RIVERSIDE COUNTY
Emergency Medical Care Committee

The next meeting of the EMCC is on:

Wednesday, July 1, 2015
9:00AM – 10:30AM

The Towers of Riverwalk
4210 Riverwalk Parkway, Riverside
First Floor Conference Rooms (Lemon and Lime)

1. **CALL TO ORDER**
   Chair—Stan Grube

2. **ROUNDTABLE INTRODUCTIONS (5 Minutes)**
   Chair—Stan Grube

3. **APPROVAL OF MINUTES (5 Minutes)**
   April 1, 2015 Minutes (Attachment A)

4. **EMS AGENCY REPORTS (40 Minutes)**
   4.1 REMSA Organization Changes—Bruce Barton
   4.2 EMS System Strategic Plan—Bruce Barton / Brian MacGavin
   (Attachment B)

5. **OTHER REPORTS (10 Minutes)**
   5.1 PMAC— Steven Patterson, MD / Jim Price
   5.2 PHEPR Branch—Kim Saruwatari

6. **UNFINISHED BUSINESS (10 Minutes)**
   6.1 AED Resolution—Bob Roy / Brian MacGavin
   6.2 Board of Supervisors Report—Blake Goetz (Attachment C)
   6.3 Membership Update—Brian MacGavin (Attachment D)

7. **NEW BUSINESS (5 Minutes)**

8. **OPEN COMMENTS (5 Minutes)**

9. **NEXT MEETING / ADJOURNMENT (1 Minute)**
   October 7, 2015—4210 Riverwalk Parkway Riverside, Lemon / Lime
   Rooms

NOTICE: <u>Items on the agenda</u>: Any member of the public may address this meeting of the Emergency Medical Care Committee or any items appearing on the agenda by raising their hand to be recognized by the Chair or acting Committee Chairperson. If a member of the public desires to speak, they must do this before or anytime during discussion of the item. All comments are to be directed to the Emergency Medical Care Committee and shall not consist of any personal attacks. Members of the public are expected to maintain a professional, courteous decorum during their comments. A three-minute limitation shall apply to each member of the public, unless the Chair extends such time. No member of the public shall be permitted to "share" his/her three minutes with any other member of the public.

<u>Items not on the agenda</u>: Any member of the public may address this meeting of the Emergency Medical Care Committee on any item that does not appear on the agenda, but is of interest to the general public and is an item upon which the Committee may act. All comments are to be directed to the Emergency Medical Care Committee and shall not consist of any personal attacks. Members of the public are expected to maintain a professional, courteous decorum during their comments. A three-minute limitation shall apply to each member of the public who wishes to address the Committee on a matter not on the agenda. No member of the public shall be permitted to "share" his/her three minutes with any other member of the public. Usually, any items received under this heading are referred to the staff for further study, research, completion, and/or future action.

It is the responsibility of the members of the committee to disseminate information from EMCC meetings to the organizations they represent. Any questions regarding meeting or agenda items may be addressed to Brian MacGavin, Assistant EMS Director, Riverside County EMS Agency at (951) 358-5029. **<u>Next meeting</u>: Wednesday, July 1, 2015, 9:00 AM - 10:30 AM, The Towers of Riverwalk Building, 4210 Riverwalk Parkway, Riverside, CA., Lemon / Lime Conference Rooms.**

EMCC agendas with attachments are available online at www.rivcoems.org

The County of Riverside does not discriminate on the basis of disability in admission to, access to, or operations of its programs, services or activities. It is committed to ensuring that its programs, services, and activities are fully accessible to and usable by people with disabilities. If you have a disability and need assistance, contact Brian MacGavin at (951) 358-5029.

EMCC meetings are audio recorded to facilitate dictation for minutes.

EMCC Draft Minutes
April 1, 2015

TOPIC	DISCUSSION	ACTION
1. **CALL TO ORDER**		Chairperson Stan Grube commenced the meeting at 9:00 AM.
2. **ROUNDTABLE INTRODUCTIONS**		Self-introductions were performed.
3. **APPROVAL OF MINUTES**		Meeting minutes from the last EMCC meeting, January 7, 2015 were reviewed and accepted without changes.
4. **EMS AGENCY REPORTS**		
4.1 **EMS System Strategic Plan Bruce Barton & Brian MacGavin**	EMCC will be receiving progress reports, recommending priorities and providing advice on the implementation of the EMS System Strategic Plan. REMSA introduced the implementation reporting matrix to EMCC for reviewing the implementation progress of the EMS System Strategic Plan. EMCC made recommendations on refining the matrix for improved tracking of the implementation process. These changes will be made to the matrix for resubmission to EMCC. Within the next two EMCC meetings, REMSA will be asking EMCC for a recommendation on a group assignment for addressing objectives 2.1 & 2.2. Bruce explained that some goals do not necessarily fit into existing committees. Additionally, timeframes need to be consistent with budgetary constraints. Brian MacGavin suggested that a representative from County Mental Health attended EMCC meetings. The Ambulance Association of Riverside County (AARC) and transporting fire departments will be providing input into the County's Ambulance Ordinance changes. Bruce Barton said Goal 7 exists for the acknowledgement that we must prioritize system enhancements by looking for efficiencies due to decreases in traditional paying sources. Stan Grube suggested making Goal 7 a high priority. Jan Remm suggested	

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April 1, 2015

	contacting the CFO from RCRMC. There was further explanation and discussion of the implementation of the EMS System Strategic Plan.	
5. OTHER REPORTS		
5.1 PMAC – Steve Patterson	At the last PMAC meeting there was discussion on the Ambulance Patient Offload Delay (APOD) issue. The APOD regional task force's next meeting is on April 9. Starting soon there will be a 90-day redirection pilot program for non-critical patients. The results will be reviewed and analyzed to determine best practices and long term solutions.	Information only.
5.2 PHEPR Branch Ramon Leon	On June 4 there will be a tabletop exercise on the evacuation of a nursing Home. July 14, 2015 there will be pediatric disaster response & emergency preparedness training.	Information only.
6. UNFINISHED BUSINESS		
6.1 AED Resolution Brian MacGavin	Next week Bob Roy, Brian MacGavin, Rob Johnson and Randall Bynder will be having a conference call regarding the resolution requiring new commercial building having AEDs. Additionally, since most new building construction is within the boundaries of the cities, having a County ordinance or resolution would have little impact. The subcommittee would like to initiate a program that would assist the cities with legislation promoting AEDs within their jurisdictions and keep them updated on the progress of State legislation introduced earlier this year.	Information only.
6.2 Board of Supervisors Report Blake Goetz	The subcommittee has reviewed the draft report but we are still waiting on data to be submitted. We should have the report completed for EMCC's approval at the next meeting.	Information only.
6.3 EMS Plan – Bruce Barton	The last EMS Plan approval from the State (EMSA) was for the 2010 submission. EMSA indicated that the Pass and the Mountain Plateau Zones have to be called non-exclusive because they both gone through a competitive bid process. REMSA has amended our submission to show this change. For the 2013 submission EMSA is requesting a language that would change how Riverside County defines emergency ambulance services. This request is outside of	Information only.

EMCC Draft Minutes
April 1, 2015

	regulations and the County does not agree with this language change. REMSA will not be submitting the EMS Plan's Transportation Plan update to EMSA until this can be resolved.	
6.4 Membership Update Brian MacGavin	The position for the District Three representative on EMCC is still vacant. Those members with terms expiring on June 30, 2015 should contact their constituent organizations to renew their terms. If they are not interested please let them know so they can find another representative. Please contact Brian MacGavin if you need assistance.	Information only.
7. NEW BUSINESS		
8. OPEN COMMENTS	Phil Rawlings announced that CAL FIRE / Riverside County Fire Department will be hiring 30 paramedics on April 27, 2015. Blake Goetz announced that Palm Springs International Airport will be having its triennial response exercise on May 13, 2015. There was further discussion on promoting CPR and capturing how many people are being trained in CPR throughout the County. Brian MacGavin announced that Rob Roy wasn't able to attend today's EMCC meeting. On April 7 he will be recognized at the Board of Supervisors' meeting by the Public Health Department as one of their Community Champions for his promotion of CPR and AEDs. Dr. van Stralen announced that REMSA will be sponsoring a conference in March 2016. Tammy Messmer announced that the next Ambulance Association meeting will be in the first floor conference rooms on April 23 at 9:30.	Information only.
9. NEXT MEETING / ADJOURNMENT	July 1, 2015. Same location	Information only.

EMS System Strategic Plan Implementation Reporting Matrix

The following is a synopsis of the goals and objectives from the EMS System Strategic Plan. The purpose of this matrix is to track and report on the implementation progress. The EMS System's Strategic Plan can be viewed at: http://remsa.us/documents/systemevaluation/

Synopsis of Goals and Objectives	Priority Rating	Goal Objective Precedent	Goal Objective Dependent	Time Years	Group	% Done	Notes As of June 2015
1. CQI Program that Optimizes Patient Outcomes							1.1, 1.6 & 1.5 done. Other objectives in progress or waiting for improved data collection & exchange.
1.1 Evaluate & modify EMS CQI Plan	High			1+	CQILT	100%	
1.2 Develop & implement a comprehensive data reporting program	High			4+			
1.3 Align training programs for optimizing patient outcomes	High			1+			
1.4 Performance-based training programs optimizing patient outcomes	Med			4+			
1.5 Stakeholder involvement in using CQI tools & recognizes outliers	Med			1+			
1.6 Revised REMSA policies to support EMS CQI Plan	High			1+			
1.7 Design & develop research programs	Med	7 & 9	7 & 9	1+			
2. EMS Resource Utilization that Maximize capacity & efficiency			7 & 9				Objectives 2.3, 2.4 & 2.5 need to start ASAP Objective 2.1 timeframe recommend increase to 3+.
2.1 Task Force (TF) for Emergency Med Dispatch (EMD) implementation	High	7.4		3+	TBD		
2.2 TF for EMS communication & resource coordination plan	Med	7.4		1+	TBD		
2.3 Establish EMS equipment standard program	High			1+			
2.4 Update ALS program requirements	High			1+			
2.5 New ALS first responder agreements by July 1, 2015	High			1+			
2.6 Multiple patient management in cord with med health cord center	High	7.4 & 9.3		4+			
3. EMS Innovations that Improve Patient Outcomes		1 & 7	1 & 7		REMSA		APOD Regional Workgroup. Pilots for alternate destinations and treat & release programs. Waiting for direction from EMSA.
3.1 Targeted contemporary EMS delivery methods	Med			2+			
3.2 Create an alternative EMS delivery steering group for the above	Med			1+			
3.3 Group to collect data and create business plans for above	Med			4+			
3.4 Test viable models and collect data for the above	Med			4+			
3.5 Develop sustainable funding models for alternative delivery models	Med			2+			
3.6 Submit draft plans and models for EMS stakeholder input	Med			2+			
3.7 Formally integrate alternate delivery models into the EMS system	Med			4+			
4. Improved Efficiencies for EMS Services for Mental Health patients		7	7		REMSA		Voluntary psych transport services. Field response teams remove 5150s & enhance voluntary services
4.1 Conduct baseline assessment of mental health needs for EMS pts.	High			1+		100 %	
4.2 Prepare a plan for recommended innovations	High			1+	MH		
4.3 Early monitoring & reports on goal 4 initiatives & innovations	Med			2+			

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5. Reduce Ambulance Patient Offload Delays (APOD)s			2, 3, 4, 7 &		APOD TF		APOD TF 90 day pilot start
5.1 Regional TF to address APODs	High		11	1+		50%	May 1, 2015.
5.2 Incorporate Calf Hospital Association's study findings	High			1+		50%	
5.3 REMSA policy to implement & monitor results of above	High			1+		50%	
5.4 Hospital policy to implement & monitor results of above	High			1+			
5.5 TF to publish best results to assist other EMS systems	Low			2+			
6. Improved Interfacility Transport (IFT) & Event Medical Requirements			7		REMSA		New policies in affect April
6.1 Assemble group to advise REMSA goal on 6 recommendations	Medium			1+			1, 2015. CAAS, radio &
6.2 This group should consider systemwide impacts	Medium			1+	RCAA		disaster surge
6.3 Submit draft requirements for review by REMSA & EMS committees	Medium			1+			requirements. County
6.4 Develop protocols for IFTs with stricter medical oversight	Medium			1+			Ambulance Ordinance
6.5 Explore the need for gurney/wheelchair van oversight	Low			1+			changes.
7. Assure a Financial Stability and Cost Effective EMS System			2, 3, 4, 5, 9,		REMSA		Less funding based on
7.1 Establish methods/metrics to ID & quantify baseline costs in system	High		10, 11 & 12	1+			meeting medical necessity.
7.2 ID current funding sources for the EMS system's services	High			1+			Increases in denial of
7.3 ID & quantify costs /savings of improvements from this plan	High			2+			claims.
7.4 ID mechanism for sustain funding for Strategic Plan improvements	High			2+			Need to become more
7.5 Quantify expected funding changes from healthcare reform	High			2+			efficient & prioritize costs.
7.6 ID Opportunities to improve economics from alternate EMS models	High						
8. Evaluate / Redesign EMS Administrative & Advisory Structure					REMSA		See REMSA org chart
8.1 Adjust REMSA staffing compared to like size counties	Low			1+			
8.2 Conduct baseline assessment of advisory & oversight groups	Low			1+			
8.3 Submit draft of advisory group models for stakeholder input	Low			1+			
8.4 Revise REMSA policies to support new committee structure	Low			1+			
9. Improve online Medical Direction, Leadership & System Coordination			7		REMSA		9.1 done
9.1 Create physician advisory group	Low			1+		100%	9.2, 9.3 & 9.4 in progress
9.2 Evaluate current base hospital model	Low			1+			
9.3 Determine a role for a medical health coordination center (MHCC)	Low			1+			
9.4 Develop the MHCC to support medical control & the MHOAC	Low	7.4		1+			
10. Emergency Ambulance Agreement Improvements			7		REMSA	100%	Completed
10.1 New ambulance agreement to include recommendations	High			1+		100%	
10.2 Implement new agreement by July 1, 2015	High			1+			

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Synopsis of Goals and Objectives	Priority Rating	Goal Objective Precedent	Goal Objective Dependent	Time Years	Group	% Done	Notes As of April 2015
11. DOPH, Mental Health & Public Safety Partner on Public Education			1 & 4		EMCC		County rebranding / reorg.
11.1 Determine leading causes of EMS transports	Low	1.2, 4.1	1.2	1+			of depts.
11.2 Convene a TF to address the goal 11	Low	4.2	4.2	1+			AED Resolution project
11.3 Establish agreements for goal 11	Low	4.1 & 4.2		2+			
11.4 ID resources and funding for goal 11	Low	7.4	7.4	1+			
11.5 Implement outreach, education and prevention strategies	Low		4.3	2+			
12. System-wide Education Program for EMS Personnel					REMSA		In progress
12.1 Investigate alternate education techniques	Low	3.1	3.1	1+			
12.2 Update educational programs to address patient needs	Low	1.3	1.3 & 11.5	1+	Edu &		
12.3 EMS education with qualified medical direction	Low	9	9	1+	Training		
12.4 Development of core contents for various levels of EMS providers	Low			2+	Comm.		
12.5 Explore funding sources for educational programs	Low	7	7	2+			
12.6 EMS Ed providers establish relationships with academic institutions	Low			2+			
12.7 Develop innovative solutions for educational barriers	Low			2+			
12.8 Develop bridging / transitioning programs	Low			2+			
12.9 TF for continued ed initiatives within primary & secondary programs	Low			2+			

DRAFT 6/12/15

RIVERSIDE COUNTY

EMERGENCY MEDICAL CARE COMMITTEE

2015

Annual Report

Reporting on the 2014 Calendar Year

INTRODUCTION

This report documents Riverside County Emergency Medical Care Committee's (EMCC's) observations of EMS matters in Riverside County for the 2014 calendar year only. By virtue of the EMCC membership (pursuant to Board of Supervisors Resolution No. 2013-052), these observations are composed by a varied group of individuals that make up this EMS advisory group. Reporting these observations will help to reinforce positive changes within Riverside County's EMS system particularly with the implementation of the recommended changes from the EMS system evaluation and strategic planning. Each member of the EMCC has been advised and tasked with communicating the information and actions approved by the EMCC to their respective constituencies.

EMCC MEMBERSHIP

EMCC Membership has been established by Board of Supervisors Resolution No. 2013-052 which currently consists of the following individuals:

Air Ambulance Provider Representative— Melissa Schmidt
Ambulance Association of Riverside County— Tammy Messmer
Prehospital Medical Advisory Committee (PMAC) Physician Representative—Stephen Patterson, MD
PMAC Prehospital Representative—Jim Price
Hospital Association Representative—Jan Remm
Contracted Ground Ambulance Provider Representative—Peter Hubbard
Riverside County Medical Association Representative—Deepak Chandwani, MD
Riverside County Fire Chiefs' Association Representative--Jason Keeling
Coachella Valley Association of Governments Representative—Randy Bynder
Western Riverside Council of Governments Representative— Rob Johnson
Riverside County Law Enforcement Agency Administrators Assoc. Rep.—Sean Hadden
Riverside County Fire Department Representative—Phil Rawlings
Supervisorial District One Representative—Robert Roy
Supervisorial District Two Representative—Stanley M. Grube, FACHE (EMCC Chair)
Supervisorial District Three Representative—Vacant
Supervisorial District Four Representative—Blake Goetz (Vice Chair)
Supervisorial District Five Representative—Kent McCurdy

STAFFING AND TRAINING

Riverside County has approximately 4,000 EMS personnel on a two-year credentialing renewal cycle. For the 2014 calendar year Riverside County EMS Agency (REMSA) credentialed 1,422 Emergency Medical Technicians (EMT) s (60 less than last year), 639 paramedics (15 more than last year) and 125 Mobile Intensive Care Nurses (MICN) s (15 less than last year).

For the 2014 calendar year there were 185,373 responses for 9-1-1 ambulance services and 81,651 responses for Inter-facility retail ambulance services totaling 267,024 ambulance responses. During the 2014/2015 ambulance permit cycle there were 19 ambulance providers that received a Riverside County Ambulance Operator Permit to provide ambulance services in

Riverside County. This is a decrease from 24 ambulances providers permitted to operate in Riverside County from the previous permit cycle. This trend will continue as REMSA persists in refining the requirements to become an ambulance provider in Riverside County.

In continuing with the established Policy and Procedures Manual's annual update cycle, the 2014 changes became effective April 1, 2015. REMSA and EMS stakeholders and participants work diligently to ensure the appropriate policies are addressed during each update cycle. Additionally, train-the trainer classes are rolled out during each update cycle to ensure there is consistent training among EMS providers.

Advanced Life Support (ALS) AMBULANCE EXCLUSIVE OPERATING AGREEMENTS

In 2014, there were no changes to Exclusive Operating Agreements (EOA). However, REMSA has continued to monitor these agreements and holds semiannual EMS Administrative Zone meetings for each EOA to review compliance and refine and modify response time zone requirements. Discussions regarding changes for a new agreement with American Medical Response (AMR) took place in 2014 and 2015 and on January 13, 2015 the new County agreement with AMR was approved by the Board of Supervisors.

EMS SYSTEM EVALUATION PROJECT

The Abaris Group's "As-Is" and Recommendations & Observations reports that were presented to the Riverside County Board of Supervisors on February 11, 2014. Since that time EMS system stakeholders have been working on system wide strategic plan which was finalized in September 2014. All agendas, minutes and reports for the EMS system evaluation and strategic planning process can be accesses at: www.rivcoems.org.
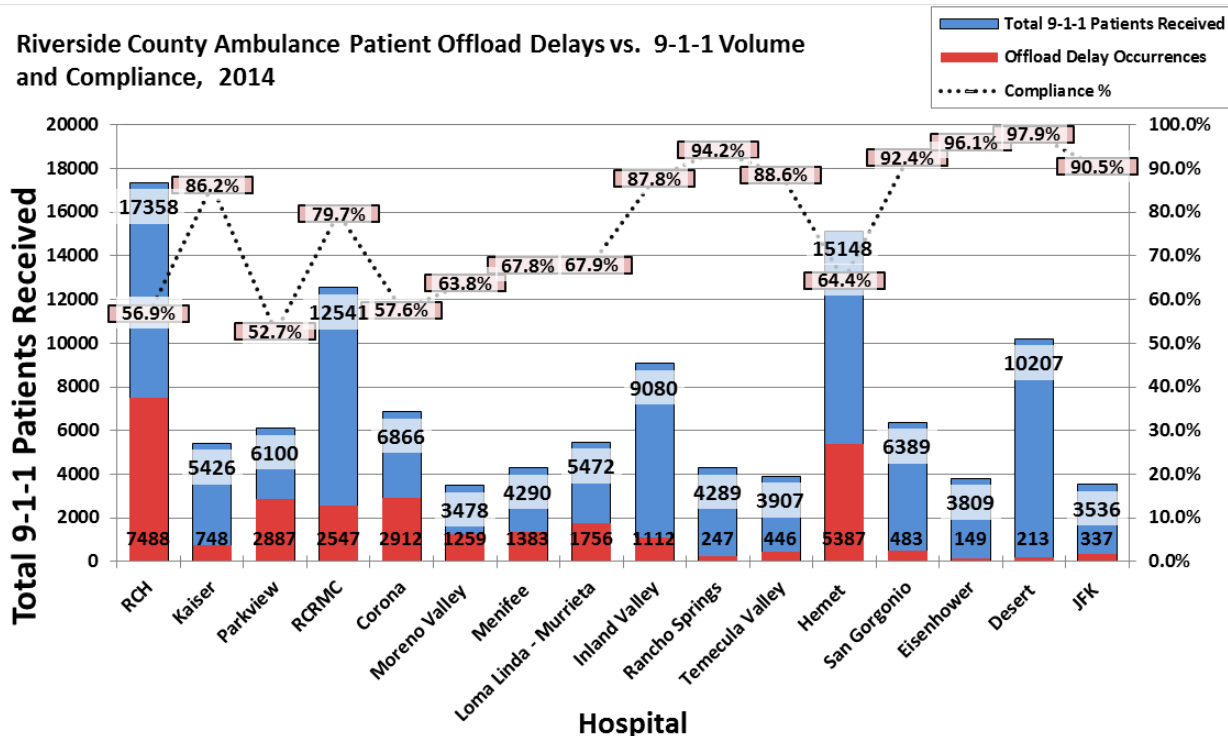
TRANSPORTATION PLAN

There have been no changes in the transportation plan for 2014.

HOSPITALS

On April 1, 2014 Riverside County started its stroke receiving center system allowing ambulance providers to transport patients suffering from strokes to designated stroke centers. The following hospitals are currently designated as a stroke receiving center for Riverside County: Desert Regional Medical Center, Eisenhower Medical Center, Kaiser Moreno Valley Medical Center, Kaiser Riverside Medical Center, Riverside Community Hospital, Riverside County Regional Medical Center and Temecula Valley Hospital.

Ambulance Patient Offload Delay (APOD) data presented to EMCC shows that APODs, delay hours and number of ambulance transports have continued to rise since 2011. For AMR, the primary contracted 9-1-1 ambulance provider, the 2014 occurrences of ambulance patient offload delays totaled 29,354 which is up by 529 more than there was in 2013. The following chart on page 4 provides information on APOD compliance for 2014. In 2014, as identified in the EMS System Strategic Plan, a regional taskforce consisting of representatives from EMS providers, the Hospital Association of Southern California, Inland Counties EMS Agency (ICEMA)

REMSA and hospital Chief Executive Officers (CEO)s to address this complex problem. This taskforce continues to have collaborative discussions in coming up with short, medium and long range solutions.

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

MEDICAL CONTROL

EMS medical control is maintained through REMSA's Policy Manual and through on-line medical direction with base hospitals. REMSA regularly updates their Policy Manual to keep the system abreast of new developments and improvements in the industry, with policy changes being reviewed and approved by PMAC and EMCC as appropriate. The 2014 Policy Manual reflected changes suggested by the Policy Review Forum and PMAC throughout 2013, and train-the-trainer sessions were held to ensure widespread consistent interpretation and application of the policy manual changes. Additionally, Base Hospital physicians and MICNs are required to undergo training to ensure familiarity with Riverside County Prehospital protocols.

DATA COLLECTION AND EVALUATION

Many of Riverside County's EMS providers are on Sansio HealthEMS Patient Care Report (ePCR) system. REMSA's agreement with Sansio expires on June 30, 2015 and the ePCR data collection system is currently going through a Request for Proposal (RFP) in order to establish an agreement with a vendor that will meet the demands of Riverside County's EMS system.

In 2013, REMSA implemented a web-based trauma registry. As the central site, REMSA has developed a data dictionary and provides continued training and support to Trauma Centers in Riverside County.

REMSA has participated in the California EMS Authority's Core Measures project since it began in 2013, and has submitted data for the years 2010, 2011, 2012, and 2013. Data for 2014 was submitted in March 2015. This data will allow Riverside County's EMS system to analyze and compare EMS related patient care outcomes for system-wide improvements.

PUBLIC INFORMATION AND EDUCATION

Due to the many organizations that train members of the public on first aid and CPR it is difficult to attain accurate numbers of laypersons trained in first aid and CPR. Several Riverside County prehospital provider agencies support American Heart Association (AHA) training centers for training the public in emergency cardiac care and cardiopulmonary resuscitation. The EMS system evaluation project has identified that a system-wide coordinated EMS public information and education program is needed.

DISASTER RESPONSE

Public Health Emergency Preparedness and Response (PHEPR) Branch representatives provide reports on disaster preparedness activities and actual events at EMCC's quarterly meetings. In 2014, the PHEPR Branch jointly responded with the REMSA on a variety of incidents which included wild-land fires, severe flooding, hazardous material spills, and power failures. On a larger scale, the Medical and Health Department Operations Center (DOC) was activated in preparation for the arrival of immigrants at the Border Patrol Station in Murrieta, and for the response of Ebola, Measles, and Tuberculosis. The Medical and Health Communications Center (MH COMM) was activated in December in response to the patient relocation event that occurred at Arrowhead Regional Medical Center in San Bernardino County where the PHEPR Branch was responsible for coordinating all medical and health resources. The PHEPR Branch also conducted a countywide radio communications exercise that exposed some vulnerabilities of with satellite phones. Additionally, there has been continued development of the County's mass prophylaxes plan, the Medical Health Operational Area Coordination Plan, and the Department of Public Health Emergency Operations Plan.

CONCLUSION

The EMCC membership allows representatives from diverse EMS system stakeholder organizations to review and discuss Riverside County's EMS system; this thereby facilitates broad collaborative recommendations for system-wide improvement. The EMCC supports the EMS system-wide evaluation and strategic planning project and looks forward to reviewing and discussing the outcomes of this important process. We thank the Board of Supervisors for their continued support in improving Riverside County's EMS system.

FOR CONSIDERATION BY EMCC

DATE: June 24, 2015

TO: EMCC

FROM: Brian MacGavin, REMSA Assistant Director

SUBJECT: EMCC Membership and Term Dates

ACTION: Representatives with term dates expiring on June 30, 2015 should contact their constitute organization for a renewal of their term date or for a nomination of another representative

Member	Representing	Term Dates
Jan Remm	HASC	NA
Randal Bynder	CVAG	July 1, 2013--June 30, 2016
Vacant	RCMA	July 1, 2012--June 30, 2015
Blake Goetz	District Four	July 1, 2014--June 30, 2017
Stan Grube	District Two	July 1, 2014--June 30, 2017
Sean Hadden	RCLEAA	July 1, 2013—June 30, 2016
Peter Hubbard	AMR	NA
Cameron Kaiser	Co. Health Officer	NA
Jason Keeling (pending)	RCFCA	July 1, 2015--June 30, 2018
Tammy Messmer	Ambulance Association	July 1, 2013—June 30, 2016
Kent McCurdy (pending)	District Five	July 1, 2015--June 30, 2018
Vacant	District Three	July 1, 2014--June 30, 2017
Daved van Stralen, MD	REMSA Med Director	NA
Stephen Patterson (pending)	PMAC Physician	July 1, 2015--June 30, 2018
Jim Price	PMAC Prehospital	July 1, 2013--June 30, 2016
Phil Rawlings	Riverside Co Fire Dept.	NA
Robert Roy	District One	July 1, 2014--June 30, 2017
Rob Johnson	WRCOG	July 1, 2013—June 30, 2016
Melissa Schmidt	Air Ambulance Provider	July 1, 2013—June 30, 2016