Memorandum

DATE: September 2, 2003

TO: Allan Hardcastle, Presiding Judge of the Superior Court

FROM: Mark Kostielney, Director, Department of Health Services
       Bruce H. Lee, Regional EMS Administrator


This is the Department of Health Services (DHS), and the Emergency Medical Services (EMS) Agency response to the 2002-2003 Grand Jury Report. The EMS Agency, a section of DHS, is responsible for the overall coordination and regulation of the countywide EMS system. It is also important to understand that the EMS Agency provides oversight and staffing of the County Contract Compliance Subcommittee. This subcommittee is a part of the Emergency Medical Care Council (EMCC), and is charged with reviewing and assessing contract compliance and system performance data related to the County franchise ambulance contract. The function of EMS dispatching has been delegated to the Redwood Empire Dispatch and Communications Authority (REDCOM), by action of the Board of Supervisors. REDCOM is a separate legal entity with responsibilities including fire and EMS dispatching. REDCOM operates under the authority of an independent board of directors. Many of the Grand Jury's findings and recommendations on the subject of "Emergency Medical Dispatch" are in fact a responsibility of REDCOM. Therefore, this response will be limited to the topics that directly relate to the functions of the Contract Compliance Subcommittee, and to DHS and the EMS Agency specific to areas of oversight responsibility.

EMERGENCY MEDICAL DISPATCH

Findings

Finding F6 (page 47): Ambulances are used for both emergency and non-emergency transfers. Under certain conditions this may cause a shortage of ambulances available for an emergency. Since non-emergency transfers are a good source of income, and since the contract company dispatches all ambulances, including those of other companies, a possibility for conflict of interest exists.

Response: We partially agree with this finding. The issue of a shortage of ambulances has been examined and addressed by the County's Emergency Medical Care Council (EMCC) in its annual report to the Board of Supervisors (2002). The findings of the EMCC included information that from time to time there are not enough ambulances in the County due to a number of complex factors. These factors include the lack of a countywide public supported revenue mechanism to underwrite the cost of providing additional ambulances, an inadequate
reimbursement rate from private and government revenue sources and an increasing population base that has outpaced the supply of available ambulances. Yet, there are no documented instances of a failure of an ambulance to respond to an emergency call for service, in the last ten years, that has resulted in poor patient outcome.

The EMS Agency, in fulfilling its oversight and management responsibilities for the County’s EMS system, instituted ambulance provider zones, in which ambulance transport provider companies or agencies are assigned a primary ambulance response zone. If a call for service originates within a particular ambulance response zone, the corresponding zone ambulance is assigned to the call. The EMS Agency has also instituted a “mutual aid” mechanism, whereby neighboring ambulance providers are utilized to provide an ambulance response into an adjacent zone when the primary zone ambulance is unable to respond due to being committed to another call for service or patient transport.

The ambulance franchise provider, American Medical Response/dba Sonoma Life Support (AMR-SLS), has in addition to its 9-1-1 response fleet, a cadre of ambulances that are dedicated to providing non-emergency transfers. AMR also has contracts with other local ambulance companies to provide assistance in providing non-emergency transfer services. Additionally, the CAD system being utilized by the REDCOM dispatch center clearly delineates respective ambulance zones and recommends the zone provider accordingly.

The EMS Agency is not aware of any instances whereby the contract company (AMR-SLS) has dispatched its own ambulances across ambulance zone boundaries to the exclusion of the assigned ambulance zone provider. Ambulance providers monitor the dispatch radio frequencies constantly and are aware of any 9-1-1 generated event occurring in their respective jurisdiction, especially since they are dispatched in tandem with the local first responder agency (a fire department). The EMS Agency has not received any complaints, notifications or inquiries concerning the inappropriate dispatch of franchise ambulances to adjacent ambulance provider zones. In this light, the EMS Agency is confident that system is working in a fair and credible manner. Therefore, the Agency believes that the “methods to avoid conflict of interest issues” are adequate and workable.

**Recommendations**

**Recommendation R1 (page 48):** The efficacy of twelve-hour shifts should be examined.

**Response:** The recommendation will not be implemented by the Contract Compliance Subcommittee as it is beyond the scope of the Subcommittee’s responsibility. This is a matter directly related to the responsibilities of REDCOM.

**Recommendation R2 (page 48):** A formal evaluation process including testing should be developed to determine if dispatchers can handle the extremes of boredom and high stress that they encounter on this job as well as the long work span.

**Response:** This recommendation will not be implemented because it is beyond the scope of the Contract Compliance Subcommittee. The Subcommittee does not have any direct or indirect oversight responsibilities concerning the hiring, training and/or evaluation of REDCOM dispatchers.
Recommendation R3 (page 48): An effective communication system between helicopter dispatch and ground responders needs to be implemented.

Response: This recommendation will not be implemented because the Contract Compliance Subcommittee does not have any direct responsibilities concerning helicopter dispatch procedures.

Recommendation R4 (page 48): Experience is very valuable for a dispatcher, and experienced dispatchers should be rewarded accordingly. The County Compliance Subcommittee should support the contract company’s pay and benefit package so it remains adequate to keep good employees from leaving.

Response: This recommendation will not be implemented by the Contract Compliance Subcommittee. The County Contract Compliance Subcommittee does not have any direct or indirect influence on the REDCOM-AMR Dispatch Contract.

Recommendation R5 (page 48): Since the GPS/CAD system is critically dependent on accurate and current information, the County Director of Emergency Services must assure the data is accurate and continually updated.

Response: This recommendation will not be implemented by the Contract Compliance Subcommittee. The County Contract Compliance Subcommittee does not have any direct responsibilities concerning the management and updating of data for the CAD/GIS system.

Recommendation R6 (page 48): Methods to avoid conflict of interest issues, as stated in F6, with the contract company and other ambulance companies must be implemented.

Response: The recommendation has been partially implemented. The County Contract Compliance Subcommittee does not have any direct input into the dispatch procedures currently utilized by the REDCOM Dispatch Center. The issue of a shortage of ambulances has been examined and addressed by the County’s Emergency Medical Care Council (EMCC) in its annual report to the Board of Supervisors (2002). The findings of the EMCC included information that from time to time there are not enough ambulances in the County due to a number of complex factors. These factors include the lack of a countywide public supported revenue mechanism to underwrite the cost of providing additional ambulances, an inadequate reimbursement rate from private and government revenue sources and an increasing population base that has outpaced the supply of available ambulances. Yet, there are no documented instances of a failure of an ambulance to respond to an emergency call for service, in the last ten years, that has resulted in poor patient outcome.

The EMS Agency, in fulfilling its oversight and management responsibilities for the County’s EMS system, instituted ambulance provider zones, in which ambulance transport provider companies or agencies are assigned a primary ambulance response zone. If a call for service originates within a particular ambulance response zone, the corresponding zone ambulance is assigned to the call. The EMS Agency has also instituted a “mutual aid” mechanism, whereby neighboring ambulance providers are utilized to provide an ambulance response into an adjacent zone when the primary zone ambulance is unable to respond due to being committed to another call for service or patient transport.
The ambulance franchise provider, American Medical Response/d.b.a. Sonoma Life Support (AMR-SLS), has in addition to its 9-1-1 response fleet, a cadre of ambulances that are dedicated to providing non-emergency transfers. AMR also has contracts with other local ambulance companies to provide assistance in providing non-emergency transfer services. Additionally, the CAD system being utilized by the REDCOM dispatch center, clearly delineates respective ambulance zones and recommends the zone provider accordingly.

The EMS Agency is not aware of any instances whereby the contract company (AMR-SLS) has dispatched its own ambulances across ambulance zone boundaries to the exclusion of the assigned ambulance zone provider. Ambulance providers monitor the dispatch radio frequencies constantly and are aware of any 9-1-1 generated event occurring in their respective jurisdiction, especially since they are dispatched in tandem with the local first responder agency (a fire department). The EMS Agency has not received any complaints, notifications or inquiries concerning the inappropriate dispatch of franchise ambulances to adjacent ambulance provider zones. In this light, the EMS Agency is confident that system is working in a fair and credible manner. Therefore, the Agency believes that the “methods to avoid conflict of interest issues” are adequate and workable.

To summarize, the methods used to avoid conflict of interest issues are:

- Established ambulance provider zones, configured along fire department jurisdictional boundaries.
- Established fleets of both 9-1-1 response ambulances and non-emergency ambulances.
- Mutual aid agreements between ambulance providers, including AMR.
- REDCOM utilization of CAD/GIS data that conforms to the above mentioned jurisdictional boundaries.
- Constant monitoring of dispatch radio frequencies by both fire departments and ambulance providers.
- A complaint – unusual occurrence review process.
- Contract Compliance Subcommittee review of all ambulance franchise responses, including all “out of franchise area” responses.

cc: Mark Tansil, 2002-03 Presiding Judge of the Superior Court
    Members, Board of Supervisors
    Denise Gordon, Court Executive Officer
    Mike Chrystal, County Administrator
    Eeve Lewis, County Clerk
    REDCOM Board