

COUNTY OF SACRAMENTO
CALIFORNIA

JUL 26 2002

APPROVED for the Agenda of:
BY RESOLUTION # 2002-0906 July 23, 2002
BOARD OF SUPERVISORS

TO: Board of Supervisors

JUL 23 2002

FROM: Department of Health and Human Services

By Cindy H. Turner
Clerk of the Board

SUBJECT: 02-056 Authorize The Director Of Health And Human Services To Contribute Up To \$80,000 Of Categorical Emergency Medical Services Program Revenue To The Hospital Council of Northern & Central California For The Purpose Of Establishing A Regional Hospital Status Information System

CONTACT: Bruce Wagner (875-9753)

Overview

Over the past several years, hospitals throughout the United States have dramatically increased the number of hours they close their emergency departments to ambulances. Sacramento area hospitals are no exception. Economic and staffing challenges have interrupted the ability of most urban hospitals to efficiently move emergency patients to inpatient beds, thus creating a gridlock in the emergency department and increasing the incidence of hospitals closing their doors to all but the most critically ill and injured. To address this problem locally, the Hospital Council of Northern & Central California has reached out to the local emergency medical services community to identify opportunities to improve health care services. One opportunity identified is to improve communications between health care providers, by creating a "Regional Health Care Information Network." The "Network" would enable each participant to view the real-time status of each hospital, specific to the types and numbers of treatment beds available.

In recognition of the commitment of the four local hospital systems to resolve the emergency department closure problem, the Department of Health and Human Services requests your Board's authorization to donate up to a maximum of \$80,000 of categorical Emergency Medical Services Program money to the Hospital Council of Northern & Central California, to partially offset their direct costs of establishing a Regional Health Care Information Network.

Recommendation

Adopt the attached resolution authorizing the Director of the Department of Health and Human Services, or his designee, to contribute up to a maximum of \$80,000 to the Hospital Council of Northern & Central California for the purpose of establishing a Regional Health Care Information Network.

Fiscal Impact

The proposed contribution will be funded from unexpended prior year revenues set aside for Emergency Medical Services System Enhancements. Currently, the fund amounts to \$260,000 and can only be used for Emergency Medical Services Program purposes. There is no impact to the County General Fund.

BACKGROUND:

For over a decade, local hospitals have accepted the responsibility for managing their closure of emergency departments, and coordinating the availability of those resources with 9-1-1 paramedics service providers. This unique hospital relationship with 9-1-1 providers is the result of your Emergency Medical Services Program's long-standing position that – in spite of having the 'legal authority' to override any hospital diversion of ambulances – emergency department closures are a 'hospital resource challenge' that is most appropriately, and effectively, managed by hospital administrators. While your Emergency Medical Services Program and local 9-1-1 providers work closely with local hospitals daily to develop solutions to matters of mutual concern – the hospital must ultimately 'own' that choice to close their emergency department due to the gravity, and potential medical-legal impact, of that decision.

Interlaced with this unique local approach to hospital resource management is our long-standing designation of the University of California Davis Medical Center (UCDMC) as the County's Operational Area Disaster Control Facility. In that capacity, one of the University's functions is to be the 'clearinghouse' for disseminating the bed availability status of all local, and some regional, hospitals to local 9-1-1 paramedic service providers. This function is accomplished by polling each hospital several times each day by radio – one-by-one – to get the latest count of open emergency department, coronary care, pediatric, and other critical care beds. This information is then used by UCDMC to direct 9-1-1 patients to the most appropriate, and available hospital during times of peak emergency department demand. In order to measure individual hospital and system closure performance, as well as retrospectively identify opportunities for improving future performance, hospitals report their dates, times and reasons for closure to the Hospital Council of Northern & Central California. They in-turn issue a regional closure report to all interested parties, about two to three weeks following the close of the month being reported.

DISCUSSION:

The above-outlined hospital activity is an invaluable service to the community. It has assisted our hospitals in providing their most effective use of 'managed' healthcare resources during ever-increasing times of heavy demand. Technology is now offering an opportunity for hospitals to provide this same information to the community with more speed, accessibility, accuracy and depth of analysis - for a fraction of the current, system-wide cost.

An Ad Hoc, community-based Technology Committee was appointed by the Hospital Council to evaluate computer-based information networks, which might contribute towards the efficient management of local hospital resources. After months of meetings and due diligence coordinated by management personnel, the Committee recommended a widely-utilized and proven internet-based information system, which also happened to be the most cost-effective of the systems proposed. Our Emergency Medical Services Program has chosen to refer to the system as the "Regional Health Care Information Network."

Sacramento County will partner with the Hospital Council by sharing in the initial expense of establishing the "Network." Under this partnership, the County will purchase the 1st year licensing agreement and the initial hardware necessary for installation. The hospitals will provide all subsequent year license fees and the staffing required to operate and maintain the network.

This network is an appropriate use of existing County categorical revenues available for the enhancement of the local emergency medical services system. This concept expanded to include hospitals, emergency medical services agencies and 9-1-1 dispatch centers in adjacent counties, as Sacramento County hospitals are a routine source of support and services for many communities in Northern California. Our proposed contribution will be small in comparison to the historical and ongoing cost incurred by local hospitals to provide these life-saving services.

FINANCIAL ANALYSIS:

The Department of Health and Human Services Emergency Medical Services Program has been self-sufficient since 1990. Funding sources include the Maddy Emergency Medical Services Fund, the Emergency Medical Services Appropriations Fund, the Trauma Care Fund, Assembly Bill 75 Tobacco Tax Revenues, Trauma Center Designation Fees, Medical Oversight Fees and a variety of minor fees for services rendered. With the exception of the latter "minor fees for services rendered," all funding sources identify exactly, by statute or contractual agreement, how the revenues must be distributed. Monies not expended in any given year are returned to the revenue source, or rolled over as a contingency against unforeseen future expenses or emergency medical services program or system improvements. Over the past six years, the County Emergency Medical Services Program has accumulated \$260,000 for contingencies and program/system improvements. The proposed contribution of a maximum of \$80,000 to the Hospital Council of Northern & Central California would be expended from that source of funds. There is no impact to the County's General Fund.

Respectfully submitted,

APPROVED:

JAMES W. HUNT, Director
Department of Health and Human Services

TERRY SCHUTTEN
County Executive

By: _____
PENELOPE CLARKE, Administrator
Public Protection Agency

Attachments

RESOLUTION NUMBER 2002-0906

BE IT RESOLVED AND ORDERED that the Director of the Department of Health and Human Services, or his designee, be hereby authorized and directed to contribute funding up to, but not to exceed, \$80,000 to the Hospital Council of Northern & Central California to partially offset the direct costs of establishing a Regional Health Care Information Network, as identified appropriate by the Director of the Sacramento-Sierra Section of the Hospital Council of Northern & Central California, on behalf of the COUNTY OF SACRAMENTO, a political subdivision of the State of California, for the term beginning on the date first signed and ending on June 30, 2003, and to do everything necessary to carry out the purpose of this Resolution.

On a motion by Supervisor Johnson, seconded by Supervisor Dickinson, the foregoing Resolution was passed and adopted by the Board of Supervisors of the County of Sacramento, State of California, the 23rd day of July, 2002, by the following vote, to wit:

AYES: Supervisors: Dickinson, Johnson, Niello, Nottoli

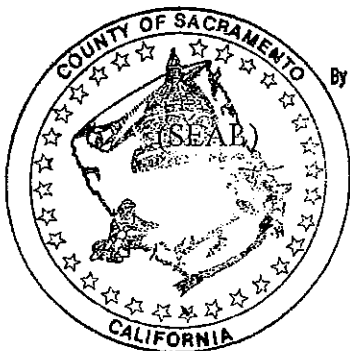
NOES: Supervisors: None

ABSENT: Supervisors Collin

In accordance with Section 25103 of the Government Code of the State of California a copy of the document has been delivered to the Chairman of the Board of Supervisors, County of Sacramento on **JUL 23 2002**

Don Nottoli

Chair of the Board of Supervisors of Sacramento County, California



By *Kay Johnson*
Deputy Clerk, Board of Supervisors

FILED

JUL 23 2002

BOARD OF SUPERVISORS
By *Cindy H. Turner*
CLERK OF THE BOARD

ATTEST: *Cindy H. Turner*
Clerk of the Board of Supervisors