



PREHOSPITAL MEDICAL ADVISORY COMMITTEE MEETING AGENDA (PMAC)

PMAC MEMBERS PER POLICY 8202:

Air Transport Provider Representative
11-Kent McCurdy

American Medical Response
5-Douglas Key

BLS Ambulance Service Representative
12-Kelly Martinez

Blythe Ambulance Service
5-John Valentine

Cathedral City Fire Department
5-Robert Williams

Corona Regional Medical Center
1-Robbie Dunn, MD
4-Douglas Dick

County Fire Chiefs' Non-Transport ALS Provider
10-Art Durbin

County Fire Chiefs' Non-Transport BLS Provider
9-Phil Rawlings (Vice Chair)

Desert Regional Medical Center
1-Joel Stillings, D.O
4-Jessica Voigt

Eisenhower Medical Center
1-Frank Domzalski, MD
4-Shellee Fetters

EMT / EMT-P Training Programs
6-Maggie Robles

EMT-at-Large
13-Mike Markert-Green

EMT-P-at-Large
14-Paul Duenas

Hemet Valley Medical Center
1-Todd Hanna, MD
4-Victoria Moor

Idyllwild Fire Protection District
5-Patrick Reitz

Inland Valley Regional Medical Center
1-Reza Vaezazizi, MD (Chair)
4-Daniel Sitar

JFK Memorial Hospital
1-Troy Cashatt, MD
4- Scott Jaggar

The Next Meeting of PMAC is on:

Monday, September 22, 2014

9:00 AM to 11:00 AM

Riverside County Regional Medical Center
26520 Cactus Avenue, Moreno Valley
Rooms A1018 and A1020

1. CALL TO ORDER

Chair Reza Vaezazizi, MD

2. PLEDGE OF ALLEGIANCE

Reza Vaezazizi, MD

3. ROUNDTABLE INTRODUCTIONS

Reza Vaezazizi, MD

4. EMS RECOGNITIONS

Bruce Barton and Daved van Stralen, MD

5. APPROVAL OF MINUTES (5 Minutes)

June 22, 2014 (Attachment A)

6. REPORTS & DISCUSSION (80 Minutes)

This is the time / place in the agenda in which a brief committee report will be given. Unless indicated, PMAC members are expected to engage in discussion for the purposes of providing improved understanding and / or recommendations to REMSA's Medical Director and staff. PMAC will decide on an action at the end of each agenda item.

6.1 CQI-TAG—Laura Wallin (Attachment B)

6.2 Stroke System—Laura Wallin (Attachment C)

6.3 STEMI System—Laura Wallin (Attachment D)

6.4 Ambulance Patient Offload Delay Report—Patrice Shepherd (Attachment E)

6.5 Data System Group—Scott Moffatt (Attachment F)

6.6 2015 Policy Manual—Scott Moffatt (Attachment G)

6.7 EMS System Strategic Plan & Advisory Committee Structure —Bruce Barton (Attachment H)

7. NEW BUSINESS (30 Minutes)

7.1 Medical Health Operational Area Coordination Program Plan—Kim Saruwatari (Attachment I)

7.2 Adult Protective Services—Misty Plumley (Attachment J)

7.3 Staffing Changes—Bruce Barton

Kaiser Permanente Riverside

1-Jonathan Dyreyes, MD
4-Victoria Montiel

Loma Linda University MC Murrieta

1-Kevin Flaig, MD
4-Jennifer Orr

Menifee Valley Medical Center

1-Todd Hanna, MD
4-Janny Nelsen

Kaiser Permanente Moreno Valley

1-George Salameh, MD
4-Katherine Heichel-Casas

Palo Verde Hospital

1-David Sincavage, MD
4-Camelita Aquines

Parkview Community Hospital

1-Chad Clark, MD
4-Cynthia Anderson

Rancho Springs Medical Center

1- Reza Vaezazizi, MD (Chair)
4-Marie Dempster

Riverside Community Hospital

1-Stephen Patterson, MD
4-Sabrina Yamashiro

Riverside County Fire Department

5-Scott Visyak
8-Robert Fish

Riverside County Police Association

7-Sean Hadden

Riverside County Regional Medical Center

1-Tim Nesper, MD
4-Kay Schulz

San Geronio Memorial Medical Center

1-Richard Preci, MD
4-Trish Ritarita

Temecula Valley Hospital

1-Pranav Kachhi, MD
4-Katie DiDonato

Trauma Audit Committee & Trauma Program Managers

2-Tito Gorski, MD
3-Maureen Bowlin

Ex-officio Members

1-Cameron Kaiser, MD, Public Health Officer
2-Daved van Stralen, MD, REMSA Medical Director
3-Bruce Barton, REMSA Director
4-Brian MacGavin, REMSA Assistant Director
5-Dimitrios Alexiou, Hospital Association of Southern California
6-Jeff Grange, MD, LLUMC
6-Phong Nguyen, MD, Redlands Community Hospital
6-Rodney Borger, MD, Arrowhead Regional Medical Center

8. OTHER REPORTS / GOOD OF THE ORDER / ANNOUNCEMENTS
(5 Minutes)

This is the time / place in the agenda committee members and non-committee members can speak on items not on the agenda but within the purview of PMAC. Each announcement should be limited to two minutes unless extended by the PMAC Chairperson

9. NEXT MEETINGS / ADJOURNMENT (1 Minute)

November 17, 2014—Riverside County Regional Medical Center
January 26, 2015—4210 Riverwalk Parkway First Floor Conference Room Riverside, CA 92505

TOPIC	DISCUSSION	ACTION
1. CALL TO ORDER		Chair Dr. Vaezazizi called the meeting to order at 9:00 AM.
2. PLEDGE OF ALLEGIANCE		Chair Dr. Vaezazizi led the Pledge of Allegiance.
3. ROUNDTABLES INTRODUCTIONS		Self-introductions were performed.
4. APPROVAL OF MINUTES		Meeting minutes from the last PMAC meeting, March 24, 2014 were reviewed and accepted without changes.
5. COMMITTEE / TASK FORCE DISCUSSION		
5.1 2015 Policy Manual – Scott Moffatt	Scott encouraged continued participation in the Policy Review Forum (PRF). The PRF is expected to remain on schedule by November 2014.	Information only.
5.2 Trauma System -		
5.2.1 TAC Report – Maureen Bowlin	<p>Maureen Bowlin suggested PMAC make a recommendation to have TAC review the Trauma Diversion Policy.</p> <p>A review of the 2012 Pediatric data shows there were no spinal cord injuries from vertebral fractures.</p> <p>Data is being reviewed to determine compliance with the April 1, 2014 changes to the Do Not Attempt Resuscitation (Policy 4203). For 2013, 49 percent of trauma ED deaths occurred within 15 minutes of ED arrival.</p>	PMAC made a recommendation to have the Trauma Program Managers Committee submit the Trauma Diversion Policy to TAC for review and recommendations.
5.2.2 HEMS 2013 – Cindi Stoll	<p>Cindi Stoll presented the HEMS 2013 report. Laura Wallin will be taking over HEMS CQI. It has been requested that the PLNs track HEMS outcomes.</p> <p>There was discussion about the use of HEMS for cardiac arrests and how the current STEMI policy does not address destinations for Return of Spontaneous Circulation (ROSC) patients.</p>	Information only.
5.3 Stroke System – Trevor Douville	<p>Riverside County Stroke System went live on April 1, 2014. Ten hospitals in Riverside County received REMSA’s Stroke Center designation.</p> <p>The Stroke System Committee has identified four</p>	Information only.

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	<p>indicators:</p> <ul style="list-style-type: none"> • Glucose testing • Scene time >20-minutes • Transport to a designate stroke centers • Completion of a Cincinnati Stroke Scale <p>The next Stroke System Committee will meet on August 19. Any questions should be directed to Trevor Douville until Laura Wallin returns.</p>	
5.4 STEMI System – Trevor Douville	<p>The last STEMI meeting was on April 24. The indicators to be monitored are:</p> <ul style="list-style-type: none"> • Scene time >20-minutes • Missed STEMI's • ECG transmission <p>ECG transmission and data collection for these indicators will begin on July 1, 2014. The next STEMI system meeting will be before the Stroke committee meeting on August 19.</p>	PMAC made a recommendation that the STEMI group look into identifying out of hospital cardiac arrest receiving centers.
5.5 Ambulance Patient Offload Delay Report – Patrice Shepherd	<p>Patient offload delays hours consistently remain at high levels. 2014 data from January through May has surpassed last year's hours for delays; this may be due to the flu season.</p> <p>Tom Lynch, Dimitrios Alexiou and Bruce Barton are part of a regional Offload Delay Task Force to collaborate on the best practices to improve offload delays.</p>	Information only.
5.6 EMS System Evaluation- Brian MacGavin	<p>Riverside County EMS System Strategic Plan work groups have met on March 26, April 23, and May 14. The next meeting will be on June 25, at The Ben Clark Training Center, from 9:30 AM – 11:30 AM. Stakeholders at these meetings have been working on a Strength, Weakness, Opportunity, and Threat (SWOT) analysis. Additionally, there have been presentations at these meeting on innovative programs used by other EMS Systems.</p> <p>A writing advisory group will give advice on prioritizing the goals and objectives for the Strategic Plan. The final draft will be developed by The Abaris Group and sent to the broad stakeholders by the end of July. More details about the progress of the EMS System Evaluation Project can be viewed at www.rivcoems.org.</p>	Information only.
5.7 Data System Group – Scott Moffatt	<p>The data group last met on June 10 in Corona. Eventually the group will be meeting every other week. Each EMS provider organization needs to have a representative log on to the V-Bulletin for the continuity of communications. REMSA will be mandating a deadline date for all</p>	Information only.

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	<p>EMS providers to be on the same data system. We are waiting for Sansio to become NEMSIS 3.0 compliant.</p> <p>A schedule of meetings can be viewed at www.remsa.us.</p>	
<p>5.8 CQI TAG – Trevor Douville</p>	<p>The last CQI TAG meeting was on April 17. The Riverside County CQI Plan is posted on www.remsa.us and is waiting for approval from the State EMS Authority. The next CQI TAG meeting will be on July 31.</p> <p>On June 10 there was a State Core Measures Rollout these 10 core measures are included with our CQI Plan along with seven other indicators. These seven indicators are in the process of being validated and tested for reliability.</p> <p>On June 3, REMSA hosted a Root Cause Analysis Workshop, taught by Craig Stroup from Contra Costa County EMS Agency.</p>	Information only.
<p>6. UNFINISHED BUSINESS</p>		
<p>7. NEW BUSINESS</p>		
<p>7.1 REMSA Staffing and Office Changes – Brian MacGavin</p>	<p>Brian MacGavin recognized Cindi Stoll for over six-years of service with REMSA.</p> <p>Recruitment for the Trauma Coordinator / Nurse V position is open, contact Brian MacGavin if interested.</p> <p>Misty Plumley started with REMSA on May 1, 2014. She is assigned to education and training.</p> <p>The EMS office will be moving to Riverwalk Parkway location by the end of the year. The credentialing staff will stay the Health Administration Building. REMSA plans to host the first 2015 PMAC meeting at our new location.</p>	Information only.
<p>7.2 EMS Recognitions – Trevor Douville and Dr. van Stralen</p>	<p>Dr. van Stralen and Trevor Douville presented recognitions to:</p> <p>Heather Prieto, PSCO II Kory HcGranahan FAE/PM Sara Thomas FF Thomas Fraiser FF Joshua Villareal FF/PM David Fasenmyer FF/PM Kenneth Coulston FAE Saul Mijares FFII Michael Johnson FFII Jerid Eschardies FF/PM</p>	EMS Recognitions, Item 7.2, was moved to the beginning of the agenda following introductions.

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	Michael Hoover FF/PM Timothy Royer Shannon Oslie, PSCO Dr. van Stralen thanked the families and recipients.	
7.3 Proposed 2015 PMAC Meeting Dates	Brian MacGavin presented the proposed 2015 PMAC meeting dates.	The proposed 2015 meeting dates were approved by PMAC.
8. OTHER REPORTS / GOOD OF THE ORDER / ANNOUNCEMENTS	Dr. Vaezazizi thanked Cindi Stoll for her 6 ½ years of service with REMSA. Phil Rawlings announced the hiring Dr. Dan Davis Riverside County Fire Department's Medical Consultant. His start date will be on July 1, 2014	Information only.
9. NEXT MEETING / ADJOURNMENT		September 22, 2014

DRAFT

FOR CONSIDERATION BY PMAC

DATE: September 8, 2014
TO: PMAC
FROM: Laura Wallin, EMS Specialist
SUBJECT: CQI TAG

REMSA sponsored a Root Cause Analysis workshop on June 3, 2014. The workshop was well received by the participants and received high marks on the evaluations. This workshop set the standard for how a Root Cause Analysis should be conducted by Riverside County's CQI TAG program.

Murrieta Fire Department, Corona Fire Department, and AMR Desert Cities are beta testing five indicators to ensure they are written so that anyone using these indicators will collect data the same way. The beta testing will take place from September 1 – September 22, 2014. REMSA will incorporate suggested changes to these indicators for finalization on October 1, 2014. All providers and Base Hospitals in Riverside County will be required to collect data using the final decided indicators to be submitted to REMSA by January 31, 2014. The purpose of this project is to ensure that all providers and Base Hospitals have processes in place to collect and submit data and ensure that REMSA will be able to aggregate and report this data. Following this data collection project, REMSA will develop indicators that will inform us how well our EMS system is doing.

The CQI TAG will be working on integrating goals from the EMS System Strategic Plan into the CQI Plan. Additionally, the EMS System Strategic Plan identifies the CQI TAG to evaluate and modify REMSA's CQI plan. The current CQI plan is posted on www.remsa.us in the "Documents" menu bar.

Interested personnel are welcome to participate in the CQI TAG. All participants on the CQI TAG are encouraged to register on www.remsa.us so that discussions can take place in this forum. This will help make discussions more accessible to all and facilitate decisions based upon these discussions.

ACTION: PMAC should be prepared to receive the information and provide feedback to REMSA

FOR CONSIDERATION BY PMAC

DATE: September 8, 2014
TO: PMAC
FROM: Laura Wallin, EMS Specialist
SUBJECT: Stroke System

Hospitals have begun submitting data to REMSA and since a discharge diagnosis is used as a data element the actual collection of the data will occur 45 to 60 days following hospital admissions. Beginning April 1, 2015, REMSA will no longer be using the Stroke Ready Hospital designation. All Stroke Centers must have achieved certification from The Joint Commission, Healthcare Facilities Accreditation Program (HFAP), or Det Norske Veritas (DNV) as a Primary Stroke Center or a Comprehensive Stroke Center by that time.

All Stroke Centers agreed to provide feedback to prehospital personnel utilizing a form developed by Sabrina Yamashiro of Riverside Community Hospital.

Participants are strongly encouraged to register at www.remsa.us, to participate in discussions regarding the Stroke System. Participation in these discussions will help make discussions more accessible to all and facilitate decisions to move the Stroke System forward.

ACTION: PMAC should be prepared to receive the information and provide feedback to REMSA

DATE: September 8, 2014
TO: PMAC
FROM: Laura Wallin, EMS Specialist
SUBJECT: STEMI System

The STEMI System meeting was on August 19, 2014. Hospitals agreed that they should work collaboratively for the good of the patient if a STEMI Receiving Center is unable to accept a STEMI patient rather than introduce STEMI Diversion.

Beginning January 1, 2015, a new category will be tracked by REMSA: STEMI patients who either arrive in full arrest or who suffered a full arrest prior to arrival at the hospital. This will allow us to track the number of these patients who survive and are discharged from the hospital.

Both LLUMC-Murrieta and Temecula Valley Hospital are working toward accreditation as a Chest Pain Center with PCI from the Society of Chest Pain Centers (now known as the Society of Cardiovascular Patient Care). This accreditation will be mandatory for all STEMI Receiving Centers in Riverside County beginning April 1, 2015.

There are some providers in Riverside County who believe that with an ACS patient, they have a choice between sublingual NTG and NTG paste. To clarify, these patients should be receiving both types of NTG. If their blood pressure drops below 90 systolic, the NTG paste can be wiped off and fluids administered as per policy.

All STEMI Receiving Centers agreed to provide feedback to the crews utilizing the form developed by Sabrina Yamashiro of Riverside Community Hospital. Feedback so far is that the providers are utilizing this feedback to inform educational programs for their personnel.

All participants should register at www.remsa.us. There is a forum for STEMI, where discussions regarding the STEMI system should take place. This will open up meeting time for such things as finalizing discussions and making decisions to move the STEMI system forward.

The following is a link to the September 4, 2014 STEMI System Report: http://remsa.us/documents/programs/stemi/1409STEMI_System_Report.pdf

ACTION: PMAC should be prepared to receive the information and provide feedback to REMSA

FOR CONSIDERATION BY PMAC

DATE: September 8, 2014

TO: PMAC

FROM: Patrice Shepherd, Admin. Services Asst. for REMSA

SUBJECT: Ambulance Patient Offload Delay Report

The current Ambulance Patient Offload Delay Report contains data through the end of August 2014. Data by month for the last three months is available for each hospital on the last page of the report. The following is a link to the September 4, 2014 Ambulance Patient Offload Delay

Report: http://www.remsa.us/download/reports/20140904_AmbulancePtOffloadDelayReport.pdf

- Ambulance Patient Offload data indicates that the contracted 9-1-1 provider's ALS transports to Riverside County's hospitals totaled 78,248 through the end of August 2014. This is a decrease from 83,752 in 2013 (same January to August period, for a change of -6.6%). Ambulance patient offload delays increased from 15,822 in this same period of 2013 to 19,553 in 2014 (+ 23.6%).
- Delays and hours have trended upward in the past three months since a drop in June. In August, the system experienced 2,409 offload delays and over 1,128 offload delay hours during the month. These hours are over and above the first 30 minutes of each incoming ALS ambulance patient delivered to an Emergency Department.

FOR CONSIDERATION BY PMAC

DATE: September 8, 2014
TO: PMAC
FROM: Scott Moffatt, EMS Specialist
SUBJECT: Data System

Policy 7701 currently reads: “transition to the REMSA contracted ePCR system by January 1, 2015”. This will not be possible as the REMSA contracted ePCR vendor’s system, Sansio Mobile Touch, is not ready for implementation and there is no well-defined date for its readiness. Here are relevant facts:

- Physio-Control has acquired Sansio: <http://www.sansio.com/2014/01/31/sansio-joins-forces-physio-control/>
- We have not been able to begin implementation of Mobile Touch as planned
- This is not an uncommon issue and NEMSIS has extended the transition from NEMSIS 2 to 3 through 2015: <http://www.nemsis.org/v3/documents/v2-v3-HL7Timeline.pdf>
- Our data system contract ends on June 30, 2015: http://www.rivcocob.org/agenda/2010/05_18_10/03.13.pdf#View=FitV

ACTION: Continue to participate in the Data Group and anticipate a system wide transition to the REMSA contracted ePCR vendor’s system during the latter half of 2015.

FOR CONSIDERATION BY PMAC

DATE: September 8, 2014
TO: PMAC
FROM: Scott Moffatt, EMS Specialist
SUBJECT: 2015 Policy Manual

The policy review process is behind schedule this year due to the many variables associated with the EMS System Evaluation, staff changes at REMSA, delays by the County contracted ePCR vendor, etc. Because of this there will be a limited number of revisions made this year.

My suggestion is that we immediately begin accepting written comments through October 22, 2014 for changed policies in the proposed 2015 Policy Manual. During this timeframe we can complete those policies that have yet to be completed. Once they have been completed, we can announce a 15-day written comment period and present the Revised-Proposed Policy Manual to PMAC on November 17, 2014; as scheduled.

Given that we will not be making major revisions to policy this year I believe this method will prove to be suitable.

The Proposed 2015 Policy Manual is available at: www.remsa.us/policy/2015/

ACTION: Review and comment on the Proposed 2015 Policy Manual.

FOR CONSIDERATION BY PMAC

DATE: September 8, 2014

TO: PMAC

FROM: Brian MacGavin, REMSA Assistant Director

SUBJECT: EMS System Strategic Planning & REMSA's Advisory Committee Structure

The final draft of the EMS System Strategic Plan was presented to stakeholders at the last Strategic planning meeting held at the Ben Clark Training Center Auditorium on August 27, 2014. REMSA will be integrating elements of the Strategic Plan into existing EMS structures. This will include changes in REMSA's advisory committees.

The final EMS System Strategic Plan will be presented to the Board of Supervisors by October or November 2014.

Reports and minutes can be accessed on our website at: www.rivcoems.org.

ACTION: PMAC should be prepared to receive the information and provide feedback to REMSA.

FOR CONSIDERATION BY PMAC

DATE: September 8, 2014

TO: PMAC

FROM: Kim Saruwatari, PHEPR Branch Chief

SUBJECT: Medical Health Operational Area Coordination (MHOAC) Program

The Medical Health Operational Area Coordination (MHOAC) Program in Riverside County is jointly administered and made operational by the Public Health Emergency Preparedness and Response (PHEPR) Branch and REMSA. The presentation will present the roles and responsibilities of the MHOAC Program in both preparedness and response, as well as provide information about activating the MHOAC Duty Officer from the field.

An executive summary for this program can be viewed at: [MHOAC Plan Executive Summary](#).

ACTION: PMAC should be prepared to receive information on the MHOAC Program and provide feedback.

FOR CONSIDERATION BY PMAC

DATE: September 8, 2014

TO: PMAC

FROM: Misty Plumley, EMS Specialist

SUBJECT: Education Initiative in conjunction with Adult Protective Services (APS)

In a collaborative effort to provide awareness to EMS providers, hospital staff, and other EMS system participants, Adult Protective Services would like to provide brief information about their investigative and oversight processes related to allegations of abuse received patient care staff.

Adult Protective Services handles many social services for our community, including Elder and Dependent Adult Abuse investigations. A recent case highlighted a communication lapse between patient care and investigative services. To further ongoing QI/QA, education initiatives and process modifications are being adopted. A component of this education initiative is information-sharing in the PMAC forum.

APS Reporting Forms and Contact information can be accessed at:

<http://dpss.co.riverside.ca.us/adult-services-division/adult-protective-services>
<http://dpss.co.riverside.ca.us/files/pdf/asd-soc341-eng.pdf>

Additional Education Program Information can be found here:

<http://dpss.co.riverside.ca.us/files/pdf/asd-care-3711-eng.pdf>

ACTION: Informational only, no action required.