



San Bernardino County

Legislation Text

File #: 3240, Agenda Item #: 95

**REPORT/RECOMMENDATION TO THE BOARD OF SUPERVISORS
OF THE COUNTY OF SAN BERNARDINO
AND RECORD OF ACTION**

**REPORT/RECOMMENDATION TO THE BOARD OF DIRECTORS
OF THE INLAND COUNTIES EMERGENCY MEDICAL AGENCY
AND RECORD OF ACTION**

November 17, 2020

FROM

**THOMAS G. LYNCH, EMS Administrator, Inland Counties Emergency Medical Agency
WILLIAM L. GILBERT, Director, Arrowhead Regional Medical Center**

SUBJECT

Amendment to Memorandum of Understanding for Primary Stroke Receiving Center Designation

RECOMMENDATION(S)

1. Acting as the governing body of the County of San Bernardino, approve Amendment No. 1 to the Memorandum of Understanding between Arrowhead Regional Medical Center and Inland Counties Emergency Medical Agency for designation as a Comprehensive Stroke Receiving Center, without any changes to the contract amount or term of the Memorandum of Understanding.
2. Acting as the governing body of the Inland Counties Emergency Medical Agency, approve Amendment No. 1 to the revenue Memorandum of Understanding, between Arrowhead Regional Medical Center and Inland Counties Emergency Medical Agency for designation as a Comprehensive Stroke Receiving Center, without any changes to the contract amount or term of the Memorandum of Understanding.

(Presenter: Thomas G. Lynch, EMS Administrator, 388-5830)

COUNTY AND CHIEF EXECUTIVE OFFICER GOALS & OBJECTIVES

Provide for the Safety, Health and Social Service Needs of County Residents.

FINANCIAL IMPACT

Approval of this item will not result in any changes to the contract amount and will not require the use of any Discretionary General Funding (Net County Cost). Arrowhead Regional Medical Center (ARMC) expenditures in the amount of \$19,045 annually under the Memorandum of Understanding are funded by reimbursements from Medi-Cal, Medicare, private insurances, and other departmental revenue. Sufficient appropriation and revenue has been included in the Inland Counties Emergency Medical Agency (ICEMA) and ARMC 2020-21 budgets and will be included in future recommended budgets.

BACKGROUND INFORMATION

ICEMA, as the local Emergency Medical Services (EMS) agency, is responsible for ensuring effective EMS for the Counties of San Bernardino, Inyo, and Mono. ICEMA administers State and local codes and regulations

governing the provision of emergency medical care to the sick and injured at the scene of an emergency and during transport to a care hospital. ICEMA ensures an effective system of quality patient care and coordinated emergency medical response by planning, implementing and evaluating an effective emergency medical services system including pre-hospital providers, specialty care hospitals and hospitals.

On July 1, 2019, the State of California's Stroke Critical Care System Regulations became effective. To align current Stroke Receiving Center Designation standards with State regulations, ICEMA updated its stroke designation policy to reflect language from the California Code of Regulations, Title 22, Division 9, Chapter 7.2, Stroke Critical Care System. Neurovascular Stroke System will now be referred to as a Stroke Critical Care System. Neurovascular Stroke Receiving Centers will now be referred to as a Stroke Receiving Centers. ICEMA will recognize Stroke Receiving Centers as Acute Stroke Ready Hospitals, Primary, Thrombectomy-Capable, or Comprehensive Stroke Receiving Centers, and will require this language changed in the new contracts/MOU.

The goal of designating Primary, Thrombectomy-Capable and Comprehensive Stroke Centers is to identify medical facilities that have an organized approach to treatment of stroke patients with qualified staff and appropriate capabilities. EMS field personnel, who are specially trained to identify stroke victims in the pre-hospital arena, can rapidly transport stroke patients directly to designated centers for timely treatment. Similar to trauma patients, the data demonstrates that the survival from a stroke is largely dependent upon prompt recognition and transport to facilities demonstrating the ability and commitment to provide rapid care with the proper resources. Current treatment guidelines from the American Stroke Association recommend rapid identification of stroke patients and transport to specialized medical facilities that have an organized approach to the management of stroke patients.

On June 23, 2020 (Item No. 118), the ICEMA Board of Directors (Board) approved an MOU No. 20-257 between ICEMA and ARMC for designation as a Primary Stroke Receiving Center. Since that time, ARMC has upgraded to a Comprehensive Stroke Receiving Center and ICEMA has found that ARMC meets ICEMA's Comprehensive Stroke Receiving designation standards.

Approval of this item will change ARMC's designation from a Primary Stroke Receiving Center to a Comprehensive Stroke Receiving Center, and will continue to allow ARMC to receive and provide care for stroke patients, as well as allow ICEMA to administer, monitor, evaluate, and provide continuous quality improvement programs of the implemented Stroke Care System.

PROCUREMENT

Not applicable.

REVIEW BY OTHERS

This item has been reviewed by County Counsel (John Tubbs II, Deputy County Counsel, 387-3203; Charles Phan, Deputy County Counsel, 387-5455) on October 28, 2020; Finance (Carl Lofton, Administrative Analyst, 387-5404 and Yael Verduzco, Administrative Analyst, 387-5285) on October 30, 2020; and County Finance and Administration (Matthew Erickson, County Chief Financial Officer, 387-5423) on November 2, 2020.