

Fire Commission Report – December 2024 EMS Division

January 8, 2024

Assistant Deputy Chief Tony Molloy



Operations

We continue to see the increased call volume over Q4 and into the month of December.

Key Performance							
Indicators	June	July	Aug	Sept	Oct	Nov	Dec
Total Monthly Amb.							
Dispatches [source: SFFD Call Summary by Day]	10,740	10,703	10,008	11,002	11,986	11,257	11,806
Avg Daily Runs [source: SFFD Call Summary by Day]	358	345	334	367	386	375	381
Avg Length of Transport							
(min) [source: SFFD Call Summary by Day]	91	94	93	92	93	91	93
90th percentile APOT (min) [source: ESO]	33.3	35.34	35.33	31.41	34.17	31.44	36:01
SFFD Market Share [source: SFFD EMS Response Measures Dashboard]	77%	74%	76%	79%	79%	76%	78%
Narcan Use							
(administrations) [source: ESO]	202	202	188	171	190	169	209

Cardiac Arrest Data

Over the past two months, the positive notes from our case-by-case analysis of cardiac arrest data shows that our crews' performance with patients who present in either a shockable rhythm or have bystander CPR or both have better outcomes. We still need to learn the final dispositions from the hospitals, but this demonstrates that our crews are consistently providing quality advanced cardiac care. December's drop in survival rate at the emergency department is not clear at this time and we are investigating further.

Month	Total	Resus Attempted	Witnessed	Shockable Rhythm	Bystander CPR/AED	ROSC at ED	% survival at ED
June	137	42	23	6	10	10	26%
July	121	31	28	9	14	11	35%
August	125	36	21	9	11	12	33.33%
September	101	23	15	5	9	8	34.78%
October	126	36	24	4	13	11	31%
November	132	40	24	9	7	13	32.5%
December	116	32	20	3	10	4	12.5%

Notable EMS Activity

Celebrating our Members We had two notable events this last month, celebrating our newest members and those who have advanced from EMT to paramedic.



H3-L1 Class 26 and H3-L2 Class 12 On December 13 we graduated of our most recent classes of 17 EMTs and two paramedics. The Graduation was held at the South East Community Center and was standing room only. Our new paramedics completed their training in November and were already working in the field for the past several weeks.

Paramedic Badge Pinning for Recent EMS Advancement Academy Classes On December 2, those who recently completed their advancement from EMT to paramedic to come to headquarters with their family and friends to officially receive their badge from Chief of Department Sandy Tong.





Station 49 / EMS Division and Community Paramedicine Holiday Events EMS and CP held their holidays together again this year with a handful of events, from our holiday party to Santa Breakfast to our Thanksgiving and Christmas day dinners for the crews. Our Santa Breakfast at 49 was a huge success.

Holiday Celebration and Service Our EMS and CP chiefs, along with other members of the Command Staff, carving Thanksgiving Turkeys at Salvation Army and serving the community at St. Anthony's





Notable Calls - November

60 y/o male found on fence, post had penetrated his thigh while he was climbing over

On November 12, 2024, units E11, T11, M567, RC3, B06, and RS1 responded to an emergency involving a 60-year-old male who sustained a penetrating injury to his thigh while climbing over a fence. The incident required specialized intervention, as the victim was impaled on a fence post. The Rescue Squad utilized a saw to safely remove the post from the fence, enabling the patient to be transported for further medical care. The coordinated efforts of the responding units ensured the patient was stabilized and extricated efficiently, highlighting effective teamwork and resource utilization during a complex rescue operation.

57 y/o male, short of breath with chest pain, missed recent dialysis

On November 15, 2024, units E05 and M511 responded to a 57-year-old male experiencing shortness of breath and chest pain. The patient reported missing a recent dialysis session, and a 12-lead EKG revealed peaked T waves, indicative of hyperkalemia. Field treatment included albuterol, calcium chloride, sodium bicarbonate, and fentanyl for symptom management and fentanyl for pain relief. The patient was stabilized and transported for further evaluation and treatment. The timely recognition of critical symptoms and appropriate interventions demonstrated the effectiveness of the prehospital care provided.

61 y/o male, arrest with ROSC, speaking with crews upon arrival at hospital

On November 21, 2024, units E10, M516, and RC2 responded to a 61-year-old male in cardiac arrest. Following advanced life support interventions, the patient achieved a return of spontaneous circulation (ROSC) en route to the hospital. By the time of arrival at hospital, the patient was verbal and responsive. This outcome highlights the critical role of rapid response, effective resuscitation efforts, and skilled prehospital care in improving survival and recovery rates in cardiac emergencies.

Notable Calls - December

26 y/o female, post-partum with seizure, appropriate use of atypical anticonvulsant

On December 9, 2024, units E15 and M554 responded to a 26-year-old postpartum female experiencing a tonic-clonic seizure. Initial administration of Versed elicited no response, prompting the administration of 6 grams of magnesium. This intervention resulted in a positive outcome, with the patient stabilizing during transport. The case highlights the importance of recognizing and addressing potential postpartum complications such as eclampsia, as well as the effective application of advanced pharmacological treatments in prehospital care.

11-month-old female with trouble breathing, proper respiratory distress management

On December 9, 2024, units E10, M516, and RC2 responded to an 11-month-old female in respiratory distress. The patient was transported hospital, where she tested positive for rhinovirus and was admitted to the Pediatric Intensive Care Unit (PICU). Initial treatment included 15L of high-flow nasal cannula (HFNC) at 30% FiO2. The patient remained in the PICU until December 12, 2024, when she was discharged home. The discharge diagnosis included viral bronchiolitis, acute respiratory failure, and febrile seizure. This case underscores the critical role of prompt prehospital intervention and specialized care in managing severe pediatric respiratory conditions.

First Field Delivery of 2025! Healthy baby boy!

On January 1, 2025, units E02 and M574 responded to a call involving imminent childbirth. At 00:38 hours, a healthy baby boy was delivered in the field, (First Field Delivery of 2025!) with both mother and newborn receiving immediate care. Following delivery, the mother and baby were transported together to hospital for continued medical evaluation and postnatal care. The successful field delivery showcased the proficiency of the responding personnel in managing high-stakes, time-sensitive situations.

Community Paramedicine Division Fire Commission Report

November 2024 Meet Operations Section Chief Daniel Nazzareta



Daniel Nazzareta was selected as the Operations Section Chief of the Community Paramedicine Division on November 21st. Chief Nazzareta was hired by SFFD as a paramedic in 2008. He has served in positions at Station 49, the Behavioral Health Unit and EMS6. Most recently, he did a tremendous amount of work to bring the Division into compliance with the curriculum requirements of AB1544 and the International Board of Specialty Care Certification, which is required to work as a Community Paramedic in California. He brings excellent clinical, organizational, and interpersonal skills to the position and will continue to be an asset to the Division in his new role. He is known affectionately among his colleagues as "Saint Nazzareta."

Program	Service Population	Launch Date	Full Implementation
EMS-6	Frequent 911 users	January 31, 2016	
Street Crisis	Community members	November 30, 2020	7 th team added May
Response Team	in behavioral crisis &		28, 2022 (EMD on
	requiring well-being checks		June 22, 2022)
			SWRT reconfigured
			March 4, 2023
Street Overdose	Overdose response	August 2, 2021	2 nd team added June
Response Team			27, 2022

Programs Overview and Timeline

Community Paramedicine Division Highlights

• Chief Mason Presentation at State Workgroup to Crisis Providers:

On November 13th, Chief Mason was invited to virtually present to the Crisis Care Mobile Units (CCMU) Learning Collaborative. The California Department of Health Care Services (DHCS) initiated the CCMU program to award grants to counties and incentivize sustainable mobile crisis programming. Chief Mason gave an overview of our Street Crisis Response Team and its role in our county as an EMS-centered mobile crisis response program.

• Article published by EMS1 with Chief Mason, Chief Nazzareta and Dr. Graterol as contributors.

EMS data to enhance equity: See where inequity occurs

Lessons from a learning community, Part I

To better understand inequities in prehospital care and explore how data can be leveraged to improve both process and outcomes, the San Francisco Fire Department partnered with researchers at San José State University to host an EMS Data Equity Summit in January 2024. This event was made possible through grant funding contributed by the CARESTAR Foundation, an organization that uses a racial equity lens to fund and advocate for improvements in prehospital care, and the National Science Foundation: Civic Innovation Challenge. Building on the momentum from the EMS Data Equity Summit, a year-long learning community was established. Each month, participants met virtually to discuss a topic related to health equity in EMS. This article is the first of a 3-part series seeking to see, understand, and address gaps in EMS data that hinder health equity in care delivery and outcomes.

EMS data to enhance equity: See where inequity occurs

• NAMI PANELIST:

ADC Sloan was a panelist for a presentation facilitated by NAMI SF (National Alliance on Mental Illness) The audience members are predominantly individuals who have family members with serious mental illness.

Other panelists included representatives from Dore Urgent Care, Citywide Intensive Case Management and PES. (Psychiatric Emergency Services). A discussion of the various crisis response mechanisms, how to access them and what to expect during the process was facilitated by NAMI members.



EMS-6

Operational period: 11/1/2024 – 11/30/2024 Total encounters: 278 Average encounters per day: 9.27 Utilization changes of top 20 utilizers engaged by EMS-6 from month before the operational period to current: -45.39%

Encounter Type*	Number
Consult	59
In Person Visit	161
Case Conference	10
Show of Support	0
Care Coordination	37
Interagency Support	0
Chart Review	11
Total	278

EMS-6 Successes & Challenges:

EMS6 re-engaged with a former client who began to utilize 911 frequently again. She was transported 10 times in a 12-day span. EMS6 organized a case conference with her providers and established real time care coordination updates with her care team. EMS6 provided collateral information to ED staff and completed a referral to Dore Urgent Care (DUCC) on the client's behalf. The client was accepted to DUCC and EMS6 provided patient advocacy, a warm hand off to the charge nurse and updated the care team. The client was transferred to an Acute Diversion Unit (ADU) the following morning.

SCRT

Operational period: 11/1/2024 – 11/30/2024 Total Calls for Service: 1,294 Average Response Time: 17.43 Average on Scene Time: 44.76

Disposition All Calls for Service

Non-ambulance transport to non-ED resource	306	23.65%
Ambulance transport to ED	223	17.23%
Remained in the community	509	39.34%
Unable to Locate & Walked Away	256	19.78%
Total	1294	100.00%

Disposition Engaged Individuals Only

Non-ambulance transport to non- ED resource	306	29.48%
Ambulance transport to ED	223	21.48%
Remained in community	509	49.04%
Total	1038	100.00%

5150

Grave disability	37
Danger to Self	14
Danger to Others	8
Total*	52

*As individuals may be placed on a hold for multiple reasons the total will not reflect the sum

Police Presence on Scene

		Percent of total calls for service (1236)
PD On Scene Prior to Arrival	8	0.62%
PD requested by SCRT	4	0.31%
SCRT requested by PD	354	27.36%
Total Incidents with PD present on scene	366	28.28%

SCRT Successes and Challenges

During the 2nd week of November, SCRT responded to 3 separate families seeking shelter. SCRT members and CP5 worked exhaustively and successfully, in each situation to secure placement for the families.

The Department of Homelessness and Supportive Housing has enacted recent changes in the family shelter system that are expected to increase capacity of emergency shelter availability for families.

Mayor Breed encountered an SCRT unit in the Castro and thanked the crew for their work. Community Paramedic Jason Freeland pictured below with Mayor Breed.



SORT

Operational period: 11/1/2024 – 11/30/2024 Calls for Service: 129 SFFD Suboxone Starts: 7

SUBOXONE ADMINSTRATION BY MONTH AND PROVIDER

P	rovider	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	YTD (2024)	YTD % (2024)	Grand Total*	% of Grand Total
A	MR	0	0	0	0	0	0	0	0	0	0	0	0%	4	3%
K	ing American	0	2	0	0	0	0	0	0	0	0	2	4%	7	5%
SI	FFD	4	11	10	9	6	3	9	6	6	7	71	97%	137	93%
1	SORT	3	2	3	1	0	0	2	1	1	1	14	20%	39	28%
1	SCRT (inc CP5)	0	0	0	1	0	0	1	2	0	2	6	8%	13	9%
	Medic Units / EMS	1	9	7	7	6	3	6	3	5	4	51	72%	85	<mark>62%</mark>
Т	otals	4	13	10	9	6	3	9	6	6	7	73	100%	148	100%

*Grand Total includes administrations since Suboxone pilot inception of April 1, 2023.

Disposition All Calls for Service

Non-ambulance transport to non-ED resource	9	9.18%
Ambulance transport to ED	16	16.33%
Remained in the community	63	64.29%
Unable to Locate & Walked Away	10	10.20%
Total	98	100.00%

Disposition Engaged Individuals Only

Non-ambulance transport to non-ED resource	9	10.23%
Ambulance transport to ED	16	18.18%
Remained in community	63	71.59%
Total	88	100.00%

SORT Successes:

After 3 hospital encounters, SORT facilitated the safe discharge of an overdose survivor to Soma Rise and outreached the individual the next day. The client was unsure about entering treatment. The client expressed interest in a specific shelter that is accessed via waitlist. SORT assisted the client in accessing the waitlist and the client returned to Soma Rise. The following morning SORT again engaged the individual, who continued to decline treatment options but accepted shelter placement and was transported by SORT to the shelter.

Community Paramedicine Division Fire Commission Report

December 2024

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Response Team	in behavioral crisis &		28, 2022 (EMD on
	requiring well-being checks		June 22, 2022)
			SWRT reconfigured
			March 4, 2023
Street Overdose	Overdose response	August 2, 2021	2 nd team added June
Response Team			27, 2022

Community Paramedicine Division Highlights

• Federal Interagency Committee on EMS General Meeting: On December 11th, Section Chief of CP Administration Michael Mason attended the December session of the Federal Interagency Committee on EMS (FICEMS). The meeting agenda included a presentation from a National EMS Information System (NEMSIS) representative, sharing goals for which our Department has voiced support. Chief Mason sits on the NEMSIS Standard Change Review Committee and will be working to support these initiatives.

Goals

- Prevent the duplication of data entry for:
 - Emergency Medical Services
 - Fire
 - Hospitals
 - Agencies
 - Payor Personnel
- Identify essential data elements of CP/MIH programs
 - Operational
 - Clinical
 - Administrative



- Coordinate regulators by providing them with key definitions and data elements to establish policy and procedures
- Align data collection efforts with Federal and Private Payors to avoid conflict and confusion while increasing the speed of reimbursement
- Transition service from traditional event/activation-based thinking to longitudinal data collection processes

(Slide excerpt from the 12/11/24 FICEMS meeting)

EMSAA/EMDAC Presentation: On 12/10, Chief Pang, Chief Molloy, Chief Sloan, Sgt. Laura Anderson and Dr. Eric Silverman were panelists at the quarterly Emergency Medical Services Administrators Association of California/Emergency Medical Services Medical Directors of California (EMSAA/EMDAC) at the invitation of EMSA Director Holcomb to discuss the implementation of SB43 over the last year. The SB43 Implementation Workgroup identified transportation to the hospital as a barrier for individuals on 5150's and under conservatorship. A Transportation Workgroup was formed. This workgroup consisted of members from SFPD, SFFD, EMSA, DPH, Public Conservator and City Attorneys who identified needed policy changes across agencies to facilitate transport of these individuals. EMSA released an emergency policy update in October, which will be formally finalized in April. SFPD and SFFD worked jointly on a "palm card" to facilitate communication on scene. Training between agencies will begin in early 2025.



EMS-6

Operational period: 12/1/2024 – 12/30/2024 Total encounters: 252 Average encounters per day: 8.4 Utilization changes of top 20 utilizers engaged by EMS-6 from month before the operational period to current: -71.43%

Encounter Type*	Number
Consult	36
In Person Visit	149
Case Conference	10
Show of Support	0
Care Coordination	50
Interagency Support	0
Chart Review	12
Total	252

EMS-6 Successes & Challenges:

The San Francisco Chronicle rode along with EMS6 on 12/18. They were able to observe the tremendous amount of coordination and advocacy needed for an individual who had failed at multiple placements in the community and generated 14 calls for service in the preceding 30 days. EMS6 coordinated with Street Medicine and SFGH to transport and facilitate admission of the individual.

The article has not been published pending the possibility of additional ride alongs.

SCRT

Operational period: 12/1/2024 – 12/31/2024 Total Calls for Service: 1,184 Average Response Time: 17.34 Average on Scene Time: 43.37

Disposition All Calls for Service

Non-ambulance transport to non-ED resource	238	20.10%
Ambulance transport to ED	196	16.55%
Remained in the community	521	44.00%
Unable to Locate & Walked Away	229	19.34%
Total	1184	100.00%

Disposition Engaged Individuals Only

Non-ambulance transport to non- ED resource	238	24.92%
Ambulance transport to ED	196	20.52%
Remained in community	521	54.55%
Total	955	100.00%

5150

Grave disability	17
Danger to Self	20
Danger to Others	7
Total*	40

*As individuals may be placed on a hold for multiple reasons the total will not reflect the sum

Police Presence on Scene

		Percent of total calls for service (1236)
PD On Scene Prior to Arrival	5	0.42%
PD requested by SCRT	5	0.42%

SCRT requested by PD	318	26.86%
Total Incidents with PD present on scene	328	24.7%

SCRT Successes

SCRT now has access to shelter beds on holidays. This has been a long-standing gap, causing frustration for our members and clients. Our partners at the Healthy Street Operations Center (HSOC) were willing to share their bed allocation and dispatcher with us so SCRT can access shelter placements during holidays.

SORT

Operational period 12/1/2024 – 12/31/2024 Calls for Service: 129 SFFD Suboxone Starts: 7

Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	YTD (2024)	YTD % (2024)	Grand Total*	% of Grand Total
0	0	0	0	0	0	0	0	0	0	0	0	0	0%	4	3%
0	2	0	0	0	0	0	0	0	0	0	0	2	2%	7	4%
4	11	10	9	6	3	9	6	6	7	3	5	79	98%	145	93%
3	2	3	1	0	0	2	1	1	1	0	0	14	18%	39	27%
0	0	0	1	0	0	1	2	0	2	2	2	10	13%	17	12%
1	9	7	7	6	3	6	3	5	4	1	3	55	70%	89	61%
4	13	10	9	6	3	9	6	6	7	3	5	81	100%	156	100%

*Grand Total includes administrations since Suboxone pilot inception of April 1, 2023.

Disposition All Calls for Service

Non-ambulance transport to non-ED resource	17	15.04%
Ambulance transport to ED	12	10.62%
Remained in the community	65	57.52%
Unable to Locate & Walked Away	19	16.81%
Total	113	100.00%

Disposition Engaged Individuals Only

Non-ambulance transport to non-ED	17	18.09%		
resource	17	18.09%		
Ambulance transport to ED	12	12.77%		
Remained in community	65	69.15%		
Total	94	100.00%		

SORT Successes:

SORT engaged with a multiple overdose survivor with polysubstance use at Soma Rise. The community paramedic recognized the individual was in withdrawal and initiated transport to ED. After being evaluated at ED, SORT transported the individual to SCOPE for safe recovery and further planning around entering treatment. The following day SORT transported the individual

to the pharmacy to pick up their buprenorphine prescription and then to HR360 for entry into residential treatment.