STATE OF CALIFORNIA – HEALTH AND HUMAN SERVICES AGENCY

EDMUND G. BROWN JR., *Governor*

EMERGENCY MEDICAL SERVICES AUTHORITY
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June 24, 2014

Gurujodha Khalsa, Deputy County Counsel
County of Kern
1115 Truxtun Avenue
Bakersfield, CA 93301

Ed Hill, Director
Kern County EMS Department
1800 Mt. Vernon Avenue, 2nd Floor
Bakersfield, CA 93306

Dear Mr. Khalsa and Mr. Hill:

This letter is in response to your 2012 Kern County EMS Plan submission to the EMS Authority in February 2013.

I. Introduction and Summary:

The EMS Authority has concluded its review of Kern County's 2012 EMS Plan Update and cannot approve this plan as submitted.

II. History and Background:

Kern County received approval of its 1994 Five-Year Plan, and the last annual Plan Update approval was as a partial approval the 2006 plan submission.

The Kern County EMS Department has inconsistently submitted EMS Plans to the EMS Authority. Historically, we have received EMS Plan documentation from Kern County in 1994, 1999, 2003, 2006 and most recently for 2012. The California Health and Safety (H&S) Code § 1797.254 states:

> *"Local EMS agencies shall **annually** (emphasis added) submit an emergency medical services plan for the EMS area to the authority, according to EMS Systems, Standards, and Guidelines established by the authority".*

The EMS Authority is responsible for the review of EMS Plans and for making a determination on the approval or disapproval of the plan, based on compliance with statute and the standards and guidelines established by the EMS Authority consistent with H&S Code § 1797.105(b). Due to the pattern of inconsistent EMS Plan submissions, an ongoing assessment of the EMS system in Kern County has been difficult and, therefore, has delayed this review.

III. Analysis of EMS System Components:

Following are comments related to Kern County's 2012 EMS Plan Update. Areas that indicate the plan update submitted is not concordant and consistent with applicable guidelines or regulations and H&S Code § 1797.254 and the EMS system components identified in H&S § 1797.103 are indicated below:

	Approved	Not Approved	
A.	☒	☐	System Organization and Management

1. System Assessment Form
   - One form was submitted for Standards 5.10, 5.11, and 5.12. Please ensure each Standard is assessed individually on one form.
   - The short-range objectives for Standards 1.27, 5.10, 5.11, and 5.12 are to implement a pediatric critical care system. While these are Enhanced Level standards, it is recommended that Kern County review the manual titled "Development and Implementation of EMS-C: A Step by Step Approach," found on the Authority's website at: http://www.emsa.ca.gov/Media/Default/PDF/EMS-C.pdf, which will assist Kern County in developing an EMS Program for Children. Please provide an update on the implementation of the pediatric critical care system.
2. System Assessment Form and Table 1 (Minimum Standards/Recommended Guidelines)
   - Standards 5.10, 5.11, and 5.12 were identified as long-range plans, whereas on the System Assessment Forms they were identified as short-range plans. Please ensure the information documented in Table 1 is consistent with the information documented in the System Assessment Forms.

B.	☒	☐	Staff/Training

C. ☒ ☐ Communications

1. Table 4 (Communications)
   - The table used is outdated and does not contain a list of the current questions. A revised table will be sent to you electronically; please use this table until further notification.

2. Table 11 (Dispatch Agency)
   - The table is incorrectly labeled as Table 9. Please label appropriately.

D. ☐ ☒ Transportation

1. Operational Areas or subareas for Ground Ambulance Service:
   - Operational Area #1: In 1981, Wasco Ambulance was the only noted provider in Operational Area #1. In 1983, a second provider began operating in the area, North Kern Ambulance. Wasco Ambulance was sold to Delano Ambulance in 1984 (terms of sale unknown to the Authority). In 1987, North Kern Ambulance went bankrupt and left the area. Another ambulance service, Kern Ambulance, was started the same year. In 2003, the ownership of Kern Ambulance changed (terms of the sale unknown to the Authority). The change in number of providers (from Wasco Ambulance to Wasco and North Kern Ambulance) and exit (North Kern Ambulance) and entry (Kern Ambulance) of providers into the marketplace are changes in the manner and scope of services in that zone. The plan does not continue the use of existing providers operating within a local EMS area in the manner and scope in which the services have been provided without interruption since January 1, 1981. It is our understanding that more recent ownership changes in this zone have taken place of which the Authority does not have detailed knowledge or documentation to indicate the purchase agreements. In addition to the above noted concerns by the Authority, other changes could affect exclusivity as well. The changes in manner and scope make the zone ineligible for exclusivity without a competitive process; therefore, the Authority has determined this zone as non-exclusive. If you wish this zone to be exclusive, a competitive process will need to be completed pursuant to H&S Code § 1797.224.

   - Operational Area #2: In 1999, Schaefer's Shafter Ambulance was sold to Hall Ambulance Service, Inc. The Purchase Agreement dated March 16, 1999, between the

companies substantially shows that the intent of the parties was to completely transfer Schafer's Shafter Ambulance to Hall Ambulance Service, Inc. The documentation available indicates that this zone is eligible for exclusivity without a competitive process for Emergency Ambulance Service at the 9-1-1 call level. The Authority has determined that this operational area is not eligible for 7 digit emergency call, Inter-Facility Transport (I FT) or stand-by exclusivity as other providers routinely handled these types of services since 1981, which is a change in manner and scope for these levels of exclusivity.

- Operational Area #3: Delano Ambulance Service has been the sole provider of 9-1-1 ambulance service since January 1, 1981. In 2006, a stock only purchase was completed. The stock purchase documentation substantially shows that Delano Ambulance Service still exists today as it did in 1981. The documentation available indicates that this zone is eligible for exclusivity without a competitive process for Emergency Ambulance Service at the 9-1-1 call level. The Authority has determined that this operational area is not eligible for 7 digit emergency call, IFT or stand-by exclusivity as other providers routinely handled these types of services since 1981 which is a change in manner and scope for these levels of exclusivity.

- Operational Area #4 and Operational Area #5: Golden Empire Ambulance and Hall Ambulance operated in Operating Area #4 and Operational Area #5 in 1981. At that time, there was one global operational area for ambulance operations in the greater Bakersfield area. The providers were assigned source agency calls via a rotation system handled by the public safety agencies in the area. In 1987, the handling of calls in the greater Bakersfield ambulance operational area was changed. The rotation system was removed from use and Golden Empire and Hall Ambulance were assigned response areas within the global operating area. Over time, these response areas were revised and in 1989, Operational Area #4 and Operational Area #5 were officially established with set boundaries for response areas. In 1999, Golden Empire Ambulance was sold to Hall Ambulance, leaving Hall Ambulance as the sole provider in what was the global operational area as of 1981. The Purchase Agreement dated July 1999 between the companies substantially shows that the intent of the parties was to completely transfer Golden Empire Ambulance to

Hall Ambulance Service, Inc. Given that in 1981, Golden Empire Ambulance and Hall Ambulance Service, Inc. operated the entire geographic area of Areas 4 and 5 and that those two companies still technically exist today, the Authority will recognize Operational Area 4 as being the entire greater Bakersfield area and exclusive for Emergency Ambulance Service for 9-1-1 calls. Operational Area 5 will cease to exist. This exclusivity can only apply if Operational Area 4 and 5 are considered one area as was the case in 1981. The Authority has determined that this operational area is not eligible for 7 digit emergency call, IFT or stand-by exclusivity as other providers routinely handled these types of services since 1981, which is a change in manner and scope for these levels of exclusivity.

- Operational Area #6: Care Ambulance provided service in Operational Area #6 in January 1981. In 1982, the California Highway Patrol revoked Care's permit to operate. Hall Ambulance then based an ambulance in that operational area to ensure coverage of ambulance service. Care Ambulance regained its operating permit and Hall Ambulance removed their unit stationed in that area. The entry and exit of Care Ambulance and Hall Ambulance is a change in manner and scope making the zone ineligible for exclusivity without a competitive process. This change to the area or subarea did not continue the use of existing providers operating continuously since January 1981 causing a change in call distribution that is a change in manner and scope. It is our understanding that more recent ownership changes in this zone have taken place for which the Authority does not have detailed knowledge or documentation to indicate the purchase agreements. In addition to the above noted concerns by the Authority, other changes could affect exclusivity as well. The Authority has determined this zone as non-exclusive. If you wish this zone to be exclusive, a competitive process will need to be completed pursuant to H&S Code § 1797.224.

- Operational Area #7: In 1981 the operational area included most of the eastern Kern County desert. In 1992, Operational Area #7 was split into a northern area and southern area; Operational Area #7 and Operational Area #11 respectively. In 1982, Tri-County Ambulance sold part of its operation to Trans-Med Ambulance (terms of sale unknown to the Authority). In 1985, Tri-County Ambulance repossessed the assets from Trans-Med Ambulance and

took over operation of the area (conditions of the repossession are not known to the Authority). The change in the boundaries and the change from one provider in 1981, to two providers in 1982, then back to one provider in 1985 are both changes in manner and scope that changed the area or subarea making the zone ineligible for exclusivity without a competitive process. The Authority has determined this zone as nonexclusive. If you wish this zone to be exclusive, a competitive process will need to be completed pursuant to H&S Code § 1797.224.

- Operational Area #8: In January 1981, there were two ambulance services in Operational Area #8; Hall Ambulance and Golden Empire Ambulance. At some point, Golden Empire Ambulance withdrew their ambulance from the area leaving only Hall Ambulance. The change in the number of providers is a change in manner and scope and makes the zone ineligible for exclusivity without a competitive process; therefore the Authority has determined this zone as nonexclusive. If you wish this zone to be exclusive, a competitive process will need to be completed pursuant to H&S Code § 1797.224.

- Operational Area #9: In January 1981, Taft Ambulance was the sole ambulance provider in Operational Area #9. In 1983, Tommy's Taft Ambulance and Golden Empire Ambulance entered and later left Operational Area #9. The change in the number of providers from one in 1981, to three in 1983, then back to one is a change in manner and scope and makes the zone ineligible for exclusivity without a competitive process. The Authority has determined this zone as non-exclusive. If you wish this zone to be exclusive, a competitive process will need to be completed pursuant to H&S Code § 1797.224.

- Operational Area #11: A competitive process was successfully completed for this operational area in 1994. Based on the lack of periodic interval as required criteria in H&S Code §1797.224, a competitive process needs to be completed for this operational area to reestablish exclusivity. The Authority has not approved a Plan or Plan Update with a periodic interval listed and has determined this zone as non-exclusive.

2. Operational Areas or subareas for prehospital EMS aircraft:
   - The Authority was recently copied on correspondence from the US Department of Transportation (DOT) General Counsel for Operations related to EMS aircraft operations in California. The letter from DOT states that local criteria related to market entry for EMS aircraft operations that can affect items related to price, route or service are preempted by the Airline Deregulation Act (ADA). Local County ordinances cannot supersede federal or state regulation or law.

   - The Authority approved a Request for Proposal (RFP) for emergency and non-emergency air ambulance services in Kern County in October 2007 based on the information available to us at the time. The RFP provided to the Authority in 2007 for emergency and non-emergency air ambulance services was designed to restrict operations to a single provider in two operations areas in Kern County. Based on the recent information from the DOT, it appears the ADA preempts this type of activity as affecting prices, routes or services under Title 49, United States Code § 41713 (b).

   - It is the Authority's belief that Kern County was acting as a consumer of prehospital EMS aircraft services in the October 2007 RFP. However, since the DOT has weighed in specifically related to the prehospital EMS aircraft system in Kern County, the Authority is unable to continue to support the Exclusive Operations Area (EOA) for prehospital EMS aircraft in Kern County.

3. Table 5 (Response/Transportation)
   - The Recommended Guideline for Standard 4.05 outlines four types of emergent responses, and Table 1 indicates the Recommended Guideline is met. However, the information provided in Table 5 identifies only two types of emergent responses. In order to meet the Recommended Guideline, all four types need to be outlined in Table 5. Please make the appropriate correction or update.

4. Table 8 (Response/Transportation/Providers)
   - The Summary of Changes indicates that "patient care record data continues to be collected from all ground and air transport providers…." However, there are several Providers that do not have this data identified. Please

ensure that Providers identified as "Transport", document the number of emergency/non-emergency transports, as well as the number of emergency/non-emergency responses, and that Providers identified as "Non-Transport" document the number of emergency/non-emergency responses.

- The number of emergency/non-emergency responses and transports do not correctly sum together. Please ensure the totals are reflective of the numbers provided within each listing.

- The Service category for Liberty Ambulance Service was not identified in the table; however, it was identified as a ground provider in the Summary of Changes. Please ensure all relevant categories in the table are checked.

E. ☒ ☐ Assessment of Hospitals/Critical Care Centers

1. Table 6 (Facilities/Critical Care)
   - The numbers presented in Table 6 for standby emergency services and basic emergency services are inconsistent with the information presented for the Facilities in Table 9. Please ensure the data contained in Table 6 is consistent with the information documented in Table 9.

2. Table 9 (Facilities)
   - The table used is outdated and does not contain a list of the current questions. A revised table will be sent to you electronically; please use this table until further notification.

F. ☐ ☒ Data Collection and Evaluation

1. Quality Improvement (QI) Program

   - Pursuant to Title 22, California Code of Regulations (CCR), § 100404, a Local EMS Agency shall develop and implement a written QI Program, and annually provide the written Program to the Authority. The Authority does not have any record of a submission of the required QI plan. In accordance with the Authority's *EMS System Quality Improvement Program Model Guidelines (EMSA #166)*, please submit a written QI Program immediately.

2. CEMSIS Data Submissions
   - Trauma Centers shall have a QI process and shall include participation in the trauma system data management system

(22 CCR § 100265). The Authority does not have any record of a submission of the required data. In accordance with the Authority's *EMS Data System Standards (EMSA #164),* please submit the trauma data immediately.

- The Authority shall assess each EMS area or the system's service area to determine the effectiveness of emergency medical services (H&S Code § 1797.102) as it relates to data collection and evaluation (H&S Code § 1797.103). The Authority does not have any record of a submission of the required data. In accordance with the Authority's *EMS Data System Standards (EMSA #164),* please submit the EMS data immediately.

G. ☒ ☐ Public Information and Education

1. Table 10 (Approved Training Programs)
   - The table is incorrectly labeled as Table 8. Please label appropriately.

H. ☒ ☐ Disaster Response

IV. Conclusion:

Based on the information identified, Kern County may not implement areas of the 2012 EMS Plan Update that have not been approved. Pursuant to H&S Code § 1797.105(b):

> *"After the applicable guidelines or regulations are established by the Authority, a local EMS agency may implement a local plan…unless the Authority determines that the plan does not effectively meet the needs of the persons served and is not consistent with the coordinating activities in the geographical area served, or that the plan is not concordant and consistent with applicable guidelines or regulations, or both the guidelines and regulations established by the Authority."*

V. Next Steps:

Within four months from the date of this notification, Kern County has the option to submit a revised EMS plan correcting all disapproved items identified in this letter, or to appeal the Authority's determination. Per H&S Code § 1797.105(c):

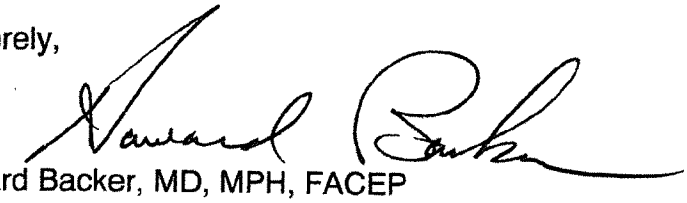
> *"A local EMS agency may appeal a determination of the Authority pursuant to subdivision (b) to the Commission."*

Please let the Authority know within the established timeframe if you wish to appeal the Authority's disapproval of your EMS Plan.

Kern County's submission was an annual Plan Update; however Kern County is due for a complete plan submission. Please ensure the next submission to the Authority is a complete Five-Year Plan.

Please contact Tom McGinnis, EMS Systems Division Chief at (916) 431-3695 if you have any questions.

Sincerely,



Howard Backer, MD, MPH, FACEP
Director

MATTHEW CONSTANTINE
DIRECTOR
PUBLIC HEALTH SERVICES

ROSS ELLIOTT
DIRECTOR
EMERGENCY MEDICAL SERVICES DIVISION

PUBLIC HEALTH SERVICES
DEPARTMENT

December 14, 2012

Dr. Howard Backer, MD, MPH, FACEP
Director, California EMS Authority
10901 Gold Center Drive, Suite 400
Rancho Cordova, CA 95670

Submission of EMS Plan

Dr. Backer:

In accordance with Section 1797.254 of the Health and Safety Code, please find enclosed Kern County's EMS Plan update for 2012.

If you have any questions or if you need additional information, please feel free to contact me at 661-868-5210 or via email at relliott@co.kern.ca.us .

Sincerely,

ROSS ELLIOTT
EMS Director

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County of Kern

EMERGENCY MEDICAL SERVICES

2012 KERN COUNTY EMS PLAN UPDATE

DECEMBER 2012

ROSS ELLIOTT
EMS DIRECTOR

ROBERT BARNES, M.D.
MEDICAL DIRECTOR

2012 EMS Plan Update – Kern
Summary of Changes

This provides a summary of changes to the EMS Plan components as requested by the State EMS Authority. No EMS Plan update was issued for 2008, 2009, 2010, and 2011. The previous EMS Plan update was prepared for 2007.

No substantial changes to EMS Standards and Guidelines component rankings (checkboxes) were applicable in comparison to the update in 2007; although many EMS system improvements have been accomplished that are not reflected in the standards and guidelines rankings. The only enhanced level standard that continues to not be met is development of a pediatric system plan (1.27) and pediatric system design (5.10, 5.11, and 5.12). A completed "System Assessment Form" for this item is included in Appendix 1 (page 51). All other minimum standards are met in evaluation of the Kern County EMS System with State EMS Authority Standards and Guidelines Part One – effective 1993.

A few changes in paramedic base hospital designation, air ambulance exclusive operational areas, and basic life support first responders are as follows:

- Bakersfield Heart Hospital became designated as a paramedic base hospital on November 1, 2008.
- Taft City Fire Department was absorbed by the Kern County Fire Department in early 2008.
- Hall Critical Care Transport became the exclusive air ambulance provider for EMS Aircraft Operational Area "A" on February 29, 2008.
- Mercy Air Service became the exclusive air ambulance provider for EMS Aircraft Operational Area "B" on February 29, 2008.
- Organizationally, the Kern County EMS Department was merged into the Kern County Public Health Services Department and has become the EMS Division, as of February 25, 2010.
- Mercy Southwest Hospital became designated as a paramedic base hospital on October 15, 2012.

Other substantial changes in Kern County EMS Division administration and ambulance provider ownership were carried out in early 2010 and are described in the narrative section of EMS Plan components in this update.

Links: (press Ctrl key and left mouse click an item to jump to that section)

A. **System Organization and Management**
B. **Staffing and Training**
C. **Communications**
D. **Response/Transportation**
E. **Facilities/Critical Care**
F. **Data Collection/System Evaluation**
G. **Public Information/Education**
H. **Disaster Medical Response**

Table 2 – System Resources and Operations – Organization and Management
Table 3 – System Resources and Operations – Personnel and Training
Table 4 – System Resources and Operations - Communications
Table 5 – System Resources and Operations – Response/Transportation
Table 6 – System Resources and Operations – Facilities/Critical Care
Table 7 – System Resources and Operations – Disaster Medical
Table 8 – Resources Directory – Approved Training Programs
Table 9 – Resources Directory - Dispatch Agencies

Ambulance Zone Summary Forms/Maps

Appendix 1 – System Assessment Report

The following provides a narrative summary of the current status of the Kern County EMS System based upon each EMS System Component of the EMS Plan and State EMS System Standards and Guidelines:

System Organization and Management:

The LEMSA function has been merged into the Kern County Department of Public Health Services effective February 2010. The Department of Public Health Services now has three divisions including Public Health, EMS, and Environmental Health. EMS Division has also been physically moved to the Public Health Services building located at 1800 Mount Vernon Avenue, Bakersfield.

The Emergency Medical Care Advisory Board (EMCAB) operates in Kern as our Emergency Medical Care Committee in statute and continues to meet quarterly. EMS Division continues to manage multiple stakeholder groups to ensure effective communications and coordination of projects. The EMS Director now manages the 'Office of Public Health Preparedness' which will help to provide more seamless administration of grants and emergency preparedness activities. EMS remains staffed with eight full time personnel and one EMS Medical Director under contract. The EMS Director now reports to the Public Health Services Director.

The EMS system in Kern continues to be a tiered prehospital response system of BLS first responders (with AED and advanced airway capability) provided predominately through the three public fire departments. None of the fire departments provide ambulance service. Primary ALS transport is provided by five private ground ambulance services and two private air ambulance services. However, an ambulance service operated by the Air Force at Edwards Air Force base is incorporated into our EMS system and serves the military and civilian population of the military base. Further, an industrial ambulance serving the Borax mine operation in the Boron area operates at an ALS level. The California City Fire Department continues to provide ALS first responder services. The Kern County Fire Department implemented ALS first responder service in Pine Mountain Club in 2009. Prehospital patients continue to be transported primarily to 10 general acute care hospitals with basic or standby emergency services. Kern generates roughly 80,000 prehospital emergency responses per year.

EMS operates an exclusive system for both ground and air ambulance services in accordance with California Health and Safety Code. This tiered response system is managed through National Academy of Emergency Dispatch (NAED) protocols, locally defined responses of fire and-or ambulance for each of the 379 response determinants, and response modes. System performance is continuously reported and monitored.

Staffing and Training:

Updated paramedic treatment protocols were implemented in 2010. This included mandatory training sessions for all accredited paramedic personnel and a new set of pediatric treatment protocols. We have authorized five EMT-1 training programs and two paramedic training programs.

Kern also moved away from the EMT-1 Combitube to a laryngeal advanced airway called the King Airway. EMT-1 criminal background checks were implemented in 2009. Kern continues to manage the Mobile Intensive Care Nurse (MICN) training program and recertification training program. Kern also continues to manage Emergency Medical Dispatch (EMD) certification and recertification; and monitors EMD protocol compliance through EMD providers.

Communications:

Kern has four emergency medical dispatch centers. This includes the Joint City-County Emergency Communications Center (ECC), Hall Ambulance Service, Delano Ambulance Service, and Kern Ambulance Service. ECC and Hall Ambulance Service are designated Centers of Excellence through the National Academy of Emergency Dispatch (NAED). NAED protocols were significantly upgraded in 2009 to Version 12.0. Those changes were implemented in Kern in 2009.

Kern continues to maintain the medical radio communications system consisting of eight Med channels used through 19 repeater sites primarily for ambulance to hospital communications. Ambulances have also been equipped with VHF radios to allow for direct communications with fire departments countywide to advance

our interoperable communications capacity. All radios in use by fire departments, ambulance companies, and hospitals have been updated with the mandated narrow banding changes, and each radio has the new interoperable channels: XKE, U-Call, V-Call, U-TAC, and V-TAC.

Kern County uses the 'Hospital Emergency Department Status Website' to maintain current status and overload score of each hospital emergency department in Kern and to manage emergency department closure requests. ReddiNet is also used to monitor hospital bed availability, ED status, manage MCIs, and serve as a secondary means of communicating with hospitals and other LEMSAs. Kern also participates in CAHAN.

Response/Transportation:

First response is provided predominately through three fire departments. Bakersfield City Fire Department provides BLS first response (with automatic external defibrillation and EMT-1 supralaryngeal airway capability) and also maintains an ALS level technical rescue program. Kern County Fire Department provides BLS first response (with automatic external defibrillation and EMT-1 supralaryngeal airway capability) and also maintains an ALS level first response program based in the small community of Pine Mountain Club. California City Fire Department provides ALS first response. Both the Kern County Fire Department and Sheriff's Office provide BLS Rescue Aircraft.

Ground ALS ambulance service is provided through five privately owned ground ambulance services. These include Hall Ambulance Service, Kern Ambulance Service, Delano Ambulance Service, and Liberty Ambulance Service and Care Ambulance. Liberty Ambulance and Care Ambulance are in the process of merging corporations. Nearly all high priority pre-hospital calls require an ALS ambulance response. Any BLS ambulances used are equipped with automatic external defibrillator and EMT-1 supralaryngeal airway qualified personnel. BLS ambulances are used less than 3 percent of the time per month for pre-hospital calls. Hall Ambulance Service also maintains an ALS First Responder fleet and offers specialty programs such as Bike-Medic at ALS level, and a Critical Care Transport ground ambulance staffed with a paramedic and registered nurse. Each ambulance operated by Liberty Ambulance Service, Care Ambulance Service, and Hall Ambulance Service are equipped with CPAP devices and 12-lead ECG equipment.

Air ambulance service is provided through two providers based in Kern County. This includes Hall Critical Care Transport based at Meadows Field Airport in Bakersfield, and Mercy Air Service based at Mojave Spaceport. Both provide nurse-paramedic staffed air ambulances and provide pre-hospital and inter-facility transfer services.

All ground and air ambulance services operate under exclusive contracts for defined operational areas. Compliance with stringent performance standards are required to maintain the contract. The EMS Division continuously tracks ambulance performance on a monthly basis.

Facilities/Critical Care:

Kern has ten general acute care hospitals that provide basic or stand-by emergency services. The following is a summary of the hospitals providing services pertaining to the EMS system:

San Joaquin Community Hospital – Bakersfield:

- Basic Emergency Services
- Paramedic Base Hospital
- Case Specific for Cardiac, Obstetrical, Orthopedic, Pediatric, and Stroke
- Designated Stroke Center

Mercy Hospital – Bakersfield:

- Basic Emergency Services
- Paramedic Base Hospital
- Case Specific for Orthopedic and Stroke

Mercy Southwest Hospital – Bakersfield:

- Basic Emergency Services
- Case Specific for Obstetrical, Orthopedic, Pediatric, and Stroke

Bakersfield Memorial Hospital – Bakersfield:

- Basic Emergency Services
- Paramedic Base Hospital
- Case Specific for Cardiac, Obstetrical, Orthopedic, Pediatric, and Stroke
- Designated Stroke Center

Delano Regional Medical Center – Delano:

- Basic Emergency Services
- Paramedic Base Hospital

Kern Medical Center – Bakersfield:

- Basic Emergency Services
- Paramedic Base Hospital
- Case Specific for Trauma, Obstetrical, Orthopedic, and Pediatric
- Designated Level II Trauma Center

Bakersfield Heart Hospital – Bakersfield:

- Basic Emergency Services
- Paramedic Base Hospital
- Case Specific for Cardiac

Kern Valley Hospital – Mountain Mesa:

- Stand-by Emergency Services
- EMS Receiving Hospital

Tehachapi Hospital – Tehachapi:

- Stand-by Emergency Services
- EMS Receiving Hospital

Ridgecrest Regional Hospital – Ridgecrest:

- Stand-by Emergency Services
- EMS Receiving Hospital

Kern established Stroke Center Policies and Procedures in 2009 and designated four hospitals as Stroke Centers: San Joaquin Community Hospital, Bakersfield Memorial Hospital, Mercy Hospital, and Mercy Southwest Hospital. Kern Medical Center continues to be the sole Level II Trauma Center. Kern in cooperation with the American Heart Association is working to develop a STEMI System of Care. The Board of Supervisors adopted the STEMI System of Care policy in June 2012, and three hospitals have filed applications with the LEMSA to become designated STEMI Receiving Centers.

Ambulance Destination Decision Policies continue to be updated regularly as hospital services evolve. The existing Destination Policy provides hospitals the opportunity to divert ambulance traffic to other hospitals as a tool for managing overcrowded emergency departments. Kern is working to make a major change in this policy and implement a "no diversion" approach. This segment of the policy is still in development.

Data Collection/System Evaluation:

Data continues to be collected from a variety of sources to perform system evaluation and guide quality improvement efforts. Patient Care Record (PCR) data continues to be collected from all ground and air

transport providers and ALS first responders. A PCR data warehouse is in place that is National Emergency Medical Systems Information System (NEMSIS) compliant. BLS fire departments will begin submitting electronic patient care records within the next year. Such documentation has never been submitted to the LEMSA, and it leaves a hole in patient care data in understanding the continuity of care.

A specialized program called FirstWatch was placed into effect late in 2009 that provides for automated surveillance of PCR data and issues alerts when defined thresholds are exceeded. This allows for on-going analysis of trends in the system and possibly early recognition of an outbreak.

The following ALS providers submit monthly performance reports that are tracked for performance standard compliance by EMS Division: Care Ambulance, Delano Ambulance, Hall Ambulance, Kern Ambulance, Liberty Ambulance, Kern County Fire Dept – Pine Mountain Club program, Hall Air Ambulance, and Mercy Air. All of these EMS service providers continue to meet the minimum compliance with few exceptions.

Public Information/Education:

Public information and education has often been the least active component of the EMS system. While the media has been used to address emergency department overload issues, what would be considered a comprehensive public information and education program is not in place. However, the alliance with Public Health and their comprehensive public information and education program has already led to improved planning under this component.

In partnering with a dozen healthcare service providers, the LEMSA led a local effort to teach hands-only to the public on CPR Day: June 7, 2012. On this one day a total of 1,331 people were trained in Kern County at 15 different venues.

Disaster Medical Response:

Disaster medical response continues to be a very active component for EMS Division. The EMS Director continues to manage the Hospital Preparedness Program (HPP) grant, the Strategic National Stockpile (SNS) Program, and the Regional Disaster Medical-Health Specialist Program for State Mutual Aid Region-V. EMS Division functions as the Medical-Health Operational Area Coordinator for the operational area. This position is responsible for disaster medical-health planning advancement and the medical-health mutual aid system.

A mass casualty hospital surge protocol has been issued to all hospitals. Currently clinics and managed care are moving forward with mass casualty surge planning and capability. Alternative Care Site (ACS) planning and advancement is also underway. The Kern Strategic National Stockpile (SNS) Plan is being updated and advanced.

Most of these activities are managed in coordination with the Disaster Medical Planning Group (DMPG) that consists of EMS, Public Health, hospital, clinic, managed care, ambulance service, fire department, college, and public schools representatives. DMPG meets monthly.

One particular challenge during the upcoming year will be combining the EMS and Public Health Department Operations Centers; which may also include Environmental Health and Animal Control.

A. SYSTEM ORGANIZATION AND MANAGEMENT

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Agency Administration:					
1.01 LEMSA Structure		X			
1.02 LEMSA Mission		X			
1.03 Public Input		X			
1.04 Medical Director		X	X		
Planning Activities:					
1.05 System Plan		X			
1.06 Annual Plan Update		X			
1.07 Trauma Planning*		X	X		
1.08 ALS Planning*		X			
1.09 Inventory of Resources		X			
1.10 Special Populations		X	X		
1.11 System Participants		X	X		
Regulatory Activities:					
1.12 Review & Monitoring		X			
1.13 Coordination		X			
1.14 Policy & Procedures Manual		X			
1.15 Compliance w/Policies		X			
System Finances:					
1.16 Funding Mechanism		X			

SYSTEM ORGANIZATION AND MANAGEMENT (continued)

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Medical Direction:					
1.17 Medical Direction*		X			
1.18 QA/QI		X	X		
1.19 Policies, Procedures, Protocols		X	X		
1.20 DNR Policy		X			
1.21 Determination of Death		X			
1.22 Reporting of Abuse		X			
1.23 Inter-facility Transfer		X			
Enhanced Level: Advanced Life Support					
1.24 ALS Systems		X	X		
1.25 On-Line Medical Direction		X	X		
Enhanced Level: Trauma Care System:					
1.26 Trauma System Plan		X			
Enhanced Level: Pediatric Emergency Medical and Critical Care System:					
1.27 Pediatric System Plan	X				X
Enhanced Level: Exclusive Operating Areas:					
1.28 EOA Plan		X			

B. STAFFING/TRAINING

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Local EMS Agency:					
2.01 Assessment of Needs		X			
2.02 Approval of Training		X			
2.03 Personnel		X			
Dispatchers:					
2.04 Dispatch Training		X	X		
First Responders (non-transporting):					
2.05 First Responder Training		X	X		
2.06 Response		X			
2.07 Medical Control		X			
Transporting Personnel:					
2.08 EMT-I Training		X	X		
Hospital:					
2.09 CPR Training		X			
2.10 Advanced Life Support		X			
Enhanced Level: Advanced Life Support:					
2.11 Accreditation Process		X			
2.12 Early Defibrillation		X			
2.13 Base Hospital Personnel		X			

C. COMMUNICATIONS

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Communications Equipment:					
3.01 Communication Plan*		X	X		
3.02 Radios		X	X		
3.03 Inter-facility Transfer*		X			
3.04 Dispatch Center		X			
3.05 Hospitals		X	X		
3.06 MCI/Disasters		X			
Public Access:					
3.07 9-1-1 Planning/ Coordination		X	X		
3.08 9-1-1 Public Education		X			
Resource Management:					
3.09 Dispatch Triage		X	X		
3.10 Integrated Dispatch		X	X		

D. RESPONSE/TRANSPORTATION

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Universal Level:					
4.01 Service Area Boundaries*		X	X		
4.02 Monitoring		X	X		
4.03 Classifying Medical Requests		X			
4.04 Prescheduled Responses		X			
4.05 Response Time Standards*		X	X		
4.06 Staffing		X			
4.07 First Responder Agencies		X			
4.08 Medical & Rescue Aircraft*		X			
4.09 Air Dispatch Center		X			
4.10 Aircraft Availability*		X			
4.11 Specialty Vehicles*		X	X		
4.12 Disaster Response		X			
4.13 Intercounty Response*		X			
4.14 Incident Command System		X			
4.15 MCI Plans		X			
Enhanced Level: Advanced Life Support:					
4.16 ALS Staffing		X			
4.17 ALS Equipment		X			

RESPONSE/TRANSPORTATION (continued)

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Enhanced Level: Ambulance Regulation:					
4.18 Compliance		X			
Enhanced Level: Exclusive Operating Permits:					
4.19 Transportation Plan		X			
4.20 "Grandfathering"		X			
4.21 Compliance		X			
4.22 Evaluation		X			

E. FACILITIES/CRITICAL CARE

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Universal Level:					
5.01 Assessment of Capabilities		X	X		
5.02 Triage & Transfer Protocols*		X			
5.03 Transfer Guidelines*		X			
5.04 Specialty Care Facilities*		X			
5.05 Mass Casualty Management		X	X		
5.06 Hospital Evacuation*		X			
Enhanced Level: Advanced Life Support:					
5.07 Base Hospital Designation*		X			
Enhanced Level: Trauma Care System:					
5.08 Trauma System Design		X			
5.09 Public Input		X			
Enhanced Level: Pediatric Emergency Medical and Critical Care System:					
5.10 Pediatric System Design	X				X
5.11 Emergency Departments	X				X
5.12 Public Input	X				X
Enhanced Level: Other Specialty Care Systems:					
5.13 Specialty System Design		X			
5.14 Public Input		X			

F. DATA COLLECTION/SYSTEM EVALUATION

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Universal Level:					
6.01 QA/QI Program		X	X		
6.02 Prehospital Records		X			
6.03 Prehospital Care Audits		X	X		
6.04 Medical Dispatch		X			
6.05 Data Management - System*		X			
6.06 System Design Evaluation		X			
6.07 Provider Participation		X			
6.08 Reporting		X			
Enhanced Level: Advanced Life Support:					
6.09 ALS Audit		X			
Enhanced Level: Trauma Care System:					
6.10 Trauma System Evaluation		X			
6.11 Trauma Center Data		X	X		

G. PUBLIC INFORMATION AND EDUCATION

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Universal Level:					
7.01 Public Information Materials		X			
7.02 Injury Control		X			
7.03 Disaster Preparedness		X			
7.04 First Aid & CPR Training		X			

H. DISASTER MEDICAL RESPONSE

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Universal Level:					
8.01 Disaster Medical Planning*		X			
8.02 Response Plans		X	X		
8.03 HazMat Training		X			
8.04 Incident Command System		X	X		
8.05 Distribution of Casualties*		X	X		
8.06 Needs Assessment		X	X		
8.07 Disaster Communications*		X			
8.08 Inventory of Resources		X	X		
8.09 DMAT Teams		X	X		
8.10 Mutual Aid Agreements*		X			
8.11 CCP Designation*		X			
8.12 Establishment of CCPs		X			
8.13 Disaster Medical Training		X	X		
8.14 Hospital Plans		X	X		
8.15 Interhospital Communications		X			
8.16 Prehospital Agency Plans		X	X		
Enhanced Level: Advanced Life Support:					
8.17 ALS Policies		X			
Enhanced Level: Specialty Care Systems:					
8.18 Specialty Center Roles		X			
Enhanced Level: Exclusive Operating Areas/Ambulance Regulations:					
8.19 Waiving Exclusivity		X			

APPENDIX 1: System Assessment Form

STANDARD:

Enhanced Level: Pediatric Emergency Medical and Critical Care System: 5.10 - Pediatric System Design, 5.11 – Emergency Departments, 5.12 - Public Input

CURRENT STATUS:

The Division plans to work with Bakersfield Memorial Hospital (BMH) in establishing a pediatric critical care system located within Kern County. This is perhaps the greatest EMS system need. Most acute pediatric cases are transferred from Kern County to Los Angeles or Children's Hospital of Central California in Madera. With the establishment of a Pediatric Intensive Care Unit (PICU) at BMH it may be possible to reduce out of county transfers for some patients.

COORDINATION WITH OTHER EMS AGENCIES:

NEED(S):

- Develop a Pediatric Critical Care System Plan, addressing ambulance destination decisions and coordination of care with area hospitals
- Obtain EMSA Approval
- Implement the plan
- Maintain the Pediatric Critical Care System

OBJECTIVE:

Implement a Pediatric Critical Care System for Kern County

TIME FRAME FOR MEETING OBJECTIVE:

____X_____ Short-range plan (one year or less)

_____ Long-range plan (more than one year)

TABLE 2: SYSTEM RESOURCES AND OPERATIONS

System Organization and Management

EMS System: Kern
Reporting Year: 2012

NOTE: Number (1) below is to be completed for each county. The balance of Table 2 refers to each agency.

1. Percentage of population served by each level of care by county:
(Identify for the maximum level of service offered; the total of a, b, and c should equal 100%)

County: Kern

A.	Basic Life Support (BLS)	3 %
B.	Limited Advanced Life Support (LALS)	0 %
C.	Advanced Life Support (ALS)	97 %

2. Type of agency
   - a – Public Health Department
   - **b – County Health Services Agency**
   - c – Other (non-health) County Department (in 2009, part of Public Health in 2010)
   - d - Joint Powers Agency
   - e - Private Non-Profit Entity
   - f - Other: _____

3. The person responsible for day-to-day activities of the EMS agency reports to b
   - a - Public Health Officer
   - b- Health Services Agency Director/Administrator
   - c - Board of Directors
   - d - Other: _____

4. Indicate the non-required functions which are performed by the agency:

Implementation of exclusive operating areas (ambulance franchising)	X
Designation of trauma centers/trauma care system planning	X
Designation/approval of pediatric facilities	
Designation of other critical care centers	X
Development of transfer agreements	
Enforcement of local ambulance ordinance	X
Enforcement of ambulance service contracts	X
Operation of ambulance service	

Table 2 - System Organization & Management (cont.)

Continuing education	X
Personnel training	X
Operation of oversight of EMS dispatch center	X
Non-medical disaster planning	X
Administration of critical incident stress debriefing team (CISD)	
Administration of disaster medical assistance team (DMAT)	
Administration of EMS Fund [Senate Bill (SB) 12/612]	X
Other:	
Other:	
Other:	

5. EMS agency budget for FY 2012-2013

EXPENSES

Salaries and benefits (All but contract personnel)	$ 885, 000
Contract Services (e.g. medical director)	$5, 000
Operations (e.g. copying, postage, facilities)	$70, 000
Travel	$25, 000
Fixed assets	$0
Indirect expenses (overhead)	$0
Ambulance subsidy	$26, 000
EMS Fund payments to physicians/hospital	$1,900, 000
Dispatch center operations (non-staff)	$0
Training program operations	$0
Other: CHIP/EMSA Payments to Physicians, Hospitals	$0
Other: Communications	$58, 000
Other: Grant Purchases	$0
Other: Office Supplies - Equipment	$0
TOTAL EXPENSES	$2,969,000

Table 2 - System Organization & Management (cont.)

SOURCES OF REVENUE

Special project grant(s) [from EMSA]	
Preventive Health and Health Services (PHHS) Block Grant	$0
RDMHS	$125, 000
State general fund	$0
County general fund	$58, 000
Other local tax funds (e.g., EMS district)	$0
County contracts (e.g. multi-county agencies)	$0
Certification fees	$46, 000
Training program approval fees	$0
Training program tuition/~~Average daily attendance funds (ADA)~~	$1,330
Job Training Partnership ACT (JTPA) funds/other payments	$0
Base hospital application fees	$45, 000
Trauma center ~~application fees~~ Oversight Fee	$134,000
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	$54,000
Contributions (EMS Week Sponsorships)	$0
EMS Fund (SB 12/612)	$1, 900,000
Other grants: HPP	$146,000
Other fees: BSI	$31,000
Other (specify): EMS Fund – Admin + Other 17	$430,000
TOTAL REVENUE	$2,969,000

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

Table 2 - System Organization & Management (cont.)

Fee structure for FY 2012 - 2013

_____ We do not charge any fees

__X__ Our fee structure is:

First responder certification		$ 0
EMS dispatcher certification		$55.00
EMT-I certification	In-County $37.00	Out-County $87.00
EMT-I recertification	In-County $37.00	Out-County $57.00
EMT-defibrillation certification		$37.00
EMT-defibrillation recertification		_____
EMT-II certification		_____
EMT-II recertification		_____
EMT-P accreditation lapse		$64.00
Mobile Intensive Care Nurse/ Authorized Registered Nurse (MICN/ARN) certification		$87.00
MICN/ARN recertification		$87.00
EMT-I training program approval		_____
EMT-II training program approval		_____
EMT-P training program approval		_____
MICN/ARN training program approval		_____
Base hospital designation (annual)	Urban $6,113.00	Rural $3,140.00
Receiving hospital designation (annual)		$1,806.00
Trauma center application		$3,213.00
Trauma center designation		$34,222.00
Pediatric facility approval		_____
Pediatric facility designation		_____

Ground Ambulance service license (annual)	$2,147.00
Ground Ambulance vehicle permits (annual)	$275.00
Air Ambulance service license	$2,146.00
Air Ambulance unit	$203.00
Other: classroom rental	$13 per hour
Other: training programs	$15 per hour
Other: CE programs	$8 per hour

7. Complete the table on the following two pages for the EMS agency staff for the fiscal year of 2012-2013.

Table 2 - System Organization & Management (cont.)

EMS System: Kern Reporting year 2012

CATEGORY	ACTUAL TITLE	FTE POSITIONS (EMS ONLY)	TOP SALARY BY HOURLY EQUIVALENT	BENEFITS (%of Salary)	COMMENTS
EMS Admin./Coord./Director	EMS Director	1	$44.14	72%	
Asst. Admin. /Admin. Asst. /Admin. Mgr.	Senior EMS Coordinator	1	$32.09	65%	
ALS Coord. /Field Coord. / Training Coordinator	EMS Coordinator	5	$28.46	67%	1 Coordinator is assigned to Region 5 RDMHS duties
Program Coordinator/ Field Liaison (Non-clinical)					
Trauma Coordinator					
Medical Director	Medical Director	<1	$5,000/yr	NA	Flat amount per year
Other MD/Medical Consult/ Training Medical Director					
Disaster Medical Planner					

Include an organizational chart of the local EMS agency and a county organization chart(s) indicating how the LEMSA fits within the county/multi-county structure.

Table 2 - System Organization & Management (cont.)

CATEGORY	ACTUAL TITLE	FTE POSITIONS (EMS ONLY)	TOP SALARY BY HOURLY EQUIVALENT	BENEFITS (%of Salary)	COMMENTS
Dispatch Supervisor					
Medical Planner					
Data Evaluator/Analyst					
QA/QI Coordinator					
Public Info. & Education Coordinator					
Executive Secretary					
Other Clerical	Office Services Technician	1	$16.95	80%	
Data Entry Clerk					
Other					

Include an organizational chart of the local EMS agency and a county organization chart(s) indicating how the LEMSA fits within the county/multi-county structure.

The following is a staff organization chart that is in effect for 2012:

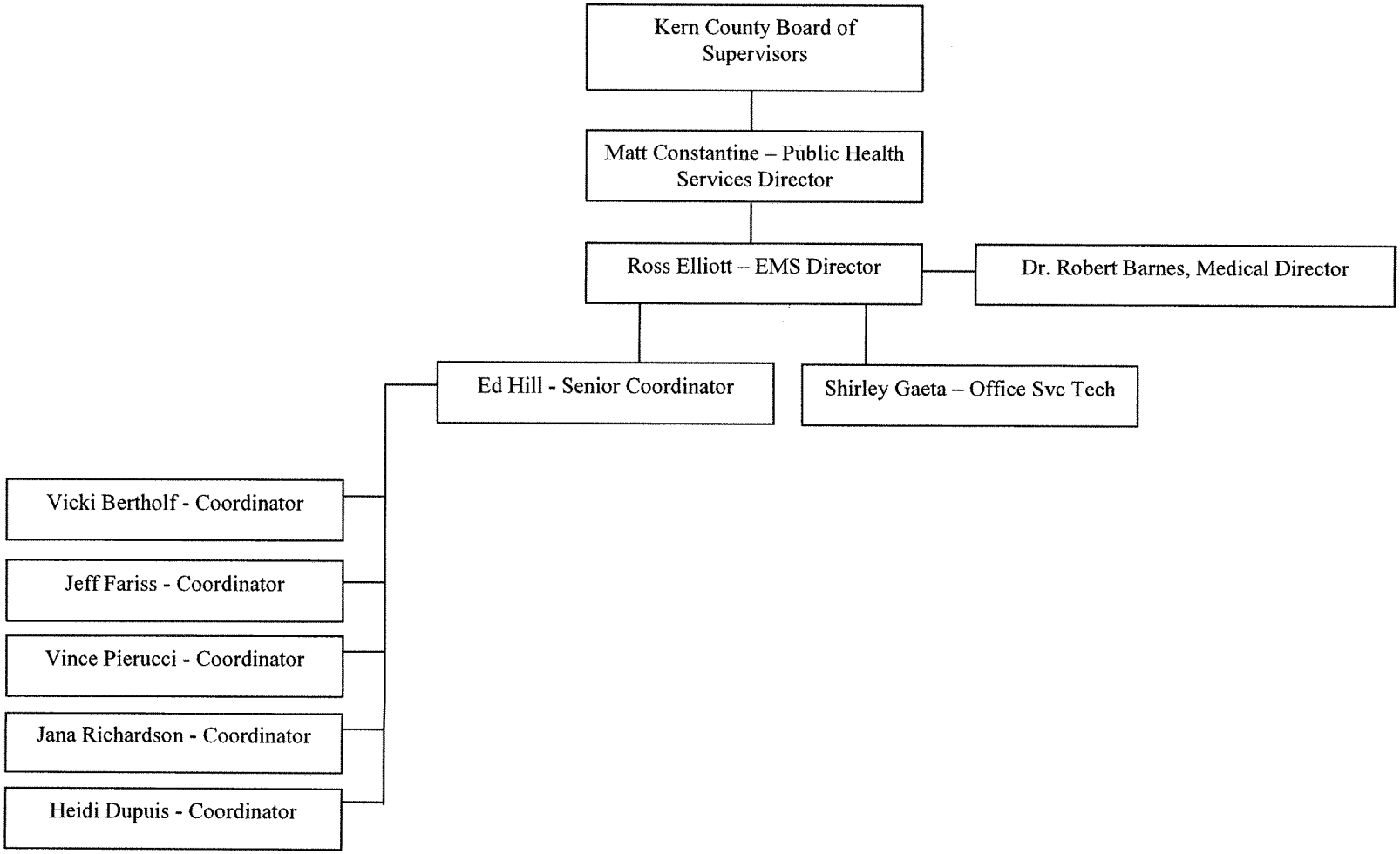


TABLE 3: SYSTEM RESOURCES AND OPERATIONS - Personnel/Training Revision #4 (4/20/07)

EMS System: Kern

Reporting Year: 2012

NOTE: Table 3 is to be reported by agency.

	EMT - Is	EMT - IIs	EMT - Ps	MICN
Total Certified	1334	n/a	233	14
Number newly certified this year	177	n/a	52	17
Number recertified this year	1099	n/a	127	22
Total number of accredited personnel on July 1 of the reporting year	1721	n/a	282	67
Number of certification reviews resulting in:				
a) formal investigations	12	n/a	0	0
b) probation	0	n/a	0	0
c) suspensions	0	n/a	0	0
d) revocations	3	n/a	n/a	0
e) denials	1	n/a	n/a	0
f) denials of renewal	1	n/a	n/a	0
g) no action taken	7	n/a	0	0

1. Number of EMS dispatch agencies utilizing EMD Guidelines: 4
2. Early defibrillation:
   a) Number of EMT=I (defib) certified 951
   b) Number of public safety (defib) certified (non-EMT-I) 0

3. Do you have a first responder training program ☐ yes **X** no

TABLE 4: SYSTEM RESOURCES AND OPERATIONS - Communications

EMS System: Kern

County: Kern

Reporting Year: 2012

Note: Table 4 is to be answered for each county.

1. Number of primary Public Service Answering Points (PSAP) 9

2. Number of secondary PSAPs 2

3. Number of dispatch centers directly dispatching ambulances 3

4. Number of designated dispatch centers for EMS Aircraft 1

5. Do you have an operational area disaster communication system? Yes X No _____
   a. Radio primary frequency Receive: 462.9500 Transmit: 467.950 PL: 186.2
   b. Other methods Other Med channels, cellular telephone
   c. Can all medical response units communicate on the same disaster communications system? Yes X No _____
   d. Do you participate in OASIS? Yes X No _____
   e. Do you have a plan to utilize RACES as a back-up communication system? Yes X No _____

   1) Within the operational area? Yes X No _____
   2) Between the operational area and the region and/or state? Yes X No _____

6. Who is your primary dispatch agency for day-to-day emergencies? Kern County Emergency Communications Center

7. Who is your primary dispatch agency for a disaster? Kern County Emergency Communications Center

TABLE 5: SYSTEM RESOURCES AND OPERATIONS
Response/Transportation

EMS System: Kern

Reporting Year: 2012

Note: Table 5 is to be reported by agency.

Early Defibrillation Providers

1. Number of EMT-Defibrillation providers 8

SYSTEM STANDARD RESPONSE TIMES (90TH PERCENTILE)

Enter the response times in the appropriate boxes	METRO/URBAN	SUBURBAN/RURAL	WILDERNESS	SYSTEMWIDE
BLS and CPR capable first responder	-	-	-	-
Early defibrillation responder	-	-	-	-
Advanced life support responder	8 minutes/15 min.	25 minutes/50 minutes	75 minutes	-
Transport Ambulance	8 minutes/15 min.	25 minutes/50 minutes	75 minutes	-

TABLE 6: SYSTEM RESOURCES AND OPERATIONS
Facilities/Critical Care

EMS System: Kern

Reporting Year: 2012

NOTE: Table 6 is to be reported by agency.

Trauma

Trauma patients:

a) Number of patients meeting trauma triage criteria	1826
b) Number of major trauma victims transported directly to a trauma center by ambulance	1595
c) Number of major trauma patients transferred to a trauma center	128
d) Number of patients meeting triage criteria who weren't treated at a trauma center	239

Emergency Departments

Total number of emergency departments	10
a) Number of referral emergency services	0
b) Number of standby emergency services	3
c) Number of basic emergency services	7
d) Number of comprehensive emergency services	0

Receiving Hospitals

1.	Number of receiving hospitals with written agreements	3
2.	Number of base hospitals with written agreements	7

TABLE 7: SYSTEM RESOURCES AND OPERATIONS -- Disaster Medical

EMS System: Kern

County: Kern

Reporting Year: 2012

NOTE: Table 7 is to be answered for each county.

SYSTEM RESOURCES

1. Casualty Collections Points (CCP)
   a. Where are your CCPs located? High Schools throughout Kern County
   b. How are they staffed? Initially prehospital personnel, followed by other medical staff.
   c. Do you have a supply system for supporting them for 72 hours? yes X no ____

2. CISD
   Do you have a CISD provider with 24 hour capability? yes X no ____

3. Medical Response Team
   a. Do you have any team medical response capability? yes X no ____
   b. For each team, are they incorporated into your local response plan? yes X no ____
   c. Are they available for statewide response? yes X no ____
   d. Are they part of a formal out-of-state response system? yes X no ____

4. Hazardous Materials
   a. Do you have any HazMat trained medical response teams? yes X no ____
   b. At what HazMat level are they trained? Technician & Specialist
   c. Do you have the ability to do decontamination in an emergency room? yes X no ____
   d. Do you have the ability to do decontamination in the field? yes X no ____

OPERATIONS

1. Are you using a Standardized Emergency Management System (SEMS) that incorporates a form of Incident Command System (ICS) structure? yes X no ____

2. What is the maximum number of local jurisdiction EOCs you will need to interact with in a disaster? 9

3. Have you tested your MCI Plan this year in a:
   a. real event? yes X no ____
   b. exercise? yes X no ____

4. List all counties with which you have a written medical mutual aid agreement.
All counties under the California Master Mutual Aid Agreement

5. Do you have formal agreements with hospitals in your operational area to participate in disaster planning and response? yes _X_ no ____

6. Do you have a formal agreements with community clinics in your operational areas to participate in disaster planning and response? yes _X_ no ____

7. Are you part of a multi-county EMS system for disaster response? yes ____ no _X_
However, Kern does manage the RDMHS program for Medical-Health Mutual Aid Region V; and participates in the statewide Medical-Health Mutual Aid System.

8. Are you a separate department or agency? yes ____ no _X_

9. If not, to whom do you report? Kern County Department of Public Health Services

8. If your agency is not in the Health Department, do you have a plan to coordinate public health and environmental health issues with the Health Department? yes ____ no ____

Table 8: Resource Directory

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Kern Ambulance Service **Response Zone:** 1

Address: 2324 7th Street
Wasco, CA 93280

Phone Number: 661-758-3200

Number of Ambulance Vehicles in Fleet: 7 (1 not in service)

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: Unknown/data not collected by LEMSA; performance is measured by response time, not unit inventory.

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☒ Yes ☐ No	☐ Yes ☒ No	☒ Yes ☐ No	☒ Transport ☐ Non-Transport	☒ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☐ Public ☒ Private	☐ Fire ☐ Law ☐ Other Explain:	☐ City ☐ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

2,645 Total number of responses
2,388 Number of emergency responses
407 Number of non-emergency responses

1,768 Total number of transports
1,723 Number of emergency transports
15 Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Delano Ambulance Services **Response Zone:** 3

Address: 403 Main Street
Delano, CA 93215

Phone Number: 661-725-3374

Number of Ambulance Vehicles in Fleet: 7 (3 not in service)

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: Unknown/data not collected by LEMSA; performance is measured by response time, not unit inventory.

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
■ Yes ☐ No	☐ Yes ■ No	■ Yes ☐ No	■ Transport ☐ Non-Transport	■ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☐ Public ■ Private	☐ Fire ☐ Law ☐ Other Explain: _____	☐ City ☐ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

4,183 Total number of responses
3,893 Number of emergency responses
290 Number of non-emergency responses

3,484 Total number of transports
3,196 Number of emergency transports
288 Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Hall Ambulance Service **Response Zone:** 2,4,5,8,9 and 11

Address: 1001 21st Street
Bakersfield, CA 93301

Number of Ambulance Vehicles in Fleet: 105 (11 not in service), + 1 DMSU

Phone Number: 661-322-8741

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: Unknown/data not collected by LEMSA; performance is measured by response time, not unit inventory.

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
■ Yes ☐ No	■ Yes ☐ No	■ Yes ☐ No	■ Transport ☐ Non-Transport	■ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☐ Public ■ Private	☐ Fire ☐ Law ☐ Other Explain:	☐ City ☐ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

81,608	Total number of responses
77,457	Number of emergency responses
4,151	Number of non-emergency responses

62,632	Total number of transports
58,762	Number of emergency transports
3,870	Number of non-emergency transports

Air Ambulance Services

	Total number of responses
	Number of emergency responses
	Number of non-emergency responses

	Total number of transports
	Number of emergency transports
	Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Care Ambulance Service (Liberty) **Response Zone:** 6

Address: 1134 Kernville Road
Kernville, CA 93238

Phone Number: 760-376-2271

Number of Ambulance Vehicles in Fleet: 9 (4 not in service)

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: Unknown/data not collected by LEMSA; performance is measured by response time, not unit inventory.

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☒ Yes ☐ No	☐ Yes ☒ No	☒ Yes ☐ No	☒ Transport ☐ Non-Transport	☒ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☐ Public ☒ Private	☐ Fire ☐ Law ☐ Other Explain: _____	☐ City ☐ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

3,275 Total number of responses
2,489 Number of emergency responses
786 Number of non-emergency responses

2,712 Total number of transports
2,428 Number of emergency transports
285 Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Liberty Ambulance Service **Response Zone:** 7

Address: 1325 W. Ridgecrest Blvd.
Ridgecrest, CA 93555

Phone Number: 760-375-6565

Number of Ambulance Vehicles in Fleet: 14 (5 not in service)

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: Unknown/data not collected by LEMSA; performance is measured by response time, not unit inventory.

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☒ Yes ☐ No	☐ Yes ☒ No	☒ Yes ☐ No	☒ Transport ☐ Non-Transport	☑ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☐ Public ☒ Private	☐ Fire ☐ Law ☐ Other Explain:	☐ City ☐ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

3,670 Total number of responses
2,903 Number of emergency responses
767 Number of non-emergency responses

3,040 Total number of transports
2,720 Number of emergency transports
319 Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Hall Critical Care Transport **Response Zone:** A

Address: 1001 21st Street
Bakersfield, CA 93301

Number of Ambulance Vehicles in Fleet: 1

Phone Number: 661-322-8741

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 1

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No	☒ Transport ☐ Non-Transport	☐ Ground ☒ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☐ Public ☒ Private	☐ Fire ☐ Law ☐ Other Explain:	☐ City ☐ County ☐ State ☐ Fire District ☐ Federal	☒ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☒ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

	Total number of responses
	Number of emergency responses
	Number of non-emergency responses

	Total number of transports
	Number of emergency transports
	Number of non-emergency transports

Air Ambulance Services

306	Total number of responses
194	Number of emergency responses
112	Number of non-emergency responses

269	Total number of transports
158	Number of emergency transports
111	Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Mercy Air Service **Response Zone:** B

Address: 1670 Miro Way
Rialto, CA 92376

Number of Ambulance Vehicles in Fleet: 1

Phone Number: 909-357-9006

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 1

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No	☒ Transport ☐ Non-Transport	☐ Ground ☒ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☐ Public ☒ Private	☐ Fire ☐ Law ☐ Other Explain:	☐ City ☐ County ☐ State ☐ Fire District ☐ Federal	☒ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☒ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

	Total number of responses
	Number of emergency responses
	Number of non-emergency responses

	Total number of transports
	Number of emergency transports
	Number of non-emergency transports

Air Ambulance Services

322	Total number of responses
120	Number of emergency responses
202	Number of non-emergency responses

312	Total number of transports
115	Number of emergency transports
197	Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Borax Ambulance **Response Zone:** Borax mining operation

Address: 14486 Borax Road
Boron, CA 93516

Number of Ambulance Vehicles in Fleet: 1

Phone Number: 760-762-7616

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 1

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No	☐ Transport ☒ Non-Transport	☒ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☐ Public ☒ Private	☐ Fire ☐ Law ☐ Other Explain: _____	☐ City ☐ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** US Air Force, Edwards Base **Response Zone:** Edwards AFB

Address: 30 Hospital Road
Edwards, CA 93524

Phone Number: 661-277-2330

Number of Ambulance Vehicles in Fleet: 2

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: unknown

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☒ Yes ☐ No	☐ Yes ☒ No	☒ Yes ☐ No	☒ Transport ☐ Non-Transport	☒ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☒ Public ☐ Private	☐ Fire ☐ Law ☒ Other Explain: military	☐ City ☐ County ☐ State ☐ Fire District ☒ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

525 Total number of responses
313 Number of emergency responses
212 Number of non-emergency responses

294 Total number of transports
162 Number of emergency transports
132 Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Antelope Ambulance Service **Response Zone:** Edwards AFB

Address: PO Box 5480
Lancaster, CA 93539

Number of Ambulance Vehicles in Fleet: 1

Phone Number:

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 1

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No	☒ Transport ☐ Non-Transport	☒ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☐ Public ☒ Private	☐ Fire ☐ Law ☐ Other Explain:	☐ City ☐ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Kern County Fire Department **Response Zone:** countywide

Address: 5642 Victor Street
Bakersfield, CA 93308

Number of Ambulance Vehicles in Fleet: 1

Phone Number: 661-391-7000

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 0.5 (not available everyday)

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No	☐ Transport ☒ Non-Transport	☐ Ground ☒ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☒ Public ☐ Private	☒ Fire ☐ Law ☐ Other Explain: _____	☐ City ☒ County ☐ State ☐ Fire District ☐ Federal	☒ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☒ BLS Rescue

Transporting Agencies

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Kern County Sheriff's Office **Response Zone:** countywide

Address: 1350 Norris Road
Bakersfield, CA 93308

Number of Ambulance Vehicles in Fleet: 1

Phone Number: 661-391-7500

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 0.5 (not available everyday)

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No	☐ Transport ☒ Non-Transport	☐ Ground ☒ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☒ Public ☐ Private	☐ Fire ☒ Law ☐ Other Explain: _____	☐ City ☒ County ☐ State ☐ Fire District ☐ Federal	☒ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☒ BLS Rescue

Transporting Agencies

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** California City Fire Department **Response Zone:** California City

Address: 20890 Hacienda Blvd.
California City, CA 93505

Number of Ambulance Vehicles in Fleet: 0

Phone Number: 760-373-4841

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 0; a fire-based ALS first-response service

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No	☐ Transport ☒ Non-Transport	☒ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☒ Public ☐ Private	☒ Fire ☐ Law ☐ Other Explain: _____	☒ City ☐ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Kern County Fire Department **Response Zone:** countywide

Address: 5642 Victor Street
Bakersfield, CA 93308

Phone Number: 661-391-7000

Number of Ambulance Vehicles in Fleet: 0

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 0; a fire-based BLS first-response service

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No	☐ Transport ☒ Non-Transport	☒ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☒ Public ☐ Private	☒ Fire ☐ Law ☐ Other Explain: _____	☐ City ☒ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Kern County Fire Department – Sta. 58 **Response Zone:** Pine Mountain Club

Address: 5642 Victor Street
Bakersfield, CA 93308

Phone Number: 661-391-7000

Number of Ambulance Vehicles in Fleet: 0

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 0; a fire-based ALS first-response service

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
■ Yes ☐ No	☐ Yes ■ No	■ Yes ☐ No	☐ Transport ■ Non-Transport	■ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
■ Public ☐ Private	■ Fire ☐ Law ☐ Other Explain: _____	☐ City ■ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Response/Transportation/Providers

Note: *Table 8 is to be completed for each provider by county.* Make copies as needed.

County: Kern **Provider:** Bakersfield City Fire Department **Response Zone:** Bakersfield

Address: 2101 H Street
Bakersfield, CA 93301

Phone Number: 661-326-3941

Number of Ambulance Vehicles in Fleet: 0

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 0; a fire-based BLS first-response service

Written Contract:	Medical Director:	System Available 24 Hours:	Service:	
☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No	☐ Transport ☒ Non-Transport	☒ Ground ☐ Air ☐ Water
Ownership:	**If Public:**	**If Public:**	**If Air:**	**Air Classification:**
☒ Public ☐ Private	☒ Fire ☐ Law ☐ Other Explain: _____	☒ City ☐ County ☐ State ☐ Fire District ☐ Federal	☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue

Transporting Agencies

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Air Ambulance Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Table 9: Resources Directory

Facilities

County: Kern

Note: *Complete information for each facility by county.* Make copies as needed.

Facility: Bakersfield Heart Hospital
Address: 3001 Sillect Ave.
Bakersfield, CA 93308

Telephone Number: 661-316-6000

Written Contract:	Service:	Base Hospital:	Burn Center:
☒ Yes ☐ No	☐ Referral Emergency ☐ Standby Emergency ☒ Basic Emergency ☐ Comprehensive Emergency	☒ Yes ☐ No	☐ Yes ☒ No

		Trauma Center:	If Trauma Center what level:
Pediatric Critical Care Center[1]	☐ Yes ☒ No	☐ Yes ☒ No	☐ Level I ☐ Level II ☐ Level III ☐ Level IV
EDAP[2]	☐ Yes ☒ No		
PICU[3]	☐ Yes ☒ No		

[1] Meets EMSA *Pediatric Critical Care Center (PCCC) Standards*
[2] Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
[3] Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

Facilities

County: _____Kern_____

Note: *Complete information for each facility by county.* Make copies as needed.

Facility: Delano Regional Medical Center
Address: 1401 Garces Highway
Delano, CA 93216

Telephone Number: 661-725-4800

Written Contract:	Service:	Base Hospital:	Burn Center:
☒ Yes ☐ No	☐ Referral Emergency ☐ Standby Emergency ☒ Basic Emergency ☐ Comprehensive Emergency	☒ Yes ☐ No	☐ Yes ☒ No

		Trauma Center:	If Trauma Center what level:
Pediatric Critical Care Center[4]	☐ Yes ☒ No	☐ Yes ☒ No	☐ Level I ☐ Level II ☐ Level III ☐ Level IV
EDAP[5]	☐ Yes ☒ No		
PICU[6]	☐ Yes ☒ No		

[4] Meets EMSA *Pediatric Critical Care Center (PCCC) Standards*
[5] Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
[6] Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

Facilities

County: ____Kern_____

Note: *Complete information for each facility by county.* Make copies as needed.

Facility: Bakersfield Memorial Hospital
Address: 420 34th Street
Bakersfield, CA 93301

Telephone Number: 661-327-4647

Written Contract:	Service:	Base Hospital:	Burn Center:
☒ Yes ☐ No	☐ Referral Emergency ☐ Standby Emergency ☒ Basic Emergency ☐ Comprehensive Emergency	☒ Yes ☐ No	☐ Yes ☒ No

		Trauma Center:	If Trauma Center what level:
Pediatric Critical Care Center[7]	☐ Yes ☒ No	☐ Yes ☒ No	☐ Level I ☐ Level II ☐ Level III ☐ Level IV
EDAP[8]	☐ Yes ☒ No		
PICU[9]	☒ Yes ☐ No		

[7] Meets EMSA *Pediatric Critical Care Center (PCCC) Standards*
[8] Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
[9] Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

Facilities

County: _____Kern_____

Note: *Complete information for each facility by county.* Make copies as needed.

Facility: Kern Medical Center
Address: 1830 Flower Street
Bakersfield, CA 93306

Telephone Number: 661-326-1000

Written Contract:	Service:	Base Hospital:	Burn Center:
☒ Yes ☐ No	☐ Referral Emergency ☐ Standby Emergency ☒ Basic Emergency ☐ Comprehensive Emergency	☒ Yes ☐ No	☐ Yes ☒ No

		Trauma Center:	If Trauma Center what level:
Pediatric Critical Care Center[10]	☐ Yes ☒ No	☒ Yes ☐ No	☐ Level I ☒ Level II ☐ Level III ☐ Level IV
EDAP[11]	☐ Yes ☒ No		
PICU[12]	☐ Yes ☒ No		

[10] Meets EMSA *Pediatric Critical Care Center (PCCC) Standards*
[11] Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
[12] Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

Facilities

County: _____Kern_____

Note: *Complete information for each facility by county.* Make copies as needed.

Facility: Kern Valley Healthcare District Hospital
Address: 6412 Laurel Ave.
Lake Isabella, CA 93240

Telephone Number: 760-379-2681

Written Contract:	Service:	Base Hospital:	Burn Center:
☒ Yes ☐ No	☐ Referral Emergency ☒ Standby Emergency ☐ Basic Emergency ☐ Comprehensive Emergency	☐ Yes ☒ No	☐ Yes ☒ No

		Trauma Center:	If Trauma Center what level:
Pediatric Critical Care Center[13]	☐ Yes ☒ No	☐ Yes ☒ No	☐ Level I ☐ Level II ☐ Level III ☐ Level IV
EDAP[14]	☐ Yes ☒ No		
PICU[15]	☐ Yes ☒ No		

[13] Meets EMSA *Pediatric Critical Care Center (PCCC) Standards*
[14] Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
[15] Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

Facilities

County: ___Kern_____

Note: *Complete information for each facility by county.* Make copies as needed.

Facility: Mercy Hospital
Address: 2215 Truxtun Ave.
Bakersfield, CA 93301

Telephone Number: 661-632-5000

Written Contract:	Service:	Base Hospital:	Burn Center:
☒ Yes ☐ No	☐ Referral Emergency ☐ Standby Emergency ☒ Basic Emergency ☐ Comprehensive Emergency	☒ Yes ☐ No	☐ Yes ☒ No

		Trauma Center:	If Trauma Center what level:
Pediatric Critical Care Center[16]	☐ Yes ☒ No	☐ Yes ☒ No	☐ Level I ☐ Level II ☐ Level III ☐ Level IV
EDAP[17]	☐ Yes ☒ No		
PICU[18]	☐ Yes ☒ No		

[16] Meets EMSA *Pediatric Critical Care Center (PCCC) Standards*
[17] Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
[18] Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

Facilities

County: ___Kern_____

Note: *Complete information for each facility by county.* Make copies as needed.

Facility: Mercy Southwest Hospital
Address: 400 Old River Road
Bakersfield, CA 93311

Telephone Number: 661-663-6000

Written Contract:	Service:		Base Hospital:	Burn Center:
■ Yes ☐ No	☐ Referral Emergency ■ Basic Emergency	☐ Standby Emergency ☐ Comprehensive Emergency	■ Yes ☐ No	☐ Yes ■ No

		Trauma Center:	If Trauma Center what level:	
Pediatric Critical Care Center[19]	☐ Yes ■ No	☐ Yes ■ No	☐ Level I ☐ Level III	☐ Level II ☐ Level IV
EDAP[20]	☐ Yes ■ No			
PICU[21]	☐ Yes ■ No			

[19] Meets EMSA *Pediatric Critical Care Center (PCCC) Standards*
[20] Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
[21] Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

Facilities

County: ____Kern_____

Note: *Complete information for each facility by county.* Make copies as needed.

Facility: Ridgecrest Regional Hospital
Address: 1081 N. China Lake Blvd.
Ridgecrest, CA 93555

Telephone Number: 760-446-3551

Written Contract:	Service:		Base Hospital:	Burn Center:
☒ Yes ☐ No	☐ Referral Emergency ☒ Basic Emergency	☐ Standby Emergency ☐ Comprehensive Emergency	☐ Yes ☒ No	☐ Yes ☒ No

		Trauma Center:	If Trauma Center what level:	
Pediatric Critical Care Center[22]	☐ Yes ☒ No	☐ Yes ☒ No	☐ Level I ☐ Level III	☐ Level II ☐ Level IV
EDAP[23]	☐ Yes ☒ No			
PICU[24]	☐ Yes ☒ No			

[22] Meets EMSA *Pediatric Critical Care Center (PCCC) Standards*
[23] Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
[24] Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

Facilities

County: _____Kern_____

Note: *Complete information for each facility by county.* Make copies as needed.

Facility: San Joaquin Community Hospital
Address: 2616 Eye Street
Bakersfield, CA 93303

Telephone Number: 661-395-3000

Written Contract:	Service:	Base Hospital:	Burn Center:
■ Yes ☐ No	☐ Referral Emergency ☐ Standby Emergency ■ Basic Emergency ☐ Comprehensive Emergency	■ Yes ☐ No	■ Yes ☐ No

		Trauma Center:	If Trauma Center what level:
Pediatric Critical Care Center[25]	☐ Yes ■ No	☐ Yes ■ No	☐ Level I ☐ Level II ☐ Level III ☐ Level IV
EDAP[26]	☐ Yes ■ No		
PICU[27]	☐ Yes ■ No		

[25] Meets EMSA *Pediatric Critical Care Center (PCCC) Standards*
[26] Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
[27] Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

Facilities

County: _____Kern_____

Note: *Complete information for each facility by county.* Make copies as needed.

Facility: Tehachapi Valley Healthcare District Hospital
Address: 115 West "E" Street
Tehachapi, CA 93581

Telephone Number: 661-822-3241

Written Contract:	Service:	Base Hospital:	Burn Center:
☒ Yes ☐ No	☐ Referral Emergency ☐ Basic Emergency ☒ Standby Emergency ☐ Comprehensive Emergency	☐ Yes ☒ No	☐ Yes ☒ No

		Trauma Center:	If Trauma Center what level:
Pediatric Critical Care Center[28]	☐ Yes ☒ No	☐ Yes ☒ No	☐ Level I ☐ Level II ☐ Level III ☐ Level IV
EDAP[29]	☐ Yes ☒ No		
PICU[30]	☐ Yes ☒ No		

[28] Meets EMSA *Pediatric Critical Care Center (PCCC) Standards*
[29] Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
[30] Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

TABLE 10: RESOURCES DIRECTORY -- Approved Training Programs

EMS System: Kern **County:** Kern **Reporting Year:** 2012

NOTE: Table 10 is to be completed by county. Make copies to add pages as needed.

Training Institution Name University of Antelope Valley – Rosamond Campus – Paramedic Training Program

Address 1431 Rosamond Boulevard, Suite 18
Rosamond, CA 93560

Contact Person telephone no. Marco Johnson, Director
661-726-1911

Student Eligibility: *
-Open to general public that meet entry requirements
-1 yr experience as 911 EMT-I
-Pass entrance exam (basic math, reading comprehension, EMT-I)
-College A& with grade of C or better or paramedic prep course
-Letter of recommendation form EMS employer

Cost of Program
Basic $8,020 plus $75.00

Program Level: Paramedic Training Program
Number of students completing training per year:
Initial training: 30
Expiration Date: 9/30/2013

Number of courses: 2 per year
Initial training: 2 per year

Training Institution Name Bakersfield College – Allied Health – Paramedic Training Program

Address 1801 Panorama Drive
Bakersfield, CA 93305

Contact Person telephone no. Cindy Collier, RN, Director
661-395-4281

Student Eligibility: *
-Open to general public that meet entry requirements
-1 year experience as EMT-I
-Pass entrance exam (basic math, reading comprehension, EMT-I)
- Oral interview

Cost of Program
Basic $5,000 plus $75.00

Program Level: Paramedic Training Program
Number of students completing training per year:
Initial training: 48
Expiration Date: 9/30/2013

Number of courses: 2 per year
Initial training: 2 per year

- Open to general public or restricted to certain personnel only.
- ** Indicate whether EMT-I, EMT-II, EMT-P, or MICN; if there is a training program that offers more than one level complete all information for each level.

Training Institution Name Bakersfield College – Allied Health – EMT-1 Training Program

Address 1801 Panorama Drive
Bakersfield, CA 93305

Contact Person telephone no. Cindy Collier, RN, Director
661-395-4281

Student Eligibility: *	**Cost of Program**	**Program Level: EMT-1 Basic & Refresher**
Open to general public that meet entry requirements	Basic $270.00 plus books Refresher $36.00	Number of students completing training per year: Initial training: 74 Refresher: 10 Cont. Education ____ Expiration Date: 11/30/2015 Number of courses: 6 Initial training: 4 Refresher: 2 Cont. Education: ____

Training Institution Name Bakersfield College – Fire Technology – EMT-1 Training Program

Address 1801 Panorama Drive
Bakersfield, CA 93305

Contact Person telephone no. Tim Capehart
661-395-4029

Student Eligibility: *	**Cost of Program**	**Program Level: EMT-1 Basic & Refresher**
Open to general public that meet entry requirements	Basic $144.00 plus books Refresher $36.00	Number of students completing training per year: Initial training: 90 Refresher: 30 Cont. Education ____ Expiration Date: 11/30/2015 Number of courses: 5 Initial training: 3 Refresher: 2 Cont. Education: ____

Training Institution Name Taft College EMT-1 Training Program

Address 29 Emmons Park Drive
Taft, CA 93268

Contact Person telephone no. Jeff Fariss, Paramedic
661-243-5014

Student Eligibility: *	**Cost of Program**	**Program Level: EMT-1 Basic & Refresher**
Open to general public that meet entry requirements	Basic $198.00 plus books Refresher $54.00	Number of students completing training per year: Initial training: 15 Refresher: 4 Cont. Education ____ Expiration Date: 11/30/2015 Number of courses: 4 Initial training: 2 Refresher: 2 Cont. Education: ____

Training Institution Name China Lake NWC EMT-1 Training Program

Address Code 842
China Lake, CA 93555

Contact Person telephone no. Chief Scott Edwards
760-939-5353

Student Eligibility: *	**Cost of Program**	**Program Level: EMT-1 Basic & Refresher**
Open to general public that meet entry requirements	Basic Free to staff Refresher Free to staff	Number of students completing training per year: Initial training: 20 Refresher: 17 Cont. Education 1/31/2016 Number of courses: 2 Initial training: 1 Refresher: 1 Cont. Education: ____

Training Institution Name Cerro Coso College EMT-1 Training Program

Address 3000 College Heights Blvd
Ridgecrest, CA 93555

Contact Person telephone no. Mike Metcalf
760-384-6100 ext. 6304

Student Eligibility: *	**Cost of Program**	**Program Level:** EMT-1 Basic & Refresher
Open to general public that meet entry requirements	Basic $198.00 plus books Refresher $54.00	Number of students completing training per year: Initial training: 68 Refresher: 25 Cont. Education ____ Expiration Date: 2/28/2016 Number of courses: 10 Initial training: 8 Refresher: 2 Cont. Education: ____

Training Institution Name Kern County EMS Department – MICN Training Program

Address 1800 Mount Vernon Avenue
Bakersfield, CA 93301

Contact Person telephone no. Jeff Fariss
661-868-5201

Student Eligibility: *	**Cost of Program**	**Program Level:** MICN Basic & Refresher
Open to RN personnel that meet entry requirements	Basic $70.00 Refresher $45.00	Number of students completing training per year: Initial training: 25 Refresher: 25 Cont. Education ____ Expiration Date: None Number of courses: 4 Initial training: 2 Refresher: 2 Cont. Education: ____

TABLE 9: RESOURCES DIRECTORY -- Dispatch Agency

EMS System: Kern **County:** Kern **Reporting Year:** 2012

NOTE: Make copies to add pages as needed. Complete information for each provider by county.

Name, address & telephone: **KERN COUNTY EMERGENCY COMMUNICATIONS CENTER** – 2601 Panorama Drive – Bakersfield, CA 93306 – (661) 861-2521		**Primary Contact:** Deputy Chief Mike Miller	
Written Contract: ☐ yes **X** no	Medical Director: ☐ yes x no	**X** Day-to-day **X** Disaster	Number of Personnel providing services: 22 EMD Training ____ EMT-D ____ ALS ____ BLS ____ LALS ____ Other
Ownership: **X** Public ☐ Private		If public: **X** Fire ☐ Law ☐ Other explain:____	If public: **X** city; **X** county; ☐ state; ☐ fire district; ☐ Federal Joint City & County Fire Communications Center

Name, address & telephone: **DELANO AMBULANCE SERVICE** – 403 Main Street – Delano, CA – (661) 725-3374		**Primary Contact:** Aaron Moses	
Written Contract: **X** yes ☐ no	Medical Director: ☐ yes x no	**X** Day-to-day **X** Disaster	Number of Personnel providing services: 6 EMD Training ____ EMT-D ____ ALS ____ BLS ____ LALS ____ Other
Ownership: ☐ Public **X** Private		If public: ☐ Fire ☐ Law ☐ Other explain:____	If public: ☐ city; ☐ county; ☐ state; ☐ fire district; ☐ Federal

Name, address & telephone: **HALL AMBULANCE SERVICE** – 1001 – 21st Street – Bakersfield, CA 93301 – (661) 327-4111		**Primary Contact:** Jennifer Lafavor	
Written Contract: **X** yes ☐ no	Medical Director: **X** yes ☐ no	**X** Day-to-day **X** Disaster	Number of Personnel providing services: 18 EMD Training ____ EMT-D ____ ALS ____ BLS ____ LALS ____ Other
Ownership: ☐ Public **X** Private		If public: ☐ Fire ☐ Law ☐ Other explain:____	If public: ☐ city; ☐ county; ☐ state; ☐ fire district; ☐ Federal

Name, address & telephone: **Primary Contact:** Brandon Wainwright **KERN AMBULANCE SERVICE** – 2324 7th Street – Wasco, CA 93280 – (661) 758-3200			
Written Contract: **X** yes ☐ no	Medical Director: ☐ yes x no	**X** Day-to-day **X** Disaster	Number of Personnel providing services: __4__ EMD Training _____ EMT-D _____ ALS _____ BLS _____ LALS _____ Other
Ownership: ☐ Public **X** Private		If public: ☐ Fire ☐ Law ☐ Other explain:_____	If public: ☐ city; ☐ county; ☐ state; ☐ fire district; ☐ Federal

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or subarea (Zone) Name or Title: Operational Area #1
Name of Current Provider(s): Kern Ambulance Service
Area or subarea (Zone) Geographic Description: Areas including and surrounding Wasco and Lost Hills. Please refer to the attached Ground Ambulance Service Operational Area Map.
Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Exclusive
Type of Exclusivity, Emergency Ambulance, ALS or LALS (HS 1797.85): All ground ambulance service
Method to achieve Exclusivity, if applicable (HS 1797.224): Kern Ambulance Service was selected as the exclusive provider without a competitive process. The provider meets all of the requirements for non-competitive selection under Section 1797.224, H&SC criteria, and additional local criteria established by Kern County Resolution No. 2005-065 adopted February 22, 2005.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or subarea (Zone) Name or Title: Operational Area #2
Name of Current Provider(s): Hall Ambulance Service
Area or subarea (Zone) Geographic Description: Area including and surrounding Shafter and Buttonwillow. Please refer to the attached Ground Ambulance Service Operational Area Map.
Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Exclusive
Type of Exclusivity, Emergency Ambulance, ALS or LALS (HS 1797.85): All ground ambulance service
Method to achieve Exclusivity, if applicable (HS 1797.224): Hall Ambulance Service was selected as the exclusive provider without a competitive process. The provider meets all of the requirements for non-competitive selection under Section 1797.224, H&SC criteria, and additional local criteria established by Kern County Resolution No. 2005-065 adopted February 22, 2005.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or subarea (Zone) Name or Title: Operational Area #3
Name of Current Provider(s): Delano Ambulance Service
Area or subarea (Zone) Geographic Description: Area including and surrounding Delano and McFarland. Please refer to the attached Ground Ambulance Service Operational Area Map.
Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Exclusive
Type of Exclusivity, Emergency Ambulance, ALS or LALS (HS 1797.85): All ground ambulance service.
Method to achieve Exclusivity, if applicable (HS 1797.224): Delano Ambulance Service was selected as the exclusive provider without a competitive process. The provider meets all of the requirements for non-competitive selection under Section 1797.224, H&SC criteria, and additional local criteria established by Kern County Resolution No. 2005-065 adopted February 22, 2005.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or subarea (Zone) Name or Title: Operational Area #4
Name of Current Provider(s): Hall Ambulance Service
Area or subarea (Zone) Geographic Description: Area including and surrounding northwest, central, and west Bakersfield. Please refer to the attached Ground Ambulance Service Operational Area Map.
Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Exclusive
Type of Exclusivity, Emergency Ambulance, ALS or LALS (HS 1797.85): All ground ambulance service,
Method to achieve Exclusivity, if applicable (HS 1797.224): Hall Ambulance Service was selected as the exclusive provider without a competitive process. The provider meets all of the requirements for non-competitive selection under Section 1797.224, H&SC criteria, and additional local criteria established by Kern County Resolution No. 2005-065 adopted February 22, 2005.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or subarea (Zone) Name or Title: Operational Area #5
Name of Current Provider(s): Hall Ambulance Service
Area or subarea (Zone) Geographic Description: Area including and surrounding east and northeast Bakersfield. Please refer to the attached Ground Ambulance Service Operational Area Map.
Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Exclusive
Type of Exclusivity, Emergency Ambulance, ALS or LALS (HS 1797.85): All ground ambulance service.
Method to achieve Exclusivity, if applicable (HS 1797.224): Hall Ambulance Service was selected as the exclusive provider without a competitive process. The provider meets all of the requirements for non-competitive selection under Section 1797.224, H&SC criteria, and additional local criteria established by Kern County Resolution No. 2005-065 adopted February 22, 2005.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or subarea (Zone) Name or Title: Operational Area #6
Name of Current Provider(s): CARE Ambulance Service
Area or subarea (Zone) Geographic Description: Area including and surrounding Isabella, Kernville, Wofford Heights, Bodfish, Mountain Mesa, Southlake, Onyx, Weldon and Canebrake. Please refer to the attached Ground Ambulance Service Operational Area Map.
Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Exclusive
Type of Exclusivity, Emergency Ambulance, ALS or LALS (HS 1797.85): All ground ambulance service.
Method to achieve Exclusivity, if applicable (HS 1797.224): CARE Ambulance Service was selected as the exclusive provider without a competitive process. The provider meets all of the requirements for non-competitive selection under Section 1797.224, H&SC criteria, and additional local criteria established by Kern County Resolution No. 2005-065 adopted February 22, 2005.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or subarea (Zone) Name or Title: Operational Area #7
Name of Current Provider(s): Liberty Ambulance Service
Area or subarea (Zone) Geographic Description: Area including and surrounding Ridgecrest and Inyokern. Please refer to the attached Ground Ambulance Service Operational Area Map.
Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Exclusive
Type of Exclusivity, Emergency Ambulance, ALS or LALS (HS 1797.85): All ground ambulance service.
Method to achieve Exclusivity, if applicable (HS 1797.224): Liberty Ambulance Service was selected as the exclusive provider without a competitive process. The provider meets all of the requirements for non-competitive selection under Section 1797.224, H&SC criteria, and additional local criteria established by Kern County Resolution No. 2005-065 adopted February 22, 2005.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or subarea (Zone) Name or Title: Operational Area #8
Name of Current Provider(s): Hall Ambulance Service
Area or subarea (Zone) Geographic Description: Area including and surrounding Lamont. Arvin, Tehachapi, Mettler and Frazier Park. Please refer to the attached Ground Ambulance Service Operational Area Map.
Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Exclusive
Type of Exclusivity, Emergency Ambulance, ALS or LALS (HS 1797.85): All ground ambulance service.
Method to achieve Exclusivity, if applicable (HS 1797.224): Hall Ambulance Service was selected as the exclusive provider without a competitive process. The provider meets all of the requirements for non-competitive selection under Section 1797.224, H&SC criteria, and additional local criteria established by Kern County Resolution No. 2005-065 adopted February 22, 2005.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or subarea (Zone) Name or Title: Operational Area #9
Name of Current Provider(s): Hall Ambulance Service
Area or subarea (Zone) Geographic Description: Area including and surrounding Taft, Maricopa and McKittrick. Please refer to the attached Ground Ambulance Service Operational Area Map.
Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Exclusive
Type of Exclusivity, Emergency Ambulance, ALS or LALS (HS 1797.85): All ground ambulance service.
Method to achieve Exclusivity, if applicable (HS 1797.224): Hall Ambulance Service was selected as the exclusive provider without a competitive process. The provider meets all of the requirements for non-competitive selection under Section 1797.224, H&SC criteria, and additional local criteria established by Kern County Resolution No. 2005-065 adopted February 22, 2005.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or subarea (Zone) Name or Title: Operational Area #11
Name of Current Provider(s): Hall Ambulance Service
Area or subarea (Zone) Geographic Description: Area including and surrounding California City, Mojave, Rosamond and Boron. Please refer to the attached Ground Ambulance Service Operational Area Map.
Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Exclusive
Type of Exclusivity, Emergency Ambulance, ALS or LALS (HS 1797.85): All ground ambulance service.
Method to achieve Exclusivity, if applicable (HS 1797.224): Hall Ambulance Service was selected as the exclusive operational area provider as a result of a competitive process awarded May 19, 1994. At that time, the LEMSA issued an ambulance permit to Hall Ambulance Service to operate as the ambulance provider for Area 11. The Board of Supervisors substituted the ambulance permit with a performance contract on September 21, 2006. The performance contract will expire June 30, 2019 unless terminated, modified, or renewed by the Board of Supervisors.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

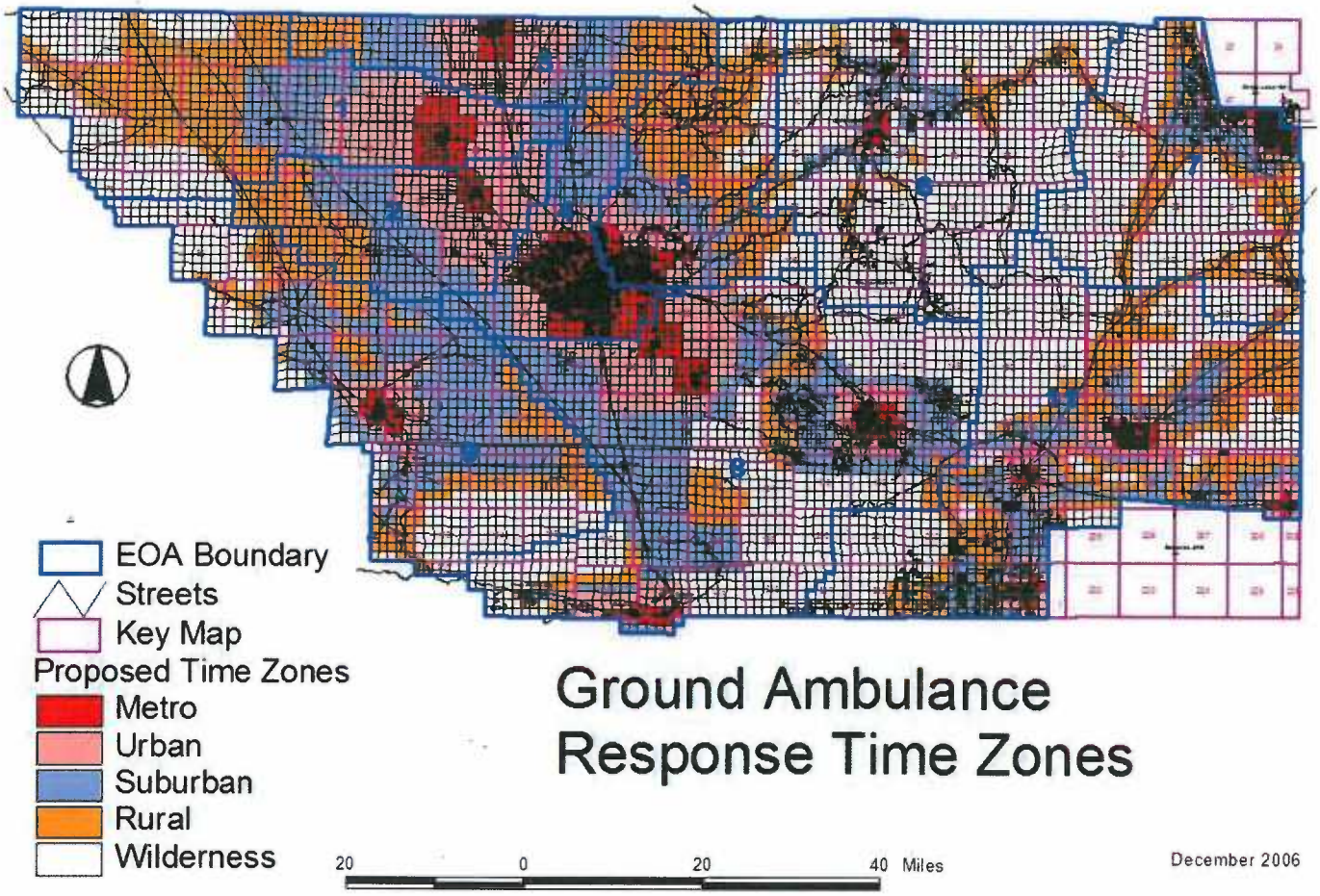
In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or Subarea (Zone) Name or Title: Rotor-Wing EMS Aircraft Operational Area "A"
Name of Current Provider(s): Hall Critical Care Transport, Inc.
Area or Subarea (Zone) Geographic Description: Central and Western Kern County
Statement of Exclusivity (Exclusive or Non-Exclusive [HS 1797.6]): Exclusive
Type of Exclusivity (Emergency Ambulance, ALS, or LALS [HS 1797.85]): Emergency and non-emergency rotor-wing air ambulance service.
Method to achieve exclusivity, if applicable (HS 1797.224): • Competitively-determined by a formal Request For Proposal (RFP) process. • The RFP was approved by EMS Authority. • The contract was awarded to Hall Critical Care Transport, Inc.

EMS PLAN
AMBULANCE ZONE SUMMARY FORM

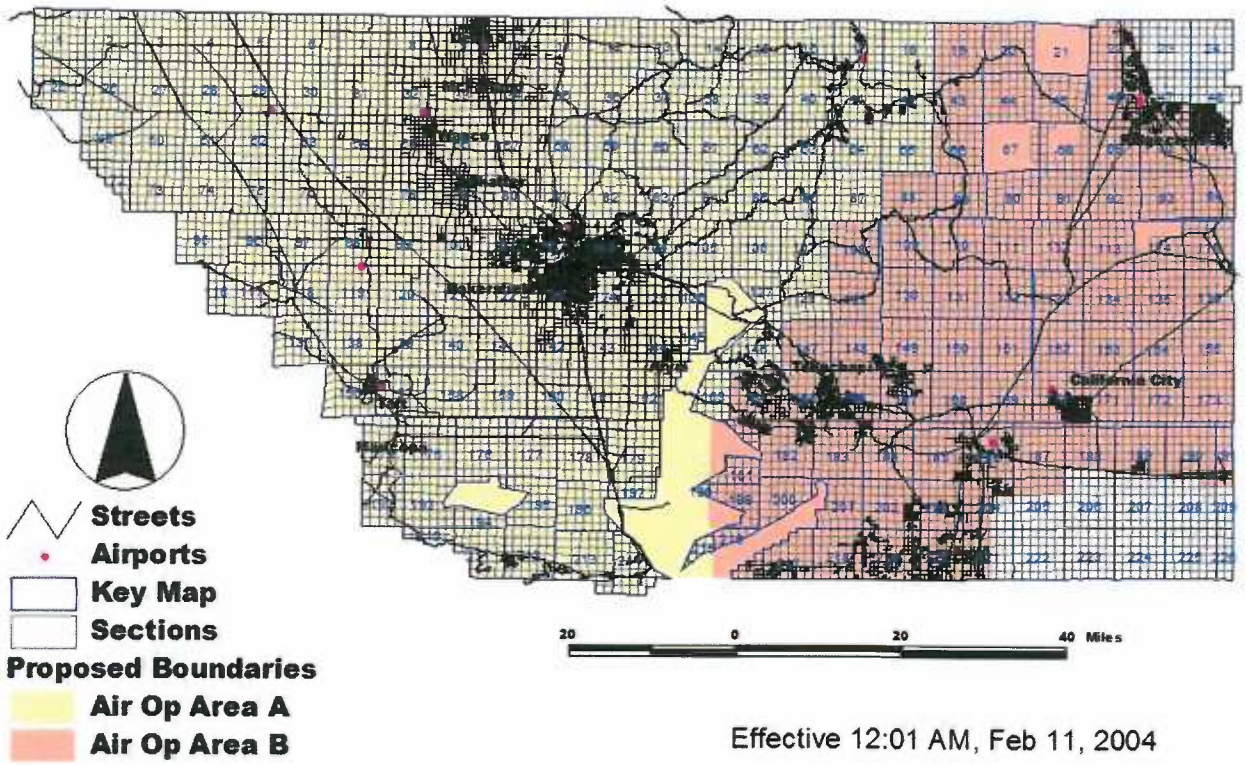
In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. Please include a separate form for each exclusive and/or nonexclusive zone.

Local EMS Agency or County Name: Emergency Medical Services Division, County of Kern
Area or Subarea (Zone) Name or Title: Rotor-Wing EMS Aircraft Operational Area "B"
Name of Current Provider(s): Mercy Air Service, Inc.
Area or Subarea (Zone) Geographic Description: Central and Eastern Kern County
Statement of Exclusivity (Exclusive or Non-Exclusive [HS 1797.6]): Exclusive
Type of Exclusivity ("Emergency Ambulance," "ALS," or "LALS" [HS 1797.85]): Emergency and non-emergency rotor-wing air ambulance service.
Method to achieve exclusivity, if applicable (HS 1797.224): • Competitively-determined by a formal Request For Proposal (RFP) process. • The RFP was approved by the EMS Authority. • The contract was awarded to Mercy Air Service, Inc.


EOA Boundary
Streets
Key Map
Proposed Time Zones
Metro
Urban
Suburban
Rural
Wilderness
Ground Ambulance
Response Time Zones
20
0
20
40 Miles
December 2006

EMS Air Operation Boundary

Kern County Emergency Medical Services Dept.
February 10, 2004



Effective 12:01 AM, Feb 11, 2004