

**EMERGENCY MEDICAL SERVICES AUTHORITY**

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September 9, 2016

Ms. Kris Mangano, EMS Coordinator  
San Benito County EMS Agency  
471 Fourth Street  
Hollister, CA 95023

Dear Ms. Mangano:

This letter is in response to San Benito County's 2015 EMS Plan submission to the EMS Authority on July 27, 2016.

**I. Introduction and Summary:**

The EMS Authority has concluded its review of San Benito County's 2015 EMS Plan and is approving the plan as submitted. Please note that the Multi-Casualty Incident (MCI) Plan that was submitted with the EMS Plan is not part of the EMS Plan, and therefore, was not included in this review; the MCI Plan was forwarded to the EMS Authority's Disaster Medical Services Division.

**II. History and Background:**

San Benito County received its last full plan approval for its 2008 plan submission, and its last annual plan update for its 2012 plan submission.

Historically, we have received EMS Plan submissions from San Benito County for the following years:

- 1999
- 2001
- 2002
- 2004
- 2007
- 2008
- 2010
- 2012

California Health and Safety Code (H&SC) § 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&SC § 1797.105(b).

### **III. Analysis of EMS System Components:**

Following are comments related to San Benito County's 2015 EMS Plan. Areas that indicate the plan submitted is concordant and consistent with applicable guidelines or regulations, H&SC § 1797.254, and the EMS system components identified in H&SC § 1797.103, are indicated below:

	Not	
Approved	Approved	
A. <input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>System Organization and Management</u>

B.   Staffing/Training

C.   Communications

D.   Response/Transportation

#### 1. Ambulance Zones

- Based on the documentation provided by San Benito County, please find enclosed the EMS Authority's determination of the exclusivity of San Benito County's EMS Agency's ambulance zones.

E.   Facilities/Critical Care

F.   Data Collection/System Evaluation

G.   Public Information and Education

H.   Disaster Medical Response

### **IV. Conclusion:**

Based on the information identified, San Benito County's 2015 EMS Plan is approved.

Pursuant to H&SC § 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:**

San Benito County's next annual EMS Plan Update will be due on or before September 30, 2017. If you have any questions regarding the plan review, please contact Ms. Lisa Galindo, EMS Plans Coordinator, at (916) 431-3688.

Sincerely,

A handwritten signature in blue ink that reads "Daniel R. Smiley" followed by a stylized flourish.

Howard Backer, MD, MPH, FACEP  
Director

Enclosure

2015 San Benito EMS Transportation Plan  
Approved

ZONE	EXCLUSIVITY			TYPE		LEVEL									
	Non-Exclusive	Exclusive	Method to Achieve Exclusivity	Emergency Ambulance	ALS	LALS	All Emergency Services	9-1-1 Emergency Response	7-digit Emergency Response	ALS Ambulance	All CCT Ambulance Services	BLS Non-Emergency and IFT	Standby Service with Transport Authorization	All Air Ambulance	Emergency Air Ambulance
San Benito County										X					
San Benito County	X		Non-Competitive	X				X			X				

San Benito County  
EMERGENCY MEDICAL SERVICES  
471 Fourth Street  
Hollister, CA 95023



# 2015 EMS Plan

July 2016

Kris Mangano, EMS Coordinator  
T: (831) 636-4168 E: [kmangano@cosb.us](mailto:kmangano@cosb.us)



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**EMERGENCY MEDICAL SERVICES DIVISION**

Dave Ghilarducci, MD, FACEP  
Medical Director

July 26, 2016

Howard Backer, MD, MPH, FACEP  
Director  
Emergency Medical Services Authority  
10901 Gold Center Drive, Suite 400  
Rancho Cordova, CA 95670

Subject: 2015 EMS Plan

Dear Dr. Backer,

The 2015 San Benito County EMS Plan is enclosed. The plan provides information relevant to the time period of January 1, 2015 - December 31, 2015. The EMS Plan generally meets or exceeds the State EMS Authority's minimum standards and recommended guidelines.

I appreciate the assistance of your staff during this process. Please do not hesitate to contact me with any questions or concerns.

Sincerely,

Kris Mangano  
EMS Coordinator

Enclosure

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## EMERGENCY MEDICAL SERVICES DIVISION

Dave Ghilarducci, MD, FACEP  
Medical Director

### EXECUTIVE SUMMARY

San Benito County Emergency Services experienced leadership changes in 2015, when the EMS Manager retired. In December 2015, the Office of Emergency Services (OES) and Emergency Medical Services (EMS) were combined into one organization. Kris Mangano was hired as the new EMS Coordinator in February 2016. In the months since, a lot of work has been done to reconcile the budget, assure financial responsibility, and analyze the needs of the EMS Division of OES.

The San Benito County Emergency Medical Services Division of the Office of Emergency Services serves as the lead agency for the countywide Emergency Medical Services program. EMS is responsible for coordinating all system participants within the county and is also responsible for planning, implementing, monitoring, and evaluating the local EMS system. We provide efficient and timely pre-hospital emergency medical services to our residents and visitors through universal 911 access.

Hazel Hawkins Memorial Hospital, our only local hospital, recently implemented a “Stroke Ready” program, providing patients suffering from stroke or other neurologic emergencies immediate access via telemedicine. Utilizing “InTouch TeleStroke” equipment, board certified, fellowship trained neurologist are available 24/7. Hazel Hawkins Memorial Hospital has plans to become a certified Stroke Center in the future.

Another notable accomplishment was the implementation of 12 Lead ECGs to identify STEMI. Confirmed or suspected STEMI patients are transported directly to the appropriate facility either by ground or air.

Our future plans include the designation of a Level IV Trauma Center at Hazel Hawkins Memorial Hospital, our community hospital, in early 2017. Hazel Hawkins Memorial Hospital is actively pursuing this designation.

We continue to closely monitor our system as we saw a call volume increase of 24% over 2014. EMS predicts this trend will continue and the potential for additional resources will be needed in the near future.

### SYSTEM ASSESSMENT

This section provides a summary of how the San Benito County EMS system complies with the State of California’s EMS Systems Standards and Guidelines.

A complete narrative is included for each standard not currently meeting standards or that include a short or long range plan. The objectives listed will be used to guide the LEMSA in monitoring and improving the EMS system over the next year.

SECTION 1  
ASSESSMENT OF SYSTEM

**TABLE 1: MINIMUM STANDARDS/RECOMMENDED GUIDELINES**

**A. SYSTEM ORGANIZATION AND MANAGEMENT**

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

**TABLE 1: MINIMUM STANDARDS/RECOMMENDED GUIDELINES**

**A. SYSTEM ORGANIZATION AND MANAGEMENT (continued)**

	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
1.20 DNR Policy		✓			
1.21 Determination of Death		✓			
1.22 Reporting of Abuse		✓			
1.23 Interfacility Transfer		✓			
<b>Enhanced Level: Advanced Life Support</b>					
1.24 ALS Systems		✓			
1.25 On-Line Medical Direction		✓	✓		
<b>Enhanced Level: Trauma Care System:</b>					
1.26 Trauma System Plan		✓			
<b>Enhanced Level: Pediatric Emergency Medical and Critical Care System:</b>					
1.27 Pediatric System Plan		✓			
<b>Enhanced Level: Exclusive Operating Areas:</b>					
1.28 EOA Plan		✓			

**TABLE 1: MINIMUM STANDARDS/RECOMMENDED GUIDELINES**

**B. STAFFING/TRAINING**

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

**TABLE 1: MINIMUM STANDARDS/RECOMMENDED GUIDELINES**

**C. COMMUNICATIONS**

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

**TABLE 1: MINIMUM STANDARDS/RECOMMENDED GUIDELINES**

**D. RESPONSE/TRANSPORTATION**

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
<b>Universal Level:</b>						
4.01	Service Area Boundaries*		✓	✓		
4.02	Monitoring		✓	✓		
4.03	Classifying Medical Requests		✓			
4.04	Prescheduled Responses		✓			
4.05	Response Time*		✓	✓		
4.06	Staffing		✓			
4.07	First Responder Agencies		✓			
4.08	Medical & Rescue Aircraft*		✓			
4.09	Air Dispatch Center		✓			
4.10	Aircraft Availability*		✓			
4.11	Specialty Vehicles*		✓			
4.12	Disaster Response		✓			
4.13	Intercounty Response*		✓			
4.14	Incident Command System		✓			
4.15	MCI Plans		✓			
<b>Enhanced Level: Advanced Life Support:</b>						
4.16	ALS Staffing		✓	✓		
4.17	ALS Equipment		✓			
<b>Enhanced Level: Ambulance Regulation:</b>						
4.18	Compliance		✓			
<b>Enhanced Level: Exclusive Operating Permits:</b>						
4.19	Transportation Plan		✓			
4.20	"Grandfathering"		✓			
4.21	Compliance		✓			
4.22	Evaluation		✓			

**TABLE 1: MINIMUM STANDARDS/RECOMMENDED GUIDELINES**

**E. FACILITIES/CRITICAL CARE**

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

**TABLE 1: MINIMUM STANDARDS/RECOMMENDED GUIDELINES**

**F. DATA COLLECTION/SYSTEM EVALUATION**

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

**TABLE 1: MINIMUM STANDARDS/RECOMMENDED GUIDELINES****G. PUBLIC INFORMATION AND EDUCATION**

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

**TABLE 1: MINIMUM STANDARDS/RECOMMENDED GUIDELINES**

**H. DISASTER MEDICAL RESPONSE**

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

SECTION 2  
SYSTEM ASSESSMENT FORMS

**1.01 LEMSA STRUCTURE**

**MINIMUM STANDARDS:**

Each local EMS agency shall have a formal organization structure which includes both agency staff and non-agency resources and which includes appropriate technical and clinical expertise.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County Emergency Medical Services Division is under the Office of Emergency Services. The agency staff is comprised of a Medical Director, an EMS Coordinator and 1.0 full time Secretary. Other non-agency resources include the Base Hospital Medical Director, Base Hospital Nurse Liaison, the QI Sub-Committee and the EMCC Board.

**NEED(S): None**

**OBJECTIVE: N/A**

**TIME FRAME FOR MEETING OBJECTIVE: N/a**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.02 LEMSA MISSION**

**MINIMUM STANDARDS:**

Each local EMS agency shall plan, implement, and evaluate the EMS system. The agency shall use its quality assurance/quality improvement (QA/QI) and evaluation processes to identify system changes.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Continuous Quality Improvement (CQI) is intended to measure where the EMS system is, and explores ways to make the system perform better or more efficiently. The LEMSA attends CQI meetings which covers personnel and events for air and ground ambulance providers. San Benito County EMS is continuously evaluated through the oversight of the Emergency Medical Care Committee (EMCC).

**NEED(S): None**

**OBJECTIVE: N/A**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

1.03 PUBLIC INPUT

**MINIMUM STANDARDS:**

Each local EMS agency shall have a mechanism (including EMCCs and other sources) to seek and obtain appropriate consumer and health care provider input regarding the development of plans, policies and procedures, as described in the State EMS Authority's EMS Systems Standards and Guidelines.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County Emergency Medical Care Commission (EMCC) provides advice and recommendations on EMS system planning and oversight to the Board of Supervisors. The EMCC includes representatives from Law Enforcement, Fire Protection, Air and Ground Ambulance, Public Health, Behavioral Health, the hospital, American Red Cross, State Parks, Bureau of Land Management, Public Safety (Dispatch Center) County Board of Supervisors and a member-at-large. Subcommittees of the EMCC are used when necessary. A standing committee, the Prehospital Advisory Committee (PAC), assists the EMS Medical Director in developing medical standards of practice for basic and advanced life support personnel.

**NEED(S): None**

**OBJECTIVE: N/A**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**1.04 MEDICAL DIRECTOR**

**MINIMUM STANDARDS:**

Each local EMS agency shall appoint a medical director who is a licensed physician who has substantial experience in the practice of emergency medicine.

**RECOMMENDED GUIDELINES:**

The local EMS agency medical director should have administrative experience in emergency medical services systems.

Each local EMS agency medical director should establish clinical specialty advisory groups composed of physicians with appropriate specialties and non-physician providers (including nurses and pre-hospital providers), and/or should appoint medical consultants with expertise in trauma care, pediatrics, and other areas, as needed.

**CURRENT STATUS: Meets Minimum Standard**

Dr. David Ghilarducci, MD, FACEP, currently serves as the EMS Medical Director. A contract is in place that specifies the parameters of the EMS Medical Director. Dr. Ghilarducci is Board Certified in Emergency Medicine and serves as the Medical Director in the Emergency Department at a neighboring hospital. The medical director attends the Base Station meetings, PAC meeting and EMCC meetings. He communicates regularly with EMS staff.

**NEED(S): None**

**OBJECTIVE: N/A**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**1.05 SYSTEM PLAN**

**MINIMUM STANDARDS:**

Each local EMS agency shall develop an EMS System Plan, based on community need and utilization of appropriate resources, and shall submit it to the EMS Authority.

The plan shall:

assess how the current system meets these guidelines,  
identify system needs for patients within each of the targeted clinical categories (as identified in Section II), and  
provide a methodology and time-line for meeting these needs.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Completion of this plan fulfills the requirements of this standard.

**NEED(S):**

Continue to ensure the EMS System Plan meets the needs of the community and provides for the appropriate utilization of resources.

**OBJECTIVE:**

Monitor and amend the EMS System Plan as needed.

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.06 ANNUAL PLAN UPDATE**

**MINIMUM STANDARDS:**

Each local EMS agency shall develop an annual update to its EMS System Plan and shall submit it to the EMS Authority. The update shall identify progress made in plan implementation and changes to the planned system design.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

This newly developed EMS System Plan is a complete and full five-year plan.

**NEED(S):**

Annually update the EMS System Plan to include any major changes in the system from the previous year.

**OBJECTIVE:**

Submit an annual update of the EMS System Plan to the State EMS Authority, which reflects system changes and progress made in meeting plan objectives.

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**1.07 TRAUMA PLANNING**

**MINIMUM STANDARDS:**

The local EMS agency shall plan for trauma care and shall determine the optimal system design for trauma care in its jurisdiction.

**RECOMMENDED GUIDELINES:**

The local EMS agency should designate appropriate facilities or execute agreements with trauma facilities in other jurisdictions.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS developed a Trauma Care System Plan for San Benito County which was submitted and approved by the California EMS Authority on June 16, 2016.

The Trauma Care System Plan is designed to build upon the current EMS system, making changes to policies and practices to meet the requirements of current trauma regulations, and correcting identified issues.

Currently the population and the capabilities of the one licensed general acute care facility in the County of San Benito County does not support the establishment of trauma centers or other specialty care centers. However, we plan to designate a Level IV Trauma Center at Hazel Hawkins Memorial Hospital in Hollister within the next year.

**COORDINATION WITH OTHER EMS AGENCIES:**

San Benito County is dependent on neighboring LEMSAs for trauma and specialty services. San Benito County EMS utilizes air and ground ambulances to transport patients to Trauma Centers in other counties.

**NEED(S): None**

**OBJECTIVE:**

Designate Hazel Hawkins Memorial Hospital as a Level IV Trauma Center.

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**1.08 ALS PLANNING**

**MINIMUM STANDARDS:**

Each local EMS agency shall plan for eventual provision of advanced life support services throughout its jurisdiction.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Advanced Life Support (ALS) ambulances are the standard for emergency 911 medical requests in San Benito County.

**COORDINATION WITH OTHER EMS AGENCIES:**

San Benito County has an Auto Aid Agreement with Monterey County for automatic ALS response to portions of San Benito County. San Benito, Monterey, Santa Cruz and Santa Clara Counties routinely corroborate with each other regarding mutual aid.

**NEED(S): None**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.09 INVENTORY OF RESOURCES**

**MINIMUM STANDARDS:**

Each local EMS agency shall develop a detailed inventory of EMS resources (e.g., personnel, vehicles, and facilities) within its area and, at least annually, shall update this inventory.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS shares a resource directory with the San Benito County Office of Emergency Services. Both agencies review and update the directory annually. The 911 contracted provider updates their inventory of ambulances and personnel annually in the required Annual Report.

**NEED(S): None**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.10 SPECIAL POPULATIONS**

**MINIMUM STANDARDS:**

Each local EMS agency shall identify population groups served by the EMS system which require specialized services (e.g., elderly, handicapped, children, non-English speakers).

**RECOMMENDED GUIDELINES:**

Each local EMS agency should develop services, as appropriate, for special population groups served by the EMS system which require specialized services (e.g., elderly, handicapped, children, non-English speakers).

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS shares the directory created by the San Benito County Office of Emergency Services that identifies the various special needs population. Translation services are available through Santa Cruz Regional 911 (SCR911), our contracted dispatch center.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

### 1.11 SYSTEM PARTICIPANTS

#### MINIMUM STANDARDS:

Each local EMS agency shall identify the optimal roles and responsibilities of system participants.

#### RECOMMENDED GUIDELINES:

Each local EMS agency should ensure that system participants conform with their assigned EMS system roles and responsibilities, through mechanisms such as written agreements, facility designations, and exclusive operating areas.

#### CURRENT STATUS: Meets Minimum Standard

The roles and responsibilities of the system participants providing Advanced Life Support (ALS) services are identified in various policies, procedures and performance standards developed by the San Benito County EMS Agency. The sole emergency ambulance service provider has a written agreement with the County to provide ALS ambulance service for the county-wide EOA. The inter-facility ambulance providers are licensed and subject to the County's Ambulance Ordinance, in addition to EMS policies. The local hospital, Hazel Hawkins Memorial Hospital, has a written agreement with the County to provide paramedic base hospital services for the ALS program.

**NEED(S):** None

**OBJECTIVE:** n/a

#### TIME FRAME FOR MEETING OBJECTIVE:

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.12 REVIEW AND MONITORING**

**MINIMUM STANDARDS:**

Each local EMS agency shall provide for review and monitoring of EMS system operations.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Response time standards are in place with the EOA. The San Benito County EMCC continues to evaluate response, care and transport, and identify system problems and seek solutions. The San Benito County Prehospital Advisory Committee (PAC) monitors and reviews system operations with a focus on CQI, policy and procedure review. The Continuous Quality Improvement Committee (CQI) comprised of representatives of all system participants focuses on QI, policy and procedure review.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.13 COORDINATION**

**MINIMUM STANDARDS:**

Each local EMS agency shall coordinate EMS system operations.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

System operations are coordinated through written agreements with providers, facilities and counties. Active coordination is achieved by committee involvement around policy and procedure development, and coordination with provider agencies and facilities.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.14 POLICY & PROCEDURES MANUAL**

**MINIMUM STANDARDS:**

Each local EMS agency shall develop a policy and procedures manual that includes all EMS agency policies and procedures. The agency shall ensure that the manual is available to all EMS system providers (including public safety agencies, ambulance services, and hospitals) within the system.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Policy & Procedures manual has been developed and is available on the county website at [www.cosb.us](http://www.cosb.us) and on an App available for download on smartphones. Our PAC discusses and reviews policy and protocol revision, and to allow for stakeholder input, all policies and procedures are shared at Base Station and EMCC meetings before being finalized. Procedural updates happen annually, and are introduced at our Infrequently Used Skills meeting.

**NEED(S): None**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**1.15 COMPLIANCE WITH POLICIES**

**MINIMUM STANDARDS:**

Each local EMS agency shall have a mechanism to review, monitor, and enforce compliance with system policies.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Written agreements, County Ordinance, inspections, Unusual Occurrence Reports, investigations and quality improvement programs have been established as a mechanism to review, monitor, and enforce compliance with system policies.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.16 FUNDING MECHANISM**

**MINIMUM STANDARDS:**

Each local EMS agency shall have a funding mechanism, which is sufficient to ensure its continued operation and shall maximize use of its Emergency Medical Services Fund.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency is funded by property tax revenue collected from County Service Area (CSA) 36, the EMS Fund (Maddy), established fees imposed on personnel certification and accreditation, ambulance service provider applications, and by a service contract with Hollister Hills SVRA.

**OBJECTIVE: none**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**1.17 MEDICAL DIRECTION**

**MINIMUM STANDARDS:**

Each local EMS agency shall plan for medical direction within the EMS system. The plan shall identify the optimal number and role of base hospitals and alternative base stations and the roles, responsibilities, and relationships of pre-hospital and hospital providers.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Medical Direction is provided by Dr. David Ghilarducci as specified in a written agreement. Hazel Hawkins Memorial Hospital has been designated as the sole Base Hospital with a written agreement in place to provide online medical direction.

**COORDINATION WITH OTHER EMS AGENCIES:**

Agreements with neighboring counties address the essential medical direction required when San Benito County EMS units transport patients by ground into these counties.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

1.18 QA/QI

**MINIMUM STANDARDS:**

Each local EMS agency shall establish a quality assurance/quality improvement (QA/QI) program. This may include use of provider-based programs which are approved by the local EMS agency and which are coordinated with other system participants.

**RECOMMENDED GUIDELINES:**

Pre-hospital care providers should be encouraged to establish in-house procedures, which identify methods of improving the quality of care provided.

**CURRENT STATUS: Meets Minimum Standard**

Current policy establishes a system-wide quality assurance program to evaluate the services provided with the San Benito County EMS System. As required by the County, the contracted 911 ambulance service provider has established in-house procedures that identify methods of improving the quality of care. All EMS first responder agencies participate in the system-wide QI program. The local hospital is also a partner and sponsor of our monthly Base Station meeting in which quality-of-care issues are identified and resolved. Personnel from the contracted 911 ambulance provider and first responder agencies participate in these meetings.

**NEED(S):** Revision of the Quality Improvement Plan

**OBJECTIVE:** Review and Revision of the Quality Improvement Plan

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

1.19 POLICIES, PROCEDURES, PROTOCOLS

**MINIMUM STANDARDS:**

Each local EMS agency shall develop written policies, procedures, and/or protocols including, but not limited to:

- triage,
- treatment,
- medical dispatch protocols,
- transport,
- on-scene treatment times,
- transfer of emergency patients,
- standing orders,
- base hospital contact,
- on-scene physicians and other medical personnel, and
- local scope of practice for pre-hospital personnel.

**RECOMMENDED GUIDELINES:**

Each local EMS agency should develop (or encourage the development of) pre-arrival/post dispatch instructions.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County Policies and Procedures can be found online at [www.cosb.us](http://www.cosb.us), or by downloading the App on a smartphone.

Santa Cruz Regional 911 (SCR911), San Benito County's designated emergency medical dispatch center, currently provides pre-arrival/post-dispatch instructions in accordance with national standards.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.20 DNR POLICY**

**MINIMUM STANDARDS:**

Each local EMS agency shall have a policy regarding "Do Not Resuscitate (DNR)" situations in the pre-hospital setting, in accordance with the EMS Authority's DNR guidelines.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS has established and implemented a policy regarding "Do Not Resuscitate (DNR)" situations (including POLST), in accordance with the EMS Authority's DNR guidelines regarding Do Not Resuscitate. This policy is to establish pre-hospital emergency medical personnel to easily recognize and follow POLST and Do Not Resuscitate (DNR) orders.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.21 DETERMINATION OF DEATH**

**MINIMUM STANDARDS:**

Each local EMS agency, in conjunction with the county coroner(s) shall develop a policy regarding determination of death, including deaths at the scene of apparent crimes.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Current San Benito County policy details the criteria and procedures for determining death by EMS personnel in the field setting, including the management of deaths at apparent scene of a crime. The "Determination of Death at the Scene" policy was developed in conjunction with the San Benito County Sheriff's Office, who is also trained as the Coroner. This policy is located on the EMS webpage at [www.cosb.us](http://www.cosb.us).

**NEED(S): NONE**

**OBJECTIVE: N/A**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.22 REPORTING OF ABUSE**

**MINIMUM STANDARDS:**

Each local EMS agency shall ensure that providers have a mechanism for reporting child abuse, elder abuse, and suspected SIDS deaths.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County policy details the criteria and the mechanism for Paramedics, EMTs and First Responders to report cases of suspected child abuse, elder abuse and/or SIDS deaths. Policies can be found on the EMS webpage at [www.cosb.us](http://www.cosb.us).

**NEED(S): NONE**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.23 INTERFACILITY TRANSFER**

**MINIMUM STANDARDS:**

The local EMS medical director shall establish policies and protocols for scope of practice of pre-hospital medical personnel during interfacility transfers.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Current San Benito County "Interfacility Transfers" establishes the scope of practice of prehospital personnel during Interfacility transfers.

**NEED(S):**

Currently reviewing the policy as we have additional providers approved for interfacility transfers.

**OBJECTIVE:**

Review Interfacitliy policy.

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**1.24 ALS SYSTEMS**

**MINIMUM STANDARDS:**

Advanced life support services shall be provided only as an approved part of a local EMS system and all ALS providers shall have written agreements with the local EMS agency.

**RECOMMENDED GUIDELINES:**

Each local EMS agency, based on state approval, should, when appropriate, develop exclusive operating areas for ALS providers.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS has one approved Advanced Life Support provider, American Medical Response (AMR), which delivers its service county-wide by ground ambulances. AMR and San Benito County EMS have entered into a written agreement, dated October 1, 2014, which delineates required services and performance criterion. This 5 year agreement expires June 30, 2019.

San Benito County EMS has developed one EMSA-approved EOA (EOA-1) which encompasses all incorporated and unincorporated areas of the county. AMR is the county's Exclusive Emergency Ambulance Service Provider and has been "grandfathered" as the provider of ALS emergency ground ambulance service for the entire EOA under provisions of Health & Safety Code § 1797.224.

**NEED(S): None**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.25 ON-LINE MEDICAL DIRECTION**

**MINIMUM STANDARDS:**

Each EMS system shall have on-line medical direction, provided by a base hospital (or alternative base station) physician or authorized registered nurse/mobile intensive care nurse.

**RECOMMENDED GUIDELINES:**

Each EMS system should develop a medical control plan that determines:

- the base hospital configuration for the system,
- the process for selecting base hospitals, including a process for designation which allows all eligible facilities to apply, and
- the process for determining the need for in-house medical direction for provider agencies.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County's single paramedic base hospital utilizes Emergency Department physicians to provide on-line medical direction to paramedics on a 24/7 basis.

**NEED(S): None**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.26 TRAUMA SYSTEM PLAN**

**MINIMUM STANDARDS:**

The local EMS agency shall develop a trauma care system plan, based on community needs and utilization of appropriate resources, which determines:

- the optimal system design for trauma care in the EMS area, and
- the process for assigning roles to system participants, including a process which allows all eligible facilities to apply.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS Agency's Trauma Care System Plan was developed in compliance with Section 1798.160 et. seq. of the California Health and Safety Code. The plan was submitted to and ultimately approved by the California EMS Authority on June 16, 2016. The System is designed to build upon the current EMS system, making changes to policies and practices to meet the requirements of current trauma regulations, and correcting identified issues. To date, the approved Plan has not been fully implemented. Once implemented, however, the LEMSA intends to include designation of a Level IV Trauma Center at Hazel Hawkins Memorial Hospital in Hollister, CA. The Plan includes field triage to identify major trauma victims and transport those patients to one of the Level I or Level II Trauma Centers outside San Benito County when appropriate. For extended transport times to out-of-county Level I or Level II Trauma Centers, or trauma patients in extremis, patients will be transported to San Benito's Level IV Trauma Center.

**NEED(S):** lemsa designation of a Level IV Trauma Center at Hazel Hawkins Memorial Hospital in Hollister, CA.

**OBJECTIVE:** Completely implement the San Benito County EMS Agency's previous submitted and EMSA approved Trauma Care System Plan.

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**1.27 PEDIATRIC SYSTEM PLAN**

**MINIMUM STANDARDS:**

The local EMS agency shall develop a pediatric emergency medical and critical care system plan, based on community needs and utilization of appropriate resources, which determines:

the optimal system design for pediatric emergency medical and critical care in the EMS area, and  
the process for assigning roles to system participants, including a process which allows all eligible facilities to apply.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

In San Benito County, there are no EDAP/PICU/Trauma Center/Burn Centers. EMS Policy directs Paramedics to transport critically ill or injured children to the closest most appropriate medical facility. Ground transports of the critically ill or injured child will be limited to those cases when distances or delays are critical factors to a patient's outcome. For the critically ill or injured child, an EDAP/PICU/Trauma Center/Burn Center is the most appropriate receiving facility. In San Benito County, the transport mode of choice to an EDAP or PICU/Trauma Center/Burn Center is by utilizing a medical helicopter.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

1.28 EOA PLAN

**MINIMUM STANDARDS:**

The local EMS agency shall develop and submit for State approval, a plan, based on community needs and utilization of appropriate resources, for granting of exclusive operating areas, that determines: a) the optimal system design for ambulance service and advanced life support services in the EMS area, and b) the process for assigning roles to system participants, including a competitive process for implementation of exclusive operating areas.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County's Emergency Ambulance Zone (EOA-1) is an Exclusive Operating Area based on the "grandfather" provision of Health & Safety Code §1797.224. The San Benito County EOA for emergency 911 ground ambulances includes all parts and portions of the incorporated and unincorporated areas within the political county boundaries. The San Benito County EOA was approved by the California EMS Authority on July 10, 2006.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**2.01 ASSESSMENT OF NEEDS**

**MINIMUM STANDARDS:**

The local EMS agency shall routinely assess personnel and training needs.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Personnel and training needs are assessed through review of data, meetings, and provider input within the Continuous Quality Improvement Program. When training needs become known, the EMS Agency works with its providers to introduce the specific topic or need into Base Station meetings, held quarterly.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**2.02 APPROVAL OF TRAINING**

**MINIMUM STANDARDS:**

The EMS Authority and/or local EMS agencies shall have a mechanism to approve EMS education programs that require approval (according to regulations) and shall monitor them to ensure that they comply with state regulations.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Procedures are in place to approve, monitor and investigate EMS personnel training programs and continuing education providers to determine compliance. Failure to be in compliance with state regulation may result in action by the local EMS agency up to and including the revocation of the training program's approval to operate

**NEED(S): None**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

### 2.03 PERSONNEL

#### **MINIMUM STANDARDS:**

The local EMS agency shall have mechanisms to accredit, authorize, and certify pre-hospital medical personnel and conduct certification reviews, in accordance with state regulations. This shall include a process for pre-hospital providers to identify and notify the local EMS agency of unusual occurrences that could impact EMS personnel certification.

#### **RECOMMENDED GUIDELINES:**

None.

#### **CURRENT STATUS: Meets Minimum Standard**

Policies have been adopted regarding EMT certification and Paramedic accreditation. A standardized application, process, and fee schedule has been developed.

**NEED(S):** None

**OBJECTIVE:** n/a

#### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**2.04 DISPATCH TRAINING**

**MINIMUM STANDARDS:**

Public safety answering point (PSAP) operators with medical responsibility shall have emergency medical orientation and all medical dispatch personnel (both public and private) shall receive emergency medical dispatch training in accordance with the EMS Authority's Emergency Medical Dispatch Guidelines.

**RECOMMENDED GUIDELINES:**

Public safety answering point (PSAP) operators with medical dispatch responsibilities and all medical dispatch personnel (both public and private) should be trained and tested in accordance with the EMS Authority's Emergency Medical Dispatch Guidelines.

**CURRENT STATUS: Meets Minimum Standard**

Emergency Medical Dispatching, with pre-arrival instructions, and priority dispatch, are currently being provided in San Benito County by Santa Cruz Regional 911.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**2.05 FIRST RESPONDER TRAINING**

**MINIMUM STANDARDS:**

At least one person on each non-transporting EMS first response unit shall have been trained to administer first aid and CPR within the previous three years.

**RECOMMENDED GUIDELINES:**

At least one person on each non-transporting EMS first response unit should be currently certified to provide defibrillation and have available equipment commensurate with such scope of practice, when such a program is justified by the response times for other ALS providers.

At least one person on each non-transporting EMS first response unit should be currently certified at the EMT level and have available equipment commensurate with such scope of practice.

**CURRENT STATUS: Meets Minimum Standard**

All San Benito County EMS responders are EMT-1 level certified and First Aid/CPR with AED trained. All fire department units are equipped with AEDs.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**2.06 RESPONSE**

**MINIMUM STANDARDS:**

Public safety agencies and industrial first aid teams shall be encouraged to respond to medical emergencies and shall be utilized in accordance with local EMS agency policies.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The fire departments/agencies in San Benito County provide BLS response to all medical calls in accordance with the San Benito County EMS Agency Policies and Procedures.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**2.07 MEDICAL CONTROL**

**MINIMUM STANDARDS:**

Non-transporting EMS first responders shall operate under medical direction policies, as specified by the local EMS agency medical director.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Non-transporting EMS first responders operate under the medical direction policies specified by the San Benito County EMS Agency's Medical Director.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**2.08 EMT-I TRAINING**

**MINIMUM STANDARDS:**

All emergency medical transport vehicle personnel shall be currently certified at least at the EMT-I level.

**RECOMMENDED GUIDELINES:**

If advanced life support personnel are not available, at least one person on each emergency medical transport vehicle should be trained to provide defibrillation.

**CURRENT STATUS: Meets Minimum Standard**

All emergency medical transport vehicle personnel are currently certified to at least the EMT-I level. All contract emergency 911 ground transport ambulances are staffed at all times with a minimum of one certified EMT-I and one licensed and county accredited Paramedic.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**2.09 CPR TRAINING**

**MINIMUM STANDARDS:**

All allied health personnel who provide direct emergency patient care shall be trained in CPR.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

All hospital allied health personnel who provide direct emergency care have been trained in CPR.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**2.10 ADVANCED LIFE SUPPORT**

**MINIMUM STANDARDS:**

All emergency department physicians and registered nurses that provide direct emergency patient care shall be trained in advanced life support.

**RECOMMENDED GUIDELINES:**

All emergency department physicians should be certified by the American Board of Emergency Medicine.

**CURRENT STATUS: Meets Minimum Standard**

All Emergency Department physicians and registered nurses who provide direct emergency patient care are trained in advanced life support.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**2.11 ACCREDITATION PROCESS**

**MINIMUM STANDARDS:**

The local EMS agency shall establish a procedure for accreditation of advanced life support personnel that includes orientation to system policies and procedures, orientation to the roles and responsibilities of providers within the local EMS system, testing in any optional scope of practice, and enrollment into the local EMS agency's quality assurance/quality improvement process.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency has established policies and procedures for the accreditation and orientation of pre-hospital care providers. All pre-hospital care providers are encouraged to participate in the Agency's quality assurance process. The LEMSA accredits all Paramedics in the local EMS System and maintains records tracking their accreditation status.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**2.12 EARLY DEFIBRILLATION**

**MINIMUM STANDARDS:**

The local EMS agency shall establish policies for local accreditation of public safety and other basic life support personnel in early defibrillation.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency has established policies and procedures for the accreditation and orientation of pre-hospital care providers.

CPR and AED training is provided to Law Enforcement and non-EMS county and city personnel on a regular basis.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**2.13 BASE HOSPITAL PERSONNEL**

**MINIMUM STANDARDS:**

All base hospital/alternative base station personnel who provide medical direction to pre-hospital personnel shall be knowledgeable about local EMS agency policies and procedures and have training in radio communications techniques.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County's base hospital uses emergency department physicians to provide online medical direction to the field paramedics. These base hospital physicians are trained and knowledgeable in radio communications techniques and local EMS policies and procedures.

**NEED(S):** None

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

### 3.01 COMMUNICATIONS PLAN

#### **MINIMUM STANDARDS:**

The local EMS agency shall plan for EMS communications. The plan shall specify the medical communications capabilities of emergency medical transport vehicles, non-transporting advanced life support responders, and acute care facilities and shall coordinate the use of frequencies with other users.

#### **RECOMMENDED GUIDELINES:**

The local EMS agency's communications plan should consider the availability and use of satellites and cellular telephones.

#### **CURRENT STATUS: Meets Minimum Standard**

The San Benito EMS Agency has established a communication system for the ambulance provider(s) in the County. Ambulance personnel communicate with our designated dispatch center, Santa Cruz Regional 911, using a Med Net Channel and a local channel. Ambulance personnel use the local channel, along with Hollister Fire Dept., satellite and mobile cellular telephones to communicate with the base hospital. There are no non-transporting advanced life support responders in the County. The County has a written communications plan which incorporates EMS and the use of Med Net Channel radio channels, satellite and mobile cellular telephones.

#### **COORDINATION WITH OTHER EMS AGENCIES:**

Emergency medical transport units originating from San Benito County occasionally transport patients across county lines to hospitals in neighboring counties. As part of the plan for EMS communications, San Benito EMS County Agency has ensured that the medical transport units are capable of radio transmissions to hospitals in neighboring counties via the Med Net radio system or by using satellite and mobile cellular telephones. The medical transport units that operate in San Benito County are capable of radio communications to out-of-county responders via the CALCORD channel as well as by using satellite and mobile cellular telephones.

**NEED(S):** none

**OBJECTIVE:** n/a

#### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

### 3.02 RADIOS

#### **MINIMUM STANDARDS:**

Emergency medical transport vehicles and non-transporting advanced life support responders shall have two-way radio communications equipment which complies with the local EMS communications plan and which provides for dispatch and ambulance-to-hospital communication.

#### **RECOMMENDED GUIDELINES:**

Emergency medical transport vehicles should have two-way radio communications equipment that complies with the local EMS communications plan and that provides for vehicle-to-vehicle (including both ambulances and non-transporting first responder units) communication.

#### **CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency has established a communication system for the ambulance provider(s) in the County. Ambulance personnel use hand held radios and radios installed in each ambulance to communicate with the dispatch center on the Med Net Channel and Hollister Fire channel. These radios also allow ambulance personnel to communicate with the base hospital using the Hollister Fire channel or communicate with other public safety agencies on local law enforcement and fire channels. There are no non-transporting advanced life support responders in the County.

**NEED(S):** none

**OBJECTIVE:** n/a

#### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

### **3.03 INTERFACILITY TRANSFER**

#### **MINIMUM STANDARDS:**

Emergency medical transport vehicles used for interfacility transfers shall have the ability to communicate with both the sending and receiving facilities. This could be accomplished by cellular telephone.

#### **RECOMMENDED GUIDELINES:**

None.

#### **CURRENT STATUS: Meets Minimum Standard**

There is only one acute care hospital in the County. All San Benito County authorized emergency ambulances have the ability to communicate with both the sending and receiving facilities by mobile telephone.

#### **COORDINATION WITH OTHER EMS AGENCIES:**

Emergency medical transport units originating from San Benito County occasionally transport patients across county lines to hospitals in neighboring counties. As part of the plan for EMS communications, San Benito EMS County Agency has ensured that the medical transport units are capable of radio transmissions to hospitals in neighboring counties via the Med Net radio system or by using satellite and mobile cellular telephones. The medical transport units that operate in San Benito County are capable of radio communications to out-of-county responders via the CALCORD channel as well as by using satellite and mobile cellular telephones.

**NEED(S):** none

**OBJECTIVE:** n/a

#### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

### 3.04 DISPATCH CENTER

#### **MINIMUM STANDARDS:**

All emergency medical transport vehicles where physically possible, (based on geography and technology), shall have the ability to communicate with a single dispatch center or disaster communications command post.

#### **RECOMMENDED GUIDELINES:**

None.

#### **CURRENT STATUS: Meets Minimum Standard**

All San Benito County-authorized emergency ground transport ambulances, where geography allows, have the ability to communicate with the Santa Cruz Regional 911 using Med Net radios, Hollister Fire Channel, mobile satellite and cellular telephones and wire-based (conventional landline) telephones.

**NEED(S):** none

**OBJECTIVE:** n/a

#### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**3.05 HOSPITALS**

**MINIMUM STANDARDS:**

All hospitals within the local EMS system shall (where physically possible) have the ability to communicate with each other by two-way radio.

**RECOMMENDED GUIDELINES:**

All hospitals should have direct communications access to relevant services in other hospitals within the system (e.g., poison information, pediatric and trauma consultation).

**CURRENT STATUS: Meets Minimum Standard**

There is only one acute care hospital in the County, Hazel Hawkins Memorial Hospital. Hazel Hawkins Memorial Hospital does have communications ability to other hospitals and poison control by conventional landline telephones. Internet based EMS system is used for communications with Monterey, Santa Clara and Santa Cruz County hospitals for bed availability and diversion purposes.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**3.06 MCI/DISASTERS**

**MINIMUM STANDARDS:**

The local EMS agency shall review communications linkages among providers (pre-hospital and hospital) in its jurisdiction for their capability to provide service in the event of multi-casualty incidents and disasters.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency tests communications linkages in its jurisdiction by participating in the prior yearly EMSA sponsored State-wide Medical/Health Disaster Exercise. In cooperation with prehospital and hospital providers, Public Health and San Benito County Office of Emergency Services, San Benito County EMS Agency takes the lead for the drill and has included RACES (Radio Amateur Civil Emergency Services) as provided by San Benito County Amateur Radio Emergency Service as a component of this drill. Capability to provide service in the event of multi-casualty incidents and disasters is tested during the exercise. The next full-scale exercise is scheduled for November 17, 2016.

**NEED(S):** none

**OBJECTIVE:** N/A

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**3.07 9-1-1 PLANNING/COORDINATION**

**MINIMUM STANDARDS:**

The local EMS agency shall participate in ongoing planning and coordination of the 9-1-1 telephone service.

**RECOMMENDED GUIDELINES:**

The local EMS agency should promote the development of enhanced 9-1-1 systems.

**CURRENT STATUS: Meets Minimum Standard**

Santa Cruz Regional 911, our contracted dispatch center, holds monthly meetings to discuss and review communications. San Benito County EMS actively participates in the 911 planning activities.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**3.08 9-1-1 PUBLIC EDUCATION**

**MINIMUM STANDARDS:**

The local EMS agency shall be involved in public education regarding the 9-1-1 telephone service as it impacts system access.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS supports Santa Cruz Regional 911 in a wide variety of events promoting the 911 education program. These include community events, school programs, and public education programs.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**3.09 DISPATCH TRIAGE**

**MINIMUM STANDARDS:**

The local EMS agency shall establish guidelines for proper dispatch triage that identifies appropriate medical response.

**RECOMMENDED GUIDELINES:**

The local EMS agency should establish a emergency medical dispatch priority reference system, including systemized caller interrogation, dispatch triage policies, and pre-arrival instructions.

**CURRENT STATUS: Meets Minimum Standard**

An emergency medical dispatch reference system has been established and is operational. Santa Cruz Regional 911 provides pre-arrival dispatch instructions, along with priority dispatching of all apparatus and ambulances.

**NEED(S): NONE**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**3.10 INTEGRATED DISPATCH**

**MINIMUM STANDARDS:**

The local EMS system shall have a functionally integrated dispatch with system-wide emergency services coordination, using standardized communications frequencies.

**RECOMMENDED GUIDELINES:**

The local EMS agency should develop a mechanism to ensure appropriate system-wide ambulance coverage during periods of peak demand.

**CURRENT STATUS: Meets Minimum Standard**

AMR, the contracted 911 provider for the County of San Benito, operates from Santa Cruz Regional 911 utilizing an integrated, county-wide system status management plan.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

#### 4.01 SERVICE AREA BOUNDARIES

##### **MINIMUM STANDARDS:**

The local EMS agency shall determine the boundaries of emergency medical transportation service areas.

##### **RECOMMENDED GUIDELINES:**

The local EMS agency should secure a county ordinance or similar mechanism for establishing emergency medical transport service areas (e.g., ambulance response zones).

##### **CURRENT STATUS: Meets Minimum Standard**

An Exclusive Operating Area (EOA) has been established as per the San Benito County Ambulance Ordinance. The boundaries of the EOA are defined in the County's contract with the ambulance provider and in the EOA.

##### **COORDINATION WITH OTHER EMS AGENCIES:**

**NEED(S):** none

**OBJECTIVE:** n/a

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**4.02 MONITORING**

**MINIMUM STANDARDS:**

The local EMS agency shall monitor emergency medical transportation services to ensure compliance with appropriate statutes, regulations, policies, and procedures.

**RECOMMENDED GUIDELINES:**

The local EMS agency should secure a county ordinance or similar mechanism for licensure of emergency medical transport services. These should be intended to promote compliance with overall system management and should, wherever possible, replace any other local ambulance regulatory programs within the EMS area.

**CURRENT STATUS: Meets Minimum Standard**

Emergency Medical transportation services, both emergent and non-emergent, operate under the San Benito County Ambulance Ordinance. Written agreements with the County mandate ambulance service provider complies with appropriate statutes, regulations, policies, and procedures. Monthly reports are shared at EMCC meetings on EOS compliance.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

#### 4.03 CLASSIFYING MEDICAL REQUESTS

##### **MINIMUM STANDARDS:**

The local EMS agency shall determine criteria for classifying medical requests (e.g., emergent, urgent, and non-emergent) and shall determine the appropriate level of medical response to each.

##### **RECOMMENDED GUIDELINES:**

None.

##### **CURRENT STATUS: Meets Minimum Standard**

An emergency medical dispatch priority reference system has been developed and is in use in San Benito County. Criteria based on the medical priority dispatch system used by Santa Cruz Regional 911 determines the response (code 2 or code 3) by ambulance and fire.

**NEED(S): None**

**OBJECTIVE: n/a**

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

#### 4.04 PRESCHEDULED RESPONSES

##### **MINIMUM STANDARDS:**

Service by emergency medical transport vehicles that can be prescheduled without negative medical impact shall be provided only at levels that permit compliance with local EMS agency policy.

##### **RECOMMENDED GUIDELINES:**

None.

##### **CURRENT STATUS: Meets Minimum Standard**

The contract with AMR allows for non-emergency medical transfers and Agency policies outline the conditions for scheduling interfacility patient transfers. Compliance reports are reviewed monthly to ensure response times to the EOA were not delayed.

Hazel Hawkins Hospital, the EMS system's only hospital, recently signed an agreement with a transport provider for interfacility transports. This agreement will reduce the need for interruption of the 911 system by AMR.

**NEED(S):** none

**OBJECTIVE:** n/a

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**4.05 RESPONSE TIME STANDARDS**

**MINIMUM STANDARDS:**

Each local EMS agency shall develop response time standards for medical responses. These standards shall take into account the total time from receipt of call at the primary public safety answering point (PSAP) to arrival of the responding unit at the scene, including all dispatch time intervals and driving time.

**RECOMMENDED GUIDELINES:**

Emergency medical service areas (response zones) shall be designated so that, for ninety percent of emergency responses, response times shall not exceed:

	Metropolitan/Urban Area	Suburban/Rural Area	Wilderness Area
BLS and CPR Capable First Responder	5 minutes	15 minutes	As quickly as possible
Early Defibrillation – Capable Responder	5 minutes	As quickly as possible	As quickly as possible
ALS Capable Responder (not functioning as first responder)	8 minutes	20 minutes	As quickly as possible
EMS Transportation Unit (not functioning as first responder)	8 minutes	20 minutes	As quickly as possible

**CURRENT STATUS: Meets Minimum Standard / Recommended Guidelines NOT MET**

The San Benito County EMS Agency has established Response Time standards (based on the size of the County and long transport distances) for the contracted ground emergency ambulance service provider as defined in the table below:

	Urban	Rural	Wilderness	Wilderness (Remote)
Code 3 (911) ALS Transport Ambulance	10 minutes or less	30 minutes or less	90 minutes or less	120 minutes or less

Contractor will be deemed to be in compliance with Response Time Standards if ninety percent (90%) or more of all Code 3 (911) events in which a transport ambulance arrives on scene, measured monthly, meet the above specified response times.

**COORDINATION WITH OTHER EMS AGENCIES:**

San Benito County has written agreements with Monterey and Santa Cruz Counties for automatic and mutual aid responses to the northern and southwestern most regions of the County. The agreements cover issues where response times are too great for San Benito County based medical transport units or in the event the number of calls for service exceeds the number of available ambulances.

**NEED(S):**

Additional emergency ambulance hours to be available in the EMS system to reduce the Urban and Rural Response Zone response times to comply with the Recommended Guidelines.

**OBJECTIVE:**

To work with the County's contract emergency ambulance service provider to assist them with adding ambulance hours into the EMS system in a way that is profitable, efficient and effective.

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)



#### 4.06 STAFFING

##### **MINIMUM STANDARDS:**

All emergency medical transport vehicles shall be staffed and equipped according to current state and local EMS agency regulations and appropriately equipped for the level of service provided.

##### **RECOMMENDED GUIDELINES:**

None.

##### **CURRENT STATUS: Meets Minimum Standard**

Current EMS Policy #1090 identifies the equipment required of advanced life support emergency medical transport vehicles operating in San Benito County. The Emergency Ambulance Agreement (October 1, 2014 – June 30, 2019) identifies the minimal staffing level of ALS ambulances operating in the San Benito County EMS EOA-1 shall be one EMT-1 (basic) and one EMT-P (paramedic). The level of staffing and equipment meet all current state regulations.

**NEED(S):** None

**OBJECTIVE:** n/a

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**4.07 FIRST RESPONDER AGENCIES**

**MINIMUM STANDARDS:**

The local EMS agency shall integrate qualified EMS first responder agencies (including public safety agencies and industrial first aid teams) into the system.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

First Responder agencies are fully integrated into the San Benito County EMS system. Each agency uses either First Responder or EMT-1 level personnel in response to medical emergencies. These first response personnel use the Basic Life Support treatment protocols approved by the San Benito County EMS Agency and use industry-standard EMS supplies and equipment. The BLS first response personnel are also authorized to provide defibrillation using Automated External Defibrillators (AED).

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**4.08 MEDICAL & RESCUE AIRCRAFT**

**MINIMUM STANDARDS:**

The local EMS agency shall have a process for categorizing medical and rescue aircraft and shall develop policies and procedures regarding:

- authorization of aircraft to be utilized in pre-hospital patient care,
- requesting of EMS aircraft,
- dispatching of EMS aircraft,
- determination of EMS aircraft patient destination,
- orientation of pilots and medical flight crews to the local EMS system, and
- addressing and resolving formal complaints regarding EMS aircraft.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency has policies and procedures in place as required above. All EMS Medical & Rescue Aircraft have completed the application process.

**COORDINATION WITH OTHER EMS AGENCIES:**

The San Benito County Emergency Medical Care Commission (EMCC) includes a member who represents the primary EMS air ambulance provider serving San Benito County.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**4.09 AIR DISPATCH CENTER**

**MINIMUM STANDARDS:**

The local EMS agency shall designate a dispatch center to coordinate the use of air ambulances or rescue aircraft.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Each air ambulance service provider maintains its own dispatch center. Requests for air ambulance service is made through Santa Cruz Regional 911.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**4.10 AIRCRAFT AVAILABILITY**

**MINIMUM STANDARDS:**

The local EMS agency shall identify the availability and staffing of medical and rescue aircraft for emergency patient transportation and shall maintain written agreements with aeromedical services operating within the EMS area.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Medical and Rescue Aircraft available to respond to San Benito County have been identified. The San Benito County EMS Agency has the required permits on file.

**COORDINATION WITH OTHER EMS AGENCIES:**

The San Benito County Emergency Medical Care Commission (EMCC) includes a member who represents the primary EMS air ambulance provider serving San Benito County.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

#### 4.11 SPECIALTY VEHICLES

##### **MINIMUM STANDARDS:**

Where applicable, the local EMS agency shall identify the availability and staffing of all-terrain vehicles, snow mobiles, and water rescue and transportation vehicles.

##### **RECOMMENDED GUIDELINES:**

The local EMS agency should plan for response by and use of all-terrain vehicles, snow mobiles, and water rescue vehicles areas where applicable. This plan should consider existing EMS resources, population density, environmental factors, dispatch procedures and catchment area.

##### **CURRENT STATUS: Meets Minimum Standard**

The Hollister Hills State Vehicular Recreation Area is staffed by Park Rangers who are certified as EMT-1. They use all-terrain vehicles (motorcycles and all-wheel drive) to respond to medical emergencies within the Park. Because conventional ambulances cannot traverse most of the Park, some of the Park's all-wheel drive vehicles are configured to transport patients. These vehicles often transport a patient to rendezvous points where ground or air ambulances then transport the patient to a receiving, base hospital or trauma center.

The San Benito County Sheriff Office has Search and Rescue Unit that utilizes all-terrain vehicles and a Mounted Search and Rescue Unit, with some members trained as first responders or higher, that could be called upon in an emergency.

##### **COORDINATION WITH OTHER EMS AGENCIES:**

San Benito County EMS would utilize mutual aid requests.

**NEED(S):** none

**OBJECTIVE:** n/a

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**4.12 DISASTER RESPONSE**

**MINIMUM STANDARDS:**

The local EMS agency, in cooperation with the local office of emergency services (OES), shall plan for mobilizing response and transport vehicles for disaster.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS has adopted the San Benito County Office of Emergency Services Emergency Operations Plan. The plan identifies the Medical/Health Operational Area Coordinator (MHOAC) authorization to request the mobilization or response and transport vehicles during a disaster.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

#### 4.13 INTERCOUNTY RESPONSE

##### **MINIMUM STANDARDS:**

The local EMS agency shall develop agreements permitting inter-county response of emergency medical transport vehicles and EMS personnel.

##### **RECOMMENDED GUIDELINES:**

The local EMS agency should encourage and coordinate development of mutual aid agreements that identify financial responsibility for mutual aid responses.

##### **CURRENT STATUS: Meets Minimum Standard**

There are only two full-time ambulances serving the majority of the County on a twenty-four hour basis. There is a third ambulance available on weekends between 0800 and 1700. For day-to-day mutual aid responses, the surrounding counties of Monterey, Santa Cruz and Santa Clara each agree to bear their own costs related to the inter-county response.

##### **COORDINATION WITH OTHER EMS AGENCIES:**

San Benito County has written agreements with two neighboring Counties' EMS agencies (Monterey and Santa Cruz) that address which County's medical protocols, administrative policies, and mutual aid responses that will be used when EMS providers based in one County serve the neighboring County.

**NEED(S):** none

**OBJECTIVE:** n/a

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

#### **4.14 INCIDENT COMMAND SYSTEM**

##### **MINIMUM STANDARDS:**

The local EMS agency shall develop multi-casualty response plans and procedures that include provision for on-scene medical management using the Incident Command System.

##### **RECOMMENDED GUIDELINES:**

None.

##### **CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency has developed a Multi-Casualty Incident (MCI) Plan and have incorporated the plan into the EMS Policies and Procedures Manual.

**NEED(S): none**

**OBJECTIVE: n/a**

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**4.15 MCI PLANS**

**MINIMUM STANDARDS:**

Multi-casualty response plans and procedures shall utilize state standards and guidelines.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County MCI Plan has been adopted and implemented . Additionally, the Plan meets or exceeds the requirements of the Standardized Emergency Management System (SEMS) regulations.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

#### 4.16 ALS STAFFING

##### **MINIMUM STANDARDS:**

All ALS ambulances shall be staffed with at least one person certified at the advanced life support level and one person staffed at the EMT-I level.

##### **RECOMMENDED GUIDELINES:**

The local EMS agency should determine whether advanced life support units should be staffed with two ALS crew members or with one ALS and one BLS crew member.

On an emergency ALS unit which is not staffed with two ALS crew members, the second crew member should be trained to provide defibrillation, using available defibrillators.

##### **CURRENT STATUS: Meets Minimum Standard**

By policy, all Advanced Life Support (ALS) units are currently staffed with a Paramedic/EMT crew configuration.

**NEED(S):** none

**OBJECTIVE:** n/a

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**4.17 ALS EQUIPMENT**

**MINIMUM STANDARDS:**

All emergency ALS ambulances shall be appropriately equipped for the scope of practice of its level of staffing.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito EMS Agency policy establishes the equipment required for ALS ambulances commensurate with the advanced life support scope of practice in the County. This policy has been reviewed by the Prehospital Advisory Committee and has been incorporated into the EMS Policy and Procedure Manual.

**NEED(S): None**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

#### **4.18 TRANSPORT COMPLIANCE**

##### **MINIMUM STANDARDS:**

The local EMS agency shall have a mechanism (e.g., an ordinance and/or written provider agreements) to ensure that EMS transportation agencies comply with applicable policies and procedures regarding system operations and clinical care.

##### **RECOMMENDED GUIDELINES:**

None.

##### **CURRENT STATUS: Meets Minimum Standard**

San Benito County enacted an Ambulance Ordinance on April 13, 1993, and revised March 24, 2014. The Ambulance Ordinance ensures that EMS transportation agencies comply with applicable policies and procedures regarding system operations and clinical care. It is available on line at the EMS Agency web site: San Benito County Ambulance Ordinance #923.

**NEED(S):** none

**OBJECTIVE:** n/a

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**4.19 TRANSPORTATION PLAN**

**MINIMUM STANDARDS:**

Any local EMS agency that desires to implement exclusive operating areas, pursuant to Section 1797.224, H&S Code, shall develop an EMS transportation plan which addresses: a) minimum standards for transportation services; b) optimal transportation system efficiency and effectiveness; and c) use of a competitive bid process to ensure system optimization.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito's Transportation Plan addresses minimum standards for transportation services, optimal transportation system efficiency and effectiveness. The Plan is incorporated into the current 5-year Emergency Ambulance Agreement which was signed October 1, 2014 and expires midnight on June 30, 2019. The County granted the EOA to the current ambulance service provider, American Medical Response, based on the "grandfather" provision of Health & Safety Code §1797.224 and the EMS Authority's EOA approval dated July 10, 2006. The Transportation Plan is included in this EMS Plan as an annex. The Transportation Plan is contained in EMS Policy #1180.

**NEED(S): Revise Transportation Plan**

**OBJECTIVE: Review and Revise the current Transportation Plan**

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**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**4.20 "GRANDFATHERING"**

**MINIMUM STANDARDS:**

Any local EMS agency which desires to grant an exclusive operating permit without use of a competitive process shall document in its EMS transportation plan that its existing provider meets all of the requirements for non-competitive selection ("grandfathering") under Section 1797.224, H&SC.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County's Emergency Ambulance Zone (EOA-1) is an Exclusive Operating Area based on the "grandfather" provision of Health & Safety Code §1797.224 approved by the California EMS Authority on July 10, 2006.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**4.21 EOA COMPLIANCE**

**MINIMUM STANDARDS:**

The local EMS agency shall have a mechanism to ensure that EMS transportation and/or advanced life support agencies to whom exclusive operating permits have been granted, pursuant to Section 1797.224, H&SC, comply with applicable policies and procedures regarding system operations and patient care.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County's 2008/2009 EMS Transportation Plan and Emergency Ambulance Agreement specifically require the Exclusive Operating Area's ambulance service provider to comply with the County's EMS Policies & Procedures regarding all aspects of system operations and patient care.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**4.22 EOA EVALUATION**

**MINIMUM STANDARDS:**

The local EMS agency shall periodically evaluate the design of exclusive operating areas.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The design of San Benito County's Exclusive Operating Area (EOA-1) was last evaluated during the EMS Agency's May 10, 2006 request to EMSA for approval of EOA creation by using the "Grandfathering" provisions of California Health and Safety Code §1797.224. San Benito County's Emergency Ambulance Zone (EOA-1) was approved by the California EMS Authority on July 10, 2006.

San Benito County's Emergency Ambulance Agreement with American Medical Response, by design, also serves as the foundation of the San Benito County EMS Transportation Plan.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**5.01 ASSESSMENT OF CAPABILITIES**

**MINIMUM STANDARDS:**

The local EMS agency shall assess and periodically reassess the EMS related capabilities of acute care facilities in its service area.

**RECOMMENDED GUIDELINES:**

The local EMS agency should have written agreements with acute care facilities in its service area.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency has a written agreement with Hazel Hawkins Memorial Hospital, the local acute-care hospital in San Benito County. Hazel Hawkins Memorial Hospital is a designated paramedic base station hospital and maintains written patient transfer agreements with other hospitals and trauma centers in Monterey, Santa Cruz and Santa Clara counties.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**5.02 TRIAGE & TRANSFER PROTOCOLS**

**MINIMUM STANDARDS:**

The local EMS agency shall establish pre-hospital triage protocols and shall assist hospitals with the establishment of transfer protocols and agreements.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS Agency has adopted the PAM and START systems of triage and are guidelines for assessing and determining appropriate trauma patient destination.

**COORDINATION WITH OTHER EMS AGENCIES: none**

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**5.03 TRANSFER GUIDELINES**

**MINIMUM STANDARDS:**

The local EMS agency, with participation of acute care hospital administrators, physicians, and nurses, shall establish guidelines to identify patients who should be considered for transfer to facilities of higher capability and shall work with acute care hospitals to establish transfer agreements with such facilities.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency has a written agreement with Hazel Hawkins Memorial Hospital, the local acute-care hospital in San Benito County. Hazel Hawkins Memorial Hospital is a designated paramedic base station hospital and maintains written patient transfer agreements with other hospitals and trauma centers in Monterey, Santa Cruz and Santa Clara counties.

San Benito County EMS Agency has adopted the PAM and START systems of triage and are guidelines for assessing and determining appropriate trauma patient destination.

**COORDINATION WITH OTHER EMS AGENCIES: n/a**

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**5.04 SPECIALTY CARE FACILITIES**

**MINIMUM STANDARDS:**

The local EMS agency shall designate and monitor receiving hospitals and, when appropriate, specialty care facilities for specified groups of emergency patients.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Hazel Hawkins Memorial Hospital is the only acute-care hospital in San Benito County. There are no specialty care facilities in the County; therefore, no criteria have been developed for such facilities.

**COORDINATION WITH OTHER EMS AGENCIES: n/a**

**NEED(S): none**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**5.05 MASS CASUALTY MANAGEMENT**

**MINIMUM STANDARDS:**

The local EMS agency shall encourage hospitals to prepare for mass casualty management.

**RECOMMENDED GUIDELINES:**

The local EMS agency should assist hospitals with preparation for mass casualty management, including procedures for coordinating hospital communications and patient flow.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency has a Mass Casualty Incident (MCI) management plan. The Agency has developed procedures for coordinating communications and patient flow during a mass casualty incident. The MCI Plan is incorporated into the EMS Policy and Procedure Manual as EMS Policy #4200.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**5.06 HOSPITAL EVACUATION**

**MINIMUM STANDARDS:**

The local EMS agency shall have a plan for hospital evacuation, including its impact on other EMS system providers.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Plans for hospital evacuation have been developed and exercised by Hazel Hawkins Memorial Hospital and would be managed in accordance the Standardized Emergency Management System (SEMS) and the Multi-Casualty Incident (MCI) Plan.

**COORDINATION WITH OTHER EMS AGENCIES: n/a**

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**5.07 BASE HOSPITAL DESIGNATION**

**MINIMUM STANDARDS:**

The local EMS agency shall, using a process which allows all eligible facilities to apply, designate base hospitals or alternative base stations as it determines necessary to provide medical direction of pre-hospital personnel.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The one acute-care hospital in the County, Hazel Hawkins Memorial Hospital, has been designated by the EMS Agency as a paramedic base hospital. The hospital provides medical direction to prehospital personnel as described in EMS Plan Standard 3.0 "Communications."

**COORDINATION WITH OTHER EMS AGENCIES:**

Medical transport units originating in San Benito County have the ability to communicate via mobile telephone or radio to base hospitals in neighboring counties to receive medical direction when necessary.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

### 5.08 TRAUMA SYSTEM DESIGN

#### MINIMUM STANDARDS:

Local EMS agencies that develop trauma care systems shall determine the optimal system (based on community need and available resources) including, but not limited to:

- the number and level of trauma centers (including the use of trauma centers in other counties),
- the design of catchment areas (including areas in other counties, as appropriate), with consideration of workload and patient mix,
- identification of patients who should be triaged or transferred to a designated center, including consideration of patients who should be triaged to other specialty care centers,
- the role of non-trauma center hospitals, including those that are outside of the primary triage area of the trauma center, and
- a plan for monitoring and evaluation of the system.

#### RECOMMENDED GUIDELINES:

None.

#### CURRENT STATUS: Meets Minimum Standard

The San Benito County Trauma Plan was approved by the EMS Authority on June 16, 2016. The EMS Agency will continue to work with Hazel Hawkins Hospital in an effort to upgrade the basic ER status to that of Level IV Trauma Center.

#### NEED(S):

Level IV Trauma Center

#### OBJECTIVE:

To assist Hazel Hawkins Memorial Hospital with meeting the requirements to be designated a Level IV Trauma Center.

#### TIME FRAME FOR MEETING OBJECTIVE:

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**5.09 PUBLIC INPUT**

**MINIMUM STANDARDS:**

In planning its trauma care system, the local EMS agency shall ensure input from both pre-hospital and hospital providers and consumers.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency's Trauma Plan was developed with input from prehospital and hospital providers and consumers.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**5.10 PEDIATRIC SYSTEM DESIGN**

**MINIMUM STANDARDS:**

Local EMS agencies that develop pediatric emergency medical and critical care systems shall determine the optimal system, including:

- the number and role of system participants, particularly of emergency departments,
- the design of catchment areas (including areas in other counties, as appropriate), with consideration of workload and patient mix,
- identification of patients who should be primarily triaged or secondarily transferred to a designated center, including consideration of patients who should be triaged to other specialty care centers,
- identification of providers who are qualified to transport such patients to a designated facility,
- identification of tertiary care centers for pediatric critical care and pediatric trauma,
- the role of non-pediatric specialty care hospitals including those which are outside of the primary triage area, and
- a plan for monitoring and evaluation of the system.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS:**

There are not any pediatric emergency medical and critical care facilities in San Benito County. The need is met by directing Emergency Transport agencies, both ground and air, to transport all critically ill or injured pediatric patients to identified pediatric facilities in adjacent Santa Clara County.

**NEED(S):** None

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

### 5.11 EMERGENCY DEPARTMENTS

#### MINIMUM STANDARDS:

Local EMS agencies shall identify minimum standards for pediatric capability of emergency departments including:

staffing,  
training,  
equipment,  
identification of patients for whom consultation with a pediatric critical care center is appropriate,  
quality assurance/quality improvement, and  
data reporting to the local EMS agency.

#### RECOMMENDED GUIDELINES:

Local EMS agencies should develop methods of identifying emergency departments which meet standards for pediatric care and for pediatric critical care centers and pediatric trauma centers.

#### CURRENT STATUS:

There are not any pediatric emergency medical and critical care facilities in San Benito County. The need is met by directing Emergency Transport agencies, both ground and air, to transport all critically ill or injured pediatric patients to identified pediatric facilities in adjacent Santa Clara County.

**NEED(S):** none

**OBJECTIVE:** n/a

#### TIME FRAME FOR MEETING OBJECTIVE:

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**5.12 PUBLIC INPUT**

**MINIMUM STANDARDS:**

In planning its pediatric emergency medical and critical care system, the local EMS agency shall ensure input from both pre-hospital and hospital providers and consumers.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

There are not any pediatric emergency medical and critical care facilities in San Benito County. The need is met by directing Emergency Transport agencies, both ground and air, to transport all critically ill or injured pediatric patients to identified pediatric facilities in adjacent Santa Clara County.

Prehospital and hospital providers and consumers have input to all EMS policy and procedure development by way of publically open Emergency Medical Care Commission (EMCC) and Prehospital Advisory Care (PAC) committee meetings. EMCC and PAC meetings are held bi-monthly (EMCC is held odd months, PAC is held even months) beginning in January of each calendar year.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

### 5.13 SPECIALTY SYSTEM DESIGN

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#### MINIMUM STANDARDS:

Local EMS agencies developing specialty care plans for EMS-targeted clinical conditions shall determine the optimal system for the specific condition involved, including:

- the number and role of system participants,
- the design of catchment areas (including inter-county transport, as appropriate) with consideration of workload and patient mix,
- identification of patients who should be triaged or transferred to a designated center,
- the role of non-designated hospitals including those which are outside of the primary triage area, and
- a plan for monitoring and evaluation of the system.

#### RECOMMENDED GUIDELINES:

None.

#### CURRENT STATUS: N/A

There are not any specialized emergency medical or critical care facilities in San Benito County. Our Trauma patients are determined using Trauma Triage Criteria (PAM) and are transported by air or ground to neighboring LEMSAs. STEMI patients are transported by air or ground to the nearest STEMI center, usually Salinas Valley Memorial Hospital in Salinas. Stroke patients are transported to the nearest Emergency Department. We participate in neighboring LEMSAs monthly quality meetings.

NEED(S): N/A

OBJECTIVE: N/A

#### TIME FRAME FOR MEETING OBJECTIVE:

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**5.14 PUBLIC INPUT**

**MINIMUM STANDARDS:**

In planning other specialty care systems, the local EMS agency shall ensure input from both pre-hospital and hospital providers and consumers.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Prehospital and hospital providers and consumers have input to all EMS policy and procedure development by way of publically open Emergency Medical Care Commission (EMCC) and Prehospital Advisory Care (PAC) committee meetings. EMCC and PAC meetings are held bi-monthly (EMCC is held odd months, PAC is held even months) beginning in January of each calendar year.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**6.01 QA/QI PROGRAM**

**MINIMUM STANDARDS:**

The local EMS agency shall establish an EMS quality assurance/quality improvement (QA/QI) program to evaluate the response to emergency medical incidents and the care provided to specific patients. The programs shall address the total EMS system, including all pre-hospital provider agencies, base hospitals, and receiving hospitals. It shall address compliance with policies, procedures, and protocols, and identification of preventable morbidity and mortality, and shall utilize state standards and guidelines. The program shall use provider based QA/QI programs and shall coordinate them with other providers.

**RECOMMENDED GUIDELINES:**

The local EMS agency should have the resources to evaluate response to, and the care provided to, specific patients.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS has developed a CQI program that is comprised of the Base Hospital Nurse Liaison, Base Hospital ER Physician, contracted ambulance provider Clinical Coordinator and Medical Director, EMS Medical Director and field personnel. All representatives are invited to meet quarterly at QA/QI meetings and case reviews.

**NEED(S):** Revision of QI Plan.

**OBJECTIVE:** Review and Revision of QI Plan.

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**6.02 PREHOSPITAL RECORDS**

**MINIMUM STANDARDS:**

Pre-hospital records for all patient responses shall be completed and forwarded to appropriate agencies as defined by the local EMS agency.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Policy requires Patient Care Records (PCRs) to be completed for all advanced life support patients, with copies (hard or electronic) of the report being submitted to the receiving hospital, provider or agency.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**6.03 PREHOSPITAL CARE AUDITS**

**MINIMUM STANDARDS:**

Audits of pre-hospital care, including both system response and clinical aspects, shall be conducted.

**RECOMMENDED GUIDELINES:**

The local EMS agency should have a mechanism to link pre-hospital records with dispatch, emergency department, in-patient and discharge records.

**CURRENT STATUS: Meets Minimum Standard**

The quality assurance and CQI program allows for the EMS Agency to monitor clinical and operational compliance.

**NEEDS: none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**6.04 MEDICAL DISPATCH**

**MINIMUM STANDARDS:**

The local EMS agency shall have a mechanism to review medical dispatching to ensure that the appropriate level of medical response is sent to each emergency and to monitor the appropriateness of pre-arrival/post dispatch directions.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The County's authorized Emergency Medical Dispatch Center, Santa Cruz Regional 911 (SCR911) has a comprehensive CQI process and performance reporting system. Results are reviewed at month meetings.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

#### 6.05 DATA MANAGEMENT SYSTEM

##### **MINIMUM STANDARDS:**

The local EMS agency shall establish a data management system that supports its system-wide planning and evaluation (including identification of high risk patient groups) and the QA/QI audit of the care provided to specific patients. It shall be based on state standards.

##### **RECOMMENDED GUIDELINES:**

The local EMS agency should establish an integrated data management system which includes system response and clinical (both pre-hospital and hospital) data.

The local EMS agency should use patient registries, tracer studies, and other monitoring systems to evaluate patient care at all stages of the system.

##### **CURRENT STATUS: Meets Minimum Standard**

Current monitoring systems are provided by the contracted ambulance provider, AMR, giving the EMS Agency complete access to the data management system. MEDS, the "Multi EMS Data System", is CEMIS compliant.

##### **COORDINATION WITH OTHER EMS AGENCIES: n/a**

**NEEDS: none**

**OBJECTIVE: n/a**

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

## 6.06 SYSTEM DESIGN EVALUATION

### MINIMUM STANDARDS:

The local EMS agency shall establish an evaluation program to evaluate EMS system design and operations, including system effectiveness at meeting community needs, appropriateness of guidelines and standards, prevention strategies that are tailored to community needs, and assessment of resources needed to adequately support the system. This shall include structure, process, and outcome evaluations, utilizing state standards and guidelines.

### RECOMMENDED GUIDELINES:

None.

### CURRENT STATUS: Meets Minimum Standard

The Prehospital Advisory Committee (PAC), comprised of the ER medical director, local CQI coordinators, hospital liaison nurse and clinical provider representatives has been formed to evaluate and advise the medical director of clinical issues including system design. Also EMCC reviews local operations, policies and practices. Meetings of the Board of Supervisors (BOS) and EMCC are open to the public with time allocated on each agenda for public comments. A BOS member is invited, and sits on the EMCC and provides additional input to the system management.

**NEED(S):** none

**OBJECTIVE:** n/a

### TIME FRAME FOR MEETING OBJECTIVE:

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**6.07 PROVIDER PARTICIPATION**

**MINIMUM STANDARDS:**

The local EMS agency shall have the resources and authority to require provider participation in the system-wide evaluation program.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Current EMS Policy establishes a system-wide quality assessment program to evaluate the services provided within the San Benito County EMS system. The San Benito County EMS Agency has executed written agreements with the local base hospital and paramedic service provider to participate, as required by state law, in this program. The County Ambulance Ordinance requires providers of medical transportation to acquire a permit through the EMS Agency.

The County contracts with one provider for emergency medical transport and have issued one other permit for non-emergency interfacility medical ground transports. Both require compliance with County EMS policies. This includes reporting requirements, and monitoring of their procedures to ensure the system wide evaluation program. The countywide vote on CSA #36 which funds the EMS Agency and adoption by all governing bodies provides for authorization of system wide participation and evaluation.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**6.08 REPORTING**

**MINIMUM STANDARDS:**

The local EMS agency shall, at least annually, report on the results of its evaluation of EMS system design and operations to the Board(s) of Supervisors, provider agencies, and Emergency Medical Care Committee(s).

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency Annual Report is presented to the County Board of Supervisors every June and the Emergency Medical Care Commission (EMCC) every September.

**NEEDS: none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**6.09 ALS AUDIT**

**MINIMUM STANDARDS:**

The process used to audit treatment provided by advanced life support providers shall evaluate both base hospital (or alternative base station) and pre-hospital activities.

**RECOMMENDED GUIDELINES:**

The local EMS agency's integrated data management system should include pre-hospital, base hospital, and receiving hospital data.

**CURRENT STATUS: Meets Minimum Standard**

The EMS Agency's data management systems (MEDS) has reporting mechanisms available to include prehospital, base hospital, and receiving hospital data.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

#### 6.10 TRAUMA SYSTEM EVALUATION

##### **MINIMUM STANDARDS:**

The local EMS agency, with participation of acute care providers, shall develop a trauma system evaluation and data collection program, including: a trauma registry, a mechanism to identify patients whose care fell outside of established criteria, and a process for identifying potential improvements to the system design and operation.

##### **RECOMMENDED GUIDELINES:**

None.

##### **CURRENT STATUS: Meets Minimum Standard**

The trauma system evaluation and data collection program includes all mechanisms necessary to identify potential improvements to the system design and operation as evidenced by EMS policies and procedures. The EMS Medical Director analyzes the data and presents at Prehospital Advisory Committee (PAC) meetings and QA/QI reviews.

**NEED(S):** none

**OBJECTIVE:** n/a

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**6.11 TRAUMA CENTER DATA**

**MINIMUM STANDARDS:**

The local EMS Agency shall ensure that designated trauma centers provide required data to the EMS agency, including patient specific information that is required for quality assurance/quality improvement and system evaluation.

**RECOMMENDED GUIDELINES:**

The local EMS agency should seek data on trauma patients who are treated at non-trauma center hospitals and shall include this information in their QA/QI and system evaluation program.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency has agreements with all local hospitals and out-of-county trauma centers to supply trauma patient outcome reports. With this information, the EMS Medical Director will study the data and determine under/over triage rates, identify patients whose care fell outside of established EMS policies and will identify potential improvements to the system design and operation.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

## 7.01 PUBLIC INFORMATION MATERIALS

### MINIMUM STANDARDS:

The local EMS agency shall promote the development and dissemination of information materials for the public that addresses:

understanding of EMS system design and operation,  
proper access to the system,  
self-help (e.g., CPR, first aid, etc.),  
patient and consumer rights as they relate to the EMS system,  
health and safety habits as they relate to the prevention and reduction of health risks in target areas, and  
appropriate utilization of emergency departments.

### RECOMMENDED GUIDELINES:

The local EMS agency should promote targeted community education programs on the use of emergency medical services in its service area.

### CURRENT STATUS: Meets Minimum Standard

The San Benito County EMS Agency participates in the development and dissemination of information on basic first aid, CPR, system access, health and safety habits and disaster planning.

The contracted ambulance provider is required by contract to perform monthly activities related to public information, education and awareness. This information is reported annually to the EMS Agency and describes the specific activity, number of persons participating in each activity and the hours spent performing community education. Additionally, the fire department is very active in community education and emergency awareness.

**NEED(S):** none

**OBJECTIVE:** n/a

### TIME FRAME FOR MEETING OBJECTIVE:

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**7.02 INJURY CONTROL**

**MINIMUM STANDARDS:**

The local EMS agency, in conjunction with other local health education programs, shall work to promote injury control and preventive medicine.

**RECOMMENDED GUIDELINES:**

The local EMS agency should promote the development of special EMS educational programs for targeted groups at high risk of injury or illness.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS partners with local agencies to provide injury prevention and preventative medicine.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**7.03 DISASTER PREPAREDNESS**

**MINIMUM STANDARDS:**

The local EMS agency, in conjunction with the local office of emergency services, shall promote citizen disaster preparedness activities.

**RECOMMENDED GUIDELINES:**

The local EMS agency, in conjunction with the local office of emergency services (OES), should produce and disseminate information on disaster medical preparedness.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County Office of Emergency Services (OES) take the lead for disaster planning and preparedness for San Benito County. The EMS Agency, a division of OES, is actively involved in programs and activities promoting disaster preparedness and volunteerism, and attends OES hosted disaster preparedness trainings.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**7.04 FIRST AID & CPR TRAINING**

**MINIMUM STANDARDS:**

The local EMS agency shall promote the availability of first aid and CPR training for the general public.

**RECOMMENDED GUIDELINES:**

The local EMS agency should adopt a goal for training of an appropriate percentage of the general public in first aid and CPR. A higher percentage should be achieved in high risk groups.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS works in conjunction with the County contracted ambulance provider, AMR, and Hollister Fire Department to promote CPR and first aid training to the public.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**8.01 DISASTER MEDICAL PLANNING**

**MINIMUM STANDARDS:**

In coordination with the local office of emergency services (OES), the local EMS agency shall participate in the development of medical response plans for catastrophic disasters, including those involving toxic substances.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS, a division of the San Benito County Office of Emergency Services (OES), works in conjunction with emergency service providers to develop and exercise medical response plans for catastrophic disasters. The EMS Agency actively participates in the annual Statewide Health Disaster exercise.

**COORDINATION WITH OTHER EMS AGENCIES:** n/a

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**8.02 RESPONSE PLANS**

**MINIMUM STANDARDS:**

Medical response plans and procedures for catastrophic disasters shall be applicable to incidents caused by a variety of hazards, including toxic substances.

**RECOMMENDED GUIDELINES:**

The California Office of Emergency Services' multi-hazard functional plan should serve as the model for the development of medical response plans for catastrophic disasters.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS, a division of San Benito County Office of Emergency Services (OES) has adopted the County approved Emergency Operations Plan.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**8.03 HAZMAT TRAINING**

**MINIMUM STANDARDS:**

All EMS providers shall be properly trained and equipped for response to hazardous materials incidents, as determined by their system role and responsibilities.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

There are no hazardous materials response teams based in San Benito County. Such teams respond as mutual aid from neighboring counties. Fire department, County Environmental Health, and law-enforcement personnel have received comprehensive training and are equipped for hazardous materials response, appropriate to their level of response. Ambulance personnel have received hazardous materials "awareness" training

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

#### **8.04 INCIDENT COMMAND SYSTEM**

##### **MINIMUM STANDARDS:**

Medical response plans and procedures for catastrophic disasters shall use the Incident Command System (ICS) as the basis for field management.

##### **RECOMMENDED GUIDELINES:**

The local EMS agency should ensure that ICS training is provided for all medical providers.

##### **CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Plan is based on the ICS. Agency staff have completed all necessary training.

The ICS System is used at the field level, the Hospital Emergency Incident Command System (HEICS) is used with the hospital, and SEMS is utilized at the Operational Area level. The Incident Management System is well developed and practiced within San Benito County.

**NEED(S):** none

**OBJECTIVE:** n/a

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

#### 8.05 DISTRIBUTION OF CASUALTIES

##### **MINIMUM STANDARDS:**

The local EMS agency, using state guidelines, shall establish written procedures for distributing disaster casualties to the medically most appropriate facilities in its service area.

##### **RECOMMENDED GUIDELINES:**

The local EMS agency, using state guidelines, and in consultation with Regional Poison Centers, should identify hospitals with special facilities and capabilities for receipt and treatment of patients with radiation and chemical contamination and injuries.

##### **CURRENT STATUS: Meets Minimum Standard**

EMSystem allows communication between the EMS Agency, the local EMS providers and the hospitals. This system can be utilized to obtain status of mass casualty incidents and send polls and memos to each of the hospitals. During an incident, EMS providers on scene will make base station contact to notify the base hospital of the MCI or potential MCI. The base station will initiate an MCI on EMSystem and will coordinate the distribution of casualties to the closest most appropriate facility. If the local base station becomes overwhelmed, the EMS Agency is available to assist with coordination activities. The process is described in detail in the MCI Plan.

##### **COORDINATION WITH OTHER EMS AGENCIES:**

As necessary with appropriate receiving hospitals for receipt and treatment of patients.

**NEED(S):** none

**OBJECTIVE:** n/a

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**8.06 NEEDS ASSESSMENT**

**MINIMUM STANDARDS:**

The local EMS agency, using state guidelines, shall establish written procedures for early assessment of needs and shall establish a means for communicating emergency requests to the state and other jurisdictions.

**RECOMMENDED GUIDELINES:**

The local EMS agency's procedures for determining necessary outside assistance should be exercised yearly.

**CURRENT STATUS: Meets Minimum Standard**

Emergency requests are communicated over RIMS (Regional Information Management System), OASIS (Operational Area Satellite Information System) or by direct telephone to the Coastal Region II Disaster Medical Health Coordinator.

San Benito County EMS Agency also participates in the annual EMSA sponsored Statewide Medical Health Disaster Exercise which tests the Agency's procedures for determining necessary outside assistance.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**8.07 DISASTER COMMUNICATIONS**

**MINIMUM STANDARDS:**

A specific frequency (e.g., CALCORD) or frequencies shall be identified for interagency communication and coordination during a disaster.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County Emergency Operations Plan identifies radio systems used for interagency communication and coordination during a disaster. These include State (CALCORD) and local radio systems. Due to the size of the County and the nature of communications in the area, all agencies have agreed to include the Sheriff primary, ambulance, and public works channels as minimum programming in all agency radios. Interagency communications and coordination is not an issue because anyone of these channels may be used during a disaster as necessary or as available.

**COORDINATION WITH OTHER EMS AGENCIES:**

San Benito EMS Agency has identified CALCORD as the radio frequency to be used during multi-jurisdictional incidents.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**8.08 INVENTORY OF RESOURCES**

**MINIMUM STANDARDS:**

The local EMS agency, in cooperation with the local OES, shall develop an inventory of appropriate disaster medical resources to respond to multi-casualty incidents and disasters likely to occur in its service area.

**RECOMMENDED GUIDELINES:**

The local EMS agency should ensure that emergency medical providers and health care facilities have written agreements with anticipated providers of disaster medical resources.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS, a division of the San Benito County Office of Emergency Services (OES), has adopted the Resource Directory developed by OES. Specific capabilities of medical facilities are included in the directory.

The San Benito County Public Health Department has written policies with other medical providers, health facilities and agencies that may provide services or resources during a disaster.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**8.09 DMAT TEAMS**

**MINIMUM STANDARDS:**

The local EMS agency shall establish and maintain relationships with DMAT teams in its area.

**RECOMMENDED GUIDELINES:**

The local EMS agency should support the development and maintenance of DMAT teams in its area.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County EMS Agency supports the DMAT Team in its region.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

### **8.10 MUTUAL AID AGREEMENTS**

#### **MINIMUM STANDARDS:**

The local EMS agency shall ensure the existence of medical mutual aid agreements with other counties in its OES region and elsewhere, as needed, that ensure sufficient emergency medical response and transport vehicles, and other relevant resources will be made available during significant medical incidents and during periods of extraordinary system demand.

#### **RECOMMENDED GUIDELINES:**

None.

#### **CURRENT STATUS: Meets Minimum Standard**

San Benito County has mutual aid agreements with both Santa Cruz and Monterey Counties. In the event of a large scale incident, resources would be utilized through regional MHOAC.

#### **COORDINATION WITH OTHER EMS AGENCIES:**

San Benito County has mutual aid agreements with both Santa Cruz and Monterey Counties. These agreements ensure that sufficient emergency medical response, transport vehicles, and other relevant resources will be made available during significant medical incidents and during periods of extraordinary system demand.

#### **NEED(S):**

Mutual Aid Agreement with Santa Clara County.

#### **OBJECTIVE:**

Develop a Mutual Aid Agreement with Santa Clara County.

#### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**8.11 CCP DESIGNATION**

**MINIMUM STANDARDS:**

The local EMS agency, in coordination with the local OES and county health officer(s), and using state guidelines, shall designate Field Treatment Sites (FTS).

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Several locations have been identified as Field Treatment Sites (FTS), however, most are multi-use configurations (shelters, mass prophylaxis, etc.) and more often would be incident dependent.

**COORDINATION WITH OTHER EMS AGENCIES:**

Coordination would be with local OES, Fire, Law Enforcement, Public Health, Environmental Health, etc.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**8.12 ESTABLISHMENT OF CCP**

**MINIMUM STANDARDS:**

The local EMS agency, in coordination with the local OES, shall develop plans for establishing Casualty Collection Points (CCP) and a means for communicating with them.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Several sites exist for Casualty Collection Points. Most would be incident dependent.

Communication methods will vary depending on available resources (hand-held radios, cell phones, satellite phones).

**NEED(S): None**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**8.13 DISASTER MEDICAL TRAINING**

**MINIMUM STANDARDS:**

The local EMS agency shall review the disaster medical training of EMS responders in its service area, including the proper management of casualties exposed to and/or contaminated by toxic or radioactive substances.

**RECOMMENDED GUIDELINES:**

The local EMS agency should ensure that EMS responders are appropriately trained in disaster response, including the proper management of casualties exposed to or contaminated by toxic or radioactive substances.

**CURRENT STATUS: Meets Minimum Standard**

San Benito County Office of Emergency Services (OES) provides on-going training for first responders, medical, public health and emergency management communities. Classes are well attended and will continue to be a part of our continuing education program.

**NEED(S): None**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
  
- Long-Range Plan (more than one year)

**8.14 HOSPITAL PLANS**

**MINIMUM STANDARDS:**

The local EMS agency shall encourage all hospitals to ensure that their plans for internal and external disasters are fully integrated with the county's medical response plan(s).

**RECOMMENDED GUIDELINES:**

At least one disaster drill per year conducted by each hospital should involve other hospitals, the local EMS agency, and pre-hospital medical care agencies.

**CURRENT STATUS: Meets Minimum Standard**

The San Benito County EMS Agency participates annually with the hospital in the Statewide Medical Health Disaster Exercise. The hospital's Emergency Operation Plan integrates with the County Emergency Operations Plan.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**8.15 INTERHOSPITAL COMMUNICATIONS**

**MINIMUM STANDARDS:**

The local EMS agency shall ensure that there is an emergency system for inter-hospital communications, including operational procedures.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

Hazel Hawkins Memorial Hospital is able to communicate with ambulance personnel and Santa Cruz Regional 911 via MedNet Channels as well as land-line, cell and satellite phones.

**NEED(S): none**

**OBJECTIVE: n/a**

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

#### 8.16 PREHOSPITAL AGENCY PLANS

##### **MINIMUM STANDARDS:**

The local EMS agency shall ensure that all pre-hospital medical response agencies and acute-care hospitals in its service area, in cooperation with other local disaster medical response agencies, have developed guidelines for the management of significant medical incidents and have trained their staffs in their use.

##### **RECOMMENDED GUIDELINES:**

The local EMS agency should ensure the availability of training in management of significant medical incidents for all pre-hospital medical response agencies and acute-care hospital staffs in its service area.

##### **CURRENT STATUS: Meets Minimum Standard**

The local acute-care hospital, Hazel Hawkins Hospital, has developed guidelines, and its personnel are trained in the management of significant medical incidents, in compliance with the Joint Commission on Accreditation of Healthcare Organizations. The San Benito County EMS Agency has developed its MCI Plan, and has provided training to prehospital medical response agencies responding to significant medical incidents. This training is offered annually to all prehospital and other medical personnel.

**NEED(S): none**

**OBJECTIVE: n/a**

##### **TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

### 8.17 ALS POLICIES

#### MINIMUM STANDARDS:

The local EMS agency shall ensure that policies and procedures allow advanced life support personnel and mutual aid responders from other EMS systems to respond and function during significant medical incidents.

#### RECOMMENDED GUIDELINES:

None.

#### CURRENT STATUS: Meets Minimum Standard

Title 22 CCR (California Code of Regulations) § 100165(l) (Accreditation to Practice) expressly authorizes Paramedics to function outside their home-base EMS systems during significant medical incidents. It provides as follows:

*"During a mutual aid response into another jurisdiction, a Paramedic may utilize the scope of practice for which s/he is trained and accredited according to the policies and procedures established by his/her accrediting local EMS agency."*

The State EMS Authority and the OES Coastal Region II Disaster Medical Health Coordinator have worked to draft model ambulance medical mutual-aid agreements within the Region.

EMS Policy outlining the procedures to allow advanced life support personnel and mutual aid responders from the San Benito EMS system to respond and function during significant medical incidents in other EMS systems has been developed. This policy is EMS Policy #3010 entitled "Paramedic Accreditation to Practice."

**NEED(S): none**

**OBJECTIVE: n/a**

#### TIME FRAME FOR MEETING OBJECTIVE:

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**8.18 SPECIALTY CENTER ROLES**

**MINIMUM STANDARDS:**

Local EMS agencies developing trauma or other specialty care systems shall determine the role of identified specialty centers during a significant medical incidents and the impact of such incidents on day-to-day triage procedures.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

There are no Specialty Care Centers located in San Benito County.

**NEED(S):**

Level IV Trauma Center

**OBJECTIVE:**

To designate Hazel Hawkins Memorial Hospital as a Level IV Trauma Center.

To update all EMS Trauma Policies and Procedures to garner support from the County's EMS system stakeholders for a fully implemented EMSA approved Trauma Plan.

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**8.19 WAIVING EXCLUSIVITY**

**MINIMUM STANDARDS:**

Local EMS agencies which grant exclusive operating permits shall ensure that a process exists to waive the exclusivity in the event of a significant medical incident.

**RECOMMENDED GUIDELINES:**

None.

**CURRENT STATUS: Meets Minimum Standard**

During times of significant medical service needs, the County's contract with its Emergency Ambulance Service Provider makes provisions for the immediate recall of personnel to staff units during multi-casualty incidents, times of peak overload or declared disaster situations. To the extent that the County's Emergency Ambulance Service Provider has units available, but consistent with its primary responsibility to provide ambulance and emergency medical services in the exclusive operating area, the Emergency Ambulance Service Provider, with County approval, shall render immediate "instant aid" or "mutual aid" to those providers of EMS operating within adjacent areas in order to insure that timely emergency medical services are rendered to persons in need of such services within those areas.

If a disaster declaration is made, the County, at its discretion, may suspend normal operations and the Emergency Ambulance Service Provider shall respond in accordance with the County's disaster plan.

The San Benito County Ambulance Ordinance #923 requires that all ambulance services obtain a permit from the County to provide emergency and non-emergency services in the County. However, the permit requirements do not apply (at the request of local authorities) during any "state of emergency," as defined in the California Emergency Services Act, Chapter 7, Division I, Title 22 of the Government Code.

**NEED(S):** none

**OBJECTIVE:** n/a

**TIME FRAME FOR MEETING OBJECTIVE:**

- Short-Range Plan (one year or less)
- Long-Range Plan (more than one year)

**SECTION 3**  
**SYSTEM RESOURCES AND OPERATIONS**

**TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT**

Reporting Year: 2015

**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: San Benito County

A. Basic Life Support (BLS)	_____ %
B. Limited Advanced Life Support (LALS)	_____ %
C. Advanced Life Support (ALS)	<u>100</u> %

2. Type of agency
- a) Public Health Department
  - b) County Health Services Agency
  - c) Other (non-health) County Department
  - d) Joint Powers Agency
  - e) Private Non-Profit Entity
  - f) Other: Emergency Medical Services, a Division of the Office of Emergency Services

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

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

Implementation of exclusive operating areas (ambulance franchising)	<u>X</u>
Designation of trauma centers/trauma care system planning	<u>X</u>
Designation/approval of pediatric facilities	<u>X</u>
Designation of other critical care centers	<u>X</u>
Development of transfer agreements	<u>X</u>
Enforcement of local ambulance ordinance	<u>X</u>
Enforcement of ambulance service contracts	<u>X</u>
Operation of ambulance service	_____
Continuing education	<u>X</u>
Personnel training	_____
Operation of oversight of EMS dispatch center	_____
Non-medical disaster planning	<u>X</u>
Administration of critical incident stress debriefing team (CISD)	_____

**TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT (cont.)**

Administration of disaster medical assistance team (DMAT)	X _____
Administration of EMS Fund [Senate Bill (SB) 12/612]	X _____
Other: _____	_____
Other: _____	_____
Other: _____	_____

**5. EXPENSES**

Salaries and benefits (All but contract personnel)	\$ <u>174,844.58</u>
Contract Services (e.g. medical director)	<u>18,947.50</u>
Operations (e.g. copying, postage, facilities)	<u>9,241.02</u>
Travel	<u>3,238.72</u>
Fixed assets	
Indirect expenses (overhead)	<u>23,700.00</u>
Ambulance subsidy	
EMS Fund payments to physicians/hospital	<u>60,862.60</u>
Dispatch center operations (non-staff)	<u>85,209.00</u>
Training program operations	
Other: <u>Base Station</u>	<u>14,000</u>
Other: <u>Communications Equipment (repeater, radios, etc.)</u>	<u>19,553.28</u>
Other: <u>GIS Program</u>	<u>8,391.00</u>
<b>TOTAL EXPENSES</b>	<b>\$ <u>471,967.00</u></b>

**6. SOURCES OF REVENUE**

Special project grant(s) [from EMSA]	\$ _____
Preventive Health and Health Services (PHHS) Block Grant	_____
Office of Traffic Safety (OTS)	_____
State general fund	_____
County general fund	_____
Other local tax funds (e.g., EMS district) CSA36	<u>333,779.20</u>
County contracts (e.g. multi-county agencies) Hollister Hills	<u>57,000.00</u>
Certification fees	<u>1,999.00</u>
Training program approval fees	<u>1,090.00</u>
Training program tuition/Average daily attendance funds (ADA)	_____
Job Training Partnership ACT (JTPA) funds/other payments	_____

Base hospital application fees

**TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT (cont.)**

Trauma center application fees

Trauma center designation fees

Pediatric facility approval fees

Pediatric facility designation fees

Other critical care center application fees

Type: STEMI

Other critical care center designation fees

Type: \_\_\_\_\_

Ambulance service/vehicle fees

9,092.50

Contributions

EMS Fund (SB 12/612)

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

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

Other (specify): MADDY Admin.

34,375.36

Fund Balance (CSA 36)

34,630.94

**TOTAL REVENUE**

**\$ 471,967.00**

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

**TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT (cont.)**

**7. Fee structure**

We do not charge any fees

Our fee structure is:

First responder certification	\$ _____
EMS dispatcher certification	_____
EMT-I certification	<u>54.00</u>
EMT-I recertification	_____
EMT-defibrillation certification	_____
EMT-defibrillation recertification	_____
AEMT certification	_____
AEMT recertification	_____
EMT-P accreditation	<u>146.00</u>
Mobile Intensive Care Nurse/Authorized Registered Nurse certification	<u>169.00</u>
MICN/ARN recertification	<u>100.00</u>
EMT-I training program approval	_____
AEMT training program approval	_____
EMT-P training program approval	<u>828.00</u>
MICN/ARN training program approval	_____
Base hospital application	_____
Base hospital designation	_____
Trauma center application	_____
Trauma center designation	<u>4,493.00</u>
Pediatric facility approval	_____
Pediatric facility designation	_____
Other critical care center application Type: <u>STEMI</u>	<u>4,493.00</u>
Other critical care center designation Type: _____	_____
Ambulance service License	ALS/CCT <u>735.00</u>
	Gurney/Wheelchair/BLS/AIR <u>601.00</u>
Ambulance vehicle permits	_____
Other: <u>Gurney/Wheelchair Van/BLS</u>	<u>102.00</u>
Other: <u>ALS/CCT/QRV</u>	<u>133.00</u>
Other: _____	_____

TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT (cont.)

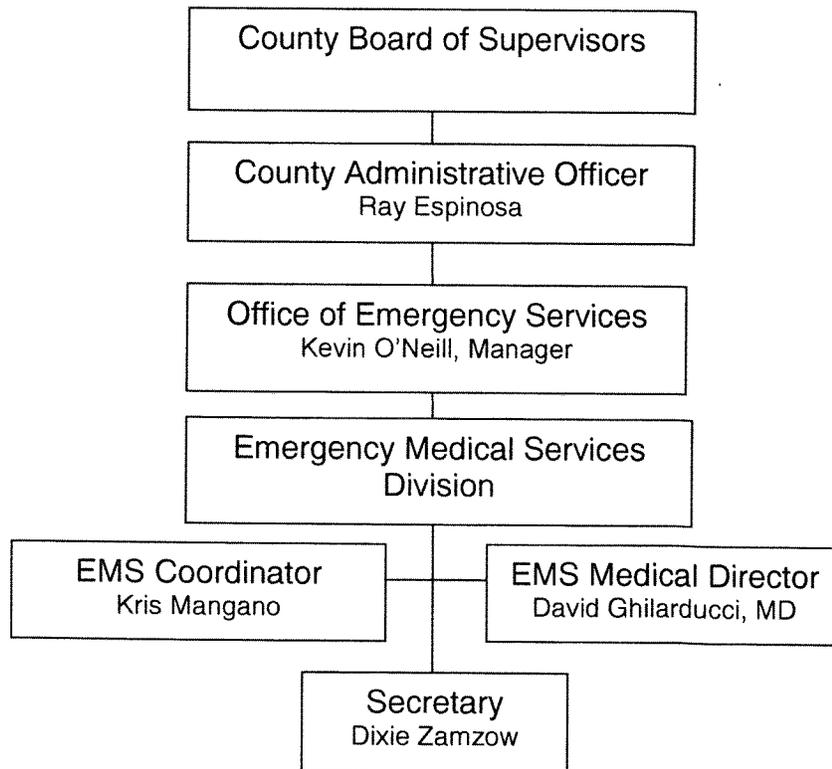
CATEGORY	ACTUAL TITLE	FTE POSITIONS (EMS ONLY)	TOP SALARY BY HOURLY EQUIVALENT	BENEFITS (% of Salary)	COMMENTS
EMS Admin./Coord./Director	EMS Coordinator	1	42.02	40-45	
Asst. Admin./Admin.Asst./Admin. Mgr.					
ALS Coord./Field Coord./Trng Coordinator					
Program Coordinator/Field Liaison (Non-clinical)					
Trauma Coordinator					
Medical Director	Medical Director	1	110.00	n/a	Contract
Other MD/Medical Consult/Training Medical Director					
Disaster Medical Planner					
Dispatch Supervisor					
Medical Planner					
Data Evaluator/Analyst					
QA/QI Coordinator					
Public Info. & Education Coordinator					
Executive Secretary					
Other Clerical	EMS Secretary	1	23.72	40-45	
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.

**EMERGENCY MEDICAL SERVICES DIVISION**

**Dave Ghilarducci, MD, FACEP**  
Medical Director

**Organizational Structure**



San Benito County Emergency Medical Care Committee (EMCC), acts in an advisory capacity to the Board of Supervisors and the EMS Director in regards to operational and medical issues. Per the bylaws, the EMCC shall advise and recommend EMS systems planning and oversight to the Board of Supervisors.

**TABLE 3: CERTIFICATION/TRAINING**

Reporting Year: 2015

**NOTE:** Table 3 is to be reported by agency.

	EMT - Is	EMT - IIS	EMT - Ps	MICN
Total Certified	34	n/a		n/a
Number newly certified this year	16	n/a		n/a
Number recertified this year	18	n/a		n/a
Total number of accredited personnel on July 1 of the reporting year	34		13	
Number of certification reviews resulting in:				
a) formal investigations	0	n/a		n/a
b) probation	0		0	
c) suspensions	0		0	
d) revocations	0			
e) denials	0			
f) denials of renewal	0			
g) no action taken	0		1	

1. Early defibrillation:

- a) Number of EMT-I (defib) authorized to use AEDs
- b) Number of public safety (defib) certified (non-EMT-I)

34  
34

2. Do you have an EMR training program

yes  no

TABLE 4: COMMUNICATION

COUNTY: SAN BENITO COUNTY

REPORTING YEAR: 2015

1. Number of primary Public Service Answering Points (PSAP) 0
2. Number of secondary PSAPs 10
3. Number of dispatch centers directly dispatching ambulances 1
4. Number of EMS dispatch agencies utilizing EMD guidelines 1
5. Number of designated dispatch centers for EMS Aircraft 0
6. Who is your primary dispatch agency for day-to-day emergencies?  
Santa Cruz Regional 911
7. Who is your primary dispatch agency for a disaster?  
Santa Cruz Regional 911
8. Do you have an operational area disaster communication system?  Yes  No
  - a. Radio primary frequency Tx 463.00 / Rx 468.0
  - b. Other methods Hollister Fire Frequency
  - c. Can all medical response units communicate on the same disaster  Yes  No
  - d. Do you participate in the Operational Area Satellite Information System (OASIS)?  Yes  No
  - e. Do you have a plan to utilize the Radio Amateur Civil Emergency Services (RACES) as a back-up communication system?  Yes  No
    - 1) Within the operational area?  Yes  No
    - 2) Between operation area and the region and/or state?  Yes  No

TABLE 5: RESPONSE / TRANSPORTATION

REPORTING YEAR: 2015

EARLY DEFIBRILLATION PROVIDERS

1. Number of EMT - Defibrillation providers - 2

**SYSTEM STANDARD RESPONSE TIMES (90<sup>TH</sup> PERCENTILE)**

Enter the response times in the appropriate boxes:

	METRO/URBAN	SUBURBAN/ RURAL	WILDERNESS	SYSTEMWIDE
BLS and CPR capable first responder	n/a	n/a	n/a	n/a
Early defibrillation responder	n/a	n/a	n/a	n/a
Advanced life support responder	10 min	30 min	90 min	120 min.
Transport Ambulance	10 min	30 min	90 min	120 min.

TABLE 6: FACILITIES/ CRITICAL CARE

REPORTING YEAR: 2015

**Trauma**

Trauma patients:

1. Number of patients meeting trauma triage criteria	<u>470</u>
2. Number of major trauma victims transported directly to a trauma center by ambulance	<u>          </u>
3. Number of major trauma patients transferred to a trauma center	<u>135</u>
4. Number of patients meeting triage criteria who weren't treated at a trauma center	<u>298</u>

**Emergency Departments**

Total number of emergency departments	<u>1</u>
1. Number of referral emergency services	<u>0</u>
2. Number of standby emergency services	<u>0</u>
3. Number of basic emergency services	<u>1</u>
4. Number of comprehensive emergency services	<u>0</u>

**Receiving Hospitals**

1. Number of receiving hospitals with written agreements	<u>1</u>
2. Number of base hospitals with written agreements	<u>1</u>

**TABLE 7: DISASTER MEDICAL**

Reporting Year: 2015

County: San Benito County

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

**SYSTEM RESOURCES**

1. Casualty Collections Points (CCP)

- a. Where are your CCPs located? Incident dependent
- b. How are they staffed? Local resources and Disaster Healthcare Volunteers
- c. Do you have a supply system for supporting them for 72 hours?  Yes  No

2. CISD

- Do you have a CISD provider with 24 hour capability?  Yes  No

3. Medical Response Team

- a. Do you have any team medical response capability?  Yes  No
- b. For each team, are they incorporated into your local response plan?  Yes  No
- c. Are they available for statewide response?  Yes  No
- d. Are they part of a formal out-of-state response system?  Yes  No

4. Hazardous Materials

- a. Do you have any HazMat trained medical response teams?  Yes  No
- b. At what HazMat level are they trained? \_\_\_\_\_
- c. Do you have the ability to do decontamination in an emergency room?  Yes  No
- d. Do you have the ability to do decontamination in the field?  Yes  No

**OPERATIONS**

- 1. Are you using a Standardized Emergency Management System (SEMS) that incorporates a form of Incident Command System (ICS) structure?  Yes  No

- 2. What is the maximum number of local jurisdiction EOCs you will need to interact with in a disaster? 1

- 3. Have you tested your MCI Plan this year in a:
  - a. real event?  Yes  No
  - b. exercise?  Yes  No

**TABLE 7: DISASTER MEDICAL (cont.)**

4. List all counties with which you have a written medical mutual aid agreement:  
We have an auto aid agreement with Monterey County, mutual aid is based on the Government Code.
5. Do you have formal agreements with hospitals in your operational area to participate in disaster planning and response?  Yes  No
6. Do you have a formal agreements with community clinics in your operational areas to participate in disaster planning and response?  Yes  No
7. Are you part of a multi-county EMS system for disaster response?  Yes  No
8. Are you a separate department or agency?  Yes  No
9. If not, to whom do you report? San Benito County Office of Emergency 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: Response/Transportation/Providers**

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

County: San Benito County Provider: American Medical Response Response Zone: Countywide (EOA)  
 Address: 1870 Hillcrest Road Number of Ambulance Vehicles in Fleet: 6  
Hollister, CA 95023  
 Phone Number: (831) 636-9391 Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 2

<p><b>Written Contract:</b></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>Medical Director:</b></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>System Available 24 Hours:</b></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>Level of Service:</b></p> <p><input checked="" type="checkbox"/> Transport <input type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground  <input type="checkbox"/> Non-Transport <input type="checkbox"/> BLS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air  <input type="checkbox"/> CCT <input type="checkbox"/> Water  <input checked="" type="checkbox"/> IFT</p>
<p><b>Ownership:</b></p> <p><input type="checkbox"/> Public  <input checked="" type="checkbox"/> Private</p>	<p><b>If Public:</b></p> <p><input type="checkbox"/> Fire  <input type="checkbox"/> Law  <input type="checkbox"/> Other                  Explain: _____</p>	<p><b>If Public:</b></p> <p><input type="checkbox"/> City <input type="checkbox"/> County  <input type="checkbox"/> State <input type="checkbox"/> Fire District  <input type="checkbox"/> Federal</p>	<p><b>If Air:</b></p> <p><input type="checkbox"/> Rotary  <input type="checkbox"/> Fixed Wing</p> <p><b>Air Classification:</b></p> <p><input type="checkbox"/> Auxiliary Rescue  <input type="checkbox"/> Air Ambulance  <input type="checkbox"/> ALS Rescue  <input type="checkbox"/> BLS Rescue</p>

**Transporting Agencies**

3281 Total number of responses 2542 Total number of transports  
 2994 Number of emergency responses 2255 Number of emergency transports  
 287 Number of non-emergency responses 287 Number of non-emergency transports

**Air Ambulance Services**

\_\_\_\_\_ Total number of responses  
 \_\_\_\_\_ Total number of transports  
 \_\_\_\_\_ Number of emergency responses  
 \_\_\_\_\_ Number of emergency transports  
 \_\_\_\_\_ Number of non-emergency responses  
 \_\_\_\_\_ Number of non-emergency transports

**TABLE 8: Response/Transportation/Providers**

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

County: San Benito County Provider: Aromas Tri-County Fire District Response Zone: Special District

Address: 492 Carpenteria Road Number of Ambulance Vehicles in Fleet: 0

Aromas, CA 95004

Phone Number: (831) 726-3130

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 0

<p><b>Written Contract:</b></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><b>Medical Director:</b></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><b>System Available 24 Hours:</b></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>Level of Service:</b></p> <p><input type="checkbox"/> Transport <input type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground</p> <p><input checked="" type="checkbox"/> Non-Transport <input checked="" type="checkbox"/> BLS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air</p> <p><input type="checkbox"/> CCT <input type="checkbox"/> Water</p> <p><input type="checkbox"/> IFT</p>
<p><b>Ownership:</b></p> <p><input checked="" type="checkbox"/> Public</p> <p><input type="checkbox"/> Private</p>	<p><b>If Public:</b></p> <p><input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other</p> <p>Explain: _____</p>	<p><b>If Public:</b></p> <p><input checked="" type="checkbox"/> City <input checked="" type="checkbox"/> County</p> <p><input type="checkbox"/> State <input type="checkbox"/> Fire District</p> <p><input type="checkbox"/> Federal</p>	<p><b>If Air:</b></p> <p><input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing</p> <p><b>Air Classification:</b></p> <p><input type="checkbox"/> Auxiliary Rescue</p> <p><input type="checkbox"/> Air Ambulance</p> <p><input type="checkbox"/> ALS Rescue</p> <p><input type="checkbox"/> BLS Rescue</p>

**Transporting Agencies**

200 \_\_\_\_\_ Total number of responses

200 \_\_\_\_\_ Total number of transports

\_\_\_\_\_ Number of emergency transports

\_\_\_\_\_ Number of non-emergency transports

**Air Ambulance Services**

\_\_\_\_\_ Total number of responses

\_\_\_\_\_ Total number of transports

\_\_\_\_\_ Number of emergency transports

\_\_\_\_\_ Number of non-emergency transports

**TABLE 8: Response/Transportation/Providers**

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

County: San Benito County Provider: CALSTAR Response Zone: Countywide

Address: 20 Morensen Ave. Number of Ambulance Vehicles in Fleet: 2

Salinas, CA 93905

Phone Number: 831-424-3815

Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 2

<p><u>Written Contract:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><u>Medical Director:</u></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><u>System Available 24 Hours:</u></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><u>Level of Service:</u></p> <p><input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground  <input type="checkbox"/> Non-Transport <input type="checkbox"/> BLS <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> Air  <input checked="" type="checkbox"/> CCT <input type="checkbox"/> Water  <input checked="" type="checkbox"/> IFT</p>
<p><u>Ownership:</u></p> <p><input type="checkbox"/> Public  <input checked="" type="checkbox"/> Private</p>	<p><u>If Public:</u></p> <p><input type="checkbox"/> Fire  <input type="checkbox"/> Law  <input type="checkbox"/> Other          Explain: _____</p>	<p><u>If Public:</u></p> <p><input type="checkbox"/> City <input type="checkbox"/> County  <input type="checkbox"/> State <input type="checkbox"/> Fire District  <input type="checkbox"/> Federal</p>	<p><u>If Air:</u></p> <p><input checked="" type="checkbox"/> Rotary  <input checked="" type="checkbox"/> Fixed Wing</p> <p><u>Air Classification:</u></p> <p><input type="checkbox"/> Auxiliary Rescue  <input checked="" type="checkbox"/> Air Ambulance  <input type="checkbox"/> ALS Rescue  <input type="checkbox"/> BLS Rescue</p>

Transporting Agencies

Total number of responses 146 Total number of transports \_\_\_\_\_  
 Number of emergency responses \_\_\_\_\_ Number of emergency transports \_\_\_\_\_  
 Number of non-emergency responses \_\_\_\_\_ Number of non-emergency transports \_\_\_\_\_

Air Ambulance Services

Total number of responses 146 Total number of transports \_\_\_\_\_  
 Number of emergency responses \_\_\_\_\_ Number of emergency transports \_\_\_\_\_  
 Number of non-emergency responses \_\_\_\_\_ Number of non-emergency transports \_\_\_\_\_

**TABLE 8: Response/Transportation/Providers**

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

**County:** San Benito County      **Provider:** Hollister Fire Department      **Response Zone:** County of San Benito, City of Hollister, City of San Juan Bautista

**Address:** 110 Sally Street      **Number of Ambulance Vehicles in Fleet:** 0  
 Hollister, CA 95023  
**Phone Number:** (831) 636-4325      **Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day:** 0

<p><b>Written Contract:</b></p> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<p><b>Medical Director:</b></p> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<p><b>System Available 24 Hours:</b></p> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p><b>Level of Service:</b></p> <input type="checkbox"/> Transport <input type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input checked="" type="checkbox"/> BLS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input type="checkbox"/> CCT <input type="checkbox"/> Water <input type="checkbox"/> IFT
<p><b>Ownership:</b></p> <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	<p><b>If Public:</b></p> <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other Explain: _____	<p><b>If Public:</b></p> <input checked="" type="checkbox"/> City <input checked="" type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Fire District <input type="checkbox"/> Federal	<p><b>If Air:</b></p> <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing
			<p><b>Air Classification:</b></p> <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue

**Transporting Agencies**

2771 \_\_\_\_\_ Total number of responses  
 2771 \_\_\_\_\_ Number of emergency responses  
 \_\_\_\_\_ Number of non-emergency responses

**Air Ambulance Services**

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

**TABLE 8: Response/Transportation/Providers**

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

**County:** San Benito County **Provider:** California Department of Parks & Recreation **Response Zone:** Hollister Hills SVRA

**Address:** 7800 Cienega Road **Number of Ambulance Vehicles in Fleet:** 0  
 Hollister, CA 95023

**Phone Number:** (831) 637-8186 **Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day:** 0

<p><b>Written Contract:</b>  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>Medical Director:</b>  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>System Available 24 Hours:</b>  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>Level of Service:</b>  <input type="checkbox"/> Transport <input type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground  <input checked="" type="checkbox"/> Non-Transport <input checked="" type="checkbox"/> BLS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air  <input type="checkbox"/> CCT <input type="checkbox"/> Water  <input type="checkbox"/> IFT</p>
<p><b>Ownership:</b>  <input checked="" type="checkbox"/> Public  <input type="checkbox"/> Private</p>	<p><b>If Public:</b>  <input type="checkbox"/> Fire  <input checked="" type="checkbox"/> Law  <input type="checkbox"/> Other                  Explain: _____</p>	<p><b>If Public:</b>  <input type="checkbox"/> City <input type="checkbox"/> County  <input checked="" type="checkbox"/> State <input type="checkbox"/> Fire District  <input type="checkbox"/> Federal</p>	<p><b>If Air:</b>  <input type="checkbox"/> Rotary  <input type="checkbox"/> Fixed Wing</p> <p><b>Air Classification:</b>  <input type="checkbox"/> Auxiliary Rescue  <input type="checkbox"/> Air Ambulance  <input type="checkbox"/> ALS Rescue  <input type="checkbox"/> BLS Rescue</p>

**Transporting Agencies**

Total number of responses \_\_\_\_\_ Total number of transports \_\_\_\_\_  
 Number of emergency responses \_\_\_\_\_ Number of emergency transports \_\_\_\_\_  
 Number of non-emergency responses \_\_\_\_\_ Number of non-emergency transports \_\_\_\_\_

**Air Ambulance Services**

Total number of responses \_\_\_\_\_ Total number of transports \_\_\_\_\_  
 Number of emergency responses \_\_\_\_\_ Number of emergency transports \_\_\_\_\_  
 Number of non-emergency responses \_\_\_\_\_ Number of non-emergency transports \_\_\_\_\_

**TABLE 8: Response/Transportation/Providers**

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

County: San Benito County Provider: Mercy Air Response Zone: Countywide

Address: 625 E. Carnegie Drive Number of Ambulance Vehicles in Fleet: 0

San Bernardino, CA 92408

Phone Number: 909-915-2930 Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 0

<p><u>Written Contract:</u></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><u>Medical Director:</u></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><u>System Available 24 Hours:</u></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><u>Level of Service:</u></p> <p><input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground  <input type="checkbox"/> Non-Transport <input type="checkbox"/> BLS <input type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> Air  <input checked="" type="checkbox"/> CCT <input type="checkbox"/> Water  <input type="checkbox"/> IFT</p>
<p><u>Ownership:</u></p> <p><input type="checkbox"/> Public  <input checked="" type="checkbox"/> Private</p>	<p><u>If Public:</u></p> <p><input type="checkbox"/> Fire  <input type="checkbox"/> Law  <input type="checkbox"/> Other          Explain: _____</p>	<p><u>If Public:</u></p> <p><input type="checkbox"/> City <input type="checkbox"/> County  <input type="checkbox"/> State <input type="checkbox"/> Fire District  <input type="checkbox"/> Federal</p>	<p><u>If Air:</u></p> <p><input checked="" type="checkbox"/> Rotary  <input checked="" type="checkbox"/> Fixed Wing</p>
			<p><u>Air Classification:</u></p> <p><input type="checkbox"/> Auxiliary Rescue  <input checked="" type="checkbox"/> Air Ambulance  <input type="checkbox"/> ALS Rescue  <input type="checkbox"/> BLS Rescue</p>

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

1 \_\_\_\_\_ Total number of responses  
1 \_\_\_\_\_ Number of emergency responses  
 \_\_\_\_\_ Number of non-emergency responses

1 \_\_\_\_\_ Total number of transports  
 \_\_\_\_\_ Number of emergency transports  
 \_\_\_\_\_ Number of non-emergency transports

**TABLE 8: Response/Transportation/Providers**

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

County: San Benito County Provider: Phi – Air Medical Response Zone: Countywide

Address: 801 Airport Way, #D Number of Ambulance Vehicles in Fleet: 1  
Modesto, CA 95354

Phone Number: 209-550-0881 Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 1

<p><b>Written Contract:</b></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><b>Medical Director:</b></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>System Available 24 Hours:</b></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>Level of Service:</b></p> <p><input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground  <input type="checkbox"/> Non-Transport <input type="checkbox"/> BLS <input type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> Air  <input checked="" type="checkbox"/> CCT <input type="checkbox"/> Water  <input type="checkbox"/> IFT</p>
<p><b>Ownership:</b></p> <p><input type="checkbox"/> Public  <input checked="" type="checkbox"/> Private</p>	<p><b>If Public:</b></p> <p><input type="checkbox"/> Fire  <input type="checkbox"/> Law  <input type="checkbox"/> Other          Explain: _____</p>	<p><b>If Public:</b></p> <p><input type="checkbox"/> City <input type="checkbox"/> County  <input type="checkbox"/> State <input type="checkbox"/> Fire District  <input type="checkbox"/> Federal</p>	<p><b>If Air:</b></p> <p><input checked="" type="checkbox"/> Rotary  <input checked="" type="checkbox"/> Fixed Wing</p> <p><b>Air Classification:</b></p> <p><input type="checkbox"/> Auxiliary Rescue  <input checked="" type="checkbox"/> Air Ambulance  <input type="checkbox"/> ALS Rescue  <input type="checkbox"/> BLS Rescue</p>

**Transporting Agencies**

\_\_\_\_\_ Total number of responses  
 \_\_\_\_\_ Total number of transports  
 \_\_\_\_\_ Number of emergency transports  
 \_\_\_\_\_ Number of non-emergency transports

**Air Ambulance Services**  
 \_\_\_\_\_ Total number of responses  
 \_\_\_\_\_ Total number of transports  
 \_\_\_\_\_ Number of emergency transports  
 \_\_\_\_\_ Number of non-emergency transports

**TABLE 8: Response/Transportation/Providers**

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

County: San Benito County    Provider: REACH Air Medical Services    Response Zone: Countywide

Address: 451 Aviation Blvd., Suite 101    Number of Ambulance Vehicles in Fleet: \_\_\_\_\_  
Santa Rosa, CA 95403

Phone Number: 707-324-2400    Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: \_\_\_\_\_

<p><b>Written Contract:</b></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><b>Medical Director:</b></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>System Available 24 Hours:</b></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>Level of Service:</b></p> <p><input checked="" type="checkbox"/> Transport    <input checked="" type="checkbox"/> ALS    <input checked="" type="checkbox"/> 9-1-1    <input type="checkbox"/> Ground  <input type="checkbox"/> Non-Transport    <input type="checkbox"/> BLS    <input type="checkbox"/> 7-Digit    <input checked="" type="checkbox"/> Air  <input checked="" type="checkbox"/> CCT    <input type="checkbox"/> Water  <input type="checkbox"/> IFT</p>
<p><b>Ownership:</b></p> <p><input type="checkbox"/> Public  <input checked="" type="checkbox"/> Private</p>	<p><b>If Public:</b></p> <p><input type="checkbox"/> Fire  <input type="checkbox"/> Law  <input type="checkbox"/> Other  Explain: _____</p>	<p><b>If Public:</b></p> <p><input type="checkbox"/> City    <input type="checkbox"/> County  <input type="checkbox"/> State    <input type="checkbox"/> Fire District  <input type="checkbox"/> Federal</p>	<p><b>If Air:</b></p> <p><input checked="" type="checkbox"/> Rotary  <input checked="" type="checkbox"/> Fixed Wing</p> <p><b>Air Classification:</b></p> <p><input type="checkbox"/> Auxiliary Rescue  <input checked="" type="checkbox"/> Air Ambulance  <input type="checkbox"/> ALS Rescue  <input type="checkbox"/> BLS Rescue</p>

**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**

2 \_\_\_\_\_ Total number of responses  
 2 \_\_\_\_\_ Number of emergency responses  
 \_\_\_\_\_ Number of non-emergency responses

2 \_\_\_\_\_ Total number of transports  
 \_\_\_\_\_ Number of emergency transports  
 \_\_\_\_\_ Number of non-emergency transports



**TABLE 8: Response/Transportation/Providers**

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

County: San Benito County Provider: Stanford Life Flight Response Zone: Countywide

Address: 300 Pasteur Drive Number of Ambulance Vehicles in Fleet: 0  
Stanford, CA 94305

Phone Number: 650-723-5578  
 Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 0

<p><b>Written Contract:</b></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><b>Medical Director:</b></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>System Available 24 Hours:</b></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>Level of Service:</b></p> <p><input checked="" type="checkbox"/> Transport <input type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground  <input type="checkbox"/> Non-Transport <input type="checkbox"/> BLS <input type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> Air  <input type="checkbox"/> CCT <input type="checkbox"/> Water  <input type="checkbox"/> IFT</p>
<p><b>Ownership:</b></p> <p><input type="checkbox"/> Public  <input checked="" type="checkbox"/> Private</p>	<p><b>If Public:</b></p> <p><input type="checkbox"/> Fire  <input type="checkbox"/> Law  <input type="checkbox"/> Other                  Explain: _____</p>	<p><b>If Public:</b></p> <p><input type="checkbox"/> City <input type="checkbox"/> County  <input type="checkbox"/> State <input type="checkbox"/> Fire District  <input type="checkbox"/> Federal</p>	<p><b>If Air:</b></p> <p><input checked="" type="checkbox"/> Rotary  <input checked="" type="checkbox"/> Fixed Wing</p> <p><b>Air Classification:</b></p> <p><input type="checkbox"/> Auxiliary Rescue  <input checked="" type="checkbox"/> Air Ambulance  <input type="checkbox"/> ALS Rescue  <input type="checkbox"/> BLS Rescue</p>

**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**  
 17 \_\_\_\_\_ Total number of responses  
 17 \_\_\_\_\_ Number of emergency responses  
 \_\_\_\_\_ Number of non-emergency responses  
 17 \_\_\_\_\_ Total number of transports  
 17 \_\_\_\_\_ Number of emergency transports  
 \_\_\_\_\_ Number of non-emergency transports

**TABLE 9: FACILITIES**

County: San Benito County

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

Facility: Hazel Hawkins Memorial Hospital Telephone Number: (831) 637-5711  
 Address: 911 Sunset Drive  
Hollister, CA 95023

<u>Written Contract:</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>Service:</u> <input type="checkbox"/> Referral Emergency <input type="checkbox"/> Standby Emergency <input checked="" type="checkbox"/> Basic Emergency <input type="checkbox"/> Comprehensive Emergency	<u>Base Hospital:</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>Burn Center:</u> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---	--	--

Pediatric Critical Care Center <sup>1</sup> EDAP <sup>2</sup> PICU <sup>3</sup>	<u>Trauma Center:</u> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>If Trauma Center what level:</u> <input type="checkbox"/> Level I <input type="checkbox"/> Level II <input type="checkbox"/> Level III <input type="checkbox"/> Level IV
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<u>STEMI Center:</u> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Stroke Center:</u> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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<sup>1</sup> Meets EMSA Pediatric Critical Care Center (PCCC) Standards  
<sup>2</sup> Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards  
<sup>3</sup> Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards

**TABLE 10: APPROVED TRAINING PROGRAMS**

County: San Benito Reporting Year: 2015

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

Training Institution:	n/a		Telephone Number:	_____
Address:	_____			
Student Eligibility*:	_____	**Program Level	_____	_____
	Cost of Program:	_____	Number of students completing training per year:	_____
	Basic:	_____	Initial training:	_____
	Refresher:	_____	Refresher:	_____
			Continuing Education:	_____
			Expiration Date:	_____
			Number of courses:	_____
			Initial training:	_____
			Refresher:	_____
			Continuing Education:	_____

\*Open to general public or restricted to certain personnel only.

\*\* Indicate whether EMT-I, AEMT, EMT-P, MICN, or EMR; if there is a training program that offers more than one level complete all information for each level.

Training Institution:	_____		Telephone Number:	_____
Address:	_____			
Student Eligibility*:	_____	**Program Level	_____	_____
	Cost of Program:	_____	Number of students completing training per year:	_____
	Basic:	_____	Initial training:	_____
	Refresher:	_____	Refresher:	_____
			Continuing Education:	_____
			Expiration Date:	_____
			Number of courses:	_____
			Initial training:	_____
			Refresher:	_____
			Continuing Education:	_____

\*Open to general public or restricted to certain personnel only.

\*\* Indicate whether EMT-I, AEMT, EMT-P, MICN, or EMR; if there is a training program that offers more than one level complete all information for each level.

**TABLE 11: DISPATCH AGENCY**

County: San Benito

Reporting Year: 2015

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

Santa Cruz Regional 911

Name: \_\_\_\_\_ Primary Contact: \_\_\_\_\_  
 Address: 495 Upper Park Road Dennis Kidd, General Manager  
Santa Cruz, CA 95065  
 Telephone Number: (831) 471-1000

Written Contract:  Yes  No Medical Director:  Yes  No Day-to-Day Disaster:  Day-to-Day  Disaster

Ownership:  Public  Private

If Public:  City  County  State  Fire District  Federal

Number of Personnel Providing Services:  
 EMD Training 31 EMT-D \_\_\_\_\_ ALS \_\_\_\_\_  
 BLS \_\_\_\_\_ LALS \_\_\_\_\_ Other \_\_\_\_\_

If Public:  Fire  Law  Other  
 Explain: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_

Written Contract:  Yes  No Medical Director:  Day-to-Day  Disaster

Ownership:  Public  Private

If Public:  City  County  State  Fire District  Federal

Number of Personnel Providing Services:  
 EMD Training \_\_\_\_\_ EMT-D \_\_\_\_\_ ALS \_\_\_\_\_  
 BLS \_\_\_\_\_ LALS \_\_\_\_\_ Other \_\_\_\_\_

If Public:  Fire  Law  Other  
 Explain: \_\_\_\_\_

**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 ambulance zone.

**Local EMS Agency or County Name:**

San Benito County Emergency Medical Services  
A Division of the San Benito County Office of Emergency Services

**Area or subarea (Zone) Name or Title:**

n/a

**Name of Current Provider(s):**

Include company name(s) and length of operation (uninterrupted) in specified area or subarea.

American Medical Response (uninterrupted)

**Area or subarea (Zone) Geographic Description:**

The area includes the entire County of San Benito

**THE LEGAL DESCRIPTION OF COUNTY OF SAN BENITO, CALIFORNIA**

Commencing at a point in the center of the Pajaro River, said point being the northwest corner of the Rancho Las Arromitas y Agua Caliente, and being on the northern boundary line of Monterey, and running thence in a southerly direction along the southwest boundary of said Rancho to the southwest corner thereof; thence southerly in a direct line to the summit of said Gabilan Range of Mountains, and thence in a southeasterly along the summit of said Gabilan Mountains to the Chalone Peak; thence southeasterly in a direct line to the division line of the parts of San Lorenzo Sobrantes Rancho owned respectively by Breen and Dunn; thence along said dividing line of said Rancho to the southern boundary thereof; thence due south to the San Lorenzo Creek; thence southeasterly up the center of said Lorenzo or Lewis Creek, and up the north fork thereof, to the summit of the divide between the waters of said Lewis Creek and San Benito Creek; thence following said divide southerly to the eastern boundary of Monterey and the summit of the Coast Range Mountains; Thence northerly, following the summit of said mountains to where the range line between T. 18SI, or R. 12 and 13 E., M. D. B. & M., crosses the same; thence northerly along said range line to the northeast corner of T. 18 S., R. 12 E., ; thence northerly along said township line to the south line of T. 16 N., R. 13 E., M. D. B. & M., thence west to the southeast corner of T. 16 S., R. 12 E., M. D. B. & M.; thence northwest in a straight line to the northeast corner of T. 14 S., R. 9 E.; thence in a straight line northwesterly, running toward the northeast corner of T. 13 S., R. 7 E., to a point where said line intersects the county line between San Benito and Merced; thence along the boundary line between San Benito and Merced to the northeast corner of San Benito and southeast corner of Santa Clara; thence following the county line between Santa Clara and San Benito to the place of beginning.

**Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6):**

Include intent of local EMS agency and Board action.

As stated in the County EMS Plan and defined in Calif. H&S Code §1797.85 and as approved by the California EMS Authority on July 10, 2006, San Benito County's Emergency Ambulance Zone (EOA-1) is an Exclusive Operating Area.

**Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS 1797.85):** Include type of exclusivity (Emergency Ambulance, ALS, LALS, or combination) and operational definition of exclusivity (i.e., 911 calls only, all emergencies, all calls requiring emergency ambulance service, etc.).

Emergency Ambulance Service at 911 Emergency Response/ALS Ambulance

**Method to achieve Exclusivity, if applicable (HS 1797.224):**

If grandfathered, pertinent facts concerning changes in scope and manner of service. Description of current provider including brief statement of uninterrupted service with no changes to scope and manner of service to zone. Include chronology of all services entering or leaving zone, name or ownership changes, service level changes, zone area modifications, or other changes to arrangements for service.

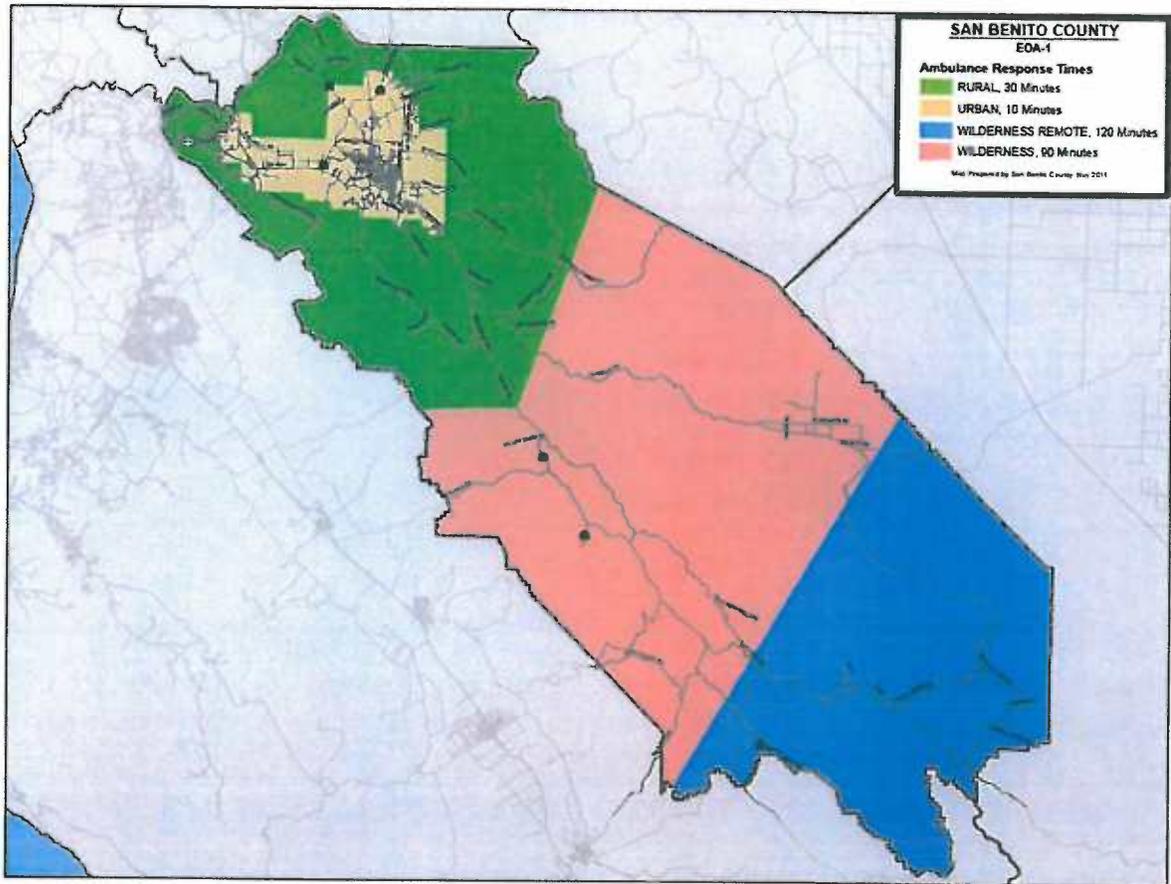
If competitively-determined, method of competition, intervals, and selection process. Attach copy/draft of last competitive process used to select provider or providers.

In the 2005 EMS Plan Update, the California EMS Authority designated the County as an Exclusive Operating Area without the use of a competitive bid process. This was done by using the grandfather provision of Health & Safety Code §1797.224 and to acknowledge that San Benito has continued using, in the same manner and scope without interruption of services, existing Emergency Ambulance Service Providers since January 1, 1981.

On July 10, 2006, the Authority notified San Benito County EMS that it meets EOA grandfathering provisions of Health & Safety Code Section 1797.224.

SECTION 4  
ATTACHMENTS

## RESPONSE ZONES & TIMES



## EMERGENCY AMBULANCE RESPONSE TIME STANDARDS

The San Benito County EMS Agency has established response time standards (based on size of County and long transport distances) for the contracted ambulance provider in the County as defined below:

- Contractor will be deemed to be in compliance with response time standards if ninety percent (90%) or more of all Code 3 (9-1-1) events in which a transport ambulance arrives on scene, measured monthly, meet the specified response times:  
*f*
- San Benito Urban Area (**TAN**): Emergency calls within the San Benito County Urban Area must be responded to within ten (10) minutes or less. *f*
- San Benito County Rural Area (**GREEN**): Emergency calls within the San Benito County Rural Area must be responded to within thirty (30) minutes or less. *f*
- San Benito County Wilderness Area (**SALMON**): Emergency calls within the San Benito County Wilderness Area must be responded to within ninety (90) minutes or less. *f*
- San Benito County Wilderness (Remote) Area (**BLUE**): Emergency calls within the San Benito County Wilderness (Remote) Area must be responded to within one hundred twenty (120) minutes or less.

# **Transportation Plan**

## **San Benito County EMS Agency**



**EMS Policy #1180**

**Revised July 1, 2015**

## **EXECUTIVE SUMMARY**

San Benito County EMS Agency recognizes the vital importance of a coordinated response to health emergencies. To encourage a systems approach to a coordinated EMS response, we take pride in the sound relationships we have garnered with all of our system's stakeholders. We are also committed to comply with the requirements set forth in the State's [EMS System Standards and Guidelines and the EMS System Planning Guidelines](#). To that end, this Transportation Plan is intended to address the county's EMS **System**, and not just the activities of the local EMS **Agency**.

The San Benito County EMS Transportation Plan outlines the structure and operations for its prehospital care services. It:

- Determines the number of and boundaries for Emergency Ambulance Zones;
- Establishes a process for granting exclusive operating permits to a limited number of Emergency Ambulance Service Providers which serve San Benito County;
- Identifies the role of basic life support (BLS) and advanced life support (ALS) first responders;
- Establishes a process for oversight and regulation of EMS providers by the San Benito County EMS Agency as provided by the San Benito County Ambulance Ordinance #637.

## **INTRODUCTION**

### **INTENT**

The California EMS Authority has designated [San Benito County's Emergency Ambulance Zone as an Exclusive Operating Area effective July 10, 2006](#) and the San Benito County EMS Agency includes ground ALS transportation exclusivity in its EMS Plan.

The following EMS Transportation Plan has been developed to comply with the State EMS Authority's [Minimum Standards and Recommended Guidelines 4.01 through 4.22](#).

### **AUTHORITY**

The San Benito County EMS Transportation Plan was developed by direction of the San Benito County Emergency Medical Care Commission and County Board of Supervisors. It is compliant with:

- [Division 2.5, California Health & Safety Code, Sections 1797 et seq., Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act](#)
- [California Code of Regulations, Title 13, Motor Vehicles](#)
- [California Code of Regulations, Title 22 Social Security, Division 9, Prehospital Emergency Medical Services](#)
- California Welfare and Institutions Code [Section 17000](#)
- California Vehicle Code [Section 165](#)

## **DESCRIPTION OF THE SYSTEM**

### **LOCAL EMS AGENCY AND COUNTY NAME**

- San Benito County Emergency Medical Services
- County of San Benito

### **NAME OF CURRENT EMERGENCY AMBULANCE SERVICE PROVIDER**

- American Medical Response  
Corporate Headquarters 6363 S.  
Fiddlers Green Circle, 14<sup>th</sup> Floor  
Greenwood Village, CO 80111  
303-495-1200

### **FIRST RESPONDERS**

San Benito County is served by 3 fire departments comprised of a combination of full-time paid and volunteer Firefighters:

- Hollister Fire Department
- Aromas Tri-County Fire Protection District
- CalFire

### **AIR AMBULANCE SERVICE PROVIDERS**

Air ambulance services currently permitted to fly EMS missions in San Benito County are as follows:

<b>Provider</b>	<b>Helicopter Base Location</b>
<a href="#"><u>CALSTAR</u></a>	Hollister, Gilroy and Salinas, CA
<a href="#"><u>Air Methods - Mediflight</u></a>	Merced and Modesto, CA
<a href="#"><u>PHI - Air Med Team</u></a>	Modesto, CA
<a href="#"><u>Stanford Life Flight</u></a>	Palo Alto, CA
<a href="#"><u>Reach Air Ambulance</u></a>	Concord and Lodi, CA

The decision to use air ambulances involves both medical and scene management decisions. Field dispatch may be authorized only by designated personnel who include: firefighters, law enforcement, State and Federal Park Peace Officers, paramedics, registered nurses, and physicians. San Benito County 9-1-1 Communications Center is the agency responsible to forward the air ambulance flight request to the closest most appropriate helicopter service. In all cases, San Benito County BLS First Responders and an ALS ground transport unit will also be dispatched to respond in tandem with responding air ambulances.

# **EMS DISPATCH AND RESPONSE**

## **DISPATCH SERVICES**

Dispatch services for San Benito County are provided by Santa Cruz Regional 911. All calls are dispatched using an Emergency Medical Dispatching System (EMD) and are classified by priority. Callers are provided pre-arrival instructions and the most appropriate EMS vehicle is dispatched to respond.

## **RESPONSE METHODOLOGY**

The San Benito County EMS system is a single tier, Advanced Life Support (ALS/Paramedic) dual response system. Dispatched through an EMD Dispatch Center, 100% of all 9-1-1 Code 3 calls for service, except for calls originating within [Hollister Hills State Vehicular Recreation Area](#), receive a fire-based BLS First Responder/EMT-1 unit and a private ALS transport ambulance staffed by one EMT-Paramedic and one EMT-1.

## **MULTIPLE CASUALTY INCIDENT PLAN (MCI)**

See Attachment 1 - San Benito County MCI Plan; [EMS Policy #4200](#).

# **REGULATORY PROCESS**

## **SAN BENITO COUNTY AMBULANCE ORDINANCE #923**

San Benito County [Ambulance Ordinance #637](#) was enacted on April 13, 1993 in order to provide policies and regulations which are necessary for the public health and safety regarding Ambulance Service Providers in this county. The ordinance establishes policies and regulations for issuing permits and regulating air and ground ambulances to ensure competent, efficient and adequate care is provided and to allow for adequate ambulance services and rates in all areas of the county. The Ordinance also allows for the orderly and lawful operation of the county Emergency Medical Services (EMS) system and ensures its oversight by the San Benito County EMS Agency.

## **MINIMUM STANDARDS FOR GROUND AMBULANCE TRANSPORTATION SERVICES**

Minimum standards for ground ambulance and transportation services are determined by the local EMS Agency. A written agreement between the county and AMR which determines minimum EMS System response standards was executed on October 1, 2014 and is termed to expire June 30, 2019.

San Benito County ensures that responses are conducted in coordinated fashion by one consolidated fire, law and EMS dispatch center. The level of all emergency ambulance and transportation services provided within the region is Advanced Life Support (ALS, Paramedic). Each of the county's emergency ambulances is staffed with one EMT-1 and one EMT-P.

## **HOSPITAL ACCESSIBILITY**

### **BASE HOSPITAL**

San Benito County has one acute care hospital located within its jurisdiction, [Hazel Hawkins Memorial Hospital \(HHH\)](#). Under written contract with the county, HHH serves as the county's only Paramedic Base Station. The on-duty Emergency Department physician provides online medical control for the ALS transport provider and the BLS first responders. As a county-approved EMS Continuing Education Provider, HHH also provides monthly training/educational opportunities which are open to any interested persons and agencies.

### **RECEIVING HOSPITALS**

San Benito County bases its EMS transport decisions based upon the "Closest Most Appropriate Medical Facility" and "Patient Request" model. While using these criteria to establish hospital destination decisions, ground transportation ambulances typically transport patients to the closest most appropriate medical facility which is:

- [Hazel Hawkins Memorial Hospital](#) 911  
Sunset Drive  
Hollister, CA 95023  
(831) 637-5711

Patients from the northern boundaries of San Benito County may also be transported to the following medical facilities based on their being closest to the most appropriate medical facility or by patient request. Generally, San Benito County limits its EMS System ground ambulances to no more than a 30 minute transport time beyond the county boundary lines:

- [Saint Louise Regional Hospital](#)

9400 No Name Uno  
Gilroy, CA 95020  
(408) 848-2000

- [Watsonville Community Hospital](#) 75  
Neilson Street  
Watsonville, CA 95076  
(831) 724-4741
- [Salinas Valley Memorial Hospital](#) 450  
E. Romie Lane  
Salinas, CA 93901  
(831) 757-4333
- [Natividad Medical Center](#)  
1441 Constitution Blvd.  
Salinas, CA 93906 (831)  
755-4111

## EXCLUSIVITY

### **STATEMENT OF EXCLUSIVITY ([Calif H&S Code §1797.6](#))**

As stated in the County EMS Plan and defined in [Calif. H&S Code §1797.85](#) and as [approved by the California EMS Authority on July 10, 2006](#), San Benito County's Emergency Ambulance Zone ([EOA-1](#)) is an Exclusive Operating Area.

## **TYPE OF EXCLUSIVITY**

Emergency Ambulance Service, 911 Response, ALS Transport

## **METHOD TO ACHIEVE EXCLUSIVITY**

In the 2005 EMS Plan Update, the California EMS Authority designated the County as an Exclusive Operating Area without the use of a competitive bid process. This was done by using the grandfather provision of [Health & Safety Code §1797.224](#) and to acknowledge that San Benito has continued using, without interruption of services, existing Emergency Ambulance Service Providers since at least 1968.

On July 10, 2006, San Benito County was notified that it meets EOA grandfathering requirements of Health & Safety Code Section 1797.224.

[EOA-1](#) includes the entire county's incorporated and non-incorporated areas.

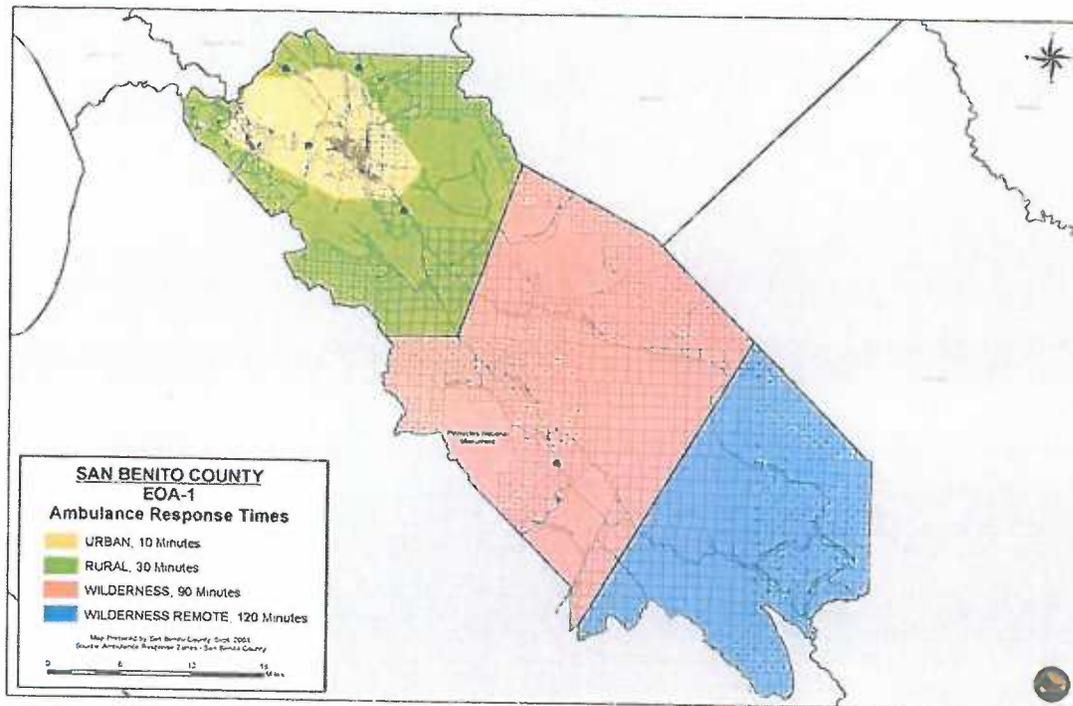
The legal geographic description of the County of San Benito's Exclusive Operating Area (EOA-1) is as follows:

Commencing at a point in the center of the Pajaro River, said point being the northwest corner of the Rancho Las Arromitas y Agua Caliente, and being on the northern boundary line of Monterey, and running thence in a southerly direction along the southwest boundary of said Rancho to the southwest corner thereof; thence southerly in a direct line to the summit of said Gabilan Range of Mountains, and thence in a southeasterly along the summit of said Gabilan Mountains to the Chalone Peak; thence southeasterly in a direct line to the division line of the parts of San Lorenzo Sobrantes Rancho owned respectively by Breen and Dunn; thence along said dividing line of said Rancho to the southern boundary thereof; thence due south to the San Lorenzo Creek; thence southeasterly up the center of said Lorenzo or Lewis Creek, and up the north fork thereof, to the summit of the divide between the waters of said Lewis Creek and San Benito Creek; thence following said divide southerly to the eastern boundary of Monterey and the summit of the Coast Range Mountains.

Thence northerly, following the summit of said mountains to where the range line between T. 18S1, or R. 12 and 13 E., M. D. B. & M., crosses the same; thence northerly along said range line to the northeast corner of T. 18 S., R. 12 E.; thence northerly along said township line to the south line of T. 16 N., R. 13 E., M. D. B. & M., thence west to the southeast corner of T. 16 S., R. 12 E., M. D. B. & M.; thence northwest in a straight line to the northeast corner of T. 14 S., R. 9 E.; thence in a straight line northwesterly, running toward the northeast corner of T. 13 S., R. 7 E., to a point where said line intersects the county line between San Benito and Merced; thence along the boundary line between San Benito and Merced to the northeast corner of San Benito and southeast corner of Santa Clara; thence following the county line between Santa Clara and San Benito to the place of

beginning.

## SAN BENITO COUNTY RESPONSE ZONE MAP



### EMERGENCY AMBULANCE RESPONSE TIME STANDARDS

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  - San Benito Urban Area (**TAN**): Emergency calls within the San Benito County Urban Area must be responded to within ten (10) minutes or less.
  - San Benito County Rural Area (**GREEN**): Emergency calls within the San Benito County Rural Area must be responded to within thirty (30) minutes or less.
  - San Benito County Wilderness Area (**SALMON**): Emergency calls within the San Benito County Wilderness Area must be responded to within ninety (90) minutes or less.
  - San Benito County Wilderness (Remote) Area (**BLUE**): Emergency calls within the San Benito County Wilderness (Remote) Area must be responded to within one hundred twenty (120) minutes or less.