



**San Bernardino County
Emergency Medical Care Committee**

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June 8, 2012

San Bernardino County
Board of Supervisors
385 North Arrowhead Avenue
San Bernardino, CA 92415

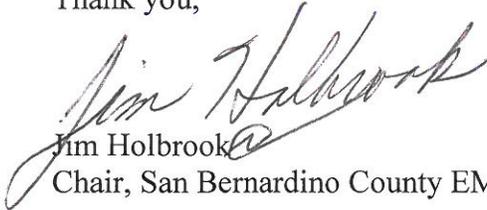
Dear Members of the Board:

RE: EMERGENCY MEDICAL CARE COMMITTEE - 2011 ANNUAL REPORT

Enclosed for your review is the 2011 Annual Report for the San Bernardino County Emergency Medical Care Committee (EMCC).

Please contact me electronically at jholbrook@craftonhills.edu or by telephone at (909) 389-3251 if I can assist you.

Thank you,


Jim Holbrook
Chair, San Bernardino County EMCC

Enclosure

cc: Virginia Hastings, Executive Director, ICEMA
Reza Vaezazizi, MD, Medical Director, ICEMA
EMCC Official File



SAN BERNARDINO COUNTY EMERGENCY MEDICAL CARE COMMITTEE

2011 ANNUAL REPORT



INTRODUCTION

This writing is to document the San Bernardino County Emergency Medical Care Committee (EMCC) processes for 2011. Essentially the focus of the EMCC was to provide a platform for the diverse groups and individuals which form the Emergency Medical Services System. It also acts as an advisory group to the Board of Directors for Inland Counties Emergency Medical Agency (ICEMA).

The local EMS system continues to mature and is formally exploring patient outcomes and other evidence based processes. San Bernardino County Emergency Services continues to advance the care and other services to the ill or injured.

EMCC MEMBERSHIP

The 2011 EMCC members were:

SEAT NO.	MEMBER	POSITION
1	Diana McCafferty	Private Ambulance Provider (Vice-Chair)
2	Jim Holbrook	EMT-P Training Institution (Chair)
3	Margaret Peterson	Hospital Administrator
4	Pranav Kachhi, MD	ED Physician - Non-Trauma
5	Vacant	City Manager/Deputy City Manager/Assistant Manager
6	Vacant	Consumer Advocate
7	Michael Smith	Fire Chief
8	Stephen Miller	Law Enforcement
9	Art Andres	EMT/Paramedic - Public Sector
10	Rick Britt	Emergency Medical Dispatch/Communications
11	Allen Francis	Nurse - MICN
12	Troy Pennington, MD	Physician - Level II Trauma
13	Roy Cox	Air Ambulance Provider
14	Vacant	Physician - Level I Trauma
15	Vacant	EMT/Paramedic - Private Sector

The EMCC positions representing City Manager and Consumer Advocate continued to be unfilled during the 2011 sessions. These vacancies originated during the 2009 sessions, and ICEMA has been working to fill these positions. On April 5, 2011, the Board of Supervisors approved revisions to the EMCC ordinance. The EMCC bylaws were revised to reflect these approved changes. These changes will result in two accredited field paramedics, one representing public and one representing private agencies. Art Andres continues to serve in the public sector role and the new position for accredited EMT/Paramedic private sector will be filled during the 2012 sessions. The other change to the EMCC membership will be the addition of a physician from a Level I Trauma Center.

EMCC members are required to be in compliance with the requirements for Ethics training as defined by Article 2.4 of Chapter 2 of Title 5 of the Government code (AB 1234).

MANPOWER AND TRAINING

Both on-line and off-line medical control protocols continue to assure medical control of emergency medical care. A series of protocols, both regular updates and emergency protocols, were discussed during the 2011 EMCC sessions. The protocol changes were stimulated by

changes in scientific or local system needs. Additionally, an AD HOC Committee was formed to evaluate minimum data requirements for patient care records and to standardize abbreviations. Emergency medical care and quality patient outcomes and the measurements of those outcomes are continuing to advance within the system. The implementation of an accurate measure and documentation of outcomes of emergency medical care were more fully realized system wide and will remain a dynamic process. Following the full system wide implementation of electronic data collection, the review of system and quality assurance measures will need to be added to the processes already instituted.

The local training institutions, Victor Valley College and Crafton Hills College, have implemented student training sessions on the use of electronic patient care documentation. The system continues through local provider and hospital based agency processes to forward the educational and training needs of the basic and advanced life support personnel system wide.

COMMUNICATIONS

The ability to communicate system issues including waiting to off load patients has shown progress as our larger system continues to meet these system challenges. The entire EMS system continues to explore and advance communications among all groups.

TRANSPORTATION

ICEMA reported on discussions of transportation issues during the 2011 sessions. These committee deliberations were to extend existing performance based contract scheduled to expire during the 2012 session. External confounding issues at the state level have influenced these discussions. Continued funding from the performance based contract fines was added to other funding sources to augment the system needs of the region. The EMCC endorsed the expenditure of \$750,000 for the purchase of a new EMS data system from ImageTrend.

ASSESSMENT OF HOSPITALS AND CRITICAL CARE CENTERS

The EMCC received standing emergency medical services system management reports at each of the scheduled meetings. These standing reports included quarterly reports for Trauma systems and base hospital statistics and the monthly reports of electronic patient care reports, hospital bed delays, medication / procedures / and type of patient summary reports, and hospital surveillance reports. These standing reports assist the overall system as it continues to explore and advance in communication and systems knowledge between all groups.

MEDICAL CONTROL

The medical control protocols and system processes continue to assure overall medical control of system. Twenty-two (22) protocols, both regular updates and new protocols, were discussed during the 2011 EMCC sessions. The protocol changes were stimulated by changes in scientific or local system needs. Based on State level regulatory changes, an entire medical control system for the Advanced Emergency Medical Technician (AEMT) was discussed and the EMCC endorsed thirty-three (33) protocols for this level of practitioner. The system continues through local provider and hospital based agency processes to forward the educational, training, and personnel needs of the basic and advanced life support personnel system wide.

Additionally, MEDCOR implemented a process to enhance the remote EMS services to include advanced life support to the employees of the Molycorp Mountain Pass Mine near the Nevada border.

DATA COLLECTION AND EVALUATION

The EMS system continued to document progress in data collection and analysis during the 2011 sessions. Substantial agency(s) and personnel time were required in order to accurately collect, review, analyze, and compile reports for various discussions and decision making loops. Continuing efforts have been made toward fully implementing electronic collection system wide. The system is moving out of the initial phase and some system outcome data exists.

The transportation industry continues to be further along on the continuum of electronic transfer than public response agencies. During the 2011 session the following San Bernardino County providers are sending data to the ICEMA server on a daily basis:

- 1) American Medical Response (AMR) Rancho
- 2) AMR Redlands
- 3) AMR Victorville
- 4) Baker EMS - Baker
- 5) Baker EMS - Needles
- 6) Barstow Fire Department
- 7) Big Bear City Fire Valley Paramedic Service
- 8) Big Bear Lake Fire Protection District
- 9) Desert Ambulance
- 10) Fort Irwin Fire Department
- 11) Mercy Air
- 12) Morongo Basin Ambulance Association
- 13) Morongo Valley Fire Department
- 14) Running Springs Fire Department
- 15) San Bernardino City Fire Department
- 16) San Bernardino County Sheriff's Aviation
- 17) San Manual Fire Department
- 18) Upland Fire Department - Air
- 19) Upland Fire Department - Ground

Memorandum of Understandings and full implementation is expected for the following agencies:

- 1) Crest Forest Fire Department
- 2) Sheriff's Search and Rescue

Despite a great deal of effort, the transfer and receipt of CONFIRE data was not successful.

The following fire departments remain outside of the ICEMA Management Information and Surveillance System (MISS):

- 1) Apple Valley Fire Department
- 2) CAL FIRE - City of Highland Fire Department
- 3) CAL FIRE - City of Yucaipa Fire Department
- 4) Chino Valley Fire Department
- 5) Colton Fire Department

- 6) Combat Center Fire Department - Twentynine Palms
- 7) Loma Linda Fire Department
- 8) Marine Corp Logistics Base - Barstow
- 9) Montclair Fire Department
- 10) Ontario Fire Department
- 11) Rancho Cucamonga Fire Department
- 12) Redlands Fire Department
- 13) Rialto Fire Department
- 14) San Bernardino County Fire Department

PUBLIC INFORMATION AND EDUCATION

The EMS system continues to provide quality care with the STEMI system processes and the implementation of a new Stroke receiving process. Both of the system construct highlight successful regionally based programs. The EMCC had presentations from the Crest Forest Fire Department on a multiple patient incident and ImagineTrend on issues impacting the electronic documentation system.

DISASTER RESPONSE

During this past year our local agencies responded to significant regional and state wide large scale issues including the potential for significant threats. Crest Forest presented an overview of a multi-casualty response.

CONCLUSION

It has been the goal of the EMCC to allow broad-based system participation and discussions and believe these activities have advanced the local EMS system. The EMCC applauds the EMS system and the participants as an amazing collection of the best and brightest in California.