

**Contra Costa Health Services**  
Emergency Medical Services

**Facilities and Critical Care Minutes for the February 7, 2006 Meeting**

Present:

Susan Ancell, Doctor's Medical Center  
Rebecca Rozen, Hospital Council  
Lori Altabet, John Muir Med Center, Walnut Creek  
Kathy Kelly, San Ramon Reg. Med. Center  
Leslie Mueller, AMR  
Katie Prosser, Sutter Delta Med Center

Charlene Boyer, Kaiser Med Center, Walnut Creek  
Michelle Shanks, Contra Costa Reg Med Ctr  
Rene Juster, John Muir Med Ctr, Concord  
Linda Tripoli, ReddiNet  
Art Lathrop, EMS Director  
Judy Smith, RN, Trauma  
Lauren Kovaleff, RN, EMS Program Coord.

TOPIC	SUMMARY
<b>EMS Update</b>	Contra Costa Public Health was reviewed by a State Health Services team that is looking at bioterrorism preparedness for each county in the State. The review process went well, and the review team gave Contra Costa positive feedback. A statewide report will be developed that will cover all counties in California.
<b>ReddiNet</b>	ReddiNet will go live with its upgraded ReddiNet system on March 1, 2006 at 8am. Starting February 20 <sup>th</sup> , 8am, hospitals will have only internet access to ReddiNet while the radio systems are upgraded.  A ReddiNet kick-off is scheduled for February 15 <sup>th</sup> , 1350 Arnold in the 1 <sup>st</sup> floor conference room. Linda Tripoli will review changes and provide any updates. There will be refreshments.  Linda Tripoli, ReddiNet will be in the area and able to provide training the week of February 20 <sup>th</sup> . She will have a mobile set up and can come to your ED for the training on any shift. Contact Linda at ltripoli@hasc.org, to schedule training or with questions.
<b>ED Diversion</b>	Hospital reps described the unusually high patient volume visiting their ER's this winter and impacts when surrounding hospitals go on ED diversion. A number of options for addressing this issue were discussed.  One option, which will be set up, is a polling system to attempt to determine ED patient impact. EMS staff will contact each hospital to determine the baseline number of ED treatment spaces, and the most favorable time(s) for a routine poll.  The poll would consist of 3 questions: 1) How many patients being seen in the ED, 2) how many of the patients being seen in the ED are waiting to be admitted, and 3) how many patients are in the waiting room waiting to be seen.
<b>Trauma and Burn Cache Program</b>	Lori Altabet reported that John Muir, as the county's trauma center had received a large trauma and burn cache as part of a State grant. The cache will be stored in 2 trailers at the hospital. In a disaster, the State may direct that the cache be deployed to the impacted area. The cache includes enough equipment and supplies to treat 50 serious trauma or burn victims. The John Muir cache also includes a portable sonogram machine.
<b>Infection Control Policy</b>	EMS is drafting an updated infectious disease reporting process for prehospital personnel, which has been distributed to hospitals and provider agencies for feedback.
<b>Future Meetings</b>	Although there was excellent participation on this conference call meeting as all hospitals were represented except for one, several attendees favored the face-to-face style meetings, so the next meeting will be held at the EMS Agency as in the past. These meetings will be held quarterly, although interim meetings may be called if necessary. Morning meetings were favored, so will be scheduled from 10am to 11:30 pm.  Note: I've set the schedule to avoid the summer and related holidays.