



The Jacob Journal

A Newsletter from Supervisor Dianne Jacob

July 2000

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EMERGENCY CARE BEGINS AT HOME

People ought to have timely emergency medical care when they need it.

Residents of San Diego County are fortunate to have a world-class emergency medical services system to assure that ambulances and highly-skilled health professionals are there when you need them. And hospitals and emergency rooms of the highest caliber are available for everyone, regardless of income or insurance.

Every day, more than 2,500 San Diegans call 911 for medical help, ride in an ambulance, or are treated in an emergency room. Injuries are assessed, illnesses treated, and lives saved.

But all is not well. San Diego County's impressive safety net of emergency services is in jeopardy. The fine balance of supply and demand on which the emergency medical system operates is fragile, and is being tested like never before.

In the past few years, we have seen with increasing frequency the "saturation" in emergency rooms — where the volume of patients currently under treatment or waiting is so great that ambulances are diverted

to other less burdened facilities. Saturation and ambulance diversion happens throughout the county, especially during flu season, and during summer, when recreational injuries skyrocket.

The closure of Scripps East Hospital, which had treated about 2,000 persons monthly in its emergency room, will without a doubt add stress to the system. Where will the patients go?

Well, the good news is that Grossmont Hospital and neighboring hospitals stand ready to serve as needed. Ambulances will transport the most critically ill persons to the closest appropriate facility, even if it is saturated. The bad news is that Grossmont Hospital is already one of the busiest emergency facilities, and is often saturated. It is on bypass 30 percent of the time.

The expected result — the most severely ill and injured will be seen first, but there will be longer wait times for the less critically injured or ill. And due to the "domino effect," the pressure will be felt in ambulances and facilities throughout the county.

People must take care, so that they don't demand unnecessary emergency medical attention.

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Eighty percent of people who went to the emergency room at Scripps East Hospital actually did not require emergency medical care. Federal law required that they be treated nevertheless. A minor illness or injury can be treated perfectly well in a clinic or doctor's office. It is not always easy to get a same-day appointment to see one's doctor, but convenience and comfort have a lot to do with the destination of healthcare seeking behavior. Many persons mistakenly use the emergency room as their family doctor. They just never thought to choose one of their own. Also remarkable is that half of the people in emergency rooms are being treated for entirely preventable conditions: injuries out of carelessness to oneself or others; abuse of food, alcohol and drugs; failure to follow medical advice; and failure to get earlier attention for what had previously been a minor condition.

Given the high cost and limit on resources, which characterizes today's health care system, it appears we will have to continue to contend with the shrinking availability of emergency room time and space. But the behavior change this situation invites may not be a bad thing.

Emergency care begins at home. Making sure that you and your family have medical insurance and a doctor, before illness hits, is key. Preventive medical and dental care is genuinely worth a pound of cure. Call a nurse about illnesses, aches and pains, while they are still minor and if they don't yet feel like a major problem. The next call should be to your doctor or clinic.

Don't get me wrong. In every situation where serious illness, grave pain, or great injury has occurred, do not hesitate to call 911, or go to the closest hospital emergency room. But we each have to do our part to relieve the local emergency system from being the family doctor to so many. This is the best way to preserve this essential resource – to make sure that emergency care is available and timely when you, or your loved one, truly need it.

To help get the word out that emergency rooms should not be used for non-emergencies, last month, the Board of Supervisors approved my proposal to create a public education campaign aimed at increasing awareness of proper ER use.

This proposal directed the Chief Administrative Officer to work with local hospitals, healthplans, community clinics, urgent care facilities, physicians and Fire District representatives to develop a plan for a public education campaign to decrease hospital emergency room use for non-emergencies. Also included was a direction to pursue external funding sources for the campaign and work with local community clinics and urgent care facilities to compile a list of health plans that each facility will accept and include this information in the Public Education plan.

One month ago, Scripps East County closed, bringing this issue to the forefront. Approximately 24,000 people used the emergency room at that hospital however, it is estimated that about 19,000 of those could have used a community health clinic, primary care doctor or urgent care.

Supporters of the proposal that were present at the Board of Supervisors meeting included Gary Stephany, President and CEO of the Healthcare Association and Michelle Tarbet, CEO of Sharp Grossmont Hospital. According to Tarbet, Grossmont Hospital spent over \$3 million dollars last

EMERGENCY CARE BEGINS AT HOME

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year on non-emergency care that came into their emergency room.

By creating an effective public education campaign, everyone in this region will benefit from the results. Residents will get more appropriate care without waiting in long lines. Our emergency rooms will be better able to care for the true emergencies that enter their doors. And, precious healthcare dollars will be saved by less use of expensive emergency room visits.

Details of the plan will be presented to the Board of Supervisors in 90 days.

JACOB'S PROPOSAL BRINGS REGION CLOSER TO REGIONAL TRAIL SYSTEM

On June 21, 2000, the San Diego County Board of Supervisors unanimously adopted a Trail Defense and Indemnification Ordinance, initiated by Chairwoman Dianne Jacob earlier this year.

As a result of this action, San Diego County will assume all legal responsibility for any injury occurring on trails that have been voluntarily dedicated by a private property owner for the purpose of public recreational use.

"This action marks the beginning of a working relationship between the County, trail enthusiasts and private property owners and will be instrumental in furthering the goal of creating a county-wide trail system for all to enjoy," said Jacob.

Jacob brought the proposal to the Board of Supervisors after private property owners expressed an interest in granting public trail easements but had concerns about the legal implications of such a decision. The primary concerns expressed were lawsuits and associated legal costs resulting from damages, injuries, or accidents.

"There is a direct public benefit in providing both legal protection for private property owners and public access for recreation trail enthusiasts," said Jacob. "Indemnification is the key to developing a successful regional trail system that will benefit trail users, property owners and our citizens. Because of this action, San Diego County now has it," she added.

Join me for Coffee and Conversation...

Thursday, July 27, 2000, 8:30 to 10:30 a.m.

Howard's Bakery
1097 Broadway, El Cajon

Thursday, August 3, 2000, 8:30 to 10:30 a.m.

Kountry Kitchen
826 Main Street, Ramona

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We hope to hear from you soon!

July/00

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