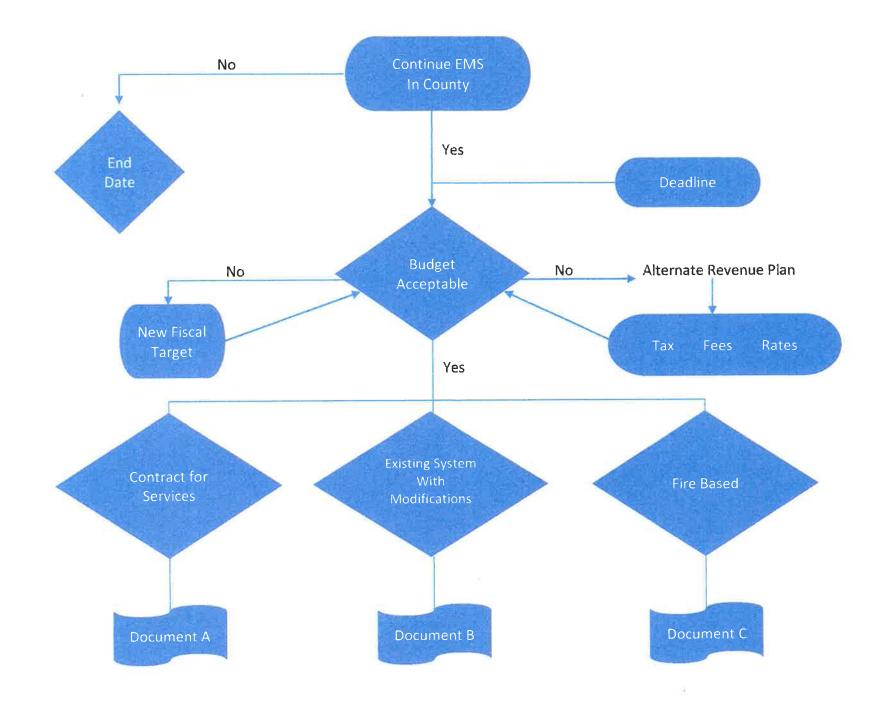
# March 8, 2017 Special Meeting Board of Supervisors

## Item #2a– EMS Workshop Bob Rooks



### MONO COUNTY EMERGENCY MEDICAL SERVICES DEPARTMENT

PO Box 3329 Mammoth Lakes, CA 93546 (760) 924-1832

Discussion topics from Workshop of 2-15

During the presentation, several topics were brought forth by the Board members that required additional research;

- 1. Yearly EMS run totals for Chalfant Fire (M-5) and White Mtn Fire (M-4)
  - This information is not available in our ImageTrend software, so I have requested this information from each department
  - I have also requested run data from Symons ambulance for responses into Mono
    County
- 2. Compare EMS salary and benefit costs with other like Counties
  - I sent a previous email with a study completed by the UC Berkeley & UCLA Labor Centers on wages and working conditions within EMS in California, this study was completed February 2017
  - This covers wages across California for both Public and Private EMS organizations
  - This document also reviews the working conditions for the private sector
  - We are currently working on a salary and benefit survey for other like Counties, though this has been completed before by the Paramedic Association
- 3. Review use of "No-Transport" fee and the number of possible runs this fee could be applied toward
  - This fee was adopted under resolution R13-47, but no guidance was given on how to apply this fee
  - The fee does not truly cover the costs of provided services
  - The Board needs to provide direction on how this fee is applied and we need to adjust this fee to more accurately reflect our costs for service
  - Penny will be researching how other agencies apply this type of fee
  - Possible additional runs this fee could be applied toward:
    - a. We believe this number to be extremely low, it is rare for a Paramedic to provide ALS intervention on a patient and release this patient without transporting to the hospital, this is based on our personal experience
- 4. Contracting with outside collection agency for delinquent billing
  - We believe the Board needs to provide the direction to staff to pursue a contract with a collection agency
  - The Board needs to understand that we would have to apply this course of action with all delinquent billing, (residents and non-residents)
  - We cannot apply this fee to MediCal or MediCare patients

- 5. Consideration of a full-time billing position for EMS Department
  - This topic was discussed but we should review the workload involved in billing in greater detail with Penny Galvin
- 6. What are the current services provided in the County for the dollars spent
  - Services County wide, both ALS and BLS?
    - a. All established Communities within Mono County have access to ALS and BLS services
    - b. BLS non-transport 1<sup>st</sup> response is provided in all established Communities by the 11 volunteer fire districts, BLS transport is also provided in the Town of Mammoth, Benton and Chalfant by the respective districts
    - Not all areas are directly served by County ALS units, but the service is available with an informal agreement with Symons ambulance out of Bishop
    - d. Response times for ALS service vary from Community to Community
    - e. No standard or objective has been set for what is considered an acceptable wait time for an ALS transport unit to arrive on scene of an incident

f. Defining current response times (time from initial request to time unit on scene) cannot be accurately measured

- I. A single based time clock is not used by all agencies for recording their times
- II. Data has not been accurately documented on paper run forms or into the electronic run forms
- III. Dispatch does not track Fire District or County ALS response times in the correct format to assist with reports
- g. Attachments 1,2 and 3 at the end of this document provide a sample of ALS response times (with the understanding that this data is skewed based on the above comments)
- h. Attachment 4 provides call volume by time of day
- i. Attachment 5 provides response times to all areas in the County based on drive times, this includes drive times for a Symons unit into Tri-Valley and southern Mono to Swall Meadows
- j. Drive times are not an accurate measure of real response times, the factors that affect this time are:
  - I. Alarm handling time
  - II. EMS unit response time
    - See attachment 6 for a graphical explanation for the above factors
- Standards of response coverage must be set by the Board
  - a. Standards of response coverage would detail the *"service level objectives for Emergency Medical Services in the County"* 
    - I. An example of service level objectives:

*"For 80% of all EMS incidents, the first due ALS transport unit shall arrive within 30 minutes' total reflex time. (or travel time)* 

II. The County may wish to create a Standards of Cover document. "Standards of Cover" is defined as "those adopted written policies and procedures that determine the distribution, concentration and reliability of fixed and mobile response forces for emergency medical services"

III. The County may use as a guideline, the standards for response from the NFPA (National Fire Protection Association), these include;

> NFPA 450 Guide for Emergency Medical Services NFPA 1720 Standard on personnel deployment and response times for volunteer departments NFPA 1710 Standard on personnel deployment and response times for career departments

- Other services provided by the County EMS department
  - a. Inmate medical services (not billed to MCSO)
  - b. High school football game standby
  - c. Blood pressure clinics in Antelope Valley, Bridgeport and June Lake
  - d. Wellness checks
  - e. BLS CPR and AED training to all County departments
  - f. BLS CPR and AED training to the 11 Fire Districts
  - g. BLS CPR, AED and 1<sup>st</sup> aid training to CERT teams
  - h. Continuing education classes for Fire Districts
  - i. EMT-basic classes for Fire Districts
  - j. Fire incident standby

#### 7. Concerns with the costs associated with Overtime (OT)

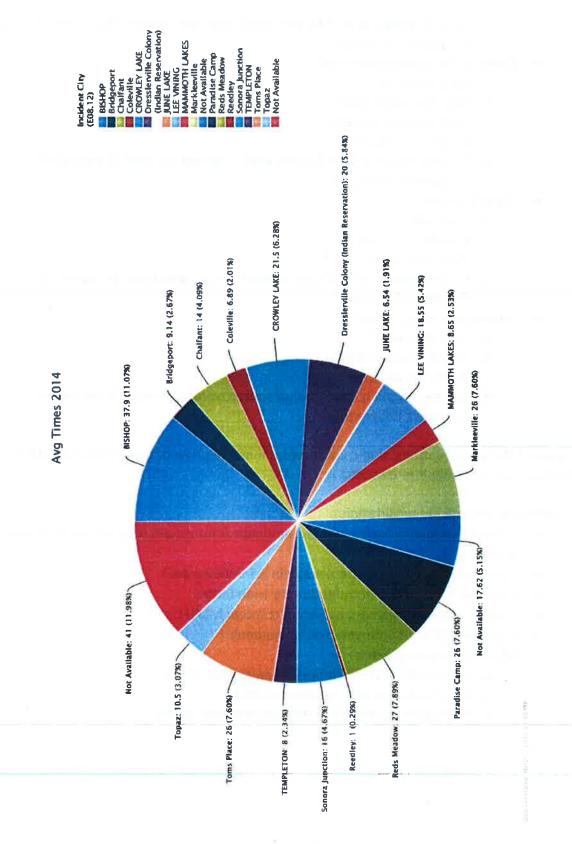
- We have two types of OT
  - a. Scheduled
    - I. Occurs every pay period and is part of the employee's base rate
    - II. Employees work 48 hour shifts, creating 8 hours of scheduled OT each rotation
    - III. We have budgeted \$190,000 for FY2016/17 for scheduled OT and is included in the salary and wages line item
    - IV. Scheduled OT is reportable to PERS
  - b. Unscheduled
    - I. Anytime we backfill an open position caused by; vacation, sick, PH, special event standbys, shift holdovers, additional unit added for coverage, instructor time for training
    - II. We have budgeted \$300,000 for FY2016/17 for unscheduled OT and is a separate line item
    - III. Unscheduled OT is not reportable to PERS

- Can the employees manipulate the OT system?
  - a. No
    - OT is generated by either a management action (additional staffing for high call load or event standby, or personnel assigned to teach a class) or by an employee's request for time off (sick, PH, vacation, FLMA)
    - II. All OT offered to employees is done from a rotational list located in our scheduling software, when an employee accepts OT, they go to the bottom of the list
    - III. All employee requests for time off are electronically entered into the scheduling software. All requests must be approved by management (Captains or Chief) before the employee is granted the time off
    - IV. At the end of each pay period, all employee time cards are checked against the master schedule, any discrepancies are forwarded to the Chief for review
    - V. The scheduling software is password protected and employees have limited access into the system. Only Captain Bullock and the Chief have full administrative rights to the system. A backup copy Is kept in a secure separate file
- Do some employees take home significantly more income through OT?
  - a. Yes
    - I. Employees willingness to accept offers of OT varies throughout the full-time staff. Some of our folks work two jobs, limiting their availability, some are only willing to accept a limited number of hours per month, some are always available to pick up shifts.
    - II. Employees who have higher qualifications (CPR instructor, EMT instructor) will be able to pick up OT for teaching classes
    - III. The procedure for the offering of OT shifts is defined in the Paramedic association MOU
- Can systems be put in place to reduce OT or limit how many hours an employee may accrue in each pay period
  - a. Yes/maybe
    - I. Management could post the vacation calendar at the beginning of each year, requiring employees to request all their allotted vacation hours, allowing management more flexibility in filling open shifts
    - II. A policy could be created limiting the OT hours employees may accrue within each pay period; example: *"employees cannot earn more than 30% in overtime pay above their base pay"*
  - III. Both ideas may be subject to meet and confer
- 8. Options
  - Status Quo with modifications
    - a. Cost effective?
    - b. Fiscally sustainable?

- c. Can we obtain goal of County wide coverage or meet Standards of Response Coverage?
- Contract for service (privatize)
  - a. Cost effective?
  - b. Fiscally sustainable?
  - c. Politically acceptable?
  - d. Long term solution?
  - e. Can we obtain goal of County wide coverage or meet Standards of Response Coverage?
- Close 1 station
  - a. Cost effective?
  - b. Fiscally sustainable
  - c. Politically acceptable?
  - d. Can we obtain goal of County wide coverage or meet Standards of Response Coverage?
- Alternate Staffing Model
  - a. Cost effective?
  - b. Fiscally Sustainable?
  - c. Politically acceptable?
  - d. Can we obtain goal of County wide coverage or meet Standards of Response Coverage?

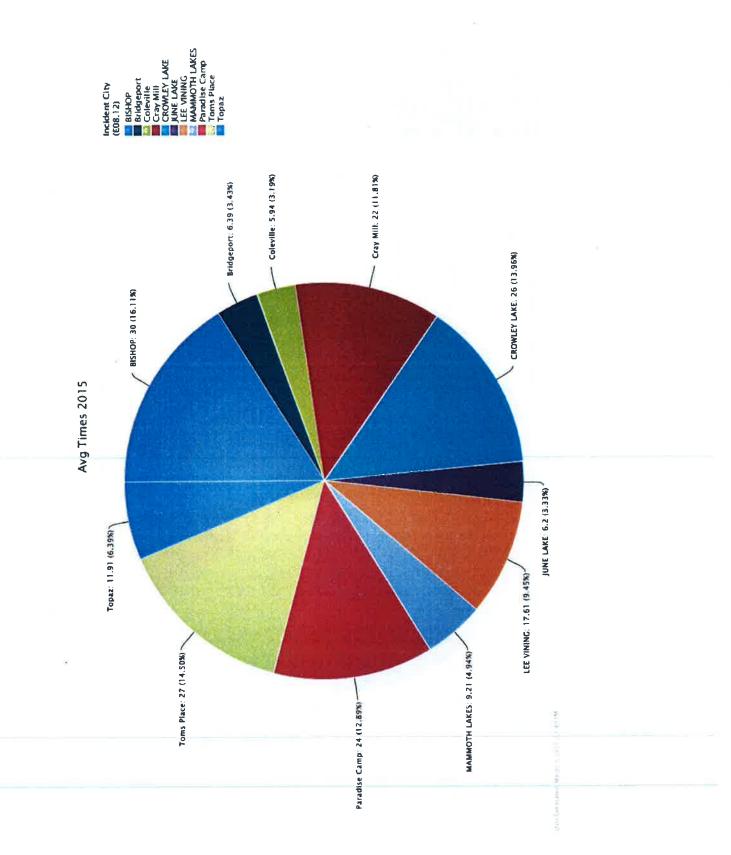
Within each of the above options, due consideration must be given to how implementation will affect/impact the Volunteer Fire Districts

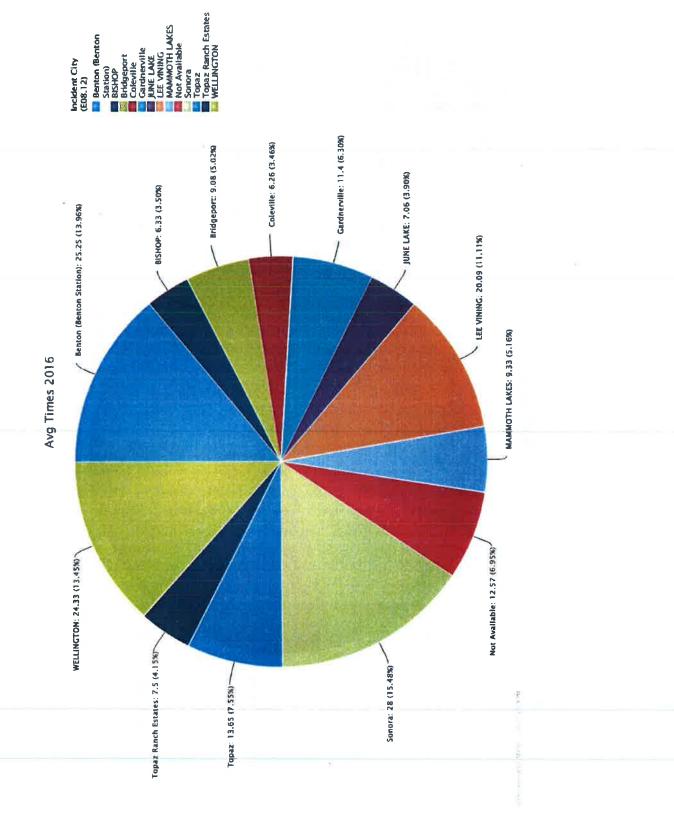
- 9. Additional items for consideration
  - Formal agreement with Symons ambulance for auto-aid response to Tri-Valley area
  - Contract with Symons for coverage in Tri-Valley area
  - Consider tax initiative to fund County wide EMS
  - Contract for management oversight through MLFD
  - Consider Office of Emergency Management
  - Mono County dispatch
    - a. Utilize CAD data for measuring response times
    - b. Emergency Medical Dispatch (EMD)
    - c. Push data out from CAD to populate into tablets

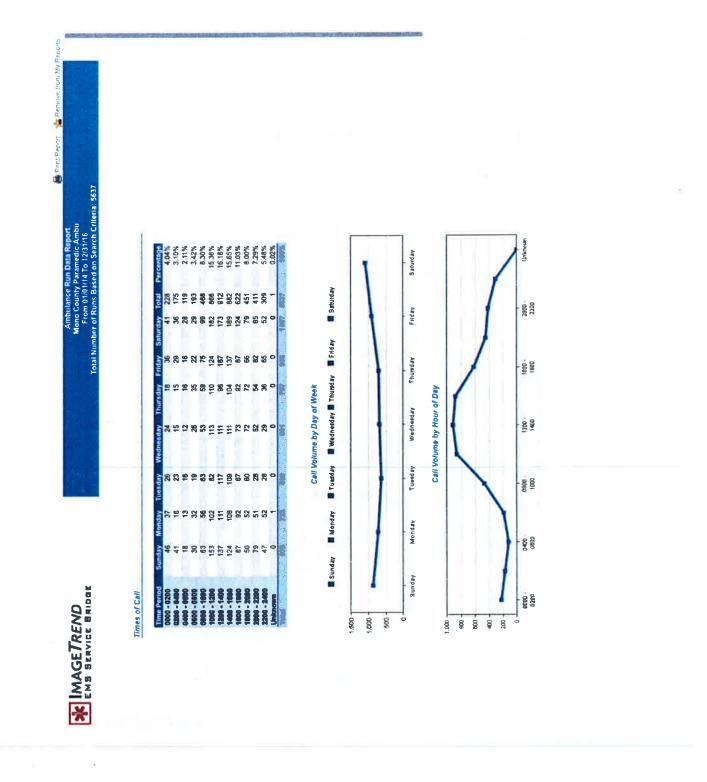


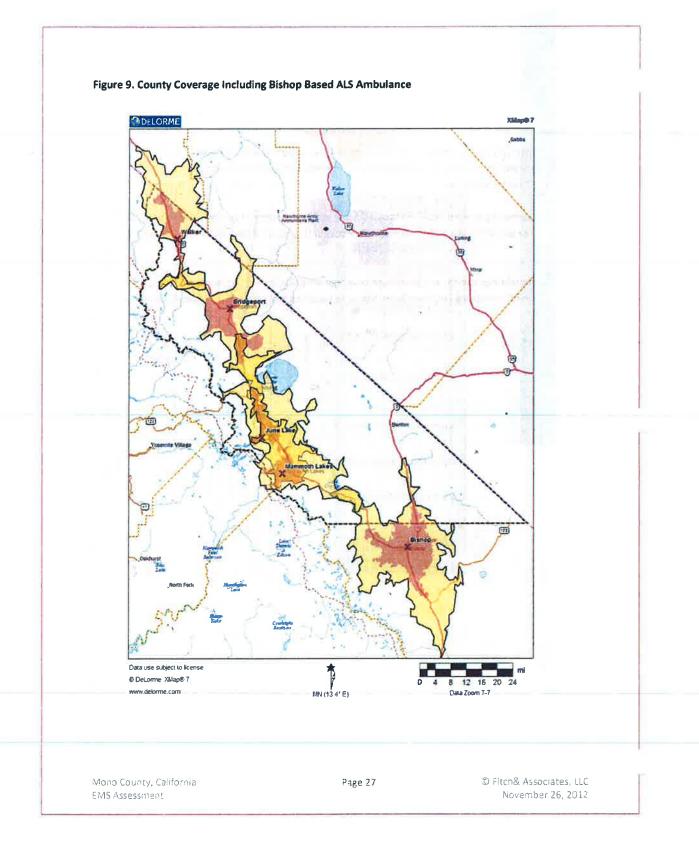
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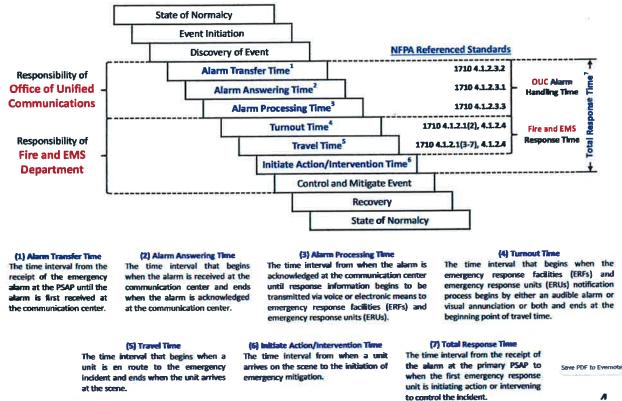








#### **Overview of Response Time Performance Measures (NFPA Standard 1710)**



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#### **Helen Nunn**

From:	Leslie Chapman
Sent:	Wednesday, March 8, 2017 12:27 PM
То:	Bob Gardner; Fred Stump; John Peters; Larry Johnston; Stacy Corless
Cc:	Helen Nunn; Shannon Kendall; Ingrid Braun Contact; Janet Dutcher; Stacey Simon
Subject:	FW: Mono County EMS
Follow Up Flag:	Flag for follow up
Flag Status:	Flagged

Flagged

Email from White Mountain Fire Chief.

Leslie L. Chapman Mono County Administrative Officer PO Box 696 Bridgeport, CA 93517 Bridgeport - (760) 932-5414 Mammoth - (760) 924-1703 Cell - (760) 937-7958

-----Original Message-----From: Fred Stump Sent: Wednesday, March 8, 2017 12:22 PM To: Leslie Chapman <lchapman@mono.ca.gov> Subject: FW: Mono County EMS

From: White Fire [whitemountainfire@gmail.com] Sent: Tuesday, March 7, 2017 8:07 PM To: Fred Stump Subject: Mono County EMS

Fred,

I will be unable to attend the workshop on Wednesday of this week due to work commitments. I would like to share some of my thoughts on the subject though.

I have read and reviewed the Abaris Report, the Fitch Report and the findings and recommendations of the Ad Hoc Committee. I have also reviewed the reports and documents presented to the ad hoc committee. It is evident that a lot of good people have put a lot of effort into gathering this information for the board. The following represents my own observations.

It is quite noticeable that there is a lack of good data from the Tri Valley area. I believe in one of the reports, it was shown that Benton had one call for service and Chalfant had 6. I know, by reviewing the ambulance run sheets that White Mountain alone averages about 30 medical aids per year with most of those ending up with transport to NIH. I am having our prevention chief compile the data to forward to Chief Rooks. Paperwork has been an issue with this department but we are tightening that up, and the ePCR requirement will help us to this end. Suffice to say that the majority of the Medical Aid calls we receive in this area are at the BLS level.

One of the issues that has been identified in all of the reports that I have reviewed is communications, and I am curious as to why there is no more elaboration on that topic. I believe that it could be reasonably stated that we do have a very noticeable dispatch problem and I firmly believe that is where we need to focus our energy. The County emergency services as a group, at a minimum, need a system of EMD and CAD that can prioritize calls, track resources, maintain station coverage, identify closest resource, and organize responses. The PSAP is the clearinghouse of information that is critical to the field resources for mitigation of emergency situations. At the current level, we, as a fire organization and an EMS organization are just begrudgingly "fit in" to the sheriffs' dispatch and jail duties. There is no resource tracking, no CAD information shared, no assistance in NIMS/ICs organization. We are told to clear the frequency as soon as possible. This is a recipe for disaster and unacceptable if we are to have a functioning Fire and EMS system. This seems to be the foundation that our "new" system should be built upon, and yet I have not seen any evidence of meaningful discussion on the subject at the board level.

Another topic that has been mentioned but not discussed is increased utilization of volunteers. Currently there are three BLS ambulance that are staffed by volunteers. Volunteerism is a tremendous and cost effective tool for organizations like Fire and EMS. The problem is that they are mostly ignored by local government and left to there own resources. These organizations, with strong management, a small budgetary safety net and the right incentives will always step up. They need training, especially with the onerous requirements of EMT, AEMT and Paramedic. They also need some sort of incentive, either monetary or in kind, such as health care. If a volunteer organization could offer similar health care insurance as county employees, we would have no trouble recruiting EMT members. Paying health care and a stipend is a lot cheaper than paying full time employees with benefits. Maybe reducing the number of paid staff (IE; Medic 1 in Walker, with the lowest call volume and ALS service 35 miles north and 30 Miles south, roughly the same distance as Symons to Tri Valley), which would net, roughly, a million dollar savings and reinvesting in volunteer departments that run ambulances would be a wiser option.

Having a strong emergency service organization for residents is vital to the health of this county. That being said, it is impossible to expect the latest advanced life support tools and personnel to be available at all times to all areas of the vast, low populated areas of the county. I believe having a strong and healthy volunteer fire department with BLS ambulance responsibility is the most beneficial and cost effective method for providing services to the most rural areas of our county. With EMD call screening and priority dispatching, calls could be triaged to ALS or BLS from the outset. Dispatch BLS ambulances to BLS calls to ease the pressure on the ALS units. Part time staffing also has merit and could be incorporated with the volunteers who could be utilized as part time EMTs which would help them with skills maintenance.

I would like to sit down with you at some point and discuss the future of EMS and Fire in the county. Selling the county flood plain property and allowing White Mountain to put a heated garage in Hammil would be one of the topics. Let me know what you think.

Dave