

Comments on the Kern ePCR Policy  
 Public Comment Period  
 August 20<sup>th</sup>, 2019 through September 4<sup>th</sup>, 2019  
 Send comments to [farissj@kerncounty.com](mailto:farissj@kerncounty.com)

SECTION # PAGE #	AGENCY	COMMENT	EMS RESPONSE
5 V. B last sentence	BFD	<p>All fire units are running multiple consecutive calls. If we are to comply with this standard. Delays in availability of resources will occur. Consider that a fire unit may run a medical aid, get as much of the ESO report done before completing assignment and then turn around and run a fire that takes 5 hours to complete. Or a cardiac arrest that occurs down the street. I will say that the medical response to the cardiac arrest or the fire will out weigh the completion of that report. ESO will not close out a report until all of the information is completed and that includes a narrative. Compliance with this standard will make it impossible to complete a comprehensive narrative as requested by the soap format. Example. My narratives are sometimes 2 pages long.(Vehicle accident with 5 patients with minor injuries, 3 AMA's and 2 transports. A Soap narrative for each patient plus a complete RMS report.) Some take an hour to complete properly with all comprehensive documentation in place. We will not put an engine out of service to complete a report that may take an extended amount of time. There are too many responses occurring to do everything you are asking. An ambulance can sit at the hospital in the hallway all day and complete their report. The fire department does not have that luxury. E6, E5, E7, E2, E1, E4 are routinely running 20 calls per day. 4-5 in a row sometimes without making it back to the station. Consider that a captain who is on duty at station 6 for 72 hours can easily write 60 reports. Remember that we write 2 reports RMS NFIRS and</p>	<p>On January 1<sup>st</sup>, 2017, Health and Safety Code 1797.227 and EMSA mandated that all entities that respond to and provide patient care complete a digital patient care report. Additionally, they mandated that all LEMSAs move to the most recent version of the NEMSIS data dictionary for the collection and submission of data into the CEMSIS and National databases. The purposes for these changes was to insure that all LEMSAs in the state submit the same data elements to the CEMSIS and National databases and that the submissions occur in real time. As a result, in the May 2017, ePCR updated policy the 15 hour submission time was removed. Until now there has been no language specific to first responders regarding the submission of ePCR data. It is understood that there may be times that crews are unable to complete the ePCR due to call volume, however it is expected that the completion of the ePCR is a priority and is submitted as soon as possible following the call.</p>



