

EMERGENCY MEDICAL SERVICES AUTHORITY

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February 22, 2018

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

Dear Ms. Mangano:

This letter is in response to San Benito County's 2016 EMS Plan Update submission to the EMS Authority on September 28, 2017.

I. Introduction and Summary:

The EMS Authority has concluded its review of San Benito County's 2016 EMS Plan Update and is approving the plan as submitted.

II. History and Background:

San Benito County received its last full plan approval for its 2015 plan submission, and its last annual plan update for its 2012 plan submission.

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

- 1999
- 2001-2002
- 2004
- 2007
- 2008
- 2010
- 2012
- 2015

Health and Safety Code (HSC) § 1797.254 states:

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

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

III. Analysis of EMS System Components:

Following are comments related to San Benito County's 2016 EMS Plan Update. Areas that indicate the plan submitted is concordant and consistent with applicable guidelines or regulations, HSC § 1797.254, and the EMS system components identified in HSC § 1797.103, are indicated below:

- | | Approved | Not Approved | |
|----|-------------------------------------|--------------------------|---|
| A. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>System Organization and Management</u> |
| B. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Staffing/Training</u> |
| C. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Communications</u> |
| D. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Response/Transportation</u> |

- Table 5

In the next plan submission, please discontinue use of the two documents submitted as Table 5, and use the most current table available on the EMS Authority's EMS Planning webpage.
<https://emsa.ca.gov/EMS-Planning/>

- Ambulance Zones

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

- | | | | |
|----|-------------------------------------|--------------------------|--|
| E. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Facilities/Critical Care</u> |
| F. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Data Collection/System Evaluation</u> |
| G. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Public Information and Education</u> |
| H. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Disaster Medical Response</u> |

IV. Conclusion:

Based on the information identified, San Benito County's 2016 EMS Plan Update is approved.

Pursuant to HSC § 1797.105(b):

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

V. Next Steps:

San Benito County's 2017 EMS Plan Update will be due on or before February 28, 2019. If you have any questions regarding the plan review, please contact Ms. Lisa Galindo, EMS Plans Coordinator, at (916) 431-3688.

Sincerely,



Howard Backer, MD, MPH, FACEP
Director

Enclosure

San Benito County
Office of Emergency Services
Emergency Medical Services Division



EMS PLAN ANNUAL UPDATE

January 1, 2016 - December 31, 2016

INTRODUCTION

The San Benito County Emergency Medical Services Division of the Office of Emergency Services serves as the lead agency for the countywide Emergency Medical Services program. EMS is responsible for coordinating all system participants within the County and is also responsible for planning, implementing, monitoring, and evaluating the local EMS system. This includes establishing policies addressing the financial aspects of system operation, and making provisions for collection, analysis, and dissemination of EMS related data.

San Benito County encompasses an area of 1,391 square miles with a resident population of approximately 60,000. The region ranges from remote rural unincorporated communities to populated urban communities, with the City of Hollister being the County Seat.

This document is the EMS Plan annual update providing relevant information to the time period of January 1, 2016 - December 31, 2016. No major changes have occurred since the EMS Plan was approved last year. It is my pleasure to present this on behalf of San Benito County.



Sincerely,

Kris Mangano

Kris Mangano
EMS Coordinator

A. SYSTEM ORGANIZATION AND MANAGEMENT

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

SYSTEM ORGANIZATION AND MANAGEMENT (continued)

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

B. STAFFING/TRAINING

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

C. COMMUNICATIONS

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

D. RESPONSE/TRANSPORTATION

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

RESPONSE/TRANSPORTATION (continued)

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

E. FACILITIES/CRITICAL CARE

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

F. DATA COLLECTION/SYSTEM EVALUATION

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

G. PUBLIC INFORMATION AND EDUCATION

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