## Meeting Minutes

## August 2, 2019, 2:00 PM – 3:30 PM

EMS Agency

9616 Micron Avenue, Suite 900

Sacramento, CA 95827

Conference Room 1

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| ADVISORY GROUP MEMBERS | | | |
| X | ALS Ground Transport Providers, Public – Tilden Billiter, Sac City Fire | X | Hospital System – Michael Korpiel, Dignity Health |
| X | ALS Ground Transport Providers, Private – Karl Pedroni, American Medical Response (AMR) |  | Hospital System – Dave Cheney, Sutter Health – *Excused* |
| X | ALS Air Transport Providers – Mike Kaslin, REACH Air Medical | X | Hospital System – J. Douglas Kirk, MD, UC Davis Health |
| X | BLS Providers, Public – James Hendricks, Herald Fire District | X | Hospital System – Kevin Smith, Kaiser Permanente |
| X | BLS Providers, Private – James Pierson, Medic Ambulance |  | Law Enforcement – Lt. Shaun Hampton, Sheriff’s Department – *Excused* |
| X | County Primary Health Division – Sandy Damiano, PhD | X | Training Provider – Jason Hemler, CSUS |
| X | County EMS Administrator – David Magnino |  | Medical Society – Aileen Wetzel, Sierra Sacramento Valley Medical Society |
| X | County EMS Medical Director – Hernando Garzon, MD |  |  |

Advisory Group Members in Attendance: 12

Public in Attendance: 3

Staff: Sherri Chambers

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| **Topic** | **Minutes** |
| Welcome, Introductions and Opening Remarks -  *Sandy Damiano, PhD* | Sandy Damiano, PhD, welcomed advisory group members and members of the public, facilitated introductions, and reviewed the agenda and meeting materials.   * Materials: All members received copies of the Agenda, Emergency Medical Advisory Group (EMAG) Roster, Emergency Medical Services (EMS) Agency Committees / Advisory Groups, EMAG Charter DRAFT, and EMS Agency Proposed Prehospital and Hospital Programs & Fees – June 3, 2019. *Materials are posted on the website.* Link: [https://dhs.saccounty.net/PRI/EMS/Pages/Emergency-Medical-Advisory-Group.aspx](https://devdhs.saccounty.net/PRI/EMS/Pages/Emergency-Medical-Advisory-Group.aspx) * Agenda Review: Background for Advisory Group, EMS Committees & Work Groups Overview, Advisory Group Charter DRAFT, Public Comment, and Next Meeting. |
| Background for Advisory Group –  *David Magnino*  Background for Advisory Group –  *Continued* | Dave Magnino provided background information on the stakeholder process and reviewed the final proposed fees document. *See EMS Agency Proposed Programs and Fees (June 3, 2019) posted on the website.*  Key Points:   * + - * In order to implement new state requirements and optional programs requested by stakeholders and due to a decrease in revenue, EMS staff drafted a proposal for new prehospital and hospital fees in February 2019.       * Five stakeholder meetings were held between March and June 2019. Stakeholder feedback was incorporated in the latest version of the proposal dated June 3, 2019.       * The first page summarized changes (*see document for details*):         + Fees for mandatory hospital programs were reduced, including the requested reduction in out of county hospital fees.         + Fee for Emergency Medical Responder certification was reduced.         + Fee for Narcan® for Law Enforcement was reduced.         + Three optional programs are no longer included.         + Request for a new FTE EMS Coordinator is no longer included. We had to eliminate the position request in order to make the fee reductions. Staff will be reallocated.         + County staff will convene an Emergency Medical Advisory Group.       * Maddy/Richie Funds – Has been a primary revenue source. This revenue based on vehicle code fines has been used to supplement operating costs. Most of the revenue is directed to payments to hospitals or providers. Revenue has been declining over a number of years for a variety of reasons.       * Comparable Counties – Staff looked at other comparable size Local Emergency Medical Services Agencies (LEMSA) and a neighboring county, San Joaquin, even though it is smaller in size. Sacramento is very understaffed in comparison.       * Funding Sources – See LEMSA Revenue Funding Source Chart. Other counties have different primary sources of revenue such as through exclusive operating area fees (not available to Sacramento), other types of fees, or bonds/measures.       * Board item – The Board of Supervisors will vote on the proposed fees at their meeting on August 6. See item 41. Link: <http://www.agendanet.saccounty.net/sirepub/mtgviewer.aspx?meetid=12468&doctype=AGENDA>   Discussion:   * Dr. Kirk commended staff for the informative and thorough document on proposed programs and fees. James Pierson echoed the comment. * Sandy shared that the Hospital Council sent a letter acknowledging the work to address concerns about fees and stakeholder process. The hospital systems remain concerned about the understaffing and the future fiscal stability. During the last stakeholder meeting, some participants discussed continuing interest in the EMS for Children and Critical Care Paramedic Training Program. This advisory group will work on ideas for program planning and sustainable funding. * James Pierson expressed concern over the proposed annual rate increases of up to 5% for providers. He said it seemed to burden the private EMS system over the public system. Why not stay with increases tied to the CPI? Dave and Sandy explained that the increase in allocated costs is more than the CPI in some years. Due to a settlement agreement, staff were unable to make changes with regard to public providers this year. Sandy also stated that no prehospital representatives provided feedback on this particular increase at any of the stakeholder meetings. * Michael Korpiel suggested we look at San Diego and Alameda Counties for funding ideas. Dave responded that they both rely on tax measures. |
| EMS Committees and Work Groups Overview –  *Hernando Garzon, MD*  EMS Committees and Work Groups Overview –  *Continued* | Dr. Garzon reviewed and discussed the EMS Agency Committees / Advisory Groups. *See handout posted on the website for details*.  Key Points:   * Responsibilities of EMS agencies are specified in Health & Safety Code, Division 2.5. * Medical Advisory Committee – is comprised of hospital ED physician/nurse representatives, and the Operational Advisory Committee is comprised of prehospital representatives. This forum meets bi-monthly as one group. A primary focus is regularly updating numerous EMS policies and procedures. * STEMI/Stroke Committees – Relatively new. Includes STEMI and stroke representatives from the hospitals. * Trauma Review Committee (TRC) – Meets quarterly. Representatives include the local trauma centers. * Technical Advisory Group (TAG) – Focuses on quality improvement. It is open to all EMS stakeholders. * Other – Several local, regional and state groups are not convened by the Sacramento EMS Agency, but the Agency participates. Another group not listed is the Hospital Council CEO meeting.   Discussion:   * Michael Korpiel asked if the committees are mandatory, who do they report to, and do they have authority? Dave stated if we have a program, we are required to have a committee for planning. Dr. Garzon explained that stakeholders make recommendations to the EMS Agency through the committees. Sandy added that authority exists in EMS Agency role and Dr. Garzon’s role by statute. She noted that this body should not duplicate existing committees or work groups. Each group has a specific function. * Kevin Smith commented that the STEMI/Stroke committee is doing great work, but recommendations are made without hospital administration awareness. Sandy said we can share the roster and hospitals can remind members to consult with their own hospital administration prior to making recommendations.   Action:   * Dave will send rosters for the EMS committees to the hospital system representatives. |
| Advisory Group Charter –  *Sandy Damiano*  Advisory Group Charter –  *Continued* | Sandy Damiano facilitated a discussion on the Advisory Group Charter. *See EMAG Roster and Advisory Group Charter DRAFT posted on the website.*  Roster – Sandy reviewed the roster and asked for feedback. Members concurred with the representative groups as noted.  Contact list – Clarification – this is for members only and will not be posted on the website. Due to an error, Dave will revise and distribute.  Charter – Sandy reviewed the DRAFT Charter and solicited feedback.   * Scope of work – Hospital systems recommended creation of a higher level group to focus on program planning, quality improvement, and fiscal sustainability. Any other areas of focus?   + Dr. Kirk suggested increasing visibility by sharing data with stakeholders. Other EMS agencies share data to show what they do. Michael Korpiel noted we want to have the best system available, but how do we know how we are doing? Dr. Garzon agreed and said data reporting is coming soon. Sandy added that the EMS will release its first EMS report and it will include information about our system, partners and data. It will serve as our base report.   + Mike Kaslin asked how we will know what the other EMS committees are recommending. Sandy said this group needs to decide how to receive the information. Dr. Kirk suggested EMS staff brief the group. Dr. Garzon suggested an update from each committee. Sandy noted we can do this each meeting.   + James Pierson asked what issues we will resolve. Dave and Sandy reiterated it will be a system focus with emphasis on planning and quality improvement issues. * Values – Members wanted to add collaboration. James Hendricks asked if authority was limited to recommendations. Sandy noted that recommendations would come to EMS but also be included in our reports to system partners and county leadership. This has worked well for some of the other advisory bodies. * Meetings – Members discussed voting and meeting minutes. All agreed to approve minutes. Karl Pedroni said most groups follow Robert’s Rules. Members wanted to vote, but not necessarily by roll call.   Action:   * Provide committee/work group briefing at each meeting. * Staff will send out a revised DRAFT charter prior to the next meeting. |
| Public Comment | None |
| Next Meeting –  *Dave Magnino* | * Frequency – Members discussed meeting frequency and decided to look at quarterly. Dave will send out a poll with proposed dates. Members suggested mid-week and later in the day is preferable. * Topics – Will approve meeting minutes, review revised DRAFT charter, EMS committee/work group report and consider prioritizing issues. Will send draft documents to members prior to the meeting. We may also be able to discuss the first EMS report. Michael Korpiel noted identifying additional resources and obtaining data are important topics. Another item to be discussed next meeting is whether members should have an alternate. |
| Closing Remarks and Adjourn | Sandy Damiano thanked everyone for attending and participating in today’s meeting. With no additional business to discuss, the meeting adjourned. |