



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

WEDNESDAY, April 2, 2025 – 9:00am

### MINUTES

#### MEMBERS

NAME	CATEGORY REPRESENTED	ORANGE COUNTY EMS STAFF	
<input checked="" type="checkbox"/> Matt Armstrong, Chair	– S. California Ambulance Association	Gagandeep Grewal, MD	– Associate EMS Medical Director
<input type="checkbox"/> Ryan Creager	– Air Transport Provider	Adrian Rodriguez	– Ambulance Performance Chief
<input type="checkbox"/> Chad Druten	– Ambulance Service Provider 9-1-1	Ruth Clark, RN	– EMS Trauma Coordinator
<input type="checkbox"/> Jacob Wagoner	– Ambulance Service Provider non- 9-1-1	Genise Silva, RN	– EMS Facilities Coordinator
<input type="checkbox"/> Bryan Johnson, RN	– Fire Service Provider (with transport)	Laurent Repass, NREMT-P	– EMS Information & Analytics Chief
<input type="checkbox"/> Laura Cross, RN	– Mission Hospital	Drew Bernard, EMT	– EMS Specialist
<input checked="" type="checkbox"/> Chris Childress, RN	– ED Nursing Leadership	Justin Newton, EMT	– HEM Program Supervisor II
		Lisa Wilson	– IPT

#### GUESTS PRESENT

NAME	REPRESENTING	NAME	REPRESENTING
Api Weinert	– Placentia Fire		
Elizabeth Hartson	– SCGMC		
Andrew Tran	– OCFA		
Patrick Powers	– City of Placentia		

I. **CALL TO ORDER** by Matt Armstrong (Chair) - Meeting called to order at 9:03am.

II. **INTRODUCTIONS/ANNOUNCEMENTS** by Matt Armstrong

- Matt Armstrong: Carl Schultz is not present.

III. **APPROVAL OF MINUTES**

- Action Item: Approval of January 7, 2025, Minutes - No issues or discussion. No opposition.

IV. **OCEMS REPORT**

- Medical Director Report by Adrian Rodriguez – The flu is leveling off. County transport volume is fluctuating. The weekends ramp up to a higher volume. During the week, it comes down. Our highest call volume day is about 620 transports in one day. When it gets to 500, 600, it's a very busy day. Right now during the week, it's about 510, 520 transports a day. On the weekend, it gets to about 570. If there isn't a lot of volume that is going on in the hospital through 911, the hospitals are still busy. We're seeing a lot of interfacility work. That number stays very high. It's been high during the week at about 370. Pre-Covid, the high was about 350 in interfacility transports. Right now, we're looking at a steady average of 375. We hit a high recently with about 450 interfacility transfers.

- EMS Report and Training Opportunities *by Gagandeep Grewal* – Among the policies released, one is not yet finalized which is the triage to alternate destinations. Psychiatric patients that meet certain criteria go directly to psychiatric facilities. That is in a pilot phase. We're still waiting for approval from the state. We released a Toradol policy. That is still going to be an ALS procedure requiring ALS transport. If someone gives Toradol for pain, they still need to be transported ALS. On the disaster side, we had our final planning meeting for the Statewide Medical Health exercise. It will be April 24, 2025. The NDMS people are going to be doing a full-scale exercise out of Los Alamitos at the end of July. We're trying to figure out what our role will be. If there is an external disaster, it was initially formed because of a mass military casualty event that needs civilian hospitals to take patients. They have agreements with these hospitals to take patients from across the Pacific, across the country or wherever so that's morphed into disaster as well. The idea is that they would have patients that need transport by plane generally from an outside area that would require transport to a hospital. In-patient to in-patient transfer. Dr. Grewal has been talking to the hospitals to make sure their plans involve the process for getting all that done. On the transportation side, we must figure out the logistics that are required.
- APOT and Diversion *by Laurent Repass* – APOT in December was 31 minutes & 28 seconds at the 90<sup>th</sup> percentile. December broke our record for busiest transport month at 17, 834. January broke the record again. January was at 18, 108. Our APOT times were 34 minutes and 42 seconds. It's notable that prior to these months, our APOT numbers were below our 30-minute threshold. Despite these very high transports, the hospitals are handling it very well with an APOT at they system level of 34 minutes. APOT times decreased a little in February. It was 30 minutes & 40 seconds. We like to keep diversion below 6%. For December, we were at 14%. In January, we were up to 22% which is much higher than we'd like to see. Going into February, diversion is starting to trend down. The pressure on the system has lessened.

*Gagan Grewal:* On the APOT side, the state EMSA has released emergency regulations to comply with the APOT bill AB40. Initially, they only gave a 5-day public comment period. They've extended that. If you go to their website, look up the regulation & if you want to make some comments, make sure you have them sent by April 5, 2025. If you go on the EMSA website under regulations, everything is listed there.

- Ambulance Inspection Updates *by Drew Bernard* – 20 ground ambulance companies are licensed in Orange County. There is one air ambulance company. There are 417 ground ambulances that are permitted & 3 air ambulances. There is one company that just started & is going through the process for licensure.

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

**VI. NEW BUSINESS**

- Request for Proposal (RFP) Timeline and Updates *by Adrian Rodriguez* – On attachment 3, you'll see where we are currently on the request for proposal for 911 ambulance services. The request for proposals will be due April 3, 2025.
- Policies 720.30, 720.40, 720.50, 720.60 & 720.70 *by Drew Bernard* – Attachment 4 is policy 720.30, 720.40, 720.50, 720.60 & 720.70. Those are active as of April 1, 2025.
- MED-9 Radio Testing Reminder *by Drew Bernard* – Policy 720.70 covers MED-9 radio. It's used as a reminder for the ground ambulance providers that you're required to let us know 72 hours prior to

the MED-9 testing date what ambulances are or are not available. We send out reminders about that far in advance letting you know when your company is going to do a MED-9 test. If your ambulance misses two MED-9 inspections in a year, you have to get re-inspected by O.C.C. at the cost of the ground ambulance company.

- *Random Ambulance Field Inspection Reminder by Drew Bernard* – With the update to 720.50, OCEMS has always had the ability to randomly inspect ambulances in the field if it doesn't interfere with patient care or a response to a patient or transport. We've clarified the language to make it clearer. We made it clearer that OCEMS can inspect those vehicles, not just the 911 EOA vehicles.
- *ePCR/CAD Data CQI/Monitoring/Auditing Reminder by Drew Bernard* – A reminder to the ground ambulance providers that we're constantly monitoring the data from the ePCR's. Both the performance section & Laurent's information & analytics section, sometimes their notifications that we receive from the state on something that isn't being done correctly, we're reaching out to providers. Sometimes the providers aren't doing something. As the ground ambulance provider, you're responsible for making sure your ePCR's are complete using CQI.

*Adrian Rodriguez:* If you have a change in whomever is involved in your technology group, make sure you let us know.

*Laurent Repass:* It's important for all the providers to know that when you post your ePCR's, it goes to our system regardless of which ePCR vendor you use. We send data to the state within 24 hours. When you post your ePCR, usually within minutes, the state has that PCR. The state is actively looking & running statistics on what each of the LEMSAs sent to them. It's important to know that while we're working to ensure that we meet our own local policies & requirements, we're also working to meet requirements by statute & regulation that are laid out by the state. Everything regarding the statistics that we run all way up to & including numbers in our EMS plan are based on data that we send to the state. It's important that your data is clean & that you're meeting requirements so that we, as a system, can send data to the state. The state sends us updates at least quarterly. They ask us to compare the numbers that we have to the numbers that they have & to continuously validate them. It's important that there is an active system run by data to transmit in real time. The state compares APOT times that we have to what they have.

- *OCEMS New Headquarters by Adrian Rodriguez* – We are moving this month to new headquarters. 8300 Marine Way Irvine 92618. It's off the 5 freeway & Sand Canyon. It's a new building. We move out of our current building April 18, 2025. We start at the new building April 21, 2025. We will send notifications as to where future TAC meetings will be. We don't meet the quorum requirement.

*Justin Newton:* Our Ritchey warehouse is also moving. It is moving to 8226 Marine Way Irvine 92618. The AOC is moving the same day as EMS. We will be housed in one building.

*Laurent Repass:* Stephanie King is our new Prehospital Care/CQI Coordinator. She is an MICN. She used to work at Mission Hospital as an MICN & ER nurse. She was the ED Manager. She was also an ER nurse at OC Global Medical Center. She will be working with our ALS providers & BLS providers so it's a combined Prehospital Care/CQI Coordinator role to be a liaison to our ALS providers on the ALS & BLS side as well as coordinate CQI activities.

**VII. NEXT MEETING**

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

**VIII. ADJOURNMENT – Matt Armstrong adjourned the meeting at 9:30am.**