EMERGENCY MEDICAL SERVICES AUTHORITY

10901 GOLD CENTER DRIVE, SUITE 400 RANCHO CORDOVA, CA 95670 (916) 322-4336 FAX (916) 324-2875



September 29, 2017

Dave Magnino, EMS Administrator Sacramento County EMS Agency 9616 Micron Ave, Ste 960 Sacramento, CA 95827

Dear Mr. Magnino:

After a review, the Emergency Medical Services Authority has determined that the Sacramento County Quality Improvement Program is in compliance with Title 22, Division 9, Chapter 12 EMS System Quality Improvement and EMSA #166 Emergency Medical Services System Quality Improvement Program Model Guidelines.

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An update will be due 12 months from the date of this letter (September 29, 2017). If you have any questions regarding the plan review, please call Adam Davis, at (916) 322-4336, extension 409.

Sincerely,

Tom McGinnis, EMT-P EMS Systems Division Chief

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SACRAMENTO COUNTY 2016 QUALITY IMPROVEMENT PROGRAM ANNUAL UPDATES August 31, 2017

In accordance with State of California Title 22 -Division 9, Chapter 12, EMS System Quality Improvement.

Quality Improvement Program

The Sacramento County Emergency Medical Services Agency (SCEMSA) implemented the Quality Improvement Program (QIP) in June 2015. The QIP provides comprehensive evaluation of prehospital patient care. Participants include dedicated professionals in communications, public and private transportation, EMS training, and hospital emergency medical care. The QIP focuses on identifying problems, taking steps to correct deficiencies, and recognizing excellence in performance and delivery of care.

Description of Agency

SCEMSA is comprised of an EMS Administrator, EMS Medical Director (part-time, contracted), EMS Coordinator, three EMS Specialists, one Administrative Service Officer II, and one Office Assistant. Current staffing is depicted in an updated organizational chart. (See attachment).

2016 Update

The Technical Advisory Group (TAG) works in alignment with its mission statement and objectives to achieve system wide improvement and recognition of excellence. The TAG identifies areas in need of renovation and implements changes to optimize system effectiveness and prehospital patient care.

TAG accomplishments:

- Sepsis Policy (New)
- Paramedic Accreditation Requirements (Updated)
- ❖ Paramedic Infrequent Skills (Updated)
- ❖ Pediatric Medication Dosage Accuracy review (New)

Operational Advisory Committee (OAC) accomplishments:

- * Radio Communications Guidelines (New)
- Pediatric Intubation policy (Updated)
- ❖ Pediatric Nausea and Vomiting policy (New)
- ❖ Emergency Medical Dispatch (EMD) priority reference system policy (New)

Quality Improvement Program (QIP) workgroup accomplishments:

- QIP Plan update.
- Developed a reporting form for QI and QA to identify:
 - o Issues with potential patient harm.
 - o Any incident which qualifies for review under California Health and Safety Code

Sacramento County 2016 Quality Improvement Program Annual Update

- ❖ Updated the mandatory Indicators for core measure listed below:
 - o Trauma
 - o Acute Coronary Syndrome/Heart Attack
 - Cardiac Arrest
 - o Stroke
 - o Respiratory
 - o Pediatric
 - o Pain Intervention (New)
 - o Skill Performance by EMS Providers
 - o EMS Response and Transport

Active Projects

- 1. As of December 2016, all SCEMSA Advanced Life Support (ALS) Providers are National Emergency Medical Services Information System Version 3 (NEMSIS v3) compliant. Sacramento County is experiencing adjustments related to the transition from paper patient care reports (PCR) to electronic patient care reports (EPCR). Hospital providers recognized a delay in the transfer of EPCRs following NEMSIS 3 implementation. SCEMSA is closely monitoring and working in conjunction with the hospitals and pre-hospital providers to find a viable solution. The current goals are:
 - ❖ Minimize data submission errors from ALS provider to data vendor Inland Counties Emergency Medical Agency (ICEMA).
 - ❖ Ensure timely completion and submission of EPCR (within one hour) by EMS pre hospital ALS providers.
- 2. Define the newly established End of Life Option Act and provide a clear guideline for Providers.
- 3. Create a policy and procedure for Law Enforcement Administration of Narcan.
- 4. Work with Sacramento County ALS providers' compliance with the Emergency Medical Dispatch Continuous Quality Improvement program.
- 5. Ensure that the criteria for reporting, quality assurance, and follow-up for the Ambulance Patient Offload Time (APOT) standard are continued with evidence of process improvements. This includes tracking and providing feedback to hospitals and emergency responders.

2017 Focus:

Sacramento County EMS Agency is working diligently to enhance reporting capabilities and provider accountability to meet or exceed the State of California standards while continuing to build relationships with EMS providers and hospitals throughout the region.

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December 29, 2016

Dave Magnino, EMS Administrator Sacramento County EMS Agency 9616 Micron Ave, Ste 960 Sacramento, CA 95827

Dear Mr. Magnino:

After a review, the Emergency Medical Services Authority has determined that the Sacramento County EMS Agency Quality Improvement Plan Update is in compliance with Title 22, Division 9, Chapter 12 EMS System Quality Improvement and EMSA #166 Emergency Medical Services System Quality Improvement Program Model Guidelines.

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