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PENDING

Chief Carl Polilaitis Los Angeles County Police Chiefs' Assn. Jason Tarpley, MD, Ph.D., FAHA American Heart Association Western States Affiliate

> EXECUTIVE DIRECTOR Cathy Chidester (562) 378-1604 CChidester@dhs.lacounty.gov

COMMISSION LIAISON Denise Watson (562) 378-1606 DWatson@dhs.lacounty.gov

COUNTY OF LOS ANGELES EMERGENCY MEDICAL SERVICES COMMISSION

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September 15, 2021

TO: Supervisor Hilda L. Solis, Chair Supervisor Holly J. Mitchell Supervisor Sheila Kuehl Supervisor Janice Hahn Supervisor Kathryn Barger

FROM: Cathy Chidester Executive Director

SUBJECT: EMERGENCY MEDICAL SERVICES COMMISSION ANNUAL REPORT – FISCAL YEAR 2020-2021

Attached is the Emergency Medical Services Commission's (EMSC) Annual Report to the Board of Supervisors for Fiscal Year 2020-2021. This report is being submitted in compliance with Los Angeles County Code Chapter 3.20, Section 3.20.070.5, to report its findings, conclusions, and recommendations to the Board of Supervisors at least every 12 months.

During this reporting period, the EMSC held its meetings on the third Wednesday of every odd month from 1:00 p.m. to 3:00 p.m. by Zoom Video Conferencing due to the March 4, 2020 California Executive Order (EO) proclaiming a State of Emergency, and subsequent EO N 25-20 issued on March 12, 2020 and EO N 29-20 issued on March 17, 2020 related to convening public meetings due to the coronavirus disease 2019 (COVID-19) pandemic. Commission meetings are usually held at the EMS Agency located at 10100 Pioneer Boulevard, 1st Floor Hearing Room, Santa Fe Springs, California 90670.

Should you have any questions, please feel free to contact me at (562) 378-1604 <u>cchidester@dhs.lacounty.gov</u> or Denise Watson, Commission Liaison, at (562) 378-1606 <u>dwatson@dhs.lacounty.gov</u>.

CC:DW

Attachment

c: Christina R. Ghaly, M.D., Director of Health Services Hal F. Yee, Jr., M.D., Ph.D., Chief Deputy Director, Clinical Affairs, DHS Ed Morrissey, County Counsel Celia Zavala, Executive Officer, Board of Supervisors Health Deputies, Board of Supervisors EMS Commission





Los Angeles County Emergency Medical Services Commission Annual Report to the Board of Supervisors Fiscal Year 2020–2021





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BOARD OF SUPERVISORS



MESSAGE FROM EXECUTIVE DIRECTOR CATHY CHIDESTER

The fiscal year 2020/2021 activities for the Emergency Medical Services (EMS) Agency and EMS Commission were driven by the COVID-19 pandemic response. The EMS Commission continued to hold meetings online rather than in person in compliance with health orders, the emergency declaration, and executive orders by Governor Gavin Newsom in March 2020. The EMS Commission held all the scheduled meetings and continued reviewing and recommending EMS Agency policies, monitoring the EMS system, understanding and addressing current EMS system and hospital issues. I am proud to recognize our Commission as always being engaged, proactive, and responsive to the issues and mission of the EMS community.

MESSAGE FROM CHAIRMAN PAUL S. RODRIGUEZ

The global COVID-19 pandemic severely impacted all communities throughout the country, and Los Angeles County was no exception. Through the constant coordination and dedication of Agency staff, County policies and protocols were reviewed, revised, and created as necessary to ensure the safe treatment of all County residents. While the COVID-19 response was the main driver this past year, the Agency continued to work on such critical issues as behavioral health policies, new medication administration options for field personnel, alternative patient destinations, and ambulance patient offloading concerns. On behalf of my fellow commissioners, we are proud to be a part of the EMS Agency's mission and humbled to serve with such a dedicated staff of EMS professionals who constantly strive to provide the highest quality of service our community deserves.

EMERGENCY MEDICAL SERVICES COMMISSION MEETINGS

EMS Commission meetings are public meetings governed by the Ralph M. Brown Act and are held on the third Wednesday of every odd month, beginning with January as month one. Meetings are held at the EMS Agency located at 10100 Pioneer Boulevard, First Floor Hearing Room, Santa Fe Springs, California 90670. Based on EO N25-20 and N29-20 signed by Governor Gavin Newsome in March of 2020 and the County's and Board of Supervisors requirement for no in-person meetings during the pandemic, the EMS Commission meetings were held by Zoom Video Conference Calls beginning in May 2020. As State and County restrictions for public meetings remain in place, the EMS Commission will continue with Zoom meetings until further directed by the Board of Supervisors.

Meetings in FY 2020-21

July 15, 2020 – Zoom	September 16, 2020 – Zoom	November 18, 2020 – Zoom
January 20, 2021 – Zoom	March 17, 2021 – Zoom	May 19, 2021 – Zoom

MISSION STATEMENT

To support and guide the Emergency Medical Services (EMS) Agency activities to ensure timely, compassionate, and quality emergency and disaster medical services. The Emergency Medical Services Commission's (EMSC) mission complements the County's mission through improving the quality of life for the people and community of Los Angeles County (LA County).

HISTORICAL BACKGROUND

The EMSC was established by the Board of Supervisors (Board) in October 1979. On April 7, 1981, the Board approved and adopted Ordinance No. 12332 of Title 3: Advisory Commissions and Committees, Los Angeles County Code Chapter 3.20, Emergency Medical Services Commission, to establish the Commission in accordance with California Health and Safety Code Division 2.5 Sections:

1797.270 – Emergency Medical Care Committee Formation
1797.272 – Emergency Medical Care Committee Membership
1797.274 – Emergency Medical Care Committee Duties
1797.276 – Emergency Medical Care Committee Annual Report

On January 29, 2008, the Board approved amending the subject Ordinance to revise the selection of the licensed paramedic representative, previously nominated by the California Rescue and Paramedic Association (CRPA), be made by the California State Firefighters' Association Emergency Medical Services Committee because CRPA ceased operations.

On November 1, 2011, in consultation with the Department of Health Services, the EMSC amended the Ordinance to add two commission seats. One member will be nominated by the Los Angeles County Police Chiefs' Association (LACPCA), and the second will be nominated by Southern California Public Health Association (SCPHA). These seats are beneficial to the EMSC and the County by allowing for expert input by law enforcement and public health. With this amendment, the addition of two commission seats increased the number of commissioners from 17 to 19.

MEMBERSHIP

The EMSC is currently comprised of 19 commissioners who are non-County employees acting in an advisory capacity to the Board of Supervisors and the Director of Health Services. They advise on matters related to emergency medical care and practices, EMS policies, programs, and standards, including paramedic services throughout the County of Los Angeles. There is an Executive Director and a Commission Liaison who are County employees and serve as staff on the Commission.

FUNCTIONS AND DUTIES

The EMSC performs the functions of the Emergency Medical Care Committee as defined in Sections 1750 et seq. of the Health and Safety Code and includes the following duties:

- Act in an advisory capacity to the Board of Supervisors and the Director of Health Services regarding County policies, programs, and standards for emergency medical care services throughout the County, including paramedic services
- Monitor studies of particular elements of the emergency medical care system as requested by the Board, the Director of DHS, or on its initiative; delineate problems and deficiencies and recommend appropriate solutions
- Acquire and analyze the information necessary for measuring the impact and the quality of emergency medical care services
- > Report findings, conclusions, and recommendations to the Board at least every twelve months
- > Review and comment on submitted plans and proposals for emergency medical care services

- Recommend, when the need arises, that LA County engages independent contractors for the performance of specialized, temporary, or occasional services to the EMSC, which members of the classified service cannot perform, and for which the LA County otherwise has the authority to contract
- Advise the Director on the policies, procedures, and standards that affect the certification/accreditation of mobile intensive care nurses and paramedics
- Advise the Director on proposals of any public or private organization to initiate or modify a program of paramedic services or training
- To arbitrate differences in the field of paramedic services and training between all sectors of the community, including, but not limited to, county agencies, municipalities, public safety agencies, community colleges, hospitals, private companies, and physicians
- > To conduct public hearings as necessary

ANNUAL WORKPLAN

The EMS Commission's goals and objectives for the upcoming year support the County's mission, vision, and strategic priorities through continuing to make recommendations on policies that support the health of residents and visitors to Los Angeles County. The EMS Commissions' membership ensures input and understanding of the various organizations and communities served by the EMS system.

Goals and Objectives:

- Review and recommend policies and directives for adoption by the EMS Agency
- Provide input on proposed policies and suggested changes
- > Review criteria for 9-1-1 Receiving Center Designation
- Review Los Angeles County Ordinance, Chapter 3.20: Emergency Medical Services Commission Section 3.20.040: Composition: to update the nominating entity of the member and any other member requirements such as working in Los Angeles County
- > Advice on the impact of emergency medical care policies related to paramedic and EMT services and training
- > Monitor State and Federal legislation affecting the EMS system
- > Through the established committee process, advise and recommend topics for education
- > Conduct public hearings, as required
- Continue moving forward and implement recommendations from the September 2016 Ad Hoc committee report on the *Prehospital Care of Mental Health and Substance Use Emergencies* through:
 - Development of protocols for management of agitated patients pharmacologic and non-pharmacologic
 - Monitor, support, and make policy recommendations to standardize criteria for dispatching fire and law to behavioral health calls
 - Revise Prehospital Care Policy Reference No. 838: Application of Restraints
 - Ensure collaboration and awareness of Department of Mental Health and similar groups work to establish a system to triage mental health emergency calls and deploy the appropriate resources to these calls
- Continue to engage with law enforcement to support similar or overlapping response protocols, i.e., tactical EMS, use of Narcan in the field, and dispatch and triage of 9-1-1 behavioral calls
- Continue to monitor ambulance patient offload times (APOT) data and work with transportation providers, including ambulance companies and fire departments, and hospitals to reduce ambulance patient offload times and recommend best practices to address offload delays
- Support the EMS Agency's efforts to ensure timely and accurate data submission from all EMS providers and specialty care centers
- Participate as a voting member on the Measure B Advisory Board and ensure constituent groups are aware of the Measure B allocation process
- Maintain awareness of the EMS Agency's COVID-19 response activities related to supporting the hospitals and EMS providers and data collection/analysis

ONGOING LONG-TERM PROJECTS

- Prehospital Care of Mental Health and Substance Abuse Emergencies: Continue to address the recommendations made in the EMSC ad hoc committee's report of September 2016, and implement as addressed, including evaluating and understanding the interaction between law enforcement and EMS providers in response to patients with behavioral health emergencies
- > Monitor legislation of interest to emergency medical services
- Support education efforts for Bystander, Hands-Only CPR training (Sidewalk CPR)
- Support the EMS Agency in efforts to ensure that individuals seen and assessed within the 9-1-1 system are transported to the appropriate destination that is best suited to meet their needs, i.e., sobering centers, emergency departments, and psychiatric urgent care centers
- Monitor and support 9-1-1 ambulance transport readiness through supporting the APOT Ad Hoc Committee's recommendations to decrease ambulance patient offload times
- Monitor and support EMS pilot and trial studies to improve the delivery of emergency medical care and transportation
- Monitor the progress of the State EMS Authority on drafting changes to Chapter 13
- Monitor the Medical Advisory Committee workgroup revisions to Prehospital Care Policy Reference No. 834: Patient Refusal of Treatment/Transport and Treat and Release at Scene to ensure quality and safe patient care

ACCOMPLISHMENTS AND SIGNIFICANT OUTCOMES FISCAL YEAR 2020-21

- Approved the FY 2019-20 EMSC Annual Report at the November 20, 2020 meeting
- Recommended and supported EMS Agency's application for the local optional scope to allow paramedics and EMTs administering influenza vaccine as well as COVID-19 vaccine, upon availability
- Recommended establishment of an ad hoc workgroup to advance the September 2016 Prehospital Care of Mental Health and Substance Abuse Emergencies Report recommendations, specifically Recommendation Eight
- > Voted in Commissioner for EMSC Measure B Advisory Board Representation
- > Conducted the required public hearing on the closure of Olympia Medical Center
- Approved the Impact Report on the closure of Olympia Medical Center and recommended submission to the Board of Supervisors
- Approved nominating committee and standing committee selections
- > Recommended approval of Prehospital Care Policy Reference Numbers:
 - 218: Trauma Hospital Advisory Committee (THAC)
 - 222: Downgrade or Closure of 9-1-1 Receiving Hospital or Emergency Medical Services
 - 228: ReddiNet® Utilization
 - 316: Emergency Department Approved for Pediatric (EDAP) Standards
 - 322: Stroke Receiving Center Standards
 - 322.1: Stroke Performance Measures
 - 326: Psychiatric Urgent Care Center (PUCC) Standards
 - 328: Sobering Center (SC) Standards
 - 508: Sexual Assault Patient Destination
 - 510: Pediatric Patient Destination
 - 511: Perinatal Patient Destination
 - 516: Cardiac Arrest (Non-Traumatic) Patient Destination
 - 518: Decompression Emergencies/Patient Destination
 - 526: Behavioral / Psychiatric Crisis Patient Destination
 - 526.1: Medical Clearance Criteria Screening Tool for Psychiatric Urgent Care Center (PUCC)
 - 528: Intoxicated (Alcohol) Patient Destination
 - 528.1: Medical Clearance Criteria Screening Tool for Sobering Center (SC)
 - 606: Documentation of Prehospital Care

- 618: EMS Quality Improvement Committees
- 644: Base Hospital Documentation Manual (Information Only)
- 804: Fireline Emergency Medical Technician-Paramedic (FEMP)
- 814: Determination / Pronouncement of Death in the Field
- 815: Honoring Pre-Hospital Do Not Resuscitate Orders, Physician Orders for Life Sustaining Treatment and End of Life Option (Aid-in-Dying Drug)
- 830: EMS Pilot and Scientific Studies
- 834: Patient Refusal of Treatment/Transport and Treat and Release at Scene
- 1013: EMS Continuing Education (CE) Provider Approval and Program Requirements
- 1102: Disaster Resource Center (DRC) Designation and Mobilization
- 1102.2: DRC Equipment Checklist List Items Deployed to Other Facilities
- 1104: Disaster Pharmaceutical Cashes Carried by Authorized ALS Providers
- 1106: Mobilization for Local Pharmaceutical Cashes (LPCs)
- 1106.1: LPC Inventory and Checklist for Items Deployed
- 1106.2: LPC Photograph
- 1107.1: M/SS Cache Inventory and Checklist for Items Deployed
- 1108.1: CHEMPACK Inventory List
- 1108.2: CHEMPACK Photograph
- 1122: Bed Availability Reporting
- 1122.1: Bed Availability Report
- 1128: Decontamination Trailer Deployment for Mass Casualty Event
- 1132: Amateur Radio Communications
- 1138.1: Burn Resource Center Required Equipment/Supplies/Pharmaceuticals
- 1138.2: Local Burn Lead Specialist Call Panel
- 1138.3: Remote Burn Lead Specialist
- 1140: Mobile Medical System Deployment
- 1140.1: Mobile Medical System Deployment Summary

Emergency Medical Services Commission Annual Report FY 2020-21

EMERGENCY MEDICAL SERVICES COMMISSIONERS



Captain Brian Bixler Peace Officers Association



Lydia Lam, MD American College of Surgeons



Robert Ower, RN Los Angeles County Ambulance Association



Nerses Sanossian, MD, FAHA American Heart Association Western States Affiliate



Cathy Chidester, RN, MSN Executive Director EMSC Staff



Los Angeles County Medical Association



James Lott, PsyD Public Member Second Supervisorial District



Chief Kenneth Powell Los Angeles Area Fire Chiefs' Association



Carole A. Snyder, RN Emergency Nurses Association



Society



Carol Meyer, RN Public Member Fourth Supervisorial District



Chairman Paul S. Rodriguez California State Firefighters' Association



Atilla Uner, MD, MPH California Chapter - American



Chief Eugene Harris Los Angeles County Police Chiefs' Association



Ms. Gloria Molleda League of California Cities Los Angeles County Division



Jeffrey Rollman, MPH Southern California Public Health Association



Mr. Gary Washburn Public Member Fifth Supervisorial District



John C. Hisserich, DrPH Public Member Third Supervisorial District



Garry Olney, DNP Hospital Association of Southern California



Vice-Chair Joseph Salas Public Member First Supervisorial District



Denise Watson, BSB Commission Liaison EMSC Staff

