

The committee therefore recommends the Cambria Community Healthcare District enter into discussions with San Luis Ambulance Service, Inc. to assume the ambulance service for the North Coast by providing two Advanced Life Support ambulances stationed in Cambria.

The committee additionally recommends the Cambria Community Healthcare District Board of Trustees continue to act on behalf of the North Coast residents as the taxing agency and providing local oversight of contracted services.

Respectfully submitted on behalf of the committee:

Muril Clift, Chair

A minority of the committee voted to recommend the CCHD contract with San Luis Ambulance for a single paramedic staffed ambulance dedicated to the North Coast and to contract for full time paramedic engines from either Cambria Fire Department or the California Department of Forestry/San Luis Obispo County Fire. This recommendation was made for the following reasons.

- 1. Most professionals interviewed indicated the rapid arrival and intervention by qualified medical personnel is the most important element in patient survival. Delays in the arrival of a transport vehicle are acceptable as time is needed by the first responders to stabilize and prepare the patient for transport.**
- 2. Some members of the committee believed the two ambulance system would be an over utilization of resources based on historical data that indicates a second ambulance is needed very infrequently. Under the move up and cover contract with the County, San Luis Ambulance Service would provide a second ambulance in a timely manner.**
- 3. Providing paramedics on existing fire engines provided a more flexible use of human resources while still providing back up paramedic service in the case of simultaneous calls.**
- 4. The expense of providing paramedics on existing fire engine companies greatly reduces the expenses of a two-ambulance system. Paramedics included in a CDF 2/0 staffed fire engine or a 3/0 staffed Cambria Fire Department engine should cost less than \$100,000 per year.**

After reviewing many options, the Committee concluded that the most cost effective way to provide superior quality emergency medical services to the North Coast would be to:

- 1. Have CCHD contract with San Luis Ambulance Service to provide two paramedic ambulances full time or;**
- 2. Contract with San Luis Ambulance for one full time paramedic ambulance and to contract for full time paramedic engines from either Cambria Fire Department or the California Department of Forestry/San Luis Obispo County Fire.**

A majority of the committee voted to support CCHD contracting with San Luis Ambulance Service for two full time ambulances for the following reasons:

- 1. Provides for immediate (no on call personnel) paramedic and transport services on simultaneous calls.**
- 2. Two ambulances meet the expectations expressed by the taxpayers in the recent election. Those expectations are based on the fact that Cambria has no emergency medical facilities and must rely on paramedics and timely transportation to medical facilities. Additionally Cambria residents' average age is greater than any other area of the county, therefore requiring more medical services. Cambria residents have recognized this need and have willingly taxed themselves to provide this level of service.**
- 3. By having a private enterprise provide the ALS service, the taxpayers receive a contracted price that includes all expenditures. The taxpayers are not obligated to fund expensive retirement and benefit packages that are associated with government employees.**
- 4. By having a private contractor provide the ALS ambulance service, local government reduces their administrative expenses, contingent liability and labor management problems as these, and other issues would be the responsibility of San Luis Ambulance Service, Inc.**
- 5. Skills and experience levels of crews servicing the North Coast will be enhanced by the contractor's program of rotating crews throughout the county. This rotation of crews insures all crew personnel would experience a constant variety of incidents which might not be experienced by those assigned only to the North Coast.**
- 6. The cost for San Luis Ambulance Service to provide paramedic ambulance service to the North Coast is about \$125,000 to \$150,000 less per ambulance than the amount CCHD would pay using the existing service.**

Conclusions and Recommendations

The Committee reviewed the current Emergency Medical Services system on the North Coast, surveyed alternative EMS systems and interviewed many EMS professionals. We have made the following conclusions:

- 1. The primary focus of an effective EMS system must be the rapid availability of qualified personnel reaching the patient in the shortest possible time. The Committee cannot emphasize this point strongly enough. During the campaign for Measure AA the emphasis of the CCHD was focused on the need to staff a second ambulance with paramedics and consequently, the public believes that a second ambulance is the only solution available to maintain high quality EMS services on the North Coast. Had the focus been on the immediate availability of qualified personnel reaching the patient in the shortest possible time the CCHD would have greater latitude in selecting the most cost efficient method to meet this goal.**
- 2. The Committee unanimously believes the CCHD did not include adequate funding in Measure AA to meet its goal of staffing a second CCHD ambulance full time. There were no funding provisions for hiring additional Emergency Medical Technicians to work with the paramedics. Measure AA literature stated the part-time EMT's would be hired, however CCHD has acknowledged the lack of available local on call personnel due to the high cost of living in Cambria. The language of Measure AA stated that on call paramedics were no longer readily available in Cambria due to retirements and the high cost of living and therefore CCHD needed to hire full time paramedics. This argument applies equally to on call EMT's. If on call EMT's cannot afford to live in Cambria, the immediate availability of the second backup ambulance is seriously jeopardized.**
- 3. Due to the distances involved in reaching patients and transporting them to a medical facility, the system must provide for services when more than one emergency call occurs simultaneously.**
- 4. Since any Emergency Medical Services system based in the North Coast must rely on financial subsidies of the taxpayers, the expectations of the taxpayers must be considered.**
- 5. Since local taxpayers are subsidizing the Emergency Medical Services system, there should be local control of the system.**
- 6. Any contracting of services by the CCHD must demonstrate significant cost savings for the taxpayer while maintaining the highest level of emergency medical services.**

Cambria would cost approximately \$450,000 per year as facilities rent and utilities would already be recovered in the costs of the first ambulance. This means the costs of placing an ambulance in service would be approximately \$467,500 per ambulance on a two ambulance system.

- b. The district could eliminate the majority of the administrative services budget based on the fact all services are being contracted out.**

- 2. One ambulance system with paramedics provided on Cambria Fire Department or CDF fire engines.**
 - a. This system could provide some cost savings as there would be no need to provide full time paramedics and EMTs for a second ambulance. This savings would be based on the ability of CCHD and CCSD or CDF working out a cost sharing of the salaries and benefits of those fire fighters who would assume paramedic and EMT duties on a second call situation.**
 - b. The district should reevaluate the administrative services budget based on the administrator having no paramedic duties.**
- 3. Cambria Community Healthcare District consolidating with Cambria Fire Department or CDF.**
 - a. Savings of administrative costs are available under these systems.**
 - b. Cost comparisons of potential increased costs of benefits provided to fire fighting personnel would have to be reviewed to determine potential savings.**
- 4. Cambria Community Healthcare District contracting with a private ambulance service for one full time staffed ambulance and contracting with Cambria Fire Department or CDF for paramedics on their fire engines.**
 - a. San Luis Ambulance has tentatively indicated a single fully staffed ambulance dedicated to the North Coast and stationed in Cambria would cost approximately \$485,000 per year. Cost could be less based on facilities rent and other utilities costs.**
 - b. The district could eliminate the majority of the administrative services budget based on fact all services are being contracted out.**
 - c. Cost comparisons of potential increased costs of benefits provided to fire fighting personnel would have to be reviewed to determine potential savings.**
- 5. Cambria Community Healthcare District contracting with a private ambulance service for two full time staffed ambulances.**
 - a. San Luis Ambulance has tentatively indicated a single fully staffed ambulance dedicated to the North Coast and stationed in Cambria would cost approximately \$485,000 per year. Cost could be less based on facilities rent and other utilities costs. A second fully staffed ambulance dedicated to the North Coast and stationed in**

to retain the current system they should consider a participatory 401(k) plan and medical/dental plans similar to ones provided by other private ambulance services.

2. Under the current system, set asides for vehicle replacement and other durable equipment should be reviewed to determine adequacy. With the escalating cost of medical equipment the current reserve budget for these items seems inadequate.
3. Under the current system data collection is inadequate. Accurate data collection could be invaluable in seeking additional funds from agencies that rely on the service, but pay little or no property taxes into the system.
 - a. The ability to document the service provided to the tourists (non transport emergency calls) could be justification for the County of San Luis Obispo returning a higher portion of the sales and transit bed tax generated by these tourists.
 - b. The ability to document the service provided to California State Park at Hearst Castle could be justification for seeking some form of restitution for non transport emergency calls to the castle or the visitor's center.

FUNDING ISSUES OF RECOMMENDATIONS FOR IMPROVEMENTS IN HOW SERVICE IS PROVIDED

1. Two ambulance system provided by CCHD.
 - a. Current budgeted amount and funds authorized under Measure AA do not appear to be sufficient to deliver the promised benefit. Cambria Community Healthcare District will have to make some arrangement with Cambria Fire Department for on call EMTs, or volunteers to staff the second ambulance.
 - b. The district will continue to be burdened with an escalating expense for retirement and medical/dental benefits that are in excess of those provided by other private ambulance services.
 - c. The district should reevaluate the administrative services budget based on the administrator having no paramedic duties.

EVALUATE FINANCIAL IMPACTS AND FUNDING ISSUES

The committee's findings in the area of financial analysis are general in nature as the committee lacks the ability to negotiate the contractual provisions which would determine the final cost of each recommendation. The committee has been provided with some general estimates which could provide guidelines for further investigation by CCHD.

The committee would recommend the CCHD seek detailed analysis of the funding issues presented in the committee's final recommendations.

FUNDING

A review of the current CCHD budget indicates an estimated income for fiscal year 2006 - 2007 to be \$861,518.00. The estimated increase of \$328,000 as a result of Measure AA would bring the 2007 – 2008 budget income to approximately \$1,189,500.00. However, funds from Measure AA will not be immediately available at the start of the budget year. This means a delay in any implementation of the two ambulance system. Under this system the costs of placing an ambulance in service would be approximately \$600,000 per ambulance on a two ambulance system.

Of the 2006 - 2007 budget of \$861,518.00 only \$380,500 is the expected reimbursements from insurance companies, medicare or individuals. The remainder of the amount is from taxes, assessments, contracts, rent, interest and miscellaneous items. Since the number of transports has been fairly constant for the past few years it would appear the district could expect to receive a similar amount for the 2007 – 2008 budget year.

BASIC FUNDING ISSUES

Without regards to the financial impacts and funding issues of the alternatives to the current system, there are funding issues the district should consider immediately.

1. The CCHD's participation in the California Public Employees Retirement system should be reevaluated based on burdensome current and future expenses. No other ambulance provider in the immediate or surrounding area provides this level of benefits. These unusually generous benefits are not necessary for competitive hiring of personnel. At a budgeted amount of \$136,521 for California Public Employees Retirement benefits, this is the second highest item in the budget. In addition pre and post retirement medical/dental benefits total \$86,846. With the proposed hiring of three additional paramedics a considerable portion of the funds from Measure AA will go to provide this high level of benefits. If the CCHD should decide

4. California Department of Forestry and Fire Protection may provide additional costs savings as they work a 72 shift and therefore it takes fewer paramedic fire fighters to staff the same position than on a 56 hour schedule.
5. California Department of Forestry and Fire Protection has existing facilities to house the additional staff. CCHD would not have to provide facilities.

Negatives of this system:

1. Since crews staffing the emergency medical service equipment could come from anywhere within the state some lack of familiarity with the area and residents would occur.

System 3 – Cambria Community Healthcare District Board of Trustees contracts with San Luis Ambulance for two paramedic ambulances provided on a 24 hour, 7 day a week basis. Cambria Fire Department and CDF would continue in their current role of providing Basic Life Support services and other emergency services they provide.

Under this system CCHD Board of Trustees would contract with San Luis Ambulance to provide two paramedic ambulances dedicated to and stationed in Cambria to service the needs of the North Coast. Cambria Fire Department and CDF would continue to respond to all emergency calls and provide Basic Life Support services and other assistance as needed.

Positives of this system include:

1. Meets the expectations of the community to provide two full time ambulances as expressed in the passage of Measure AA.
2. A second ambulance would be immediately available to respond to any call when the primary ambulance is in service. This would be an improvement over the current system which requires assembling a standby crew or relying on the move up and cover system of the county.
3. Control of personnel and equipment would be under one authority.
4. This system could result in considerable savings over the two ambulance system currently proposed by CCHD. With this system all services would be contracted out to San Luis Ambulance.
 - a. There would be no need for the current CCHD Board of Trustees to provide any administrative positions. This would result in a direct and significant savings to the CCHD and the citizens of Cambria.

6. Contracting with San Luis Ambulance would be for an all inclusive package of equipment, employees and service, relieving CCHD from the necessity of purchasing replacement equipment or providing housing for ambulance crews.

Negatives of this system:

1. Emergency calls outside of the service area of Cambria Fire Department would have to be handled by San Luis Ambulance, with Basic Life Support assistance from CDF.
2. Should a second call occur outside the area of Harmony to San Simeon Campground, paramedic assistance and ambulance transportation could be delayed for 30 to 60 minutes depending on the location of the call.
3. Cambria Fire Department would have to recruit a sufficient number of paramedics to guarantee a paramedic on all shifts. Based on a 56 hour work schedule it is estimated four to five paramedics would have to be employed to cover all shifts, vacations and illness.
4. Ambulance personnel may be less familiar with the area that the current personnel.

System 2 – Cambria Community Healthcare District contracts with San Luis Ambulance for one paramedic ambulance provided on a 24 hour, 7 day a week basis. CCHD Board of Trustees contracts with CDF to provide paramedics on CDF structural protection fire engines. The contract with CDF would assure the structural protection, paramedic staffed, engine would not leave the CCHD boundaries. Cambria Fire Department continues to provide Basic Life Support services in Cambria.

Positives of this system:

1. All of the positives listed above in System 1 would apply to this system, substituting CDF for Cambria Fire Department.
2. Contracting with CDF to provide paramedic staffed engines would extend the paramedic coverage to all of the territory included in the CCHD.
3. California Department of Forestry and Fire Protection should have no difficulty providing paramedics as they have available reserves throughout the state.

System 1 – Cambria Community Healthcare District Board of Trustees contracts with San Luis Ambulance for one paramedic ambulance provided by on a 24 hour, 7 day a week basis. In addition, CCHD Board of Trustees contracts with CCSD to provide paramedics on Cambria Fire Department engines. CDF continues to provide current Basic Life Support services

Positives of this system:

- 1. Providing paramedics on the engine companies of Cambria Fire Department guarantees immediate paramedic medical aid to the patient in the Cambria area. This is regardless of whether the San Luis ambulance or the fire department is the first responder to the incident.**
- 2. In the case of a second call while the ambulance is in service the paramedic fire engine would handle medical aid. The medical transportation would be provided by the move up and cover system presently in place. During the past year a second ambulance transport was required 23 times, which means it may take 15 to 20 minutes for an ambulance to arrive. However, it was the opinion of emergency medical services providers that a qualified paramedic arriving at an incident within 5 to 10 minutes was important in terms of stabilizing the patient's condition which may result in improved patient recovery and final medical outcome. This was deemed more important than having an ambulance arriving within 15 to 20 minutes.**
- 3. This system could result in considerable savings over the two ambulance system currently proposed by CCHD. With this system all services would be contracted out to San Luis Ambulance and the Cambria Fire Department. There would be no need for the current CCHD Board of Trustees to provide any administrative positions. This would result in a direct and significant savings to the CCHD and the citizens of Cambria. Contracting with San Luis Ambulance will result in substantial saving in public funds due to their methods in managing costs.**
- 4. Cambria Community Healthcare District would be transferring the majority of liability and personnel matters to San Luis Ambulance and Cambria Fire Department.**
- 5. Ambulance personnel would be rotated from crews assigned throughout San Luis Obispo County. This will likely enhance the skills level of the service to the North Coast as these crews would have experienced a much larger call volume than the current ambulance service. Employee costs for ambulance personnel would be reduced by eliminating the financial burden imposed by Public Employees Retirement System.**

3. **Although there would be a financial savings in the elimination of the Healthcare Administration expenses these savings may be eliminated by the increased benefit costs, compared to those transferred from the Healthcare District. The burden of employee benefits for fire fighting personnel is considerably more than for the current Healthcare District.**
4. **California Department of Forestry and Fire Protection is not centrally located for certain areas within the Cambria Community.**

II.COMBINATION OF PUBLIC AGENCY AND PRIVATE CONTRACTOR PROVIDING EMERGENCY MEDICAL SERVICES.

The Committee has investigated three systems for combining the services of a private contractor and public agency for providing emergency medical services. It should be noted that under each of these systems there is a fire department element, even if they are not providing Advanced Life Support Services. On the North Coast the Cambria Fire Department and CDF respond to all emergency calls within the Cambria Community Services District. CDF with Cambria Fire Department support responds to all calls for emergency aid in the area from San Simeon campground to Harmony. CDF responds to all emergency aid calls in the remainder of the CCHD. In addition these fire departments provide cliff rescue, ocean rescue, vehicle extraction and other rescue services on the North Coast.

1. **Cambria Community Healthcare District Board of Trustees contracts with San Luis Ambulance (ambulance provider for San Luis Obispo County other than the North Coast) for one paramedic ambulance provided by on a 24 hour, 7 day a week basis. CCHD contracts with CCSD to provide paramedics on Cambria Fire Department engines. CDF continues to provide current Basic Life Support services.**
2. **Cambria Community Healthcare District Board of Trustees contracts with San Luis Ambulance for one paramedic ambulance provided by on a 24 hour, 7 day a week basis. CCHD contracts with CDF to provide paramedics on CDF residential fire engines. Cambria Fire Department continues to provide Basic Life Support services in Cambria.**
3. **Cambria Community Healthcare District Board of Trustees contracts with San Luis Ambulance for two paramedic ambulances provided on a 24 hour, 7 day a week basis. Cambria Fire Department and CDF would continue in their current role of providing Basic Life Support services, as well as other emergency services they provide.**

3. Cambria Fire Department and CCSD may not desire to assume the liabilities and personnel matters without control of the tax revenues that supports these activities.

System 4 – Consolidation of Cambria Community Healthcare District with California Department of Forestry and Fire Protection (CDF) to provide all emergency medical services.

This system is based on Cambria Community Healthcare District Board of Trustees contracting with CDF to provide all emergency medical services. CDF provides both ambulance service and paramedic engine companies in many parts of the state. In San Luis Obispo County, CDF has paramedic engines located in Los Osos, Nipomo and Nipomo Mesa.

Positives of this system:

1. California Department of Forestry and Fire Protection provides fire protection and public service to the entire area serviced by the Cambria Community Healthcare District. There would be no jurisdictional problems if CDF assumed the emergency medical services for the North Coast.
2. As a large state agency CDF would have equipment and personnel to provide the service from its state wide resources.
3. All emergency medical services resources on the North Coast would be under one command and administrative costs would be reduced, as no additional administrative personnel would be needed.
4. California Department of Forestry and Fire Protection regularly contracts with community service agencies and cities to provide their services on a fixed contract basis and does not require control of the taxing authority.
5. Cambria Community Healthcare District would be transferring the majority of liability and personnel matters to the CDF.

Negatives of this system:

1. Adequate contractual provisions would be needed to guarantee engine companies dedicated to providing emergency medical services to the North Coast would not be reassigned by CDF to another emergency outside the CCHD.
2. Since crews staffing the emergency medical service equipment could come from elsewhere in the county, some loss of familiarity with the local area and residents would occur.

mirror the systems of many major cities where the fire departments provide both ambulance and fire rescue services.

Positives of this system include:

- 1. All emergency medical services resources would be under one command. This would eliminate the need for a separate Healthcare Administration with resultant cost savings.**
- 2. There could be more flexible use of personnel as all fire fighters are EMT certified to provide Basic Life Support. With Cambria Fire operating the ambulance, the ambulance crew can support fire suppression crews when appropriate which would result in a more efficient use of personnel.**
- 3. Recruitment of personnel to a larger combined department may be more attractive because a larger department fosters more upward mobility.**
- 4. Ambulance equipment and personnel of the Healthcare District could be transferred to the fire department. This means that initially there will be little or no outlay of funds for additional equipment.**
- 5. Current paramedics and fire fighters are familiar with the physical layout of the community and know many of the residents on a personal level.**
- 6. Cambria Community Healthcare District would be transferring the majority of liability and personnel matters to the Cambria Fire Department, yet retaining oversight of emergency medical service through their taxing authority.**

Negatives of this system include:

- 1. Cambria Fire Department is part of the Cambria Community Services District and responsible for fire protection and public service to the Cambria Community. Additional emergency medical services responsibility for the North Coast would require responses outside of their normal jurisdiction. These issues of jurisdictional and financial responsibility would have to be negotiated with San Luis Obispo County.**
- 2. Although there would be a financial savings in the elimination of the Healthcare Administration expenses these savings may be eliminated by the increased benefit costs, compared to those transferred from the Healthcare District. The burden of employee benefits for fire fighting personnel is considerably more than for the current Healthcare District.**

services provider except the administrator of the CCHD that a qualified paramedic arriving at an incident within 5 to 10 minutes was more important than an ambulance arriving within 15 minutes. See article on Salinas Rural Fire, Westmed alliance article in addendum.

3. This system has the possibility of significant cost savings from the two ambulance system. Cost savings could come from reduction in equipment and elimination of second full time ambulance crew. Paramedics on fire engine crews may not require the same remuneration as full time paramedics as their service would only be needed when the primary ambulance was in service. The remainder of the time they would be firefighters paid by the fire agency. A second dedicated emergency medical technician would not be required as all fire fighters are EMT trained. This system could also eliminate the need for the administrator to act as a relief paramedic and result in savings in administrative costs.
4. Current CCHD staff and Cambria Fire Department are familiar with the territory and residents.

Negatives of this system include:

1. This system may be difficult to implement because of the community's expectation of a two ambulance system as promised in the recent Measure AA campaign.
2. Contracts would have to be negotiated with Cambria Community Services District for Cambria Fire Department personnel or with the California Department of Forestry and Fire Protection.
3. Some questions of jurisdiction would have to be negotiated if Cambria Fire Department was to provide regular paramedic service beyond its district or automatic aid jurisdiction – Harmony to San Simeon campground. These jurisdictional problems would not be present with the California Department of Forestry and Fire Protection as CDF covers all of the territory of the Cambria Community Healthcare District.
4. Cambria Community Healthcare District would have some loss of control over the paramedics employed by the contract with Cambria Fire Department and/or CDF.

System 3 – Consolidation of Cambria Community Healthcare District with Cambria Fire Department to provide all emergency medical services.

This system is based on Cambria Community Healthcare District Board of Trustees contracting with Cambria Community Service District to provide all emergency medical services by Cambria Fire Department. This system would

4. Since the District must be cognizant of its potential budget limitations it should take immediate action to review its budget to limit future escalations of costs that can be avoided. The District should rescind its participation in the Public Employees Retirement System as an excessive benefit not available from any other ambulance provider in the area. A 401K plan, such as the one available to San Luis Ambulance personnel would be competitive with other ambulance providers. This would also protect the District from projected costs which could severely impact the District in the future.
5. With two fully staffed ambulances there would be no need for the District Administrator to also act as a paramedic and therefore would not need paramedic training. A District Administrator capable of managing personnel and budgets could be hired at a rate considerable below the current rate paid. The hiring of the administrator should be made on a competitive basis and selection should be made from a reasonably adequate pool of applicants.
6. Fully implement a data recording/analysis system to accurately document the efficacy of the District's EMS activities. This should be based on systems currently in use by other agencies. These data will be important determinant's for future planning, contract requirements, funding requests and performance comparisons to other activities.

System 2 – One paramedic ambulance provided by Cambria Community Healthcare District on a 24 hour, 7 days a week basis with additional Advanced Life Support provided by Cambria Fire Department, CDF or combination of both.

Under this system the Cambria Community Healthcare District would provide a full time paramedic ambulance. The CCDH would contract with Cambria Fire Department and/or CDF to provide additional Advanced Life Support on their fire engines.

Positives of this system include:

1. Providing paramedics on the engine companies of Cambria Fire Department and/or CDF guarantees immediate paramedic medical aid to the patient regardless of whether the CCHD ambulance or the fire department is the first responder to the incident.
2. In the case of a second call while the ambulance is in service the paramedic fire engine would handle medical aid. The medical transportation would be provided by the move up and cover system presently in place. During the past year a second ambulance transport was required 23 times. Although it may require 15 to 20 minutes for an ambulance to arrive it was the opinion of every emergency medical

be damaged, personnel be injured or incapacitated by group sickness reserves are not readily available.

- 2. Recruiting and potential advancement within the organization is limited.**
- 3. The system requires tax subsidies to operate because the fees for medical transportation can not provide for expenses. Failure of tax subsidies to keep up with future escalating costs could bankrupt the system.**
- 4. There is a potential for degradation in the skills of the paramedics due to the small number of calls handled. Statistics for the past year indicate there were 60 calls requiring a second ambulance to respond and only 23 of those calls required transportation to a medical facility. Treatment of complicated emergency medical cases is an acquired skill that needs to be practiced in a real life environment in order to be kept viable. The lack of the practical application of skills could be a detriment in certain emergency medical cases.**
- 5. Hiring of three paramedics does not adequately cover the staffing of an additional ambulance. It does not address the question of an EMT driver/attendant and still requires volunteer or on call reserves to staff the second ambulance.**

Suggestions for improving this system:

- 1. This system does not provide the financing for the hiring of three additional full time Emergency Medical Technicians to staff the second ambulance. Measure AA only provided financing for three full time paramedics, their benefits and retirement funding. Each ambulance is required to be staffed by a paramedic and an emergency medical technician. This could mean delays in the availability of the second ambulance and negate the benefits of the second ambulance as promised. Funding must be allocated for these positions or some form of agreement must be made to use Emergency Medical Technician trained personnel of other departments such as Cambria Fire Department.**
- 2. The District must make emergency contingency plans for meeting needs to replace equipment and personnel on a temporary or permanent basis should the need arise.**
- 3. The District must continue training and programs to insure competency of staff in many situations not regularly experienced on the North Coast.**

Support provided by Cambria Fire Department, CDF, or a combination of the two.

3. Consolidation of Cambria Community Healthcare District with Cambria Fire Department to provide all emergence medical services.
4. Consolidation of Cambria Community Healthcare District with CDF to provide all emergence medical services.

In each of the above four systems the committee contemplates the Cambria Community Healthcare District continuing to function as the taxing authority and local oversight agency contracting with the other provider agencies.

System 1 – Two paramedic ambulances provided by CCHD with fire department support.

This is the system contemplated by the CCHD with the passage of Measure AA in November 2006 and planned implementation by January 2008. With this system the district would continue to operate as before, however, instead of using part time or volunteer on call paramedics to staff the back up ambulance the district would hire three additional full time paramedics to staff the ambulance. Support from Cambria Fire Department and CDF would continue as currently provided.

The positives of this system include:

1. Meets the expectations of the community to provide two full time ambulances as expressed in the passage of Measure AA.
2. A second ambulance would be immediately available to respond to any call when the primary ambulance is in service. This would be an improvement over the current system which requires assembling a standby crew or relying on the move up and cover system of the county.
3. Control of personnel and equipment would be under one authority.
4. Most of the necessary equipment is already in place.
5. Current CCHD staff is familiar with the territory and residents.

The negatives of this system include:

1. Cambria Community Healthcare District would be a small stand alone system of approximately 10 to 12 employees and as such subject to several problems. The economic costs of administration of this type of system are huge in comparison to the number of employees. The resources of the system are limited, both in equipment and personnel. Should equipment

The difference for Cambria is the establishment of the Healthcare District and the willingness of the citizens to tax themselves to subsidize the costs which could not be recovered from ambulance fees alone. Fifty-six percent of the current budget of the Cambria Community Healthcare District is provided by community subsidies. Under the system proposed, under the recently approved Measure AA, sixty-eight percent, will come from other than ambulance fees.

Realizing that the citizens of Cambria are willing to accept an additional tax burden in order to receive an elevated level of ambulance service, the committee believes it should not only look at ways to improve the existing service, but should look at all alternatives to the current system to determine the best method to deliver service for the dollars available not only today but for future expectations. The Committee believes the current system has done an excellent job up to now in meeting the needs of the North Coast. It is planning on how to maintain or exceed this excellent record of delivery that presents several challenges which the Committee believes are important in evaluating the delivery of those services in a cost efficient manner that will also meet the perceived and realistic needs of the community.

SERVICE DELIVERY MODELS

The Committee has investigated two general service delivery models for providing Emergency Medical Services to the North Coast. The service delivery models investigate how immediate paramedic services and ambulance services could be provided to the North Coast.

1. Public Agency as primary provider of emergency medical services.
2. Combination of Public Agency and Private Contractor providing emergency medical services.

Both models contain subsystem variations of the model. The following is the review of the investigation into the positives and negatives of each model and/or subsystem.

I. PUBLIC AGENCY AS PRIMARY PROVIDER OF EMERGENCY MEDICAL SERVICES.

The Committee reviewed four different possible systems of providing Emergency Medical Services by public agencies.

1. Two paramedic ambulances provided by Cambria Community Healthcare District on a 24 hour, 7 day a week basis with fire departments support.
2. One paramedic ambulance provided by Cambria Community Healthcare District on a 24 hour, 7 day a week basis with additional Advanced Life

RECOMMENDATIONS FOR IMPROVING HOW SERVICES ARE PROVIDED TO THE NORTH COAST

INTRODUCTION

As indicated earlier in this report the pre-hospital EMS system includes providing paramedic assistance to the patient as soon as possible and providing ambulance transportation for the patient to the appropriate medical facility. In reviewing improvements to this system the committee has studied several delivery models.

The Committee recognizes the current system for Cambria and areas north has grown out of a community's perceived need for service greater than what the "call volume driven system" (CVDS) would provide. The (CVDS) is used throughout San Luis Obispo County except on the North Coast. The (CVDS) apportions ambulances based on a call volume sufficient to make a profit from the fees generated by the number of medical transports in a given area. In areas where the ambulance service also is the primary paramedic provider, which is the case in many rural areas of the county, the service of a paramedic is also effectively rationed on the (CVDS). In areas where another provider provides paramedic services, as in Paso Robles and Los Osos, the availability of a paramedic is not dependant on the (CVDS).

The establishment of the Cambria Community Healthcare District and the willingness of the North Coast residents to tax themselves has provided an effective emergency medical support system which includes both paramedic services and ambulance transportation and is the envy of many rural and isolated areas. Discussions with the operators of San Luis Ambulance and representatives of other emergency service providers have indicated that on a "call volume basis" it would be difficult to justify a single 24 hour a day, seven days a week fully staffed ambulance dedicated to Cambria and the North Coast.

There are parts of the County where there are delays in the timely arrival of ambulance and/or paramedic services. For example, Los Osos, with a population twice the size of the North Coast has no dedicated ambulance available to reach its residents within 10 minutes of a call. The Los Osos CSD instead contracts with California Department of Forestry and Fire Prevention (CDF) to operate the Los Osos fire station with two full time firefighter/paramedic staffed units to provide Advance Life Support services in a timely manner until an ambulance can arrive from Morro Bay or San Luis Obispo. The situation is even more serious for the residents north and east of Paso Robles where ambulance and paramedic services are provided by San Luis Ambulance stationed in Paso Robles. Paramedic and ambulance arrival times to these areas can exceed thirty minutes due to the distances involved.

B. Current Service

The CCHD operates one full time primary ambulance staffed 24 hours per day by a paramedic and an emergency medical technician. The CCHD has a backup ambulance that is available when the primary ambulance is in service and when part time personnel are available. When the primary ambulance is dispatched to an emergency, the backup ambulance crew is paged to staff the backup ambulance. If personnel are not available to staff CCHD backup ambulances, the county-wide move up and cover system is activated.

The move up system is an automatic mutual aid system which repositions ambulances throughout the county to provide back up service to areas when the area primary ambulance is in service. San Luis Ambulance Service provides back up ambulance service for the North Coast. When the primary ambulance is in service and the CCHD backup ambulance is not available, the county dispatches San Luis Ambulance to move up to either the intersection of Villa Creek Rd. and Highway 1 or to the Highway 46 summit. The expected response time to Cambria from either of these locations is approximately 15 minutes. Cambria Community Healthcare District, as a participant in the “move up and cover” system, provided back up service to San Luis Ambulance 119 times last year. Information was not readily available for the number of times San Luis Ambulance Service provided back up service for CCHD. The cost of the “move up” system can not be billed to the community or company needing backup.

Planned Enhancements

In order to provide back up to the primary ambulance the Cambria Community Healthcare District has relied on a system that involves using the District Administrator, a qualified paramedic, and part time or volunteer paramedics and emergency medical technicians to staff the second ambulance. In the past few years the available volunteers and part time on call employees have been reduced due to retirement, the increasing cost of living in the area and changing interests or obligations. Due to the lack of available personnel, the reliability of providing a second ambulance within an acceptable response time has diminished

Because the current system of providing one full time and one back up ambulance with available staff is becoming more difficult to sustain, the Cambria Community Healthcare District sought and obtained voter approval in November 2006 for a tax increase; the revenue from which would be used to hire three additional full time paramedics. These paramedics would be used to maintain the second ambulance on a 24 hour basis. No funds were obtained to hire additional emergency medical technicians. Volunteer and on call part time emergency medical technicians were to be used. The tax increase will be effective with property taxes billed and collected in late 2007 or early 2008.

SAN LUIS AMBULANCE SERVICE INC.

San Luis Ambulance Service Inc. is a private contractor and provides primary ambulance transport services to San Luis Obispo County except on the North Coast, which is generally defined as the boundary of the Cambria Community Healthcare District. San Luis Ambulance Service Inc. provides, as a part of the county “move up and cover” system, back up service to the North Coast when Cambria Community Healthcare District ambulances are unavailable due to other medical assistance or transportation assignments. The “move up and cover system” involves the constant redeployment of ambulances throughout the county to provide backup for ambulances taken out of service by medical assistance or transport assignments. Cambria Community Healthcare District was called on 119 times during the period between July 2005 and June 2006 to provide “move up and cover” service for San Luis Ambulance Service.

San Luis Ambulance Service Inc. maintains seven ambulance stations from Nipomo in the South County to Paso Robles in the North County to Morro Bay on the coast. The Paso Robles and San Luis Obispo stations have two ambulance units in service, one full time and one during daylight hours. The other five stations have one ambulance in service at all times. All ambulances are staffed with one paramedic (EMT-P) and one emergency medical technician (EMT). In addition to paramedic ambulance service, the communities of Atascadero, Morro Bay, Paso Robles, Los Osos, Nipomo, Nipomo Mesa and San Luis Obispo City provide advanced life support (ALS) services by fire department paramedics.

CAMBRIA COMMUNITY HEALTHCARE DISTRICT

The agencies discussed in the above sections generally act as first responders, support for emergency services, or receivers of patients. Cambria Community Healthcare District (CCHD) is the current provider of paramedic services and ambulance transport to medical facilities for North Coast residents and visitors.

A. Legal Aspects

Cambria Community Healthcare District operates under a contract with San Luis Obispo County. This contract covers policies, procedures, protocols and performance standards.

Cambria Community Healthcare District is the only public agency that contracts with the county to provide both Advanced Life Support and ambulance service. In other areas of the county Advanced Life Support services are provided by San Luis Ambulance and, in some jurisdictions, fire department paramedics.

CALIFORNIA HIGHWAY PATROL

In addition to providing traffic control and enforcement on the major roadways of the North Coast (SR 1, SR 101 and Hwy 46W) the California Highway Patrol mobile emergency dispatchers receive all 911 emergency calls generated by cellular telephones. The CHP mobile dispatchers are located throughout California and are locally in Santa Maria. They will connect the caller to the appropriate emergency services dispatch center.

All CHP officers are BLS trained and most are EMT's. The CHP operates a fleet of helicopters throughout the state and one is located at the Paso Robles Airport. The airship is tasked with many diverse operations but one of the most important is rendering medical aid and transport as an air ambulance. There is at least one EMT-paramedic onboard the helicopter at all times. The CHP helicopter, H-70, is one of two air ambulances available on the North Coast.

CALSTAR Air Ambulance

CALSTAR (California Shock Trauma Air Rescue) is a California Community Benefit non-profit corporation operating seven regional air ambulances in California. The Santa Maria operation is based at the Santa Maria Airport. CALSTAR 7 is the most recent addition to their regional air ambulance system. CALSTAR 7 responds to Santa Barbara and San Luis Obispo Counties as well as western Kern and southern Monterey counties. CALSTAR has ALS capabilities with an onboard Flight Nurse who has a higher level of training than an EMT-paramedic.

AREA HOSPITALS

There are three area hospitals available to the North Coast residents. All are between 20 and 35 miles from Cambria, the population center of the North Coast. Each hospital maintains a staffed emergency room 24 hours per day, seven days a week. None of the hospital are designated a "trauma or burn center". The nearest trauma center is located in Fresno, California. Determination as to which hospital a patient will be transported to is based on the designation of the patient or the determination by the ambulance staff as to which hospital is closest to the patient. Data provided by the Cambria Community Healthcare District indicates Sierra Vista Regional Medical Center is the most frequented destination, Twin Cities Hospital the second most frequented and the least transports to French Hospital. Arroyo Grande Community Hospital and Marian Medical Center in Santa Maria are not ambulance transport destinations due to their extended distance.

CAMBRIA FIRE DEPARTMENT

The Cambria Fire Department is the primary provider of fire suppression and rescue services as well as providing non-transport emergency medical services within the Cambria Community Services District boundary. All firefighters are minimally trained as EMT's and, as such, provide basic life support including the use of semi-automatic defibrillators. At the present time, the San Luis Obispo County EMSA has authorized the EMT-Paramedics to provide Advanced Life Support (ALS) services while they are on duty with the Cambria Fire Department. ALS is defined as medically accepted, life sustaining, invasive procedures, provided at the direction of a physician or authorized Registered Nurse. Among skills provided by EMT-Paramedics are intravenous delivery of medication and advanced cardiac monitoring and interpretation. Currently there are 3-firefighters on duty during each shift, an engine Captain, an engineer/driver/pump operator, and a paid call reserve. Each has a minimum level of EMT certification.

SAN LUIS COUNTY SHERIFF'S DEPARTMENT

The Sheriff's Department provides basic law enforcement for the North Coast. There is a resident deputy sheriff located in Cambria who is trained as a BLS provider. The Sheriff's local office is at the CDF/Country Fire Department station on Coventry Lane.

The San Luis County Sheriff's Department provides the emergency dispatch center for all 911 emergency calls originating from landline telephones on the North Coast as well as other unincorporated areas of the county. The Sheriff Department dispatchers are medically trained and are responsible for dispatching all ambulances. If the emergency requires response by a fire department agency, the Sheriff dispatcher will notify the CDF/County Fire Command Center simultaneously of the incident. CDF/County Fire will alert and dispatch the required equipment and personnel, including Cambria Fire and the Cambria CDF/County Fire station.

The Sheriff's Department Dispatch Center is responsible for positioning ambulances whenever the primary ambulance is unavailable. As soon as the primary ambulance is out of service the move up and cover system is implemented allowing for another ambulance to move up and cover the area serviced by the primary ambulance. For example, When the CCHD ambulance is out of service transporting a patient to the hospital, The Sheriff dispatcher alerts a San Luis Ambulance Service ambulance to move up to either the Villa Creek Rd. or top of the Hwy 46W summit in order to be in position to respond to a simultaneous medical emergency on the North Coast.

Level 3 – Emergency Medical Services (EMS)

COMPONENTS OF THE EMS SYSTEM

Residents and visitors to the North Coast have access to a comprehensive system that meets their basic medical needs as discussed above. Additionally, the North Coast has an integrated system of pre-hospital emergency medical services provided by: Cambria Community Healthcare District, Cambria Fire Department, California Department of Forestry (CDF)/San Luis Obispo County Fire Department, San Luis Obispo County Sheriff's Department, California Highway Patrol, U.S. Forest Service, San Luis Ambulance Service and CALSTAR Air Ambulance. These agencies of the EMS system provide one or both of the essential parts of the pre-hospital EMS system that includes paramedic assistance to the patient and transportation of the patient to the hospital. In addition to these pre-hospital emergency medical service providers, there are four hospitals in San Luis Obispo County: Twin Cities Community Hospital, Templeton; Sierra Vista Regional Medical Center, San Luis Obispo; French Hospital Medical Center, San Luis Obispo; and Arroyo Grande Community Hospital, Arroyo Grande. These components are governed and coordinated by San Luis Obispo County Office of Emergency Services and the San Luis Obispo County Emergency Medical Services Agency.

CALIFORNIA DEPARTMENT OF FORESTRY AND FIRE PROTECTION/SAN LUIS OBISPO COUNTY FIRE DEPARTMENT

The California Department of Forestry and Fire Prevention (CDF) contracts with 36 of the 58 counties to manage their fire departments. San Luis Obispo is one such county. There are 21 CDF/County Fire stations in San Luis Obispo County and Cambria Station #10 is one of them. This station responds along with Cambria Fire to all emergencies within the CCSD boundary. Also, they respond with the CCHD ambulance to all medical emergencies within the CCHD North Coast boundary. All CDF firefighters are Emergency Medical Technicians (EMT's) and are licensed to provide basic life support (BLS) services, including the use of semi-automatic defibrillators. BLS is medically accepted non-invasive procedures used to sustain life. BLS providers are not licensed to provide medication by injection or to operate and interpret advanced cardiac monitoring equipment.

While CDF has a primary responsibility for wild land fire protection, when combined with county fire departments they become a full service emergency services agency. CDF/ County Fire has primary responsibility for all unincorporated areas of the County and secondarily as a mutual or automatic responder to the 18 other fire agencies in San Luis Obispo County.

COMPREHENSIVE REVIEW OF EXISTING SERVICES

INTRODUCTION

The Citizen's EMS Committee's second charge was to complete a comprehensive review of existing emergency medical services on the North Coast. The Committee believes any review of the emergency medical services should be in the context of all medical services available to residents and visitors of the North Coast. With this in mind, we have categorized current medical services into three levels. Level 1 is a review of basic medical services; level 2 is a review of medical support services; and level 3 is a review of the pre-hospital basic life support (BLS) and advanced life support (ALS) services available.

Level 1 – Basic Medical Services

Currently, all basic medical services within the Community Healthcare District boundary are located within the community of Cambria.

The community has two primary care physicians. One is in private practice and the second is employed by a non-profit community clinic that is part of a regional network. The clinic also provides nurse practitioner, chiropractic services and accepts patients with health care insurance. Patients without insurance pay on a sliding scale.

Cambria has two private practice chiropractors with x-ray capabilities and two full service pharmacies. Also located in Cambria are three full service gyms that promote general fitness training and where one can obtain personal training and licensed physical therapy services.

Level 2 – Medical Support Services

In addition to the basic medical services located in Cambria and described in Level 1, North Coast residents and visitors have access to medical support services in other parts of the county. Primary care physicians, specialty physicians, urgent care, specialty clinics, physical therapy and other services are available in Paso Robles, Templeton, Morro Bay, San Luis Obispo and other cities in the county. Hospital services are available in Templeton, San Luis Obispo City and Arroyo Grande.

For those without private transportation to locations within and outside of Cambria, Regional Transit Authority busses, the Cambria Community Services District bus, the Cambria Trolley, and C.A.R.E.S. (a non-profit Cambria volunteer organization that provides individual assistance including transportation for residents) are available. The CCHD Crisis Intervention Team also provides personal assistance and transportation to those involved in crisis situations.

Meeting the needs of the North Coast

Based on geographical issues, contractual issues and the historical needs for emergency medical service, the committee believes the following goals should be met in providing emergency medical services for the North Coast.

- 1. The needs of the North Coast for immediate delivery of Emergency Medical Services are the same or greater as for all other residents of the County of San Luis Obispo. The residents of the North Coast therefore need a properly equipped and staffed Emergency Medical Service system that can meet the county's contracted goals listed under Contractual Requirements.**
- 2. Due to the isolated areas serviced, and the distance to hospitals, North Coast residents require a formalized plan providing back up paramedic and ambulance service when the primary ambulance is on an emergency call or out of the service area transporting patients to the hospital.**
- 3. Due to the isolated areas of the North Coast, citizens of the North Coast assume some of the risks for meeting their initial emergency medical needs. Educating the public about what they can do as a first responder until professional help arrives is an important component of the Emergency Medical Services system.**
- 4. Accountability by the Emergency Services System is important. A complete database system that tracks all emergency medical calls must be implemented so that it will be possible to evaluate if the system is meeting its goals and objectives.**

4. Dry Run – 283

Dry Runs include all calls for medical assistance where no transport of a patient is required. These are non-life threatening events where patients indicates they need no further assistance or will arrange their own transportation for medical services.

5. Trauma Transport – 86

Trauma Transports include non-traffic accident injuries requiring transport to a hospital. These are both life threatening and non-life threatening medical emergencies.

6. Traffic Accident Transport – 18

Traffic Accident Transports include all traffic accidents occurring through out the 810 square miles of the district. These include both life threatening and non-life threatening medical emergencies.

7. Medical Transport – 298

Medical Transports includes all non-trauma or traffic accident transports to area hospitals. These could be either non-life threatening or life threatening medical emergency.

It should be noted the Cambria Community Healthcare District only bills for ambulance service to individuals or insurance companies when they transport patients, not all of which is collected. Of the above 874 responses only 402 of the response were billable, or 46%. All other calls are supported by property taxes or other activities of the district, such as the rental of its medical building.

A review of the historical annual statistics available on the Cambria Community Healthcare District's website indicates the above numbers have been fairly consistent for the past nine years, with a slight increase in transports over the past two years.

Information that was not readily available included individual call response times, location of unit when call received and time of availability of back up ambulances. One significant Emergency Medical Services need for the North Coast is for future Emergency Medical Services to be measured more carefully, thereby ensuring that the citizens are being provided the same Basic Life Support and Advanced Life Support emergency services that are afforded to the remainder of San Luis Obispo County.

3. Disaster, Multicasualty, Mutual Aid Response

Contractor will deploy resources in accordance with emergency and or mutual aid plan or plans approved by County. Contractor shall render emergency assistance in multicasualty or disaster situations to any location as directed by the San Luis Obispo County Communications Center.

4. Move Up and Cover

Contractor shall provide ambulance move-up and coverage for service areas left uncovered due to other emergency responses, as directed by the County's Emergency Communication Center.

The entire contract is viewable in the addendum to this report.

Historical Data for the North Coast

A review of the historical data available on responses by the Cambria Community Healthcare District for the period of July 2005 through June 2006 indicates the district personnel responded to a total of 874 incidents (average 75 calls per month, 2.4 calls per day, and about 1 medical transport per day). The calls were broken down as follows:

1. Public Relations - 11

Public Relations include appearances at public events, shows, parades, etc.

2. Public Assistance – 59

Public assistance includes calls for individuals needing help such as assistance after a fall, but do not need transport. These are non-life threatening calls.

3. Stand By – 119

Stand By includes Move Up and Cover requirements of the contract with the County of San Luis Obispo. The most common Stand By locations were Villa Creek (67) and Hwy 46 Summit (25).

Contractual Requirements

The committee believes the residents and visitors of the North Coast deserve the same or better Basic Life Support (BLS) and Advanced Life Support (ALS) emergency medical services that are afforded to the remainder of San Luis Obispo County. The required response times for ALS services are defined in the contract between Cambria Community Healthcare District and County of San Luis Obispo. This contract specifies:

The general goal of the Deployment Plans is to provide an Advance Life Support (ALS) Unit, either by Contractor or by an ALS fire service agency, to at least 90% of all potentially life threatening emergency ambulance requests originating within each Emergency Response Area with a maximum response time of 10 minutes in areas designated urban, and with a maximum response time of 30 minutes in areas designated as rural, and with a maximum response time of 60 in areas designated as remote.

These response times are goals and not requirements. Under this definition, Cambria would be designated an urban area (population of more than 2500, with a density of 100 to 999 persons per square mile). The second largest concentration of residents is San Simeon and is designated as a rural area (population less than 2500 and a population density of 10 to 99 persons per square mile). All other areas of the North Coast would be designated Remote (population density of 5 to 9 persons per square mile).

The contract also provides performance standards for:

1. Staffing and Personnel

Minimum requirement; 1 Paramedic & 1 Emergency Medical Technician on each emergency response vehicle.

A fully staffed back up ambulance available within 8 minutes of notification that the primary ambulance is unavailable.

2. Vehicles and Equipment

All of Contractor's ambulances shall carry all emergency supplies and equipment, identified in the County Ambulance and Supply Policy on file at the Emergency Medical Services Agency (EMSA), on each licensed unit.

Identify the Emergency Medical Needs of the North Coast

Geographical Concerns

In evaluating the emergency medical needs of the North Coast the committee recognizes there are inherent risks that are present when residing in a non-metropolitan area. One of these risks is lack of medical facilities such as specialty doctors, clinics and hospitals.

Cambria, as the only semi-urbanized area of the North Coast, has one physician in general practice and a community health clinic staffed by a general practice physician, a nurse practitioner and a chiropractor. The clinic provides general medical services but does not provide emergency medical services. The nearest hospital, Twin Cities, is 25 miles from Cambria. The second closest hospital, Sierra Vista Regional Medical Center, is 33 miles from Cambria. French Hospital in San Luis Obispo is 36 miles from Cambria.

Although Cambria comprises the largest concentration of citizens on the North Coast, many more rural citizens live even further from these hospitals, thereby increasing the time for medical assistance to be delivered. These increased response times raise important concerns on how to respond simultaneous medical emergencies. Contingency plans for delivery of emergency medical services to residents of the North Coast need to be developed

In addition to the residents of the North Coast, the scenic beauty of the area and its location half way between Los Angeles and San Francisco attracts thousands of holiday visitors on any given day. Hearst Castle State Park alone draws almost a million visitors yearly. All of these visitors, staying through out the area have the same potential needs for emergency medical services as the residents of the North Coast.

Demographic Concerns

The demographics of the North Coast and Cambria in particular present additional medical challenges. Cambria, at 50.9 years, has the oldest average age in San Luis Obispo County. Rapid paramedic intervention is critical with a population at greater risk for coronary and other age related medical problems

C. Committee Activities

The committee's first meeting occurred on June 28, 2006. The committee has been meeting bi-weekly since that date. In addition to the bi-weekly meetings, subcommittees have met as needed. To date the committee as a whole or through subcommittees, have held meetings with:

- 1. Administrator of Cambria Community Healthcare District.**
- 2. General Manager of Cambria Community Services District.**
- 3. Fire Chief and management of the Cambria Fire Department.**
- 4. Employee representatives of the Cambria Fire Department.**
- 5. Employee representatives of the Cambria Community Healthcare District.**
- 6. General Manager, San Luis Ambulance Service, Inc.**
- 7. Management personnel of the California Department of Forestry and Fire Protection.**
- 8. Local Area Formation Commission.**
- 9. Representative of County Office of Emergency Services.**
- 10. Director of Emergency Services for City of Paso Robles.**
- 11. Members of the AD/HOC Committee on consolidation of facilities.**

All information to date has come from sources dependent on the Healthcare or Community Services Agencies or from organizations that work with these agencies. There was no response to our notice in the Cambrian requesting citizens input.

INTRODUCTION

A. The Committee

The Citizens Advisory Committee on Emergency Medical Services for the North Coast was established by actions of the Cambria Community Healthcare District and the Cambria Community Services District.

The eleven citizens appointed by the two agencies represented a cross section of the community with prior experience in the medical field, emergency services and business. Any applicants for the committee currently affiliated with either agency were excluded. The eleven members of the committee are:

- 1. Muril Clift, Chair**
- 2. Alex Magro MD**
- 3. Bud Goff**
- 4. Don Ukkestad**
- 5. Gary Wilkerson**
- 6. Iain Hamilton**
- 7. Jeri Farrell**
- 8. Kristi Jenkins**
- 9. Michael Walsh**
- 10. Myron Gilbert**
- 11. Samuel Youngman MD**

Two members of the committee, Myron Gilbert and Gary Wilkerson, after several weeks of active service, were unable to continue due to personal reasons.

Committee member's biographies are contained in the addendum to this report.

B. Committee Assignment

The Cambria Community Healthcare District and the Cambria Community Services District directed the committee to study the following areas and report their findings to the respective boards.

- 1. Identify the Emergency Medical Services needs on the North Coast.**
- 2. Perform a comprehensive review of existing services.**
- 3. Recommend improvements in how services are provided.**
- 4. Evaluate financial impacts and funding issues.**
- 5. Recommend the best way to provide future emergency medical services.**
- 6. Prepare a report to the CCHD and CCSD Boards.**