



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-Tammy Messmer

Blythe Ambulance Service
5-John Valentine

Cathedral City Fire Department
5-Robert Williams

Corona Regional Medical Center
1-James Rhee, MD
4-Sharon Salle

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

County Fire Chiefs' Non-Transport BLS Providers
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-Vacant

Paramedic-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- Andy Billings

Kaiser Permanente Riverside
1-Jonathan Dyreyes, MD
4-Victoria Montiel

**The Next Meeting of PMAC is on:
Monday, June 22, 2015
9:00 AM to 11:30 AM
The Towers of Riverwalk
4210 Riverwalk Parkway, Riverside
First Floor Conference Rooms (Orange & Lemon Rooms)**

- 1. CALL TO ORDER & HOUSEKEEPING (3 Minutes)**
Brian MacGavin (Sergeant-at-Arms)
- 2. PLEDGE OF ALLEGIANCE (1 Minute)**
Brian MacGavin
- 3. ROUNDTABLE INTRODUCTIONS (5 Minutes)**
Brian MacGavin
- 4. EMS RECOGNITIONS (5 Minutes)**
Brian MacGavin
- 5. APPROVAL OF MINUTES (3 Minutes)**
March 23, 2015 Minutes—Dr. van Stralen (Attachment A)
- 6. UNFINISHED BUSINESS (5 Minutes)**
EMT-at-Large Elections—Brian MacGavin (Attachment B)
- 7. MEDICAL DIRECTOR’S VISION & TOPICS FOR DISCUSSION (30 Minutes)**
7.1 Medical Director’s Vision: Treating everyone with dignity (15 minutes)
7.2 Topic: What do you consider to be a vulnerability of our system?
(Maximum time of five minutes per person--15 minutes total)
- 8. REPORTS & DISCUSSION (45 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 the item is for information only
8.1 EMS Strategic Plan—Brian MacGavin (Attachment C)
8.2 CQILT—Trevor Douville (Attachment D)
8.3 Ambulance Patient Offload Delay Report—Patrice Shepherd (Attach E)
8.4 Trauma System—Shane McMurphy / Shanna Kissel (Attachment F)
8.5 REMSA Credentialing Program—Karen Petrilla (Attachment G)
- 9. BREAK (10 Minutes)**
Refreshments will be provided in the break room. The meeting will recommence promptly after 10 minutes or by 10:45 depending on the availability of time. A two minute warning and the restarting of the meeting will be announced by the Sergeant-at-Arms.

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-Guillean Estrada

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-Jacquelyn Ramirez

Trauma Audit Comm. & Trauma Program Managers

2-Tito Gorski, MD
3-Shane McMurphy

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 (Sergeant-at-Arms)
5-Jan Remm, 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

10. REPORTS & DISCUSSION CONTINUED (40 Minutes)

10.1 Data System Updates--Scott Moffatt (Attachment H)

10.2 Training Updates—Misty Plumley (Attachment I)

10.3 EMCC—Stephen Patterson, MD / Jim Price

10.4 Emergency Medical Services for Children—Misty Plumley (Attach J)

10.5 Airway Management—Shanna Kissel (Attachment K)

11. RESEARCH PAPERS (No Papers Submitted)

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?

12. 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

13. NEXT MEETING / ADJOURNMENT (1 Minute)

September 21, 2015—4210 Riverwalk Parkway First Floor Conference Rooms (Orange & Lemon Rooms)

Purpose of Discussion and Ground Rules:

Purpose: For EMS participants to articulate personal knowledge and experience while developing discussion skills

The Sergeant-at-Arms will display a yellow colored sign visible to the speaker indicating a two minute warning and a red colored sign indicates the speaker needs to stop talking. The Sergeant-at-Arms may have to remind participants of the ground rules.

All participants should ensure the following ground rules are observed:

- 1) Adhering to the time limits
- 2) No criticisms or offering advice
- 3) No interruptions—only one person speaks at a time
- 4) Explanations are accepted, not excuses
- 5) Ask or explain with “what, how or when” but not “why”
- 6) Speak from personal knowledge and experience; use anecdotes
- 7) Claims to supporting information, e.g., books, articles, etcetera must be available for review before the meeting

***Members need to sit at the table with name plates in order to identify members and ensure accurate counts of votes

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: www.rivcoems.org. Meeting minutes are audio recorded to facilitate dictation for minutes.

TOPIC	DISCUSSION	ACTION
1. CALL TO ORDER & HOUSEKEEPING Brian MacGavin	The meeting was called to order and housekeeping items were announced by the Sergeant-at-Arms-- Brian MacGavin	Information only.
2. PLEDGE OF ALLEGIANCE Brian MacGavin		
3. ROUNDTABLE INTRODUCTIONS Brian MacGavin		Self-introductions were performed.
4. UNFINISHED BUSINESS EMT-at-Large Elections Brian MacGavin	Two nominations were submitted for EMT-at-Large: Edward Hernandez employed by CAL FIRE and David Olivas employed by Riverside City Fire Department. No other nominations were submitted. An election was performed. However, it was determined after the meeting that a non-PMAC member voted. Additionally, it was determined that the candidates should be present.	Another election will be held at the next PMAC on June 22.
5. APPROVAL OF MINUTES Dr. van Stralen		January PMAC meeting minutes were approved without changes.
6. MEDICAL DIRECTOR'S VISION & TOPICS FOR DISCUSSION		Information only.
6.1 Medical Director's Vision Dr. van Stralen	Dr. van Stralen gave a presentation on increasing survivability for EMS.	Information only.
6.2 Topic Dr. van Stralen	PMAC attendees shared what they did to prevent failure during a specific EMS incident.	Information only.
7. REPORTS & DISCUSSION		Information only.
7.1 EMS Strategic Plan Brian MacGavin	At the next Emergency Medical Care Committee (EMCC) meeting on April 1, 2015 there will be a report on the implementation of Riverside County's Strategic Plan. EMCC will be receiving and giving advice on the implementation of the Strategic Plan.	Information only.
7.2 CQILT Laura Wallin	The CQILT meeting scheduled on March 19 has been postponed until March 31. CQILT meetings are open to everyone. At these meetings the data system, policy review, STEMI system, stroke system and HEMS CQI are discussed. The Strategic plan goal one is specific to CQI and a matrix addressing this goal and its objectives can be viewed and commented on at remsa.us . The stroke group has finalized a minimized data set for analyzing prehospital strokes. Kaiser Ontario is not yet a Riverside County designated Stroke Receiving Center. Riverside County Stroke Ready Receiving Centers that submitted applications to The Joint Commission for a Primary Stroke Center designation by March 31	Information only.

	have been extended to October 1, 2015. New data elements have been added to the HEMS CQI reporting. Temecula Valley Hospital and Loma Linda Murrieta Hospital STEMI Receiving Center designations have been extended until October 1, 2015.	
7.3 Ambulance Patient Offload Delay Report (APOD) Patrice Shepherd	January and February of 2015 had the highest amount of APOD hours for the last five years. Brian MacGavin reported on activities of the APOD Regional Task Force and the 90-day pilot redirect program starting soon. There was further discussion on APODs and how the pilot program has its limitations; long term solutions need to be used to address this complex problem. Brian MacGavin also reported that the hospital CEOs are supportive of a centralized medical communications center.	Information only.
7.4 Trauma System Shane McMurphy Shanna Kissel	TAC is recommending that Trauma Policy 5301 Critical Trauma Patient criteria be updated to be consistent with the 2011 CDC guidelines. REMSA is working on making the Continuation of Care Policy 5302 easier to understand and similar to ICEMA's continuation of care policy. The Tranexamic Acid (TXA) study is planned to start on April 1 but the training still needs to be completed. There was further discussion on the TXA study.	Information only.
7.5 REMSA Credentialing Program Karen Petrilla	REMSA has a goal to have an on-line credentialing program by the end of the year. Currently appointments are not mandatory but starting June 15, 2015 credentialing will be done by appointment only. REMSA is now accepting Master Card, Visa, money orders, cashier checks, and cash as payment for attaining EMT, paramedic, and MICN credentials. Personal checks are not accepted. New applicants are encouraged to visit REMSA's website to prepare for the application process.	Information only.
7.6 2015 Policy & Protocol Training Update Misty Plumley	Policy & Protocol update training began January 6, 2015. March 31 will be the last day for trainings. Providers are encouraged to have their staff attend one of these training sessions. The curriculum can be reviewed at: http://remsa.us/documents/programs/education/	Information only.
7.7 EMCC	The next EMCC meeting will be on April 1, 2015 at the Riverwalk Parkway location in the first floor conference rooms.	Information only.
8. BREAK – 10 Minutes		Information only.
9. NEW BUSINESS		Information only.
9.1 Emergency Medical Services for Children Dr. van Stralen	Dr. van Stralen presented the importance of education, preparedness and prevention for Emergency Medical Services for children (EMSC). Dr. Vaezazizi mentioned that there are some	Information only.

PMAC Meeting Minutes
March 23, 2015

	<p>challenges in coordinating EMSC between the EMS system and the hospitals. Sabrina asked if this would build upon the EMSC project from two years ago-moving towards pediatric receiving facilities. Dr. van Stralen said we would move towards meeting the needs of the child. EMSC will be a standing item on the PMAC agenda. Send questions and comments to Misty.</p>	
<p>9.2 Airway Management Dr. van Stralen</p>	<p>Dr. van Stralen presented a list of items concerning airway management. We should determine the problem, collect the data and fix the problem. We should be intubating all patients with a Glasgow Comma Scale of less than three or the caregiver should give a description of why intubation wasn't done. There should be no emesis with mask ventilations.</p>	<p>Information only.</p>
<p>10. RESEARCH PAPERS</p>	<p>Those that would like to submit their presentation for the next PMAC meeting need to allow REMSA one month in advance to review before presenting.</p>	<p>Information only.</p>
<p>11. ANNOUNCEMENTS</p>	<p>Misty announced that after June 22, 2015 PMAC meeting REMSA will host a free three hour CE workshop.</p> <p>Riverside County Child Assessment Team will be having their annual conference on April 22, 2015 at Crestmore Manor in Rubidoux.</p> <p>On August 14, 2015 REMSA will host a joint STEMI & Stroke presentation with a full day of continuing education credit. There was further discussion on identifying large vessel versus small vessel stroke.</p> <p>RCRMC will have their 5th Annual Emergency Department Conference on April 10. They will also be having their second ATLS course this weekend.</p> <p>REMSA invites feedback on PMAC meetings.</p> <p>Robert Fish announced he will be taking a temporary assignment away from EMS for eight months. Captain Tim Buckley will be available to perform duties previously assigned to Robert Fish.</p>	<p>Information only.</p>
<p>12. NEXT MEETING & ADJOURNMENT</p>	<p>June 22, 2015 at 4210 Riverwalk Parkway in the first floor conference rooms.</p>	<p>Information only.</p>

FOR CONSIDERATION BY PMAC

DATE: June 9, 2015

TO: PMAC

FROM: Brian MacGavin, REMSA Assistant Director

SUBJECT: EMT-at Large candidates for PMAC

At the last PMAC meeting on March 23, 2015 no candidates were present for the election. Additionally, it was brought to REMSA's attention that a non-voting member participated in the vote. Therefore, there will be another election at the June 22, 2015 PMAC meeting. At this time the following qualified candidates have expressed an interest in filling PMAC's EMT-at-Large position:

David Olivas, EMT
Riverside City Fire Department

Edward Hernandez, EMT
Riverside County Fire Department

ACTION: PMAC should be prepared to elect one of the above candidates or any other qualified candidate that expresses an interest in the EMT-at-Large position during the June 22, 2015 PMAC meeting.

FOR CONSIDERATION BY PMAC

DATE: July 9, 2015

TO: PMAC

FROM: Brian MacGavin, REMSA Assistant Director

SUBJECT: EMS System Strategic Planning

REMSA is continuing to integrate elements of the Strategic Plan into existing EMS structures and programs. This includes stakeholder review and feedback on the strategic plan implementation process. Reports, feedback and discussions on the implementation of Riverside County's Strategic Plan will be taking place at Riverside County's Emergency Medical Care Committee (EMCC) meetings. The next EMCC meeting will be held on July 1, 2015 at 4210 Riverwalk Parkway First Floor Conference Rooms from 9:00 AM to 10:30 AM.

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

FOR CONSIDERATION BY PMAC

DATE: June 9, 2015
TO: PMAC
FROM: Laura Wallin, RN
EMS Specialist
SUBJECT: CQILT

CQILT has met three times since January 2015. REMSA has received feedback that CQILT would be better served with an increased clinical focus. Additionally, the individual specialty care program meetings need to be reinstated. Therefore, CQILT will now be meeting quarterly for two hours with a primary focus on clinical reviews / case reviews and measuring / analyzing countywide indicators for the improvement of the EMS System. The Data System Group and the Policy Review Forum are now reclassified as functions of CQILT and ad-hoc meetings will be used for needed discussions regarding policies and the data system. Beginning in October, STEMI and stroke system meetings will be held quarterly on the same days in order to facilitate increased input from specialty center coordinators and physicians.

Results of the last quarter 2015 indicators in the March 31, 2015 CQILT minutes posted on www.remsa.us. The group decided to use the same indicators throughout the year; adding additional indicators as necessary. Current 2015 indicators are:

- Missed STEMIS
- Scene times for suspected STEMI patients
- Glucose testing for suspected stroke patients
- Scene time for suspected stroke patients
- Direct transport to a Stroke Receiving Center for suspected stroke patients
- Cincinnati Stroke Scale on suspected stroke patients
- Percentage of cardiac arrest patients transported to a hospital
- Cardiac arrests with ROSC
- Cardiac arrests survival to ED discharge
- Cardiac arrest survival to hospital discharge with a CPC score of 1 or 2
- Cardiac arrest survival to hospital discharge

Added for 2nd quarter 2015:

- Number of EMS Public Education/ CPR classes offered
- Number of people trained in EMS CPR classes
- Number of Code 3 responses for BLS and/ or CCT ambulances reported to REMSA
- Scene times for STEMI and Stroke were amended to allow for averages rather than 90th percentile for organizations with fewer than 30 such calls.

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

FOR CONSIDERATION BY PMAC

DATE: June 9, 2015

TO: PMAC

FROM: Patrice Shepherd, Admin. Svcs. 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 May 2015. 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.



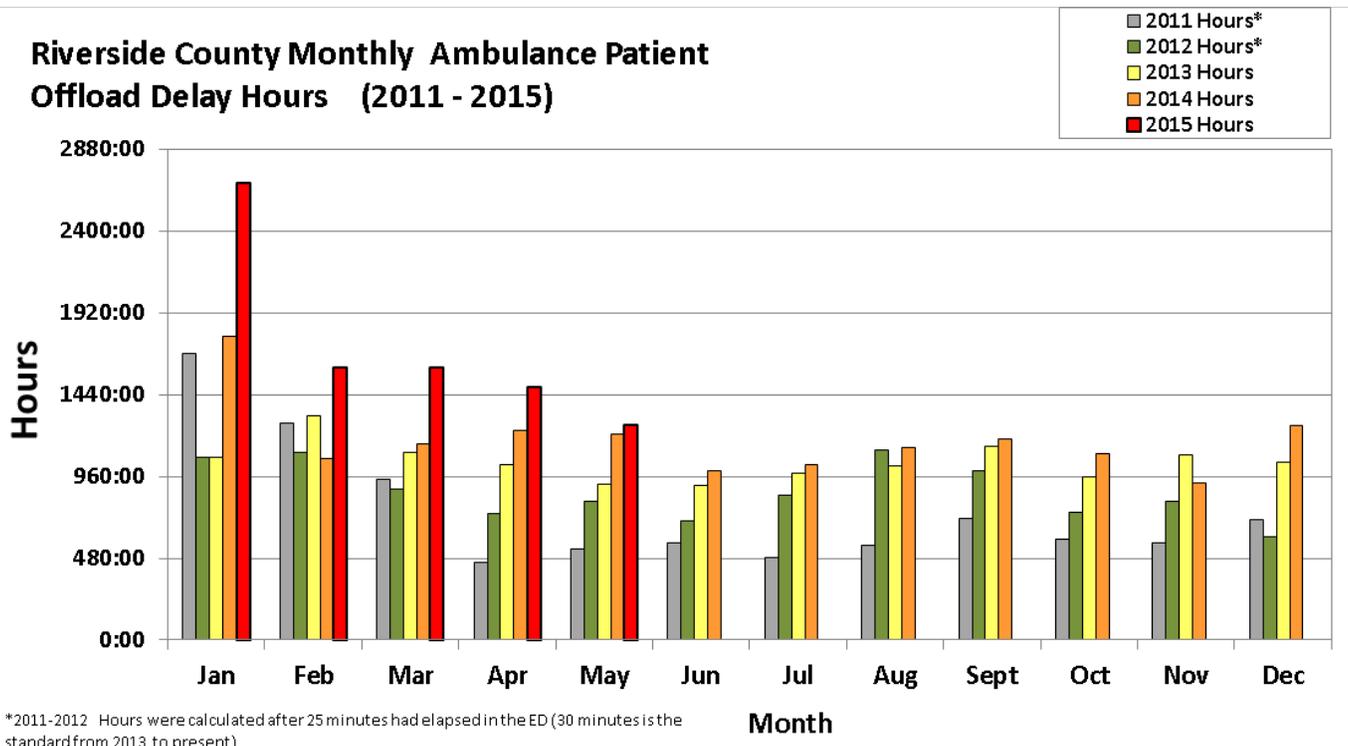
AMBULANCE PATIENT OFFLOAD DELAYS

June 4, 2015

RIVERSIDE COUNTY AMBULANCE PATIENT OFFLOAD DELAYS

HISTORICAL COMPARISON

Data provided illustrates total ambulance patient offload delay time (hh:mm) by month for 2011-2015(present month) from 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. Prior to 2013, offload delay data used a 25-minute standard.



Total Annual Hours* and Ambulance Patient Offload Delays by hospital, 2011 to 2014

Hospital	2011		2012		2013		2014	
	Total Hours*	Offload Delays	Total Hours*	Offload Delays	Total Hours*	Offload Delays	Total Hours*	Offload Delays
RCH	1571:42:46	3352	2198:41:11	3953	2712:32:25	5978	2984:29:25	7488
Kaiser	173:06:25	559	151:16:22	472	196:02:59	496	201:38:58	748
Parkview	1371:19:18	2435	1881:03:47	2833	1171:41:25	2037	1694:56:01	2887
RCRMC	545:44:19	1535	892:20:22	2276	1107:06:11	2375	1007:19:37	2547
Corona	1539:56:42	2550	1694:56:09	2803	1717:47:56	2522	1845:33:25	2912
Moreno Valley	285:04:10	824	268:19:32	809	420:59:39	888	545:55:06	1259
Menifee	568:04:22	1210	322:28:21	791	725:38:26	1158	733:35:51	1383
LLUMC- Murrieta	61:57:57	179	265:40:04	675	888:15:15	1411	963:34:24	1756
Inland Valley	879:15:32	1671	949:05:59	2134	643:33:09	1307	432:21:44	1112
Rancho Springs	577:15:19	1209	136:57:10	417	137:27:11	326	76:31:30	247
Temecula Valley					10:07:03	28	139:03:35	446
Hemet	1060:21:22	2980	1081:16:55	2720	2535:17:35	4151	3112:04:15	5387
San Gorgonio	215:17:12	568	222:07:47	595	127:45:02	298	157:47:22	483
Eisenhower	33:56:41	171	64:56:15	320	54:56:39	241	24:15:55	149
Desert	122:26:14	562	233:06:47	788	68:47:04	347	40:12:27	213
JFK	65:48:08	296	81:16:43	337	58:37:55	252	79:52:57	337
Totals	9,071:16:27	20,101	10,443:33:24	21,923	12,576:35:54	23,815	14,039:12:32	29,354

*Total Hours do not include the first 25 minutes of each offload delay (2011-2012), or the first 30 minutes (2013- present)

AMBULANCE PATIENT OFFLOAD DELAYS AND OVERALL COMPLIANCE

This data includes 2014 and 2015 Ambulance Patient Offload Delays, hours of delay, total time the ambulances and patients were delayed, ALS transports received by each hospital, compliance, and average delay time 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, 2015 Jan. – May – Transports and Occurrences - ALS Units Only

Hospital	Offload Delay Hours	Total Delay Time*	Total ALS Transports	Offload Delay Occurrences	Compliance%**	Avg Delay/ Occurrence*
RCH	1758:21:32	3578:51:32	7513	3641	51.5%	0:58:59
Kaiser	202:52:17	507:22:17	2615	609	76.7%	0:49:59
Parkview	1081:29:22	1817:59:22	2566	1473	42.6%	1:14:03
RCRMC	591:03:23	1339:33:23	5756	1497	74.0%	0:53:41
Corona	1505:36:38	2331:36:38	2929	1652	43.6%	1:24:41
Moreno Valley	241:13:10	537:43:10	1422	593	58.3%	0:54:24
Menifee	412:43:54	745:13:54	1838	665	63.8%	1:07:14
LLUMC –Murrieta	489:36:57	909:06:57	2390	839	64.9%	1:05:01
Inland Valley	359:45:04	757:15:04	4175	795	81.0%	0:57:09
Rancho Springs	41:31:00	103:31:00	1931	124	93.6%	0:50:05
Temecula Valley	188:35:39	432:05:39	1995	487	75.6%	0:53:14
Hemet	1461:44:17	2693:44:17	6167	2464	60.0%	1:05:36
San Gorgonio	185:34:22	443:34:22	2696	516	80.9%	0:51:35
Eisenhower	19:44:23	73:14:23	1882	107	94.3%	0:41:04
Desert	28:34:22	108:34:22	4691	160	96.6%	0:40:43
JFK	57:01:44	152:31:44	1563	191	87.8%	0:47:55
Totals	8,625:28:04	16,531:58:04	52,129	15,813	69.7%	1:02:44

* 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).

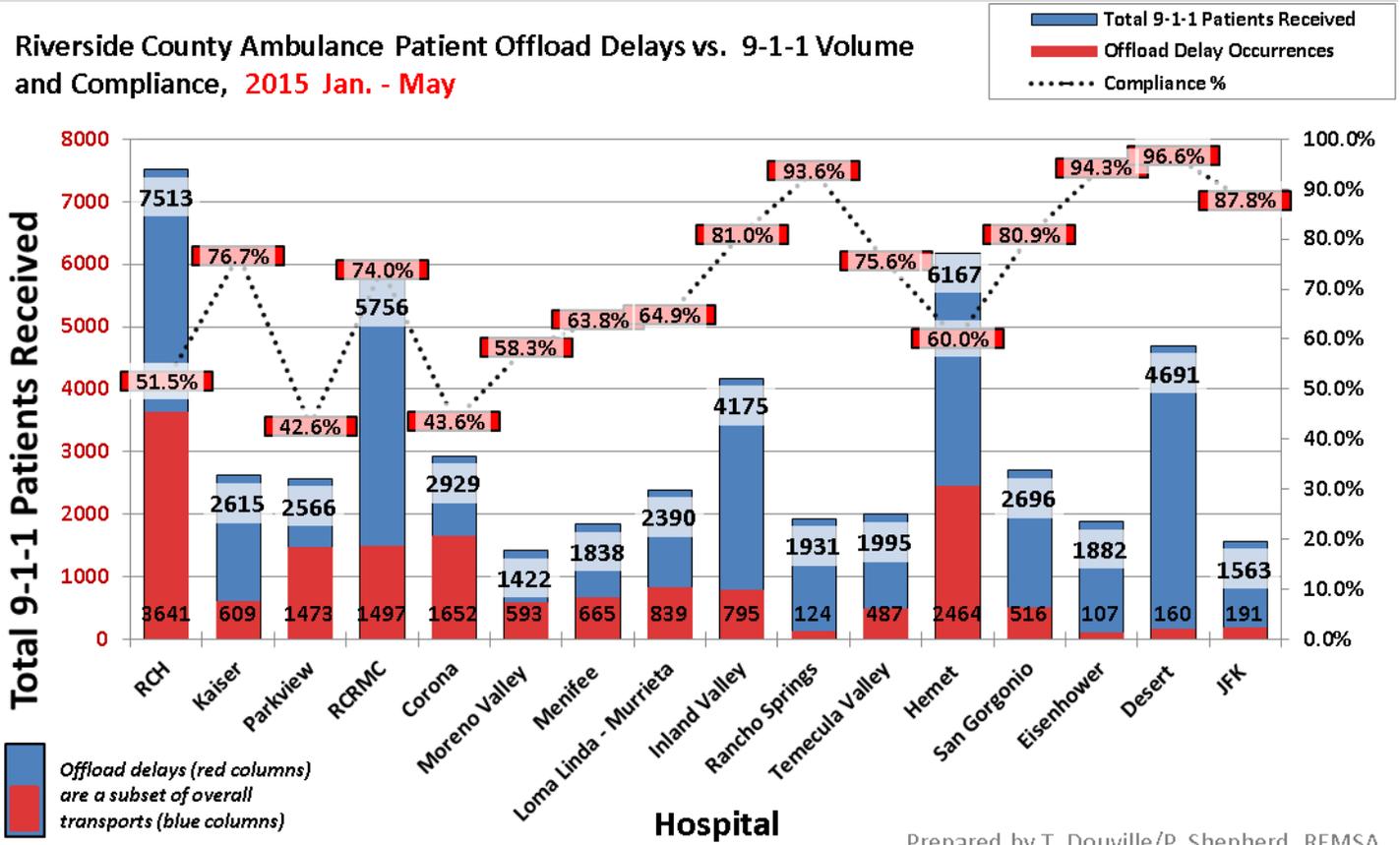
Ambulance Patient Offload Delay Data, 2014 – Transports and Occurrences - ALS Units Only

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 Gorgonio	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.

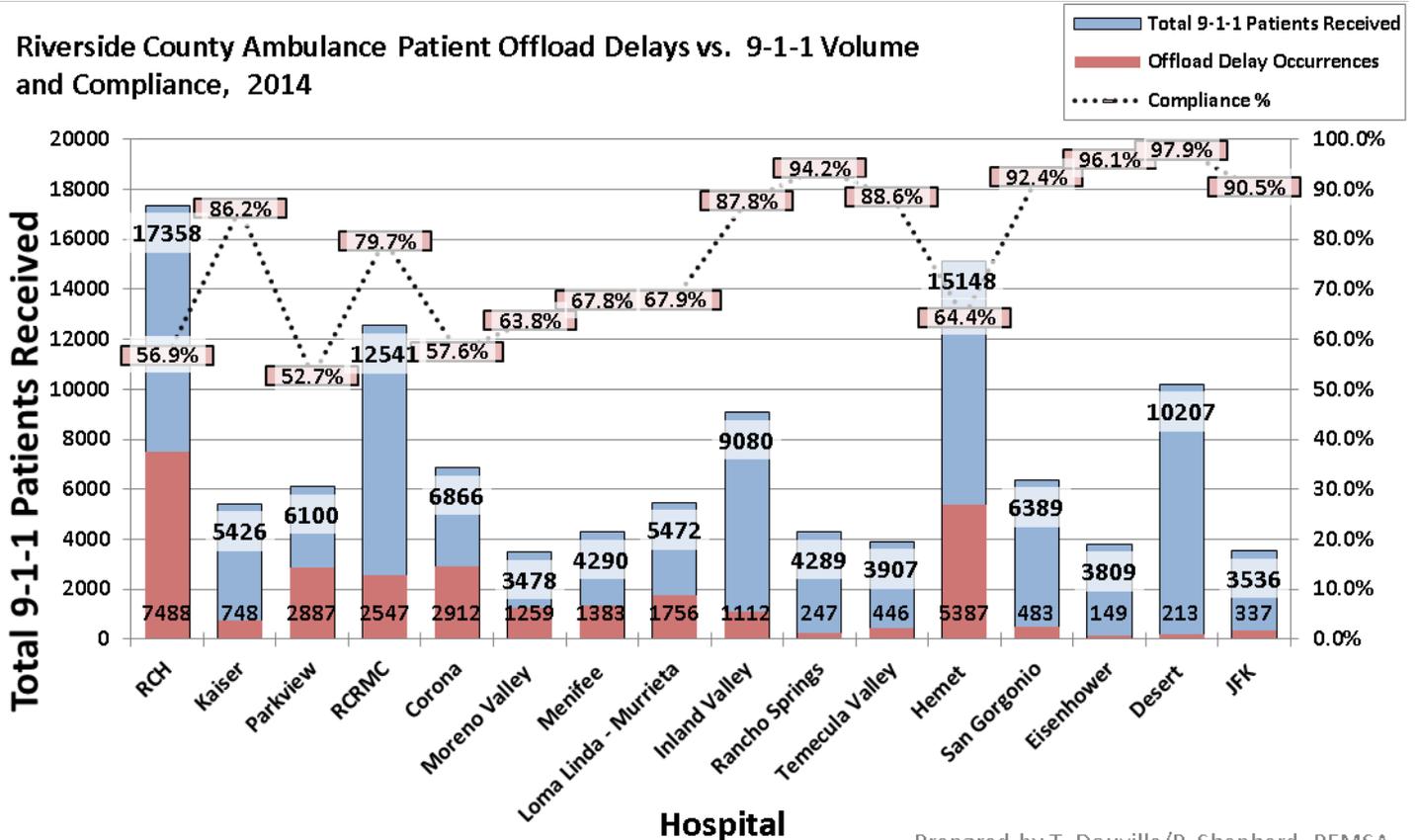
** Compliance % represents the percentage of ALS Ambulance transports not on Offload Delay (data includes only 9-1-1 contractual provider).

Riverside County Ambulance Patient Offload Delays vs. 9-1-1 Volume and Compliance, 2015 Jan. - May



Prepared by T. Douville/P. Shepherd, REMSA

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



Prepared by T. Douville/P. Shepherd, REMSA

Ambulance Patient Offload Delays by Month: Delay Time and Occurrences by hospital* - Mar. – May 2015

Hospital	Mar. '15 Delay Hours	ALS 9-1-1 Trans.	Mar. '15 Offload Delays	Apr. '15 Delay Hours	ALS 9-1-1 Trans.	Apr. '15 Offload Delays	May '15 Delay Hours	ALS 9-1-1 Trans.	May '15 Offload Delays
RCH	312:31:22	1600	772	272:31:43	1474	670	142:09:45	1493	503
Kaiser	37:09:20	519	122	22:08:16	508	82	38:42:45	549	100
Parkview	232:54:25	526	326	151:46:53	493	274	102:16:04	496	204
RCRMC	125:52:42	1179	322	146:37:46	1169	358	77:16:13	1119	228
Corona	231:40:49	608	311	255:26:45	594	318	202:30:05	571	278
Moreno Val.	44:42:25	296	110	45:17:24	264	111	43:17:55	283	119
Menifee	48:49:48	355	114	45:17:04	330	98	117:20:22	445	182
LLUMC –Murr.	91:53:48	493	168	111:46:09	489	185	75:02:05	457	122
Inland Valley	69:05:33	882	164	64:45:15	786	155	54:58:15	840	137
Rancho Spgs.	7:30:38	397	25	14:12:31	378	41	3:57:52	395	12
Temecula Val.	30:13:45	411	94	35:13:06	396	85	34:35:22	449	94
Hemet	302:26:28	1285	568	253:31:40	1231	447	322:08:32	1143	453
San Gorgonio	42:49:25	580	121	43:12:50	552	113	33:37:41	507	90
Eisenhower	4:06:26	424	19	4:58:36	376	30	1:52:20	329	11
Desert	7:28:43	992	35	5:28:14	995	31	5:49:59	853	35
JFK	12:24:35	311	43	9:32:53	361	27	6:42:28	279	28
Totals	1,601:40:12	10,858	3,314	1,481:47:05	10,396	3,025	1,262:17:43	10,208	2,596

*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 or BLS-level service.

FOR CONSIDERATION BY PMAC

DATE: June 9, 2015

TO: PMAC

FROM: Shane Mc Murphy/ Shanna Kissel

SUBJECT: Trauma Program

1. Title 22 Trauma Regulations- looking at updating in 2017
2. TXA Update
3. Continuation of Care poster- REMSA and ICEMA are working on contact information for the non-specialty centers to help assist with the IFT's and continuation of care
4. Trauma PI Indicators
 - A. Unanticipated mortalities needing 3rd level review
 - B. All IFT's, with ISS > 15, with referral hospital door-in to door- out time > 2 hrs.
 - C. All ground level falls (ICD 885.9), > 65 y.o. on anticoagulants with unanticipated mortality and/or complications identified
5. Quarterly Trauma Registrar meeting- had on June 8th

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

FOR CONSIDERATION BY PMAC

DATE: June 9, 2015
TO: PMAC
FROM: Karen Petrilla, EMS Specialist
SUBJECT: Credentialing Services Update

The REMSA credentialing office has moved -- we are now on the 2nd floor, Room 209, of the Health Administration Building (same building). This new location requires visitors to check-in with the concierge to obtain a Visitor's Pass. Our next move will be to the Riverwalk Parkway location but we do not yet have a definitive date yet.

We are now accepting appointments for processing applications in-person and encourage all renewing applicants to mail in their renewal materials one month prior to their expiration date. New applicants with appointments will be given priority. Reviewing the renewal policies prior to submission, and submitting renewal materials one month in advance, is essential to ensure all necessary materials are submitted and your renewal can be processed prior to expiration. Any application missing items will be returned to the applicant with a deficiency slip explaining the deficiency.

We continue moving towards on-line credentialing for all REMSA credentialed personnel – EMTs, Paramedics and MICNs. Our goal is to have an on-line credentialing program by the end of this year. This will entail continuing changes to our credentialing processes in the coming months. We encourage all applicants to review our website and/or call the office at least one month prior to renewal to ascertain the most recent changes to application submittal, our processing procedures, and processing times.

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

FOR CONSIDERATION BY PMAC

DATE: June 9, 2015

TO: PMAC

FROM: Scott Moffatt, EMS Specialist

SUBJECT: EMS Data System

The request for proposals and negotiations due to the expiring contract with Sansio will result in a June 16 Board of Supervisors agenda item and by the June 22 PMAC REMSA plans to make an important announcement concerning the data system.

In preparation for that announcement please identify a single point of contact at your agency/service/hospital that is able to coordinate communications regarding: prehospital personnel and their credentials, prehospital vehicles, CAD integration with ePCR, ePCR hardware/training/use/administration, critical care transport ePCR needs, and use of EMS data for reporting and CQI purposes. Countywide implementation of the EMS data system is planned by the end of this year.

ACTION: Contact REMSA to officially identify your organization's single point of contact for EMS data system implementation.

FOR CONSIDERATION BY PMAC

DATE: June 9, 2015
TO: PMAC
FROM: Misty Plumley, EMS Specialist
SUBJECT: Upcoming Education Opportunities

Riverside County EMS is sponsoring a series of continuing education workshops after each PMAC meeting. The first is Monday June 22, 2015. We will be working with our EMS stakeholders at all levels to present topics related to clinical information, new research trends, and topics to aid in clinical practice. Each workshop will be three hours in length, and will occur after the PMAC meetings in the same location. The next workshop is September 21, 2015 from 1230-1530.

TEEX is sponsoring a Pediatric Disaster Response and Emergency Preparedness course at Ben Clark Training Center on July 14 & 15, 2015. Contact 951-358-7191 for additional registration information.

Riverside County EMS Agency is proud to be partnering with our prehospital liaison nurses to host a conference focusing on stroke and STEMI care. The conference will be at our Riverwalk building on August 11, 2015 from 0900-1800. Registration information will be coming soon!

ACTION: Informational only, please share with constituents.

FOR CONSIDERATION BY PMAC

DATE: June 9, 2015

TO: PMAC

FROM: Misty Plumley

SUBJECT: What Does the EMS Community Want for Emergency Medical Services for Children (EMSC)?

1. Primary Principles

- The child's care is based on the disease, not the level of caregiver; the EMS caregiver will be educated to the needs of the child
- Support for the caregiver
- A duty to the public and the EMS community to improve the level of performance
- Developmental anatomy and physiology
- Family centered care and family dynamics

2. Program Spectrum

- Prevention
- Prehospital – Emergency Department – Interfacility Transport- Intensive Care Unit
- Disaster preparedness and reunification

ACTION: PMAC should be prepared to discuss the above items concerning EMSC and give advice to REMSA.

FOR CONSIDERATION BY PMAC

DATE: June 9, 2015

TO: PMAC

FROM: Shanna Kissel

SUBJECT: Provide Feedback to REMSA on How EMS Providers should be Able to Manage Airways

1. Overall Goals

- Acquire, protect and manage the airway
- Improve techniques for hand ventilation

2. Protecting the Airway

- Manual
- Technical
- BLS adjuncts
- Endotracheal Intubation
- Other methods

3. Management

- Responsibility
- Moving the patient
- Transfer of responsibility

4. The difficult Airway

- Anesthesia
- Pediatrics
- Geriatrics
- Trauma
- Obesity
- Others?

ACTION: PMAC should be prepared to discuss the above items concerning airway management and give advice to REMSA.