

HEALTH CARE SERVICES COMMITTEE

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HEALTH CARE SERVICES COMMITTEE

The Health Care Services Committee was given the responsibility of investigating the Arrowhead Regional Medical Center and the departments of Behavioral Health and Public Health. Our meetings with department personnel not only focused on the functions of the department, but also concerns such as current policies and procedures manuals, accountability measures, performance reviews, and the cost to the County of services to undocumented immigrants. The committee selected the following specific areas for its review and research:

Arrowhead Regional Medical Center

- Disaster Preparedness Plan
- Emergency Room Overcrowding – Ambulance Wait Time
- Facility Security
- Fiscal Services – Certificates of Participation
- Satellite Clinics

Department of Behavioral Health

- Adult System of Care
- Alcohol and Drug Programs
- Disaster Preparedness Plan
- Mental Health Services Act – Prop. 63
- Patients Rights

Department of Public Health

- Animal Care and Control
- Disaster Preparedness Plan
- Disease Control and Prevention
- Environmental Health Services
- Inland Counties Emergency Medical Agency
- Vector Control

The committee was gratified to find all department personnel with whom we spoke to be knowledgeable, enthusiastic, and most cooperative with the committee. They were professional, caring, forward thinking, and committed to providing excellent services to San Bernardino County.

The Health Care Services Committee submits the following findings and recommendations detailed in this final report for the following department:

Department of Public Health
Inland Counties Emergency Medical Agency (ICEMA)

DEPARTMENT OF PUBLIC HEALTH

INLAND COUNTIES EMERGENCY MEDICAL AGENCY (ICEMA)

BACKGROUND

Under authority of the California Code of Regulations, Title 22, Division, 9, Chapter 8, the Inland Counties Emergency Medical Agency (ICEMA) is the governing body to recommend and approve emergency medical service (EMS) aircraft policies, as well as recommend the integration of EMS aircraft into San Bernardino County's transport system.

There are 18 Helicopter Air Ambulance Zones in San Bernardino County. Being a "permitted" air ambulance service provider means that it has qualified to meet ICEMA's standards. After meeting ICEMA's standards, the contract is approved by ICEMA's governing board, the San Bernardino County Board of Supervisors. A "permitted" air ambulance is the only one that can do inter-facility transfers, which is more financially lucrative than responding to 9-1-1 calls. Other air ambulance services can operate within the County to respond to 9-1-1 calls; they are mutual aid providers only.

FINDINGS

Currently there is only one "permitted" air ambulance service provider under contract with ICEMA to use County air space. This service has several helicopters in its fleet. Even though ICEMA has sought to have other air ambulance service providers permitted, having proven both need and necessity, the governing board (County Board of Supervisors) has not heeded that request.

By allowing air ambulance exclusivity in San Bernardino County, there is no competition to keep the costs down. An actual invoice received by a patient's family from the "permitted" air ambulance provider totaled \$10,720.59 for a run covering less than 90 minutes, and flying only 28 miles. When ICEMA was asked if they knew what the one "permitted" air ambulance service was charging patients, they stated they did not. A definite rate structure should be developed, based upon documented costs and acceptable profit margins.

When asked if they make unannounced visits to the bases where “permitted” air ambulances are stationed, ICEMA responded they do not. Regular base inspections should be made to ensure that equipment and personnel meet the contract’s required standards.

The present “permitted” provider is not required to explain to ICEMA or the Communications Center why a helicopter is not available for emergency service. When the Communications Center calls, only then, in some cases, are they notified the helicopter is “out of service”. The Communications Center should be informed of the absolute status of all resources at all times. When someone’s life may be depending on a quick response by the air ambulance, the Communications Center loses valuable time going through the list to find an available responder.

From the information gathered, it appears there is a lack of supervision by ICEMA in governing the air ambulance contract.

RECOMMENDATIONS

- 06-24 DEVELOP AN ACCEPTABLE RATE STRUCTURE FOR AIR AMBULANCE PROVIDERS, INCLUDING BOTH 9-1-1 CALLS AND INTER-FACILITY TRANSFERS.

- 06-25 ESTABLISH A PROCEDURE WHEREBY THE COMMUNICATIONS CENTER IS AWARE, AT ALL TIMES, OF THE STATUS OF ALL AIR AMBULANCE EQUIPMENT BEING UTILIZED, WHETHER AVAILABLE OR REASON FOR NON-AVAILABILITY.

- 06-26 ESTABLISH UNANNOUNCED BASE INSPECTION PROCEDURES TO CONFIRM EQUIPMENT AND PERSONNEL MEET CONTRACT REQUIRED STANDARDS AND ARE AT THE ASSIGNED LOCATION.