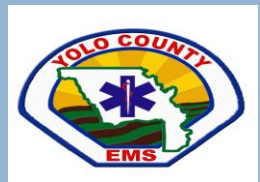
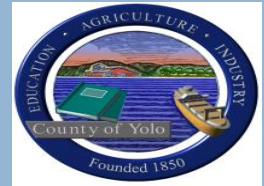


# YOLO COUNTY EMERGENCY MEDICAL SERVICE (EMS) AGENCY

BOARD OF SUPERVISORS ANNUAL  
REPORT  
FY 2015-2016



## YOLO COUNTY EMS

- Improved Ambulance Response Times
  - Improved Patient Outcomes
    - Increased Collaboration

## EMS RESPONSE

Total Calls for Service = **18,294**

Emergency Responses	FY15/16
9-1-1 EMS Calls	17,181
Transported to Hospital	12,836
• Transported by Helicopter	52
Patients not Transported	4,345

Interfacility Transfers	FY 15/16
Advanced Life Support	796
Critical Care	317

## SYSTEM COMPLIANCE

Compliance Countywide = **94%**

### 9-1-1

- High (8min) = 95%
- Moderate (15min) = 96%
- Moderate/Low (20min)= 96%
- Low (30min)= 98%

### Interfacility Transfers

- Advanced Life Support Inter-Facility (30min)= 90%
- Critical Care Transport (45min) = 87%

## TRANSPORT TYPE

### American Medical Response

■ 9-1-1, Advanced Life Support (Paramedic)	70% (12,836)
■ Interfacility Advanced Life Support	4.4% (796)
■ Interfacility Critical Care Transport	1.7% (317)
■ Not Transported	24% (4345)

### Non-Contractual Responses

■ Interfacility Basic Life Support	4.2%
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## EMS PAYER MIX

### Primary Payer

■ Medicare	41.1%
■ Medi-Cal	28.8%
■ Commercial Insurance	15.6%
■ Private Pay	11.2%
■ Contractual	3.9%

## IMPROVED HEALTH OUTCOMES

- Cardiac Arrest Survival Rates
  - Increased bystander awareness
  - Increased Out-of-Hospital Cardiac Arrest Survival to Hospital Admission from 17%, to 31% (National Avg. 21%)
- Stroke System Quality Oversight Program
  - Improved times from 9-1-1 to CT Scanner, 34 minutes faster
- Online Training Portal for all EMS Personnel
  - Improved access to information
  - Imbedded the best of practices approach to improving outcomes

## COLLABORATION

- Partnered with State Health & Human Services on a high utilizer project, as well as exploring opportunities for health information exchange (HIE) with AMR, EPIC
- Partnered with State EMS and American Medical Response (AMR), implemented an Infectious Disease Ambulance Response Plan & Ambulance in response to Ebola and other emerging infectious diseases
- Finalized Mass Casualty Plan (MCI) with collaboration from: Fire, EMS, Law, Hospitals and neighboring counties

## COMMUNITY SUPPORT

- 560 County Employees trained in CPR
  - Looking for partnerships to increase Yolo County CPR awareness
  
- Maddy Funds
  - Automatic External Defibrillators in schools
    - 52 Woodland Joint Unified School District
    - 32 Davis Joint Unified School District
  - Hospital Funds
    - Improve Pediatric Access

## SYSTEM ENHANCEMENTS

- Awarded 2015 Mission: Lifeline® EMS Silver Level Recognition
  - Award from the American Heart Association (AHA) by the Regional Director from the AHA
  
- Implemented the County-wide Pulse Point application
  - Alerts community members—bystanders to respond to help save lives from sudden cardiac arrest
  
- Approved Plans by the State EMS Authority
  - EMS System Plan, Trauma Plan & QI Plan

## CHALLENGES

### Healthcare System Trends

- Shift in payer mix, Medi-Cal/Medicaid
- Starting to see an increase in high deductible plans, which is resulting in individual private pay patients
- Trend is overall commercial insurance reimbursement is falling

**Decreasing ambulance reimbursement all around**

## ADDRESSING THE CHALLENGES

- Diversify our approach – beyond transport
- Reducing inappropriate emergency department transports

### HOW?

- Collect data and focus on one sub-set population (behavioral health, homeless, re-admissions)
- Partner with large healthcare entities
  - Increase collaboration (Public, Private) & integration on multiple levels
  - Create an integrative health system – that addresses services for high users of multiple care systems who have poor health outcome and increase their access to other services (housing, supportive services, etc.)

## VISION FOR THE FUTURE

- Maintain a Fiscally Stable Dynamic EMS System
  - Proactive healthcare delivery and system changes
- Diversify our approach to EMS System of Care
  - Increase integration & collaborative approach to reducing cost and improving outcomes
- Reduce inappropriate Emergency Department EMS Transports
  - Re-align consumers with services
- Continue community education and outreach
  - Support appropriate use of 9-1-1, CPR Anytime, Public AED, CERT, Fire First Responders and Community Coalitions