



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

MINUTES

December 7, 2021

Scope of Practice Committee and EMDAC Discussion

1. Confirmation of quorum: Miller, Freeman, Brown, Bosson, Uner
2. Trial studies – no need for vote. Confirmed by EMSA (Garzon)
 - a. Buprenorphine and Point of Care UltraSound
 - i. Brown clarified how to ask questions about these studies
 1. Where do questions go. Answer is to email Dr. Garzon
3. Local Optional Scope Requests (Dr. Miller)
 - a. Unified Scope:
 - i. San Diego, Alameda, Napa approved without objections
 - b. Hydroxocobalamin, Marin –
 - i. No change. Haven't used it at all
 - ii. Confirmation – no pediatric protocol
 - iii. Approved
 - c. Sub-dissociative dose ketamine – renewal, Yolo, Rose
 - i. Did need period of suspending use
 - ii. Some of medics weren't diluting long enough for slow IV push
 - iii. Standard language to be dripped in 100 cc bag over ten minutes
 - iv. Much improved
 - v. Discussion of ACEP's updated policy on Hyperactive Delirium:
<https://www.acep.org/globalassets/new-pdfs/education/acep-task-force-report-on-hyperactive-delirium-final.pdf>
 - vi. Three adverse reaction – patient behavior changed
 1. One specific case with versed dosing highlighted dosing challenge
 - vii. Fentanyl for peds rather than adults
 1. Clarification – not comfortable for ketamine for peds?
 2. Fentanyl is going back into adult policy
 - viii. Approved



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

- d. iGel for pediatrics – San Francisco, Brown
 - i. Recommend to change to sniffing in both places
 - 1. Except in cases of traumatic injury
 - ii. Recommend using manufacture's holder
 - iii. Slide 22 has a hyperextended neck – would change
 - iv. Size 1 clarification
 - v. Clarification that this is for pediatrics only, and adults is already in scope
 - vi. Approved
- e. TXA – Ventura - renewal
 - i. No objections – approved
- f. Olanzapine – renewal Alameda
 - i. Estimate used only 10% of time of patients that qualify
 - ii. Approved
- g. Olanzapine – LA new
 - i. > 14 yo or longer than Broselow
 - ii. Contraindicated in dementia and pregnancy
 - iii. Discouraged in over 65 yo
 - iv. Question about polypharmacy concerns with medications that prolong QT and included benzodiazepines
 - v. Approved

EMDAC GENERAL MEETING

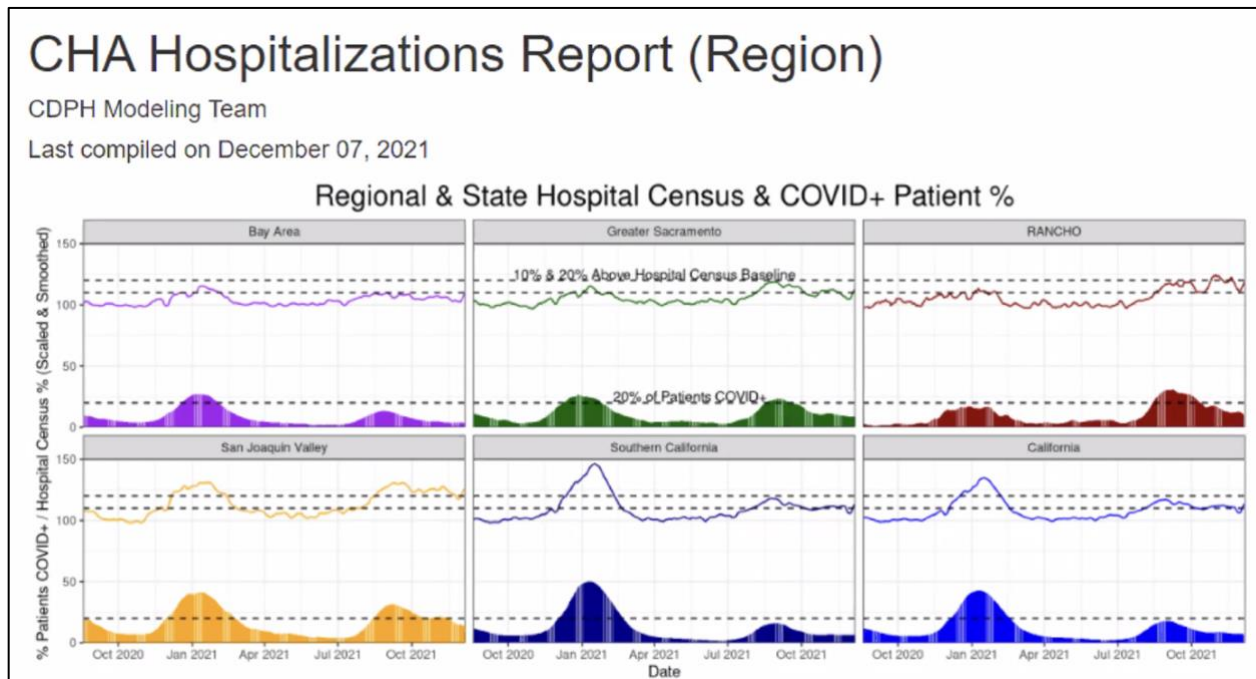
1000: Joint session with EMDAC/EMSAAC 1000-1100

- 1. Introduction of Liz Basnett – Interim EMSA Director (Liz Basnett)
- 2. Introduction of Dr Hernando Garzon – EMSA Medical Director (Liz Basnett)
- 3. EMSA Covid Response (Liz Basnett)
- 4. EMSA 2022 Plans (Liz Basnett)
 - a. Introduction of herself and background and Dr. Hernando Garzon



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

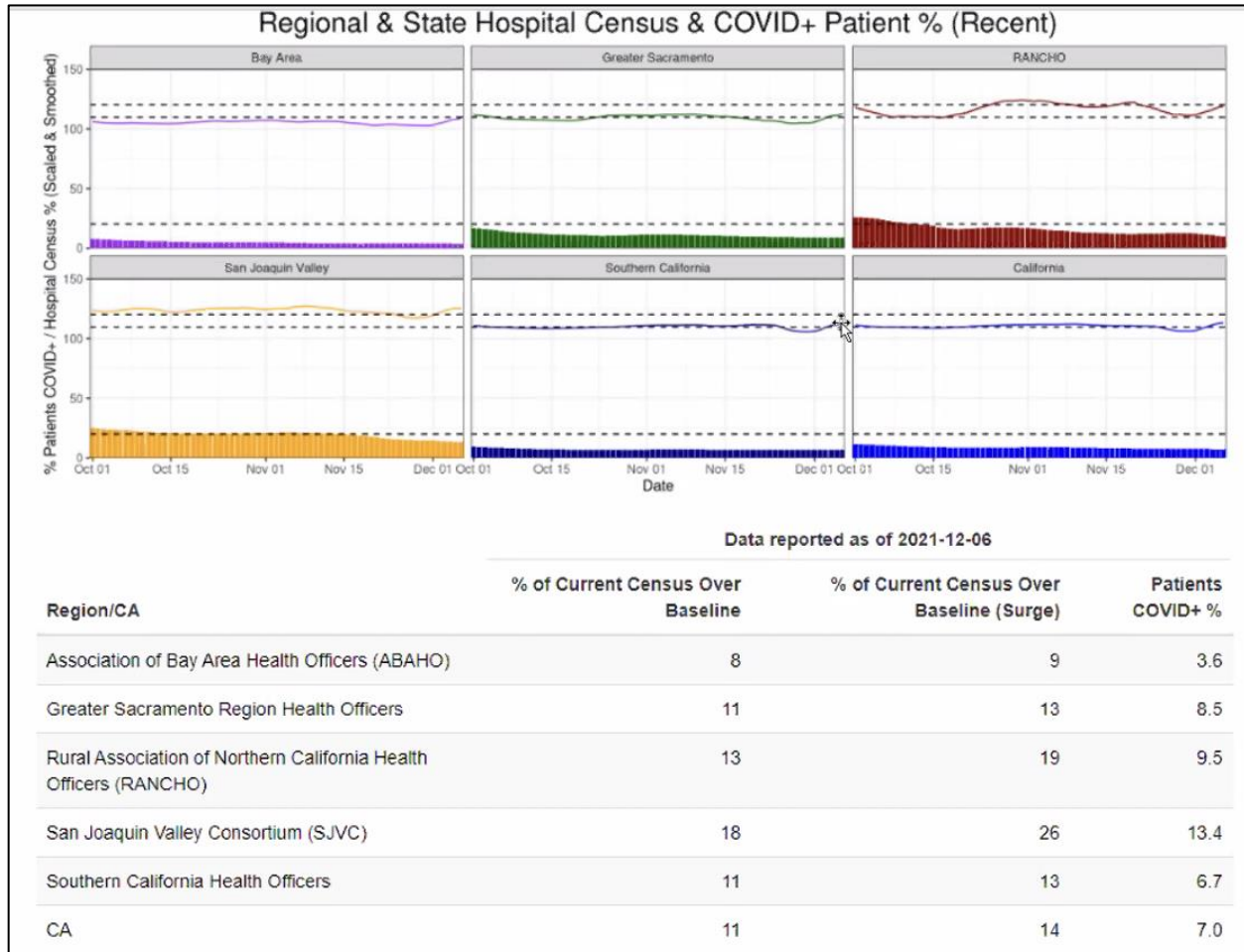
b. Garzon presentation:



- Southern California: 40% of population
- Took COVID nadirs in October and COVID nadirs in July to aid in prediction of upcoming numbers.
- 110% lower dotted line
- 120% upper dotted line



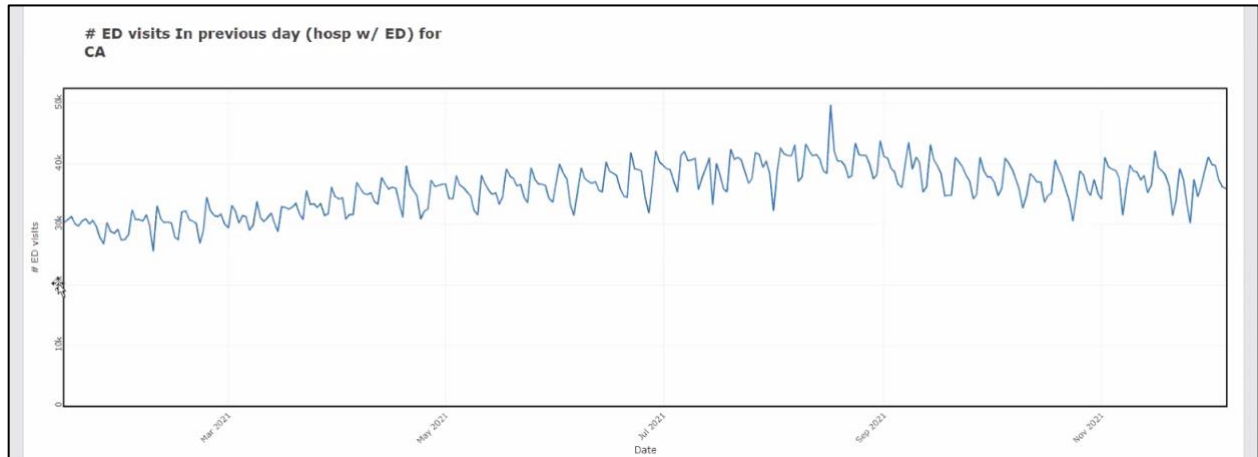
EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.



- Our hospitals have sometimes been pushing the 120% line.
- Used this prediction model to show lawmakers that it is not only COVID contributing to current numbers.
- Show that we are currently over baseline status. Regions are already significantly impacted.



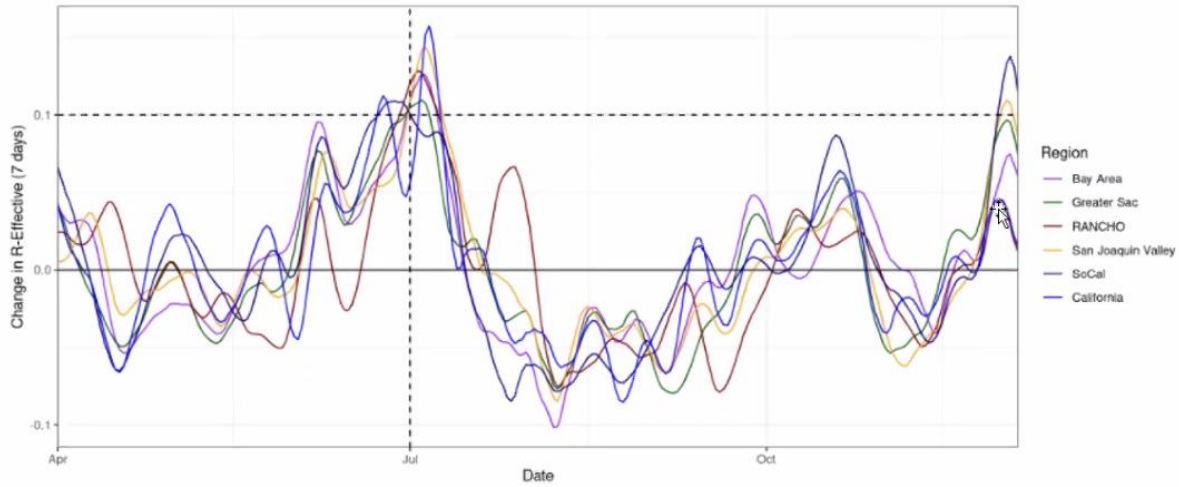
EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.



- This is totally reported ED visits.
- We are at 36k versus 30k last winter. ~>20% up

EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

Change in R-effective: Regional Level



Data reported as of 2021-12-05

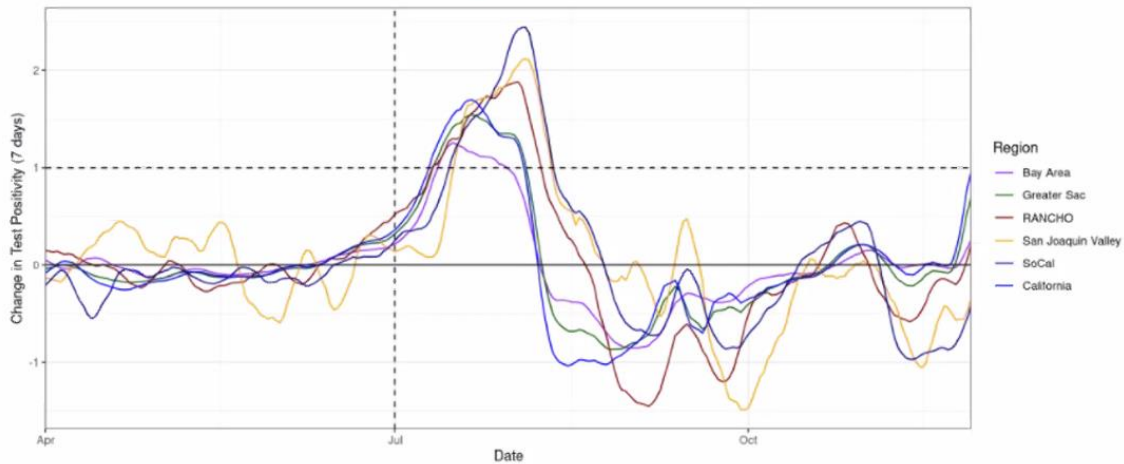
Region/CA	R-effective	Change in R-effective
Association of Bay Area Health Officers (ABAHO)	1.06	0.06
California	1.04	0.02
Greater Sacramento Region Health Officers	1.05	0.07
Rural Association of Northern California Health Officers (RANCHO)	0.94	0.01
San Joaquin Valley Consortium (SJVC)	1.04	0.09
Southern California Health Officers	1.13	0.11

- Up above 1 shows increased transmission and admission to the hospitals.
- Unclear why R-effective is up: Thanksgiving versus omicron versus more time indoors versus other.



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

Change in Test Positivity: Regional Level



Data reported as of 2021-11-28

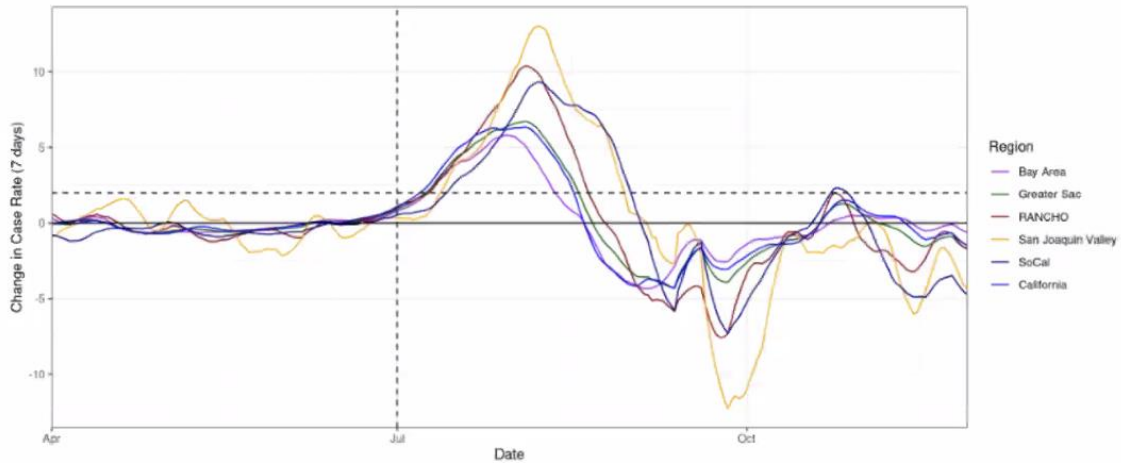
Region/CA	Test Positivity	Change in Test Positivity
Association of Bay Area Health Officers (ABAHO)	2.04	0.26
CA	2.90	0.69
Greater Sacramento Region Health Officers	3.37	0.20
Rural Association of Northern California Health Officers (RANCHO)	4.73	-0.35
San Joaquin Valley Consortium (SJVC)	4.89	-0.42
Southern California Health Officers	2.84	0.95

- Has shown increase in testing positivity



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

Change in Case Rate



Data reported as of 2021-11-28

Region/CA	Case Rate	Change in Case Rate
Association of Bay Area Health Officers (ABAHO)	6.9	-0.6
CA	9.5	-1.7
Greater Sacramento Region Health Officers	10.2	-1.7
Rural Association of Northern California Health Officers (RANCHO)	11.0	-4.4
San Joaquin Valley Consortium (SJVC)	11.3	-4.7
Southern California Health Officers	10.0	-1.5

- Not significant change recently



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

Staffing Support

NEW for 12/24/2021

Contract Staff Deployment Mission Types	Deployed Staff	Facilities Staffed
GACH (General Acute Care Hospital)	628	56
Infusion Center	115	14
LTCF (Long Term Care Facility)	202	22
SNF (Skilled Nursing Facility)	56	6
TVRC (Testing, Vaccine Resource Center)	125	4
Vaccine Sites	230	27
TOTAL	1356	129

REQUESTED	COUNT
ICU	55
ED	40
M/S Tele	50
M/S	25
RRT	10
LVN	10
CNA	10
	200

500 requested for 12/13/2021

REQUESTED	COUNT
ICU	150
ED	100
M/S Tele	125
M/S	50
RRT	25
LVN	25
CNA	25
	500

- Supplies are not currently an issue. Staffing is biggest issue currently.
- Current deployment is graph on left (one week old). Most are in acute care hospital. Also supporting infusion centers, SNFs, etc.
- More staff has been approved and upcoming.



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

Staffing Support

California COVID State Surge Hospitals				
Location	County	Status	Staffing Allocated	Bed Build Out
Coalinga Regional Medical Center	Fresno	Active	4*	**
Community Regional Medical Center	Fresno	Active	15	40
Kaweah Delta Medical Center	Tulare	Active	55	20
KERN MEDICAL CENTER	Kern	Active	37	30
Saint Agnes Medical Center	Fresno	Active	36	15
Shasta Regional Medical Center	Shasta	Active	28	40
Sierra View Medical Center	Tulare	Active	17	14
El Centro Regional Medical Center	Imperial	Active	41	38
Pioneers Memorial Healthcare District	Imperial	Active	23	17
Madera Community Hospital	Madera	Reactivated	26	22
Adventist Health and Rideout	Yuba	In Progress	102	68
Adventist Health Lodi Memorial	San Joaquin	In Progress	25	50
Dameron Hospital	San Joaquin	In Progress	29	50
Riverside University Medical Center	Riverside	In Progress	104	70
TOTAL			542	474

- Have mostly been supporting unaffiliated hospitals.
- This is based on hospital surrounding support (ex: Kaiser hospitals have greater support)

Other (COVID) Healthcare Surge Support

- State level support teams to heavily impacted regions – EMSA, CDPH, CHCQ, OES Logs, Crisis care
- Reactivate All-Access Transfer Center (AATC) to facilitate IFTs
- COVID EOs extended to March 31, 2022
- Omicron
 - Hospital Surge (EMSA) – No change
 - CDPH
 - Mandatory indoor masking
 - Mandatory vaccinations in other sectors (pre-hospital)

- Discussion currently around when do we restart indoor masking



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

Questions for Basnett and Garzon:

- How do you measure hospital capacity? Licensed vs staffed beds?
 - Garzon - Generally is reported based on baseline and currently availability
 - When was baseline determined?
 - Took nadirs from fall 2020 and summer 2021 to calculate (when COVID was < 5% hospital censuses)
- Does EMSA have a process to ensure that the surge hospitals are not supplanting local or contract staffing with the state supported staffing?
 - Basnett – asking hospitals to support regional needs when getting support from the state
- Any guidance or discussion around some hospitals going into the red?
 - Basnett – Something we will be watching over the next few years

5. Basnett discussion of goals for EMSA:

- a. Goal 1 – Data collection
 - i. Get feedback and identify data collection and literacy
 - ii. Inform decision and policy making
- b. Goal 2 – Partnerships
 - i. Stakeholder feedback
- c. Goal 3 – Strategic planning
 - i. Current plan from EMSA is from 2016
 - ii. Will be updating
- d. Feedback from group:
 - i. Gausche-Hill
 - 1. Recommend meeting with California EMS leadership for data collection challenges

6. EMSAAC Conference 2022 (Trevor Douville)

- a. EMS Rocks and Recovers
 - i. Acknowledging the challenges of this past year and mental health
 - ii. <https://www.emsaac.org/conference>



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

7. 1544 feedback needs to occur – Sporer and Miller
 - a. Recommend getting work group together including Executive Committee
 - b. This will be coordinated offline. Potentially January 3rd around 1600.
8. Deadline for EMSA Awards is December 31, 2021
 - a. <https://emsa.ca.gov/ca-ems-awards-nominations/>
9. Third week of 2022 will be West Coast ride for the National EMS Memorial Bike Ride
 - a. <https://nemsmbrr.org/>
 - b. David Mangino will be chair for this

EMDAC Closed Session - Regular Agenda

1. September 2021 minutes (Dr. Freeman)
 - a. Motion for approved and none opposed
2. EMS Commission (Dr. Miller, Uner)
 - a. Behavioral health – now a standing item
 - i. Nothing in particular to discuss here unless there are questions
 - b. APOT – Sporer below
3. APOT EMSA Committee (Dr. Sporer)
 - a. Many stakeholders at the meeting
 - b. All in agreement about displeasure with APOT
 - c. Longer discussion about what times are acceptable
 - d. Resurrected tool kit from four years ago
 - e. Chose to send less patients to the ED
 - i. Psychiatric interventions
 - ii. Assess and refer policies
 - f. Some options: Send pts to waiting room
 - g. Recommendations – get C suite involved
4. EMSAAC Conference 2022 (Dr. Bosson)
 - a. Is happening in 2022
 - b. June 1-2 in San Diego, CA
 - c. Researching hybrid option



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

5. Pediatric Formulary Update (Dr. Gausche-Hill)
 - a. Small committee working on it
 - b. Survey to come about if a statewide formulary would be used
 - c. Formulary use decreases error by 5%
 - d. Paramedics feel they can do a better job and they will have less errors
 - e. https://play.google.com/store/apps/details?id=com.lacounty.emsdrugdoses&hl=en_US&gl=US
 - f. Proposed idea of standardizing formulary for the state
6. OHCA and ROSC study Update (Dr. Gausche-Hill)
 - a. Gausche-Hill at another meeting – update to occur later
7. RSV Vaccination letter of support discussion (Dr. Freeman)
 - a. Sporer – concern this is outside the wheelhouse of those working in EMDAC
 - b. Koenig – concern for why EMDAC is the group being focused on.
Recommend doing more research.
 - c. Schultz – we should defer this discussion/support to those that are more informed than EMS physicians.
 - d. Ghilarducci – believe we would be inserting ourselves into a process that's already established
 - e. Freeman – we will say “no”
 - f. Would move to support a letter that is written and emailed out that “vaccine preventable diseases” should be promoted for vaccine. No specific vendor should be included. However Vaezazizi notes that only certain vendors have certain vaccines.
 - i. Freeman and Vaezazizi note that setting a precedent with this statement is important to consider
 - ii. Continued concern expressed that specifically the RSV vaccine would only have an EUA and would not be recommended for support
 - g. Ultimate proposals – table topic currently
 - i. California NAEMSP, California ACEP and EMDAC to form task force for joint statement on vaccine advocacy



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

- ii. <https://naemsp.org/home/news/naemsp-joins-statement-supporting-vaccine-mandates/>
- iii. David Ghilarducci, Marc Gautreau, Clayton Kazan, Nichole Bosson, Kathy Staats, Lori Winston volunteer for task force
- 8. Assess & Refer joint document with CalACEP (Dr. Staats)
 - a. Goldman – brought up the importance of advocating with local stakeholders for assess and refer policies as this one gets final approval.
- 9. CalACEP report (Dr. Winston)
 - a. Strategic Goals
 - i. Legislative very active
 - 1. Sporer and Gausche-Hill speak in support for maintaining medical oversight
 - 2. APOD another potential area for advocacy
 - ii. Noted Advocacy Day on the capital
 - iii. All hands on deck for surprise bills
 - iv. 50th anniversary this upcoming year
 - v. Upcoming Advanced Conference targeted as medical students and residents
 - vi. Do ITLS course
 - vii. Focus on board – will attend board source course
 - 1. Going to Microsoft Teams, hold onto institutional knowledge better
- 10. Legislative Update (Dr. Shafer)
 - a. Slow down with the end of the year
 - b. Meeting with EMSAAC next week
- 11. Resiliency among our prehospital care providers (Dr. Freeman)
- 12. EMDAC June meeting 2022 poll (Dr. Freeman)
 - a. Open meeting law from state will expire and at least EMS commission will stop allowing hybrid
- 13. Treasurer's Report (Dr. Shepherd)



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

a. We didn't charge for 2021. Some people paid. How do we want to handle that?

- i. Motion made to roll dues over to 2022 for those that paid in 2021.
- ii. No opposition.

14. Vote on open positions for Board of Directors – All majority approved.

a. President Elect: Kathy Staats
Active Member - Board Members

1. President Elect (Single Choice) *



b. Secretary: Dustin Ballard

2. Secretary (Single Choice) *



c. Treasurer: Daniel Shepherd

3. Treasurer (Single Choice) *



d. Active-at-Large: Reza Vaezazizi

e. Active-at-Large: AJ Singh

4. Active-at-large (Multiple Choice) *



f. Associate-at-Large: Marc Gautreau – 86.66%

g. Associate-at-Large: Joelle Donofrio – 73.33%

15. Committee members – Discussion occurred. Only requires executive approval, not voting. Therefore all are approved.

a. SOP:

- i. Katherine Shafer (new)
- ii. Ken Miller
- iii. Nichole Bosson
- iv. Eric Rudnick

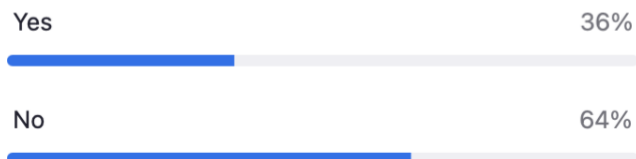


EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

- v. Atilla Uner
 - vi. Kim Freeman
 - b. Legislative
 - i. Kathy Staats
 - ii. Carl Schultz
 - iii. Katherine Shafer
 - iv. Consider any others. Max 6 active members.
16. APOD –
- a. Kazan – workforce shortage currently. High rates of burn out. PHPs not being treated well.
 - b. <https://catalyst.nejm.org/doi/full/10.1056/CAT.21.0217>
 - c. Koenig – based on potential to change diversion policy – 22 respondents

Diversion - For LEMSA Medical Directors

1. Do you permit hospitals to go on diversion for ED saturation? (Single Choice) *



17. ODMAP Presentation (Dr. Roneet Lev and Ali Burrell)
- a. <http://www.odmap.org/>
 - i. Submit agency: <http://www.odmap.org/AgencyAccess/RequestForm>

<https://www.cdc.gov/drugoverdose/od2a/index.html>

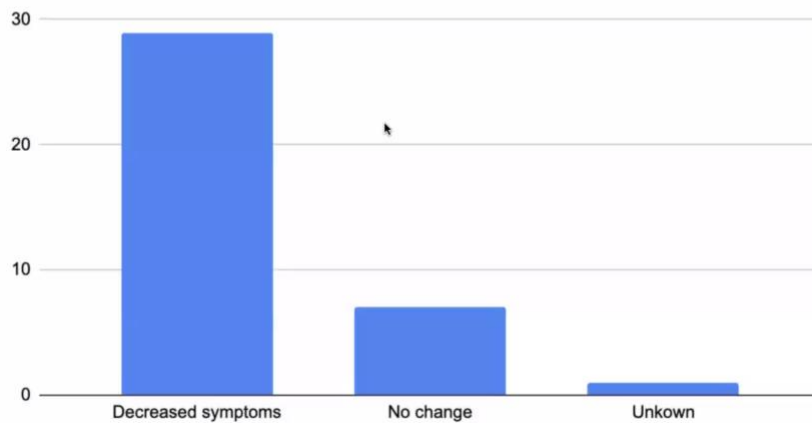
<https://www.hidtaprogram.org/ors.php>

18. Opioid Pilot Update for Contra Costa (Dr. Hern)
- a. <https://caparamedic.org/cope/>
 - b. <https://cabridge.org/resource/engagement-of-emergency-medical-services-project-summary/>
 - c. Contra Costa's data:



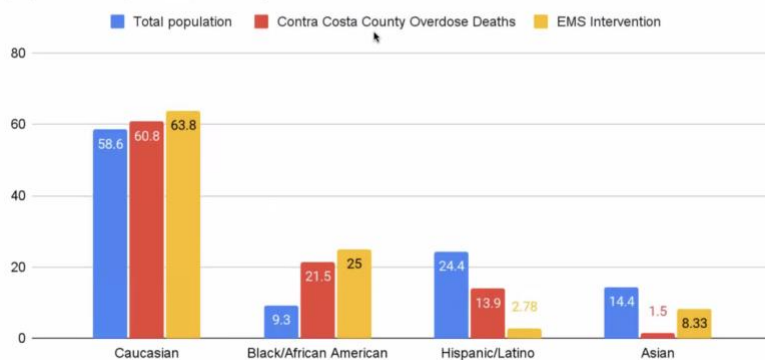
EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

Opioid withdrawal symptoms post-buprenorphine administration (n=36)



No cases of precipitated withdrawal

Contra Costa County EMS Intervention compared to county's overdose death population by race/ethnicity

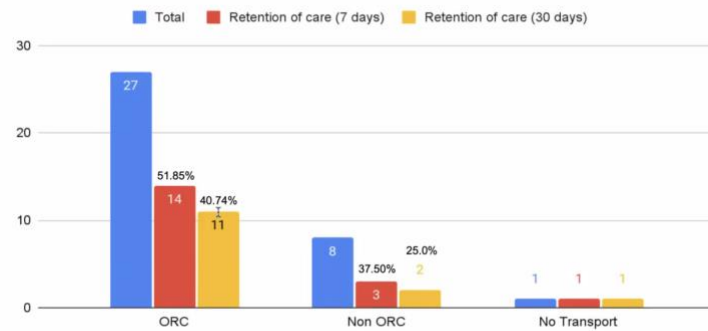


Overdose deaths are disproportionate.



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

Retention in care by transport destination



ORC Overdose receiving center

Small numbers, but perhaps a trend in there.

19.Roundtable

Brown (San Francisco):

- SF Emergency Physicians Association looking for partners to tell the story of the past 1.5 years

Ballard (Marin): No big updates

D'Souza (California NAEMSP): Latest email may have gone to spam. Check your folder. Will plan to meet at NAEMSP

Freeman (Tuolumne): Discussion for bypass for strokes. Stroke article:

<https://www.ahajournals.org/doi/10.1161/STROKEAHA.120.033228>

Ghilarducci (Santa Cruz) – a hospital will be closing in March 2022. Will be stress on the local EMS system and likely moving patients to other counties

Garzon (Sacramento) – No updates

Gausche-Hill (LA): Will be rolling out igel and behavioral health initiative. Looking to begin SI training. Rolling out olanzapine. Descalation using new technique.



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

Shafer (San Joaquin): No updates

Kidane (Contra Costa): rolling out TXA for trauma and PPH. EOA provider for ET3, offering telehealth evaluation.

Konik (Napa): Question for pediatric drowning cases: any educational materials. Kazan provided: <https://ndpa.org/>

Miller (Santa Clara): Naloxone: first dose seems to make the most difference. Doses 2 and 3 do not appear to make much of a difference. ALS makes a difference with AMS, seizures, cardiac arrest

Shephard (Ventura): attempting to re emerge

(Santa Barbara): in final stages of developing RFP

Sporer (Alameda): CAT team – Behavioral health team. Oakland is starting 15 EMTs out in the field. Alameda city is beginning a behavioral paramedic program. Starting to do new RFP process. First hospital with health data exchange, in technical conversations with Sutter. Retiring in April 2022.

Staats (Imperial): diversion and APOD policies updated. Working on new EMSA plan and first STEMI center. Working on EMS manager position currently.

Uner (UCLA): Graduation ceremonies updated

Thomas (New Medical Director for California State Parks)

Vaezazizi (Riverside and San Bernadino): assess ability of paramedics to be trained and continue quality energy for POCUS with sonosite butterfly ultrasounds. iGel anticipated to be up and running first quarter of 2022. Riverside has an ET3 pilot that is launching with AMR – relies on Assess and Refer policy as nexus into this process. UC will oversee this patients.



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

20. Adjourn at 1500

Next meeting March 15, 2022 in Garden Grove onsite with hybrid option TBD

Deadline for EMSA Awards: December 31st, 2021 (This month)

Other important upcoming dates:

- 3rd week of September 2022 – EMS Ride of Remembrance
- NAEMSP January 10-15, 2022
- EMSAAC Conference, June 1-2, 2022
- California NAEMSP Meeting January 13, 2022, 1900-2100, in La Jolla A
- CalACEP Government Affairs Committee, January 13, 2022, 1000-1100 Zoom
- CalACEP Board Meeting, February 3, 2022, Sacramento, 0900-1600
- CalACEP Government Affairs Committee, March 3, 2022, 1000-1530
- CalACEP Government Affairs Committee, March 10, 2022, 1000-1100
- Legislative Leadership Conference (organized by CalACEP), April 20, 2021, 0900-1700, Sacramento
- CalACEP Board Meeting, April 21, 2022, 0900-1600, Sacramento
- CalACEP Government Affairs Committee, May 12, 2022 1000-1100, Zoom
- CalACEP Board Meeting, July 7, 2022, 1000-1600, Sacramento
- CalACEP Board Retreat, August 2-3, 2022, 1000-1700, Sacramento
- CalACEP Government Affairs Committee, August 11, 2022, 1000-1100, Zoom
- CalACEP Board Meeting, September 1, 2022, 1000-1500, TBD
- CalACEP Annual Conference, September 2, 2022, 0900-1700, TBD
- CalACEP Council Delegation, September 16, 2022, 1000-1530, TBD
- CalACEP Council Delegation, September 23, 2022, 1000-1200, TBD
- ACEP Council Meeting, September 29-30, 2022, 0800-1700, San Francisco



EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

- CalACEP Government Affairs Committee, October 13, 2022, 1000-1100, Zoom

DRAFT