

Sonoma County EMS Workgroup Meeting Minutes

September 17, 2018 – 9:30-11:00 AM Sonoma County Water Agency Redwood Conference Rooms 404 Aviation Blvd. Santa Rosa CA 95403

<u>Project Goal</u>: To create a safe, effective system that delivers high-quality field care medicine that is responsive to the community needs of Sonoma County as supported by qualified, committed, and accountable EMS caregivers.

Goal for this meeting: To continue to resolve ways that identified issues will be addressed in the revised EMS Ordinance

Meeting Minutes

Facilitator Chris Thomas opened the meeting with introductions and asked for any corrections to the draft 9/10/18 workgroup meeting:

Steve Suter (Santa Rosa Fire Department) asked that the 9/10/18 notes be modified to reflect Chris's comment regarding the Santa Cruz presentation that he felt it was really about looking at systems data as opposed to a discussion of the merits of response times.

Chris noted that attempts to coordinate Steve Suter's suggestions for additional speakers on topics of innovation and efficiencies were underway for November or December and acknowledged an additional suggestion of Dean's AMR counterpart in Contra Costa had also been made and was being pursued.

Chris pointed out system capacity data had not been sent out to the group. Chris advised that REDCOM is meeting with the DHS epidemiologist representative for cleanup of the data, and the group should see a refined version soon, hopefully by the middle of the month.

The group moved to the subject of medical control discussions, and potential speakers on that topic. Fire service provider agency and labor representatives have expressed interest in bringing in outside speakers. Tim Aboudara (California Professional Firefighters Santa Rosa Local 1401) and Mark Heine (Windsor/Rincon Valley Fire Chief) were working on providing names to Chris; two suggested were Ray Ramirez (Cal Chiefs') and Ted Peterson (Southern Marin Fire). Bryan Cleaver (CVEMSA Administrator) advised the group he spoke with Ray in San Diego last week at EMS Commission and approached him about addressing the group. Ray advised he is available to speak on October 15th. Chris asked Bryan about potential LEMSA expert speakers who would be available to discuss alternate approaches to the opinions on medical control expressed in the County Counsel's office memo and EMS position paper on policy development process.

Bryan C. responded that in his experience with other LEMSAs, the view is consistent with the California Supreme Court opinion cited. Diane Akers (Akers Consulting) offered that the

regulations are foundational and describe medical control in detail. There have also been court decisions that inform the LEMSA viewpoint, including Supreme Court decisions from San Bernardino and (Superior Court from) San Joaquin County. Diane suggested Rick Narad, professor at Chico State, may be a possible speaker on the topic.

Chris moved the group to the next topic under Accountability and Supervision for the ordinance, LEMSA Evaluation. Chris identified some parameters that might be incorporated into the ordinance about LEMSA evaluations generally, such as frequency of evaluations, who should participate in them, what they should cover (scope) and where the completed evaluations should go and asked for input on them. In addition, Sonoma County Department of Health Services has contracted with Diane Akers for a current evaluation of CVEMSA which will be discussed next. Tim Aboudara expressed interest in reviewing Diane Akers' scope of work as well as another LEMSA evaluation to pull examples from those.

Diane Akers made the point that LEMSAs are different around the state and the variability along with the lack of standards in regulations for such evaluations make consistency in scope between LEMSA evaluations would be difficult to find. Diane said the scope of the evaluations depends upon available time and resources as well as what the system needs. Diane pointed out most systems don't do such evaluations on a regular basis

Diane characterized the scope for her evaluation of CVEMSA as looking at: are the LEMSA consistency in following regulations, local ordinances, and system policies? Are the things that are required being enforced? Also taking a generalized look at the people in system as well as the LEMSA's ability to perform required functions. Diane talked about looking at LEMSA and system performance over a series of evaluations and using the information to make the system better over time.

Kurt Henke (AP Triton, Sonoma County Fire Chiefs' Association. California Fire Chiefs' Association) felt an evaluation every year would be tedious and recomended18-24 months as an interval for regular evaluations. Kurt suggested stakeholders would select an outside vendor to representative stakeholder group to perform the evaluation. Kurt included criteria-based service delivery of customer service and enforcement of regulations in a fair and consistent manner as areas to be evaluated. Kurt also clarified that the evaluation should be objective-based. Performance requirements should be in balance with employee rights in law or relevant union contract. Input could be received in a written or interview format. Kurt did not support a focus on personalities, although he did feel the evaluation should ask stakeholders if they are respected by the LEMSA.

The conversation moved to the question of what entity contracts or selects representative stakeholders for this evaluation. Steve Herzberg (EMCC District 5, BBFPD) felt the Sonoma County Board of Supervisors needs to be a recipient of the results. He also felt all stakeholders should participate and in more than a written format. Steve also stated an opportunity to provide feedback on the results needs to be part of the process. Tim Aboudara suggested a "360° evaluation" may fit the need to look at objective and subjective criteria. "360° is in reference to who is being asked to evaluate the LEMSA. He felt that the same set of questions could be sent to all respondents and could have N/A (not applicable) as an available option if the respondent has nothing to offer in response. Customers, colleagues, and supervisors are some targets for survey respondents. Tim felt 18 months was an acceptable interval for evaluations.

Dean Anderson (American Medical Response) opined that annually was unrealistic, pointing out it might take 18 months for a stakeholders group to do in-depth evaluation. Dean

suggested intervals of two to three years for the shortest cycle, and preferably five years would be better.

Diane Akers suggested that performance indicators for the LEMSA be identified for the scope such as response times, medication errors or whatever the measures that are desired to be included, consider if the group really needs a full system review. Diane suggested the focus she is hearing is on customer service and relationships. One option would be to do the stakeholder relationship piece on a more frequent regular basis. Diane pointed out a big piece of any evaluation is the relationships with system partners. Focusing on the timing; Diane suggested no more than annually, and no less than every five years.

Bryan Cleaver made the point that a statutory framework already exists associated with evaluations and it mirrors those time intervals. Every five years the LEMSA submits an EMS plan to EMSA evaluating the system and how it is performing, both as a LEMSA and as an EMS system with all included partners. There is also an annual plan update required describing changes and updates in the system. Bryan also pointed out the Emergency Medical Care Council (EMCC) is inclusive of all provider types and the public and can have input to the Board of Supervisors. It is a vehicle that has the structure and representation that can provide input to the Board and it exists today.

Steve Suter mentioned the EMCC chooses new officers in the odd years and suggests that could be the timing. He suggested current events related to Mendocino could have funding impacts for the LEMSA and pointed out LEMSA contracts should be included in the scope of evaluation, too.

Tim Aboudara suggested statutory compliance and system performance as well as stakeholder satisfaction should be incorporated into the ordinance as scope at minimum and the ordinance should ensure stakeholders are heard. Customer satisfaction, an appeal on medical director opinions, and how effectively stakeholder input is used are all parts of stakeholder satisfaction that the evaluation of the LEMSA should touch on.

Steve Akre (Sonoma Valley Fire Rescue Authority) suggested the scope of the system review should be current and perhaps there could be a variable component such as every 5 years for a full assessment and an annual stakeholder customer service survey. EMCC should have the opportunity to define the content of the survey and assessment and should select the consultant and receive the finished assessment.

James Salvante (CVEMSA EMS Coordinator) pointed out relationships are key to everything we do. The evaluation needs to look at LEMSA compliance with contractual obligations and legal requirements for performance of duties such as certificate disciplinary process and associated costs. Does the LEMSA have enough resources to meet what everyone wants as well as enforce the regulations? In addition there needs to be some effort to ensure stakeholder education about what LEMSA's do.

At this point, Chris Thomas made a proposal drawing from the different elements of the discussion to try to define what might go into the ordinance. The proposal was that EMCC would have an annual stakeholder satisfaction survey and initiate a more comprehensive assessment of the LEMSA at least every 5 years and no more frequently than annually depending on their determination of need. The scope of the more comprehensive effort would be defined by EMCC to include all LEMSA activities and focus on particular current or special events as needed. The participation in the assessments would be 360 in nature and the results of the assessments would be shared with the EMCC and the Board of

Supervisors. In addition the EMCC would have the ability to select the consultant to perform the assessment. Chris asked if this proposal worked for everyone and there were no negative responses amongst a majority of nods of approval in the room.

Turning toward the current assessment, Diane Akers felt that her contract for the evaluation is written in such a way to allow her to cover the issues as raised in the discussion. She advised she has and will be in Mendocino and Sonoma counties meeting with system stakeholders. CVEMSA would be compared with other similar counties/LEMSAs. The evaluation would look at job descriptions, stakeholders' satisfaction in a confidential process, and a couple of different sets of questions.

CA EMSA and the EMS Commission worked on the survey questions together in 2008, spending three years in making it work to address all of what LEMSA's must do. Survey is blinded as to whom the answers are coming back from. Respondents are not identified by name, but there is verification authentication of some sort to verify the survey is reaching a line person on the ambulance, or an administrative person in the office. Questions are asked in multiple ways to get nuances out. An open-ended text box is included to capture all comments.

Diane suggested the survey will provide a foundation that can inform decisions on how to move forward, and identify areas where actions need to be taken. Diane pointed out, in response to staff comment on compliance with regulatory requirements, that EMSA has grown the responsibilities of LEMSAs and no LEMSA has enough staff to meet all the mandates from EMSA, even those with tax district funding.

Tim Aboudara asked to see Diane's scope of work. It will be provided. Tim suggested that the survey recipients be: transport agencies, first responders, hospitals, and customers/voters, and both labor and administrative representatives be contacted for each of the agencies.

Estimated date of completion was provided as April 30 though some parts may be completed earlier. It was pointed out that most of agencies have customer satisfaction surveys.

The group considered how to get surveys to patients. Steve Akre pointed out as the EMS first responder and transport provider in his area, any survey would likely be answered based on his own agency's perceived performance, not any LEMSA-specific actions. Desire expressed to avoid confusion about whom this evaluation is about. Most public doesn't know the LEMSA exists. Bryan Cleaver pointed out the LEMSA does have some pubic interaction, but primarily it is about complaints or dissatisfaction with an individual's interaction with system.

Chris Thomas suggested that perhaps the stakeholders representing agencies could be asked to identify customers/voters to participate in survey. Tim A. asked if the survey respondents could select if they wanted to be anonymous or not. Tim suggested anonymous accept for job classification, so input from labor would be discernable from administrative staff for example. Kurt Henke registered his opposition for anonymous responses with the exception made for line staff. Kurt felt professional opinions should be able to be expressed in a professional manner and with accountability. Kurt was concerned that there would be No accountability if anonymous responses were universally allowed.

Diane was asked if the survey could be conducted with names associated with the responses if desired. She did not know what was technically possible with the system she plans to use. Options will be looked into.

Bob Norrbom. (Sonoma Valley Fire/Rescue Authority) felt it important that the evaluation include Mendocino stakeholders based on issues within that area relevant to the Sonoma County process and LEMSA organization. It was pointed out that inclusion of Mendocino County into the LEMSA evaluation was part of the contract with Diane.

Steve Herzberg mentioned there have been surveys before, but stakeholders are in the room because the relationships have gone off the rails with last ordinance proposals. Steve H. asked about interviews conducted by The Abaris Group earlier in the stakeholder workgroup process. Steve felt the stakeholders have not heard back from Abaris survey interviews, and asked what the results of those surveys were. What is the results from that?

Diane will communicate results from the survey she conducts.

Chris closed the meeting with a reminder that the next meeting will be October 1st and will pick up with the Accountability and Supervision related topic of data collection.

Meeting adjourned. Next meeting will be October 1, 2018 at Sonoma County Water Agency 404 Aviation Blvd from 9:30-11:00 in the Redwood Conference Rooms.

Project Website:

https://www.coastalvalleysems.org/about-us/committees/sonoma-county-ems-systems-workgroup.html