Mountain-Valley Emergency Medical Services Agency

EMERGENCY MEDICAL SERVICES SYSTEM PLAN Annual Update



2009/2010

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INTRODUCTION

The Mountain-Valley EMS Agency (MVEMSA) was formed through a joint powers agreement in 1981 and currently serves the counties of Alpine, Amador, Calaveras, Mariposa, and Stanislaus. The MVEMSA's primary responsibility is to plan, implement, and evaluate an emergency medical services (EMS) system which meets the minimum standards developed by the California EMS Authority.

State law requires EMS agencies to develop plans for the delivery of emergency medical services (paramedic treatment, ambulance transport, trauma services, etc.) to the victims of sudden illness or injury within the geographic area served by the EMS agency. These plans must be consistent with state standards and address the following components: manpower and training, communications, transportation, assessment of hospitals and critical care centers, system organization and management, data collection and evaluation, public information and education, and disaster response.

Major changes have taken place in the EMS system since the MVEMSA first adopted an EMS plan in 1985. Among these changes are: the availability of advanced life support (paramedic) and 9-1-1 services in all parts of the EMS system, the development of specialized policies and services for critically ill and injured children, the formation of exclusive operating areas (EOAs) for ambulance service in Amador, Calaveras, and Stanislaus Counties, the implementation of Emergency Medical Dispatch in all counties, the implementation of first response AEDs region wide, the adoption of a regional Policy and Procedure Manual, and the designation of a formal trauma care system designed to triage and transport major trauma victims to designated trauma care hospitals.

The process of assessing system needs and developing plan objectives revealed that although major improvements have been made in EMS system since 1985, some components of the EMS system still remain underdeveloped. The Mountain-Valley EMS system currently meets or exceeds 117 of the State's 121 minimum standards and recommended guidelines Those sections of the State EMS System Guidelines (EMSA 101) which require attention and upgrade include:

- **1.22 Reporting of Abuse** (Abuse policy targeting the reporting of suspected child, elderly, and sexual abuse).
- **3.01 Communication Plan** (Update to MVEMSA communication plan/directory)
- 4.05 Response Time Standards (Measured from recite of call at the Primary PSAP)
- **5.02** Triage Transfer Protocols (STEMI PatientTriage)
- **5.04** Specialty Care Facilities (Designation of STEMI Centers)
- **6.05 Data Management Systems** (Data Repository Software Implementation)
- **8.07 Disaster Communication** (Interoperability)

SUMMARY OF CHANGES

This section summarizes the progress made to the State's minimum standards and recommended guidelines since FY 2007/2008. The EMS Agency is:

- § Working towards the completion of a draft policy (560.10) for reporting child abuse, elder abuse, and suspected SIDS deaths.
- § Continuing to develop a mechanism to measure response times from each county PSAP to arrival on scene
- § Near completion of a one year STEMI Pilot Study that started December 1, 2009 targeting the Mountain-Valley EMS Region.
- § Beginning the process of data collection and meetings with local hospitals to establish a STEMI Center(s) within the EMS Region.
- § Purchase of WEBCURE ePCR data repository, July 2010 that supports durrent NEMSIS/CEMSIS data standards. Implementation expected to be completed by September 2010.
- §Continue to work with local Fire, OES, and Public Health agencies toward an integrated/interoperable communications system.

The following personnel, funding, and provider changes have occurred in the MVEMS System since the last update.

Staffing

- § In August, 2009 Jim Worobe resigned his position as Deputy Director.
- § In September 2009, Richard Murdock accepted the position of Interim Deputy Director.
- § Effective June 30, 2010, Dr. Mackey resigned his position as Medical Director. Dr. Mackey will extend his contract until a replacement is hired.
- § The Agency still maintains two additional staff vacancies which we were unable to fill due to fiscal constraints.

Funding

§ Attempts to make progress on State General Fund augmentation for EMS regions in California during the year have again yielded no additional funding.

SUMMARY OF SYSTEM STATUS

TABLE 1: CHANGES MADE ON A STANDARD

Standard	EMSA objective	Meets Minimu m Req.	Short Range (one year or less)	Long Range (more than one year)	Progress	Objective
1.22	Reporting of Abuse			N	Currently EMS personnel are required by law to report suspected abuse to the receiving facility and the EMS Agency receives reports via our incident reporting process. Have not had staff time resources to develop policies.	Specific policy, including definitions of abuse, need to be developed. Currently there is insufficient resource and staff to dedicate to this project.
3.01	Communication Plan	11	N		Currently MVEMSA has a communication plan in place that specifies the medical communication 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	Need to make updates to communication plan
4.05	Response Time Standards (Measured from recite of call at primary PSAP)			√	Stanislaus County - CAD to CAD advisory committee established by PSAP, SPSAP, and Agency with directive to establish procedure to accomplish objectives. The Stanislaus CAD project is currently on hold because of PSAP CAD upgrade implementation by end of 2010. Calaveras County – Limited data due to current CAD system. Calaveras will upgrade CAD by end of 2010 and MVEMSA will continue to work with Calaveras Co. Amador County - Discussions continue with Amador County regarding data requirements. Alpine County - No Progress. Response data difficult to obtain due to numerous PSAP's in County, SPSAP information comes from providers outside of this agency's jurisdictionCounty - Currently receiving data from both PSAP	Need to create a mechanism, based on current activity, to measure response times from each county PSAP to arrival on scene.

		and SPSAP. No linkage. Receiving separate reports.	
	garantin lager	state.	

,					

Standard	EMSA objective	Meets Minimum Req.	Short Range (one year or less)	Long Range (more than one year)	Progress	Objective
5.02	Triage & Transfer Protocols (STEMI Patient Policy Development)	√	V		Ongoing development of STEMI program in the Mountain-Valley EMS Region. Discussion has been initiated between MVEMSA, Doctor's Medical Center, and Memorial Medical Center to identify STEMI Receiving Center within the region and surrounding communities. MVEMSA representative meets monthly with DMC and MMC PCI committees.	MVEMSA STEMI Pilot Study ends December 31, 2010. STEMI policy will be developed by Medical Director after study ends.
5.04	Specialty Care Facility (STEMI Center Designation)	1		√	Establish an RFP (Request for Proposal) process to formally designate STEMI centers or facility assessment and designation process within the MVEMSA area of responsibility. STEMI trial study will be completed 12/31/2010	Designate qualified STEMI Centers within the EMS Region

Standard	EMSA objective	Meets Minimum Req.	Short Range (one year or less)	Long Range (more than one year)	Progress	Objective
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5.04	Specialty Care Facility (STEMI Center Designation)	1		√	Establish an RFP (Request for Proposal) process to formally designate STEMI centers or facility assessment and designation process within the MVEMSA area of responsibility. STEMI trial study will be completed 12/31/2010	Designate qualified STEMI Centers within the EMS Region

Standard	EMSA objective	Meets Minimum Req.	Short Range (one year or less)	Long Range (more than one year)	Progress	Objective
6.05	Data Management System		1	V	CEMSIS Data Dictionary released. MVEMSA to implement a Regional Repository "WEBCUR" of PCR data as Providers submit ePCR files	Maintain & Enhance an PCR Data system that supports system wide planning & evaluation; to include system response and clinical (both prehospital and hospital) data.
8.07	Disaster Communications (Interoperability)		1	√	Calaveras County: County-wide interoperability project in progress. Stanislaus County: Continued working with local communications groups to integrate medical communications priorities with overall county planning.	Continue to work with local Fire, OES, and Public Health toward an integrated/interoperable communications system.

TABLE 2: SYSTEM RESOURCES AND OPERATIONS

2.

System	Organization and Management		n jeungeran kalawa a di Karangan kalawa 1996 ng Kalawa di
EMS Sys	stem: Mountain-Valley EMS Agency		
	g Year: 2008 range of Albanant m, are		Angeresport of the Abrol
NOTE:	Number (1) below is to be completed for ea		
	agency.		
1) Coun	ity Reports		
ŕ			
	County: Alpine		stick politick sprace velocities. Mitomie velyseespalities
A.	Basic Life Support (BLS)		
В. С.	Limited Advanced Life Support (LALS) Advanced Life Support (ALS)		- Carlotte Apple 1997
C.	Advanced Life Support (ALS)	100 76	
	County: Amador		
A.	Basic Life Support (BLS)		
В.	Limited Advanced Life Support (LALS)		er jan. Postovat timantti e
C.	Advanced Life Support (ALS)	100 %	
A.	Basic Life Support (BLS)		
В.	Limited Advanced Life Support (LALS)		
C.	Advanced Life Support (ALS)	100 %	
	Complex M. Sans		
	County: Mariposa		
A.	Basic Life Support (BLS)		
B. C.	Limited Advanced Life Support (LALS) Advanced Life Support (ALS)	100 %	
C.	Advanced Life Support (ALS)		
	County: Stanislaus		
A.	Basic Life Support (BLS)		
B.	Limited Advanced Life Support (LALS)		
C.	Advanced Life Support (ALS)	100 %	
TT-			
•	rpe of agency Public Health Department		
	County Health Services Agency		
c -	Other (non-health) County Department		
	Joint Powers Agency		
	Private Non-Profit Entity Other:		
1 ~	C WITCH.		

3.	The person responsible for day-to-day activities of a - Public Health Officer	of the EMS agency reports to
	b- Health Services Agency Director/Administrator	
	c - Board of Directors	
	d - Other:	
		e, o stalkalist make iyo bar kotti
4.	Indicate the non-required functions which are pe	
	Implementation of exclusive operating areas (ambul	
	Designation of trauma centers/trauma care system p	lanning - Community X Company Community
	Designation/approval of pediatric facilities	· X 1/20 Mgs
	Designation of other critical care centers	X Alexander (d. 1981)
	Development of transfer agreements	
	Enforcement of local ambulance ordinance	rankaradiki. X dakikin d
	Enforcement of ambulance service contracts	which is the second of \mathbf{X} , which is the second of \mathbf{X}
	Operation of ambulance service	
	Continuing education	in the (x_1,x_2) and (X_{-1},x_2)
	Personnel training	X
	Operation of oversight of EMS dispatch center	esellar eta da la constituta d
	Non-medical disaster planning	
	Administration of critical incident stress debriefing	team (CISD)
	Administration of disaster medical assistance team (DMAT)
	Administration of EMS Fund [Senate Bill (SB) 12/6	
	rammistration of EMS rand [Solute Em (SE) 12/6	
5.	EMS agency budget for FY 2010-2011	
٥.	EXPENSES	
	EAFENSES	
	Salaries and benefits	\$ <u>778,563</u>
	(All but contract personnel)	
	Contract Services	<u> 230,066</u>
	(e.g. medical director)	
	Operations (e.g. copying, postage, facilities)	138,025
	Travel	<u>24,900</u>
	Fixed assets	O
	Indirect expenses (overhead)	androne i programa de la composició de la c La composició de la compo
	Ambulance subsidy	and the second of the second o
	EMS Fund payments to physicians/hospital	. verga in weigh
	Dispatch center operations (non-staff)	reservede <mark> sur selector</mark> e vibrito o
	The state of the s	and Angel at the tre er of the
	Other: Pass Through	<u>776 <mark>64,000</mark> </u>
,	TOTAL EXPENSES	\$1,235,554

Table 2 - System Organization & Management (cont.)

SOURCES OF REVENUE

Special project grant(s) [from EMSA] Preventive Health and Health Services (PHHS) Block Grant 17,288 Office of Traffic Safety (OTS) State general fund County general fund Other local tax funds (e.g., EMS district) 285,851 County contracts (e.g. multi-county agencies) 25,000 Certification fees 1.980 Training program approval fees Training program tuition/Average daily attendance funds (ADA) Job Training Partnership ACT (JTPA) funds/other payments Base hospital application fees Trauma center application fees 147,464 Trauma center designation fees Pediatric facility approval fees Pediatric facility designation fees Other critical care center application fees Other critical care center designation fees Ambulance service/vehicle fees Contributions EMS Fund (SB 12/612) Other grants: 23,450 Other fees: Workshops/Misc Other (specify): Pass Thru 19,000 Other (specify): Fund Interest SUBTOTAL STATE OF THE STATE OF \$ 1,204,758 Net Income (Amount of Operating Reserve Required to Balance Budget) (30.796)\$1,235,554 TOTAL REVENUE

Due to multiple reductions in the State General Fund contribution over the past several years and rising operational costs, the deficit between revenue and expenses in the Fiscal Year 2008/2009 budget will be covered through a one time draw down of operational reserves in the amount of \$29,283.

Table 2 - System Organization & Management (cont.)

Fee structure for <u>FY 2009/10</u>	
We do not charge any fees	
\underline{X} Our fee structure is:	
First responder certification	\$_30.00
EMS dispatcher certification	uatin adving affi
EMT-I certification	<u>30.00</u> term have a value of
EMT-I recertification	$\pm \frac{1}{12} \cdot 30.00$
EMT-defibrillation certification	<u> 1947 - Alexander de la Statistica de Caraca</u>
EMT-defibrillation recertification	egenî pevir penirde
EMT-II certification	
EMT-II recertification	ur <mark>i _6/_</mark> _Util etati anggaras ^a
EMT-P accreditation	75.00
Mobile Intensive Care Nurse/	
Authorized Registered Nurse (MICN/ARN) certification	50.00 puller dotaling, fileszető verk
MICN/ARN recertification	30.00 of the label and an a security
EMT-I training program approval	300.00 contribution Wind Copies.
EMT-II training program approval	– i – zavada mango diliboli bertail k
EMT-P training program approval	
MICN/ARN training program approval	4 <u>150.00</u>
Base hospital application	ing sa
Base hospital designation	
Trauma center application	25,000.00
Trauma center designation	<u>75,000.00</u>
Pediatric facility approval	二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十
Pediatric facility designation	jarang talah
Other critical care center application	
Type: <u>Air Ambulance Authorization</u> Other critical care center designation	
Type: Special Event Coverage	75.00 m of james - Name and miles
Ambulance service license	5.35/Transport (Emergency)
	2.00 /Transport (Non-Emer.)
Ambulance vehicle permits	ing the second of the second o
Other:	
Other:	<u> </u>
Other:	

7. Complete the table on the following two pages for the EMS agency staff for the fiscal year of $\underline{08/09}$.

Table 2 - System Organization & Management (cont.)

EMS System: Mountain-Valley EMS Agency

Reporting year 2009

*Salaries as of June 30, 2009

CATEGORY	ACTUAL TITLE	FTE POSITIONS (EMS ONLY)	TOP SALARY BY HOURLY EQUIVALENT	BENEFITS (%of Salary)	COMMENTS
EMS Admin./Coord./Director	Executive Director	1 FTE	46.07	37.5%	
Asst. Admin./Admin. Asst./Admin. Mgr.	Li Jeniity Litector		28.82	37.5%	Para de la companya della companya d
ALS Coord./Field Coord./ Training Coordinator	Certification and Training /Communications Coordinator	1 FTE	27.04	37.5%	NONACE III. I CARLO III. III. III. III. III. III. III. II
Program Coordinator (Non-clinical)	Transportation Coordinator	1 FTE	31.05	37.5%	
Trauma Coordinator	Trauma/Medical Coordinator	0.3 FTE	43.63	N/A	:
Medical Director	Medical Director	0.2 FTE	80.23	N/A	July 2010– June 2011
Disaster Medical Planner	Disaster Coordinator	0.47 FTE	45.43	N/A	July 2010 – June 2011
Field Liaison (Non-Clinical)	Field Liaison	1 FTE	16.00	N/A	

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

Table 2 - System Organization & Management (cont.)

CATEGORY	ACTUAL TITLE	FTE POSITIONS (EMS ONLY)	TOP SALARY BY HOURLY EQUIVALENT	BENEFITS (%of Salary)	COMMENTS
Data Evaluator/Analyst	Information Systems Analyst	odejsti 1:FTE odele Na oles i Notario Nota	1034 1. 22.87 6566 60 17 (14664 1 65616 6.8	37.5%	
QA/QI Coordinator	Quality Improvement and Facilities Coordinator	. 1-FTE	25.26	37.5%	ggart School (SS) — A MANA (SSES) School (See See See See See See See See See Se
Public Info. & Education Coordinator	- Pu		- V ,		e Major a tresto
Executive Secretary	Executive Secretary	0.8 FTE	18.38	37.5%	
Other Clerical	Receptionist/Secretary 1	1 FTE	17.13	37.5%	
Data Entry Clerk	Data Registrar	1 FTE	20.28	37.5%	
Management Services Assistant	Financial Services Assistant	0.5 FTE	19.84	37.5%	1
grade (m. 1864)	Control to the second				

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.

Mountain Valley Emergency Medical Services Agency

Organizational Chart

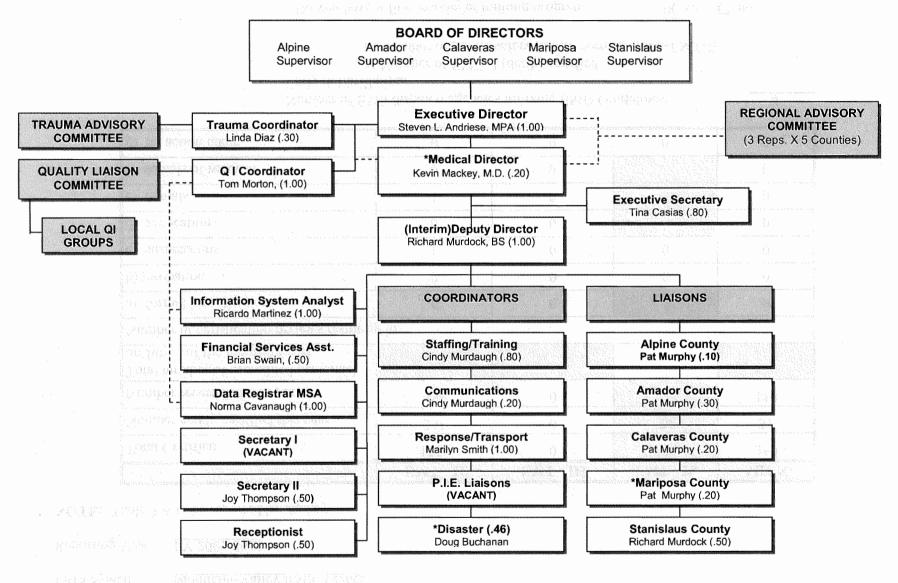


TABLE 3: SYSTEM RESOURCES AND OPERATIONS - Personnel/Training

EMS System: Mountain-Valley EMS Agency

Reporting Year: FY 2009/2010

NOTE: Table 3 is to be reported by agency.

				8.5°A
	EMT - Is	EMT - IIs	EMT - Ps	MICN
Total Certified	1256	0	284	269
Number newly certified this year	233	0	24	37
Number recertified this year	458	0	127	110
Total number of accredited personnel on July 1 of the reporting year			The property of the control of the c	
Number of certification reviews resulting	g in:	te de la companya di Nasharangan di Angarangan di Angarangan di Angarangan di Angarangan di Angarangan di Anga Kanangangan di Nasharangan di Angarangan di Angarangan di Angarangan di Angarangan di Angarangan di Angarangan	. The state of the	engen mengekken i
a) formal investigations	0	0		0,
b) probation	0	0	0	0
c) suspensions	1	0	0	0
d) revocations	0	0.		0
e) denials	1	0.4		0
f) denials of renewal	10 september 1991	0		0
g) no action taken	0		0	0

1.	Number of EMS dispatch agencies utilizing EMD Guidelines:	4
2.	Early defibrillation:	
	a) Number of EMT=I (defib) certified	
	b) Number of public safety (defib) certified (non-EMT-I)	
3.	Do you have a first responder training program X yes	l no

TABLE 4: SYSTEM RESOURCES AND OPERATIONS - Communications

Mountain-Valley EMS Agency

EMS System:

County:	Alpine County		
Reportir	ng Year: FY 2009/10		
Note: T	Table 4 is to be answered for each county.		
1.	Number of primary Public Service Answering Points (PSAP)		
	Number of secondary PSAPs ###################################		
3.	Number of dispatch centers directly dispatching ambulances		<u>0</u>
5 I	Number of designated dispatch centers for EMS Aircraft Do you have an operational area disaster communication system a. Radio primary frequency: b. Other methods: c. Can all medical response units communicate on the same disayes X No d. Do you participate in OASIS? Yes X No e. Do you have a plan to utilize RACES as a back-up communicate X No	? Yes \underline{X} aster communicat cation system?	0 No 154.100/153.800 RACES tions system?
2 438.40	1) Within the operational area? Yes X No 2) Between the operational area and the region and/or state? Yes Who is your primary dispatch agency for day-to-day emergencie	es X No	
7. V	Who is your primary dispatch agency for a disaster? Alpine Cou	unty Sheriff	

EMS System: Mountain-Valley EMS Agency County: Amador County Reporting Year: FY 2009/10 **Note:** Table 4 is to be answered for each county. Number of primary Public Service Answering Points (PSAP) 1 1. 2. Number of secondary PSAPs Number of dispatch centers directly dispatching ambulances 3. Number of designated dispatch centers for EMS Aircraft 4. Do you have an operational area disaster communication system? 5. a. Radio primary frequency: 467.975/462.975 b. Other methods: RACES c. Can all medical response units communicate on the same disaster communications system? Yes X d. Do you participate in OASIS? Yes X No e. Do you have a plan to utilize RACES as a back-up communication system? No Yes X 1) Within the operational area? Yes X No 2) Between the operational area and the region and/or state? Yes \underline{X} No

- 6. Who is your primary dispatch agency for day-to-day emergencies? <u>Amador County Sheriff</u>
- 7. Who is your primary dispatch agency for a disaster?

 Amador County Sheriff

Mountain-Valley EMS Agency EMS System: County: Calaveras County Reporting Year: FY 2009/10 **Note:** Table 4 is to be answered for each county. 1. Number of primary Public Service Answering Points (PSAP) THE ENGLISHED STREET 2. Number of secondary PSAPs Number of dispatch centers directly dispatching ambulances 3. Number of designated dispatch centers for EMS Aircraft 4. Do you have an operational area disaster communication system? Yes \underline{X} No 5. a. Radio primary frequency: 468.950/462.950 b. Other methods: **RACES** c. Can all medical response units communicate on the same disaster communications system? d. Do you participate in OASIS? Yes X No e. Do you have a plan to utilize RACES as a back-up communication system? Yes \underline{X}

- 2) Between the operational area and the region and/or state? Yes \underline{X} No. 1. 2004 1995 1995
- 6. Who is your primary dispatch agency for day-to-day emergencies? <u>Calaveras County Sheriff</u>
- 7. Who is your primary dispatch agency for a disaster? <u>Calaveras County Sheriff</u>

EMS S	System:	Mountain-Valley EMS Agency		
County	y: <u>Mariposa</u>	County		
Report	ing Year:	FY 2009/10		
Note:	Table 4 is to	be answered for each county.	named and health	
1.	Number of	primary Public Service Answering Points (PSAP)	oti y salang peng <u>t</u> aket	
2.	Number of	secondary PSAPs	is with the following ${f i}$, the	
3.	Number of	dispatch centers directly dispatching ambulances	us apropsis i sur <u>t</u> us 22	
4.	Number of	designated dispatch centers for EMS Aircraft	figurery with two walls on	
5.	 a. Radio p b. Other n c. Can all Yes X d. Do you e. Do you Yes X 1) Within t 		159.390 / 151.40 NONE ster communications system ation system?	<u>60</u>
6. (2)	Who is you Mariposa	r primary dispatch agency for day-to-day emergencies	_	estry,
7.	Who is you	r primary dispatch agency for a disaster? <u>California California C</u>	ornia Dept. of Forestry, M	<u> Iariposa</u>

Mountain-Valley EMS Agency EMS System: County: Stanislaus County Reporting Year: FY 2009/10 Note: Table 4 is to be answered for each county. Number of primary Public Service Answering Points (PSAP) 1. 4 2. Number of secondary PSAPs 1 3. Number of dispatch centers directly dispatching ambulances 1 4. Number of designated dispatch centers for EMS Aircraft 1 5. Do you have an operational area disaster communication system? Yes X No 157.6125/463.00 a. Radio primary frequency: b. Other methods: **RACES** c. Can all medical response units communicate on the same disaster communications system? Yes X d. Do you participate in OASIS? Yes \underline{X} No e. Do you have a plan to utilize RACES as a back-up communication system? Yes X No 1) Within the operational area? Yes \underline{X} No 2) Between the operational area and the region and/or state? Yes \underline{X} No

- 6. Who is your primary dispatch agency for day-to-day emergencies? LifeCom Fire/EMS Dispatch
- 7. Who is your primary dispatch agency for a disaster? <u>LifeCom Fire/EMS Dispatch</u>

TABLE 5: SYSTEM RESOURCES AND OPERATIONS - Response/Transportation

EMS System: Mountain-Valley EMS Agency

Reporting Year: FY 2009/10

Note: Table 5 is to be reported by agency.

Early Defibrillation Providers

1. Number of EMT-Defibrillation providers 36.

SYSTEM STANDARD RESPONSE TIMES IN MINUTES (90TH PERCENTILE)

Information provided is broken down by county. Each county has established slightly different response time requirements for each zone.

Alpine County	METRO/URBAN	SUBURBAN/RURAL	WILDERNESS	SYSTEMWIDE
BLS and CPR capable first responder	ASAP	ASAP	ASAP	ASAP
Early defibrillation responder	ASAP	ASAP	ASAP	ASAP
Advanced life support responder	N/A	N/A	N/A	N/A
Transport Ambulance	ASAP	ASAP	ASAP	ASAP

Amador County	METRO/URBAN	SUBURBAN/RURAL	WILDERNESS	SYSTEMWIDE
BLS and CPR capable first responder	ASAP	ASAP	ASAP	ASAP
Early defibrillation responder	ASAP	ASAP	ASAP	ASAP
Advanced life support responder	N/A	san ned u. N/A fla in in	N/A	N/A
Transport Ambulance	12/16	20/30	ASAP	N/A

TABLE 5: SYSTEM RESOURCES AND OPERATIONS (Cont)

Calaveras County	METRO/URBAN	SUBURBAN/RURAL	WILDERNESS	SYSTEMWIDE
BLS and CPR capable first responder	ASAP	ASAP	ASAP	ASAP
Early defibrillation responder	ASAP	ASAP	ASAP	ASAP
Advanced life support responder	ASAP	ASAP	ASAP	ASAP
Transport Ambulance	_	-	-	20

Mariposa County	METRO/URBAN	SUBURBAN/RURAL	WILDERNESS	SYSTEMWIDE
BLS and CPR capable first responder	ASAP	ASAP	ASAP	ASAP
Early defibrillation responder	ASAP	ASAP	ASAP	ASAP
Advanced life support responder	ASAP	ASAP	ASAP	ASAP
Transport Ambulance	8	12/20	ASAP	N/A

TABLE 5: SYSTEM RESOURCES AND OPERATIONS (Cont)

Stanislaus County	METRO/URBAN	SUBURBAN/RURAL	WILDERNESS	SYSTEMWIDE
BLS and CPR capable first responder	ASAP	ASAP	ASAP	ASAP
Early defibrillation responder	ASAP	ASAP	ASAP	ASAP
Advanced life support responder	ASAP	ASAP	ASAP	ASAP
Transport Ambulance	7:30	11:30/19:30	ASAP	N/A

TABLE 6: SYSTEM RESOURCES AND OPERATIONS - Facilities/Critical Care

EMS System:	Mountain-Valley EMS Age	ency same while a		
Reporting Year:	2009			
NOTE: Table 6 is to	be reported by agency.		and the case of the	
Trauma				
Trauma patients: a) Number of patient	s meeting trauma triage crite	ria Riggy ya tanga	00402694086983 -3 tanigot <mark>1850</mark>	
b) Number of major of center by ambular	trauma victims transported d		ा । स्व. १०० (१८) ई. स्थान १ मा <mark>. 1727</mark> के सी	
c) Number of major t	rauma patients transferred to	a trauma center	171 · · · · · · · · · · · · · · · · · ·	
d) Number of patient at a trauma center	s meeting triage criteria who		y 1921 to <u>Unknown</u>	
Emergency Departm	nents			
Total number of emer	_	u waa hiriga ahoo ah ah aha Tarka (hiriganagan um vool)		
a) Number of referral	emergency services		i ed eggener <u>o</u> generale	
b) Number of standby	y emergency services			
c) Number of basic e			alimont <mark>ti <u>6</u>nam</mark> a	
d) Number of compre	ehensive emergency services	asovinam Lordon, satims Michaelman (c.) (m. 16) Jorgania (c. 18)		
Receiving Hospitals				
1. Number of rec	eiving hospitals with writter	n agreements		i angs
2. Number of bas	se hospitals with written agre	oam opegada oo bordaalida eements oo gaalaya galii aa aa	elan el la gelle l angua. La les antesta <u>s</u> el sante	

EMS	System: Mountain-Valley EMS Agency		
Coun	ty: Alpine		
Repo	rting Year: 09/10		
NOT:	E: Table 7 is to be answered for each county:		
SYS1	TEM RESOURCES		
1.	Casualty Collections Points (CCP)		
1.	a. Where are your CCPs located? N/A b. How are they staffed? N/A		
	c. Do you have a supply system for supporting them for 72 hours?	Yes	_ No <u>X</u>
2.	CISD CURRENCE CONTROL		
۷,	Do you have a CISD provider with 24 hour capability?		No <u>X</u>
3.	Medical Response Team		
	a. Do you have any team medical response capability?	Yes	_ No <u>X</u>
	b. For each team, are they incorporated into your local response plan?		
	c. Are they available for statewide response?	Yes	
	d. Are they part of a formal out-of-state response system?	Yes	_ No <u>X</u>
4.	Hazardous Materials	aturiji iliji A	
	a. Do you have any HazMat trained medical response teams?b. At what HazMat level are they trained? N/A	Yes	_ No <u>X</u>
	c. Do you have the ability to do decontamination in an		
	emergency room?	Yes	_ no <u>X</u>
	d. Do you have the ability to do decontamination in the field?	Yes X	no
OPE	RATIONS		
1.	Are you using a Standardized Emergency Management System (SEMS)		
	that incorporates a form of Incident Command System (ICS) structure?	Yes X	no
2.	What is the maximum number of local jurisdiction EOCs you will need	to	
	interact with in a disaster?	-	<u>1</u>
3.	Have you tested your MCI Plan this year in a:		
	a. real event?	Yes	_ no <u>X</u>
	b. exercise?	Yes X	
4.	List all counties with which you have a written medical mutual aid agree	ement.	

El Dorado, Douglas County, NV

5.	Do you have formal agreements with hospitals in your operational participate in disaster planning and response?	area to Yes No X	<u> </u>
6.	Do you have a formal agreements with community clinics in your of areas to participate in disaster planning and response?	operational Yes No X	<u>.</u>
7.	Are you part of a multi-county EMS system for disaster response?	Yes X No _	
8.	Are you a separate department or agency?	Yes X No _	
9.	If not, to whom do you report?		
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?	n 	
	ing the second of the continuous of the second of the continuous of the second of the	GPC 1 PRIO Propinsi di GPC 1	
	i skirija metaka promega uk um sgrund basindenia. Prome ili mana ili mana ili manada iliki in manadasi. Prome k		
		of a madery of capacity. The state of the s	
		tay imakyaway syaMili. Manusi kal	

EMS S	System: Mountain-Valley EMS Agency		
County	y: <u>Amador</u>		
Report	ting Year: <u>09/10</u>		
NOTE	ingree in gette foot een		
NOTE	: Table 7 is to be answered for each county.		
SYST	EM RESOURCES		
1	Constant Collection Prints (CCP) and the Collection Prints (CC		
1.	a. Where are your CCPs located? <u>Ione</u>		
	b. How are they staffed? County staff/ mutual-aid	** **	
	c. Do you have a supply system for supporting them for 72 hours?	Yes X_	No
2	CISD		
2.	Do you have a CISD provider with 24 hour capability?	Yes	No X
	Do you have a Cisis provider with 24 hour capability:	103	_ 110 11
3.	Medical Response Team		
	a. Do you have any team medical response capability?	Yes	No X
	b. For each team, are they incorporated into your local		
	response plan?	Yes	No X
	c. Are they available for statewide response?	Yes	
	d. Are they part of a formal out-of-state response system?	Yes	_ No <u>X</u>
	IV		
4.	Hazardous Materials a. Do you have any HazMat trained medical response teams?	Yes	No Y
	b. At what HazMat level are they trained? N/A	103	_ 110 A
	c. Do you have the ability to do decontamination in an		
	emergency room?	Yes X	No
	d. Do you have the ability to do decontamination in the field?	Yes \overline{X}	No
	ATIONS		
1.	Are you using a Standardized Emergency Management System (SEMS)	Var V	N.
	that incorporates a form of Incident Command System (ICS) structure?	i es <u>x</u>	No
2.	What is the maximum number of local jurisdiction EOCs you will need t	0	
2.	interact with in a disaster?	<u>2</u>	
3.	Have you tested your MCI Plan this year in a:		
	a. real event?	Yes \underline{X}	No
	h exercise?	Yes X	No

5.			formal agreements with hospitals in your operational area to disaster planning and response?	X No	
6.					
7.	Are y	you part o	of a multi-county EMS system for disaster response? Yes	<u>X</u> . No <u>da g</u>	
8.	Are y	you a sep	arate department or agency?	<u>X</u> = 2 No <u> </u>	
9.	If no	t, to who	m do you report?		
8.	to co	ordinate	y is not in the Health Department, do you have a plan public health and environmental health issues with partment? Yes	imi₩ <u>X</u>	
			e todo () e e e e e e e e e e e e e e e e e e		
			The first of the f		

EMS S	System: Mountain-Valley EMS Agency		
County	y: <u>Calaveras</u> -		
Report	ting Year: <u>09/10</u>		
NOTE	: Table 7 is to be answered for each county.		
SYSTI	EM RESOURCES		
1.	Casualty Collections Points (CCP) a. Where are your CCPs located? N/A b. How are they staffed? N/A c. Do you have a supply system for supporting them for 72 hours?		
2.	CISD Do you have a CISD provider with 24 hour capability?	Yes	No <u>_X</u>
3.	Medical Response Team a. Do you have any team medical response capability? b. For each team, are they incorporated into your local		No <u>X</u>
	response plan? c. Are they available for statewide response? d. Are they part of a formal out-of-state response system?	Yes	_ No <u>X</u> _ No <u>X</u> _ No <u>X</u>
4.	Hazardous Materials a. Do you have any HazMat trained medical response teams? b. At what HazMat level are they trained? N/A c. Do you have the ability to do decontamination in an	Yes	_ No <u>X</u>
	emergency room? d. Do you have the ability to do decontamination in the field?	Yes $\frac{X}{X}$ Yes $\frac{X}{X}$	No No
OPER	ATIONS		
1.	Are you using a Standardized Emergency Management System (SEMS) that incorporates a form of Incident Command System (ICS) structure?	Yes X	No
2.	What is the maximum number of local jurisdiction EOCs you will need t interact with in a disaster?	o <u>2</u>	
3.	Have you tested your MCI Plan this year in a: a. real event? b. exercise?	Yes X Yes X	No

5.			formal agreements with hospitals in your operational a	
	partic	cipate in	disaster planning and response?	Yes X No
6.			formal agreements with community clinics in your of ipate in disaster planning and response?	perational Yes No X
7.	Are y	ou part o	of a multi-county EMS system for disaster response?	Yes X ano
8.	Are y	ou a sep	arate department or agency?	Yes X no
9.	If not	t, to who	n do you report?	difference (Auroria
8.	to co	ordinate j	is not in the Health Department, do you have a plan public health and environmental health issues with partment?	$\frac{1}{2} \frac{1}{2} \frac{1}$
			ing d Thair-bug, includes a to Africa area of t color district above arrows a painta	
	8 . K 1944,			
			ed MRS (France) Management November (SPMS) France Carried Command November (SPMS)	

EMS S	System: Mountain-Valley EMS Agency		
County	y: <u>Mariposa</u>		
Report	ting Year: <u>09/10</u>		
NOTE	E: Table 7 is to be answered for each county.		
SYST	EM RESOURCES		
1.	Casualty Collections Points (CCP) a. Where are your CCPs located? N/A b. How are they staffed? N/A c. Do you have a supply system for supporting them for 72 hours?		
2.	CISD Do you have a CISD provider with 24 hour capability?	Yes	No X
3.	 Medical Response Team a. Do you have any team medical response capability? b. For each team, are they incorporated into your local response plan? c. Are they available for statewide response? d. Are they part of a formal out-of-state response system? 	Yes Yes Yes	No <u>X</u> No <u>X</u>
4.	 Hazardous Materials a. Do you have any HazMat trained medical response teams? b. At what HazMat level are they trained? N/A c. Do you have the ability to do decontamination in an emergency room? d. Do you have the ability to do decontamination in the field? 	Yes X Yes X Yes X	No <u>X</u> No
OPER	ATIONS Are you using a Standardized Emergency Management System (SEMS) that incorporates a form of Incident Command System (ICS) structure?	Yes X	No
2.	What is the maximum number of local jurisdiction EOCs you will need t interact with in a disaster?	o <u>2</u>	
3.	Have you tested your MCI Plan this year in a: a. real event? b. exercise?	Yes X Yes X	No

4.	List all counties with which you have a written medical mutual aid agreement.	
5.	Do you have formal agreements with hospitals in your operational area to participate in disaster planning and response? Yes \underline{X} No	<u>(</u> !
6.	Do you have a formal agreements with community clinics in your operational areas to participate in disaster planning and response? Yes No	э <u>Х</u>
7.	Are you part of a multi-county EMS system for disaster response? Yes \underline{X} No) <u>[·</u>
8.	Are you a separate department or agency? We say that $X = X = X = X = X = X = X = X = X = X $	r <u>i</u>
9.	If not, to whom do you report?	
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 X No	·
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	A property of the second state of the second state of the second state of the second s	
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	Association of the state of the	
	prime a Charles - XIVA il conscitor en anyañ les aude secences esta esta el tantific La marenda e di del 2004 de casalde	

EMS S	System: Mountain-Valley EMS Agency		
County	r: Stanislaus — ——————————————————————————————————		
Report	ing Year: <u>09/10</u> The control of the		
NOTE	: Table 7 is to be answered for each county.		
SYSTI	EM RESOURCES		
1.	Casualty Collections Points (CCP) a. Where are your CCPs located? N/A b. How are they staffed? N/A c. Do you have a supply system for supporting them for 72 hours?		
2.	CISD Do you have a CISD provider with 24 hour capability?	Yes	No <u>X</u>
3.	 Medical Response Team a. Do you have any team medical response capability? b. For each team, are they incorporated into your local response plan? c. Are they available for statewide response? d. Are they part of a formal out-of-state response system? 	Yes X Yes X Yes X Yes X	No No
4.	 Hazardous Materials a. Do you have any HazMat trained medical response teams? b. At what HazMat level are they trained? N/A c. Do you have the ability to do decontamination in an emergency room? d. Do you have the ability to do decontamination in the field? 	Yes X Yes X Yes X	No <u>X</u> No
	ATIONS		
1.	Are you using a Standardized Emergency Management System (SEMS) that incorporates a form of Incident Command System (ICS) structure?	Yes X	No
2.	What is the maximum number of local jurisdiction EOCs you will need to interact with in a disaster?	o <u>8</u>	
3.	Have you tested your MCI Plan this year in a: a. real event? b. exercise?	Yes \underline{X} Yes \underline{X}	No

List all counties with which you have a written medical mutual aid agr	reement.	
Do you have formal agreements with hospitals in your operational are	a to	
participate in disaster planning and response?	Yes X	No
Do you have a formal agreements with community clinics in your ope areas to participate in disaster planning and response?	rational Yes	_ No <u>X</u>
Are you part of a multi-county EMS system for disaster response?	Yes X	No
Are you a separate department or agency?	Yes X	No
If not, to whom do you report?	70 20 20 20 20 20 20	
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 X	No

TABLE 8: RESOURCES DIRECTORY -- Approved Training Programs

County: Alpine

EMS System: Mountain-Valley EMS Agency

Training Institution Name Alpine County EMS Contact Person telephone no. Lynn Doyal – (530) 694-2235 75 B Diamond Valley Road Address -Markleeville, Ca. 96120 **Program Level: EMT-I Student Eligibility: * **Cost of Program OPEN** Number of students completing training per year: Basic \$120 Initial training: 3 Refresher: Refresher Cont. Education n/a Expiration Date: 1/31/2011 Number of courses: Initial training: Refresher: Cont. Education: n/a

Reporting Year: FY 2009/10

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

TABLE 8: RESOURCES DIRECTORY -- Approved Training Programs

EMS System: Mountain-Valley EMS Agency County: Amador

Training Institution Name	Cosumnes River College	Contact Person telephone no. Matthew McHugh (916) 691-7906
Address -	11350 American Legion Drive Sutter Creek, CA. 95	
Student Eligibility: *	Cost of Program	**Program Level: <u>EMT-I</u>
OPEN		Number of students completing training per year:
	Basic Varies	Initial training: <u>65</u>
		Refresher: <u>0</u>
	Refresher	Cont. Education 26
	Managard Andrews (Apply and Apply an	Expiration Date: $\frac{12}{31}$
		Number of courses: 2
		Initial training: $\frac{\overline{2}}{2}$
		Refresher: 0
		Cont. Education: 1
Training Institution Name	Jackson Rancheria Fire Department	Contact Person telephone no. Bryan Smith (209) 304-1159
Address -	12222 New York Ranch Road	
Audics -	Jackson, CA. 95642	
Student Eligibility: *	Cost of Program	**Program Level: EMT-I
Restricted to Fire Department	Cost of Frogram	Number of students completing training per year:
	1	1
-	Basic	Initial training: 3
personnel only	Basic	
personnel only		Refresher: A Constitution of the Constitution
-	Basic Refresher	Refresher: n/a Cont. Education n/a
personnel only		Refresher: A Constitution of the Constitution

Reporting Year: FY 2009/10

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

EMS System: Mountain-Valley EMS Agency County: Calaveras Reporting Year: FY 2009/10

Training Institution Name Murphys Fire Protection District Contact Person telephone no. Steve Kovaks (209) 37 Jones Street, PO Box 1260 Address -Murphys, CA. 95247 Student Eligibility: * **Cost of Program** **Program Level: EMT-I Number of students completing training per year: OPEN Basic Initial training: Refresher: 0 Refresher Cont. Education **Expiration Date:** 10/31/2012 Number of courses: Initial training: Refresher: Cont. Education:

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

TABLE 8: RESOURCES DIRECTORY -- Approved Training Programs

EMS System: Mountain-Valley EMS Agency County: Mariposa Reporting Year: FY 2009/10 Cindy Murdaugh - 209-529-5085 **Training Institution Name** Mountain-Valley EMS Agency -Contact Person telephone no. **Mariposa County** 1101 Standiford Ave. Suite D-1 Address -Modesto, CA. 95350 Student Eligibility: * **Cost of Program** **Program Level: EMT-I Number of students completing training per year: OPEN Basic \$325.00 Initial training: Refresher: Refresher \$20.00 Cont. Education **Expiration Date:** 11/30/2011 Number of courses: Initial training: Refresher: Cont. Education: **Training Institution Name** Mountain-Valley EMS Agency -Contact Person telephone no. Cindy Murdaugh – 209-529-5085 **Yosemite** 1101 Standiford Ave. Suite D-1 Address Modesto, CA. 95350 **Program Level: EMT-I Student Eligibility: * **Cost of Program** Number of students completing training per year: Initial training: 0 Basic \$325.00 Refresher: Cont. Education Refresher \$20.00 Expiration Date: 11/30/2011 Number of courses: 0 Initial training: Refresher: Cont. Education:

Training Institution Name	Fresno Regional Occupational Program – Mariposa County	Contact Person telephone no. Phil Whitson – 209-966-4880
Address	1318 Shaw Ave., Fresno, CA. 93710	
Student Eligibility: *	Cost of Program	**Program Level: EMT-I
	Basic \$325.00	Number of students completing training per year: Initial training: 53 Refresher:
	Refresher	Cont. Education Expiration Date: 07/31/2013
		Number of courses: 0_ Initial training: 2 Refresher: Cont. Education:
	RECTORY Approved Training Progrey EMS Agency County: Stanislaus	Reporting Year: FY 2009/10
Training Institution Name	Abrams College	Contact Person telephone no. Dan Lucky 209-527-7777
Address	201 E. Rumble Rd. Modesto, CA. 95350	
Student Eligibility: * OPEN	Cost of Program Basic \$775.00 Refresher	**Program Level: EMT-I Number of students completing training per year: Initial training: 256 Refresher: 38 Cont. Education 8
		Expiration Date: 06/60/2012 Number of courses: 7 Initial training: 7 Refresher: Cont. Education: 7

Training Institution Name	Ceres Unified Adult Education ROP Program	Contact Person telephone no. Mike Gaston – 209-609-1554
Address -	P.O. Box 307	्यम विद्वार व्यवस्थिति ।
	Ceres, CA. 95307	My factorial Commence of the C
Student Eligibility: * OPEN	Cost of Program Basic \$420.00 Refresher	**Program Level: EMT-I Number of students completing training per year: Initial training: 156 Refresher: 2 Cont. Education 7 Expiration Date: 11/30/2010
		Number of courses: 3 Initial training: 2 Refresher: 1
		Cont. Education: <u>1</u>
	The state of \$1 degraphs	

Training Institution Name	Hughson Fire District	Contact Person telephone no.	Michael Crabtree or Ron Callahan – 209-883-2863
Address	2315 Charles Ave. Hughson, CA. 95326		
Student Eligibility: *	Cost of Program	**Program Level: <u>EMT-I</u>	
OPEN	Basic Unknown	Number of students completing t Initial training: 16	raining per year:
		Refresher:	
	Refresher	Cont. Education	
		Expiration Date: <u>04/30/20</u>	013
		Number of courses: 1_	
		Initial training: <u>16</u>	
		Refresher:	
		Cont. Education:	
Training Institution Name Address	Modesto Junior College 1220 Fire Science Lane Modesto, CA. 95351	Contact Person telephone no.	John Sola 209-549-7030
Student Eligibility: *	Cost of Program	**Program Level: EMT-I	
OPEN		Number of students completing t	training per year:
	Basic Varies -\$250-\$450	Initial training: 84	
		Refresher: 24	
	Refresher	Cont. Education	
		Expiration Date: <u>11/3020</u>	$\frac{010}{1}$
		Number of courses: 4	
		Initial training: 3	
		Refresher: <u>1</u> Cont. Education:	

Training Institution Name	Oakdale Rural Fire Department	Contact Person telephone no.	Jered Eckle – 209-847-6898
Address	1398 East F Street Oakdale, CA. 95361		44
Student Eligibility: *	Cost of Program	**Program Level: EMT-I	
OPEN		Number of students completing to	raining per year:
-	Basic Unknown	Initial training: 0	
		Refresher:	
	Refresher	Cont. Education	
		Expiration Date: 08/31/20	009_
		Number of courses:	
		Initial training: <u>0</u>	
		Refresher:	
		Cont. Education:	

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

TABLE 9: RESOURCES DIRECTORY -- Dispatch Agency

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EMS System: Mountain-Valley EMS Agency County: Amador Reporting Year: FY 2009/10

Name, address & telephone: Amador County Sheriff Department, Communications Center			Primary Contact: Lt. Charles Ray	209-223-6672 or 209-223-6284	
Written Contract: ☐ yes ☒ no	Medical Director: ☐ yes X no	X Day-to-day X Disaster	Number of Personnel providing 12 EMD Training BLS	ng services: EMT-D ALS LALS Other	
Ownership: X Public □ Private		If public:	If public: □ city; X count	ty; □ state; □ fire district; □ Federal	

EMS System: Mountain-Valley EMS Agency County: Calaveras Reporting Year: FY 2009/10

Name, address & telephone: Calaveras County Sheriff Department, Communications Center			Primary Contact: Rochelle Whiting 209-754-6500
	er, San Andreas, CA. 9		Rochelle Whiting 209-754-6500
Written Contract:	Medical Director:	X Day-to-day	Number of Personnel providing services:
X yes	□ yes	X Disaster	12 EMD Training EMT-DALS
□ no	X no		BLS LALS Other
Ownership:		If public:	If public: □ city; X county; □ state; □ fire district; □ Federal
X Public □ Private		X Law ☐ Other	
Li Private		explain:	
		onprem.	
		and Andrews Andrews Andrews Andrews Andrews	

EMS System: Mountain-Valley EMS Agency County: Mariposa Reporting Year: FY 2009/10

NI 0			Director Control
Name, address & telephone: California Department of Forestry, Emergency Comm. Center			Primary Contact:
Camornia Deparm	ient of Forestry, Emerg	gency Comm. Center	James Forga 209-966-3803
50.66 111 1 40.3	V 4 M 1 C 4	2522	
5366 Highway 49	North, Mariposa, CA. 9	95338	
Written Contract:	Medical Director:	X Day-to-day	Number of Personnel providing services:
□ yes	□ yes	X Disaster	15 EMD Training EMT-D ALS
X no	□ yes X no		BLS LALS Other
		·	
Ownership:		If public: X Fire	If public: \square city; \square county; X state; \square fire district; \square Federal
X Public		□ Law	
☐ Private		☐ Other	
		explain:	
		1	

EMS System: Mountain-Valley EMS Agency County: Stanislaus Reporting Year: FY 2009/10

Name, address & LifeCom Fire & EN 4701 Stoddard Rd. Modesto, CA. 9536	MS Communications		Primary Contact: Jared Bagwell 209-236-8302
Written Contract: X yes □ no	Medical Director: X yes □ no	X Day-to-day X Disaster	Number of Personnel providing services: 72 EMD Training EMT-D ALS BLS LALS Other
Ownership: ☐ Public X Private		If public:	If public: □ city; □ county; □ state; □ fire district; □ Federal



EMS Transportation Plan

Approved by the Board of Directors
October 2009

The EMS Transportation Plan has been developed to comply with the State EMS Authority's Minimum Standards and Recommended Guidelines 4.01 through 4.22. The plan is divided into three categories:

- ALS Ground Transport Services
- ALS Ground Non-Transport Services
- Air Transportation Services

All policies adopted by the Mountain-Valley EMS Agency are developed in a manner that encourages public input through local EMCC meetings, a sixty-day public comment period, Regional Advisory Committee and Board of Directors meetings.

I. ALS Ground Ambulance Services

A. Standards for Provision of Service

The Mountain-Valley EMS Agency Policies that ALS Ground Ambulance Services must meet are:

431.00 ALS GROUND AMBULANCE AUTHORIZATION

- **407.00 EQUIPMENT AND DRUG INVENTORY**
- 404.00 RESPONSE TO GROUND AMBULANCE REQUESTS
- 405.00 GROUND AMBULANCE STAFFING LEVELS
- 412.20 ALS TRANSFER OF PATIENT CARE

256.00 EMERGENCY MEDICAL TECHNICIAN-PARAMEDIC SCOPE OF PRACTICE

Additionally, ALS Ground Ambulance Service Providers must meet requirements set forth through their ambulance provider agreements.

B. System Design

The optimal EMS system model suggests that each county in the region have a single exclusive provider of all ambulance services in the county. This system would ensure system-wide coordination and a predictable EMS response in areas that contain a variety of population densities; and the financial survival of ambulance providers required to respond to 911 requests. 911 providers must serve the public, regardless of expectation of being paid for providing ambulance services. Therefore, in order to be consistent with the desire to ensure the viability of the 911 system, exclusivity should also include interfacility transports.

Some of the benefits derived from a "single ambulance provider" per county are as follows:

- The coordination of resources through a single ambulance dispatch center in each county. A single ambulance dispatch center is better able to send the closest ambulance to an emergency call
- A more coordinated "system status" response of ambulance resources
- A greater efficiency derived from economies of scale that should lead to lower ambulance fees and contribute to the financial viability of the provider
- Areas of lower population density are at less risk of receiving ambulance response below EMSA standards because appropriate standards can be imposed upon a single provider that benefits financially from the areas of higher population in a single county
- Ease of contract coordination for managed care providers

However, the EMS Agency recognizes that the five-counties within the region are comprised of a unique combination of political, geographical and financial features that may make the realization of this "optimal model" for ground ambulance services impractical in every county. Because the development of a single ambulance provider system per county may be optimal, the development of such a system shall be explored in each county as ambulance provider agreements are due to expire. A single ambulance provider system shall only be pursued if evidence indicates that the county would benefit from a single provider system. In those counties in which the ideal (single ambulance provider per county model) is not achieved, exclusive operating areas shall be developed that ensure the following:

- An adequate mix of urban and suburban/rural population areas to provide a balanced support necessary for the financial viability of the ambulance providers.
- That the agreements with those providers ensure optimal coverage for the entire county.
- 9-1-1/PSAP requests
- Requests for immediate ambulance service transmitted through an authorized 9-1-1/PSAP
- Requests for emergency ambulance service made directly to the ambulance service from a seven-digit telephone call without going through an authorized 9-1-1/PSAP
- All ground interfacility transports requiring the services of an ALS, BLS or Critical Care Transport (CCT) ambulance
- · Any other request for service requiring a ground ambulance response
- Response time standards shall be developed on a county-specific basis for urban, suburban, rural, and wilderness response areas

In those counties with a single provider of ambulance services, exclusivity should be defined in a manner that protects the provider's financial viability to the extent allowed by law during the contract period. Therefore, the MVEMSA shall endeavor to define exclusivity language for single provider counties as for all "ground ambulance services"

Mountain Valley EMS Agency Policy 431.00 - ALS Ground Ambulance Authorization requires that a competitive process be utilized for the development of ALS ground exclusive operating areas (except when "grandfathering" is allowed per H&SC, 1797.224). This policy also outlines some of the minimum components that must be included in a Request for Proposal (R.F.P.) document. It is the plan of the MVEMSA to develop "Emergency Ambulance" exclusive operating areas The process described in Policy #431 -ALS Ground Ambulance Authorization shall be used as a model to be followed in each of these cases. The MVEMSA will also utilize guidelines provided by the State EMS Authority (i.e. EMSA #141 "Competitive Process for Creating Exclusive Operating Areas") and seek approval by the EMSA as it pertains to following EMSA's guidelines and processes for the development of EOAs.

To ensure the continuation of system optimization, at the end of each ambulance contract cycle of the exclusive operating area Ambulance Provider Agreements, the performance of the provider and the needs of the EMS system shall be assessed and a decision made whether greater system optimization could be achieved if the exclusive operating area was made subject to a competitive R.F.P. process.

Pursuant to Section 1797.224 of the Health and Safety Code, the following companies have been awarded an EOA in Calaveras County through a competitive bid process:

- American Legion Post#108 Ambulance North and South Zones
- Ebbetts Pass Fire District East Zonc

Pursuant to Section 1797.224 H&SC, the following ambulance companies have been determined to have provided emergency ambulance services in the same manner and scope (in the areas named below and identified on the attached map) without interruption since January 1, 1981:

- 1. Patterson District Ambulance Zone 5, Stanislaus County
- 2. American Medical Response (formerly "911 Emergency Medical Services, Inc." and Doctors Ambulance of Modesto) Zone 1, Stanislaus County
- 3. American Medical Response (formerly "911 Emergency Medical Services, Inc.")
 Zone 3, Stanislaus County
- 4. American Medical Response (Formerly Turlock Ambulance Service) Zone 8, Stanislaus County
- 5. Oak Valley Hospital District Zone 4, Stanislaus County
- 6. American Legion Ambulance Service all of Amador County

System participants shall be assigned roles in the exclusive operating areas and non-exclusive operating areas pursuant to MVEMSA policies and procedures and agreements between the MVEMSA and the system participant agencies.

II. ALS Ground Non-Transport Services

A. Standards for Provision of Service:

The Mountain-Valley EMS Agency Policies that ALS Ground Non-Transport Services must meet are:

412.00 FIRST RESPONDER - ALS AUTHORIZATION

407.00 EQUIPMENT AND DRUG INVENTORY

412.20 ALS TRANSFER OF PATIENT CARE

Additionally, ALS Ground Ambulance Service Providers must meet requirements sent forth in their ALS First Responder agreements.

III. Air Transportation Services

A. Standards for Provision of Service

The Mountain-Valley EMS Agency Policies that Air Ambulance Services must meet are:

- 441.00 EMS AIRCRAFT POLICY DEFINITIONS
- 442.00 EMS AIRCRAFT PROVIDER AUTHORIZATION
- 444.00 EMS AIRCRAFT ON-LINE MEDICAL CONTROL
- 445.00 EMS AIRCRAFT REQUEST/CANCELLATION
- 446.00 EMS AIRCRAFT PROVIDER DISPATCH
- 447.00 EMS AIRCRAFT LANDING SITE

B. System Design

Currently, air ambulance transport services are approved on a non-exclusive operating basis. Should system coordination issues between air ambulance providers have a negative impact on the EMS system, an R.F.P. (as specified in the California H.S. Code, Division 2.5, Section 1797.224) may be developed to allow a competitive process in the selection of an exclusive provider or providers of air ambulance services in the region. The development and acceptance of the R.F.P. that defines the details of this document shall be reviewed and approved at a public hearing during a scheduled EMS Agency Board of Directors meeting. The EMS agency recognizes that there are financial, legal and political considerations that make the realization of this "optimal model" for air ambulance services a serious challenge. Despite these difficulties, the EMS air transportation system discussed herein has been adopted by the MVEMSA as a model for all future system development.

The components of an optimal air ambulance transportation system would include the:

- Designation of an exclusive air ambulance transport service to provide care within the boundaries of the Mountain-Valley EMS region.:
- Establishment of one or more bases of operation in strategic locations throughout the five-county region.
- Reliance on air ambulance transport services, based outside the five-county region, to be accessed for either mutual aid or when out-of-region based services have the shortest response to a field emergency
- Establishment of a single Regional Air Resource Center to coordinate emergency air ambulance resources and ensure that the closest air ambulance is sent to the scene.
- Appropriate utilization of air ambulance providers (whether based within or outside the region) is maintained.
- Exclusivity for the region-based provider furnishes some measure of protection for the financial viability of the region's exclusive provider (which increases the the likelihood that air ambulances services will continue).

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- Greater efficiency through "economies of scale" that should lead to lower air ambulance costs and potentially lower air ambulance fees.
- Ease of contract coordination for managed care providers.

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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:

Mountain-Valley EMS Agency - Stanislaus County

Area or subarea (Zone) Name or Title:

Zone Five

Zone 5 is in northwestern Stanislaus County encircling the City of Patterson. It is depicted on the map attached as Exhibit A, and is specifically described as follows:

Commencing on the border of Stanislaus County adjacent to San Joaquin County at the San Joaquin River, the line proceeds southwesterly along the county line; then southerly along the county line approximately 3 miles southeast of the point where Del Puerto Canyon Road leaves the county; then easterly to a point on Highway 33 at Anderson Road; then northwesterly along Highway 33 to J.T. Crow Road; then northeasterly along J.T. Crow Road/L.B. Crow Road to the San Joaquin River; then northerly along the San Joaquin River to Carpenter Road; then northerly along Carpenter Road to Monte Vista Avenue; then westerly along Monte Vista Avenue to Jennings Road; southerly along Jennings Road to West Main; westerly along West Main to the San Joaquin River; northerly along the San Joaquin River to Del Puerto Creek; from Del Puerto Creek to the juncture of Keyes Road and Laird Road; northerly along Laird Road to Grayson Road; westerly on Grayson Road to a point west of Broyle Road; northerly to the Tuolumne River; northwesterly along the Tuolumne River to its confluence with the San Joaquin River; then northwesterly along the San Joaquin River to the County line.

Name of Current Provider(s):

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

Del Puerto Health Care District has provided EMT-P level emergency ground ambulance services from 1978 to the present.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

On October 23, 1990, the Stanislaus County Ambulance Ordinance (C.S. 410) was enacted. Section 6.70.030, B. of this ordinance states, "The number and boundaries of ambulance response zones in Stanislaus County, and their designations as exclusive and non-exclusive operating areas, will be determined by the Board of Supervisors of Stanislaus county at the time of the enactment of this ordinance." Pursuant to this ordinance, the Stanislaus County Board of Supervisors designated the entire County to be exclusive operating areas divided into zones shown on the attached map entitled "Ambulance Response Zones." The Board also specified the areas that were to be "grandfathered" into exclusive operating areas and those that were to be

developed only through a competitive bid process (as shown on the same map).

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

All emergency ground ambulance and Advanced Life Support ground ambulance requests.

Method to achieve Exclusivity, if applicable (HS1797.224):

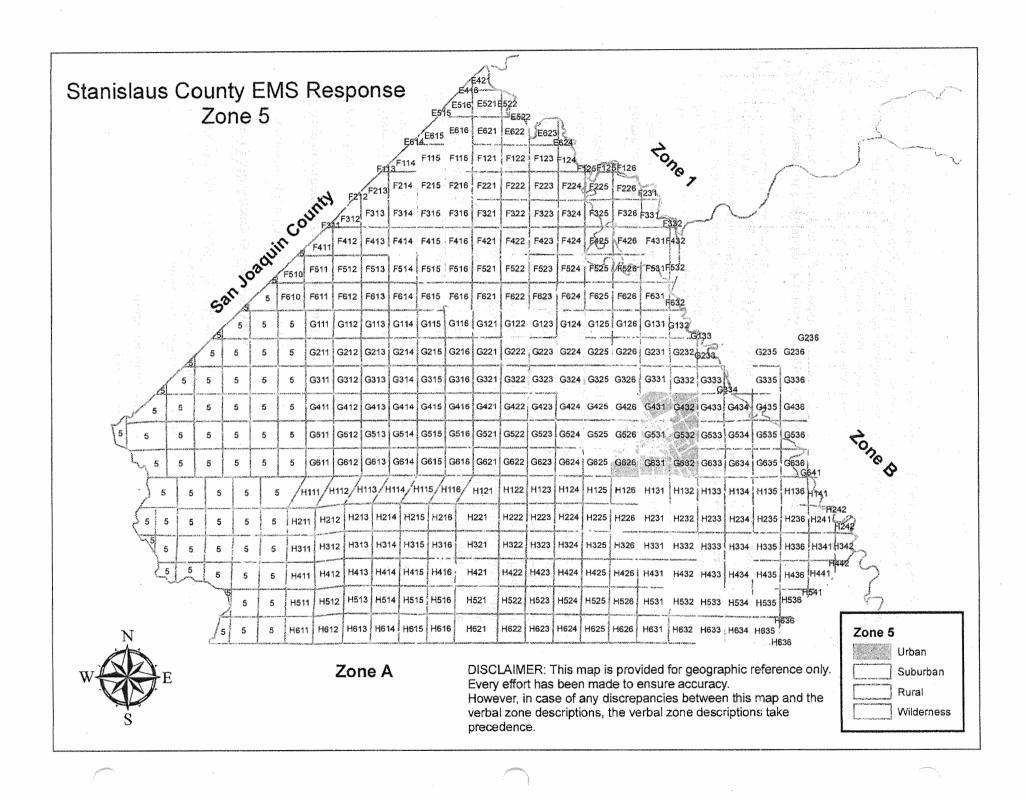
If grandfathered, pertinent facts concerning changes in scope and manner of service. Description of current provider including brief statement of uninterrupted service with no changes to scope and manner of service to zone. Include chronology of all services entering or leaving zone, name or ownership 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 processed used to select provider or providers.

Provider was "Grandfathered." Del Puerto Health Care District provided uninterrupted service and no change in manner and scope since before January 1, 1981 as shown below:

In 1973, Del Puerto Health Care District took over operation of emergency ground ambulance services and staffed at the EMT-1 level. In 1978, their medical scope of practice changed to EMT-P. On January 1, 1980, Del Puerto Health Care District contracted with Memorial Hospital Association (M.M.H.) of Modesto to provide emergency ground ambulance services at the EMT-P level. A copy of that contract indicates that although day to day operations were provided by M.M.H., Del Puerto Health Care District remained responsible for policy level decisions. In 1986, the Del Puerto Health Care District resumed operating its own ambulance (Patterson District Ambulance) for emergency ground ambulance services at the EMT-P level which has continued to the present.

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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Stanislaus County

Area or subarea (Zone) Name or Title:

Zone One

Zone 1 is in north central Stanislaus County encircling the City of Modesto. It is depicted on the map attached as Exhibit A and is specifically described as follows:

Commencing at a point directly north of Oakdale Road on the border of Stanislaus County adjacent to San Joaquin County northwest of the City of Riverbank, the line proceeds west southwesterly along the county line to the confluence of the San Joaquin River and the Tuolumne River; southeasterly along the Tuolumne River and continuing east northeasterly along the Tuolumne River to a point south of Goodwin Road; northerly to Yosemite Blvd; westerly along Yosemite Blvd to Wellsford Road; northerly along Wellsford Road to Milnes Road; northwesterly along the Santa Fe tracks to Clarabel Road; westerly along Claribel Road to Oakdale Road; then northerly along Oakdale Road to the Stanislaus County Line adjacent to San Joaquin County northwest of the City of Riverbank at a point directly north of Oakdale Road.

Name of Current Provider(s):

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

The current provider of emergency ground ambulance services in this zone is American Medical Response, Inc. 911 Emergency Medical Services, Inc provided emergency ambulance services without interruption from 1958 through 1994. American Medical Response became the controlling corporation of 911 Emergency Medical Services Inc. pursuant to a reverse merger which left 911 Emergency Medical Services Inc. technically intact but with American Medical Response as the lead company.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

On October 23, 1990, the Stanislaus County Ambulance Ordinance (C.S. 410) was enacted. Section 6.70.030, B. of this ordinance states, "The number and boundaries of ambulance response zones in Stanislaus County, and their designations as exclusive and non-exclusive operating areas, will be determined by the Board of Supervisors of Stanislaus county at the time of the enactment of this ordinance." Pursuant to this ordinance, the Stanislaus County Board of

Supervisors designated the entire County to be exclusive operating areas divided into zones shown on the attached map entitled "Ambulance Response Zones." The Board also specified the areas that were to be "grandfathered" into exclusive operating areas and those that were to be developed only through a competitive bid process (as shown on the same map).

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

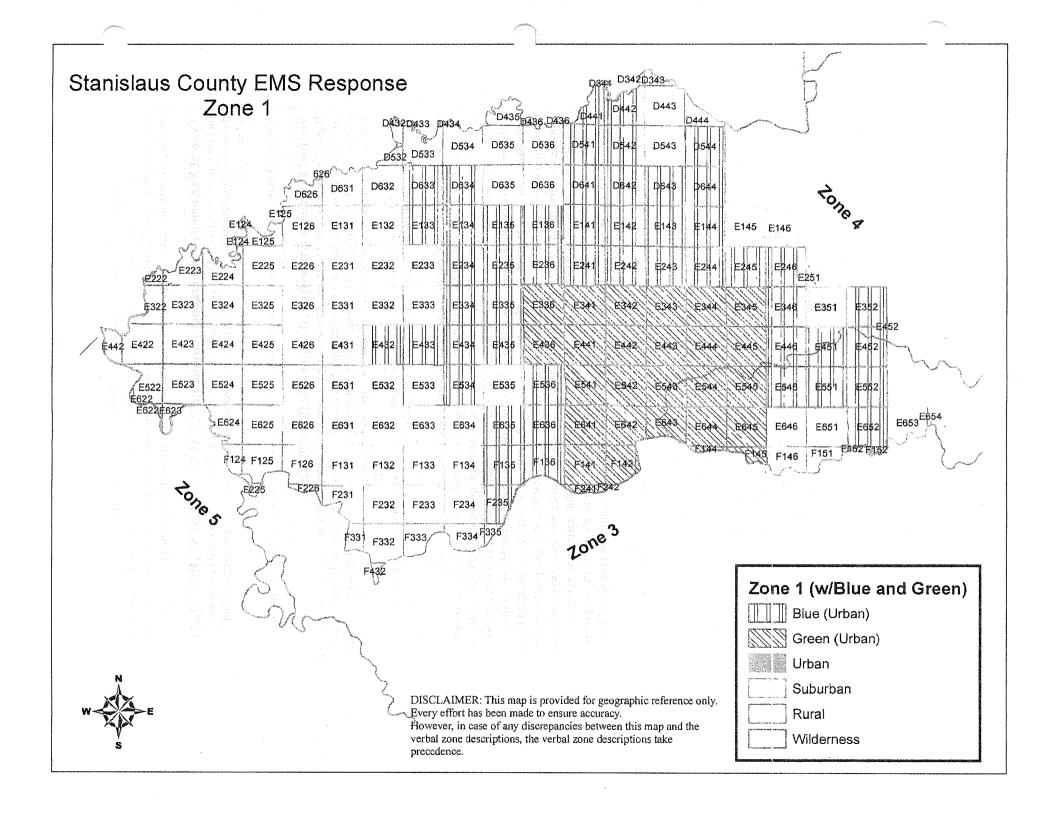
All emergency ground ambulance and Advanced Life Support ground ambulance requests.

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

911 Emergency Medical Services, Inc. and Doctors Ambulance of Modesto were "Grandfathered" into Zone One as providers of emergency ground ambulance services pursuant to a shared ambulance provider agreement for Zone One with an agreement start date of July 1, 1992. 911 Emergency Medical Services, Inc. has provided uninterrupted emergency ground ambulance services in this zone since 1958. The company provided Advanced Life Support ambulance services from 1973 to the present. Doctors Ambulance Company of Modesto began providing emergency ground ambulance service in Zone One in 1970 and began providing ALS ambulance services in 1973. Doctors Ambulance Company was dissolved as a corporate entity in July of 1995 and pursuant to the Zone One ambulance agreement, that agreement reverted entirely to American Medical Response. American Medical Response absorbed the corporate entity, "911 Emergency Medical Services, Inc.," in September, 1994, and has provided ALS ambulance services in Zone One through the present.



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:

Mountain-Valley EMS Agency - Stanislaus County

Area or subarea (Zone) Name or Title:

Zone Three

Zone 3 is in the central area of Stanislaus County encircling the City of Ceres. It is depicted on the map attached as Exhibit A and is specifically described as follows:

Commencing at Carpenter and Taylor Roads; then easterly on Taylor Road to Moffet Road; then northerly on Moffett Road to Keyes Road; then easterly on Keyes Road to Washington Road; then northerly on Washington Road to Service Road; then westerly on Service Road to Faith Home Road; then northerly on Faith Home Road to the Tuolumne River; then westerly along the Tuolumne River to a point just northwest of Broyle Road; then south to Grayson Road; then easterly on Grayson Road to Laird Road; then southerly on Laird Road to Keyes Road; then easterly on Keyes Road to Carpenter Road; then southerly on Carpenter Road to Taylor Road.

Name of Current Provider(s):

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

The current provider of emergency ground ambulance services in this zone is American Medical Response Inc. 911 Emergency Medical Services, Inc., provided emergency ambulance services without interruption from 1972 through 1994. American Medical Response became the controlling corporation of 911 Emergency Medical Services Inc. pursuant to a reverse merger in 1994 which left 911 Emergency Medical Services Inc. technically intact but with American Medical Response as the lead company.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

On October 23, 1990, the Stanislaus County Ambulance Ordinance (C.S. 410) was enacted. Section 6.70.030, B. of this ordinance states, "The number and boundaries of ambulance response zones in Stanislaus County, and their designations as exclusive and non-exclusive operating areas, will be determined by the Board of Supervisors of Stanislaus county at the time of the enactment of this ordinance." Pursuant to this ordinance, the Stanislaus County Board of Supervisors designated the entire County to be exclusive operating areas divided into zones shown on the attached map entitled "Ambulance Response Zones." The Board also specified the areas that were to be "grandfathered" into exclusive operating areas and those that were to be developed only through a competitive bid process (as shown on the same map).

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

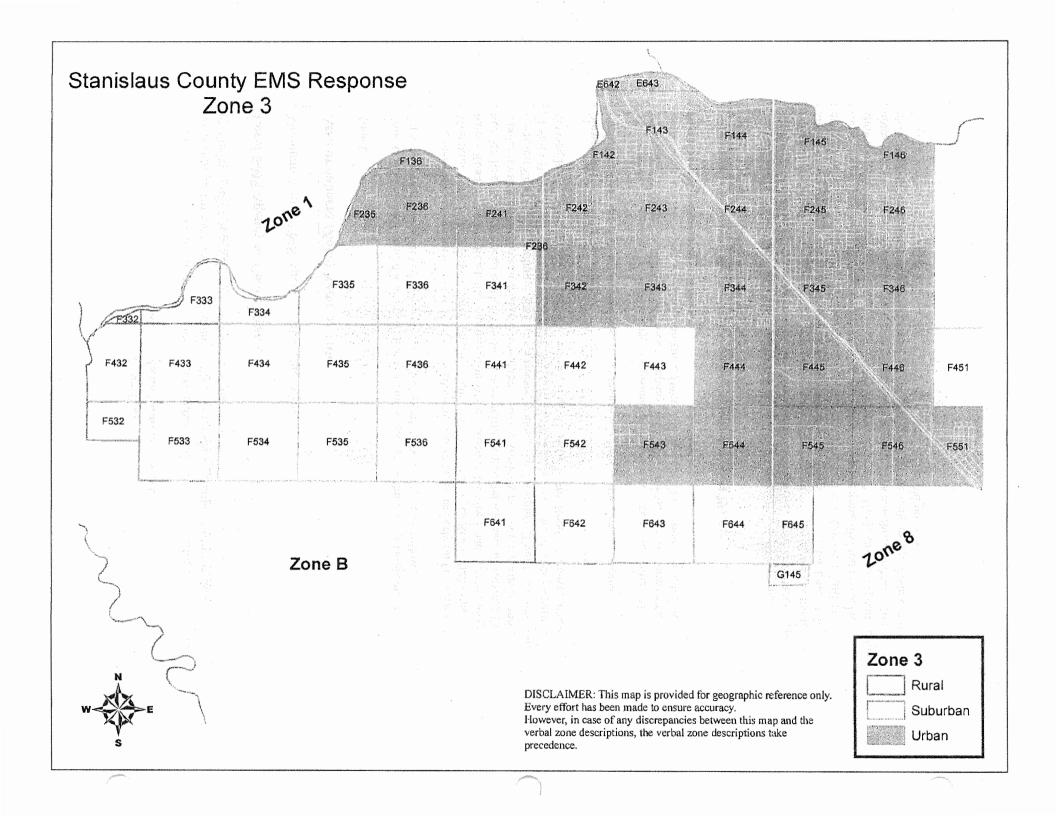
All emergency ground ambulance and Advanced Life Support ground ambulance requests.

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

911 Emergency Medical Services, Inc. was "Grandfathered" into Zone Three as a provider of emergency ground ambulance services pursuant to an agreement with a start date of July 1, 1992. 911 Emergency Medical Services, Inc. provided uninterrupted emergency ground ambulance services in this zone since 1972. 911 Emergency Medical Services, Inc. has provided Advanced Life Support ambulance services from 1973 to the present. American Medical Response absorbed the corporate entity, "911 Emergency Medical Services, Inc.," in September, 1994, and has provided ALS ambulance services in Zone Three through the present.



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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Stanislaus County

Area or subarea (Zone) Name or Title:

Zone C

Zone C is in the east central area of Stanislaus County encircling the City of Hughson. It is depicted on the map attached as Exhibit A and is specifically described as follows:

Commencing at the corner of Grayson and Washington Roads; then easterly on Grayson Road to Mountain View Road; then southerly on Mountain View Road to Keyes Road; then easterly on Keyes Road to Waring Road; then northerly on Waring Road to Service Road; then easterly on Service Road to a point east of Downie Road; then northerly parallel and east of Downie Road to a point northeast of Lyon and Virginia Road; then curving westerly across the northern end of Swanson Road to the Tuolumne River; then westerly along the Tuolumne River to a point north of Faith Home Road; then southerly along Faith Home Road to Service Road; then easterly along Service Road to Washington Road; then southerly along Washington Road to Grayson Road.

Name of Current Provider(s):

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

Two ambulance services provide emergency ground ambulance service in this zone. The first is Hughson Paramedic Ambulance Services Company, Inc. This provider has provided emergency ambulance services without interruption since 1990. The second is Pro Transport-I, Inc. who began service in November 2008.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

On October 23, 1990, the Stanislaus County Ambulance Ordinance (C.S. 410) was enacted. Section 6.70.030, B. of this ordinance states, "The number and boundaries of ambulance response zones in Stanislaus County, and their designations as exclusive and non-exclusive operating areas, will be determined by the Board of Supervisors of Stanislaus county at the time of the enactment of this ordinance." Pursuant to this ordinance, the Stanislaus County Board of Supervisors designated the entire County to be exclusive operating areas divided into zones shown on the attached map entitled "Ambulance Response Zones." The Board also specified the areas that were to be "grandfathered" into exclusive operating areas and those that were to be developed only through a competitive bid process (as shown on the same map). Zone C will become an exclusive operating area only following a competitive bid process.

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

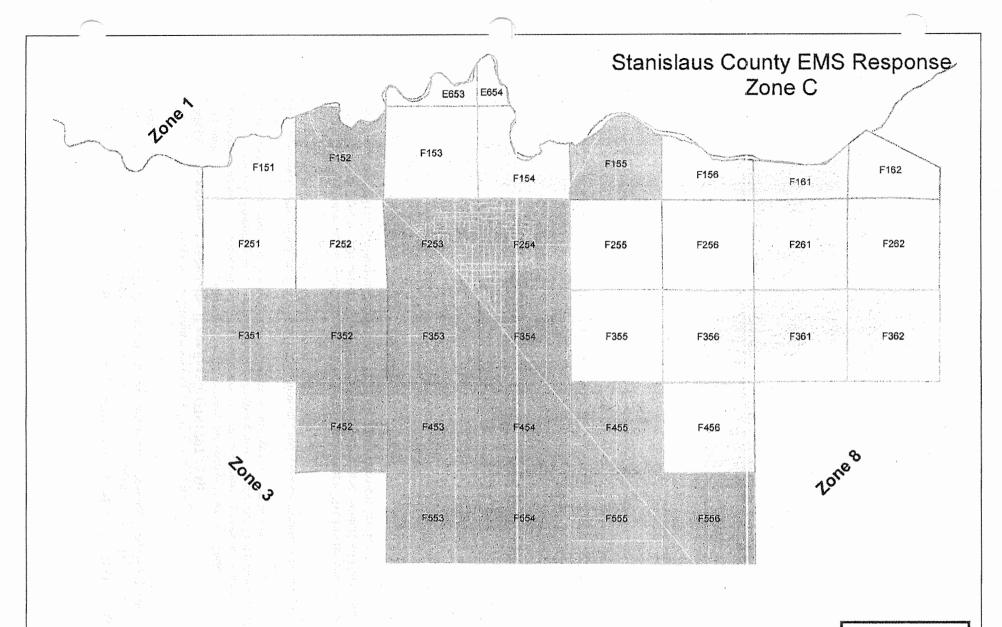
There is no ALS or emergency ambulance service exclusivity in Zone C.

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

Zone C will become an exclusive operating area following a competitive bid process. Prior to 1990, parts of Zone C were served by providers adjacent to the zone: Waterford Community Ambulance, Turlock Ambulance Service and 911 Emergency Medical Services.





DISCLAIMER: This map is provided for geographic reference only. Every effort has been made to ensure accuracy. However, in case of any discrepancies between this map and the verbal zone descriptions, the verbal zone descriptions take precedence.

Zone C		
	Rural	
grouped reference from a range	Suburban	
	Urban	

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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Stanislaus County

Area or subarea (Zone) Name or Title:

Zone Four

Zone 4 is in the northern apex of the Stanislaus County encircling the City of Oakdale.

Commencing on the border of Stanislaus County at the apex adjacent to Amador County and San Joaquin County; the line proceeds southerly and then westerly along the Stanislaus and San Joaquin borders to a point just northwest of the City of Riverbank; then proceeding southerly along Oakdale Road; then easterly along Claribel Road; then southeasterly along the Santa Fe tracks to Milnes Road; then east along Milnes Road to Crow Road; then north along Crow Road to Claribel Road; then easterly along Claribel Road to Tim Bell Road; then northeasterly along Tim Bell Road to Warnerville Road; then easterly along Warnerville Road/Cooperstown Road to the border of Stanislaus County to the apex adjacent to Amador and San Joaquin County.

Name of Current Provider(s):

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

The current provider of emergency ground ambulance services in this zone is Oak Valley Hospital District, dba Oak Valley Ambulance. This provider has provided emergency ambulance services without interruption since 1973.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

On October 23, 1990, the Stanislaus County Ambulance Ordinance (C.S. 410) was enacted. Section 6.70.030, B. of this ordinance states, "The number and boundaries of ambulance response zones in Stanislaus County, and their designations as exclusive and non-exclusive operating areas, will be determined by the Board of Supervisors of Stanislaus County at the time of the enactment of this ordinance." Pursuant to this ordinance, the Stanislaus County Board of Supervisors designated the entire County to be exclusive operating areas divided into zones shown on the attached map entitled "Ambulance Response Zones." The Board also specified the areas that were to be "grandfathered" into exclusive operating areas and those that were to be developed only through a competitive bid process (as shown on the same map).

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85):

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.)

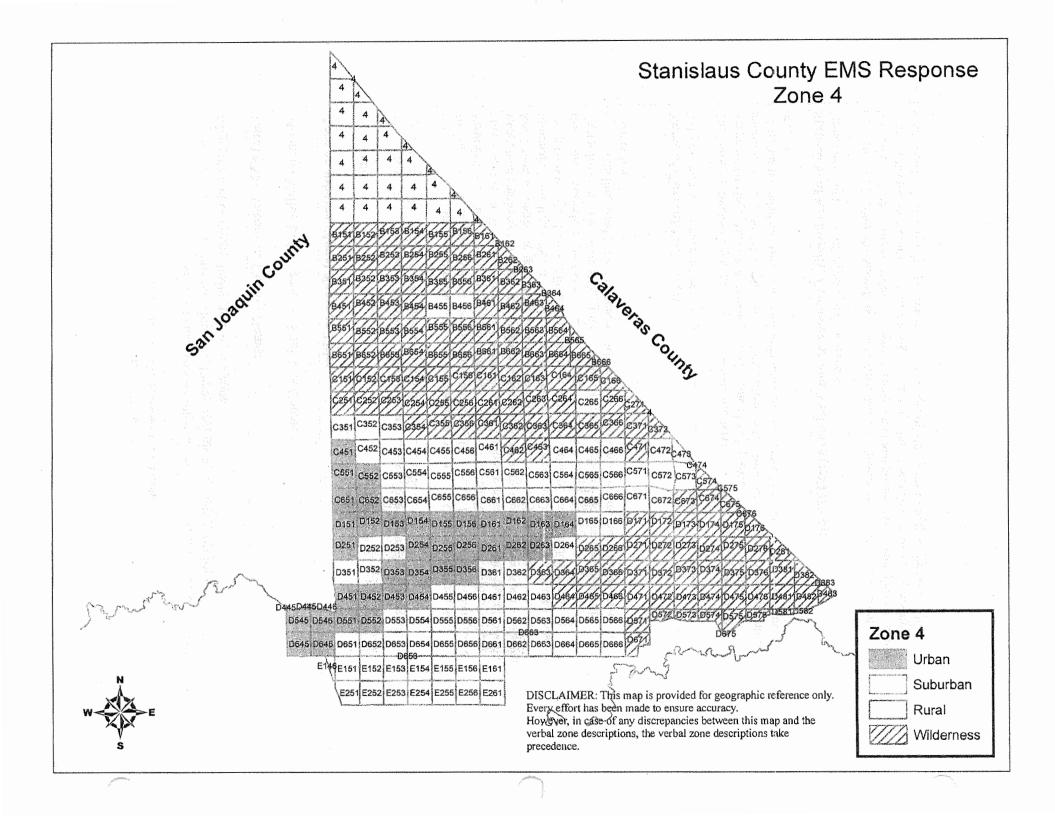
All emergency ground ambulance and Advanced Life Support ground ambulance requests.

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

Oak Valley Hospital District. was "Grandfathered" into Zone Four as a provider of emergency ground ambulance services pursuant to an agreement with a start date of January 1, 1993. Oak Valley District Hospital has provided Advanced Life Support ambulance service from 1975 to the present.



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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Stanislaus County

Area or subarea (Zone) Name or Title:

Zone Eight

Zone 8 is in the central area of Stanislaus County encircling the City of Turlock. It is depicted on the map attached as Exhibit A and is specifically described as follows:

Commencing on the border of Stanislaus County adjacent to Merced County where the San Joaquin River enters the County; then northeasterly along the County line to a point where Keyes Road exits the County; then westerly along Keyes Road to Hickman Road; then northerly along Hickman Road to Whitmore Road; then westerly along Whitmore Road to a point east of Downie Road; then southerly to a point east of Service Road; then westerly along Service Road to Waring Road; then southerly along Waring Road to Keyes Road; then westerly along Keyes Road to Mountain View Road; then northerly along Mountain View Road to Grayson Road; then westerly along Grayson Road To Washington Road; then southerly along Washington Road to Keyes Road; then westerly along Keyes Road to Moffett Road; then southerly along Moffet Road to Taylor Road; then westerly along Taylor Road to Crows Landing Road; then southerly along Crows Landing Road to the San Joaquin River; then southerly along the San Joaquin River to the County line.

Name of Current Provider(s):

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

The current provider of emergency ground ambulance services in this zone is American Medical Response (AMR). Turlock Ambulance Service, Inc (TAS). provided services without interruption from 1964 through October, 1995, when AMR absorbed TAS as a corporate entity. AMR has provided emergency ground ambulance services since October, 1995, through the present.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

On October 23, 1990, the Stanislaus County Ambulance Ordinance (C.S. 410) was enacted. Section 6.70.030, B. of this ordinance states, "The number and boundaries of ambulance response zones in Stanislaus County, and their designations as exclusive and non-exclusive operating areas, will be determined by the Board of Supervisors of Stanislaus County at the time of the

enactment of this ordinance." Pursuant to this ordinance, the Stanislaus County Board of Supervisors designated the entire County to be exclusive operating areas divided into zones shown on the attached map entitled "Ambulance Response Zones." The Board also specified the areas that were to be "grandfathered" into exclusive operating areas and those that were to be developed only through a competitive bid process (as shown on the same map).

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

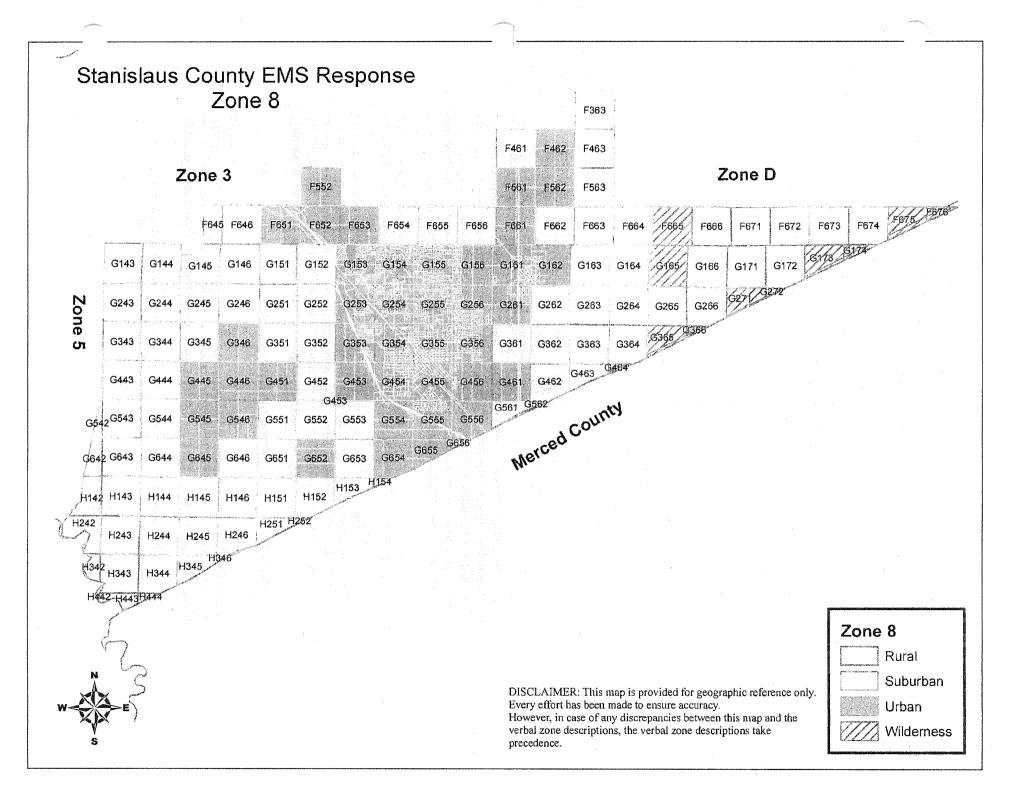
All emergency ground ambulance and Advanced Life Support ground ambulance requests.

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

Turlock Ambulance Service, Inc. was "Grandfathered" into Zone Eight as a provider of emergency ground ambulance services pursuant to an agreement with a start date of September 1, 1992. Turlock Ambulance Service, Inc. provided Advanced Life Support ambulance services from 1973 to October of 1995. American Medical Response absorbed the corporate entity, "Turlock Ambulance Service" in October, 1995, and continues to provide ambulance services in Zone Eight to the present.



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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Stanislaus County

Area or subarea (Zone) Name or Title:

Zone D

Zone D is in the eastern apex of Stanislaus County encircling the City of Waterford. It is depicted on the maps attached as Exhibit A and is specifically described as follows:

Commencing on the Stanislaus County line adjacent to Merced County at the point where Keyes Road exits the County; then northeasterly and northwesterly along the County line to a point east and on line with Warnerville Road; then westerly along Cooperstown/Warnerville Road to Tim Bell Road; then southerly on Tim Bell Road to Claribel Road; then westerly on Claribel Road to Crow Road; then southerly on Crow Road to Milnes Road; then westerly on Milnes Road to Wellsford Road; then southerly on Wellsford Road to Highway 132; then easterly on Highway 132 to Goodwin Road; then southerly to the Tuolumne River; then easterly along the Tuolumne River to the northern end of Swanson Road; then curving southerly to Virginia Road and Whitmore Road; then easterly along Whitmore Road to Hickman Road; then southerly along Hickman Road to Keyes Road; then casterly along Keyes Road to the County line.

Name of Current Provider(s):

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

The current provider of emergency ground ambulance service in this zone is Oak Valley District Hospital. Waterford Community Ambulance began providing emergency ambulance services in 1962, and provided these services without interruption until May, 1996, when Oak Valley District Hospital began providing emergency ground ambulance services in Zone Six per an agreement with Waterford Community Ambulance.. On May 1, 2003, Hughson Ambulance also began providing service in Zone Six when the zone reverted to non-exclusive status. Zone Six was retitled Zone D to reflect its change from an exclusive to non-exclusive response area. On May 5, 2008, Hughson Ambulance ceased providing service in Zone D.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

On October 23, 1990, the Stanislaus County Ambulance Ordinance (C.S. 410) was enacted. Section 6.70.030, B. of this ordinance states, "The number and boundaries of ambulance response zones in Stanislaus County, and their designations as exclusive and non-exclusive operating

areas, will be determined by the Board of Supervisors of Stanislaus County at the time of the enactment of this ordinance." Pursuant to this ordinance, the Stanislaus County Board of Supervisors designated the entire County to be exclusive operating areas divided into zones shown on the attached map entitled "Ambulance Response Zones." The Board also specified the areas that were to be "grandfathered" into exclusive operating areas and those that were to be developed only through a competitive bid process (as shown on the same map). However, based upon a change in ALS ambulance providers in this zone that occurred in May, 1996, this zone is designated as a non-exclusive operating area as of February 12, 2003.

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

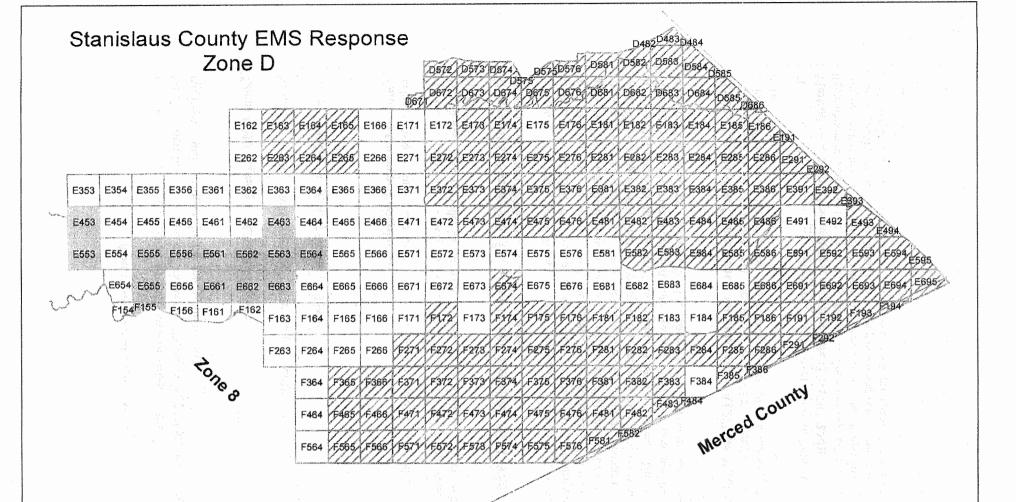
There is no ALS or emergency ambulance service exclusivity in Zone D.

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

Due to changes in ambulance providers that occurred in May 1996, this zone must be a non-exclusive area until such time as a competitive bid process is completed.



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DISCLAIMER: This map is provided for geographic reference only. Every effort has been made to ensure accuracy. However, in case of any discrepancies between this map and the verbal zone descriptions, the verbal zone descriptions take precedence.

Zone D	
	Urban
The second secon	Suburban
	Rural
	Wilderness

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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Stanislaus County

Area or subarea (Zone) Name or Title:

Zone A

Name of Current Provider(s):

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

The current provider of emergency ground ambulance services in this zone is West Side District Ambulance. This provider has provided emergency ambulance services without interruption since 1985.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

On October 23, 1990, the Stanislaus County Ambulance Ordinance (C.S. 410) was enacted. Section 6.70.030, B. of this ordinance states, "The number and boundaries of ambulance response zones in Stanislaus County, and their designations as exclusive and non-exclusive operating areas, will be determined by the Board of Supervisors of Stanislaus County at the time of the enactment of this ordinance." Pursuant to this ordinance, the Stanislaus County Board of Supervisors designated the entire County to be exclusive operating areas divided into zones shown on the attached map entitled "Ambulance Response Zones." The Board also specified the areas that were to be "grandfathered" into exclusive operating areas and those that were to be developed only through a competitive bid process (as shown on the same map).

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

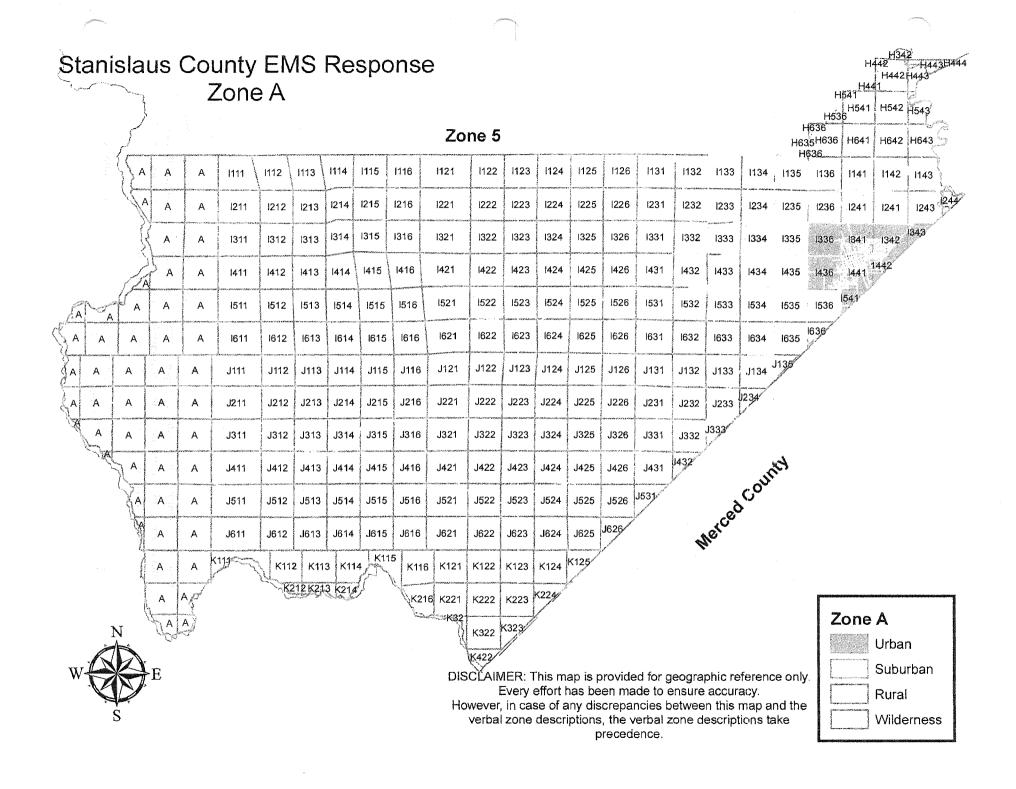
There is no ALS or emergency ambulance service exclusivity in Zone A.

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

Memorial Hospital Association provided emergency ground ambulance services in Zone A between 1982 and 1985. West Side District Ambulance became the provider of emergency ground ambulance services in 1985. Zone A will only become an exclusive operating area following a competitive bid process.



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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Stanislaus County

Area or subarea (Zone) Name or Title:

Zone B

Name of Current Provider(s):

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

Currently there are two providers of emergency ground ambulance services in this zone. Del Puerto Hospital District has provided emergency ambulance services without interruption since 1985. American Medical Response began providing coverage in this zone in November 2007.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

On October 23, 1990, the Stanislaus County Ambulance Ordinance (C.S. 410) was enacted. Section 6.70.030, B. of this ordinance states, "The number and boundaries of ambulance response zones in Stanislaus County, and their designations as exclusive and non-exclusive operating areas, will be determined by the Board of Supervisors of Stanislaus County at the time of the enactment of this ordinance." Pursuant to this ordinance, the Stanislaus County Board of Supervisors designated the entire County to be exclusive operating areas divided into zones shown on the attached map entitled "Ambulance Response Zones." The Board also specified the areas that were to be "grandfathered" into exclusive operating areas and those that were to be developed only through a competitive bid process (as shown on the same map).

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

There is no ALS or emergency ambulance service exclusivity in Zone B.

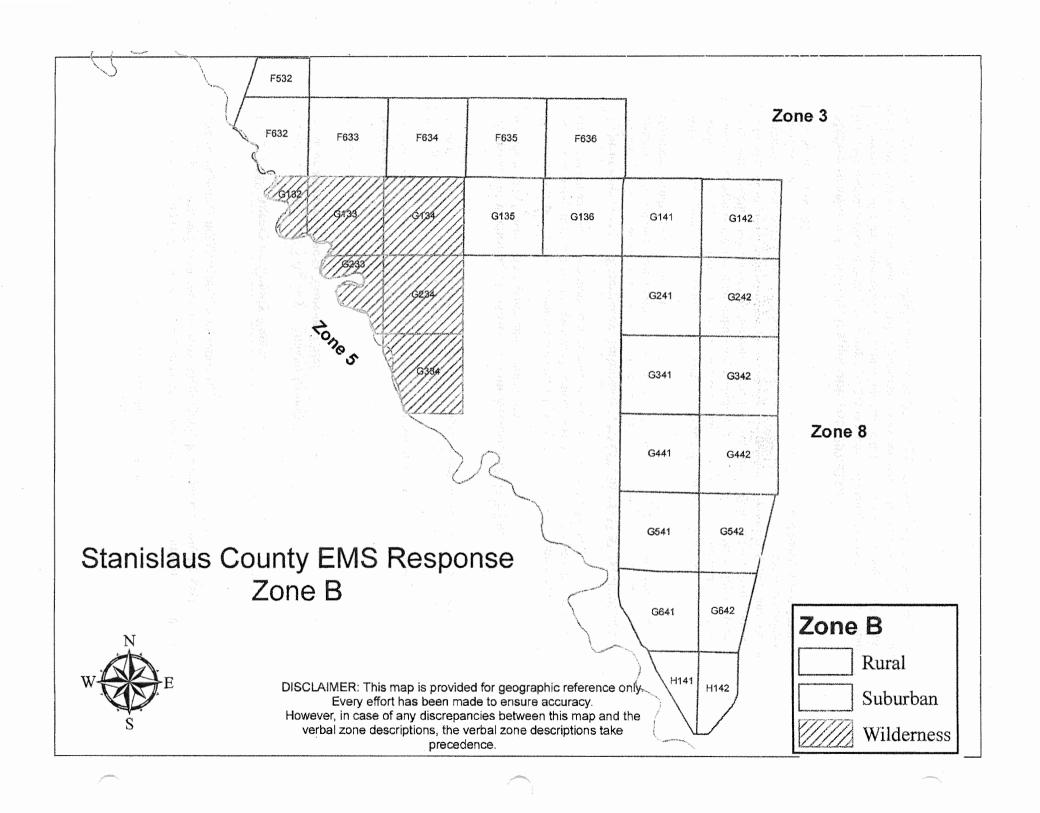
Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

Turlock Ambulance Service and Mobile Life Support provided emergency ground ambulance services in different sections of Zone B prior to 1980 and until 1988. Del Puerto Hospital District became the provider of emergency ground ambulance services for the area of Zone B in 1988. In November 2007, American Medical Response became responsible for also responding to portions of Zone B. American Zone B will only become an exclusive operating area following a competitive bid process.



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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Amador County

Area or subarea (Zone) Name or Title:

Amador County

Name of Current Provider(s):

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

The current provider of emergency ground ambulance services in this zone is American Legion Ambulance Service. This provider has provided emergency ambulance services without interruption since 1929.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

The ambulance provider agreement between the LEMSA and American Legion Ambulance Service specifies that American Legion Ambulance Service is the exclusive operator of ALS ground ambulance and emergency ground ambulance services for that County.

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

All emergency ground ambulance services and Advanced Life Support ground ambulance services. "Emergency ground ambulance services" shall mean all services originating in Amador County that require the use of an ambulance, including but not limited to interfacility transfers or scene calls whether Advanced Life Support, Basic Life Support, or Critical Care Transports as defined in the Amador County Ambulance Ordinance. The term "emergency ground ambulance services" is used to differentiate between air and ground ambulance services, and its meaning is equivalent to "emergency ambulance services" as found in the Health and Safety Code, Division 2.5, Section 1797.85.

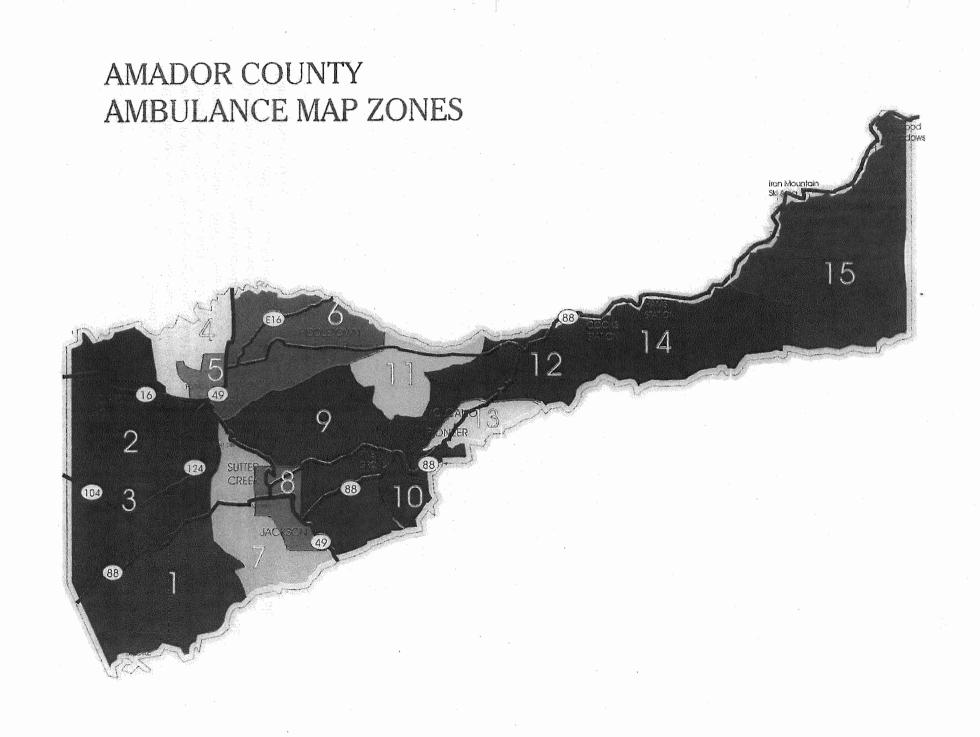
Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

American Legion Ambulance was "Grandfathered" into Amador County as the sole provider of ALS and emergency ground ambulance services due to no changes in manner and scope of service to the area other than upgrading to LALS and then ALS services in the early 1990s. In November, 1999, the Amador County Board of Supervisors approved a county ambulance ordinance that further defined "emergency ground ambulance services" to reflect the maximum level of exclusivity allowed according recent court decisions. These court cases, "Schaefer v. San Bernadino County" and "Redwood Empire v Sonoma County" define "emergency ambulance services" as found in the Health and Safety Code, Division 2.5, Section 1797.85, to include all ambulance services.



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:

Mountain-Valley EMS Agency - Alpine County

Area or subarea (Zone) Name or Title:

Alpine County

Name of Current Provider(s):

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

The current provider of emergency ground ambulance services in this zone is Alpine County EMS. This provider has provided emergency ambulance services without interruption since June, 1998. Alpine County continues to depend upon mutual aid response for ALS ambulance services. ALS ambulances are dispatched from surrounding counties and either rendezvous with the Alpine County EMS ambulance, arrive on scene, or be canceled.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

There is no ALS or emergency ambulance service exclusivity in Alpine County.

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

None

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

Not applicable.

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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Calaveras County

Area or subarea (Zone) Name or Title:

South Zone

Name of Current Provider(s):

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

American Legion Post Number 108 began providing service in the South Zone on July 1, 2005, after winning a competitive bid process.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

The Mountain-Valley EMS Agency has adopted exclusive operating areas for ambulance services as defined below. Approval was received from the State of California EMS Authority in 2004 to establish EOAs in Calaveras County.

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85): 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.)

Definition of Terms

"All Ambulance Services" is defined as the activity, business or service; for hire, profit, or otherwise; of transporting one or more persons by ambulance on or in any of the streets, roads, highways, alleys, or any public ways or places in Calaveras County. This definition adopts the premise that Ambulance Services are considered to be "emergency ambulance services" as defined in Section 1797.85, Division 2.5 of the Health and Safety Code. Ambulance Services include all services requiring the use of a ground Ambulance in Calaveras County during any of the following circumstances: (1) All requests for ambulance services transmitted through the Authorized EMS Dispatch Center; (2) Requests for Ambulance Service made directly to the ambulance service from a seven digit telephone call without going through an authorized 9-1-1/PSAP; (3) All ground Interfacility Transfers requiring the services of an ALS, BLS, or Critical Care Transport (CCT) ambulance; or (4) Any other request for service requiring a ground ambulance response, including Basic Life Support, Advanced Life Support, or Critical Care

Transport. This definition shall not apply to Ambulance Services that transport patients to or through Calaveras County from an area outside Calaveras County.

"Interfacility Transfer" is defined as all ambulance transports originating from an Acute Care Facility in Calaveras County.

"Scene Call" is defined as All Ambulance Services originating within Calaveras County not defined as Interfacility Transfers.

Types of Exclusivity Adopted for Calaveras County EOAs

- 1. <u>Interfacility Transfers</u> The right to provide All Ambulance Services for all types of Interfacility Transfers originating from the Acute Care Facility (or any future Acute Care Facility) in Calaveras County is a right that is shared amongst the providers awarded exclusive rights to provide Ambulance Services within a Zone or Zones within Calaveras County. This shared right is independent of the Ambulance Zone within which the Acute Care Facility is geographically located.
- 2. Scene Calls The right to provide All Ambulance Services for scene calls is awarded to providers for a specific Ambulance Zone. Exceptions to this exclusivity include air ambulance services; the conditions specified in the AGENCY Special Events Policy #570.71; and during declared disasters, or events requiring Medical Mutual Aid Coordination authorized by the Authorized EMS Dispatch Center, MHOAC, or AGENCY, with the exception of Interfacility Transfers within their respective zones. The second level of exclusivity is for all Authorized Ambulance Providers to be eligible to share Interfacility Transfers originating from Mark Twain St. Joseph's Hospital.

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

Competitive Bid Process

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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency – Calaveras County

Area or subarea (Zone) Name or Title:

East Zone

Name of Current Provider(s):

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

As of July 1, 2005, the provider of ALS service in the east zone is Ebbetts Pass Fire District. They earned the right to provide service through a competitive bid process.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

The Mountain-Valley EMS Agency has adopted exclusive operating areas for ambulance services as defined below. Approval was received from the State of California EMS Authority in 2004 to establish EOAs in Calaveras County

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85):

Include type of exclusivity (Emergency Ambulance, ALS, LALS, or combination) and operational definition of exclusivity (i.c., 911 calls only, all emergencies, all calls requiring emergency Ambulance service, etc.)

Definition of Terms

"All Ambulance Services" is defined as the activity, business or service; for hire, profit, or otherwise; of transporting one or more persons by ambulance on or in any of the streets, roads, highways, alleys, or any public ways or places in Calaveras County. This definition adopts the premise that Ambulance Services are considered to be "emergency ambulance services" as defined in Section 1797.85, Division 2.5 of the Health and Safety Code. Ambulance Services include all services requiring the use of a ground Ambulance in Calaveras County during any of the following circumstances: (1) All requests for ambulance services transmitted through the Authorized EMS Dispatch Center; (2) Requests for Ambulance Service made directly to the ambulance service from a seven digit telephone call without going through an authorized 9-1-1/PSAP; (3) All ground Interfacility Transfers requiring the services of an ALS, BLS, or Critical Care Transport (CCT) ambulance; or (4) Any other request for service requiring a ground

ambulance response, including Basic Life Support, Advanced Life Support, or Critical Care Transport. This definition shall not apply to Ambulance Services that transport patients to or through Calaveras County from an area outside Calaveras County.

"Interfacility Transfer" is defined as all ambulance transports originating from an Acute Care Facility in Calaveras County.

"Scene Call" is defined as All Ambulance Services originating within Calaveras County not defined as Interfacility Transfers.

Types of Exclusivity Adopted for Calaveras County EOAs

- 1. <u>Interfacility Transfers</u> The right to provide All Ambulance Services for all types of Interfacility Transfers originating from the Acute Care Facility (or any future Acute Care Facility) in Calaveras County is a right that is shared amongst the providers awarded exclusive rights to provide Ambulance Services within a Zone or Zones within Calaveras County. This shared right is independent of the Ambulance Zone within which the Acute Care Facility is geographically located.
- 2. Scene Calls The right to provide All Ambulance Services for scene calls is awarded to providers for a specific Ambulance Zone. Exceptions to this exclusivity include air ambulance services; the conditions specified in the AGENCY Special Events Policy #570.71; and during declared disasters, or events requiring Medical Mutual Aid Coordination authorized by the Authorized EMS Dispatch Center, MHOAC, or AGENCY, with the exception of Interfacility Transfers within their respective zones. The second level of exclusivity is for all Authorized Ambulance Providers to be eligible to share Interfacility Transfers originating from Mark Twain St. Joseph's Hospital.

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

Competitive bid process.

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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Calaveras County

Area or subarea (Zone) Name or Title:

North Zone.

Name of Current Provider(s):

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

American Legion Ambulance began providing service in the north zone on July 1, 2005. They obtained the right to provide exclusive service by being the winning bidder in a competitive bid process.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

The Mountain-Valley EMS Agency has adopted exclusive operating areas for ambulance services as defined below. Approval was received from the State of California EMS Authority in 2004 to establish EOAs in Calaveras County.

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85):

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.)

Definition of Terms

"All Ambulance Services" is defined as the activity, business or service; for hire, profit, or otherwise; of transporting one or more persons by ambulance on or in any of the streets, roads, highways, alleys, or any public ways or places in Calaveras County. This definition adopts the premise that Ambulance Services are considered to be "emergency ambulance services" as defined in Section 1797.85, Division 2.5 of the Health and Safety Code. Ambulance Services include all services requiring the use of a ground Ambulance in Calaveras County during any of the following circumstances: (1) All requests for ambulance services transmitted through the Authorized EMS Dispatch Center; (2) Requests for Ambulance Service made directly to the ambulance service from a seven digit telephone call without going through an authorized 9-1-1/PSAP; (3) All ground Interfacility Transfers requiring the services of an ALS, BLS, or Critical Care Transport (CCT) ambulance; or (4) Any other request for service requiring a ground

ambulance response, including Basic Life Support, Advanced Life Support, or Critical Care Transport. This definition shall not apply to Ambulance Services that transport patients to or through Calaveras County from an area outside Calaveras County.

"Interfacility Transfer" is defined as all ambulance transports originating from an Acute Care Facility in Calaveras County.

"Scene Call" is defined as All Ambulance Services originating within Calaveras County not defined as Interfacility Transfers.

Types of Exclusivity Adopted for Calaveras County EOAs

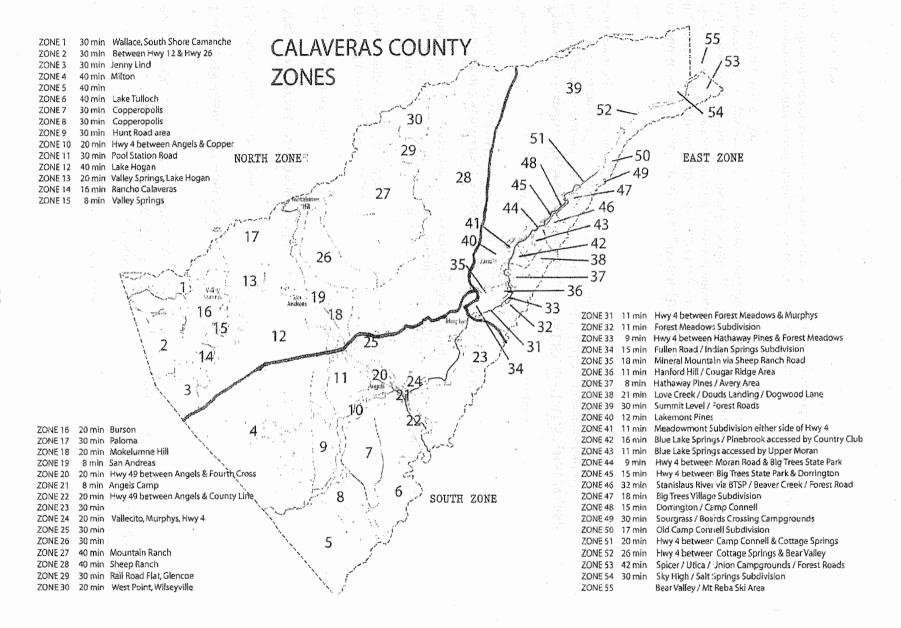
- 1. <u>Interfacility Transfers</u> The right to provide All Ambulance Services for all types of Interfacility Transfers originating from the Acute Care Facility (or any future Acute Care Facility) in Calaveras County is a right that is shared amongst the providers awarded exclusive rights to provide Ambulance Services within a Zone or Zones within Calaveras County. This shared right is independent of the Ambulance Zone within which the Acute Care Facility is geographically located.
- 2. Scene Calls The right to provide All Ambulance Services for scene calls is awarded to providers for a specific Ambulance Zone. Exceptions to this exclusivity include air ambulance services; the conditions specified in the AGENCY Special Events Policy #570.71; and during declared disasters, or events requiring Medical Mutual Aid Coordination authorized by the Authorized EMS Dispatch Center, MHOAC, or AGENCY, with the exception of Interfacility Transfers within their respective zones. The second level of exclusivity is for all Authorized Ambulance Providers to be eligible to share Interfacility Transfers originating from Mark Twain St. Joseph's Hospital.

Method to achieve Exclusivity, if applicable (HS1797.224):

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 processed used to select provider or providers.

Competitive bid process.



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

Local EMS Agency or County Name:

Mountain-Valley EMS Agency - Mariposa County

Area or subarea (Zone) Name or Title:

All of Mariposa County.

Name of Current Provider(s):

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

The current provider of emergency ground ambulance services and Advanced Life Support Services in Mariposa County is Mercy Medical Transport (MMT). MMT has provided ambulance services in Mariposa County since January 1, 1994.

Statement of Exclusivity, Exclusive or non-Exclusive (HS1797.6):

Include intent of local EMS Agency and Board action.

There is no ALS or emergency ambulance service exclusivity in Mariposa County.

Type of Exclusivity, "Emergency Ambulance", "ALS", or "LALS" (HS1797.85):

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.)

None

Method to achieve Exclusivity, if applicable (HS1797.224):

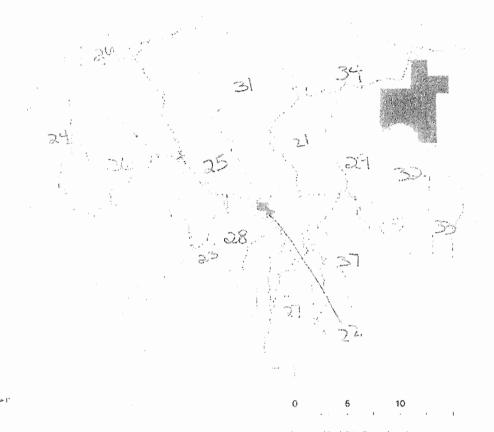
If grandfathered, pertinent facts concerning changes in scope and manner of service. Description of current provider including brief statement of uninterrupted service with no changes to scope and manner of service to zone. Include chronology of all services entering or leaving zone, name or ownership 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 processed used to select provider or providers.

Not applicable

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Mariposa County Fire Response Zones



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EMERGENCY MEDICAL SERVICES AUTHORITY

1930 9th STREET SACRAMENTO, CA 95811-7043 (916) 322-4336 FAX (916) 324-2875



November 29, 2010

Steve Andriese, EMS Administrator Mountain-Valley EMS Agency 1101 Standiford Avenue, #D1 Modesto, CA 95350

Dear Mr. Andriese:

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

Standard 1.22 - Reporting of Abuse - In your 2008 EMS plan update you stated that abuse policies need to be developed. Please continue working towards the development of policies for the reporting of child and elder abuse and suspected SIDS deaths and provide your progress for meeting this standard in your next annual update.

Standard 4.05 - Response Time Standards - In your 2008 EMS plan update your objective was to create a mechanism to measure response times from initial contact with each county PSAP to arrival on scene. Please provide your progress for meeting this standard in your next annual update.

Standard 8.07 - Disaster Communications - In your 2008 EMS plan update you stated that a countywide interoperability project was in progress for Calaveras County. In your next update please show progress made for an integrated/interoperability communications system for all counties.

Trauma System Status Report

The EMS Authority approved Mountain Valley's last Trauma System Status Report in July 2009 and requested your next report be submitted with the 2010 submission of your EMS Plan Update. In accordance with the regulations, Section 100253, "The local EMS agency shall submit a trauma system status report as part of its annual EMS Plan update." The last Trauma System Status Report from Mountain Valley is dated 2007. While in the past the Trauma System Status Reports have been requested separate from the EMS Plan Updates, the EMS Authority is working with all local EMS agencies to submit both documents on the same schedule. Please expedite the submission of Mountain Valley's Trauma System Status Report.

Steve Andriese November 29, 2010 Page 2

Your annual update will be due on November 29, 2011. If you have any questions regarding the plan review, please call Sandy Salaber at (916) 322-4336, extension 423.

Sincerely,

Daniel R. Smiley Interim Director

DRS:ss