



# County of Santa Cruz

## BOARD OF SUPERVISORS

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FOURTH DISTRICT

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AGENDA: 4/20/99

April 9, 1999

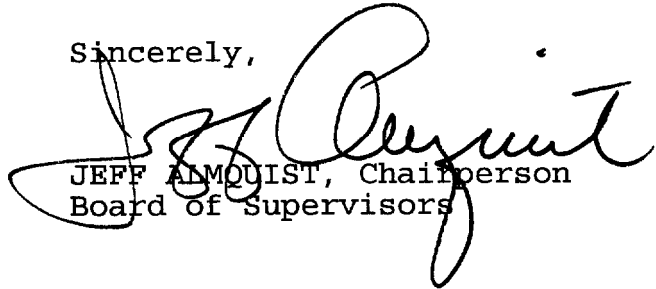
BOARD OF SUPERVISORS  
County of Santa Cruz  
701 Ocean Street  
Santa Cruz, CA 95060

RE: ANNUAL REPORT OF THE EMERGENCY MEDICAL CARE COMMISSION

Dear Members of the Board:

Attached is the Annual Report of the Emergency Medical Care Commission for calendar year 1998. I recommend that the Board accept and file this report and direct the Chairperson to thank the members of the Commission for their efforts on the County's behalf.

Sincerely,



JEFF ALMQUIST, Chairperson  
Board of Supervisors

JA:ted

cc: Emergency Medical Care Commission

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EMERGENCY MEDICAL  
SERVICES

# COUNTY OF SANTA CRUZ

HEALTH **SERVICES** AGENCY

1080 EMELINE AVENUE, P.O. BOX 962  
SANTA CRUZ, CA 95061

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SANTA CRUZ COUNTY

## EMERGENCY MEDICAL CARE COMMISSION

April 6, 1999

Santa Cruz County Board of Supervisors  
County of Santa Cruz  
701 Ocean Street  
Santa Cruz, CA 95060

Dear Honorable Members of the Board of Supervisors:

RE: Emergency Medical Care Commission Annual Report - 1998

Attached to this cover letter is the 1998 Annual Report from the Emergency Medical Care Commission. As evidenced by the report content, it has been another active year for the Commission, in spite of several significant setbacks. Undoubtedly the most pressing issue on all of the Commissioners' minds for the current year on the EMCC is the County's pursuit of a new EMS Program Manager. Your earnest attention to this matter is critical for the support, development and planning of the County's EMS delivery system.

On behalf of all the Commission members, I would like to express our appreciation to the Board of Supervisors for the opportunity we share in providing input and oversight of the County's Emergency Medical Services system.

Sincerely,

Ron Prince, Chair  
Emergency Medical Care Commission

cc: Charles Moody, HSA Administrator  
Dr. George Wolfe, HSA Medical Director  
EMCC Correspondence File

attach.

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## EMERGENCY MEDICAL CARE COMMISSION

### ANNUAL REPORT

1998

#### Role of the Commission

The role of the Emergency Medical Care Commission (EMCC) is to act in an advisory capacity to the Board of Supervisors and the County Health Officer on all matters relating to emergency medical services, to review the EMS related activities in the County, to provide residents of the County an opportunity to participate in the making of policy for the emergency medical services system, and to report the Commission observations and recommendations to the designated regulatory bodies.

#### Meeting Dates, Times and Locations

During calendar year 1998, the Commission meetings were held at 9:00 a.m. on the first Wednesday of the month. The meeting locations alternate between Dominican Santa Cruz Hospital, Watsonville Community Hospital, the Consolidated Emergency Communications Center and the County Health Services Agency located at 1080 Emeline Street in Santa Cruz. There were no meetings held in January, May, August and September. The meeting dates were changed starting in December 1998 to the second Wednesday of each month to avoid a standing scheduling conflict for the County Health Officer. Times and locations were not changed.

#### Commission Structure

There was one change to the membership of the Commission during 1998. Lt. Larry Heirigs representing the Law Enforcement Chiefs Association resigned due to reassignment out of the area. Chairperson Zuckswert resigned as chairperson but remained on the Commission. Vice-Chairperson Prince assumed duties as chairperson.

#### Supervisorial Appointees

First District:	Rayette Andrews, RN, Dominican Hospital
Second District:	Ira Lubell, MD, Medical Director, Santa Clara Valley Medical Center
Third District:	Jeanette Applegate, Vice President/Clinic Operations, Santa Cruz Medical Clinic
Fourth District:	Gary Smith, Chief, Watsonville Fire Department (as of February 1999, is the newly appointed Aptos/LaSelva Fire Chief)
Fifth District:	Lisa Angell, RN, Watsonville Community Hospital

**At-Large Appointees**

Representing Hospitals:,	Sister Julie Hyer, OP, Dominican Hospital (as of February 1999, Carol Adams, VP, is the representative)
Ambulance Service:	Robert Zuckswert, AMRW
County Medical Society:	Terry Lapid, MD, Medical Director, Dominican ED
County Chiefs Association:	Ron Prince, Chief, Santa Cruz Fire Department
Law Enforcement Chiefs Association:	Vacant
Consumers:	Sylvia Knapton, Retired journalist
Field Care:	Vacant

**County Support Staff**

George Wolfe, MD, County Health Officer  
 Robert Varty, Medical Care Program Administrator/Acting EMS Administrator  
 Kent Benedict, MD, EMS Medical Director  
 Ruth Shugart, TCIII (starting 8/98)  
 Mary Ann Woodward (ending 7/98)  
 Don Hiatt, EMS Program Manager (ending 7/98)

**Attendance**

See Attachment

**Annual Goals and Accomplishments**

The EMS system is comprised of eight different components. This 1998 report will summarize the goals and accomplishments of the Commission, as well as the challenges it faces with respect to each of the eight components:

1. Administration
2. Field Care and Transport
3. **Staffing** and Training
4. Communications
5. Medical Disaster Planning
6. Data Collection and Analysis and Quality Assurance
7. Specialty Care Facilities
8. Public Information and Education

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**1) Administration**

The Commission addressed several significant administrative issues during the course of the year. A **draft** of a new EMS Plan was developed. It is currently undergoing a review and comment process. Commission meetings have served as a forum for the ongoing discussion over

the role of the Plan, its underlying philosophy and how its usefulness can be maximized as a strategic planning tool for the EMS community. In conjunction with EMS Plan development, a draft Trauma Plan has also been developed and reviewed early in 1998. Finalization of the Trauma Plan is contingent upon adoption of the EMS Plan because of their inter-relatedness on many content areas. The Prehospital Advisory Committee has been instrumental in the development of both plans and devoted many hours of work to moving them forward.

The Commission also focused on strategic planning efforts to establish consensus on the direction that County-wide EMS should be moving in the future. As part of the process, the purpose and scope of responsibilities of the Commission were reviewed and evaluated in depth. From the planning sessions the most important priority that emerged was developing a vision of the future that would serve as a framework to guide the Commission's activities. It is hoped that this framework would be incorporated into an update and/or revision of the EMS Plan submitted to the State EMS Authority. The inter-relationship with the newly formed Ambulance Contract Compliance Commission (ACCC) was also the subject of much discussion as there are overlaps in responsibilities (by ordinance) of the two commissions.

There were developments that impeded the progress of the Commission's work in the latter part of the year. Most **significantly**, the resignation of the EMS Program Manager in July meant a reduction in staff support. This slowed review of the EMS and Trauma plans and introduced differing perspectives into the process and underlying philosophy. The absence of an EMS Program Manager, a position that has historically provided strong facilitation of EMCC processes, also has made it difficult to achieve closure and/or follow through on the work plan identified during the initial strategic planning meeting held on June 3, 1998. This unresolved issue continues to diminish the pace of the Commission's progress on a bulk of their activities.

The Commission supported efforts of the EMS Agency to promote the "Vision 2000" concept for EMS. A presentation was developed and made to various groups including union membership and administrators of interested organizations including AMRW and fire agencies. This was done to promote a common understanding of the direction EMS was taking nationally and to discuss the evolving roles that the EMS community is experiencing.

## **2) Field Care and Transport**

The Commission was involved in evaluating and taking a position on several issues affecting field care and transport. The Commission supported the approval of the Central Fire Protection District as an approved paramedic provider. The Commission received periodic updates on Central Fire paramedic activities. The Commission also supported the conversion to a new semi-automatic defibrillator for use by all first responders.

Commissioners participated in a subcommittee that reevaluated the ambulance transport boundary line following a request by Watsonville Community Hospital subsequent to its move closer to the freeway. This evaluation was performed in conjunction with the ACCC. Another area where the two commissions joined efforts has been around the issue of developing a basic life support transport ordinance. A joint committee has been established to explore a resolution

to the problem created by the new ambulance contract, wherein there is no longer the opportunity by the contractor to provide a reduced rate to various medical agencies for BLS transport.

### 3. Staffing and Training

The Commission endorsed the EMS Agency's use of the National Registry Test for certification of EMT-1's. This will prove advantageous to all parties involved. On another front, the Commission identified the need for standardized training on the new Zoll defibrillator units. The EMT-D curriculum content will be standardized.

### 4) Communications

The ACC has been primarily involved in this activity over the past year and will no doubt report their findings in their annual report.

### 5) Medical Disaster Planning

Issues surrounding Medical Disaster Planning were discussed in conjunction with strategic planning efforts but were not a part of Commission activities during 1998. The Commission did receive reports on activation of the Disaster Medical Service Facilities radio system following the major gas pipeline rupture. Additionally, the Hospital Emergency Access Radio system was tested for effectiveness.

### 6) Data Collection and Analysis and Quality Assurance

Data collection and analysis are an integral component of quality assurance activities. The Commission, through the Prehospital Advisory Committee (PAC), reviewed the QA process as outlined by the EMS Medical Director for evaluation of the performance of the Central Fire paramedics. Trauma quality review is also conducted through the PAC, on a quarterly basis. The Commission feels that the ability to conduct EMS related QA activity is hampered by the lack of a person designated to perform the data collection and analysis function. The expiration of the EMS data consultant's contract has reduced the capacity to evaluate overall system performance. Although a half-time position was created in the FY 98-99 budget to perform data related functions, the position was never filled because there was no EMS Manager to supervise the position. Until more comprehensive data can be captured and analyzed, it will be difficult for the Commission to effectively evaluate the more subtle qualitative aspects of system performance.

With regard to other data and QA issues, the Commission reviewed demographic performance statistics of the local emergency departments and the trends occurring. There was discussion over the return to the State EMS Authority of the Trauma grant funds due to concerns associated with funding ongoing operational costs. The need to develop formal trauma registry related to helicopter transport data has been identified as a high priority.

### **7) Specialty Care Facilities**

There have been several discussions regarding the County's relationship with the Trauma Centers regarding several key issues. Discussions have occurred on the merits of formalizing transfer agreements with the Trauma Centers. Issues on the availability and timeliness of outcome data on trauma cases affect the functioning of our system is of concern. Santa Clara County hospitals have been changing data systems and Santa Cruz County trauma information is slow in arriving. Overall, the Trauma Centers have been very supportive of our local QA efforts and have worked well with the PAC.

### **8) Public Education and Information**

The Commission has made efforts to coordinate with the Community Bicycle Coalition to assist in accident reduction. The Bicycle Safety Light Campaign was reviewed. Law enforcement was encouraged to more strongly enforce bicycle safety violations. It was discovered that last year, over 3% of the ambulance transports in the County involved bicycle accident victims. This translates to over 280 patients needing emergency transport to a hospital. The Public Information and Education Subcommittee has also focused on injury prevention with spinal cord injuries receiving most of the attention. To this end, Commissioners have worked to develop models to organize community efforts, disseminate information and identify funding. A packet of prevention education information using the Internet is being developed by the Watsonville Fire Department. Among the Subcommittee's recommendations is to develop a system to capture local data on spinal cord injuries. The Commission invited representatives from State Parks (lifeguard division) to a recent EMCC meeting in order to learn not only about spinal cord injuries and drowning statistics **from** local beaches, but also about challenges they face on rescues in the back country (such as Big Basin and Wilder Ranch). As a result of the presentation, the Commission is going to follow through with the Santa Cruz Consolidated Emergency Communications Center regarding methods to access the resources and capabilities that the State Lifeguards can provide in the rural areas of the County.

## EMCCATTENDANCE1998

X = Present

A = Absent

	J	F	M	A	M	J	J	A	S	O	N	D
<b>Andrews</b>	N	X	X	X	N	X	X	N	N	X	X	X
<b>Angell</b>	O	X	X	A	O	X	X	O	O	X	X	X
<b>Applegate</b>		A	X	X		X	X			X	X	X
<b>Hyer</b>	H	A	A	A	H	A	X	H	H	A	A	A
<b>Knapton</b>	E	X	X	X	E	X	X	E	E	X	X	X
<b>Lapid</b>	E	X	X	A	E	X	X	E	E	A	X	X
<b>Lubell</b>	T	A	X	X	T	X	A	T	T	X	X	A
<b>Prince</b>	I	X	X	X	I	X	X	I	I	X	X	X
<b>Smith</b>	N	A	X	X	N	X	X	N	N	A	X	X
<b>Zuckswert</b>	G	X	X	A	G	X	X	G	G	A	A	A