



ICEMA SYSTEMS ADVISORY COMMITTEE

MEETING NOTICE

June 11, 2014
1300 - 1500

ICEMA
Training Rooms A & B
1425 South "D" Street
San Bernardino, CA 92408

ICEMA
1425 South "D" Street
San Bernardino, CA 92415-0060
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AGENDA

ICEMA SYSTEMS ADVISORY COMMITTEE

June 11, 2014

1300 - 1500

Purpose: Information Sharing

Meeting Facilitator: Kevin Parkes

Timekeeper: Danielle Ogaz

Record Keeper: Danielle Ogaz

	AGENDA ITEM	PERSON(S)	DISCUSSION/ACTION	TIME
I.	Welcome	Kevin Parkes		1300 - 1301
II.	Introductions	All		1301 - 1303
III.	Approval of Minutes	All	Discussion/Action	1303 - 1305
IV.	Task Force Updates			1305 - 1315
	A. Triage Tag Program Task Force	Sandy Carnes	Discussion	
	B. Active Shooter	Mike deMoet	Discussion	
V.	Discussion/Action Items			
	A. MAC Update	Todd Sallenbach	Discussion	1315 - 1325
	B. D10 Versus D50	Todd Sallenbach	Discussion/Action	1325 - 1340
	C. 5150 Patients	Kevin Parkes	Discussion	1340 - 1345
	D. EMS Resource Readiness Task Force	Kevin Parkes	Discussion/Action	1345 - 1400
	E. Procedures for EMS Monitoring of Multiple Patients	Kevin Parkes	Discussion	1400 - 1415
VI.	Public Comment	All	Discussion	1415 - 1425
VII.	Round Table/Announcements	All	Discussion	1425 - 1435
VIII.	Future Agenda Items	All	Discussion	1435 - 1438
IX.	Next Meeting: August 13, 2014	All	Discussion	1438 - 1439
X.	Adjournment	Kevin Parkes	Action	1439 - 1440



MINUTES

SYSTEMS ADVISORY COMMITTEE

April 9, 2014

1300 to 1500

AGENDA ITEM		DISCUSSION/FOLLOW UP	RESPONSIBLE PERSON(S)
I.	WELCOME/INTRODUCTIONS	Meeting called to order at 1310.	Kevin Parkes
II.	APPROVAL OF MINUTES	The approval of minutes was deferred to the next meeting on June 11, 2014, due to lack of quorum.	Kevin Parkes
III.	Task Force Updates		
	A. Triage Tag Program Task Force	The Triage Tag Task Force is currently developing a triage tag training video for first responders, transport providers and hospitals. A future plan will include hands on training. The task force expects to provide final recommendations at the next meeting.	Sandy Carnes
	B. Active Shooter	The Active Shooter Task Force recommends waiting to develop system-wide procedures until the Commission on Peace Officer Standards and Training (POST) and the State EMS Authority (EMSA) develops statewide guidelines. Currently, each active shooter program is handled between EMS providers and law enforcement agencies. No action due to lack of quorum.	Mike deMont
IV.	DISCUSSION/ACTION ITEMS		
	A. MAC Update	A MAC task force is currently developing recommendations for EMT-P and MICN educational requirements for accreditation. A second MAC task force is identifying processes that will accommodate operational requirements while maintaining data accuracy and accountability.	Kevin Parkes
	B. D10 Versus D50	Tabled to next meeting on June 11, 2014.	Todd Sallenbach
	C. 5150 Patients	Discussion regarding the impact 5150 patients have on the EMS system and law enforcement occurred. Topic will remain a standing agenda item.	Kevin Parkes

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	D. EMS Resource Readiness	The committee discussed EMS resource readiness. The committee would like to create a task force that will develop ideas and identify best practices for improving hospital patient throughput and reduce offload delay. No action due to lack of quorum.	Kevin Parkes
IV.	PUBLIC COMMENT	None	
V.	ROUND TABLE/ ANNOUNCEMENTS	None	
VI.	FUTURE AGENDA ITEMS	- D10 Versus D50 - 5150 Patients - EMS Response Readiness Task Force	Danielle Ogaz
VII.	NEXT MEETING	June 11, 2014	
VIII.	ADJOURNMENT	The meeting adjourned at 1435.	

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Attendees:

NAME	SAC POSITION	EMS AGENCY STAFF	POSITION
<input type="checkbox"/> Mitch Dattilo - SBC Sheriff	Sheriff's Department	<input checked="" type="checkbox"/> Tom Lynch	EMS Administrator
<input type="checkbox"/> VACANT	Public Safety Answering Points (PSAPs)	<input type="checkbox"/> Denice Wicker-Stiles	Assistant Administrator
<input checked="" type="checkbox"/> Mike Antonucci	County Office of Emergency Services	<input checked="" type="checkbox"/> Ron Holk	EMS Nurse Specialist
<input type="checkbox"/> Ray Ramirez	Fire Service	<input checked="" type="checkbox"/> Danielle Ogaz	EMS Specialist
<input checked="" type="checkbox"/> Sandy Carnes	EMS Officers		
<input checked="" type="checkbox"/> Mike deMoet, Montclair Police Chief	Law Enforcement		
<input type="checkbox"/> Llyod Duplechan, KP - Ontario	Receiving Hospital Representative		
<input checked="" type="checkbox"/> Kevin Parkes - SACH	Specialty Care Hospital Representative		
<input checked="" type="checkbox"/> Renee Colarossi	Private Ambulance Providers		
<input type="checkbox"/> William Hinton	Private Air Transport Providers		
<input checked="" type="checkbox"/> Al Daniel	Public Air Transport Providers		
<input type="checkbox"/> Randy Huey - SBC ISD	County Information Services		
<input type="checkbox"/> Pete Roebuck - CVFD	EMS Continuing Education Providers		
<input type="checkbox"/> Judd Symons - Symons Ambulance	Inyo County Representative		
<input checked="" type="checkbox"/> Rob DeForrest - Mono County EMS	Mono County Representative		
<input type="checkbox"/> Todd Sallenbach - Hi-Desert MC	MAC Liaison		
<input type="checkbox"/> Shane Panto - CHP	EMS Administrator Appointee		

GUESTS	AGENCY
Alan Bodor	SBC ISD
Patty Eickholt	SACH
Bill Jones	San Manuel FD
Diana McCafferty	AMR
Melissa McMurphy	Morongo Basin Ambulance
Sarah Morning	Redlands Community Hospital
Dr. Maxwell Ohikhuare	SBC Public Health
Joy Peters	ARMC
Stephanie Rasmussen	Upland FD
Shawn Reynolds	LLUMC
Art Rodriguez	Dessert Ambulance
Melanie Standon	Upland FD



PROCEDURES FOR EMS MONITORING OF MULTIPLE PATIENTS (San Bernardino County Only)

I. PURPOSE

Establish procedures that will allow the monitoring of multiple patients by EMS providers while waiting to offload patients in hospitals during extended ambulance offload delay intervals. To maintain sufficient resources to respond to additional emergency calls.

II. AUTHORITY

California Health and Safety Code Division 2.5, Chapter 4, Article 1707.220

Code of Regulations Title 22, Division 9, Chapter 4, Article 7, Sections 100128 and 100146

III. DEFINITIONS

Ambulance Transport: Transport of a patient from the prehospital EMS system by emergency ambulance to an approved EMS receiving hospital.

Advanced Life Support (ALS) Ambulance Transport Providers: Ambulance that transports ALS patients from the prehospital EMS system to an approved EMS receiving hospital.

Ambulance Patient Offload Time Interval Standard: In the ICEMA region, the established ambulance patient offload time interval standard is twenty-five (25) minutes.

Ambulance Arrival at the ED: The time the ambulance stops at the location outside the hospital emergency department (ED) where the patient is unloaded from the ambulance.

Ambulance Patient Offload Time: The actual time that the patient is physically removed from the ambulance gurney to the hospital equipment and the hospital representative signs the ePCR receiving the patient.

Ambulance Patient Offload Delay Interval: The resulting period of time produced when the ambulance patient offload time interval exceeds the established ambulance patient offload time interval standard.

IV. POLICY

All ALS ambulance transport providers are authorized to assign multiple patients to be monitored by a single EMS crew during periods of delayed ambulance patient offload time intervals that impact the ability of the EMS provider to respond to additional calls. These procedures may be activated only by the transport provider and their designated supervisor in consultation with the EMS crews in the hospital.

V. PROCEDURE

- One (1) EMS crew (paramedic and EMT) may monitor only the number of patients determined to be safe by the supervisor and the EMS crew.
- Patients must be stable and require no additional medications or procedures while being monitored by an EMS crew or until transferred to a hospital gurney under hospital care.
- Patients must be in the same vicinity of the hospital and within sight of the assigned EMS crew at all times and the EMS crew may not be split up.
- Patients may be on an ambulance or hospital gurney, surge bed, cot or on chairs that allows appropriate monitoring and patient safety.
- Patient vital signs, condition and changes must be monitored and documented every thirty (30) minutes.
- An EMS Crew may continue to monitor multiple patients until all patients have been transferred to hospital care. Additional patients may be assigned to an EMS crew at the discretion of the supervisor provided all of these procedures continue to be met.
- If patient's condition deteriorates, the EMS crew will notify ED staff immediately and transfer care to the hospital.
- Transport agency supervisors will check crews monitoring multiple patients regularly and assist with monitoring patients as required.
- The transport provider must notify the ICEMA EMS Duty Officer (EMSDO by e-mail whenever this process occurs. The notification must include the name of the hospital, the number of units and the duration of the offload delay for each unit where an EMS crew will be caring for multiple patients.

VI. REQUIRED DOCUMENTATION

- Documentation will be maintained on each patient via the electronic patient care record (ePCR).
- Patient care information will be transferred to the monitoring EMS crew via electronic transfer to maintain continuity of documentation.
- Agencies using paper patient care records (01As) will leave a completed green sheet with the EMS crew monitoring the patient.