

**Monterey County**  
**Emergency Medical Services Agency**

**EMERGENCY MEDICAL  
SERVICES (EMS) PLAN**

**August 2006 (Original)**  
**(Revised EMS Plan for 2010 - May 2011)**



**TABLE 2: SYSTEM RESOURCES AND OPERATIONS**  
**System Organization and Management**

Note: The California EMS System Standards and Guidelines have placed TABLE 1 (SUMMARY OF SYSTEM STATUS) in Section 2 of this Plan, above.

EMS System: Monterey County

Reporting Year: Fiscal Year 2010-2011

1. Percentage of population served by each level of care: **100% Advanced Life Support**
2. Type of agency: **Public Health Department**
3. The person responsible for day-to-day activities of EMS agency reports to:  
**Other – Director of Health (Ray Bullick)**
4. Indicate the non-required functions that are performed by the agency:

Implementation of exclusive operating areas (ambulance franchising)	<b>Yes</b>
Designation of trauma centers/trauma care system planning	<b>No</b>
Designation/approval of pediatric facilities	<b>N/A</b>
Designation of other critical care centers	<b>N/A</b>
Development of transfer agreements	<b>Yes</b>
Enforcement of local ambulance ordinance	<b>Yes</b>
Enforcement of ambulance service contracts	<b>Yes</b>
Operation of ambulance service (Contracted)	<b>Yes</b>
Continuing education	<b>Yes</b>
Personnel training	<b>Yes</b>
Operation of EMS dispatch center (Contracted)	<b>Yes</b>
Non-medical disaster planning	<b>Yes</b>
Administration of critical incident stress debriefing (CISD) team	<b>Yes</b>

Administration of disaster medical assistance team (DMAT) N/A

Administration of EMS Fund (Senate Bill 12/612) – Maddy Yes

Other: \_\_\_\_\_

5. EMS agency budget for Fiscal Year 2010-2011

A. EXPENSES

Salaries and benefits  
(all but contract personnel) 607,445

Contract Services  
(e.g., medical director) 80,000

Operations (e.g., copying, postage,  
facilities) 274,500

Travel 8,000

Fixed assets -

Indirect expenses (overhead) 28,853

Ambulance subsidy 100,000

EMS Fund payments to physicians/hospitals -

First-Responder Equipment 80,000

Training program operations 261,161

Critical Incident Stress Debriefing -

Special projects -

Other: -

**TOTAL EXPENSES 1,447,959**

B. SOURCES OF REVENUE

Special project grant(s) from EMSA 0

Preventive Health and Health Services Block Grant 0

Office of Traffic Safety	0
State general fund	0
County general fund	0
Other local tax funds (e.g., EMS district)	<b>1,298,049</b>
County contracts (e.g., multi-county agencies)	0
Certification fees	0
Training program approval fees	0
Training program tuition/average daily attendance funds/ Job Training Partnership Act funds/other payments	0
Base hospital application fees	0
Base hospital designation fees	0
Trauma center application fees	0
Trauma center designation fees	0
Pediatric facility approval fees	0
Pediatric facility designation fees	0
Other critical care center application fees	0
Type: _____	
Other critical care center designation fees	0
Type: _____	
Ambulance service/vehicle fees	0
Contributions	0
EMS Fund (SB 12/612)	<b>148,410</b>
Other grants	0

Other fees	0
Other: misc	1,500
Other: state reimbursements	0
<b>TOTAL REVENUE</b>	<b>1,447,959</b>

*TOTAL REVENUE SHOULD EQUAL TOTAL EXPENSES. IF THEY DON'T, PLEASE EXPLAIN BELOW.*

6. Fee structure for Fiscal Year 2010-2011

First responder certification	0
EMS dispatcher certification	0
EMT-I certification	0
EMT-I recertification	0
EMT-defibrillation certification	0
EMT-defibrillation recertification	0
EMT-II certification	0
EMT-II recertification	0
EMT-P accreditation	0
EMT-I training program approval	0
EMT-II training program approval	0
EMT-P training program approval	0
Mobile Intensive Care Nurse/Authorized Registered Nurse training program approval	0
Base hospital application	0
Base hospital designation	0
Trauma center application	0
Trauma center designation	0

Pediatric facility approval	0
Pediatric facility designation	0
Other critical care center application	0
type: _____	
Other critical care center designation	0
type: _____	
Ambulance service license	0
Ambulance vehicle permits	<b>950/vehicle/year</b>
Other: _____	
Other: _____	

EMS System: Monterey County

Reporting Year: Fiscal Year 2010-2011

CATEGORY	ACTUAL TITLE	FTE POSITIONS	TOP SALARY BY HOURLY EQUIVALENT	BENEFITS (% OF SALARY)
EMS Admin./ Coord./Dir.	<b>EMS Director</b>	<b>1.0</b>	<b>60.68</b>	<b>31.13%</b>
Asst. Admin./ Admin. Asst./ Admin. Mgr.	<b>EMS Analyst</b> <b>Finance Manager</b> <b>Management Analyst – III</b>	<b>2.0</b> <b>0.4</b> <b>1.0</b>	<b>35.87</b> <b>44.79</b> <b>42.62</b>	<b>31.13%</b> <b>31.13%</b> <b>31.13%</b>
ALS Coord./ Field Coord./ Trng. Coord.				
Program Coord./ Field Liaison	<b>EMS Instructor</b>	<b>1.0</b>	<b>30.56</b>	<b>N/A</b>
Trauma Coord.				
Med. Director	<b>Medical Director</b>	<b>0.2</b>	<b>155.00</b>	<b>Contracted</b>
Other MD/ Med. Consult./ Trng. Med. Dir.				
Disaster Med Planner				
Dispatch Supervisor				
Medical Planner				
Data Evaluator/ Analyst				
QA/QI Coordinator				
Public Info. & Ed. Coord.				
Ex. Secretary	<b>Secretary</b>	<b>1.0</b>	<b>21.33</b>	<b>31.13%</b>
Other Clerical				
Data Entry Clerk				
Other				

**TABLE 3: SYSTEM RESOURCES AND OPERATIONS  
Personnel/Training**

EMS System: Monterey County

Reporting Year: Calendar 2010 (Jan-Dec)

	EMT-Is	EMT-IIs Note 3	EMT-Ps	Note 2	EMS Dispatchers
Total certified	638	N/A	N/A		11
Total accredited	N/A	N/A	165		N/A
Number of newly certified this year	192	N/A	N/A		1
Number of recertified this year	138	N/A	N/A		0
Number of certificate reviews resulting in:	Note 1	N/A	N/A		N/A
(a) formal investigations	24				
(b) probation	22				
(c) suspensions	0				
(d) revocations	1				
(e) denials	1				
(f) denials of renewal	0				
(g) no action taken	9				

Note 1: EMT-1LiveScan Background Investigations required after 7/1/08; EMT2010 effective 7/1/10

Note 2: MICN Program has been terminated; base hospital coordinator remains.

Note 3: Monterey County does not have an EMT-II (Advanced EMT) Program.

1. Number of EMS dispatchers trained to EMSA standards: **11**
2. Early defibrillation:
  - a. Number of EMT-I (defib) certified: **371**
  - b. Number of public safety (defib) certified (non-EMT-I): **201**
3. Do you have a first-responder training program? **Yes**

**TABLE 5: SYSTEM RESOURCES AND OPERATIONS  
Response/Transportation**

EMS System: Monterey County

County: Monterey

Reporting Year: 2010

**TRANSPORTING AGENCIES**

1.	Number of exclusive operating areas:	3
2.	Percentage of population covered by Exclusive Operating Areas (EOA):	100%
3.	Total number responses	27655
	a. Number of emergency responses (AMR & CRFA)	25107
	b. Number of non-emergency responses	2548
4.	Total number of transports (AMR & CRFA)	20481
	a. Number of emergency transports	17972
	b. Number of non-emergency transports	2509

**Early Defibrillation Programs**

5.	Number of public safety defibrillation programs	43
	a. Automated	43
	b. Manual	0
6.	Number of EMT-Defibrillation programs	N/A
	a. Automated	N/A
	b. Manual	N/A

**Air Ambulance Services (Calendar Year 2010)**

7.	Total number of responses	<b>598</b>
	a. Number of emergency responses	<b>498</b>
	b. Number of non-emergency responses	<b>100</b>
8.	Total number of transports	<b>416</b>
	a. Number of emergency (scene) responses	<b>316</b>
	b. Number of non-emergency responses	<b>100</b>

**SYSTEM STANDARD RESPONSE TIMES\* (90TH PERCENTILE)**

	METRO/ URBAN	SUBURBAN/ RURAL	WILDERNESS	SYSTEM WIDE
1. BLS and CPR capable first responder.	N/A	N/A	N/A	N/A
2. Early defibrillation capable responder.	N/A	N/A	N/A	N/A
3. Advanced life capable responder.	<b>8 minutes</b>	<b>12 minutes</b>	N/A	N/A
4. EMS transport unit.	<b>8 minutes</b>	<b>12 minutes</b>	<b>ASAP</b>	N/A

**TABLE 8: RESOURCES DIRECTORY  
Approved Training Programs**

EMS System: Monterey County

County: Monterey

Reporting Year: 2010

Training Institution Name/Address: **Monterey Peninsula College  
980 Fremont Street  
Monterey, CA 93940**

Contact Person telephone no.: **EMS (831) 646-4034**

Student Eligibility: **Open**

Cost of Program (basic/refresher): **Basic \$252 + no fee for book  
Refresher \$0**

Program Level: **EMT-I**

Number of students completing training per year:

initial training: **145**

refresher: **None**

cont. education: **None**

expiration date: **Continuous**

Number of courses:

initial training: **4**

refresher: **None**

cont. education: **None**

Training Institution Name/Address:	<b>Hartnell College 156 Homestead Avenue Salinas, CA 93901</b>
Contact Person telephone no.:	<b>Nursing Department (831) 770-6145</b>
Student Eligibility:	<b>Open</b>
Cost of Program (basic/refresher):	<b>Basic \$195 + books Refresher \$30 + book</b>
Program Level:	<b>EMT-I</b>
Number of students completing training per year:	
initial training:	<b>0</b>
refresher:	<b>7</b>
cont. education:	<b>None</b>
expiration date:	<b>Continuous</b>
Number of courses:	
initial training:	<b>0</b>
refresher:	<b>1</b>
cont. education:	<b>None</b>

Training Institution Name/Address:	<b>Monterey Peninsula Unified School District - ROP 222 Casa Verde Monterey, CA 93940</b>
Contact Person telephone no.:	<b>(831) 373-4600</b>
Student Eligibility:	<b>Open</b>
Cost of Program (basic/refreshers):	<b>Basic \$70 + books Refresher \$0</b>
Program Level:	<b>EMT-I</b>
Number of students completing training per year:	
initial training:	<b>20</b>
refresher:	<b>None</b>
cont. education:	<b>None</b>
expiration date:	<b>Continuous</b>
Number of courses:	
initial training:	<b>1</b>
refresher:	<b>1 as part of the initial course</b>
cont. education:	<b>None</b>

# MONTEREY COUNTY EMS PLAN

## SECTION 4 AMBULANNCE ZONE SUMMARY

<b>Local EMS Agency or County Name:</b> Monterey County EMS Agency
<b>Area or Subarea (Zone) Name or Title:</b> #1 Monterey County Exclusive Operating Area
<b>Name of Current Provider(s):</b> AMR-West
<b>Area or Subarea (Zone) Geographic Description:</b> The geographic and legal boundaries of Monterey County
<b>Statement of Exclusivity (Exclusive or Non-Exclusive [HS 1797.6]):</b> Exclusive via competitive process with Board approval
<b>Type of Exclusivity ("Emergency Ambulance," "ALS," or "LALS" [HS 1797.85]):</b> ALS Emergency Ambulance
<b>Method to achieve exclusivity, if applicable (HS 1797.224):</b> Monterey County has established an Exclusive Operating Area (EOA) that encompasses the geographic area defined as Monterey County (border-to-border). Within the geographic limits of the County, certain federal property, the City of Carmel, and the Carmel Valley Fire Protection District (Carmel Regional Fire Ambulance) are exempted or carved from the EOA. The EOA provider is selected by competitive bid process. Last competitive bid was completed in 2009; implemented January 31, 2010.

**AMBULANCE ZONE SUMMARY FORM**

<b>Local EMS Agency or County Name:</b> Monterey County EMS Agency
<b>Area or Subarea (Zone) Name or Title:</b> #2 Carmel by the Sea
<b>Name of Current Provider(s):</b> Carmel Regional Fire Ambulance Include company name(s) and length of operation (uninterrupted) in specified area or subarea.
<b>Area or Subarea (Zone) Geographic Description:</b> City of Carmel by the Sea
<b>Statement of Exclusivity (Exclusive or Non-Exclusive [HS 1797.6]):</b> Include intent of local EMS agency and board action. Non-exclusive
<b>Type of Exclusivity ("Emergency Ambulance," "ALS," or "LALS" [HS 1797.85]):</b> Include type of exclusivity (Emergency Ambulance, ALS, LALS, or combination) and operational definition of exclusivity (e.g., 911 calls only, all emergencies, all calls requiring emergency ambulance service, etc.). ALS Emergency Ambulance
<b>Method to achieve exclusivity, if applicable (HS 1797.224):</b> If <u>grandfathered</u> , pertinent facts concerning changes in scope and manner of service. Description of current provider including brief statement of uninterrupted service with no changes to scope and manner of service to zone. Include chronology of all services entering or leaving zone, name or ownership changes, service level changes, zone area modifications, or other changes to arrangements for service.  If <u>competitively-determined</u> , method of competition, intervals, and selection process. Attach copy/draft of last competitive process used to select provider or providers.  N/A

## AMBULANCE ZONE SUMMARY FORM

<b>Local EMS Agency or County Name:</b> Monterey County EMS Agency
<b>Area or Subarea (Zone) Name or Title:</b> #3 Carmel Valley Fire Protection District
<b>Name of Current Provider(s):</b> Carmel Regional Fire Ambulance Include company name(s) and length of operation (uninterrupted) in specified area or subarea.
<b>Area or Subarea (Zone) Geographic Description:</b> East to San Clemente Dr., West to Rancho San Carlos Rd., to Santa Lucia Preserve, North to Valley Hills.
<b>Statement of Exclusivity (Exclusive or Non-Exclusive [HS 1797.6]):</b> Include intent of local EMS agency and board action. Non-exclusive
<b>Type of Exclusivity ("Emergency Ambulance," "ALS," or "LALS" [HS 1797.85]):</b> Include type of exclusivity (Emergency Ambulance, ALS, LALS, or combination) and operational definition of exclusivity (e.g., 911 calls only, all emergencies, all calls requiring emergency ambulance service, etc.). ALS Emergency Ambulance
<b>Method to achieve exclusivity, if applicable (HS 1797.224):</b> If <u>grandfathered</u> , pertinent facts concerning changes in scope and manner of service. Description of current provider including brief statement of uninterrupted service with no changes to scope and manner of service to zone. Include chronology of all services entering or leaving zone, name or ownership changes, service level changes, zone area modifications, or other changes to arrangements for service.  If <u>competitively-determined</u> , method of competition, intervals, and selection process. Attach copy/draft of last competitive process used to select provider or providers.  N/A

JUL 11 2011

**EMERGENCY MEDICAL SERVICES AUTHORITY**

10901 GOLD CENTER DRIVE, SUITE 400  
RANCHO CORDOVA, CA 95670  
(916) 322-4336 FAX (916) 324-2875



July 11, 2011

Kirk Schmitt, EMS Director  
Monterey County EMS Agency  
19065 Portolo Drive, Suite 1  
Salinas, CA 93908

Dear Mr. Schmitt:

We have completed our review of *Monterey County's 2009 and 2010 Emergency Medical Services Plan Updates*, and have found them to be in compliance with the *EMS System Standards and Guidelines* and the *EMS System Planning Guidelines*. Following are comments on your EMS plan update:

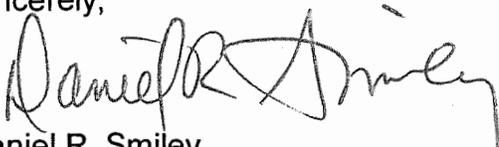
**Standards 1.27 and 5.10 - Pediatric Emergency Medical and Critical Care System and System Design** - While this is an enhanced level standard, your 2008 update objective was to evaluate the need for a pediatric emergency medical and critical care system plan for Monterey County. I recommend you review the "*Development and Implementation of EMSC, a Step by Step Approach*", found on our web site at <http://www.emsa.ca.gov/systems/files/EMS-C.pdf>. This document provides information to Local EMS Agencies interested in developing an EMSC program.

**Standard 8.10 - Mutual Aid Agreements** - In Monterey County's 2008 EMS plan update your objective was to engage in medical mutual aid planning with surrounding counties. Your current EMS plan update shows no progress in meeting this objective. Please show your progress towards meeting this standard in your next annual update.

**Standard 8.11 and 8.12 - Designation and Establishment of CCPs** - In your next EMS plan update please show the progress in identifying and incorporating CCPs into Monterey County.

Your next annual update will be due on July 11, 2012. Please submit Monterey County's Trauma System Status Report, as a separate document, with your EMS Plan Update. If you have any questions regarding the plan review, please contact Sandy Salaber at (916) 431-3688 or by email [ssalaber@emsa.ca.gov](mailto:ssalaber@emsa.ca.gov).

Sincerely,

  
Daniel R. Smiley,  
Interim Director