

EMERGENCY MEDICAL SERVICES AUTHORITY

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March 29, 2019

Mr. Larry Karsteadt, EMS Administrator
North Coast EMS Agency
3340 Glenwood Avenue
Eureka, CA 95501

Dear Mr. Karsteadt:

This letter is in response to North Coast EMS Agency's 2018 EMS Plan Update submission to the EMS Authority on February 11, 2019.

I. Introduction and Summary:

The EMS Authority has concluded its review of North Coast EMS Agency's 2018 EMS Plan Update and is approving the plan as submitted.

II. History and Background:

North Coast EMS Agency received its last full plan approval for its 1999 plan submission, and its last annual plan update for its 2017 plan submission.

Historically, we have received EMS Plan submissions from North Coast EMS Agency for the following years:

- 1999
- 2003
- 2005-2007
- 2009-2012
- 2014
- 2016-2017

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 North Coast EMS Agency's 2018 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> |

1. Ambulance Zones

- Based on the documentation provided, please find enclosed the EMS Authority's determination of the exclusivity of North Coast EMS Agency'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, North Coast EMS Agency's 2018 EMS Plan Update is approved.

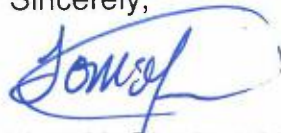
Pursuant to HSC § 1797.105(b):

“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:

North Coast EMS Agency's next annual EMS Plan Update will be due on or before March 31, 2020. If you have any questions regarding the plan review, please contact Ms. Lisa Galindo, EMS Plans Coordinator, at (916) 431-3688.

Sincerely,



Tom McGinnis, EMT-P
Chief, EMS Systems Division

Enclosure

Regional EMS Plan Annual Update Executive Summary

North Coast EMS has served as the EMS agency since 1974 and is the designated local EMS agency for the Counties of Del Norte, Humboldt and Lake.

After a public review period, the North Coast EMS Joint Powers Governing Board approved the enclosed Regional EMS Plan on February 7, 2019.

Since the last EMS Plan was approved, the following progress highlights has occurred:

1. The 2016 Regional EMS Plan and 2018 Regional Trauma Plan were approved by EMSA.
2. Designations of St. Joseph Hospital as Level III, Mad River Community Hospital as a Level IV with Surgery, Sutter-Coast Hospital as a Level IV and Sutter-Lakeside Hospital as a Level IV were continued, as were the STEMI Receiving Center designation of St. Joseph Hospital and Emergency Department Approved for Pediatric designations for all seven hospitals. Site surveys were conducted at two of the EDAPs.
3. Initiated a process to adopt Annual Trauma Center Fees to cover costs. A Governing Board approved interim fee of \$5,000 was paid by all four trauma centers.
4. Initiated process to address concerns brought to our attention by Lake County.
5. Lake County initiated a process to research, evaluate and negotiate LEMSA options.
6. Continued or activated certifications, accreditations or authorizations for EMTs, paramedics and MICNs.
7. Established policies to approve Public Safety training programs and approve use of Naloxone pursuant to state regulation; several programs are now approved.
8. Continued training program approvals for a total of First Responder, EMT, Paramedic, FTO, EMD and MICN and Continuing Education programs.
9. Continued approvals for ALS providers, transporting ALS providers, one fixed winged IFT provider. The region is served by 53 fire services.
10. Initiated a process to execute a new three-county Aero Medical contract with REACH Medical Holding LLC.
11. Facilitated pediatric focused training in the region and at UCD-MC for North Coast EMS stakeholders and initiated a process with UCD MC to host a second fully funded SIM Center training in Sacramento for North Coast EMS ED physicians and others.
12. Convened the Humboldt County Trauma Advisory Committee (TAC), helped coordinate the Lake County TAC, convened the Humboldt County Cardiac Coordinating Committee meetings and participated in Medical Advisory and EMCC meetings.

13. Initiated a process to hire a new Regional Medical Director and new Exclusive Operating Area Oversight Officer.
14. Verified that the sale of Arcata-Mad River Ambulance to Arcata-Mad River Ambulance LLC continued to eligibility for EOA grandfathering. EMSA approved that eligibility.
15. Prepared updates to 5150 Handbook (used by the Hospital Council of Northern and Central California), finalized the medical clearance form and prepared county specific training for law enforcement, EMS, fire and behavioral health.
16. Participated in EMSA required EMSA/LEMSA meetings and submitted required General Fund quarterly reports.
17. Continued participation in the federal HRSA EMS for Children Regionalization grant with UC – Davis Medical Center (UCDMC) to continue in the north coast region and expanded the program to the S-SV EMS region.
18. Purchased and distributed over \$25,000 of pediatric and disaster training programs for all three counties.
19. Continued the CDPH HPP Disaster grant.
20. Contracted on an emergency basis with the Lake County Disaster Liaison to assist during the Mendocino Complex Fires. Continued to contract with the same individual to serve in that capacity and hired a new Humboldt County Disaster Liaison. Staff also assisted during the fires.
21. Submitted the North Coast EMS Quality Improvement Plan update (with this Plan) and the required Core Measures report to EMSA.
22. Continued use of ImageTrend e-PCR program for providers and approved utilization of two other programs for use within the region. All providers are successfully transmitting data to ICEMA.
23. Resolved persistent issues with the Lancet Trauma 1 Trauma Registry at both Level IV trauma centers and are able to transmit data to ICEMA. Initiated training of trauma contractor to ensure the successful transmission of data from the two new trauma centers in Humboldt County.
24. Established a new and more streamline policy and protocol approval process.
25. Initiated a process to fund and participate in the Statewide C.A.R.E.S. project.
26. Submitted APOT reports to EMSA.
27. Expanded the Public Safety, First Responder and EMT scope of practice to include Epinephrine for anaphylaxis.
28. Expanded the Paramedic optional scope of practice to include i-GEL to replace pediatric IT. Initiated process to also add Ketamine and IV Tylenol to help with the national drug shortage.
29. Established policy to ensure that providers plan for anticipated drug shortages and verified that neither we nor the EMSA would take disciplinary action against a paramedic who might be unable to follow a protocol because of the drug shortage.
30. Participated in the Wellness Roadmap initiative in Lake County to reduce the number of repeat users of the EMS system through data integration.
31. Initiated a process to evaluate a new HIE grant opportunity with Redwood Med Net.

32. Evaluated and supported an AEMT proposal from Del Norte Ambulance.

A. SYSTEM ORGANIZATION AND MANAGEMENT

xp = partially met

| Last Updated 3-7-19 | Does not meet standard | Meets minimum standard | Meets recommended standard | Short-range Plan | Long-range Plan |
|---|------------------------|------------------------|----------------------------|------------------|-----------------|
| Agency Administration | | | | | |
| 1.01 LEMSAs Structure | | X | | x | x |
| 1.02 LEMSAs Mission | | X | | x | x |
| 1.03 Public Input | | X | | x | x |
| 1.04 Medical Director | | X | x | x | x |
| Planning Activities | | | | | |
| 1.05 System Plan | | X | | x | x |
| 1.06 Annual Plan Update | | X | | x | |
| 1.07 Trauma Planning* | | X | x | x | x |
| 1.08 ALS Planning* | | X | | x | x |
| 1.09 Inventory of Resource | | X | | x | x |
| 1.10 Special Populations | | X | x | x | x |
| 1.11 System Participants | | X | x | x | x |
| Regulatory Activities | | | | | |
| 1.12 Review and Monitoring | | x | | x | x |
| 1.13 Coordination | | X | | x | x |
| 1.14 Policy & Procedures Manual | | x | | x | x |
| 1.15 Compliance w/ Policies | | x | | x | x |
| System Financing | | | | | |
| 1.16 Funding Mechanism | | X | | x | x |
| Medical Direction | | | | | |
| 1.17 Medical Direction* | | X | | x | x |
| 1.18 QA/QI | | X | x | x | x |
| 1.19 Policies, Procedures, Protocols | | x | x | x | x |
| 1.20 DNR Policy | | X | | x | x |
| 1.21 Determin. of Death | | X | | x | x |
| 1.22 Reporting of Abuse | | X | | x | x |
| 1.23 Interfacility Transfer | | X | | x | |
| Enhanced Level: Advanced Life Support | | | | | |
| 1.24 ALS Systems | | X | x | x | x |
| 1.25 On-Line Med. Dir. | | X | x | x | x |
| Enhanced Level: Trauma Care System | | | | | |
| 1.26 Trauma System Plan | | X | | x | x |
| Enhanced Level: Pediatric Emergency Medical and Critical Care System | | | | | |
| 1.27 Pediatric System Plan | | X | | x | x |
| Enhanced Level: Trauma Care System | | | | | |
| 1.28 EOA Plan | | X | | x | x |

B. STAFFING/TRAINING

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

C. COMMUNICATIONS

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

| | | | | | |
|--------------------------|--|---|--|---|---|
| 3.10 Integrated Dispatch | | X | | x | x |
|--------------------------|--|---|--|---|---|

D. RESPONSE/TRANSPORTATION

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

D. FACILITIES/CRITICAL CARE

| Does not currently meet standard | Meets minimum standard | Meets recommended standard | Short-range Plan | Long-range Plan |
|----------------------------------|------------------------|----------------------------|------------------|-----------------|
|----------------------------------|------------------------|----------------------------|------------------|-----------------|