

# PREHOSPITAL MEDICAL ADVISORY COMMITTEE MEETING AGENDA (PMAC)

#### PMAC MEMBERS PER POLICY 8202:

<u>Air Transport Provider Representative</u> 11-Kent McCurdy

<u>American Medical Response</u> 5-Douglas Key

BLS Ambulance Service Representative 12-Kelly Martinez

Blythe Ambulance Service 5-John Valentine

<u>Cathedral City Fire Department</u> 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 Providers 9-Phil Rawlings (Vice Chair)

<u>Desert Regional Medical Center</u> 1-Joel Stillings, D.O 4-Jessica Voigt

<u>Eisenhower Medical Center</u> 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

<u>Idyllwild Fire Protection District</u> 5-Patrick Reitz

<u>Inland Valley Regional Medical Center</u> 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, November 17, 2014 9:00 AM to 11:30 PM

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 (5 Minutes)

Reza Vaezazizi, MD

# 3. ROUNDTABLE INTRODUCTIONS (5 Minutes)

Reza Vaezazizi, MD

# 4. APPROVAL OF MINUTES (5 Minutes)

September 22, 2014 (Attachment A)

# **5. REPORTS & DISCUSSION (90 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** 2015 Policy Manual—Scott Moffatt (Attachment F)
- **6.6** Trauma System—Maureen Bowlin / Shanna Kissel (Attachment G)
- **6.7** EMCC—Dr. Patterson / Jim Price
- **6.8** EMS System Strategic Plan & Advisory Committee Structure —Brian MacGavin (Attachment H)

## **6.** NEW BUSINESS (15 Minutes)

7.1 PMAC Elections—Brian MacGavin

EMT-at-Large

Paramedic-at-Large

Vice-chairperson

Chairperson

#### 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 Gorgonio 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)

January 26, 2015—4210 Riverwalk Parkway First Floor Conference Room Riverside, CA 92505 (Tentative)

Please come prepared to discuss the agenda items. If you have any questions, call Brian MacGavin at (951) 358-5029. PMAC Agendas with attachments are available at our website: www.rivcoems.org.

	TOPIC	DISCUSSION	ACTION
1.	CALL TO ORDER		Co-Chair Phil Rawlings
			called the meeting to
			order at 9:00 AM.
2.	PLEDGE OF ALLEGIANCE		Co-Chair Phil Rawlings
			led the Pledge of
_	201112742150		Allegiance.
3.	ROUNDTABLES		Self-introductions
_	INTRODUCTIONS  EMS RECOGNITIONS –	During Doubon and During Studion processed	were performed. Information
4.	Bruce Barton &	Bruce Barton and Dr. van Stralen presented Certificates of Excellence to:	Information
	Dr. van Stralen	Kolleen Noble, Paramedic AMR	
	Dr. van Straich	Sabrina Yamashiro, Prehospital Liaison Nurse	
		Kristen Hoffman, RN	
		Julie Sprengel, RN	
		Tina Guglielmoti RN	
		Brandon Chastain, Paramedic	
		Michelle Griggs RN	
		Captain Paul Holaday, Paramedic	
5.	APPROVAL OF MINUTES		PMAC meeting
			minutes from June 22,
			2014 were approved
			without changes.
6.	REPORTS & DISCUSSION		
6.1	CQI-TAG –	Murrieta Fire Department, Corona Fire	Information only.
	Laura Wallin	Department, and AMR Desert Cities are beta	
		testing five indicators to ensure using them will	
		facilitate data to be collected the same way.  REMSA will incorporate any changes to these	
		indicators for finalization and implementation on	
		October 1, 2014. All providers and base hospitals	
		in Riverside County will be required to collect data	
		using the final decided indicators. The next CQI-	
		TAG meeting will be on October 16, 2014, from	
		10:00 AM – 12:00 PM, at the Sherman Building.	
6.2	Stroke System –	All Stroke Centers must have certification from	Information only.
	Laura Wallin	The Joint Commission, Healthcare Facilities	
		Accreditation Program, or Det Norske Veritas as a	
		Primary Stroke Center or a Comprehensive Stroke	
		Center by April 1, 2015.	
6.3.	STEMI System –	The last STEMI System meeting was on August 19,	Information only.
	Laura Wallin	2014. STEMI receiving centers agreed to work	
		collaboratively rather than having a STEMI	
		diversion program. Beginning January 1, 2015,	
		REMSA will track STEMI patients going into cardiac	
		arrest prior to arrival at a hospital. The next STEMI	
		meeting is on October from 10:00 AM – 12:00 PM and the next Stroke meeting is from 1:00 PM –	
		and the next stroke meeting is from 1:00 Pivi -	

# PMAC Meeting Minutes September 22, 2014

	3:00 DM at the Day Clark Training Contar	
	3:00 PM at the Ben Clark Training Center.	
6.4 Ambulance Patient	The latest Ambulance Patient Offload Delay report	Information only.
Offload Delay Report –	is from January to the end of August 2014. We	
Patrice Shepherd	have compared the number of 9-1-1 hospital	
	transports for the same 2013 and 2014	
	timeframes. For 2014, the number of transports	
	has decreased by 6.6 percent yet offload delays	
	were up by 23.6 percent. This would indicate that	
	offload delays are not related to transport	
	volumes. The regional group, with representatives	
	from HASAC, REMSA and ICEMA, is continuing to	
	work on best practices to address this problem.	
6 E Data Sustam		Information only
6.5 Data System –	Eight providers are now using Sansio, NEMSIS	Information only.
Scott Moffat	version 2.2.1. The timeline for NEMSIS migration	
	from version 2 to version 3 has been delayed to	
	2016 due to NEMSIS 3 not being available for full	
	implementation. REMSA's contract with Sansio	
	ends on July 30, 2015 and Mobile Touch is not	
	ready for implementation. A Request for Proposal	
	will be sent out next month.	
	There was further discussion on having the	
	Countywide ePCR data system be compatible with	
	other data collection systems and discussions on	
	the Health Information Exchange (HIE) program.	
6.6 2015 Policy Manual –	There are not many changes to the 2015 Policy	Information only.
Scott Moffat	Manual and the draft protocols and performance	
Scott Monat	standards are not posted yet. Scott reviewed the	
	main changes and stated they need to be finalized	
	by December 1, 2014 in order to allow for the	
	development of a training program and	
	subsequent training. There will be a 15-day	
	written comment period and REMSA will present	
	the proposed Policy Manual to PMAC on	
	November 17, 2014.	
	There was discussion on the collection of	
	systemwide outcome data and changing the	
	approach in the coordination of EMS personnel for	
	resuscitating patients.	
	There was discussion on addressing EMS patients	
	in sepsis. Bruce Barton suggested doing a	
	systemwide root cause analysis. Misty Plumley	
	stated a standardized education curriculum	
	addressing sepsis will be developed to accompany	
	training for the protocol updates.	
	training for the protocol apaates.	

# PMAC Meeting Minutes September 22, 2014

6.7 EMS System Strategic Plan & Advisory Committee Structure – Bruce	The final draft of the EMS System Strategic Plan was presented to stakeholders at the last Strategic planning meeting on August 27, 2014 and is currently under executive review. It will be presented to the Board of Supervisors by October or November 2014.  There are 12 goals and many objectives. EMS system participants will recognize the integration of components of the Strategic Plan into workgroup plans. PMAC will remain the medical focus group and a system group similar to PMAC will be created to address goals two and three. EMCC will be the evaluating body.	Information only.
7. NEW BUSINESS –	The Ade discharged to the Country of	I. C I
7.1 Medical Health Operational Area	The Medical Health Operational Area Coordination (MHOAC) program in Riverside County is	Information only.
Coordination Program Plan	coordinated with the Public Health Emergency	
-Kim Saruwatari	Preparedness and Response (PHEPR) Branch and	
	REMSA. A presentation was given on the MHOAC	
	Program.	
7.2 ADULT PROTECTIVES	Recent cases indicate that there has been a	Information only.
SERVICES – Misty Plumley	communications lapse between medical providers	
	and investigating services. A presentation was	
	given on proper reporting of elder abuse to Adult	
7 2 0; ff; ol	Services.	1.6
7. 3 Staffing Changes –	Shanna Kissel was introduced as REMSA's Trauma	Information only.
Bruce Barton	Coordinator. Shanna came from RCRMC's trauma	
	program. The Official starting date for Shanna will be on October 2, 2014.	
8. OTHER REPORTS/ GOOD	Charlie Hendra presented to PMAC the certificate	Information only.
OF THE ORDER /	of verification from the American College of	iniormation only.
ANNOUNCEMENTS	Surgeon's recognizing RCRMC as a Level II Trauma	
	Center.	
	There will be an ATLS training on September 27 &	
	28, at RCRMC.	
	RCRMC's 8 <sup>th</sup> Annual Trauma Conference will be	
	held on October 17, 2014.	
	At the next EMCC meeting is on October 1, 2014	
	there will be a presentation on PulsePoint.	
9. NEXT MEETING /	,	November 17, 2014
ADJOURNMENT		·

Date: November 4, 2014

TO: PMAC

FROM: Laura Wallin, EMS Specialist

SUBJECT: CQI TAG

The CQI TAG has been reorganized with a new name – the CQI Leadership Team (CQILT). CQILT meetings are open to all EMS and hospital personnel. The primary functions of CQILT will include: performing root cause analyses, forming quality task force teams for special assignments, rewriting the CQI Plan, developing a lessons learned center, and monitoring and trending indicators for publishing on REMSA's website.

Rather than meeting quarterly for two hours, the CQILT will meet every other month for four hours. Adhoc meetings will be held as well.

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

**DATE:** November 4, 2014

TO: PMAC

FROM: Laura Wallin, EMS Specialist

**SUBJECT:** Stroke System

The Stoke System Committee last met on October 23, 2014 and Stroke Centers have begun submitting data to REMSA. REMSA will post information on <a href="https://www.remsa.us">www.remsa.us</a> for discussions. Personnel will need to register online in order to have access, post and comment on the forum.

REMSA will be monitoring the following four separate Stroke indicators for 2015:

- Glucose testing for suspected stroke patients
- Scene times for suspected stroke patients
- Transport to stroke Centers for suspected Stroke patients
- Performance of a Cincinnati Stroke Scale on suspected Stroke patients

Stroke Centers are required to enroll and participate in the California Stroke Registry. Once this program is established participating hospitals will be able to compare themselves on a national level.

The Stroke System Committee will switch from holding quarterly meetings to having meetings on an adhoc basis. There will be a section of the CQI Leadership Team (CQILT) agenda devoted to reporting Stroke data and discussing Stroke issues. It is at these meetings that a determination will be made if the Stroke System Committee needs do meet.

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

Date: November 4, 2014

TO: PMAC

FROM: Laura Wallin, EMS Specialist

SUBJECT: STEMI System

The STEMI System Committee met on October 23, 2014. REMSA will post information on <a href="https://www.remsa.us">www.remsa.us</a> for discussions. Personnel will need to register online in order to have access, post and comment on the forum. STEMI Receiving Center personnel are strongly encouraged to utilize the forum to provide feedback to EMS crews on STEMI patients.

The STEMI System Committee will switch from holding quarterly meetings to having meetings on an adhoc basis. There will be a section of the CQI Leadership Team (CQILT) agenda devoted to reporting STEMI data and discussing STEMI issues. It is at these meetings that a determination will be made if the STEMI System Committee needs do meet.

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

DATE: November4, 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 September 2014. Data by month for the last two months is available for each hospital on the last page of the report. As the report continues to be refined and improved, some graphs and data analysis methods may change.

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



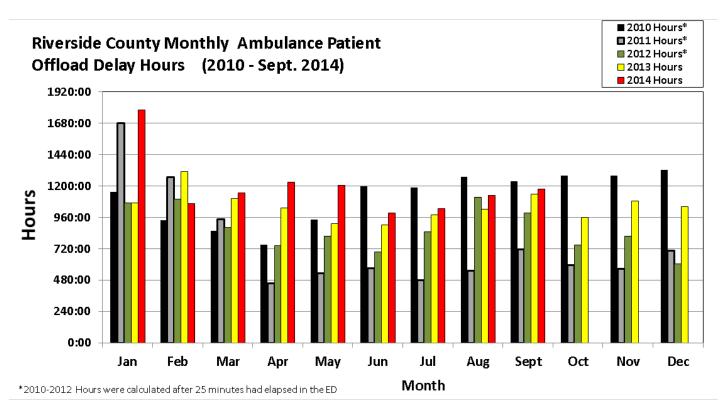
# **AMBULANCE PATIENT OFFLOAD DELAYS**

October 30, 2014

# RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD DELAYS

#### HISTORICAL COMPARISON

Data provided illustrates total ambulance patient offload delay time (hh:mm) by month for 2010-2014 by hospitals within Riverside County. To qualify for this chart, the duration of offload delay must be greater than 30 minutes (2013 and forward) and only the time period after the first 30 minutes is summed. 2010-2012 Offload delay data used a 25-minute standard.



# Total Annual Hours\* and Ambulance Patient Offload Delays by hospital, 2010 to 2013

	2010		2011		2012		2013	
		Offload	Total	Offload	Total	Offload	Total	Offload
Hospital	Total Hours*	Delays	Hours*	Delays	Hours*	Delays	Hours*	Delays
RCH	4492:02:14	8936	1571:42:46	3352	2198:41:11	3953	2712:32:25	5978
Kaiser	228:13:15	779	173:06:25	559	151:16:22	472	196:02:59	496
Parkview	1408:19:41	2616	1371:19:18	2435	1881:03:47	2833	1171:41:25	2037
RCRMC	459:22:28	1390	545:44:19	1535	892:20:22	2276	1107:06:11	2375
Corona	1649:46:36	2634	1539:56:42	2550	1694:56:09	2803	1717:47:56	2522
Moreno Valley	258:15:33	924	285:04:10	824	268:19:32	809	420:59:39	888
Menifee	621:54:58	1542	568:04:22	1210	322:28:21	791	725:38:26	1158
LLUMC- Murrieta	NA	NA	61:57:57	179	265:40:04	675	888:15:15	1411
Inland Valley	1772:47:13	3763	879:15:32	1671	949:05:59	2134	643:33:09	1307
Rancho Springs	1253:45:23	2908	577:15:19	1209	136:57:10	417	137:27:11	326
Temecula Valley					-		10:07:03	28
Hemet	939:40:28	2912	1060:21:22	2980	1081:16:55	2720	2535:17:35	4151
San Gorgonio	145:19:45	447	215:17:12	568	222:07:47	595	127:45:02	298
Eisenhower	23:06:49	114	33:56:41	171	64:56:15	320	54:56:39	241
Desert	102:38:56	412	122:26:14	562	233:06:47	788	68:47:04	347
JFK	63:07:19	310	65:48:08	296	81:16:43	337	58:37:55	252
Totals	13,418:20:38	29,687	9,071:16:27	20,101	10,443:33:24	21,923	12,576:35:54	23,815

<sup>\*</sup>Total Hours do not include the first 25 minutes of each offload delay (2010-2012), or the first 30 minutes (2013-)

# AMBULANCE PATIENT OFFLOAD DELAYS AND OVERALL COMPLIANCE

This data includes 2013 and 2014 Ambulance Patient Offload Delays, hours of delay, total time the ambulances and patients are delayed, ALS transports received by each hospital, compliance, and average delays per occurrence. "Delay Hours" include any time after the initial 30 minutes in the ED have passed; "Total Delay Time" sums both the delay and the initial 30 minutes. "Compliance" represents the percentage of ALS ambulance transports that were not held on Offload Delay.

## Ambulance Patient Offload Delay Data, 2014 (January through September)

Hospital	Offload Delay Hours	Total Delay Time*	Total ALS Transports	Offload Delay Occurrences	Compliance%**	Avg Delay/ Occurrence*
RCH	2278:11:49	5086:11:49	13022	5616	56.9%	0:54:20
Kaiser	144:53:25	411:53:25	3980	534	86.6%	0:46:17
Parkview	1299:01:06	2384:31:06	4600	2171	52.8%	1:05:54
RCRMC	761:27:30	1714:27:30	9305	1906	79.5%	0:53:58
Corona	1366:58:36	2454:28:36	5190	2175	58.1%	1:07:43
Moreno Valley	414:12:20	884:12:20	2558	940	63.3%	0:56:26
Menifee	555:57:52	1079:57:52	3264	1048	67.9%	1:01:50
LLUMC –Murrieta	701:42:22	1341:12:22	4026	1279	68.2%	1:02:55
Inland Valley	316:15:56	716:45:56	6774	801	88.2%	0:53:41
Rancho Springs	62:39:13	160:39:13	3177	196	93.8%	0:49:11
Temecula Valley	89:29:05	228:59:05	2867	279	90.3%	0:49:15
Hemet	2558:48:18	4680:48:18	11345	4244	62.6%	1:06:11
San Gorgonio	105:43:00	275:13:00	4791	339	92.9%	0:48:43
Eisenhower	21:42:36	85:12:36	2828	127	95.5%	0:40:15
Desert	27:16:40	103:16:40	7720	152	98.0%	0:40:46
JFK	59:33:20	191:33:20	2708	264	90.3%	0:43:32
Totals	10,763:53:08	21,799:23:08	88,155	22,071	75.0%	0:59:16

<sup>\*</sup> Includes the first 30 minutes of each Offload Delay.

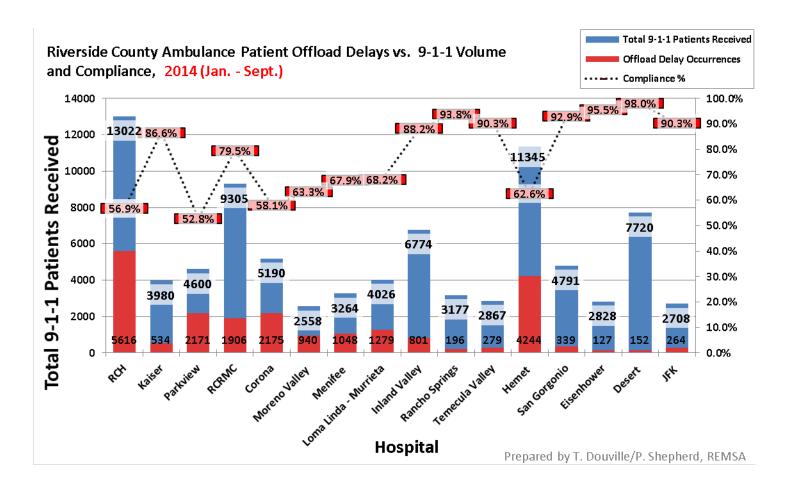
# **Ambulance Patient Offload Delay Data, 2013**

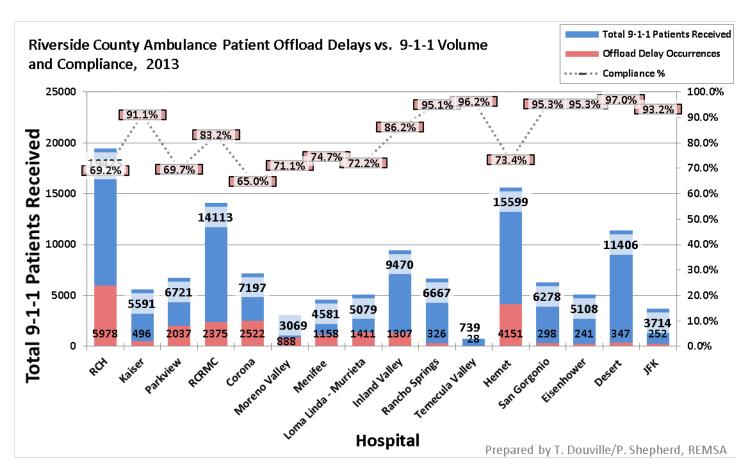
Hospital	Offload Delay Hours	Total Delay Time*	Total ALS Transports	Offload Delay Occurrences	Compliance%**	Avg Delay/ Occurrence*
RCH	2712:32:25	5701:32:25	19425	5978	69.2%	0:57:14
Kaiser	196:02:59	444:02:59	5591	496	91.1%	0:53:43
Parkview	1171:41:25	2190:11:25	6721	2037	69.7%	1:04:31
RCRMC	1107:06:11	2294:36:11	14113	2375	83.2%	0:57:58
Corona	1717:47:56	2978:47:56	7197	2522	65.0%	1:10:52
Moreno Valley	420:59:39	864:59:39	3069	888	71.1%	0:58:27
Menifee	725:38:26	1304:38:26	4581	1158	74.7%	1:07:36
LLUMC –Murrieta	888:15:15	1593:45:15	5079	1411	72.2%	1:07:46
Inland Valley	643:33:09	1297:03:09	9470	1307	86.2%	0:59:33
Rancho Springs	137:27:11	300:27:11	6667	326	95.1%	0:55:18
Temecula Valley	10:07:03	24:07:03	739	28	96.2%	0:51:41
Hemet	2535:17:35	4610:47:35	15599	4151	73.4%	1:06:39
San Gorgonio	127:45:02	276:45:02	6278	298	95.3%	0:55:43
Eisenhower	54:56:39	175:26:39	5108	241	95.3%	0:43:41
Desert	68:47:04	242:17:04	11406	347	97.0%	0:41:54
JFK	58:37:55	184:37:55	3714	252	93.2%	0:43:58
Totals	12,576:35:54	24,484:05:54	124,757	23,815	80.9%	1:01:41

<sup>\*</sup> Includes the first 30 minutes of each Offload Delay.

<sup>\*\*</sup> Compliance % represents the percentage of ALS ambulance transports not on Offload Delay (data includes only 9-1-1 contractual provider).

<sup>\*\*</sup> Compliance % represents the percentage of ALS Ambulance transports not on Offload Delay (data includes only 9-1-1 contractual provider).





Ambulance Patient Offload Delays by Month: Delay Time and Occurrences by hospital\* -

Aug. 2014 - Sept. 2014

Hospital	Aug. '14 Delay Hours	ALS 9-1-1 Transports	Aug. '14 Offload Delays	Sept. '14 Delay Hours	ALS 9-1-1 Transports	Sept. '14 Offload Delays
RCH	250:54:38	1491	664	274:03:17	1493	685
Kaiser	9:42:24	427	42	16:47:04	452	65
Parkview	144:35:32	552	246	168:20:40	474	246
RCRMC	64:13:29	1087	192	98:29:11	1122	253
Corona	106:20:51	573	203	110:24:05	575	199
Moreno Valley	44:13:33	313	103	47:20:23	297	109
Menifee	73:04:30	363	136	54:53:19	336	108
LLUMC –Murrieta	98:24:47	482	161	56:23:52	430	113
Inland Valley	31:50:03	732	84	30:59:29	812	91
Rancho Springs	7:28:36	346	23	3:37:59	323	18
Temecula Valley	14:17:32	338	45	15:22:04	364	53
Hemet	273:40:21	1335	450	275:24:42	1256	477
San Gorgonio	4:10:06	538	17	13:49:46	568	51
Eisenhower	0:56:42	286	9	2:12:59	284	9
Desert	2:32:14	840	15	2:05:26	828	11
JFK	2:26:29	283	19	9:07:35	293	30
Totals	1,128:51:47	9,986	2,409	1,179:21:51	9,907	2,518

<sup>\*</sup>Monthly Delay Time does not include the first 30 minutes of each Offload Delay occurrence.

Data for this report was provided by American Medical Response (AMR) to the Riverside County EMS Agency for review and analysis. The data represents only AMR 9-1-1 ALS resources and does not include any other ambulance companies.

DATE: November 4, 2014

TO: PMAC

FROM: Scott Moffatt, EMS Specialist

SUBJECT: 2015 Policy Manual

The 2015 Policy Manual written comment period will be closed on November 11. Comments are being reviewed and REMSA's responses will be posted online. Draft policies are marked "draft" and do not have authorizing signatures. The 2015 Policy Manual will be finalized by December 31, 2014 and effective April 1, 2015.

The 2015 Policy Manual is available at: <a href="https://www.remsa.us/policy/2015/">www.remsa.us/policy/2015/</a>

ACTION: Review and prepare for implementation of the 2015 Policy Manual.

DATE: November 4, 2014

TO: PMAC

FROM: Maureen Bowlin, Trauma Program Managers

SUBJECT: Trauma System Report

REMSA's current Ambulance Diversion Policy (6103) allows trauma centers to divert ambulances with Critical Trauma Patents (CTP) when all trauma surgeons / trauma teams are engaged with CTP patients or CTP's with isolated head injuries when the CT scanner is inoperable. Additional the next closest trauma center is to be less than 45 minutes from the initial scene by ground or air. The Trauma Audit Committee (TAC) discussed trauma center diversion and there was no recommendation to make any changes to a trauma center's ability to go on diversion.

At their October 27, 2014 meeting, TAC made a recommendation that REMSA make a change to the Continuation of Trauma Care Policy (5302) by changing the language from Critical Trauma Patient to meeting Trauma Triage Criteria.

ACTION: PMAC should be prepared to receive and discuss the aforementioned information. EMS personnel should continue to communicate with trauma base hospitals to determine the best transportation destination for critical trauma patients when the closest trauma center is on trauma diversion.

DATE: November 4, 2014

TO: PMAC

FROM: Brian MacGavin, REMSA Assistant Director

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

The executive review of the of the EMS System Strategic Plan is complete and the final draft was posted on REMSA's website on October, 22. 2014. REMSA is continuing to integrating elements of the Strategic Plan into existing EMS structures. This will include changes in REMSA's advisory committees. Reports and minutes can be accessed on our website at: <a href="https://www.rivcoems.org">www.rivcoems.org</a>.

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