

**EMERGENCY MEDICAL SERVICES AUTHORITY**

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November 5, 2015

Richard Murdock, Executive Director  
Mountain Valley EMS Agency  
1101 Standiford Avenue, Suite D1  
Modesto, CA 95350

Dear Mr. Murdock:

This letter is in response to the 2011 Mountain Valley EMS Plan Update submission to the EMS Authority.

**I. Introduction and Summary:**

The EMS Authority has concluded its review of Mountain Valley EMS Agency's 2011 EMS Plan Update and is approving the plan as submitted.

**II. History and Background:**

The EMS Authority is responsible for the review of EMS Plans and making a determination on the approval or disapproval of the plan based on compliance with statute and the standards and guidelines established by the EMS Authority consistent with Health & Safety Code § 1797.105(b).

Additionally, California Health and Safety (H&S) Code § 1797.254 states:

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

Historically, we have received EMS Plan documentation from Mountain Valley EMS Agency in the following years: 1996, 1999-2002, 2004, 2005, 2007-2010 and, most current, its 2011 plan update submission. Mountain Valley EMS Agency received its last Five-Year EMS Plan (partial) approval for its 2005 submission and its last annual plan update approval for its 2010 submission.

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

Following are comments related to Mountain Valley EMS Agency's 2011 EMS Plan Update. Areas that indicate the plan submitted is concordant and consistent with applicable guidelines or regulations and H&S Code § 1797.254 and the EMS system components identified in H&S Code § 1797.103 are indicated below:

A.       Approved       Not Approved      System Organization and Management

#### 1. System Assessment Forms

- Standard 1.22 (Reporting of Abuse):

The objective is to draft a policy for suspected SIDS deaths and the timeframe for meeting the objective is referenced as long-range, whereas Table 1 references short-range. In your next plan submission please provide an update on the progress for developing the policy while also ensuring the timeframes on Table 1, System Assessment Forms and/or Progress/Objective Forms are consistent.

- Standard 4.05 (Response Time Standards):

The objective is to create a mechanism to measure response times from receipt of call, to primary PSAP, to arrival on-scene. In your next plan submission, please provide an update on the progress for developing response time standards.

- Standard 5.06 (Response Time Standards):

The objective is to work with hospitals to develop a standardized hospital evacuation plan. In your next plan submission, please provide an update on the progress for developing the plan.

2. Progress/Objectives Assessment / Table 1 (Minimum Standards and Recommended Guidelines)

- Standard 1.09 (Inventory of Resources):

The status indicates not meeting the established minimum standard. Based on the information provided in the Progress/Objectives Assessment, it has been determined that the minimum standard is now met. In your next plan submission, please change the System Assessment Forms, Progress/Objectives Assessment and Table 1 to reflect this change.

3. Table 2 (Minimum Standards and Recommended Guidelines)

- Expenses:

The total expense amount identified in the budget does not accurately reflect the sum of the expenses listed. In your next plan submission, please ensure the expense amounts are correct.

- Organizational Charts:

The organizational charts were not included as part of the plan submission. In your next plan submission, please ensure the chart is included as part of Table 2.

- B.            Staffing/Training
- C.            Communications
- D.            Response/Transportation

1. Ambulance Zones

- Please see the attachment on the EMS Authority's determination of the exclusivity of Mountain Valley EMS Agency's ambulance zones.

E.            Facilities/Critical Care

1. Table 6 (Facilities/Critical Care)

- The number of EMS patients meeting trauma triage who were not at a trauma center is reflected as 'unknown'. In your next submission plan, please provide the requested data.
- The data provided for basic emergency services is inconsistent with the information presented for the facilities in Table 9. In the next plan submission, please ensure the data contained in both tables is consistent.

2. Table 9 (Facilities)

- All service categories are checked for each facility. In the next plan submission, please check only one service category, as applicable. This information should be referenced in Table 6.

F.            Data Collection/System Evaluation

G.            Public Information and Education

1. Table 10 (Approved Training Program)

- The cost of the EMT program is not identified for Murphy's Fire Protection District. In the next plan submission, please include the associated cost.
- The costs of the refresher EMT programs are not identified for Ceres Adult Education-ROP and Abrams College. In the next submission, please include the associated costs.

H.            Disaster Medical Response

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**IV. Conclusion:**

Based on the information identified, Mountain Valley EMS Agency may implement areas of the 2011 EMS Plan Update that have been approved. Pursuant to H&S Code § 1797.105(b):

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

**V. Next Steps:**

Mountain Valley EMS Agency's annual EMS Plan Update will be due on November 5, 2016. If you have any questions regarding the plan review, please contact Jeff Schultz, EMS Plans Coordinator, at (916) 431-3688.

Sincerely,

A handwritten signature in black ink, appearing to read "Daniel R. Amley". The signature is written in a cursive style and includes a small flourish at the end.

Howard Backer, MD, MPH, FACEP  
Director

Attachment



## A. SYSTEM ORGANIZATION AND MANAGEMENT

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

**SYSTEM ORGANIZATION AND MANAGEMENT (continued)**

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



## B. STAFFING/TRAINING

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

**C. COMMUNICATIONS**

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

## D. RESPONSE/TRANSPORTATION

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

**E. FACILITIES/CRITICAL CARE**

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

**F. DATA COLLECTION/SYSTEM EVALUATION**

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

**G. PUBLIC INFORMATION AND EDUCATION**

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

## H. DISASTER MEDICAL RESPONSE

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



Standard	EMSA Requirement	Meets Minimum Req.	Short Range (one year or less)	Long Range (more than one year)	Progress	Objective
1.09	Inventory of Resources	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Agency is working with Stanislaus County PH in utilization and tracking of inventory through Sydion iCam (Inventory resource tracking/ordering). An inventory of resources has been created and is available to Agency staff.	Update the resource directories periodically
1.22	Reporting of Abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Agency has developed Policy 560.10 (Reporting of child and elder abuse) and is working on a draft for suspected SIDS death.	Revise as needed to ensure policy meets system needs.
4.05	Response Time Standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Agency has outsourced with data collection and analysis service to collect unadjusted response time data from CAD in order to measure contract response time compliance. Working towards mechanism to collect first responder response times.	Create mechanism in Mariposa and Stanislaus to measure response times from receipt of call to primary PSAP to arrival on scene.
5.06	Hospital Evacuation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Agency needs to work with local hospitals to develop a standardized hospital evacuation	Work with hospitals to standardize hospital evacuation plans
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		



**TABLE 2: SYSTEM RESOURCES AND OPERATIONS**

**System Organization and Management**

Reporting Year: **2011**

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

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

County: **Alpine**

- A. Basic Life Support (BLS)
- B. Limited Advanced Life Support (LALS)
- C. Advanced Life Support (ALS) 100%

County: **Amador**

- A. Basic Life Support (BLS)
- B. Limited Advanced Life Support (LALS)
- C. Advanced Life Support (ALS) 100%

County: **Calaveras**

- A. Basic Life Support (BLS)
- B. Limited Advanced Life Support (LALS)
- C. Advanced Life Support (ALS) 100%

County: **Mariposa**

- A. Basic Life Support (BLS)
- B. Limited Advanced Life Support (LALS)
- C. Advanced Life Support (ALS) 100%

County: **Stanislaus**

- A. Basic Life Support (BLS)
- B. Limited Advanced Life Support (LALS)
- C. Advanced Life Support (ALS) 100%

2. Type of agency
- a) Public Health Department
  - b) County Health Services Agency
  - c) Other (non-health) County Department
  - d) Joint Powers Agency**
  - e) Private Non-Profit Entity
  - f) Other: \_\_\_\_\_

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

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

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

**Table 2 - System Organization & Management (cont.)**

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

**Table 2 - System Organization & Management (cont.)**

**5. EXPENSES**

Salaries and benefits (All but contract personnel)	\$	908,605.
Contract Services (e.g. medical director)		169,845.
Operations (e.g. copying, postage, facilities)		167,662
Travel		22,400
Fixed assets		0
Indirect expenses (overhead)		_____
Ambulance subsidy		_____
EMS Fund payments to physicians/hospital		_____
Dispatch center operations (non-staff)		_____
Training program operations		_____
Other: Pass Through		57
Other: _____		_____
Other: _____		_____
<b>TOTAL EXPENSES</b>	<b>\$</b>	<b>1,325,515</b>

**Table 2 - System Organization & Management (cont.)**

**6. SOURCES OF REVENUE**

Special project grant(s) [from EMSA]		
Preventive Health and Health Services (PHHS) Block Grant	\$	_____
Office of Traffic Safety (OTS)		_____
State general fund		359,301
County general fund		_____
Other local tax funds (e.g., EMS district)		_____
County contracts (e.g. multi-county agencies)		297,270
Certification fees		28,000
Training program approval fees		1,500
Training program tuition/Average daily attendance funds (ADA)		_____
Job Training Partnership ACT (JTPA) funds/other payments		_____
Base hospital application fees		_____
Trauma center application fees		_____
Trauma center designation fees		150,000
Pediatric facility approval fees		_____
Pediatric facility designation fees		_____
Other critical care center application fees (SRC x 3)		15,000
Type: STEMI Receiving Center (SRC) Fees		
Other critical care center designation fees (SRC x 3)		48,000
Type: STEMI Receiving Center		
Ambulance service/vehicle fees		305,994
Contributions		_____
EMS Fund (SB 12/612)		_____
Other grants: HPP LEMSA Coordinator		65,000
Other fees: Workshops/Misc		23,950
Other (specify): Pass Thru		57,000
Other (specify): Fund Interest		5,000
<b>SUBTOTAL</b>		
Net Income (Amount of Operating Reserve Required to Balance Budget)		<u>-30,500</u>
<b>TOTAL REVENUE</b>	\$	<b>1,325,515</b>

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

**Table 2 - System Organization & Management (cont.)**

**7. Fee structure**

We do not charge any fees

Our fee structure is:

First responder certification	\$	30.
EMS dispatcher certification		_____
EMT-I certification		105.
EMT-I recertification		67.
EMT-defibrillation certification		_____
EMT-defibrillation recertification		_____
AEMT certification		_____
AEMT recertification		_____
EMT-P accreditation		75.
Mobile Intensive Care Nurse/ Authorized Registered Nurse (MICN/ARN) certification		50.
MICN/ARN recertification		30.
EMT-I training program approval		300.
AEMT training program approval		_____
EMT-P training program approval		5,000.
MICN/ARN training program approval		150.
Base hospital application		_____
Base hospital designation		_____
Trauma center application		25,000.
Trauma center designation		75,000.
STEMI Receiving Center application		5,000.
STEMI Receiving Center designation		30,000.
Other critical care center application Type: Air Ambulance Authorization		5,000.
Other critical care center designation Type: Special Event Coverage		75.
Ambulance service license	(Emergency)	5.35/Transport
	(Non-Emergency)	2.00/Transport
Ambulance vehicle permits		_____

Table 2 - System Organization & Management (cont.)

CATEGORY	ACTUAL TITLE	FTE POSITIONS (EMS ONLY)	TOP SALARY BY HOURLY EQUIVALENT	BENEFITS (% of Salary)	COMMENTS
EMS Admin./Coord./Director	Executive Director	1 FTE	46.06	34%	Effective 07/06/11
Asst. Admin./Admin. Asst./Admin. Mgr.	Deputy Director	0.7 FTE	37.48	34%	Effective 03/01/12
ALS Coord./Field Coord./ Training Coordinator	Certification and Training/Communications Coordinator	0.3 FTE	37.48	34%	Effective 03/01/12
Program Coordinator/ Field Liaison (Non-clinical)	Transportation Coordinator	1 FTE	31.05	34%	
Trauma Coordinator	Trauma/Medical Coordinator	0.3 FTE	43.63	N/A	
Medical Director	Medical Director	0.2 FTE	120.20	N/A	July 2011 – June 2012
Disaster Medical Planner	Disaster Coordinator	0.1 FTE	53.03	34%	Effective 08/29/11
Field Liaison	Field Liaison	1 FTE	23.57	34%	Effective 07/09/11

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.