



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
4-Daniel Sitar

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

The Next Meeting of PMAC is on:

Monday, January 26, 2015

9:00 AM to 11:30 AM

The Towers of Riverwalk

4210 Riverwalk Parkway, Riverside

First Floor Conference Rooms (Orange, Lemon and Lime)

- 1. CALL TO ORDER**
Daved van Stralen, MD
- 2. PLEDGE OF ALLEGIANCE (5 Minutes)**
Daved van Stralen, MD
- 3. ROUNDTABLE INTRODUCTIONS (5 Minutes)**
Daved van Stralen, MD
- 4. EMS RECOGNITIONS**
Daved van Stralen, MD & Laura Wallin
- 5. APPROVAL OF MINUTES (5 Minutes)**
November 17, 2014 (Attachment A)
- 6. ROLE ASSIGNMENTS, PURPOSE & GROUND RULES (5 Minutes)**
 - 6.1 Sergeant-at-Arms—Daved van Stralen, MD**
 - 1) The Sargent-at-Arms ensures that the ground rules are followed
 - 2) The Sargent-at-Arms will display a yellow colored sign visible to the speaker indicating a two minute warning
 - 3) The Sargent-at-Arms will display a red colored sign visible to the speaker indicating that he / she needs to stop talking
 - 6.2 Purpose of Discussions: For EMS participants to articulate personal knowledge and experience while developing discussion skills**
 - 6.3 Ground Rules—Daved van Stralen, MD**
 - 1) Adhere to the time limits
 - 2) Do not criticize others or offer advice
 - 3) Explanations are accepted, not excuses
 - 4) Ask or explain with “what, how or when” but not “why”
 - 5) Speak from personal knowledge and experience; use anecdotes
 - 6) References to books, articles, etcetera must be available for review
- 7. MEDICAL DIRECTOR’S VISION & TOPICS FOR DISCUSSION 20 Minutes)**
 - 7.1 Medical Director’s Vision (5 minutes):** The unprotected airway
 - 7.2 Topic:** From your personal experience, what do you consider an EMS success? (Maximum of 5 minutes per person)

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- Zeke Foster, MD
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 (Chair)
3-Bruce Barton, REMSA Director
4-Brian MacGavin, REMSA Assistant Director
5-Vacant, 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. REPORTS & DISCUSSION (90 Minutes)

This is the time/place in which brief reports 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 should decide on an action at the end of each agenda item unless for information only.

8.1 EMS Strategic Plan—Brian MacGavin (Attachment B)

8.2 CQILT—Laura Wallin (Attachment C)

8.3 Ambulance Patient Offload Delay Report—Patrice Shepherd (Attach D)

8.4 2015 Policy Manual—Scott Moffatt (Attachment E)

8.5 Trauma System—Shane McMurphy / Shanna Kissel (Attachment F)

8.6 EMCC—Dr. Patterson / Jim Price

9. UNFINISHED BUSINESS (5 Minutes)

EMT-at-Large Elections—Brian MacGavin

10. RESEARCH PAPERS (15 Minutes)

This is the time and place for presentation and discussion of research papers. Papers must be submitted to REMSA for review one month in advance of the next PMAC meeting. Questions to be addressed in submissions are: 1) Did the authors prove what they said they would prove? 2) How can we use this information? 3) How does it fit the context of our system / region?

11. ANNOUNCEMENTS (5 Minutes)

This is the time/place that 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

12. NEXT MEETING / ADJOURNMENT (1 Minute)

March 23, 2015—4210 Riverwalk Parkway First Floor Conference Rooms (Orange, Lemon and Lime)

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 Allegiance.
3. ROUNDTABLES INTRODUCTIONS		Self-introductions were performed.
4. APPROVAL OF MINUTES		PMAC meeting minutes from September 22, 2014 were approved without changes.
5. REPORTS & DISCUSSION		
5.1 CQI-TAG – Laura Wallin	<p>The CQI TAG’s name has been changed to CQI Leadership Team (CQILT). CQILT meetings will take place every other month and last for four hours. At these meetings CQILT members will be performing root-cause analyses, forming quality task force teams, developing the CQI Plan, developing a lessons learned center, and monitoring and trending indicators.</p> <p>There were discussions regarding refusal of medical care and a patient signing Against Medical Advice (AMA). It was suggested that this be a topic for CQILT to address.</p>	Information only.
5.2 Stroke System – Laura Wallin	<p>The Stroke System Committee met on October 23, 2014. Meetings will be held on an ad hoc basis. For 2015, REMSA will be monitoring the following indicators on suspected stroke patients:</p> <ul style="list-style-type: none"> • Glucose testing • Scene times • Transport to Stroke Centers • Performance of a Cincinnati Stroke Scale <p>There were discussions on determining stroke false positives and false negatives and the impact on transporting false positive patients to Stroke Receiving Centers.</p>	Information only.
5.3 STEMI System – Laura Wallin	<p>At the October 23, 2014 STEMI System Committee meeting there was discussion on how to raise prehospital awareness of STEMI patients. So far there have been seven documented missed STEMI for 2014.</p> <p>Some receiving centers may not be able to meet</p>	Information only.

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	<p>the accreditation criteria for maintaining their STEMI and or Stroke Receiving Center status. REMSA is working on contingency plans with these receiving centers.</p> <p>There will be an ad hoc STEMI System Committee meeting at Murrieta Fire Station 4 on December 4, from 1:00 PM – 3:00 PM.</p>	
5.4 Ambulance Patient Offload Delay Report – Patrice Shepherd	<p>The Ambulance Patient Offload Delay Report provides data for the first nine months of 2014. Overall, 75 percent of transports are offloads without bed delay occurrence.</p>	Information only.
5.5 2015 Policy Manual – Scott Moffat	<p>The 2015 Policy Manual 30-day comment period closed on November 11, 2014. The 2015 Policy Manual will be finalized on December 31, 2014 and go into effect April 1, 2015.</p>	Information only.
5.6 Trauma System – Maureen Bowlin / Shanna Kissel	<p>At the last Trauma Audit Committee (TAC) meeting, on October 29, 2014, we discussed trauma center diversion. There was no recommendation to make changes to a trauma center’s ability to go on diversion.</p> <p>TAC recommend REMSA make a change to the Continuation of Trauma Care Policy (5302); changing the language from Critical Trauma Patient to meeting a patient Trauma Triage Criteria. PMAC discussed that this could bring about some unintended consequences. However, the main issue is that sometimes critical trauma patients arrive at non-trauma centers and are not expeditiously transferred to a trauma center. Dr. Vaezazizi stated that ICEMA has had this language in their policy for the last two years without any issues. He recommends reviewing every continuation of care transfer.</p>	Information only.
5.7 EMCC – Dr. Patterson / Jim Price	<p>Physio-Control, Inc. gave a presentation on using PulsePoint. PulsePoint is a smart phone app that can be used to notify good samaritians of nearby AEDs and cardiac arrests.</p> <p>Phil Rawlings discussed EMCC’s work on a draft resolution requiring AED in new and renovated commercial buildings. He also discussed A.B. 2217 which authorizes public schools to solicit and receive non State funds to acquire and maintain AEDs. This bill also enhances the Good Samaritan Law.</p>	Information only.

<p>5.8 EMS System Strategic Plan & Advisory Committee Structure – Brian MacGavin</p>	<p>The EMS System Strategic Plan has been finalized and can be viewed at www.rivcoems.org.</p>	<p>Information only.</p>
<p>6. NEW BUSINESS</p>		
<p>6.1 PMAC Elections – Brian MacGavin EMT-at-Large Paramedic-at-Large Vice-chairperson Chairperson</p>	<p>Dr. Reza Vaezazizi declined nominations for the PMAC Chair position and was recognized for over ten years of service of being PMAC’s Chairperson. PMAC discussed having Dr. van Stralen being the chairperson. There were no objections voiced and there were no further nominations for the Chairperson position.</p> <p>No nominations were provided for EMT-at-Large.</p>	<p>Paul Duenas was re-elected as the Paramedic-at-Large for another two years.</p> <p>Phil Rawlings was re-elected as the Vice-chairperson for another two years.</p> <p>Dr. van Stralen was elected as the PMAC Chairperson.</p> <p>Nominations for EMT-at Large will be accepted at the next PMAC meeting.</p>
<p>7. OTHER REPORTS/ GOOD OF THE ORDER / ANNOUNCEMENTS</p>	<p>Phil Rawlings introduced Dan Davis, MD, Riverside County Fire Department’s recently hired Medical Advisor.</p> <p>Kent McCurdy thanked Dr. Vaezazizi for his 14-year commitment to PMAC.</p> <p>Jim Price and Phil Rawlings complimented Charlie Hendra and Kay Schulz for a well-planned trauma conference in September.</p> <p>Shanna Kissel has been coordinating Riverside County’s involvement in the Tranexamic Acid (TXA) trial study with ICEMA. There was further discussion on the TXA trial study.</p> <p>Maggie Robles, Principle EMT Instructor for Riverside County Office of Education advised that they are recruiting for a medical advisor position.</p> <p>Scott announced that the County is accepting Requests for Proposals (RFP) for a Countywide data ePCR vendor. Scott suggested that everyone take time to review NEMESIS 3.0 Data Dictionary.</p>	<p>Information only.</p>

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	<p>Brian MacGavin reminded everyone to please sign the sign-in sheet and ensure emails are correct.</p> <p>Dr. Dan Davis commented on Riverside County Fire Department's involvement in a CPR study with Dr. Ben Bobrow, Arizona's EMS Medical Director. The study is looking at minimally interrupted CPR outcomes. They are waiting for information on additional funding needed for equipment and training.</p> <p>Patrice Shepherd commented that REMSA has received three-quarters of a year data from Riverside County / CAL FIRE for the Cardiac Arrest Registry to Enhance Survival (CARES) Registry.</p> <p>REMSA has a new section on the rivcoems.org website call the Medical Director's corner. This is where Dr. van Stralen provides useful information. There will be weekly updates.</p> <p>Dan Bates announced on September 20, 2014, Public Health will be conducting the Statewide Functional Exercise involving an infectious disease. If you are interested in participating contact Stacy Kelly at Public Health Emergency Preparedness Response (PHEPR) Branch at 358-7100.</p> <p>Laura Wallin announce there will be HAVBED poll during the September 20, 2014 exercise.</p>	
<p>8. NEXT MEETING / ADJOURNEMENT</p>	<p>The next meeting will be on January 26, 2015 probably at the Riverwalk location. The location will be confirmed when the agenda is send out about two weeks prior to the meeting.</p>	<p>Information only.</p>

FOR CONSIDERATION BY PMAC

DATE: January 12, 2015

TO: PMAC

FROM: Brian MacGavin, REMSA Assistant Director

SUBJECT: EMS System Strategic Planning & the County's Emergency Ambulance Agreement with AMR

REMSA is continuing to integrate elements of the Strategic Plan into existing EMS structures and programs. This includes integrating The Abaris Group's recommendations into the emergency ambulance agreement with American Medical Response. This agreement will be approved by the County Board of Supervisors on January 13, 2015. Its performance period will be from July 1, 2015 through June 30, 2020 with the option of ten earned annual extensions. The Board of Supervisors submittal with its summary and the agreement can be accessed at the following link:

http://rivcocob.org/agenda/2015/01_13_15_files/03-08.pdf

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

FOR CONSIDERATION BY PMAC

DATE: January 12, 2015
TO: PMAC
FROM: Laura Wallin, EMS Specialist
SUBJECT: CQILT

The Continuous Quality Improvement Leadership Team (CQILT) will meet for the first time on January 15, 2015. The functions of this group include but are not limited to:

- Advising REMSA on issues involving CQI;
- Developing and measuring indicators to give a complete view of the EMS System in Riverside County;
- Reporting and receiving results of the CQI indicators to REMSA;
- Working with REMSA to meet the goals set in the Countywide EMS System Strategic Plan;
- Working with REMDA to update the Strategic Continuous Quality Improvement Plan to meet state mandates;
- Receiving information, performing root cause analyses, and assigning issues to ad hoc committees;
- Loop closures on all EMS system CQI issues;
- Recognition of excellence in the performance of EMS duties;
- Case review for development of lessons learned.

CQILT is combining the CQI TAG, Stroke, STEMI, HEMS, Data Group, and Policy Review Forum into one meeting which will meet every other month for four hours.

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

FOR CONSIDERATION BY PMAC

DATE: January 12, 2015

TO: PMAC

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

SUBJECT: Ambulance Patient Offload Delay Report

ATTACHMENT: Ambulance Patient Offload Delay Report (five pages)

The current Ambulance Patient Offload Delay Report contains data through the end of December 2014. Data by month for the last three 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.



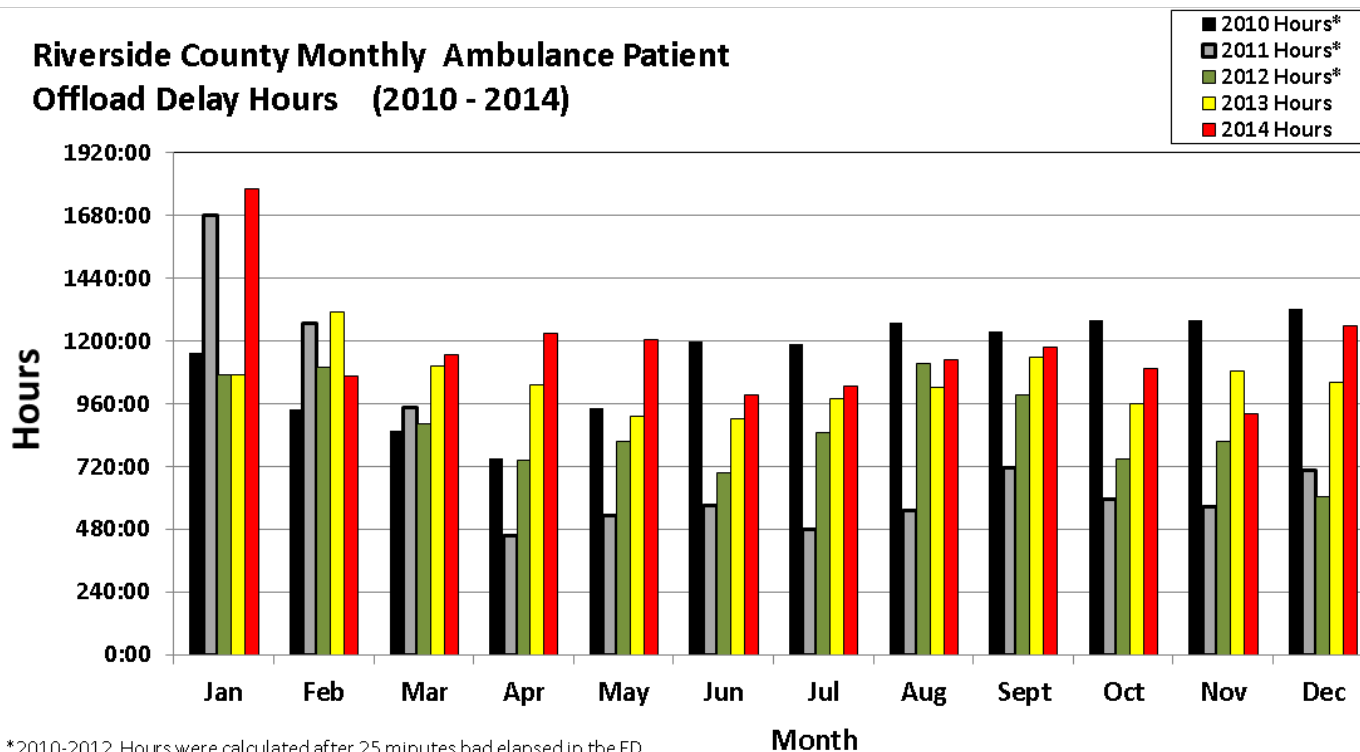
AMBULANCE PATIENT OFFLOAD DELAYS

January 7, 2015

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

Hospital	2010		2011		2012		2013	
	Total Hours*	Offload Delays	Total Hours*	Offload Delays	Total Hours*	Offload Delays	Total Hours*	Offload 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
RRCMC	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

*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 – Transports and Occurrences refined to exclude BLS units

Hospital	Offload Delay Hours	Total Delay Time*	Total ALS Transports	Offload Delay Occurrences	Compliance%**	Avg Delay/Occurrence*
RCH	2984:29:25	6728:29:25	17358	7488	56.9%	0:53:55
Kaiser	201:38:58	575:38:58	5426	748	86.2%	0:46:11
Parkview	1694:56:01	3138:26:01	6100	2887	52.7%	1:05:14
RCRMC	1007:19:37	2280:49:37	12541	2547	79.7%	0:53:44
Corona	1845:33:25	3301:33:25	6866	2912	57.6%	1:08:02
Moreno Valley	545:55:06	1175:25:06	3478	1259	63.8%	0:56:01
Menifee	733:35:51	1425:05:51	4290	1383	67.8%	1:01:50
LLUMC –Murrieta	963:34:24	1841:34:24	5472	1756	67.9%	1:02:55
Inland Valley	432:21:44	988:21:44	9080	1112	87.8%	0:53:20
Rancho Springs	76:31:30	200:01:30	4289	247	94.2%	0:48:35
Temecula Valley	139:03:35	362:03:35	3907	446	88.6%	0:48:42
Hemet	3112:04:15	5805:34:15	15148	5387	64.4%	1:04:40
San Geronio	157:47:22	399:17:22	6389	483	92.4%	0:49:36
Eisenhower	24:15:55	98:45:55	3809	149	96.1%	0:39:46
Desert	40:12:27	146:42:27	10207	213	97.9%	0:41:20
JFK	79:52:57	248:22:57	3536	337	90.5%	0:44:13
Totals	14,039:12:32	28,716:12:32	117,896	29,354	75.1%	0:58:42

* Includes the first 30 minutes of each Offload Delay.

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

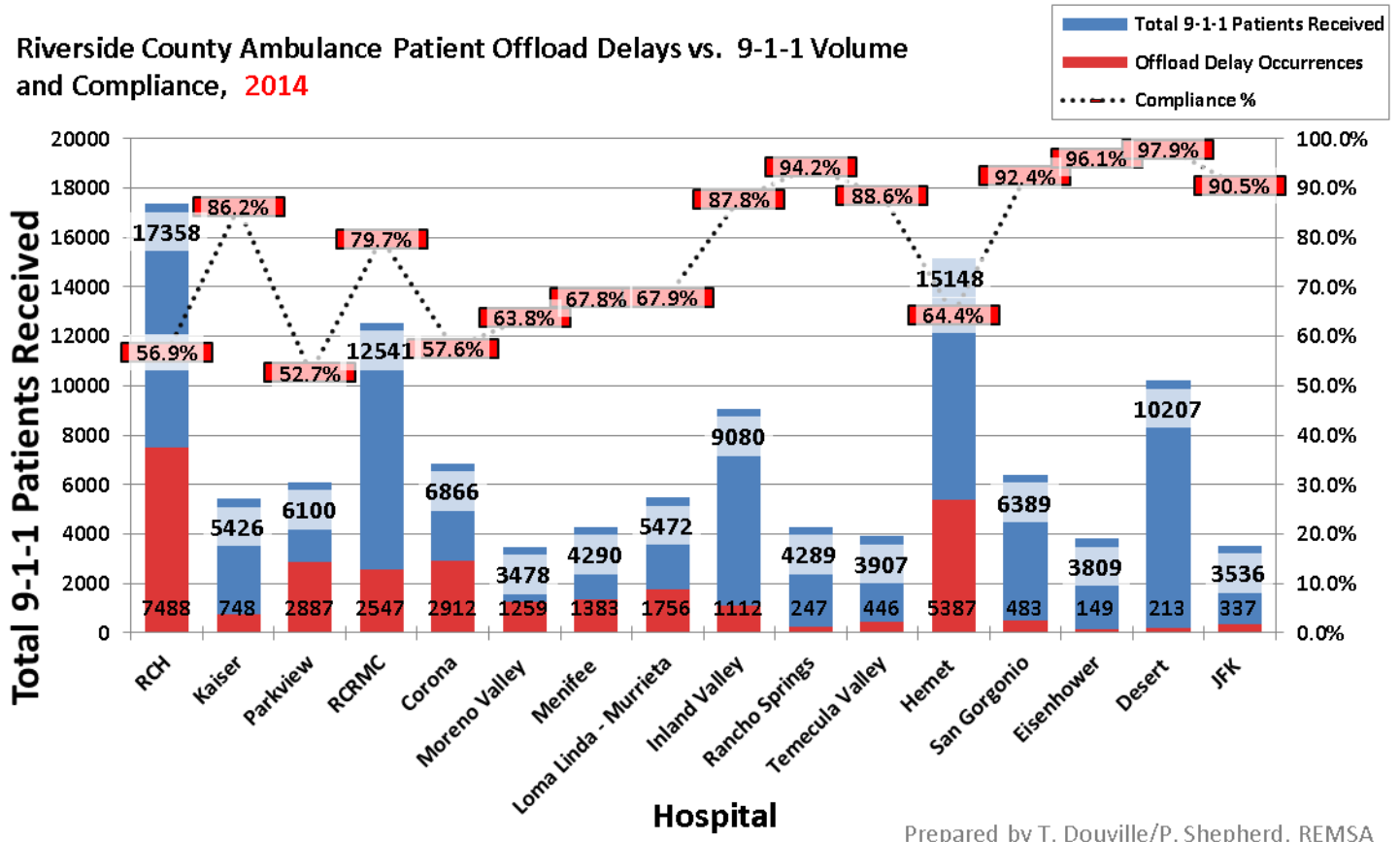
Ambulance Patient Offload Delay Data, 2013 – Total Ambulances Received included BLS and ALS units

Hospital	Offload Delay Hours	Total Delay Time*	Total Ambulances Received	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 Geronio	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

* Includes the first 30 minutes of each Offload Delay.

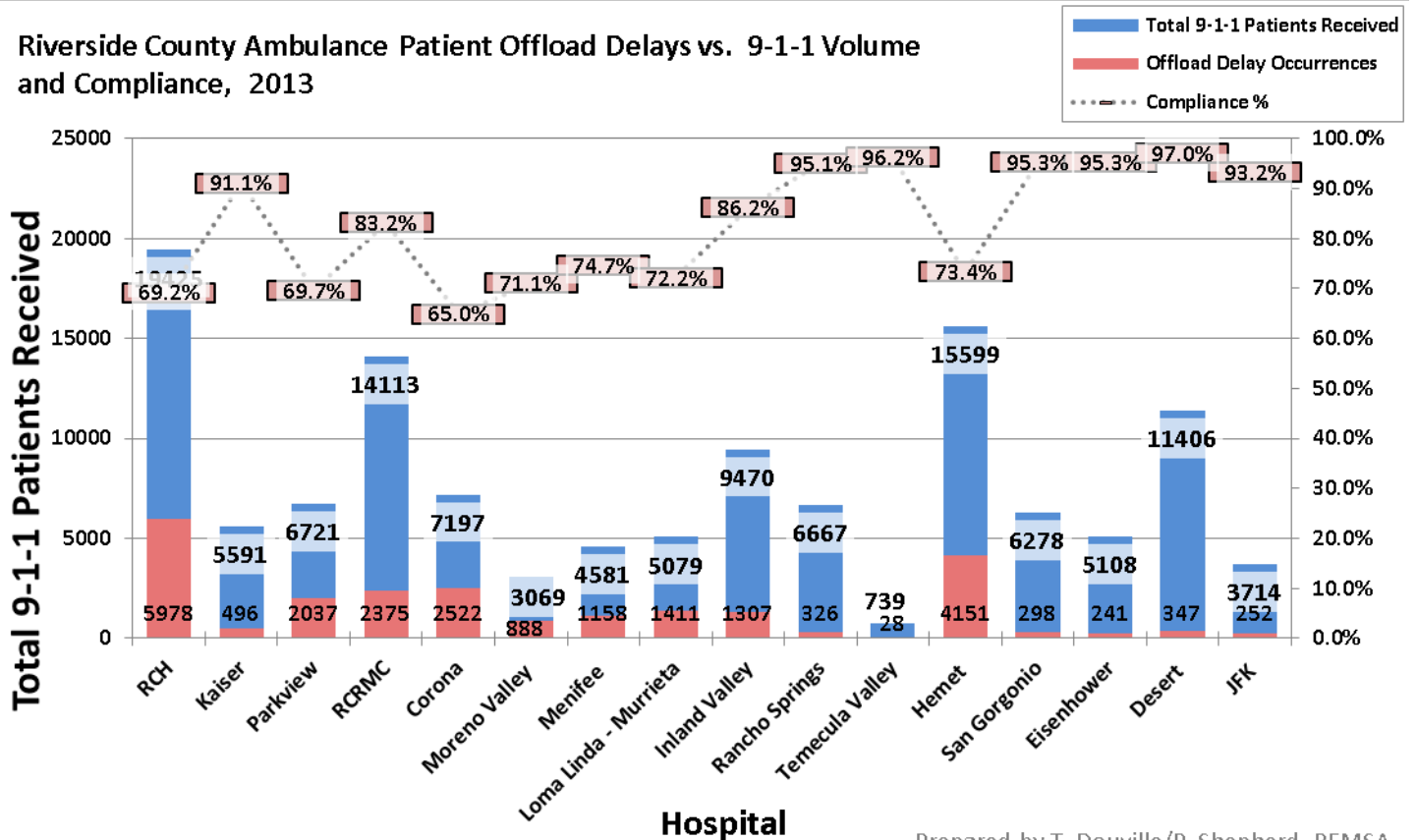
** Compliance % represents the percentage of ALS Ambulance transports not on Offload Delay (data includes only 9-1-1 contractual provider).

Riverside County Ambulance Patient Offload Delays vs. 9-1-1 Volume and Compliance, 2014



Prepared by T. Douville/P. Shepherd, REMSA

Riverside County Ambulance Patient Offload Delays vs. 9-1-1 Volume and Compliance, 2013



Prepared by T. Douville/P. Shepherd, REMSA

Ambulance Patient Offload Delays by Month: Delay Time and Occurrences by hospital* - Oct. 2014 – Dec. 2014

Hospital	Oct. '14 Delay Hours	ALS 9-1-1 Transports	Oct. '14 Offload Delays	Nov. '14 Delay Hours	ALS 9-1-1 Transports	Nov. '14 Offload Delays	Dec. '14 Delay Hours	ALS 9-1-1 Transports	Dec. '14 Offload Delays
RCH	186:01:18	1539	578	184:57:0	1358	551	335:19:11	1439	743
Kaiser	20:24:33	468	72	11:37:19	474	54	24:43:41	504	88
Parkview	150:43:40	552	295	146:05:1	481	228	99:05:58	467	193
RCRM	89:59:53	1173	234	62:49:55	984	167	93:02:19	1079	240
Corona	135:16:19	579	234	142:09:2	529	227	201:09:06	568	276
Moreno Valley	34:11:35	298	94	49:48:37	309	108	47:42:34	313	117
Menifee	78:24:35	395	135	50:01:08	325	106	49:12:16	306	94
LLUMC –Murrieta	100:15:58	504	176	69:47:56	452	136	91:48:08	490	165
Inland Valley	39:23:18	825	102	27:27:57	708	89	49:14:33	773	120
Rancho Springs	4:48:07	383	19	1:58:49	359	7	7:05:21	370	25
Temecula Valley	13:48:40	336	53	14:29:56	342	43	21:15:54	362	71
Hemet	218:00:08	1261	421	132:07:2	1237	316	203:08:29	1305	406
San Geronio	11:03:45	563	42	13:52:09	496	35	27:08:28	539	67
Eisenhower	0:10:06	298	3	0:09:06	316	5	2:14:07	367	14
Desert	5:08:36	841	16	2:57:33	758	15	4:49:38	888	30
JFK	6:42:33	271	27	10:02:59	256	26	3:34:05	301	20
Totals	1,094:23:04	10,286	2,501	920:22:32	9,384	2,113	1,260:33:48	10,071	2,669

*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.

FOR CONSIDERATION BY PMAC

DATE: January 12, 2015

TO: PMAC

FROM: Scott Moffatt, EMS Specialist

SUBJECT: 2015 Policy Manual

The 2015 Policy Manual is final and available online at: www.remsa.us/policy/2015/

On April 1, 2015, it will become effective and be moved to: www.remsa.us/policy/

ACTION: Review policy changes, train staff, and adjust/procure equipment as required.

FOR CONSIDERATION BY PMAC

DATE: January 12, 2015

TO: PMAC

FROM: Shanna Kissel and Maureen Bowlin , Trauma Program Managers

SUBJECT: Trauma System Report

1. TXA update
 - Anticipated start of trial study- April 1, 2015
 - Education portion completed by ICEMA- in editing
 - All county agencies on EPCR are involved
 - 200 patients/ over the course on 18 months
 - ICEMA – began air and hospital ARM of the study. Ground ARM target date March 2
 - Wristbands will be distributed to CQI coordinators involved. Meeting will be once REMSA receives educational components
2. REMSA to present at TAC trauma triage criteria policy 5301 for current updates with CDC Field triage

ACTION: PMAC should be prepared to receive and discuss the aforementioned information