



# County of Santa Cruz

## HEALTH SERVICES AGENCY

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HEALTH SERVICES AGENCY  
ADMINISTRATION

October 17, 2001

**Agenda: November 6, 2001**

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

### **RE: Report Back on Emergency Medical Services Planning**

Dear Members of the Board:

On June 26, 2001 your Board directed the Health Services Agency (HSA) to proceed with the EMS planning process including development of a Request for Proposal (RFP) for ambulance transport services and to return to your Board with a progress report on October 23, 2001. This report was deferred to November 6, 2001 pending the results of the second annual EMS Forum held October 10, 2001.

#### Planning Efforts:

In April 2000, HSA and the Emergency Medical Services Integration Authority (EMSIA) co-sponsored an EMS Forum, which began the process of discussing change possibilities in the County's EMS system. Following the Forum, HSA staff conducted a community survey about EMS priorities which identified a number of issues regarding response times, cost, quality, and design of the medical emergency response system.

During 2001, HSA staff worked with members of the Emergency Medical Care Commission (EMCC) and others to review the current ambulance transportation contract. Additionally, HSA solicited possible interest in bidding for an ambulance services contract in Santa Cruz among members of the American Ambulance Association membership in California, Nevada, and Arizona. There were seven responses to the Request for Interest, including one from the current contractor.

In the last three months, HSA sponsored a series of focus groups with fire services, hospitals, medical providers, rural fire, labor, consumers, and seniors to delineate goals for the EMS system and minimum requirements for the RFP. Also, the second annual EMS Forum was sponsored by the EMCC and was held October 10, 2001. 73 participants plus EMS staff

attended the EMS Forum. During this Forum, Dr. Kent Benedict, EMS Medical Director, presented a “snapshot” of the system as it currently exists.

Diane Akers, EMS Consultant, discussed future trends in EMS, including the potential loss of revenue to the system from changes in Medicare reimbursement for ambulance transportation; the impact of hospital diversion; nursing and medical personnel shortages; terrorism; the next health insurance model and the uninsured; and EMS system governance.

A panel discussion of stakeholder perspectives on challenges for the future followed. Board of Supervisors Chair Tony Campos asserted that the system works well and that we need to work together to continue to build on our successes. Dr. Terry Lapid, Emergency Department Medical Director for Dominican Hospital, reviewed hospital issues including staffing; reimbursement; on-call physician coverage; legislation; and health career partnerships to increase the supply of trained workers. Barry Schneider, Chief Executive Officer of Watsonville Community Hospital, reviewed current hospital issues including an increase in Emergency Department visits, intensity, and length of stay; longer waiting times; increased levels of uncompensated care; shortages of nursing and support staff; and less willingness on the part of physicians to provide ED back-up coverage. Bob Zuckswert, Vice-president for Coastal Operations for American Medical Response, discussed ambulance industry issues including system funding; staffing; and governance. Mike McMurry, Fire Chief of Scotts Valley Fire Protection District and Vice-president of EMSIA, reviewed Fire Service concepts including the future vision for a patient-centered system; integration between EMSIA and the ambulance provider; the need for training and public education; and public-private partnerships. Rama Khalsa, HSA Administrator, discussed the responsibilities of the County in planning, implementing, and evaluating the EMS System; challenges for the future; and the need to maintain and strengthen the collaborative relationships among EMS stakeholders.

Questions from the public to the panelists included: the motivation for the RFP process; the County role in caring for the uninsured and under-insured; what the revenue loss to the system from the new Medicare fee schedule will be; how the cost of living in this area can be addressed to recruit and retain health care workers; if a profit-driven health care system is the best model or could profits be returned to the system; what strategies could be taken to improve ambulance service to rural areas; would staffing with one EMT and one paramedic improve our system; how hospital “red code” procedures work; and who pays for fire costs in EMS.

Diane Akers then asked members of the audience individually for their comments about what the system does well. The most frequent comment was the high degree of professionalism displayed by paramedics. Other comments included the emphasis on patient care and quality assurance, quality people, the experienced work force, excellent relationships and the ability to resolve conflicts among agencies.

Forum comments on “what we could do better or differently?” were: to increase community involvement in EMS by education about bystander care and early intervention; improve data collection and use; add alternative deployment plans to reduce response times especially in rural areas; add alternative dispositions for patients; add alternative transportation for non-emergencies; use the RFP as an opportunity to re-think the system; improve equipment maintenance and quality, and do more education of the public and government about how the system works and is maintained.

HSA will be doing additional focus groups meetings including a telephone survey of the homeless population in English and Spanish through the voicemail system of the Community

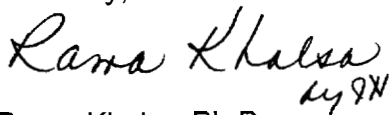
Action Board, because this population accounts for a large number of repeat users of the EMS system. A meeting is planned with the Long Term Care Commission. Community participants also have access to HSA staff and the EMS consultant through the web page [www.santacruzhealth.org](http://www.santacruzhealth.org) for additional input into the minimum standards developed in the RFP process.

The next step in the RFP process is the development of minimum requirements to determine the parameters of the future contract. Once it is complete, specific language will be reviewed with County Counsel, the Auditor-Controller, and HSA staff. The draft RFP document will then be sent to the State EMS Authority for approval. The document will then be made available for a period of public comment before being presented to your Board with a staff recommendation.

It is, therefore, RECOMMENDED that your Board:

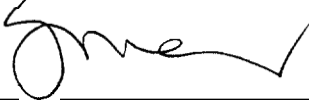
1. Direct the Health Services Agency to proceed with the EMS planning process including the development of a Request for Proposal for ambulance services; and
2. Direct the Health Services Agency to return to the Board with a progress report on the EMS planning process on May 21, 2002.

Sincerely,



Rama Khalsa, Ph.D.  
Health Services Administrator

RECOMMENDED:




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Susan A. Mauriello  
County Administrative Officer

cc: County Administrative Office  
County Counsel  
Auditor-Controller  
HSA  
EMCC