p>	<ul style="list-style-type: none"> • LEMAs that have not submitted their

	discussed under legislation.	EMT-1 discipline policy to EMSA should do so ASAP.
13) Pandemic Flu Committee	John Pritting was promoted to a new position, but continued to participate in pandemic flu committee. The documents created by this committee were mailed to Carol Meyer.	<ul style="list-style-type: none"> Carol to e-mail documents created by committee and LA EMS pandemic flu policies to all EMSAAC members.
14) SB 1773 Implementation	Discussion regarding SB 1773 implementation. Additional LEMSAs have implemented SB 1773 changes through their County Board of Supervisors since the last meeting.	<ul style="list-style-type: none"> Information only.
15) 2007 EMSAAC Conference	Bruce Lee discussed the 2007 EMSAAC Conference. Over 2000 brochures were directly distributed to EMS Stakeholder groups. Sign ups have increased within past few weeks. For cost information, please contact Marilyn at LA EMS, rather than the hotel directly.	<ul style="list-style-type: none"> EMSAAC members to sign up for EMSAAC Conference as soon as possible.
16) Roundtable Discussion	<ul style="list-style-type: none"> <i>Alameda County EMS Agency.</i> Introducing non-911 service provider ambulance ordinance. Will train all 7th graders in county in CPR, through distributed program. <i>Central California EMS Agency.</i> As of March 1, Tulare County is no longer allowed to use EMT-IIs on valley floor. Consolidating EMS and Fire Dispatch through 3-county EMS Agency dispatch center (staffed by American Ambulance). <i>Coastal Valleys EMS Agency.</i> Planning for RFP, to be released end of year. Also doing trauma planning. Sutter Sonoma will be closing or merging. <i>Contra Costa EMS Agency.</i> Not present. <i>El Dorado County EMS Agency.</i> Dr. Murphy, Medical Director is leaving. Looking for new medical director. Switching more call types to code 2 response—now up to 11 call types <i>Imperial County EMS Agency.</i> Not present. <i>Inland County EMS Agency.</i> Developing electronic PCR with system surveillance capability. San Bernardino County has taken over management of hospital in Needles. <i>Kern County EMS Agency.</i> Developed off-load protocol for hospitals, to reduce time ambulances spend at hospitals. This protocol provides that their must be: eye contact 	

	<p>between ED staff and ambulance crew within 5 minutes, patient off gurney at 20 minutes, phone calls to hospital supervisors start at 30 minutes.</p> <ul style="list-style-type: none"> • <i>Los Angeles EMS Agency.</i> Paramedic Training Institute 200th class celebration on Friday at Universal Studios. 10 of first 40 paramedics are attending. EMS Agency is moving to Santa Fe Springs, next to disaster staffing facility. MLK hospital is down from 172 to 40 beds. ED still sees 42,000 patients annually. • <i>Marin County EMS Agency.</i> Not present. • <i>Merced County EMS Agency.</i> Not present. • <i>Monterey County EMS Agency.</i> Not present. • <i>Mountain Valley EMS Agency.</i> Experienced flu-type surge in February, due to poor air quality. Stanislaus County was thinking of leaving Mountain Valley regional JPA, but decided to stay, based on performance standards in new 1-year contract. • <i>North Coast EMS Agency.</i> Receiving QI plan reports from each hospital. Evaluating alternative base hospitals—most protocols are standing orders. Concerned about on-line CE issues, including on-line CPR courses that do not offer manikin contact. • <i>Northern California EMS Agency.</i> Close to re-designating the two level 2 Trauma Centers within NorCal's EMS jurisdiction. • <i>Orange County EMS Agency.</i> Group of neurologists are requesting designation of stroke receiving centers. Orange EMS will require that stroke centers also care for all neuro-trauma. • <i>Riverside County EMS Agency.</i> Bruce Barton is taking over as EMS Agency Director. Michael Osur will still oversee EMS, injury prevention, and BT programs. One district hospital, which is a base hospital, is closing. • <i>San Diego County EMS Agency.</i> A proposal by San Diego's land use and planning department would transfer EOA authority to the land use and planning department. • <i>Santa Barbara County EMS Agency.</i> Implementing electronic PCR program, using AMR's meds system, which is CEMSIS-complaint. Completed Santa Barbara Pandemic Flu Plan, which will be posted on website. • <i>Santa Clara County EMS Agency.</i> Formed cardiac care task force, anticipating a STEMI program this calendar year. Eight of 12 hospitals are JACHO certified stroke hospitals. Setting up Stroke TAC to evaluate capability of EMS System care of stroke patients. • <i>San Diego EMS Agency.</i> Two hospitals have changed owners. Thirteen of 18 hospitals are designated cardiac centers. Stroke center designation will take longer. • <i>San Francisco EMS Agency.</i> A Sutter Health hospital is
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	<p>exploring purchase of King American Ambulance Company. Trauma Coordinator is retiring. Planning to roll out patient tracking/incident management system within 3 months.</p> <ul style="list-style-type: none"> • <i>San Joaquin County.</i> Still in litigation with cities of Stockton, Lodi and Manteca, regarding transfer of calls from primary PSAPs to AMR's Lifecom dispatch center. All 16 fire district and City of Tracy have joined with Lifecom. Received subpoena from grand jury to investigate unusual occurrence reports. • <i>San Mateo EMS Agency.</i> Recruiting for a management analyst. In EMS system redesign phase, in preparation for RFP that will be issued in January 2008. Consultant will not run process. Produced training CD for SMART (mental health) program. • <i>Sierra-Sacramento EMS Agency.</i> Stopping diversion. Hospital Council of Northern California not happy. • <i>Solano County EMS Agency.</i> Solano eliminated MICNs about 3 years ago—considers it a mistake because there is decreasing hospital participation as members of an EMS system and reduced interaction among paramedics and ED nurses. Using an electronic pen for EPCR and patient tracking. • <i>Tuolumne County EMS Agency.</i> Dan Burch reported that Tuolumne County will likely close its county hospital. • <i>Ventura County EMS Agency.</i> All ambulance providers and fire providers, except for one city, will be on CAD-based consolidated dispatch center. Going to closest ALS unit on priority calls.
<p>17) Commission Items</p>	<p>Bruce Lee, EMSAAC Commission representative, summarized the items on the EMS Commission's agenda for March 28, 2007. Bruce emphasized the following items:</p> <ul style="list-style-type: none"> • No new funding for regional EMS agencies. No augmentation funding since 1998. Seven regions represent 33 counties. • CEMSIS data dictionary should be implemented in two phases. • EOA guidelines are completed, available for administrative review. Once complete, this information, and details on all EOAs will be placed on EMSA's website. • Importance of EMSA sharing information when they are disciplining or investigating a paramedic. • Access to EMT testing sites is limited. This is a problem for rural

	<p>areas. Also see comments from agenda item number 20.</p> <ul style="list-style-type: none"> • A few comments received for EMT-II regulations. • EMSA will place Mobile Field Hospitals in Sacramento, South Bay, and Los Alamitos. • EMSA is working with California DMAT teams to develop CalMATS. 	
New Business		
18) Aereomedical Transport Summit	<p>Bruce Lee led a discussion regarding the aereomedical summit. Future meetings will be held to discuss helicopter medical QI, inter-county operations, disaster response, and trauma. EMS Administrators in attendance said the workshop was beneficial.</p>	<ul style="list-style-type: none"> • Information only.
19) CQI Meeting	<p>At the last EMSAAC meeting, Nancy LaPolla agreed to coordinate a CQI summit. Nancy will propose a summit date within a few weeks.</p> <p>Todd Hatley will be hired by EMSA to teach Six Sigma Yellow and Green Belt courses this summer.</p>	<ul style="list-style-type: none"> • Nancy LaPolla to coordinate the CQI summit. • EMSA to coordinate Six Sigma Yellow and Green Belt courses.
20) Shortage of EMT-1s	<p>The California Ambulance Association is concerned about the impact of national registry testing, which has reduced the percentage of EMT-1s passing the EMT-1 certification testing.</p> <p>Some felt that national registry testing is appropriate, and that “fly by night” EMT training programs are not capable of training at the national registry level.</p> <p>Mountain Valley EMS and ICEMA will survey their EMTs to find the cause of decreased EMT certification. Carol Meyer will survey EMSA to find number of EMT programs that have closed within the past year.</p>	<ul style="list-style-type: none"> • Mountain Valley EMS and ICEMA will survey their EMTs to find the cause of decreased EMT certification. • Carol Meyer will survey EMSA to find number of EMT programs that have closed within the past year.
21) 2008 EMSAAC Conference	<p>The 2008 CalACEP/EMSAAC Conference will be held at the Paradise Point Resort in San Diego.</p>	<ul style="list-style-type: none"> • Information only.
22) Paramedics in Prison	<p>A new physician, Bob Sellen, has taken over responsibility for medical care in prisons. This physician is advocating using paramedics in prisons to improve</p>	<ul style="list-style-type: none"> • Bruce Lee to request to discuss this item at the next EMS

	<p>patient care. This program includes three phases: 1) Put ambulance based paramedics in prisons; 2) train medical staff on ACLS, CPR, and AED use; and 3) paramedics would perform advance practice skills.</p> <p>Lively discussion followed, regarding the appropriateness of paramedics in the prison setting. Michael Osur has spoken to ENA and EMSA about this issue.</p>	<p>Commission meeting.</p> <ul style="list-style-type: none"> • Carol Meyer to Angelo Salvucci, MD, to discuss this issue.
23) 2007/2008 Slate of Officers	<p>The nomination committee held a conference call, and the following EMSAAC members were nominated for next year's officers:</p> <p>President: Bruce Lee President Elect: Michael Frenn Secretary: Michael Petrie Treasurer: Art Lathrop</p>	<ul style="list-style-type: none"> • Motion to approve slate as presented. M/S/C/LaPolla/Lynch
24) Trauma Plan Revision Process	<p>Super trauma regions are still being developed. EMSA is leading evaluation of this and other regional trauma structures.</p> <p>Dan Smiley noted that he considered trauma regions part of a statewide trauma system, regardless of the number of regions. This regional emphasis is important, as the State's administration and legislature better understands a statewide proposal.</p> <p>Larry Karsteadt, Carol Meyer, and others noted that while most EMSAAC members support a statewide trauma system, that support is contingent upon the rationale and logic of the trauma regions. Larry noted that these trauma regions could material affect LEMSAs, as they will share regulatory authority. Larry requested that this item be placed on the next agenda.</p>	<ul style="list-style-type: none"> • Carol Meyer to place Trauma Plan on next agenda. • Trauma planning to be discussed at EMSAAC's August strategic planning meeting.
25) Items for next Agenda	<p>Discussion regarding items for next agenda.</p>	<ul style="list-style-type: none"> • No action.
23) Adjournment	<p>Carol Meyer adjourned the meeting at 1530 hours.</p>	<ul style="list-style-type: none"> • Meeting Adjourned.