



COUNTY OF ORANGE HEALTH CARE AGENCY  
 EMERGENCY MEDICAL SERVICES  
 405 W. Fifth Street, Suite 301A, Santa Ana, CA 92701  
 (714) 834-3500



## TRANSPORTATION ADVISORY COMMITTEE

TUESDAY, January 7, 2025 – 9:00am

### MINUTES

#### MEMBERS

<u>NAME</u>	<u>CATEGORY REPRESENTED</u>	<u>ORANGE COUNTY EMS STAFF</u>	
<input checked="" type="checkbox"/> Matt Armstrong, Chair	– S. California Ambulance Association	Carl H. Schultz, MD	– EMS Medical Director
<input checked="" type="checkbox"/> Ryan Creager	– Air Transport Provider	Gagandeep Grewal, MD	– Associate EMS Medical Director
<input checked="" type="checkbox"/> Chad Drueten	– Ambulance Service Provider 9-1-1	Adrian Rodriguez	– Ambulance Performance Chief
<input checked="" type="checkbox"/> Jacob Wagoner	– Ambulance Service Provider non- 9-1-1	Ruth Clark, RN	– EMS Trauma Coordinator
<input checked="" type="checkbox"/> Bryan Johnson, RN	– Fire Service Provider (with transport)	Laurent Repass, NREMT-P	– EMS Information & Analytics Chief
<input checked="" type="checkbox"/> Laura Cross, RN	– Mission Hospital	Jason Azuma, NRP	– OC-MEDS Coordinator
		Anjan Purohit, EMT-P	– EMS Analytics Coordinator
		Drew Bernard, EMT	– EMS Specialist
		Sarkis Sarkisian, EMT	– EMS Coordinator
		Justin Newton, EMT	– HEM Program Supervisor II
		Lisa Wilson	– IPT

#### GUESTS PRESENT

<u>NAME</u>	<u>REPRESENTING</u>	<u>NAME</u>	<u>REPRESENTING</u>
Amanda Collins	– CHOC	Patrick Powers	– City of Placentia
Daniel Song	– APA	Vishal Raj	– Falck
Andrew Tran	– OCFCA	Alejandro Martinez	– Horizon OC

I. **CALL TO ORDER** by *Matt Armstrong (Chair)* – Meeting called to order at 9:01am.

II. **INTRODUCTIONS/ANNOUNCEMENTS** by *Carl Schultz*

- *New Chair (Matt Armstrong)* - This is the first meeting for Matt Armstrong as the Chair. He works for Premier ambulance & is the Director of Operations. He has been in the ambulance industry in Los Angeles & Orange County, He is going on his 32<sup>nd</sup> year. He was the President of the Los Angeles County Ambulance Association for 13 years before Chad Drueten took over.
- #5303 New Appointed EMS Analytics Coordinator (*Anjan Purohit*) – Laurent introduced Anjan Purohit as the new EMS Analytics Coordinator. He will be working with EMS providers, hospitals & developing an analytics program & working with dashboards.

III. **APPROVAL OF MINUTES**

- *Action Item: Approval of October 2, 2024, Minutes* – No issues or discussion. No opposition.

IV. **OCEMS REPORT**

- *Medical Director Report by Carl Schultz* - There is a feeling by some pre-hospital providers that if a patient is not a Kaiser patient, they cannot go to the nearest receiving which might be a Kaiser hospital. This hasn't been an issue for 20 years. At every meeting Dr. Schultz goes to for the next 3 months, he will be stating that a patient can go to a Kaiser emergency department whether they are a member of Kaiser or not. There is no need to re-direct a patient that is not a Kaiser member from a Kaiser hospital to another ERC.

- There was an event where a patient at one ERC on the wall for more than an hour was put back in an ambulance & taken to another ERC. This who was at one ERC on the wall for more than an hour was put back in an ambulance & taken to another ERC. This is a misinterpretation of policies that we have. Transporting a patient from one ERC to another without their request and without medical indication exposes the 911 provider to a lot of problems that OCEMS can't protect them from. Current policy states that after an hour, the crew taking care of a patient is authorized to transport the patient to another hospital if that patient has remained in the ambulance at the direction of the ED for at least one hour. Once the patient gets offloaded into the emergency department, it's a different story. They have transferred the care out of the ambulance into the internal workings of the emergency department. If the paramedic, after an hour, transports the patient from that facility to another one without a medical indication, they are interfering with medical care & could be creating an EMTALA violation by denying patient access to that facility. After an hour, a patient may be placed in a cot. If a patient is put back in an ambulance, it opens a lot of potential violations of policy & law.
- Dr. Schultz is moving towards integration of Toradol into our pain management practices. Right now, we are using the avenue of "procedures" as a way to integrate this into our practice. He will be bringing this to the attention of multiple different groups – Medical Advisory Committee, the EMS Advisory Group. Goal is to have a Toradol procedure available to OCEMS & 911 Providers by April 1, 2025.
- EMS Report and Training Opportunities *by Gagandeep Grewal* – On the Health Disaster Preparedness side, they are working on hiring a contractor to help with Statewide Medical Health Exercise coming up in April. NDMS is looking to do a full-scale exercise regarding patient movement from a remote disaster sometime in the late summer. This is still in the pre-planning phase.
- APOT and Diversion Report *by Laurent Repass (Jason Azuma)* – In the packet is September, October & November. If there are questions, Jason would be happy to answer them. Under benchmark 98% percentile for APOT in those three months. In the past months, saw significant uptick. Well over 600 transports on 12/30/24. We have a practice of validating all instances over three hours.
- Ambulance Inspection Updates *by Drew Bernard* – For 2025, we have 21 companies that are licensed with Orange County. 20 ground ambulance companies, 1 air ambulance company. There are 403 total ground ambulances & 3 total air ambulances with Mercy Air.

**V. UNFINISHED BUSINESS** – No report.

**VI. NEW BUSINESS**

- *Informational items:*
- Policies 720.30, 720.40, 720.50, 720.60 & 720.70 / For updates on the 50-Day comment period *by Adrian Rodriguez* – The last time TAC met, we were up for 50-day comment period. That period ended. We received comments. Adrian: At this point, are there any comments regarding the policies that should be discussed in this meeting? Changes were made from the comments.
- Letter #5293 / EMTs used by ERCs *by Carl Schultz* – Matt Armstrong: He added this only because he was in a committee meeting called the Operational meeting that meets about every other month or so. Fairly small group. Formed by mostly Northern California providers. This letter was on there. It went over very well.

- CA state CARB vote Re: Fuel price increases *by Matt Armstrong* – There isn't a lot of information about this. This was brought up in the California Ambulance Association quorum. CARB stands for California Air & Resources Board. In November, there was a vote that was approved 12 to 2 approved new amendments for decarbonization of a lot of our vehicles. They are sending some estimates between 47 & 65 cents per gallon is going to be added to our fuel. There is absolutely no information other than what you're looking at. This is kind of scary.
- Ruth Clark: Hopes that at all of the meetings, we can go around & introduce ourselves. Introductions were made around the room.
- Laura Cross: If a paramedic line is down for the ambulance companies, can we put out a ReddiNet message as a hospital, is that enough?
- Adrian Rodriguez: Ambulance providers are required to have ReddiNet on at all times & dispatch is supposed to be monitored. A phone call is appreciated.
- Carl Schultz: The state would like to have the EMS plan approved before they approve an RFP. That is problematic in many ways. There is a delay because the EMS plan has not been approved. At some point, we may have to act regardless. We can't put this on hold. We need the RFP to be able to move forward. Hoping the plan will be approved. Our position is to let it play out. There is a real deadline down the line. We're not going to let the contract expire without something to replace it with. The RFP will come out at some point.

**VII. NEXT MEETING**

- April 2, 2025, at 9:00 a.m.

**VIII. ADJOURNMENT** – Matt Armstrong adjourned the meeting at 9:26am.