

EMERGENCY 2017 CONTRA COSTA EMS SYSTEM PERFORMANCE REPORT



For more information visit ccchealth.org/ems

MESSAGE FROM THE DIRECTOR

2017 An EMS System Striving for Optimization

Contra Costa EMS System stakeholders continuously strive to improve reliability of services focused on improving patient outcomes in emergencies. During 2017 the EMS System was tested like never before and called upon to provide not only life-saving fire and EMS response but shelter and safe haven for hundreds of displaced elders from neighboring communities during the North Bay fires.

The 2017 EMS System annual report also marks the full implementation of the Alliance emergency ambulance service delivery model (Contra Costa Fire Protection District, in partnership with legacy ambulance provider American Medical Response). The unique service delivery model has been the subject of both curiosity and scrutiny and has without question offered outstanding EMS ambulance service to the citizens of Contra Costa County along with San Ramon Fire Protection District and Moraga Orinda Fire Protection District.

Under year two of the new EMS System design the Contra Costa EMS System is evolving into a more integrated patient centric model system. Once again winning national awards for patient care in the area of high-risk heart attack while building new partnerships with behavioral health, law enforcement, schools, long term care facilities and homeless services.

The EMS system is the ultimate health care safety net. As communities navigate the changes in healthcare, your EMS community is at the ready to support, innovate and respond.

The Contra Costa EMS Agency is privileged to be a part of a community of engaged dedicated EMS professionals. Join me in recognizing their collective accomplishments with this 2017 annual report.

Patricia Frost RN, MS, PNP Director, Contra Costa EMS

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EMERGENCYMEDICAL SERVICES

Contra Costa's coordinated EMS system began in 1968, when the Board of Supervisors appointed the Contra Costa Emergency Medical Care Committee.

The first EMS System Plan was established in 1975.

MISSION STATEMENT

To ensure that quality emergency medical services are available for all people in Contra Costa County, and that emergency medical care is provided in a coordinated, professional, and timely manner.

- ► Monitor and ensure patient safety at all times
- ► Inspire and emulate professionalism
- ▶ Provide services with a high level of integrity
- ► Assure a reliable and high-quality emergency response



- ► Support and facilitate emergency and disaster preparedness
- ► Integrate with healthcare systems to improve outcomes
- ▶ Promote and support community resiliency

EMS TIMELINE 2017: ACCOMPLISHMENTS AND SIGNIFICANT EVENTS

- ▶ Implemented web-based technology platform allowing prehospital personnel to submit online applications of EMT and Paramedic accreditation and certification.
- ► Established first dynamic publically available interactive Ambulance Patient Offload Time (APOT) reporting system for real-time and retrospective data.
- ► Implementation of technology platform to support online prehospital training to enhance EMS system training of stakeholders.
- ▶ New Paramedic Advanced Life Support Intra-facility Transport Service Line launched by Alliance in Contra Costa County.
- ► Emergency Medical Care Committee hosts first 5150 psychological emergency summit in February of 2017 involving multiple stakeholders: County Health, Contra Costa Regional Medical Center, community hospitals, public and private transport providers, transport staff.
- ► EMS Agency establishes optional scope for use of epinephrine and Narcan in first responder BLS protocols.
- ► EMS Agency partners with CCHS Public Health Department in the development of a county marijuana ordinance informing policy makers on the impacts of legalization on EMS System.
- ► Contra Costa EMS is named one of two state sites to pilot EMSA POLST (Physicians Orders for Life Sustaining Treatment) electronic registry in 2017 in collaboration with Alameda/Contra Costa County Medical Association and California Healthcare Foundation.
- ► Contra Costa EMS System was selected to pilot improvements in California Stroke Registry and Stroke system as part of CMS grant with Stanford Health Services.
- ► Contra Costa EMS System Stakeholder join the Contra Costa Community College Paramedic Program Advisory Committee to develop first paramedic training program in Contra Costa County.
- ► The Board of Supervisors recognized May 21–27th 2017 as National EMS Week, and May 24th as EMS for Children Day.
- ► Contra Costa EMS system stakeholders and Medical Health hospital and long term care facilities respond to support the largest medical mutual aid disaster response during the devastating 2017 North Bay Fires.
- ▶ November 8th, EMS hosted the 2nd annual Contra Costa County Survivors Reunion Luncheon to show tangible continuum of care, and where survivors meet their rescuers.

POPULATION USE OF EMS SERVICES

An increase of 4,827 EMS responses since 2016.

In 2017, Contra Costa County had an estimated population of 1.1 million, making it the ninth most populous county in California. Concord, Richmond and Antioch were the three largest cities in the county, each home to more than 110,000 residents. Between 2016 and 2017, the county gained more than 12,312 residents. EMS utilization over the last three years has continued to increase.

CONTRA COSTA COUNTY EMS SERVICE UTILIZATION BY POPULATION					
	2015	2016	2017		
Population ²	1,126,745¹	1,135,127¹	1,147,439¹		
EMS Responses	94,278	98,769	103,596		
EMS Responses/1000 population ³	94	87	104		
Average EMS Responses/day	258	271	283		
Square Miles EMS Serves	716	716	716		
Population per square mile ²	1,573¹	1,585¹	1,603 ¹		
Responses per square mile	131	138	145		
County Median Household Income ²	\$79,799¹	\$80,185 ¹	\$82,881 ¹		
County Population below poverty	10.5%¹	10.2%1	8.7%		

¹ Estimated figures as of July 2017 2 Source: US Census Bureau.

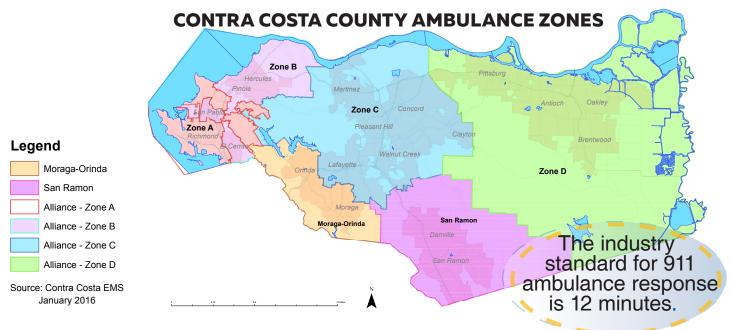
³ Total includes all responses, including those that did not result in patient transport.

EMS SYSTEM UTILIZATION

TOTAL EMS **RESPONSES Responses By Year** 2017 Contra Costa Fire/AMR (Alliance) 93,368 San Ramon Valley Fire Protection 7,862 District Moraga Orinda Fire Protection 2,366 District 103,596 Total Responses By Year 2016 Contra Costa Fire/AMR (Alliance) 89,768 San Ramon Valley Fire Protection 6,873 District Moraga Orinda Fire Protection 2,128 District Total **Responses By Year** 2015 American Medical Response (AMR) 85,767 San Ramon Valley Fire Protection 6,323 Moraga Orinda Fire Protection District 2,188 Total 94,278

An EMS response typically occurs after a 911 request for emergency medical services.

2017 EMS SYSTEM AMBULANCE RESPONSE REQUIREMENTS



GEOGRAPHY

Contra Costa County is located in the San Francisco Bay Area of Northern California, northeast of San Francisco and southwest of Sacramento. The county covers roughly 716 square miles, including 19 cities and numerous unincorporated communities. The county has seven emergency response zones for ambulance-based paramedic service. Each response zone is geographically and demographically diverse, and average response times reported include urban, suburban and rural responses.

AMBULANCE E RESPONSE ZO			IE REQUIREMEN RESPONSE PER	
ERZ Provider	Geographic Area	High Density	Low Density	Response %
ERZ A (AMR)	City of Richmond	10:00	20:00	90%
ERZ B (AMR)	West County (non- Richmond)	11:45	20:00	90%
ERZ C (AMR)	Central County	11:45	20:00	90%
ERZ D (AMR)	East Contra Costa County	11:45 16:45 (in Bethel Island)	20:00	90%
ERZ Moraga Orinda	Moraga Orinda Fire Protection District ²	11:59	20:00	90%
ERZ San Ramon	San Ramon Valley Fire Protection District ²	10:00	20:00	95%

1 Current ambulance response performance requirements for the contracted ambulance provider

² A fire protection district provides emergency ambulance service in this zone. A fire district board is the local authority for establishing response requirements in this service area.

EMS AMBULANCE RESPONSE TIME PERFORMANCE

AMBULANCE RESPO	NSE PERFORMANCE BY ZONE AND S	ERVICE PROVIDER
ERA ZONE/PROVIDER	AREA SERVED	2017 AVERAGE CODE 3 (LIGHTS AND SIRENS) RESPONSE TIME IN MINUTES
ERZ A/Alliance*	City of Richmond	4:05
ERZ B/Alliance*	West County (except the City of Richmond)	4:31
ERZ C/AMR Alliance*	Central County	4:38
ERZ D/Alliance*	East County Antioch/Bay Point/Pittsburg	4:34
Moraga-Orinda ERZ	Moraga-Orinda Fire Protection District	5:28
San Ramon ERZ	San Ramon Valley Fire Protection District	4:04

^{*}Alliance: Contra Costa Fire Protection District (contractor) and American Medical Response (AMR) subcontractor.

EMERGENCY SYSTEM DISPATCH

Contra Costa EMS System is composed of several partners working together to bring the highest level of patient care to our constituents. A PSAP answers emergency calls for police, firefighting and ambulance services.



PUBLIC SAFETY ANSWERING POINTS (PSAPS)

Antioch Police Department
Brentwood Police Department
California Highway Patrol
Concord Police Department
Contra Costa Sheriff's Office
East Bay Regional Park District Police
Martinez Police Department
Pinole Police Department
Pleasant Hill Police Department
Richmond Police Department
San Pablo Police Department
San Ramon Police Department
Walnut Creek Police Department

FIRE/MEDICAL DISPATCH CENTERS

Contra Costa County Fire Protection District
Contra Costa Sheriff's Office (multi-casualty coordination)
Richmond Police Department
San Ramon Valley Fire Protection District

EMERGENCY MEDICAL DISPATCH

DISPATCH

Contra Costa County is serviced by 13 primary Public Safety Answering Points (PSAPs). These are the communication centers responsible for answering 911 calls. After initial law enforcement triage, medical calls are transferred to secondary PSAPs where Emergency Medical Dispatch (EMD) process takes place, and then an EMS response is dispatched according to professional emergency medical dispatch protocols.



Contra Costa County has three approved and operational EMD centers that utilize Medical Priority Dispatch System (MPDS), a nationally recognized process for rapidly determining what EMS resource is needed. Contra Costa Regional Fire Communications Center, San Ramon Valley Fire Communications Center, and Richmond Police Communications Center. Emergency Medical Dispatchers are trained and certified to International Academies of Emergency Dispatch (IAED) standards and provide potentially life-saving pre-arrival instructions to 911 callers utilizing MPDS San Ramon Valley Fire is recognized by the IAED as an Accredited Center of Excellence.



EMD instructions are not required for all 911 calls. Example: fire first responders may be "on scene" making a request for EMS resources.



EMERGENCY MEDICAL SYSTEM PARTNERS

FIRE DEPARTMENTS AND DISTRICTS

Contra Costa County Fire Protection District Crockett-Carquinez Fire Protection District El Cerrito Fire Department Pinole Fire Department Richmond Fire Department East Contra Costa Fire Protection District Kensington Fire Protection District (served by El Cerrito Fire Department) Moraga-Orinda Fire Protection District Rodeo-Hercules Fire Protection District San Ramon Valley Fire Protection District

EMS PARAMEDIC SERVICE PROVIDERS

American Medical Response
California Highway Patrol
(helicopter unit)
Concord Police Department
(tactical paramedic program)
Contra Costa County Fire
Protection District
El Cerrito Fire Department
Moraga-Orinda Fire
Protection District
Pinole Fire Department
Rodeo-Hercules Fire
Protection District

San Ramon Valley Fire Protection District

AIR RESCUE AND AMBULANCE

REACH CALSTAR California Highway Patrol

PUBLIC SAFETY: LAW DEFIBRILLATION PROGRAMS

Antioch Police Department Blackhawk Police Department Brentwood Police Department Concord Police Department Contra Costa Sheriff's Office Clayton Police Department Danville Police Department El Cerrito Police Department Hercules Police Department Kensington Police Department Lafayette Police Department Martinez Police Department Moraga Police Department Oakley Police Department Orinda Police Department Pleasant Hill Police Department Pittsburg Police Department Richmond Police Department Roundhill Police Department San Pablo Police Department San Ramon Police Department Walnut Creek Police Department

EMS WORKFORCE AND HOSPITALS



TYPE OF PERSONNEL	2017
Emergency Medical Dispatchers	52
Emergency Medical Technicians	994
Paramedics	547
Mobile Intensive Care Nurses	56
Public safety dispatch centers (PSAPs)	12
Fire and EMS dispatch centers	3
Available emergency ambulance units per day	22–50
Non-emergency ambulance units	93
HOSPITALS	
Base Hospital	1
911 Receiving Hospitals	8

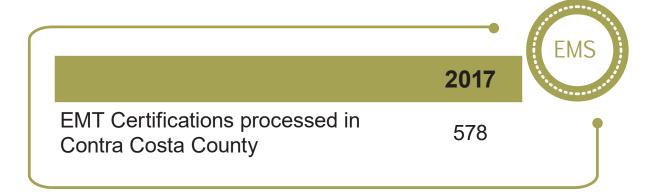
CERTIFICATION AND ACCREDITATION

Paramedics are required to obtain a California paramedic license from the State of California EMS Authority. Once a paramedic has obtained a license to practice as a paramedic, the paramedic must then accredit themselves in the jurisdiction in which they are employed. Accreditation ensures that paramedics meet the county's minimum requirements to practice and have complied with the county's EMS quality improvement plan. Paramedics are required to verify compliance and update their accreditation with the County every two years.

EMT CERTIFICATION AND PARAMEDIC ACCREDITATION

	•	FMS
	2017	Live
Accredited Paramedics	547	
Re-verification of Accreditation	212	

EMTs are required by state law to possess a State of California EMT certificate before they can practice. An EMT obtains a State of California EMT certificate by applying to one of California's local EMS agencies or a certifying entity. An EMT certificate obtained through the county is valid statewide for two years.



EMS SYSTEM LICENSING AND CERTIFICATION OVERSIGHT

PROFESSIONAL STANDARDS PROGRAM

The EMS Agency investigates allegations of misconduct against EMTs certified by the Agency. The professional standards program ensures that each EMT certified by the EMS Agency or working within Contra Costa County provides safe, professional and competent clinical care to the county's residents and visitors.

Contra Costa County EMS Agency



	2017
Active Probation	16
Denied	2
Expired Probation	0
Revoked	6
Surrendered	2
Suspended	13
Withdrawn	0

AMBULANCE PERMITS

Contra Costa County has an Ambulance Ordinance Code regulating ambulances. The ordinance requires that each ambulance provider apply for and be granted an ambulance permit by the EMS Agency before originating patient transports in the county.

The EMS Agency reviews and investigates each application and inspects each of the applicants' ambulances to ensure the public health, safety and welfare is protected.

The EMS Agency is also responsible for investigating alleged violations of the ambulance ordinance by permit holders and, when necessary, it takes enforcement action to suspend or revoke an ambulance permit.



2017

Ambulance Permits

7

EMT TRAINING PROGRAMS IN CONTRA COSTA COUNTY

The EMS Agency is delegated the regulatory responsibility under the state's EMS regulations for approving EMT and paramedic training programs located in Contra Costa County. The EMS Agency has approved three EMT training programs. There are currently no paramedic training programs based in the County.

EMTs who successfully graduate from an approved EMT program are required to pass the National Registry of Emergency Medical Technicians (NREMT) basic EMT examination before they may apply for a California EMT certificate.

2017 NREMT Examination Pass/Fail Rates From Contra Costa County EMT Programs

Attempted the Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts
4	25%	50%	50%
Los Medan	os College		
145	72%	79%	79%
Mt. Diablo	Adult Ed.		
14	29%	43%	43%

HOSPITAL EMERGENCY DEPARTMENT LITULIZATION DATA

EMS

2017 Pedi Emergency Department Visits

	<1 year	1–9 year	10–19 years	Total
Contra Costa Regional Medical Center & Health Centers	566	2,011	3,726	6,303
John Muir Health Concord	861	5,542	5,399	11,802
John Muir Health Walnut Creek	1,197	4,509	3,781	9,487
Kaiser Medical Center Richmond	1,09 4	6,269	5,775	13,138
Kaiser Medical Center Antioch	1,187	6,658	6,145	13,990
Kaiser Medical Center Walnut Creek	822	4,722	4,710	10,254
Sutter Delta Medical Center Antioch	1,263	6 ,560	5,716	13,539
San Ramon Regional Medical Center	176	1,436	1,998	3,610
Total	7,166	37,707	37,250	82,123

HOSPITAL EMERGENCY DEPARTMENT UTILIZATION DATA

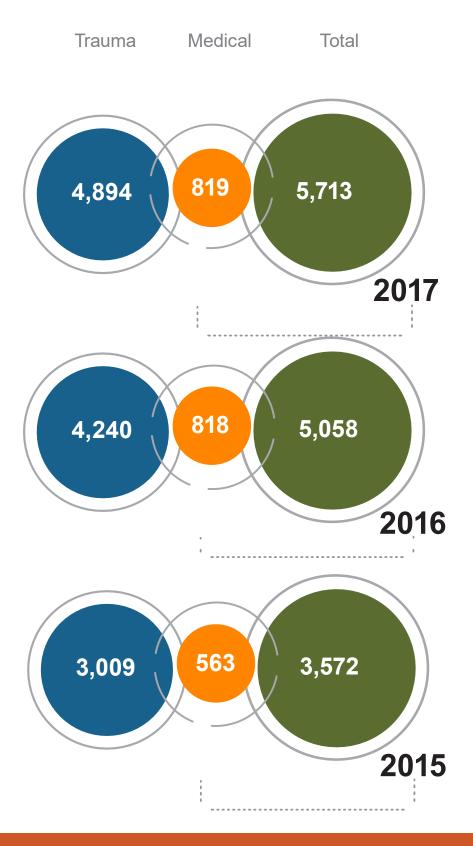
	Total ED Visits	EMS Transports	Percent of All EMS Transports to Total ED volume	90% D ambulance patient offload time in minutes
Contra Costa Regional Medical Center &Health Centers	42,406	7,523	18%	32
John Muir Health Concord	59,456	10,001	17%	20
John Muir Health Walnut Creek	55,528	11,374	20%	26
Kaiser Medical Center Richmond	64,680	9,487	15%	29
Kaiser Medical Center Antioch	61,149	6,903	11%	37
Kaiser Medical Center Walnut Creek	63,670	9,238	15%	33
Sutter Delta Medical Center Antioch	58,704	9,786	17%	40
San Ramon Regional Medical Center	18,932	2,308	12%	27
Total	424,525	66,620	16%	31
PES	10,369	5757	56%	36

HOSPITALS AND SPECIALTY CENTERS



	STEMI	Helipad	Labor & Delivery	Stroke	Trauma Behavioral
Contra Costa Regional Medical Center &Health Centers			\checkmark		\checkmark
Sutter Delta Medical Center Antioch	\checkmark	\checkmark	\checkmark	\checkmark	
San Ramon Regional Medical Center	\checkmark		\checkmark	\checkmark	
John Muir Health Concord	\checkmark			\checkmark	
Kaiser Medical Center Walnut Creek	\checkmark		\checkmark	\checkmark	
Kaiser Medical Center Richmond				\checkmark	
Kaiser Medical Center Antioch			\checkmark	\checkmark	
John Muir Health Walnut Creek	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark

EMS AND HOSPITALS WORKING TOGETHER



BASE HOSPITAL CALLS BY TYPE

Base hospitals provide medical consultation to EMS personnel in the field when they encounter patients with conditions outside of standardized EMS protocols, or in situations that require real-time medical consultation.

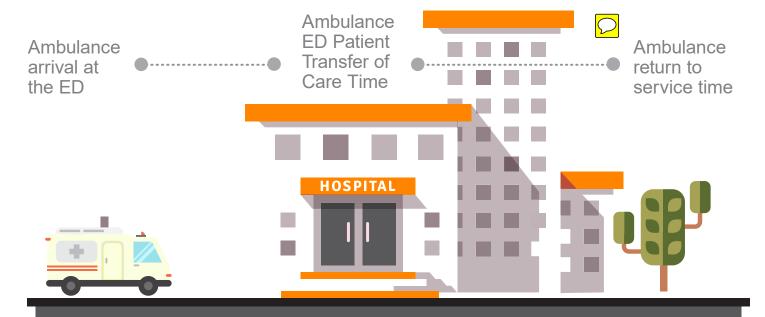
John Muir Medical Center in Walnut Creek serves as the Base Hospital for Contra Costa County.

AMBULANCE-EMERGENCY DEPARTMENT PATIENT TRANSFER OF CARE PERFORMANCE



AMBULANCE PATIENT TRANSFER OF CARE

EMS patient transfer of care is known to improve the availability of 911 ambulances and patient safety. All hospitals are expected to transfer patients arriving by EMS within 20 minutes 90% of the time. The time measured is from ambulance arrival at the ED to the patient transferred to the care of the ED staff and report given.



AIR AMBULANCE MEDICAL PROVIDERS



AIR TRANSPORT

Air Medical Transport provides specialized services throughout the county in response to EMS calls where air medical transport is essential to getting a critically ill patient to definitive care. Air transports may occur in rural areas of the county, at the scene of severe traffic accidents during commute hours and when hospitals need to transport a critical patient to another facility. Authorized Air providers REACH and CALSTAR make up less than 1% of emergency patient transport in Contra Costa County annually.

HELICOPTER E	MS DESTIN	ATIONS	EMS
John Muir Walnut Creek	UCSF Benioff Children's Hospital	Other Trauma Centers	•
77%	11%	12%	

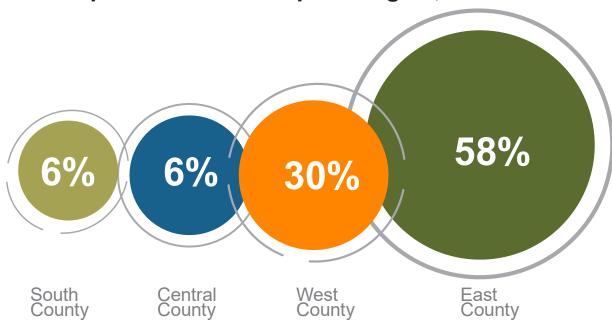
AIR AMBULANCE TRANSPORT

Transports Originating in Contra Costa County

REACH	2017
911 "Scene" Calls	54
Interfacility Transports	100
Total Air Transports	154

	CALSTAR	2017
	911 "Scene" Calls	65
	Interfacility Transports	31
•	Total Air Transports	96

Helicopter Trauma Transport Origins, 2017



QUALITY IMPROVEMENT & PATIENT SAFETY 2017

QUALITY IMPROVEMENT PROGRAMS

Quality Improvement continues to be central to the mission of EMS services in Contra Costa County. EMS activity and patient care outcomes are routinely measured and evaluated by the stakeholders and regulators to assure the system is performing and improving over time. Our measures focus on the quality of our care in the delivery of EMS services.

PATIENT SAFETY EVENTS

The EMS Agency is committed to supporting a culture of safety. In 2017, the patient safety program was supported by the EMS Agency Quality Patient safety and medical oversight review as part of a continued formal effort to monitor, evaluate and act upon EMS system issues. 792 EMS events were reported in 2017. This is an increase of 10% from 2016. Each EMS is part of a coordinated effort to learn and improve patent safety and clinical outcomes for the benefit of the patient and the communities served.

QUALITY IMPROVEMENT INITATIVES

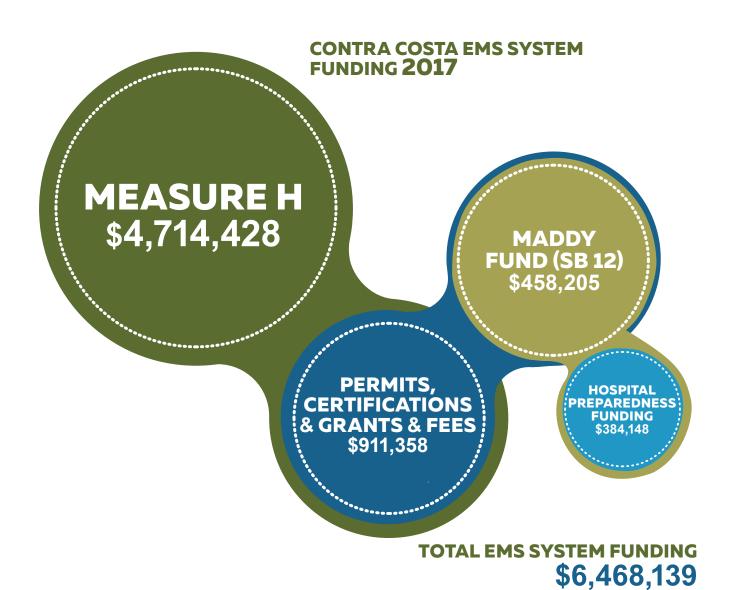
EMS System Quality Improvement Program (EQIP) This program is part of a coordinated system of medical and patient safety oversight facilitated by the Contra Costa EMS Agency. Data is continuously used to improve and support improvements in patient care, ambulance service delivery in collaboration with our Hospitals, Emergency department physicians and nurses, Specialists in cardiology, neurology, trauma and pediatrics. To learn more about our EMS System and patient care safety initiatives go to www.cccems.org

The EMS Agency re-evaluates internal and stakeholder performance processes as part of a coordinated system of review. Data driven feedback are part of the improvement process and supported by just culture understanding that collectively public and private partners are all focused on patient safety. To learn more about the EMS System EQIP program go visit www.cccems.org

COUNTY EMS SYSTEM FUNDING

The Contra Costa EMS System is supported through state and federal grants, permit and certification fees and County Service Area funds (EM-1) also know as Measure H.

Measure H parcel levies provide limited but important support for the provision and quality of emergency medical services for the residents of Contra Costa County since 1988. Priorities for Measure H funding include: Paramedic first responder and ambulance services, countywide first-responder and public-access defibrillation programs, Fire-EMS training for multi-casualty and disaster response, emergency and disaster communication systems, Fire and ambulance dispatch technology, medical and quality oversight of "systems of care" including Trauma, STEMI, Stroke, Cardiac Arrest and EMS for Children, pre-hospital and law enforcement equipment and training.



2017 EMS SYSTEM ENHANCEMENT

MEASURE H DOLLARS AT WORK-EMS SYSTEM FUNDING \$4,714,428

Fire EMS and Fire-EMS Fire Measure H Technology data Taxes and Sheriff Dispatch County Emergency Hospital Disaster systems Support Communications Communications Levies

55% 7% 6% 5% 2% 2%

Distributions



Systems of Care





CARDIAC ARREST SYSTEM OF CARE



Contra Costa County

	Events	Population	Incidence per 100,000
2017	758	1,147,439	66.1
2016	712	1,135,127	62.7
2015	532	1,126,745	47.2

Contra Costa County participates in a national cardiac arrest survival registry program, which allows for comparative benchmarking and improvement in cardiac arrest emergency care. Through our partnership with the Cardiac Arrest Registry to Enhance Survival (CARES), we collect uniform and reliable outcome information, and have made significant changes to enhance the delivery of CPR by bystanders and improve pre-hospital cardiac arrest care in our communities.

We track our progress using the Utstein survival measure, a standardized cardiac arrest reporting tool introduced in 1991. The measure is used nationally by EMS systems to set benchmarks and compare results.



CARDIAC ARREST SURVIVAL

Survival to Hospital Discharge (Utstein)



2015	2016	2017
28%	32%	29%

Source: Data obtained from the Cardiac Arrest Registry to Enhance Survival (CARES). Inclusion criteria: A witnessed, out-of-hospital cardiac arrest where the patient is found in a shockable rhythm and resuscitation is attempted by an emergency responder.

NATIONAL SURVIVAL TO 33%

Cardiac arrest patients who received care that met or exceeded benchmarks found in CARES and the Utstein Uniform Reporting Guidelines were more likely to survive to hospital discharge than patients who did not.

Bystanders Save Lives: Bystander CPR Rate



2015	2016	2017
40%	39%	41%

Source: Data obtained from CARES Registry.

NATIONAL BYSTANDER 38%

Data show an increase in bystanders initiating CPR on someone in cardiac arrest before emergency medical responders arrive. The CARES national benchmark for this kind of bystander interaction is 38% of all cardiac arrest cases. For more information about this program, visit cchealth.org/ems/cardiac-arrest.php.

STEMI SYSTEM OF CARE



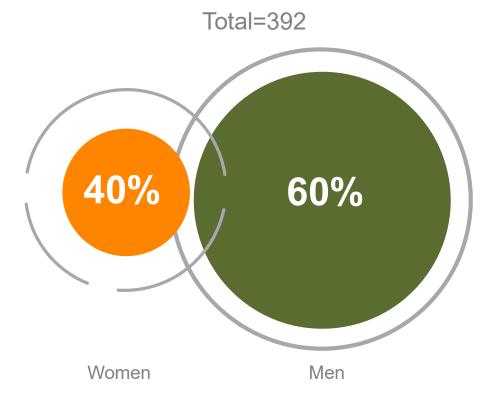
Every 42 seconds, someone in the United States has a heart attack. One deadly type, ST Elevation Myocardial Infarction (STEMI), requires rapid assessment, specialized equipment and specially trained personnel to offer patients the best chance of survival.

Paramedics use field transmission of 12-Lead ECGs and "STEMI Alerts" to provide hospitals with early notification of STEMI cases, which allows emergency departments and cardiac intervention teams time to prepare and immediately treat patients upon arrival.

San Ramon Regional Medical Center, John Muir Medical Centers in Concord and Walnut Creek, Sutter Delta Medical Center in Antioch and Kaiser Permanente Medical Center in Walnut Creek are Contra Costa's STEMI receiving centers.

For more information about the STEMI System of Care, visit cchealth.org/ems/stemi.php.

2017
Gender of Patients Affected with ST-Elevation MI



STEMI SYSTEM OF CARE

Annual STEMI Alerts



2015	2016	2017
309	396	392

Age Distribution of STEMI Alert Patients



or Emir Alore Factorito		N. Lander
Age		•
0–10	0	
11–20	0	
21–30	3	
31–40	7	
41–50	32	
51–60	81	
61–70	93	
71–80	93	
81–90	83	
91–100	21	
)

STEMI SYSTEM OF CARE

Average First Medical Contact (FMC) and Door to Intervention Times



	2015	2016	2017
FMC to Intervention (in minutes)	86	85	82
Door to Intervention (in minutes)	58	58	55

First medical contact to intervention national benchmark is 90 minutes.

First medical contact (FMC) is defined as the time that EMS providers make initial contact with a patient. This could be an EMT or a paramedic. FMC to Intervention is the time from initial contact with the patient to the time the patient has their artery open or stent placed. The goal is 90 minutes or less for FMC to time the patient arrives at the hospital to receive intervention.

PREHOSPITAL PERFORMANCE STEMI MEASURES

STEMI Pre-hospital Performance Measure



	2015	2016	2016
Aspirin Administration	94%	88%	88%
12-Lead ECG acquired on STEMI Patients	99%	98%	98%
Patient identified as STEMI and transported to STEMI Intervention Center	100%	99%	100%
Average Scene Time Interval (minutes) Performance Goal =/<15 minutes	13	13	15

The Contra Costa prehospital performance measures are based on State indicators and the American Heart Associations. Contra Costa EMS continues to meet state and national benchmarks in all areas.

STROKE SYSTEM OF CARE

Stroke is the fifth-leading cause of death nationally, and the leading cause of disability.

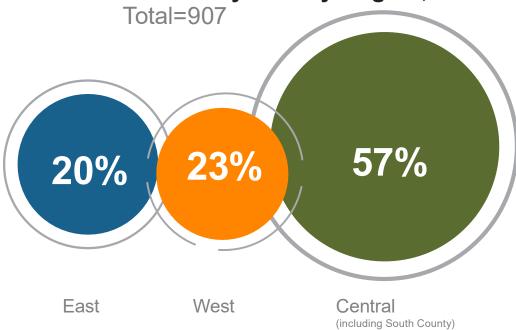
Contra Costa's Stroke System of Care facilitates rapid assessment and transport of patients to designated Primary Stroke Centers.



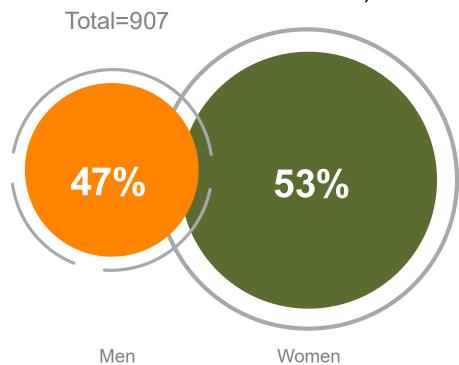


STROKE SYSTEM OF CARE





Gender of Stroke Alert Patients, 2017

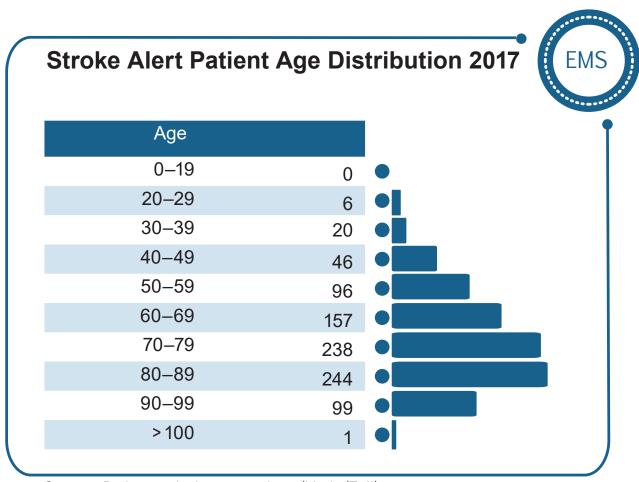


STROKE SYSTEM OF CARE

MEASURING SYSTEM PERFORMANCE

EMS providers rapidly identify patients having stroke symptoms, initiate immediate transport and call a "Stroke Alert" to the closest centerCalling 911 is key in getting patients to treatment quickly.

Our goal is for patients to receive the clot-dissolving drug tPA (Tissue Plasminogen Activator) within $4\ 1/2$ hours of a patient's first stroke symptoms at the nearest Primary Stroke Receiving Center. Door to tPA shows the time it took for a patient to receive tPA after their ambulance arrived at the hospital.



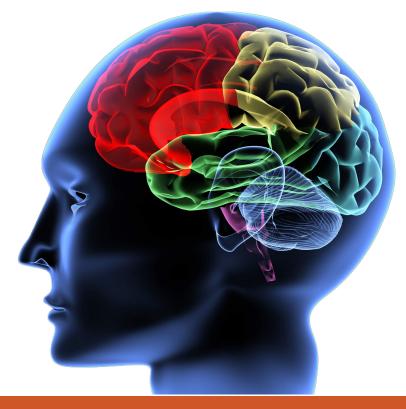
Source: Prehospital electronic data (Meds/Zoll)

STROKE SYSTEM OF CARE

Average Door to Treatment Time (tPA) for EMS patients with Stroke Symptoms

	2015	2016	2017
Door to tPA time (in minutes)	54	44	43
Number of patients treated	158	162	152

EMS



STROKE SYSTEM OF CARE



Stroke Alerts by Hospital

	2015	2016	2017
John Muir Medical Center Walnut Creek	138	150	152
John Muir Medical Center— Concord	165	159	143
Kaiser Antioch	159	179	180
Kaiser Richmond	167	172	209
Kaiser Walnut Creek	131	121	140
San Ramon Regional Medical Center	64	55	83

TRAUMA SYSTEM OF CARE

The Board of Supervisors approved a comprehensive trauma system plan for the county in 1986, and the EMS Agency designated John Muir Medical Center—Walnut Creek as the county's sole trauma center.

The trauma system is designed to facilitate rapid identification, management, and transport of critical trauma patients to a trauma center within the "golden hour"—the first hour after injury, which is considered the most crucial time for successful treatment.



TRAUMA SYSTEM OF CARE

Trauma activations are those patients who are seriously injured and meet activation criteria. Trauma patients are those patients who have been injured but do not meet trauma activation criteria and may be transported to a non-trauma center for care.

Trauma Patients and Trauma Center Activations



	Activation	Patients
2017	2032	2197
2016	1615	1884
2015	1471	1766

TRAUMA SYSTEM OF CARE INJURY STATISTICS

Penetrating Injuries	2016	2017
Gun Shot Wound	52%	48%
Stabbing	48%	42%

Blunt Injuries	2016	2017	
Assault	5%	6%	
Auto Collision	33%	28%	
Auto vs Pedestrian	5%	8%	
Bicycle	6%	7%	
Motorcycle	7%	8%	
Falls	26%	34%	
Other	18%	9%	



CONTRA COSTA MEDICAL HEALTHCARE COALITION (HCC)

The Contra Costa County Medical Healthcare Coalition is a collaborative network of healthcare organizations and individuals that provide or support healthcare services in the County. The Regularly meets regularly to share information, coordinate planning and response activities, and build resiliency. Membership on the Forum includes, but is not explicitly limited to hospitals, public and private medical or health services, emergency preparedness agencies, emergency services and governmental bodies with an interest in the provision of healthcare.

Health Care Coalition Activities Program Activities

2015 Training/Exercise/Response	Frequency
Situation-Status Drills	Monthly
Triage and Tracking Exercise	Bi-monthly
Medical Health Coalition Meetings	Quarterly
Disaster Health Volunteers Communication Drills	Quarterly
Medical Reserve Corp Meeting/Training	Monthly
State Wide Tabletop & Functional Exercise	Annually
County Emergency Operations Center Earthquake Functional Exercise	Annually



CONTRA COSTA MEDICAL RESERVE CORPS (MRC)

The Contra Costa EMS
System MRC provides
community outreach during
non-emergency events to
improve unit capability,
enhance community
preparedness, and improve
public health. The MRC
provides first aid stations
at community events,
medical screenings, conducts
influenza vaccine clinics,



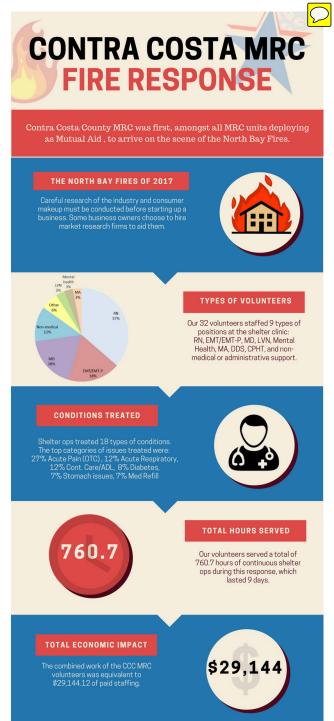
teaches hands-only CPR, participates in health and disaster preparedness fairs and participates in drills and exercises. The MRC supports youth engagement and provides career mentorship and disaster education and training through our partnership with Dozier Libbey Medical High School's Health Occupations Students of American (HOSA) organization.



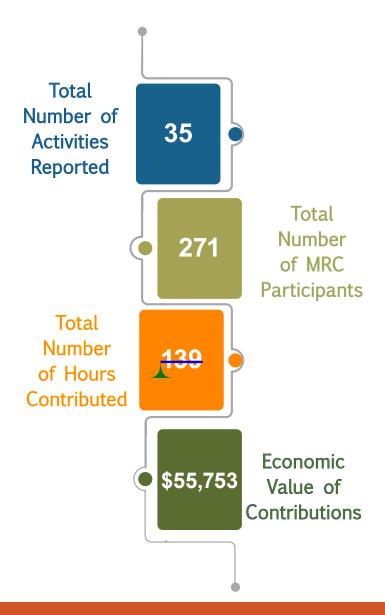
COMPARISON: NUMBER OF ACTIVITIES

CONTRA COSTA MEDICAL RESERVE CORPS (MRC)

The Contra Costa Medical Reserve Corps continues to be a major asset in our community when it comes to providing community outreach and emergency preparedness activities. During 2017 the Contra Costa Medical Reserve Corps was deployed to support sheltering operations during the North Bay Wildfires in Napa and Solano Counties.



Contra Costa County MRC, 2017



DISASTER PREPAREDNESS PROGRAM FOR CHILDREN



NEONATAL AND PERINATAL DISASTER PREPAREDNESS PROJECT

The Neonatal and Perinatal Disaster Preparedness Project helps in planning to support newborns and mothers in the event of disaster, and prepares the system for medical surges from this population. The system continues to improve readiness and practices quarterly communication drills as part of its overall preparedness and unit readiness.

Contra Costa EMS plans to update of the County EMS for Children Program as a system of care. In preparation for this effort all Contra Costa Community Hospitals will complete the National Pediatrics Readiness Survey. The National Survey assesses the "readiness" of community hospitals for children who require emergency medical services. To learn more, visit www.cchealth.org/ems/feature-emsc.php.

Contra Costa EMS supports and evaluates community hospital emergency departments for pediatric readiness. The Pediatric Readiness Project is a national multi-phase quality improvement and emergency preparedness initiative to ensure that all U.S. emergency departments (ED) have the essential guidelines and resources in place to provide effective emergency care to children. This EMS for Children initiative began in California in 2013 and provides benchmarking to hospitals on their pediatric capability based on national guidelines for care of children in the emergency department. The project continues to provide hospitals an opportunity to review and improve how to properly care for pediatric patients who arrive in their EDs.

EMERGENCY MEDICAL SERVICES FOR CHILDREN

The Emergency Medical Services for Children Program (EMSC) monitors and maintains a coordinated and comprehensive system that delivers high-quality emergency care for the children of Contra Costa County.

In 2017 there were 82,123 pediatric emergency department visits.

BACKGROUND

The vast majority of pediatric patients seen in an emergency room do not require hospitalization. Contra Costa County's designated pediatric critical care and trauma center is UCSF Benioff Children's Hospital & Research Center Oakland.

Inpatient pediatric services are provided at John Muir Medical Center in Walnut Creek, Kaiser Permanente Medical Center in Walnut Creek and San Ramon Regional Medical Center. In addition, all Contra Costa community hospitals and emergency departments are expected to be ready for emergencies involving children. In April of 2015, John Muir Medical Center opened Contra Costa County's first pediatric intensive care unit.

2016 PEDIATRIC EMERGENCY DEPARTMENT VISITS				
	<1 year	1–9 years	10-19 years	Total
Contra Costa Regional Medical Center	566	2,011	3,726	6,303
John Muir Medical Center in Concord	861	5,542	5,399	11,802
John Muir Medical Center in Walnut Creek	1,197	4,509	3,781	9,487
Kaiser Permanente Medical Center in Richmond	1,094	6,269	5,775	13,138
Kaiser Permanente Medical Center in Antioch	1,187	6,658	6,145	13,990
Kaiser Permanente Medical Center in Walnut Creek	822	4,722	4,710	10,254
Sutter Delta Medical Center in Antioch	1,263	6,560	5,716	13,539
San Ramon Regional Medical Center	176	1,436	1,998	3,610
Total	7,166	37,707	37,250	82,123

^{*}Source: OSPHD



EMS FOR CHILDREN INJURY PREVENTION

CHILDHOOD EMERGENCIES

Since most pediatric emergencies are preventable, the program not only focuses on the coordination of pediatric emergency and critical care services but also focuses on injury prevention. In 2009, Contra Costa partnered with Alameda County on EMSC to support regional injury prevention, promote pediatric prehospital and emergency care capability, and promote statewide neonatal and pediatric disaster and medical surge planning.

Children make up approximately 25% of our county population, 14–27%% of all emergency department visits and approximately 10% of our 911 responses. Although life threatening emergencies involving children are rare, specialized pediatric skills and training are required by the EMS Agency to support the care of children in the field. In Contra Costa, the emergency medical response for children is provided by a network of first-rate agencies and hospitals in partnership with child advocacy groups to reduce injury and death to children.

Drowning is a leading cause of unintentional death in children ages less than 5 and the fifth leading cause of death in all age groups. From 2012–2016 Contra Costa saw 31 drownings of adults and children.

ACCOMPLISHMENTS THROUGH PARTNERSHIP

- ► Contra Costa EMS is the home of the California Neonatal/Pediatric and Perinatal Disaster Preparedness Coalition, which works to implement recommendations supported by the National Advisory Committee for Children and Disasters.
- ► Childhood Injury Prevention Network-Bay Area (CIPN-BA) member. CIPN focus on unintentional injuries for a target population of children 0–14 years of age in the areas of: falls, car and child passenger safety, fire and burns, choking, water and home safety, and poisonings
- ► Keeping Babies Safe partner. Non-profit organization that provides education, assistance, advocacy and leadership in the development of safer children's products and practices.
- ▶ National Pediatric Readiness Program in Contra Costa County is an integral part of our EMS for Children Program.
- ▶ All Contra Costa Hospitals and Fire Departments are "Safely Surrendered Baby Sites". To learn more about Safely Surrendered Baby go to cchealth.org/ems/baby-safe.php
- ► Contra Costa EMS had 100% of all hospitals participate in the National Pediatric Readiness Project, benchmarking hospital's capability for children.
- ► California State EMSC Technical Advisory Committee: Contra Costa is an active participant in this important state task force dedicated to improving emergency care for children.



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CONTRA COSTA COUNTY EMS THE SYSTEM OF EMERGENCY MEDICAL SERVICES

STRENGTHEN THE CHAIN OF SURVIVAL

EMS Training Institutions, Administrative Agencies and **Regulatory Bodies** play a critical role in developing, refining and ensuring a high quality / effective EMS system.

Learning the signs of a heart attack, stroke and sudden cardiac arrest and calling 9-1-1... all of these actions can play a part in saving a life.

Emergency Medical Dispatchers, First Responders (e.g. Firements, Law Enforcement), Paramedics, and EMTs respond to over 98,769 emergency calls for service in Contra Costa County each year.

Ambulance Transporting Providers (e.g. **Paramedics, EMTs** and **Nurses**) ensure patients are provided treatment and transported to the most appropriate receiving hospital.

Hospitals and **Specialty Care Facilities** (e.g. **Nurses** and **Emergency Physicians** ensure the continuum of emergency care by treating patients and providing definitive care services.

Quality improvement (QI) is a proactive process, that recognizes and solves problems, and ensures that EMS systems of care are reliable and predictable.

Together, through **collaboration** and **local partnerships** (e.g. **MRC**), Contra Costa County residents receive quality, efficient and **highly effective emergency patient care**.

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