

# NOTICE OF SPECIAL MEETING

Pursuant to Section 54956 of the Government Code of the State of California, a Special meeting of the **Tracy City Council** is hereby called for:

**Date/Time:** **Wednesday, September 28, 2016, 5:00 p.m.**  
(or as soon thereafter as possible)

**Location:** **Council Chambers, City Hall**  
**333 Civic Center Plaza, Tracy**

Government Code Section 54954.3 states that every public meeting shall provide an opportunity for the public to address the Tracy City Council on any item, before or during consideration of the item, however no action shall be taken on any item not on the agenda.

1. Call to Order
2. Roll Call
3. *Items from the Audience - In accordance with Procedures for Preparation, Posting and Distribution of Agendas and the Conduct of Public Meetings, adopted by Resolution 2015-052 any item not on the agenda brought up by the public at a meeting, shall be automatically referred to staff. If staff is not able to resolve the matter satisfactorily, the member of the public may request a Council Member to sponsor the item for discussion at a future meeting.*
4. A CITY COUNCIL WORKSHOP TO DISCUSS COUNTY EMS POLICIES THAT LIMIT THE FIRE DEPARTMENT'S RESPONSE TO MEDICAL EMERGENCIES
5. Adjournment



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Mayor

## **September 27, 2016**

The City of Tracy complies with the Americans with Disabilities Act and makes all reasonable accommodations for the disabled to participate in public meetings. Persons requiring assistance or auxiliary aids in order to participate should call City Hall (209-831-6105), at least 24 hours prior to the meeting.

Any materials distributed to the majority of the Tracy City Council regarding any item on this agenda will be made available for public inspection in the City Clerk's office located at 333 Civic Center Plaza, Tracy, during normal business hours.

AGENDA ITEM 4

REQUEST

**A CITY COUNCIL WORKSHOP TO DISCUSS COUNTY EMS POLICIES THAT LIMIT THE FIRE DEPARTMENT'S RESPONSE TO MEDICAL EMERGENCIES**

EXECUTIVE SUMMARY

In 1980, the State Legislature enacted the EMS Act in response to the development of paramedic services and a concern that there was a lack of medical oversight and coordination of emergency medical services. The EMS Act contains 100 different provisions in nine separate chapters of the California Health and Safety Code. The EMS Act created a two-tiered system that established a State EMS Agency to coordinate state-wide EMS activities and to develop state-wide minimum EMS policies and a local tier (Local EMS Agency) to plan, implement and evaluate an EMS System. The Statute also includes language that establishes "The medical direction and management of an emergency medical services system shall be under the medical control of the medical director of the local EMS Agency." In San Joaquin County the local EMS Agency is the San Joaquin County Emergency Medical Services Agency (SJC EMS Agency). The SJC EMS Agency sets local EMS policy, administers and provides oversight for the Exclusive Operating Agreement with county contract ambulance provider, and enters into contracts that approve and provide medical oversight for Cities and Special Fire Districts to deliver EMS services in the County.

In the late 1970's, as the EMS Act was being developed, the League of California Cities weighed in heavily concerning the impact of the proposed EMS Act on cities. The League of California Cities argued against depriving a city of local control over EMS service levels. The League of California Cities wrote "We believe (local control) is important because city taxpayers financially support (EMS) programs and city management is responsible for their efficient utilization. The city council is responsible for the level of service and the cost of the program, wholly unrelated to the medical questions." Based on that argument, additional language was included in the EMS policy that allowed local agencies that were providing EMS services to continue (and even obligated) them to continue to provide EMS services at the same levels as prior to 1980. This addition to the EMS Act (Section 1797.201 - became known as "201 Rights") has been very controversial and has led to several lawsuits between cities/special districts and Local EMS Agencies. The purpose of this information is not to provide a legal opinion concerning "201 Rights," it is only to provide background concerning how the EMS Act was developed and the portions of the Act that have been controversial.

Over the years the City of Tracy and Tracy Rural Fire District (TRFD), which are both members of the South County Fire Authority (SCFA), have expressed concerns over county contract ambulance availability and response times. On Easter morning this issue was again moved to the forefront with a significant delay in an ambulance response and a delay in the Fire Department being dispatched to a patient in a skilled nursing facility. The delays resulted in the patient transitioning from being "short of breath" to the patient's death. This incident was brought to the City Council's attention

when Council members received phone calls from concerned citizens and when someone who witnessed this incident wrote a letter-to-the-editor that was published in the Tracy Press on April 1, 2016.

After investigating the incident, the City Manager (SCFA CEO) and the SCFA Fire Chief met with the San Joaquin County Emergency Medical Services Agency (SJC EMS Agency) Administrator and the San Joaquin County Health Services Care Director. At the meeting, the Easter morning incident and concerns with the policy (Policy 3202) that prevented the Fire Department paramedics from initially responding to the incident were discussed. The County representatives committed to reviewing our concerns. Within 45 days, a new draft Policy 3202 was issued that further restricted the Tracy Fire Department paramedics' ability to respond to medical emergencies. During that same time the City became aware of two additional significant medical emergencies in which the Fire Department was not dispatched. The first was a severely ill patient that later died at the hospital and the second was a man who experienced a heart attack.

Based on the new draft Policy 3202, the City Manager requested another meeting with the County which included additional City and County staff, the County Administrator and the County EMS Medical Director (a physician). At that meeting, the City expressed concerns about the new draft policy that was developed and published outside of County protocols and provided further information about the additional significant medical emergencies in which the Fire Department paramedics were not dispatched. After much discussion, the meeting concluded with the City being notified that certain provisions of Draft Policy 3202 had already been implemented.

After City Managers and Fire Chiefs in the County expressed extreme concern over the unilateral development and partial implementation of a more restrictive Policy 3202, the County rescinded the implementation of the policy and reverted back to the original Policy 3202. The County also agreed to extend the comment time for the draft policy and to include the stakeholders in final policy development.

On Thursday, September 22, 2016, the Fire Chief and City Manager had a third meeting with the County. The meeting was arranged and attended by County Supervisor Bob Elliott (District 5). The meeting was also attended by the County Administrator, Deputy County Counsel, SJC EMS Agency Administrator and San Joaquin County Health Services Care Director. The meeting focused on the legal authorities to determine response schedules to medical emergencies and the County's reasoning behind their reluctance to allow the Tracy Fire Department paramedics to respond to all medical emergencies. The meeting ended by the City and the County agreeing to continue to work on the revision of Policy 3202 but with strong feedback from the County that the Tracy Fire Department paramedics would not be allowed to respond to all emergencies within its jurisdiction.

## DISCUSSION

As stated above, the information provided in this staff report is only information and should not be construed as a legal opinion. Although the City (and SCFA) has determined they have some legal arguments concerning this issue, the City contends

that the arguments provided below should be enough to influence public policy in a manner that increases public safety.

The current and the proposed Policy 3202 does not allow the Tracy Fire paramedics to be dispatched to lower level medical emergencies within the jurisdictional boundaries. The current and the proposed Policy 3202 does not allow Tracy Fire Department paramedics to be dispatched to skilled nursing facilities unless the patient is in cardiac or respiratory arrest.

The City/SCFA contends:

- The City Council and the Tracy Rural Board have provided the SCFA with the resources and the direction to provide first responder paramedic services to the community to increase service levels and to augment the county contract ambulance service by providing a quicker response and a second paramedic on emergencies.
- The community has the expectation that the SCFA will provide first responder paramedic services to increase service levels and serve as a community safety net when ambulances have long response times, or are not available.
- The national dispatch protocols that are being utilized by the County are being misapplied. The protocols were developed to be able to triage emergencies when resources are scarce. The Fire Department has paramedic engine companies strategically located throughout the community to be able to respond within five minutes (travel time) anywhere in the urban area.
- Numerous studies have shown that national dispatch protocols that are being utilized by the County often under-categorize medical emergencies. When these calls are under-categorized, the City's (and SCFA) expectation is that the Fire Department will respond to serve as the community safety net. The following are examples of types of under-categorized emergencies that have occurred in the Tracy community:
  - A Code 2 (no lights or sirens) ambulance is dispatched, and when the Code 2 ambulance arrives on scene and finds a critical patient, the Fire Department is requested to respond Code 3 for assistance, and then the ambulance will transport the patient Code 3 (red lights and sirens) to the hospital with a Fire Department paramedic assisting.
  - The ambulance is dispatched Code 2, the ambulance passes staffed fire stations, the Fire Department is not dispatched, the patient is critical and the patient is transported Code 3 to the hospital without a Fire Department response.
  - There is not an ambulance available in the Tracy area, an ambulance is dispatched from Manteca or Stockton, the Fire Department is not dispatched, and the patient's condition deteriorates and becomes critical while waiting for the ambulance to come from another community.
- Patients in skilled nursing facilities are some of community's most vulnerable residents. They have worked hard their entire lives, paid taxes and expect the same

level of emergency response as residents that are not in skilled nursing facilities. Skilled nursing facilities are often staffed with Licensed Vocational Nurses (LVNs) who have a very limited emergency medical capability scope compared to paramedics. Fire stations are located strategically to be able to respond to skilled nursing facilities within a few minutes. If dispatched, Fire Department paramedics could provide immediate lifesaving assistance (beyond cardiac arrest and respiratory arrest) for emergencies that include, but not limited to; choking, diabetic emergencies, anaphylaxis, difficulty breathing (including asthma attacks) and provide comfort and pain relief from traumatic injuries such as hip fractures. Currently, even when an ambulance is not readily available, the Fire Department is not being dispatched to these emergencies.

- If the Fire Department paramedics were dispatched to lower level emergencies, and the patient decided that they did not want to go to the hospital (against medical advice, all patients have a right to be transported to the hospital) the Fire Department paramedic could cancel the ambulance and make that scarce resource available for the next call.
- When the Fire Department responds to medical emergencies, and arrives quickly, even if the patient is not critical, being able to comfort and reassure the patient makes a difference in the emergency outcome. The firefighters will also help secure the residence, comfort and support family members, ensure family members know where the hospital is and ensure they have transportation to the hospital. The level of services the Fire Department provides goes well beyond medical protocols.
- The contract ambulance service in San Joaquin County is overtaxed and ambulances are often not available to respond to emergencies within the 7:30 minute response goal. This occurs between 10 and 15 percent of the time and the delayed ambulance response times can be as great as 22 minutes. This is due to increased traffic in the area, bad weather and ambulances having extended offload times at busy emergency rooms. This issue is exacerbated in the Tracy area because Tracy is a “cul-de-sac” community with no contiguous communities with available ambulances near-by. The City of Manteca can request ambulances from Ripon, Lathrop, Stockton and even Escalon. In Tracy, the ambulances only come from one direction which increases response times.

The following are the SJC EMS Agency’s arguments against sending Fire Department resources to lower level medical emergencies. While the agency has not provided any written response to the concerns expressed by the City and SCFA, they have provided the following information during meetings. This information is based on the meetings and should not be considered a comprehensive response and/or formal response from the SJC EMS Agency to the issues. Below each issue, is a response to the issue from the City/SCFA.

- They want to manage one EMS system in the County and Stockton does not have the resources to respond to the lower level emergencies.

*Tracy’s demographics, types of calls, location in the County, availability of resources and community expectations are different from other areas of the County and Tracy should be allowed to provide a higher level of service if that is the community’s*

*desire and expectation. Computer aided dispatch systems throughout the country use a tiered response approach based on community expectations, available resources and capabilities.*

- They believe the national dispatch protocols should be used to determine dispatch levels.

*As stated above, these protocols are being misapplied. It is very clear in the national protocol descriptions that a tiered level response (not sending paramedics) is based on the availability of resources. The Tracy Fire Department has a paramedic on every fire engine that are strategically located to be able to respond to every medical emergency within a five-minute travel time (within the City limits) and they are readily available to respond to all medical emergencies. The scarce resource is not the fire engine with the paramedic, it is the ambulance.*

- Fire Department paramedics responding to emergencies will increase the number of patients in crowded emergency rooms.

*There is no correlation between a paramedic responding to an emergency on a fire engine and the increase number of patients in emergency room. The City is unable to understand the basis for this argument.*

- The community will expect the Fire Department to transport if the Fire Department responds to all medical emergencies and the public sees the Fire Department arriving before the ambulance.

*This argument was stated to a Fire Chief in another jurisdiction concerning the ability for the Fire Departments to participate in a community paramedicine program. While it should not be a consideration determining when a paramedic should respond to an emergency, it was articulated by county staff and the information is important to consider when trying to determine motivations for not allowing a Fire Department response to medical emergencies.*

- A concern that if a paramedic responds to an emergency, that the paramedic will use paramedic skills (start IVs, etc.) when those skills are not required.

*The City/SCFA disagree with the logic behind this concern for obvious reasons. The argument becomes more confusing based on the County responding paramedics on ambulances to all medical emergencies within the County.*

- The County asserts that the Tracy Fire Department should be focusing on training skilled nursing facilities on how to call 911 and teaching CPR to the community.

*The City/SCFA agrees that more efforts should be made in those areas, but it has nothing to do with whether the Fire Department should be allowed to respond to emergencies.*

- The County asserts that paramedics on fire engines should respond to the same type and under the same conditions as fire engines without paramedics.

*It appears that the County is trying to marginalize the capabilities of first responder paramedics (non-transport). This is based on studies that have shown the importance of transporting critical trauma patients, patients with certain types of heart conditions and stroke patients expediently to hospitals with special capabilities that can make a difference in patient outcomes. The City/SCFA agrees with that premise and the research to support that premise. But ambulances are not always available and non-transport paramedics do make a difference when waiting for ambulances. Examples are, but not limited to; cardiac arrest and respiratory arrest and other emergencies that include, but not limited to choking, diabetic emergencies, anaphylaxis, difficulty breathing (including asthma attacks) and provide comfort and pain relief from traumatic injuries such as hip fractures. It should be noted that none of those facilities are located in Tracy.*

- The EMS Agency believes that all EMS policies should be based on empirical medical evidence and that the agency has been very progressive in implementing policy that is based on sound medical research.

*The City/SCFA agrees that the EMS Agency has been very progressive and supports the progressive nature that relies on sound data. The City/SCFA does not agree that there is empirical evidence to support not allowing the use of fire based paramedic resources as a safety-net and to provide a high level of customer service. In fact, there is strong evidence based on recent calls that the Fire Department paramedics are needed due to incidents being under categorized by the dispatch protocols.*

- The EMS Agency believes that we place the public at risk when fire engines respond to emergencies Code 3 (red lights and sirens).

*The Tracy Fire Department has an incredible safety record when it comes to emergency response. In the last ten years, the Tracy Fire Department has over 150,000 emergency responses without a single Code 3 accident. Fire Engines responding Code 3 are actually safer than ambulances responding Code 3. From a statistical perspective, responding Code 3 to all medical emergencies within SCFA's jurisdiction would provide a higher level of community safety based upon the under categorized dispatches that have occurred in the last two months.*

- The EMS Agency believes that if a Fire Department paramedic engine company responds to lower level emergencies, that they will not be available to respond to higher level medical emergencies.

*The City/SCFA agree with the premise of this argument and the argument has merit in higher volume (urban) systems where the availability of paramedic engine companies may be limited. Again, the City/SCFA contend that there are Fire Department resources available to respond to all emergencies within the jurisdictional boundaries. Each fire engine is assigned a paramedic and when one is busy the next will take the call and respond. When there are large response areas that are not covered due to other emergencies, fire engines are moved to the areas*

*to fill the void. Not having an ambulance available to transport is a much bigger concern than not having a fire engine respond.*

#### CONCLUSION

If the Easter morning incident occurred today, the outcome would be the same because there has been no change in policy. From a public safety perspective, staff believes it is imperative that the SJEMS Agency change its policy to allow the Tracy Fire Department paramedics to respond to all EMS emergencies. Staff will continue to work with the County to achieve that goal.

#### STRATEGIC PLAN

This item is in accordance with Goal 1 of City Council's Public Safety Strategy:

Goal 1: Partner with and engage the community to address public safety concerns.

#### FISCAL IMPACT

No fiscal impact.

#### RECOMMENDATION

That the City Council receive and discuss the information and no action is required.

Prepared by: Randall Bradley, Fire Chief

Reviewed by: Stephanie Garrabrant-Sierra, Assistant City Manager

Approved by: Troy Brown, City Manager