



California EMS System Core Quality Measures Report Calendar Year 2024

Emergency Medical Services Authority
California Health and Human Services Agency
June 2025
Elizabeth Basnett, Director
Hernando Garzon, MD, Chief Medical Officer



ACKNOWLEDGEMENTS

This report was prepared by the California Emergency Medical Services Authority staff:

Audrey Vong, Quality Improvement Coordinator

Adrienne Kim, Data Technologies Unit Manager

This report was reviewed and approved by the California Emergency Medical Services Authority Executives:

Elizabeth Basnett, Director

Hernando Garzon, MD, Chief Medical Officer

Gabrielle Santoro, Chief Deputy Director

Kevin Chan, Health Information and Data Technologies Branch Chief

If you have any questions or comments about this report, please contact:

Audrey Vong
Quality Improvement Coordinator
EMSData@emsa.ca.gov

TABLE OF CONTENTS

Acknowledgements	2
Table of Contents	3
Background	5
Methodology	6
Limitations and Challenges	7
Tables and Charts Generated from Core Quality Measures Reports	9
LEMSAs Reporting Data for Core Quality Measures 2009-2024	11
LEMSA Participation in the 2024 Core Quality Measures Report	12
Core Quality Measures List for CY 2024	14
2024 Core Quality Measures Aggregate Results for California	15
TRA-2: Transport of Trauma Patients to a Trauma Center	16
HYP-1: Treatment Administered for Hypoglycemia	21
STR-1: Prehospital Screening for Suspected Stroke Patients	26
PED-3: Respiratory Assessment for Pediatric Patients	28
Comparison of Core Quality Measure Results	32
Appendix: Responses from LEMSAs for the 2024 Core Quality Measures Report	33
Alameda County EMS Agency	34
Central California EMS Agency	35
Coastal Valleys EMS Agency	36
El Dorado County EMS Agency	37
Imperial County EMS Agency	38
Inland Counties Emergency Medical Agency (ICEMA)	39
Los Angeles County EMS Agency	40
Marin County EMS Agency	41
Merced County EMS Agency	42
Monterey County EMS Agency	43
Mountain Counties EMS Agency	44
Napa County EMS Agency	45

North Coast EMS Agency.....	46
Northern California EMS Agency	47
Orange County EMS Agency	48
Riverside County EMS Agency.....	49
San Benito County EMS Agency	51
San Diego EMS Agency.....	52
San Joaquin County EMS Agency	53
San Luis Obispo County EMS Agency	54
San Mateo County EMS Agency.....	55
Santa Barbara County EMS Agency.....	56
Santa Clara County EMS Agency	57
Santa Cruz County EMS Agency	58
Sierra-Sacramento Valley EMS Agency.....	59
Solano County EMS Agency	60
Stanislaus County EMS Agency	61
Tuolumne County EMS Agency.....	62
Ventura County EMS Agency	63
Yolo County EMS Agency	64
Questions or Comments?	65

BACKGROUND

Data and quality improvement (QI) leaders from local emergency medical services agencies (LEMSAs), emergency medical services providers, hospitals, and the California Emergency Medical Services Authority (EMSA) joined together to develop the California EMS System Core Quality Measures Project to conduct statewide evaluation of EMS performance. Each year, a workgroup consisting of EMSA and LEMSAs stakeholders updates the measures according to data system changes and operational considerations. The project's measures focus on evidence-based processes and treatments for a condition or illness. The measures are intended to help EMS systems improve the quality of patient care by focusing measurement specifications on key processes and results of care. The *California EMS Systems Core Quality Measures Instruction Manual* (EMSA #SYS 100-20) defines essential data elements and provides instructions for reporting each performance measure. Please refer to the manual for additional information and detailed instructions on core quality measure reporting. The manual is accessible via the California Emergency Medical Services Authority website at <https://emsa.ca.gov/ems-core-quality-measures-project/>.

The EMS system quality improvement regulations (California Code of Regulations, Title 22, Division 9, Chapter 12) define the reporting requirements for LEMSAs, EMS providers, and base hospitals in their role as part of the EMS system. These requirements include, but are not limited to, the implementation of an EMS quality improvement program and the use of defined indicators to assess the local EMS system, as outlined in EMSA #SYS 100-20.

For the 2024 calendar year, EMSA requested that each LEMSAs use the National Emergency Medical Services Information System (NEMSIS) Version 3.5 data standards to report data for four core quality measures. The four measures are:

- TRA-2: Transport of Trauma Patients to a Trauma Center
- HYP-1: Treatment Administered for Hypoglycemia
- STR-1: Prehospital Screening for Suspected Stroke Patients
- PED-3: Respiratory Assessment for Pediatric Patients

METHODOLOGY

For the 2024 calendar year, EMSA requested that all LEMSAs use the specifications in the [California EMS Systems Core Quality Measures Instruction Manual \(EMSA #SYS 100-20\)](#) when executing their data reports and to refrain from using any custom elements or fields specific to their local jurisdiction or EMS providers. Universal fidelity to the consensus specifications is key to meaningfully comparing the reported results throughout California. Each measure specification contains essential data elements required for calculation. The four measures included in the 2024 measure data set contain a numerator and denominator to calculate percentage scores. Some measures also include exclusion criteria in the numerator and/or denominator. The numerator is the subpopulation and defines the processes or outcomes expected for all patients/encounters as defined in the denominator. The denominator, or initial population, are the patients/encounters being evaluated for performance. Exclusions are used to specify patients/encounters that should be removed from the numerator and/or denominator before determining if the criteria are met.

The specifications were drafted by a workgroup consisting of EMSA and LEMSAs representatives. Each of the four measures were discussed at length and supporting evidence from research, specification, and testing were gathered and evaluated. LEMSAs questions and comments regarding the specifications are an essential part of core quality measure improvement and incorporated into the revision process. The specifications were updated in November 2024 and published in the most current version of the Core Quality Measures Instruction Manual (EMSA #SYS 100-20).

The LEMSAs execute their core quality measure reports from their local database and submit aggregate results to EMSA on an annual basis. Since each of the 34 LEMSAs maintains their own EMS database and each is dependent on EMS provider agencies to submit data, there is variability in their capability to report core quality measures and some intrinsic variation in the results exists. Utilization of the California Emergency Medical Services Information System (CEMSIS) will enhance core quality measure reporting. Participation in CEMSIS by all LEMSAs is required, consistent with California Health and Safety Code (HSC) § 1797.102.

LIMITATIONS AND CHALLENGES

Quality measure analysis, integrity, and reliability depend on the development of compatible data systems and standardized data collection regimes at various levels of the EMS system. Commonly understood data measures are essential to quality improvement efforts and to data driven medical decision making. The demonstrated commitment of all of California's EMS decision makers to meaningful quality measures promises to provide our State's citizens with the reliable medical quality improvement that they have come to expect from mature healthcare sectors. Ongoing efforts to improve the quality and validity between CEMSIS and LEMSAs data will increase the reliability and usability of the measure results. Limitations and challenges to reporting the measures are enumerated below.

The California EMS Information System (CEMSIS) database is a large convenience sample - it consists solely of data submitted by participating EMS agencies, and it is not a population-based data set. In addition, the CEMSIS database inherits the individual deficiencies originating from its contributing entities.

The EMS Authority is continually cleaning and standardizing the data to improve data quality. Despite these efforts, errors remain for several reasons. The CEMSIS database is subject to the limitations of any "convenience sample". As a "convenience sample", the CEMSIS database is subject to various forms of bias. The most obvious problems are selection bias, the inconsistency with which clinical variables can be measured or documented, and inter-agency differences in treatment and transport practices.

Participation in Core Quality Measures Reporting

All 34 LEMSAs in California were contacted to provide core quality measure information to EMSA by a set date. For the 2024 reporting year, 30 of the 34 LEMSAs (representing approximately 88% of the state population¹) provided a formal response to EMSA's request for CQMs by the submission deadline. Four LEMSAs did not provide a response to the request. Of the 34 LEMSAs, 30 reported data for at least one measure. Of the participating LEMSAs, 93% (28 of 30) reported CQMs for all measures and populations.

Partial System Representation

Only a portion of the actual EMS business conducted in California is represented in this report; the values reported by the LEMSAs do not represent 100% of the providers in the State. Some LEMSAs reported that not all providers in their region were represented in their reporting for various reasons, or the providers were not

utilizing the proper data elements and codes specified in the 2024 Core Quality Measures Instruction Manual (EMSA #SYS 100-20).

¹Population data obtained from the California Census 2020 (<https://census.ca.gov/reports/>)

TABLES AND CHARTS GENERATED FROM CORE QUALITY MEASURES REPORTS

LEMSAs Reporting Data for Core Quality Measures 2009-2024

The table on page 10 shows which LEMSAs submitted data for the years 2009-2024. For 2024, 30 LEMSAs reported information for at least one measure. If a LEMSA submitted a value for any of the measures found in the [California EMS Systems Core Quality Measures Instruction Manual \(EMSA #SYS 100-20\)](#), the cell associated with that data year is populated with a check mark "✓" and shaded light blue. For LEMSAs that did not submit any core quality measure data to EMSA, the cell for that corresponding year appears blank.

LEMSA Participation in the 2024 Core Quality Measures Report

The map of California on page 11 shows which LEMSAs (single county and multi-county EMS agencies) submitted data for 2024. These regions are shaded light yellow. LEMSA participation in the California Core Quality Measures Report decreased slightly from the 2023 to 2024 reporting calendar year but remains strong.

2024 Core Quality Measures Aggregate Results for California

The aggregate results include the total number of LEMSAs that reported a value for each measure (response count), the percentage of LEMSAs that reported a value for each measure (response rate), the aggregate numerator total (subpopulation) of all responses, the aggregate denominator total (population) of all responses, and the mean (average) and median reported value for each measure. The results table is located on page 15.

2024 Core Quality Measures Results: Charts and Tables

This report includes charts and tables for the four core quality measures. Each measure includes a column chart with reported values, mean, and median values for all submissions. Additionally, there are two tables provided for each measure. The first table includes reported values for the measure, and the second table includes the LEMSA response count, response rate, numerator, denominator, and the mean and median values for all submissions. The charts and tables are populated directly from the values provided by the LEMSAs. A brief summarization of the measure results and feedback from LEMSAs is provided, as well as a link to the corresponding measure specifications for reference. The charts and tables are located on pages 16-31.

Comparison of Core Quality Measures Results

The column chart on page 32 displays the average core quality measure results as reported by LEMSAs over the past six calendar years (2019-2024).

Appendix: Responses from LEMSAs for the 2024 Core Quality Measures Report

The appendix contains tables (pages 33-64) with the data and information provided by each LEMSA for this report.

LEMSAs REPORTING DATA FOR CORE QUALITY MEASURES 2009-2024

Local EMS Agency	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Alameda County EMS		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Central California EMS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Coastal Valleys EMS				✓	✓	✓	✓	✓	✓				✓		✓*	✓
Contra Costa County EMS		✓	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓	✓	✓*
El Dorado County EMS				✓	✓	✓					✓		✓	✓	✓	✓
Imperial County EMS													✓	✓	✓	✓
Inland Counties EMS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Kern County EMS		✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓			
Los Angeles County EMS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Marin County EMS		✓	✓		✓	✓	✓	✓	✓			✓	✓	✓	✓	✓
Merced County EMS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓
Monterey County EMS		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Mountain Counties EMS		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Napa County EMS					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
North Coast EMS		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Northern California EMS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓
Orange County EMS					✓	✓	✓	✓	✓		✓			✓	✓	✓
Riverside County EMS		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sacramento County EMS		✓	✓	✓	✓	✓			✓		✓	✓	✓	✓	✓	✓
San Benito County EMS					✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓
San Diego County EMS		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓*	✓
San Francisco EMS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
San Joaquin County EMS				✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
San Luis Obispo County EMS		✓	✓		✓	✓	✓	✓	✓				✓	✓	✓	✓
San Mateo County EMS		✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓
Santa Barbara County EMS	✓	✓	✓		✓	✓	✓	✓	✓			✓	✓	✓	✓	✓
Santa Clara County EMS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Santa Cruz County EMS	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓
Sierra-Sacramento Valley EMS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Solano County EMS				✓	✓	✓					✓		✓		✓	✓
Stanislaus County EMS														✓	✓	✓
Tuolumne County EMS		✓	✓	✓	✓	✓	✓		✓			✓	✓	✓	✓	✓
Ventura County EMS		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓
Yolo County EMS					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
TOTAL PARTICIPANTS:	10	24	24	23	32	32	29	28	30	20	26	25	32	30	32	32

✓* LEMSAs submitted their data after the submission deadline, so while they receive submission credit, their data is not included in the annual report for the calendar year.

LEMSA PARTICIPATION IN THE 2024 CORE QUALITY MEASURES REPORT



Considerations for the information presented in the following tables and charts:

- Non-participating LEMSA(s) did not indicate why they were unable to report information on the 2024 core quality measures.
- Multiple factors impact the validity and analysis of the retrospective data, including but not limited to incomplete documentation, documentation not reflective of services provided prior to ambulance arrival, inability to collect hospital outcome data, inconsistent data dictionary definitions between local jurisdictions, LEMSA policy not aligning with measure specifications causing a misrepresentation of patient volume and/or EMS performance, and geographic resource disparities.
- These limitations caution against comparison between jurisdictions and limit the reliability of the aggregate values.
- Efforts to collect, validate, and evaluate core quality measures data in CEMSIS are ongoing.

CORE QUALITY MEASURES LIST FOR CY 2024

Measure ID	Measure Name	Measure Description
TRA-2	Transport of Trauma Patients to a Trauma Center	Percentage of patients originating from a 911 response who met trauma triage criteria for the red criteria (Injury Patterns and Mental Status and Vital Signs) or the yellow criteria (Mechanism of Injury and EMS Judgment) in the 2021 ACS National Guideline for the Field Triage of Injured Patients and were transported to a trauma center.
HYP-1	Treatment Administered for Hypoglycemia	Percentage of patients originating from a 911 response that received treatment to correct their hypoglycemia.
STR-1	Prehospital Screening for Suspected Stroke Patients	Percentage of suspected stroke patients originating from a 911 response that received a prehospital stroke assessment.
PED-3	Respiratory Assessment for Pediatric Patients	Percentage of pediatric patients originating from a 911 response that had a primary or secondary impression of respiratory distress and received a documented respiratory assessment.

2024 CORE QUALITY MEASURES AGGREGATE RESULTS FOR CALIFORNIA

Measure ID	TRA-2		HYP-1		STR-1	PED-3
	Pediatric Patients Only	Adult Patients Only	Pediatric Patients Only	Adult Patients Only	Pediatric and Adult Patients	Pediatric Patients Only
LEMSA Response Count*	28	29	29	30	30	30
Response Rate (n=34)	82%	85%	85%	88%	88%	88%
Numerator Total	1,951	43,422	213	23,107	56,878	10,231
Denominator Total	2,220	49,442	545	33,155	63,905	10,865
Mean (Average)	80%	87%	44%	69%	79%	89%
Median	95%	94%	39%	73%	88%	96%

*LEMSA Response Count is defined as the number of LEMSAs that submitted a reported value for a measure.

TRA-2: TRANSPORT OF TRAUMA PATIENTS TO A TRAUMA CENTER

TRA-2 focuses on the percentage of trauma patients meeting [CDC Field Trauma Triage Criteria Step 1 or 2 or 3](#) that were transported to a trauma center originating from a 911 response. For the 2024 reporting year, the pediatric and adult populations were separated to allow a more in-depth analysis of the measure.

For the pediatric population, 28 of 34 (82%) LEMSAs provided TRA-2 data. Of the 2,220 patients identified as meeting trauma triage criteria, 1,951 (87%) patients were transported to a trauma center. The median value for pediatric patients was 95%. For adult patients, 29 of 34 (85%) LEMSAs provided TRA-2 data. Of the 49,442 patients identified as meeting trauma triage criteria, 43,422 (87%) patients were transported to a trauma center. The median value for adult patients was 94%.

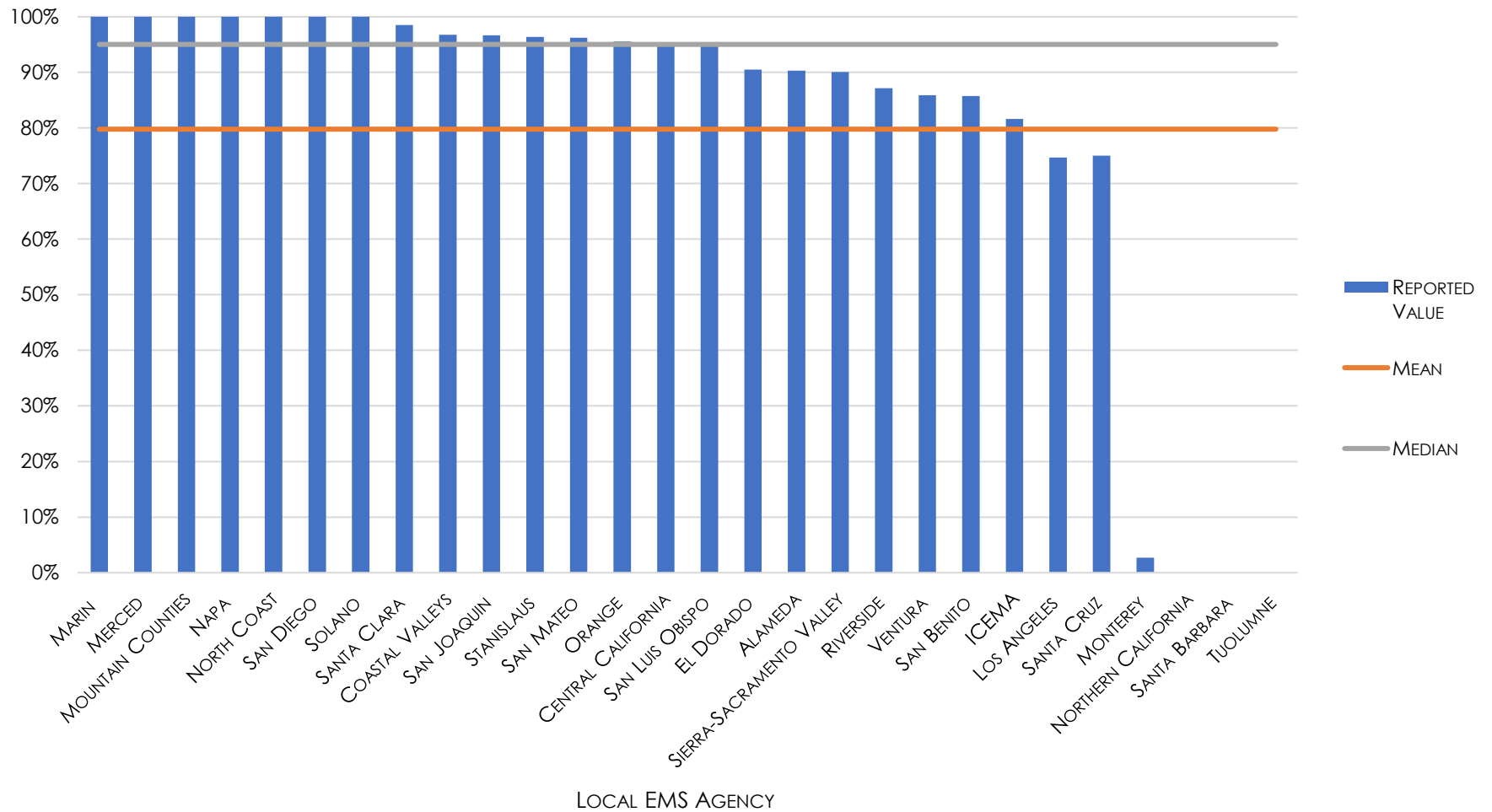
For the 2024 measure set, EMSA revised the trauma triage criteria for eInjury.03 and eInjury.04 to reflect current clinical and operational practices and created separate pediatric and adult populations to improve specificity in trauma identification and reporting. In response to recommendations from LEMSAs, additional values were added to several ePCR data elements. For eResponse.05 (Type of Service Requested), the values 2205003 *Emergency Response (Intercept)* and 2205009 *Emergency Response (Mutual Aid)* were included. Similarly, eDisposition.30 (Transport Disposition) was updated to include 4230003 *Transport by this EMS Unit, with a Member of Another Crew*, 4230005 *Transport by Another EMS Unit*, and 4230007 *Transport by Another EMS Unit, with a Member of this Crew*. Additionally, eResponse.07 (Unit Transport and Equipment Capability) has been expanded to include 2207011 *Air Transport – Helicopter*, 2207013 *Air Transport – Fixed Wing*, 2207015 *Ground Transport (ALS Equipped)*, 2207017 *Ground Transport (BLS Equipped)*, and 2207019 *Ground Transport (Critical Care Equipped)*. These additions aim to ensure the inclusion of various transport types beyond ground transport alone, enhancing data accuracy across diverse EMS settings.

Some LEMSAs reported issues with the TRA-2 measure such as inaccurate transportation documentation, particularly with air transports and transfers between units. A couple of LEMSAs also noted their software vendor failed to recognize certain hospitals as trauma centers or did not have the appropriate trauma level option to select.

This measure will be evaluated for future reporting years with consideration of EMSA feedback.

[Link to TRA-2 measure specifications](#)

Chart 1: TRA-2 Transport of Trauma Patients to a Trauma Center
(Population 1 - Pediatric Patients Only)



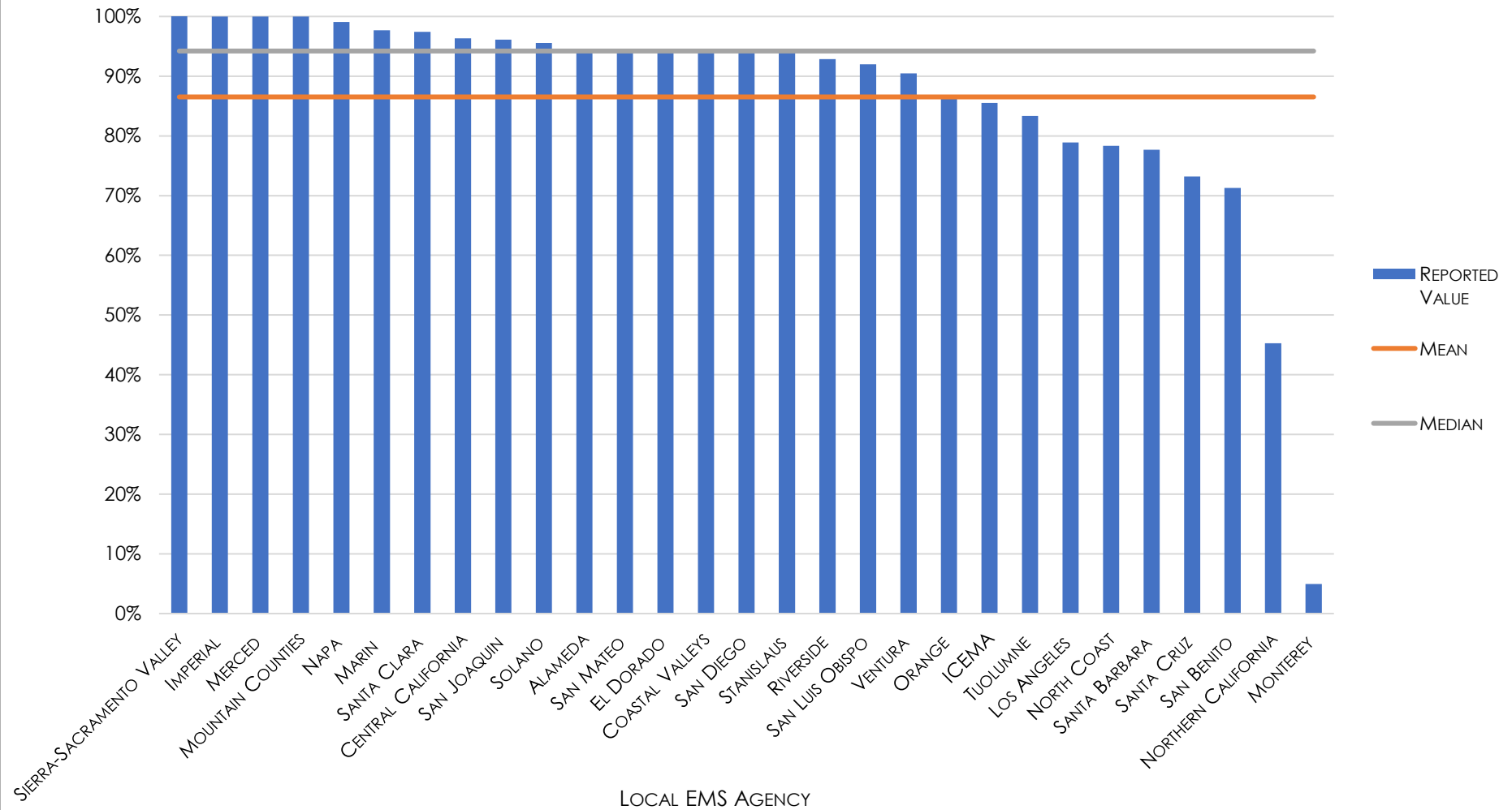
TRA-2 Transport of Trauma Patients to Trauma Centers | Population 1: Pediatric Patients Only

LEMSA	Numerator	Denominator	Reported Value
Marin	12	12	100%
Merced	7	7	100%
Mountain Counties	9	9	100%
Napa	8	8	100%
North Coast	1	1	100%
San Diego	178	178	100%
Solano	42	42	100%
Santa Clara	130	132	98%
Coastal Valleys	30	31	97%
San Joaquin	29	30	97%
Stanislaus	80	83	96%
San Mateo	51	53	96%
Orange	342	358	96%
Central California	61	64	95%
San Luis Obispo	18	19	95%
El Dorado	19	21	90%
Alameda	112	124	90%
Sierra-Sacramento Valley	136	151	90%
Riverside	190	218	87%
Ventura	79	92	86%
San Benito	6	7	86%
ICEMA	133	163	82%
Los Angeles	268	359	75%
Santa Cruz	9	12	75%
Monterey	1	37	3%
Northern California	0	7	0%
Santa Barbara	0	1	0%
Tuolumne	0	1	0%

Not Reporting: Contra Costa, Imperial, Kern, Sacramento, San Francisco, Yolo

Overview	
Response Count	28
Response Rate (n=34)	82%
Numerator Total	1,951
Denominator Total	2,220
Mean	80%
Median	95%

Chart 2: TRA-2 Transport of Trauma Patients to a Trauma Center
(Population 2 - Adult Patients Only)



TRA-2 Transport of Trauma Patients to Trauma Centers | Population 2: Adult Patients Only

LEMSA	Numerator	Denominator	Reported Value
Sierra-Sacramento Valley	3,222	3,196	101%
Imperial	199	199	100%
Merced	406	406	100%
Mountain Counties	111	111	100%
Napa	108	109	99%
Marin	254	260	98%
Santa Clara	2,042	2,096	97%
Central California	1,466	1,522	96%
San Joaquin	620	645	96%
Solano	669	700	96%
Alameda	2,737	2,893	95%
San Mateo	1,189	1,258	95%
El Dorado	236	250	94%
Coastal Valleys	829	879	94%
San Diego	2,607	2,767	94%
Stanislaus	2,419	2,572	94%
Riverside	3,758	4,047	93%
San Luis Obispo	379	412	92%
Ventura	1,339	1,480	90%
Orange	6,821	7,907	86%
ICEMA	2,312	2,704	86%
Tuolumne	10	12	83%
Los Angeles	9,101	11,534	79%
North Coast	152	194	78%
Santa Barbara	73	94	78%
Santa Cruz	213	291	73%
San Benito	72	101	71%
Northern California	43	95	45%
Monterey	35	708	5%

Not Reporting: Contra Costa, Kern, Sacramento, San Francisco, Yolo

Overview	
Response Count	29
Response Rate (n=34)	85%
Numerator Total	43,422
Denominator Total	49,442
Mean	87%
Median	94%

HYP-1: TREATMENT ADMINISTERED FOR HYPOGLYCEMIA

HYP-1 focuses on the percentage of patients that received treatment to correct their hypoglycemia originating from a 911 response. For the 2024 reporting year, the pediatric and adult populations were separated to allow a more in-depth analysis of the measure.

For the pediatric population, 29 of 34 (85%) LEMSAs provided HYP-1 data. Of the 545 patients who had a blood glucose level indicating hypoglycemia, 213 (39%) patients received treatment to correct their hypoglycemia. The median value for pediatric patients was 39%. For the adult population, 30 of 34 (88%) LEMSAs provided HYP-1 data. Of the 33,155 patients who had a blood glucose level indicating hypoglycemia, 23,107 (69%) patients received treatment to correct their hypoglycemia. The median value for adult patients was 73%.

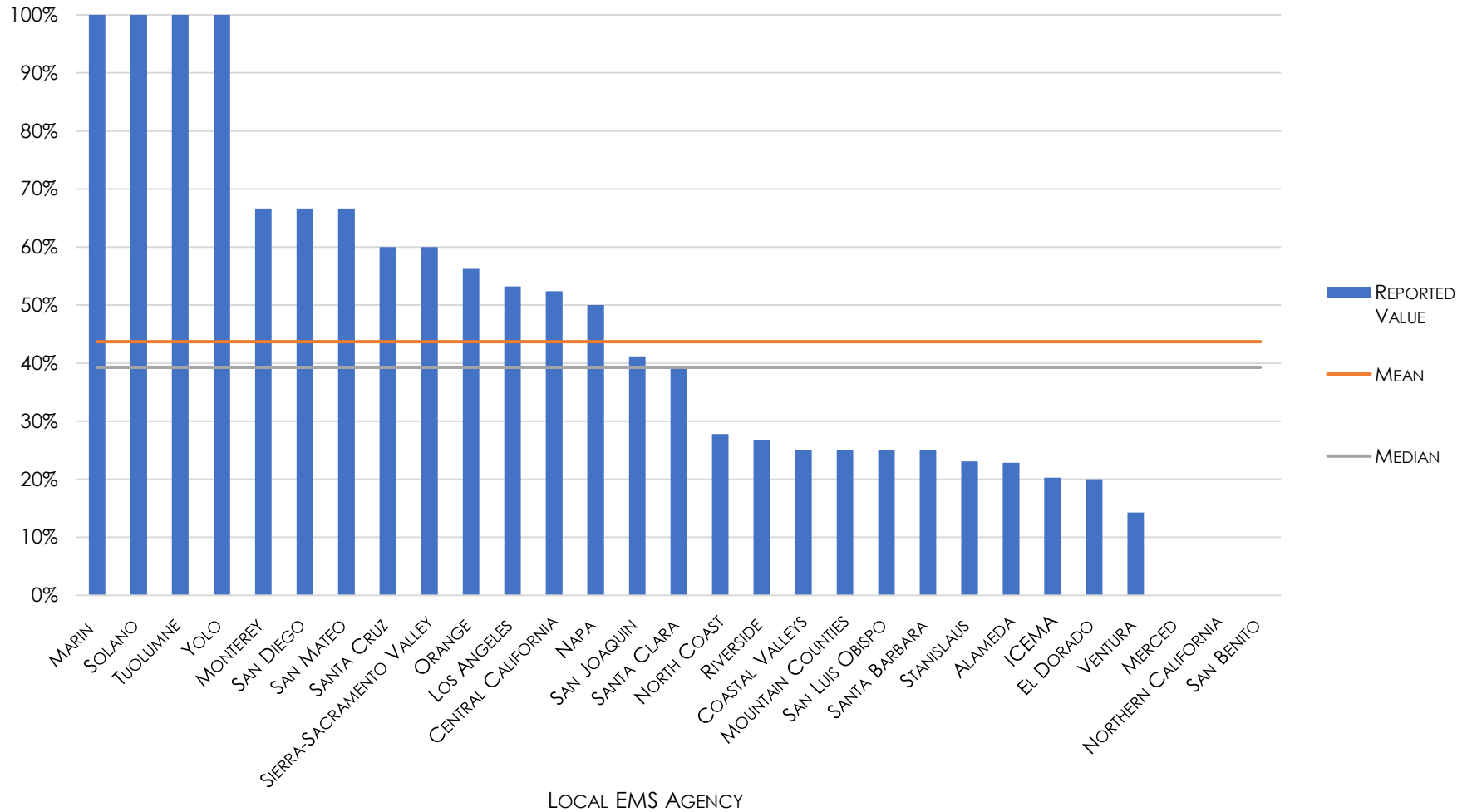
For the 2024 measure set, EMSA revised the HYP-1 specifications to include a separate pediatric population, enhancing the ability to distinguish and evaluate hypoglycemia cases involving children more accurately within the EMS data system. Additional values were added to eResponse.05 (Type of Service Requested), including 2205003 *Emergency Response (Intercept)* and 2205009 *Emergency Response (Mutual Aid)*. Several new values were incorporated into eMedications.03 (Medication Administered). These include 151823 *Glucagon*, 244098 *Glucose 100 MG/ML / Sodium Chloride 4.5 MG/ML Injection*, 244099 *Dextrose 10% / Sodium Chloride 0.9% Injectable Solution*, 349944 *Dextrose/Oral Glucose*, 372326 *Glucose Chewable Tablet*, and 791870 *Glucagon Prefilled Syringe*. These additions help accurate reporting of all patients treated for hypoglycemia.

Several LEMSAs reported challenges with accurately capturing HYP-1 data due to system limitations and documentation issues, such as treatments being documented only in narratives, incorrect or missing blood glucose entries, and reporting systems not recognizing certain treatment values, such as oral glucose or food. One LEMSAs reported a dual response system creating duplicate ePCRs and required a post-analysis to report accurate data.

This measure will be evaluated for future reporting years with consideration of LEMSAs feedback.

[Link to HYP-1 measure specifications](#)

Chart 3: HYP-1 Treatment Administered for Hypoglycemia
(Population 1 - Pediatric Patients Only)



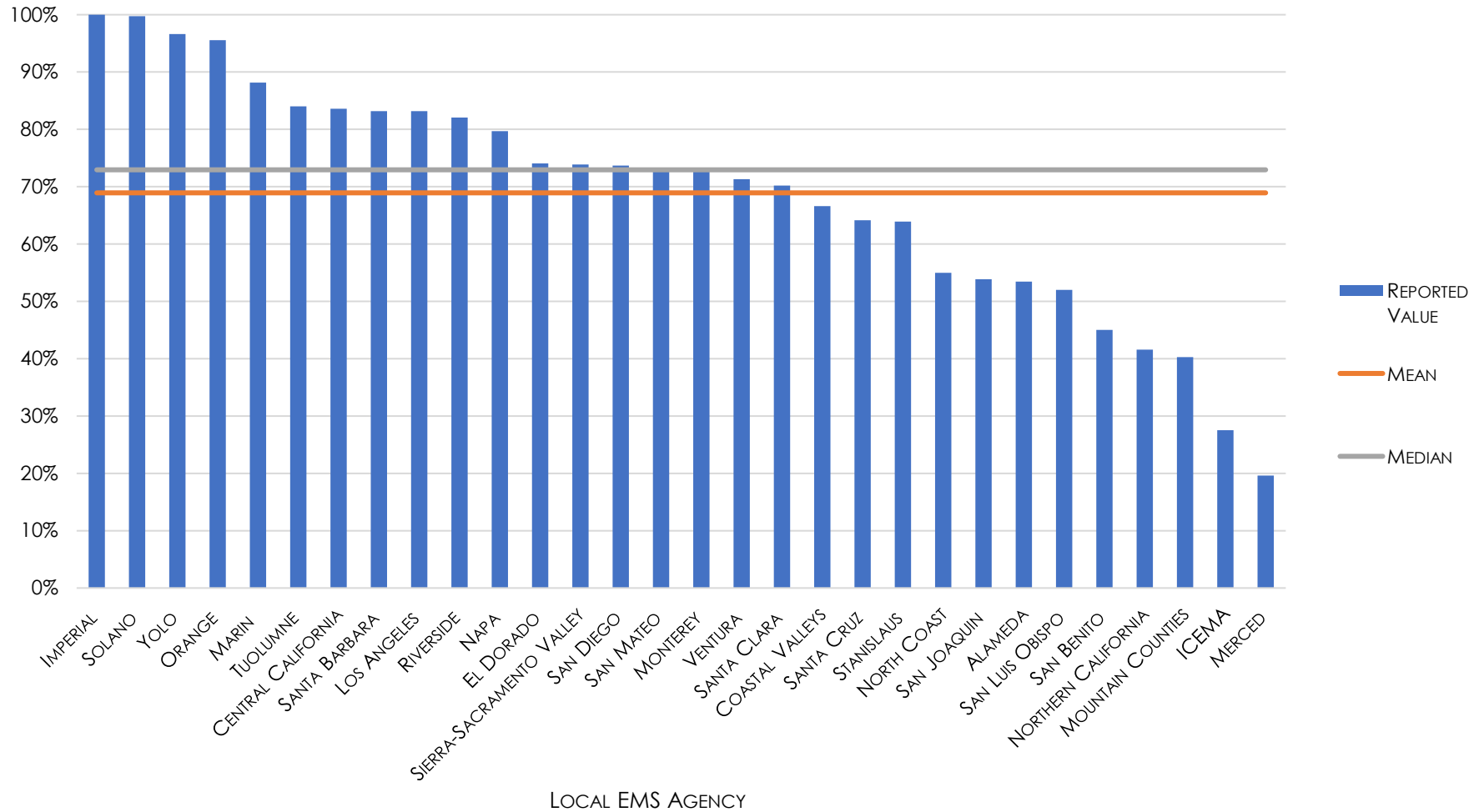
HYP-1 Treatment Administered for Hypoglycemia | Population 1: Pediatric Patients Only

LEMSA	Numerator	Denominator	Reported Value
Marin	2	2	100%
Solano	1	1	100%
Tuolumne	1	1	100%
Yolo	3	3	100%
Monterey	4	6	67%
San Diego	8	12	67%
San Mateo	2	3	67%
Santa Cruz	3	5	60%
Sierra-Sacramento Valley	21	35	60%
Orange	27	48	56%
Los Angeles	33	62	53%
Central California	22	42	52%
Napa	1	2	50%
San Joaquin	14	34	41%
Santa Clara	11	28	39%
North Coast	5	18	28%
Riverside	19	71	27%
Coastal Valleys	3	12	25%
Mountain Counties	2	8	25%
San Luis Obispo	1	4	25%
Santa Barbara	1	4	25%
Stanislaus	3	13	23%
Alameda	8	35	23%
ICEMA	15	74	20%
El Dorado	2	10	20%
Ventura	1	7	14%
Merced	0	4	0%
Northern California	0	0	0%
San Benito	0	1	0%

Not Reporting: Contra Costa, Kern, Sacramento, San Francisco, Yolo

Overview	
Response Count	29
Response Rate (n=34)	85%
Numerator Total	213
Denominator Total	545
Mean	44%
Median	39%

Chart 4: HYP-1 Treatment Administered for Hypoglycemia
(Population 2 - Adult Patients Only)



HYP-1 Treatment Administered for Hypoglycemia | Population 2: Adult Patients Only

LEMSA	Numerator	Denominator	Reported Value
Imperial	55	55	100%
Solano	391	392	100%
Yolo	114	118	97%
Orange	1,988	2,080	96%
Marin	156	177	88%
Tuolumne	63	75	84%
Central California	1,315	1,573	84%
Santa Barbara	267	321	83%
Los Angeles	6,530	7,852	83%
Riverside	2,327	2,835	82%
Napa	102	128	80%
El Dorado	231	312	74%
Sierra-Sacramento Valley	1,533	2,075	74%
San Diego	462	627	74%
San Mateo	373	511	73%
Monterey	347	476	73%
Ventura	612	858	71%
Santa Clara	1,082	1,541	70%
Coastal Valleys	339	509	67%
Santa Cruz	204	318	64%
Stanislaus	602	942	64%
North Coast	132	240	55%
San Joaquin	927	1,721	54%
Alameda	1,688	3,159	53%
San Luis Obispo	156	300	52%
San Benito	27	60	45%
Northern California	42	101	42%
Mountain Counties	27	67	40%
ICEMA	984	3,574	28%
Merced	31	158	20%

Not Reporting: Contra Costa, Kern, Sacramento, San Francisco

Overview	
Response Count	30
Response Rate (n=34)	88%
Numerator Total	23,107
Denominator Total	33,155
Mean	69%
Median	73%

STR-1: PREHOSPITAL SCREENING FOR SUSPECTED STROKE PATIENTS

STR-1 focuses on the percentage of suspected stroke patients that received a prehospital stroke screening originating from a 911 response. For the 2024 reporting year, 30 of 34 (88%) LEMSAs provided STR-1 data. Of the 63,905 patients who had a primary or secondary impression of stroke, 56,878 (89%) patients received a documented stroke assessment. The median value was 88%.

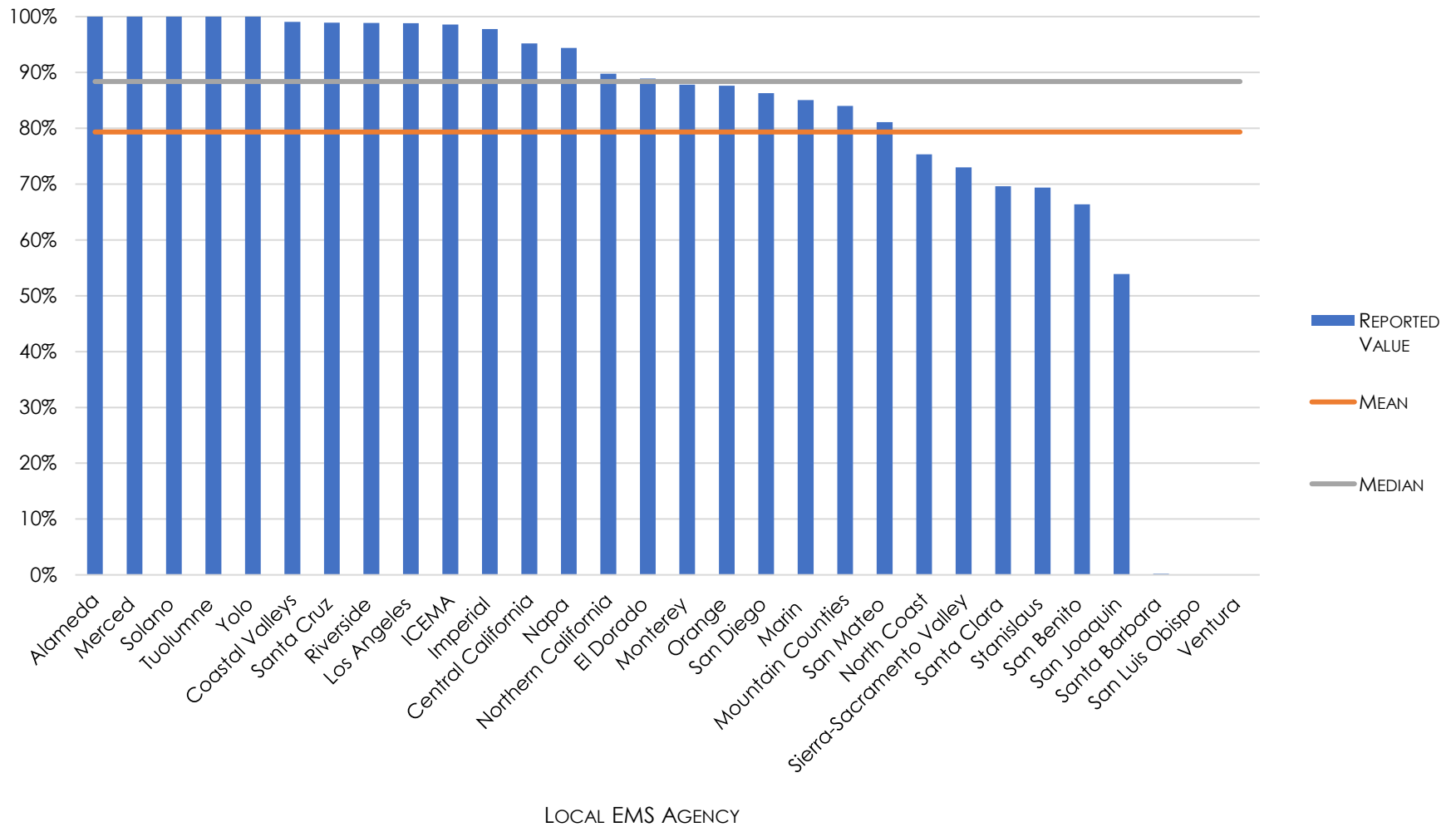
For the 2024 measure set, EMSA revised the STR-1 specifications to include additional values to eResponse.05 (Type of Service Requested). Values 2205003 *Emergency Response (Intercept)* and 2205009 *Emergency Response (Mutual Aid)* were added.

Some LEMSAs reported documentation issues, specifically noting that eVitals.29 is currently not utilized in their region, however they do utilize a supplemental questionnaire to identify stroke patients.

This measure will be evaluated for future reporting years with consideration of LEMSAs feedback.

[Link to STR-1 measure specifications](#)

Chart 5: STR-1 Prehospital Screening for Suspected Stroke Patients



LEMSA	Numerator	Denominator	Reported Value
Alameda	3,630	3,630	100%
Merced	451	451	100%
Solano	762	762	100%
Tuolumne	128	128	100%
Yolo	593	593	100%
Coastal Valleys	1,491	1,505	99%
Santa Cruz	903	913	99%
Riverside	6,274	6,345	99%
Los Angeles	13,501	13,660	99%
ICEMA	5,942	6,029	99%
Imperial	87	89	98%
Central California	3,184	3,345	95%
Napa	337	357	94%
Northern California	228	254	90%
El Dorado	609	685	89%
Monterey	1,025	1,167	88%
Orange	4,076	4,652	88%
San Diego	2,766	3,205	86%
Marin	353	415	85%
Mountain Counties	168	200	84%
San Mateo	1,702	2,099	81%
North Coast	400	531	75%
Sierra-Sacramento Valley	3,053	4,183	73%
Santa Clara	3,152	4,527	70%
Stanislaus	1,242	1,790	69%
San Benito	71	107	66%
San Joaquin	748	1,388	54%
Santa Barbara	2	895	0%
San Luis Obispo	0	0	0%
Ventura	0	0	0%

Not Reporting: Contra Costa, Kern, Sacramento, San Francisco

Overview	
Response Count	30
Response Rate (n=34)	88%
Numerator Total	56,878
Denominator Total	63,905
Mean	79%
Median	88%

PED-3 focuses on the percentage of pediatric patients that had a primary or secondary impression of respiratory distress and received a documented respiratory assessment originating from a 911 response. For the 2024 reporting year, 30 of 34 (88%) LEMSAs provided PED-3 data. Of the 10,865 pediatric patients who had a primary or secondary impression of respiratory distress, 10,231 (94%) patients received a documented respiratory assessment. The median value was 96%.

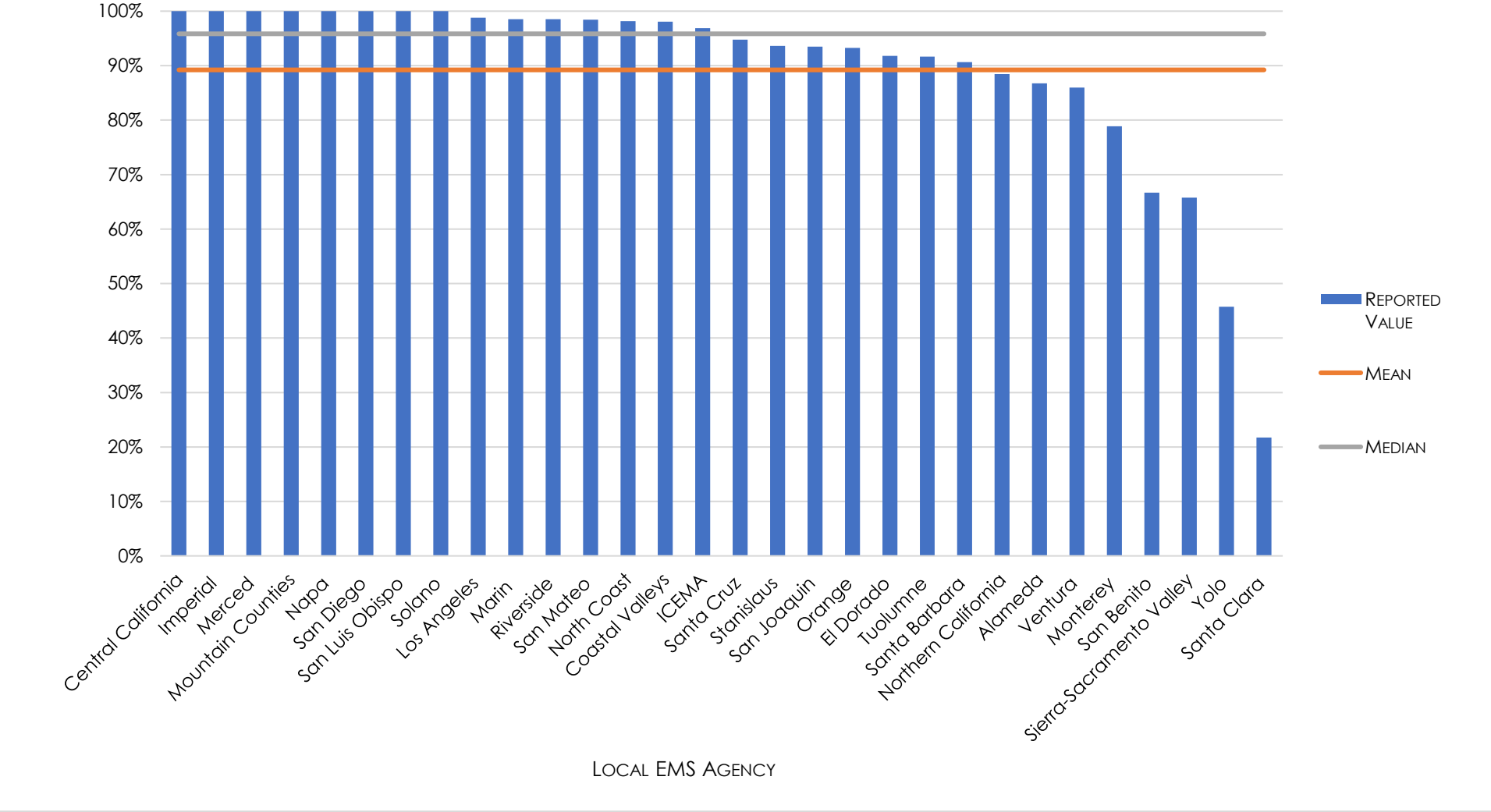
For the 2024 measure set, EMSA revised the PED-3 specifications to include additional values to eResponse.05 (Type of Service Requested). Values 2205003 *Emergency Response (Intercept)* and 2205009 *Emergency Response (Mutual Aid)* were added.

One LEMSA noted that their reported count was inaccurate when following the measure specifications and provided a more accurate count based on their own report. Another LEMSA reported discrepancies where RR or SPO2 appeared missing despite being documented in the ePCR as a result of an ESO reporting issue.

This measure will be evaluated for future reporting years with consideration of LEMSA feedback.

[Link to PED-3 measure specifications](#)

Chart 6: PED-3 Respiratory Assessment for Pediatric Patients



PED-3 Respiratory Assessment for Pediatric Patients

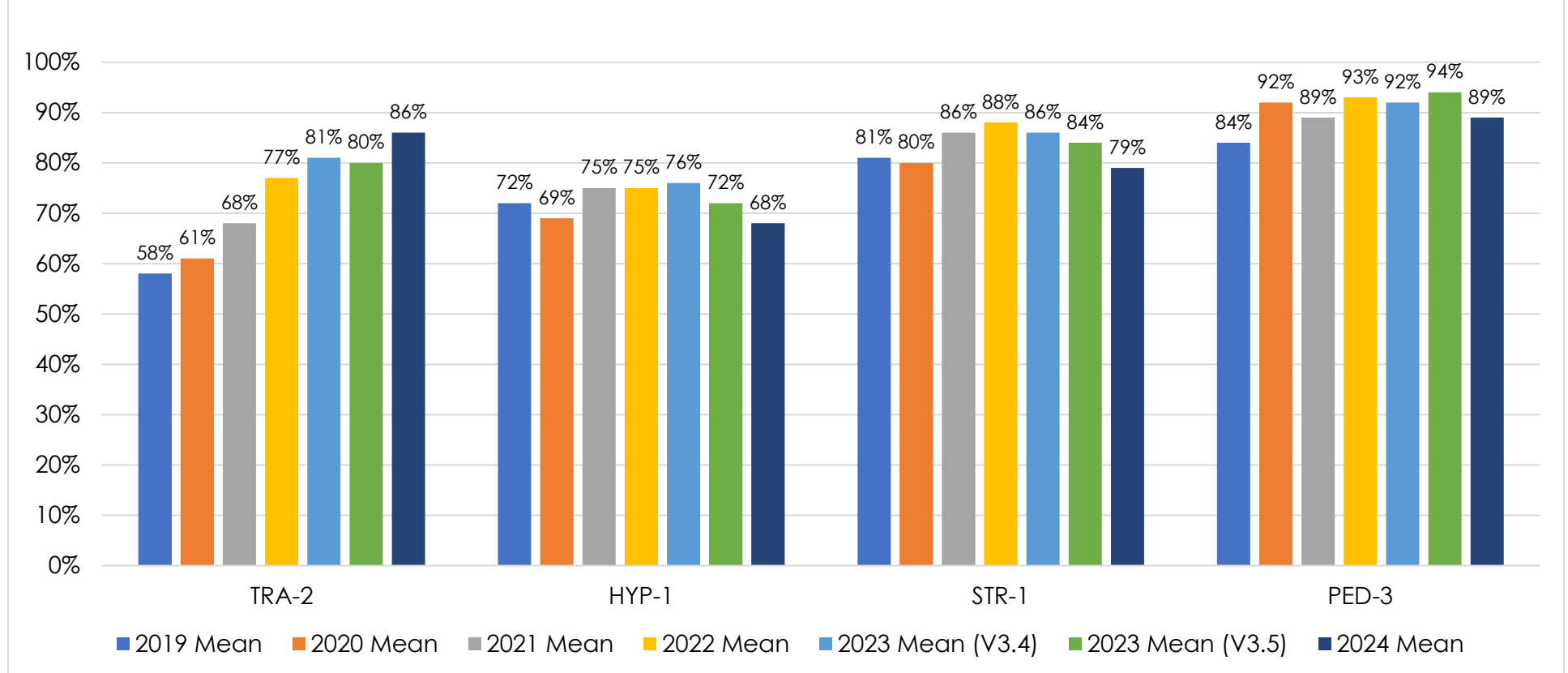
LEMSA	Numerator	Denominator	Reported Value
Central California	507	507	100%
Imperial	39	39	100%
Merced	160	160	100%
Mountain Counties	13	13	100%
Napa	51	51	100%
San Diego	523	523	100%
San Luis Obispo	45	45	100%
Solano	85	85	100%
Los Angeles	1,914	1,937	99%
Marin	67	68	99%
Riverside	1,389	1,410	99%
San Mateo	311	316	98%
North Coast	53	54	98%
Coastal Valleys	201	205	98%
ICEMA	2,092	2,159	97%
Santa Cruz	91	96	95%
Stanislaus	308	329	94%
San Joaquin	315	337	93%
Orange	691	741	93%
El Dorado	67	73	92%
Tuolumne	11	12	92%
Santa Barbara	97	107	91%
Northern California	23	26	88%
Alameda	524	604	87%
Ventura	98	114	86%
Monterey	97	123	79%
San Benito	16	24	67%
Sierra-Sacramento Valley	411	625	66%
Yolo	27	59	46%
Santa Clara	5	23	22%

Not Reporting: Contra Costa, Kern, Sacramento, San Francisco

Overview	
Response Count	30
Response Rate (n=34)	88%
Numerator Total	10,231
Denominator Total	10,865
Mean	89%
Median	96%

COMPARISON OF CORE QUALITY MEASURE RESULTS

Chart 7: California Core Quality Measures Averages 2019-2024



Average core quality measure results as reported by LEMSAs over the past four calendar years (2019-2024). Published reports for the 2019-2024 calendar years are accessible via the California Emergency Medical Services Authority Quality Improvement webpage at <https://emsa.ca.gov/quality-improvement/>.

Please note, these results may not accurately represent EMS performance or changes in performance across the State over time. Results may be impacted by annual revisions to measure specifications; improvements in data collection, training, and other efforts at the LEMSA level; variations in LEMSA participation/reporting from year to year; and other considerations described in this report (refer to pages 7-8 and 13).

APPENDIX: RESPONSES FROM LEMSAs FOR THE 2024 CORE QUALITY MEASURES REPORT

The following tables include data and information provided by LEMSAs for this report. All notes and feedback from the LEMSAs will be evaluated by EMSA and the core quality measures workgroup for future reporting years.

ALAMEDA COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	112	124	90%	Washington Hospital became a designated Trauma Center in Alameda County beginning Q3 2024, we have taken that into account and calculated these numbers appropriately
	Adult Patients	2,737	2,893	95%	Washington Hospital became a designated Trauma Center in Alameda County beginning Q3 2024, we have taken that into account and calculated these numbers appropriately
HYP-1	Pediatric Patients	8	35	23%	Narrative documentation for medication administration to correct low blood sugar. Additionally, provision of food, and giving oral fluid are not available in ESO.
	Adult Patients	1,688	3,159	53%	Narrative documentation for medication administration to correct low blood sugar. Additionally, provision of food, and giving oral fluid are not available in ESO.
STR-1	Pediatric and Adult Patients	3,630	3,630	100%	
PED-3	Pediatric Patients Only	524	604	87%	

CENTRAL CALIFORNIA EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	61	64	95%	
	Adult Patients	1,466	1,522	96%	
HYP-1	Pediatric Patients	22	42	52%	
	Adult Patients	1,315	1,573	84%	
STR-1	Pediatric and Adult Patients	3,184	3,345	95%	CCEMA implemented a new stroke protocol on March 1, 2024
PED-3	Pediatric Patients Only	507	507	100%	

COASTAL VALLEYS EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	30	31	97%	
	Adult Patients	829	879	94%	
HYP-1	Pediatric Patients	3	12	25%	Several issues with this measure noted. For peds, one was given food, 3 were typos (BG not done), 1 noted dextrose in notes but not documented in meds, 3 were neonates/newborn.
	Adult Patients	339	509	67%	CVEMSA does not have food administered as a procedure option. Also, BG is often accidentally entered as zero or the respiratory rate is accidentally entered in the BG field.
STR-1	Pediatric and Adult Patients	1,491	1,505	99%	Stroke screening is documented in a BEFAST tool (itExam 57-62), not in eVitals.29
PED-3	Pediatric Patients Only	201	205	98%	Three of the four were patients who signed out AMA. The 4th was a handoff to another unit and documentation missing.

EL DORADO COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	19	21	90%	
	Adult Patients	236	250	94%	
HYP-1	Pediatric Patients	2	10	20%	
	Adult Patients	231	312	74%	
STR-1	Pediatric and Adult Patients	609	685	89%	
PED-3	Pediatric Patients Only	67	73	92%	

IMPERIAL COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients				
	Adult Patients	199	199	100%	Pediatric and Adult Patients
HYP-1	Pediatric Patients				
	Adult Patients	55	55	100%	Pediatric and Adult Patients
STR-1	Pediatric and Adult Patients	87	89	98%	
PED-3	Pediatric Patients Only	39	39	100%	

**Reporting period of March to December 2024

INLAND COUNTIES EMERGENCY MEDICAL AGENCY (ICEMA)

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	133	163	82%	Data is from our 4 trauma centers - St. Mary's, Hi-Desert, ARMC and LLUMC
	Adult Patients	2,312	2,704	86%	Data is from our 4 trauma centers - St. Mary's, Hi-Desert, ARMC and LLUMC
HYP-1	Pediatric Patients	15	74	20%	
	Adult Patients	984	3,574	28%	
STR-1	Pediatric and Adult Patients	5,942	6,029	99%	
PED-3	Pediatric Patients Only	2,092	2,159	97%	

LOS ANGELES COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	268	359	75%	
	Adult Patients	9,101	11,534	79%	
HYP-1	Pediatric Patients	33	62	53%	The spec does not capture eVitals.11 = "Low" in our report writer.
	Adult Patients	6,530	7,852	83%	The spec does not capture eVitals.11 = "Low" in our report writer.
STR-1	Pediatric and Adult Patients	13,501	13,660	99%	
PED-3	Pediatric Patients Only	1,914	1,937	99%	

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients				
	Adult Patients				
HYP-1	Pediatric Patients	34	64	53%	Added eVitals.18 = "Low" to the denominator inclusion criteria since it is not captured by our report writer if the spec is followed.
	Adult Patients	6,752	8,114	83%	Added eVitals.18 = "Low" to the denominator inclusion criteria since it is not captured by our report writer if the spec is followed.
STR-1	Pediatric and Adult Patients				
PED-3	Pediatric Patients Only				

**Los Angeles County EMS submitted additional data for HYP-1. See notes in table above.

MARIN COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	12	12	100%	
	Adult Patients	254	260	98%	
HYP-1	Pediatric Patients	2	2	100%	
	Adult Patients	156	177	88%	
STR-1	Pediatric and Adult Patients	353	415	85%	Using only the primary and the secondary impression of stroke misses 29% of our strokes. When I add Stroke Alert and stroke protocol used to the criteria, the number is 586 strokes. Provider impressions of ALOC and Weakness are valid for stroke patients.
PED-3	Pediatric Patients Only	67	68	99%	

MERCED COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	7	7	100%	
	Adult Patients	406	406	100%	
HYP-1	Pediatric Patients	0	4	0%	
	Adult Patients	31	158	20%	
STR-1	Pediatric and Adult Patients	451	451	100%	
PED-3	Pediatric Patients Only	160	160	100%	

MONTEREY COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	1	37	3%	Raw data count shows 28 out 37 patients total (75.7%). Some patients get counted multiple times due to ground and air records. The ESO system did not register some hospitals as trauma centers. Due to so many pediatric patients being flown, ground providers did not list destination, just transfer of care to air ambulance. Trauma Level 4 is not an option in ESO.
	Adult Patients	35	708	5%	Raw data count shows 669 out 707 patients total (94.6%). Some patients get counted multiple times due to ground and air records. The ESO system did not register some hospitals as trauma centers. Trauma Level 4 is not an option in ESO.
HYP-1	Pediatric Patients	4	6	67%	Raw data count shows 5 out of 10 patients total (50%).
	Adult Patients	347	476	73%	Raw data count shows 345 out of 475 patients (72.6%)
STR-1	Pediatric and Adult Patients	1025	1167	88%	Raw data count shows 944 out of 998 (94.6%)
PED-3	Pediatric Patients Only	97	123	79%	Raw data count shows 99 out of 123 patients (80.5%) total. Found cases where data says RR or SPO2 not reported, when ePCR clearly does have this documentation. Issue with ESO reporting.

MOUNTAIN COUNTIES EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	9	9	100%	
	Adult Patients	111	111	100%	
HYP-1	Pediatric Patients	2	8	25%	
	Adult Patients	27	67	40%	
STR-1	Pediatric and Adult Patients	168	200	84%	
PED-3	Pediatric Patients Only	13	13	100%	

NAPA COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	8	8	100%	
	Adult Patients	108	109	99%	
HYP-1	Pediatric Patients	1	2	50%	
	Adult Patients	102	128	80%	
STR-1	Pediatric and Adult Patients	337	357	94%	
PED-3	Pediatric Patients Only	51	51	100%	

NORTH COAST EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	1	1	100%	
	Adult Patients	152	194	78%	
HYP-1	Pediatric Patients	5	18	28%	
	Adult Patients	132	240	55%	
STR-1	Pediatric and Adult Patients	400	531	75%	
PED-3	Pediatric Patients Only	32	54	98%	

NORTHERN CALIFORNIA EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	0	7	0%	
	Adult Patients	43	95	45%	Bad documentation on 1 PCR - Aircraft went to Trauma center but documented a non-trauma hospital as destination. Following Indicator Spec Sheet exactly as written.
HYP-1	Pediatric Patients	0	0	0%	
	Adult Patients	42	101	42%	
STR-1	Pediatric and Adult Patients	228	254	90%	Agencies don't collaborate on putting same impressions. Numbers reflect an under reporting of actual clinical care. Following Indicator Spec Sheet exactly as written.
PED-3	Pediatric Patients Only	23	26	88%	

ORANGE COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	342	358	96%	einjury.03 and einjury.04 field documentation needs improvement, but a comparative analysis revealed a 97% adherence to (see below).
	Adult Patients	6,821	7,907	86%	protocol(P1-N435/D447). Certain providers differently document eResponse.07 other than listed criteria
HYP-1	Pediatric Patients	27	48	56%	Current data does not capture provision of patient's own food/drink or MICN order for breastfeeding as treatment administered.
	Adult Patients	1,988	2,080	96%	
STR-1	Pediatric and Adult Patients	4,076	4,652	88%	
PED-3	Pediatric Patients Only	691	741	93%	

RIVERSIDE COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	190	218	87%	Note: 7 records identified disposition as "transported to a landing zone" and destination was blank. Here, a HEMS unit subsequently transported the patient, and the Destination name can be found in that record. Using the CQM criteria as-is, there are two issues here. If the HEMS unit marked the call as a 911 transport, those calls would be duplicated in the Denominator count here (up to 3%). The 2nd issue is those records would count against the numerator. Most pts transported by helicopter EMS are transported to a trauma center which means the % for this measure in Riverside County is likely about 3% higher than what is being reported. CRITERIA SUGGESTION: Exclude records where destination is "blank" from Num. and Den. This may undercount the number of transported trauma cases but provide a more valid/representative measure of TRA-2.
	Adult Patients	3,758	4,047	93%	Note: 107 records identified disposition as "transported to a landing zone" and destination was blank. Here, a HEMS unit subsequently transported the patient, and the Destination name can be found in that record. Using the CQM criteria as-is, there are two issues here. If the HEMS unit marked the call as a 911

					transport, those calls would be duplicated in the Denominator count here (up to 3%). The 2nd issue is those records would count against the numerator. Most pts transported by helicopter EMS are transported to a trauma center which means the % for this measure in Riverside County is likely about 3% higher than what is being reported. CRITERIA SUGGESTION: Exclude records where the destination is "blank" from Num. and Den. This may undercount the number of transported trauma cases but provide a more valid/representative measure of TRA-2.
HYP-1	Pediatric Patients	19	71	27%	Due to the dual response system in Riverside County where Fire and Ambulance agencies respond to every call and produce separate ePCRs, post-analysis has been done to obtain patient level data. Results of the specification for this measure as written are as follows (AKA Response level data): Numerator= 25, Denominator = 79
	Adult Patients	2,327	2,835	82%	Post analysis done to obtain patient level data. Response level data is as follows: Numerator= 2697, Denominator = 3801
STR-1	Pediatric and Adult Patients	6,274	6,345	99%	Post analysis done to obtain patient level data. Response level data is as follows: Numerator= 7548, Denominator = 7772
PED-3	Pediatric Patients Only	1,389	1,410	99%	Post analysis done to obtain patient level data. Response level data is as follows: Numerator= 1687, Denominator = 1728

SAN BENITO COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	6	7	86%	
	Adult Patients	72	101	71%	
HYP-1	Pediatric Patients	0	1	0%	
	Adult Patients	27	60	45%	
STR-1	Pediatric and Adult Patients	71	107	66%	
PED-3	Pediatric Patients Only	16	24	67%	

SAN DIEGO EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	178	178	100%	Data includes EMS Agencies that report directly to the San Diego County EMS data reporting system.
	Adult Patients	2,607	2,767	94%	Data includes EMS Agencies that report directly to the San Diego County EMS data reporting system.
HYP-1	Pediatric Patients	8	12	67%	Data includes EMS Agencies that report directly to the San Diego County EMS data reporting system. With the implementation of NEMSIS 3.5 in January 2024, we had an issue with blood glucose documentation which was finally identified and fixed in June 2024
	Adult Patients	462	627	74%	Data includes EMS Agencies that report directly to the San Diego County EMS data reporting system. With the implementation of NEMSIS 3.5 in January 2024, we had an issue with blood glucose documentation which was finally identified and fixed in June 2025
STR-1	Pediatric and Adult Patients	2,766	3,205	86%	Data includes EMS Agencies that report directly to the San Diego County EMS data reporting system.
PED-3	Pediatric Patients Only	523	523	100%	Data includes EMS Agencies that report directly to the San Diego County EMS data reporting system.

**Reporting period for HYP-1 is July to December 2024

SAN JOAQUIN COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	29	30	97%	
	Adult Patients	620	645	96%	
HYP-1	Pediatric Patients	14	34	41%	
	Adult Patients	927	1,721	54%	
STR-1	Pediatric and Adult Patients	748	1,388	54%	
PED-3	Pediatric Patients Only	315	337	93%	

SAN LUIS OBISPO COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	18	19	95%	
	Adult Patients	379	412	92%	
HYP-1	Pediatric Patients	1	4	25%	
	Adult Patients	156	300	52%	
STR-1	Pediatric and Adult Patients	0	0	0%	See notes in table below.
PED-3	Pediatric Patients Only	45	45	100%	

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients				
	Adult Patients				
HYP-1	Pediatric Patients				
	Adult Patients				
STR-1	Pediatric and Adult Patients	533	533	100%	Stroke screening is reported using the ImageTrend Value itExam.088 in the SLOEMSA ePCR form, eVitals.29 in not used. Values are the same (Yes, No, Unknown)
PED-3	Pediatric Patients Only				

SAN MATEO COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	51	53	96%	
	Adult Patients	1,189	1,258	95%	
HYP-1	Pediatric Patients	2	3	67%	
	Adult Patients	373	511	73%	
STR-1	Pediatric and Adult Patients	1,702	2,099	81%	
PED-3	Pediatric Patients Only	311	316	98%	

SANTA BARBARA COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	0	1	0%	Utilization of "Transport by Anoth" brings in fire reports which skew data. Ambo provider uses "ground transport" value.
	Adult Patients	73	94	78%	Utilization of "Transport by Anoth" brings in fire reports which skew data. Ambo provider uses "ground transport" value.
HYP-1	Pediatric Patients	1	4	25%	
	Adult Patients	267	321	83%	
STR-1	Pediatric and Adult Patients	2	895	0%	Supplemental question used by SBCEMSA instead of eVitals.29
PED-3	Pediatric Patients Only	97	107	91%	

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	28	31	90%	eDisposition.30 has both Transport by Another EMS Unit values removed, and Ground Transport added to eResponse.07
	Adult Patients	662	699	95%	eDisposition.30 has both Transport by Another EMS Unit values removed, and Ground Transport added to eResponse.07
HYP-1	Pediatric Patients	1	4	25%	Individual data fields sorted to account for patients rather than responses.
	Adult Patients	267	321	83%	Individual data fields sorted to account for patients rather than responses.
STR-1	Pediatric and Adult Patients	893	895	100%	Stroke Scale Score substituted for supplemental question.
PED-3	Pediatric Patients Only	97	107	91%	Individual data fields sorted to account for patients rather than responses.

SANTA CLARA COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	130	132	98%	
	Adult Patients	2,042	2,096	97%	
HYP-1	Pediatric Patients	11	28	39%	
	Adult Patients	1,082	1,541	70%	
STR-1	Pediatric and Adult Patients	3,152	4,527	70%	
PED-3	Pediatric Patients Only	5	23	22%	More accurate representation per our report n=681 D=874 (78%)

SANTA CRUZ COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	9	12	75%	
	Adult Patients	213	291	73%	
HYP-1	Pediatric Patients	3	5	60%	
	Adult Patients	204	318	64%	
STR-1	Pediatric and Adult Patients	903	913	99%	
PED-3	Pediatric Patients Only	91	96	95%	

SIERRA-SACRAMENTO VALLEY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	136	151	90%	
	Adult Patients	3,222	3,196	101%	
HYP-1	Pediatric Patients	21	35	60%	
	Adult Patients	1,533	2,075	74%	
STR-1	Pediatric and Adult Patients	3,053	4,183	73%	
PED-3	Pediatric Patients Only	411	625	66%	

SOLANO COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	42	42	100%	
	Adult Patients	669	700	96%	
HYP-1	Pediatric Patients	1	1	100%	
	Adult Patients	391	392	100%	
STR-1	Pediatric and Adult Patients	762	762	100%	
PED-3	Pediatric Patients Only	85	85	100%	

STANISLAUS COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	80	83	96%	
	Adult Patients	2,419	2,572	94%	
HYP-1	Pediatric Patients	3	13	23%	
	Adult Patients	602	942	64%	
STR-1	Pediatric and Adult Patients	1,242	1,790	69%	
PED-3	Pediatric Patients Only	308	329	94%	

TUOLUMNE COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	0	1	0%	
	Adult Patients	10	12	83%	
HYP-1	Pediatric Patients	1	1	100%	
	Adult Patients	63	75	84%	
STR-1	Pediatric and Adult Patients	128	128	100%	
PED-3	Pediatric Patients Only	11	12	92%	

VENTURA COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	79	92	86%	
	Adult Patients	1,339	1,480	90%	
HYP-1	Pediatric Patients	1	7	14%	
	Adult Patients	612	858	71%	
STR-1	Pediatric and Adult Patients	0	0	0%	We don't currently collect eVitals.29, we have a local supplemental question for now. When using the local supplemental question for this measure the Denominator is 1424 and the Numerator is 1203 (1203/1424=84%).
PED-3	Pediatric Patients Only	98	114	86%	

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	79	92	86%	
	Adult Patients	1,339	1,480	90%	
HYP-1	Pediatric Patients	1	7	14%	
	Adult Patients	612	858	71%	
STR-1	Pediatric and Adult Patients	1,203	1,424	84%	We don't currently collect eVitals.29, we have a local supplemental question for now. When using the local supplemental question for this measure the Denominator is 1424 and the Numerator is 1203 (1203/1424=84%).
PED-3	Pediatric Patients Only	98	114	86%	

**Ventura County EMS provided an additional report utilizing their locally defined question for stroke.

YOLO COUNTY EMS AGENCY

Measure ID	Population(s)	Numerator (Subpopulation)	Denominator (Population)	Reported Value	Notes
TRA-2	Pediatric Patients	0	0	0%	Unable to populate due to problem with GRM ImageTrend elnjury.03
	Adult Patients	0	0	0%	
HYP-1	Pediatric Patients	3	3	100%	
	Adult Patients	114	118	97%	
STR-1	Pediatric and Adult Patients	593	593	100%	
PED-3	Pediatric Patients Only	27	59	46%	

QUESTIONS OR COMMENTS?



Additional information about the California Core Quality Measures Project, including reports for previous years, is accessible via the California Emergency Medical Services Authority Quality Improvement webpage at <https://emsa.ca.gov/quality-improvement/>.

For questions or comments about the California Core Quality Measures Report – CY 2024, please contact Audrey Vong at EMSDData@emsa.ca.gov.

California EMS System Core Quality Measures Report

Gavin Newsom
Governor
State of California

Kim Johnson
Secretary
Health and Human Services Agency

Elizabeth Basnett
Director
Emergency Medical Services Authority

Hernando Garzon, MD
Chief Medical Officer
Emergency Medical Services Authority

EMSA # SYS 100-24
Released
www.emsa.ca.gov