

EMERGENCY MEDICAL SERVICES AUTHORITY

11120 INTERNATIONAL DR., 2ND FLOOR
RANCHO CORDOVA, CA 95670
(916) 322-4336 FAX (916) 324-2875



August 10, 2023

David M. Magnino, EMS Administrator
Sacramento County EMS Agency
9616 Micron Ave, Ste 960
Sacramento, CA 95827

Dear Mr. Magnino,

This letter is in response to Sacramento County Emergency Medical Services (EMS) Agency's 2022 EMS, Trauma, St-Elevation Myocardial Infarction (STEMI), Stroke, and Quality Improvement (QI) plan submissions to the EMS Authority on May 15, 2023.

The EMS Authority has reviewed the EMS plan based on compliance with statutes, regulations, and case law. It has been determined that the plan meets all EMS system components identified in Health and Safety Code (HSC) § 1797.103 and is approved for implementation pursuant to HSC § 1797.105(b). Based on the transportation documentation provided, please find enclosed the ground exclusive operating area status, compiled by the EMS Authority.

The EMS Authority has also reviewed the Trauma, STEMI, Stroke, and QI plans based on compliance with Chapters 7, 7.1, 7.2, and 12 of the California Code of Regulations, Title 22, Division 9, and has been approved for implementation.

Per HSC § 1797.254, EMS Plans must be submitted to the EMS Authority annually. Sacramento EMS Agency will only be considered current if an EMS Plan is submitted each year.

Your 2023 EMS plan will be due on or before August 10, 2024. Concurrently with the EMS plan, please submit an annual Trauma, STEMI, Stroke, and QI plan.

If you have any questions regarding the EMS Plan review, please contact Mr. Mark Olivas, Interim EMS Plans Coordinator, at (916) 204-7885 or mark.olivas@emsa.ca.gov.

Sincerely,

Tom McGinnis

Tom McGinnis
Chief, EMS Systems Division

Enclosure:
AW: rd

11120 INTERNATIONAL DR., 2ND FLOOR
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[illegible]

County Executive

Ann Edwards

Deputy County Executive

Chevon Kothari

Social Services

**Department of Health Services**

Timothy W. Lutz, Director

Divisions

Administration

Behavioral Health

Primary Health

Public Health

County of Sacramento

July 23, 2023

Elizabeth Basnett, Interim Director

Emergency Medical Services Authority

11120 International Drive, Suite 200

Rancho Cordova, CA 95670

Dear Ms. Basnett:

Please see the **revised** annual updates to the 2022 Sacramento County Emergency Medical Services (EMS) Plan, the 2022 Trauma System Annual Update, the 2022 Annual Quality Improvement Program (QIP), 2022 STEMI Critical Care System Annual Update and the 2022 Stroke Critical Care System Annual Update. These are submitted in accordance with *Health and Safety Code Sections 1797.103 and 1797.250 – 1797.258 and Title 22, Division 9, Chapter 7.1, STEMI Critical Care System, Chapter 7.2, Stroke Critical Care System and Chapter 12, EMS System Quality Improvement.*

EMS PLAN ANNUAL UPDATE

No significant changes were made to the EMS Plan during the past year. Key items are noted in each section.

FORM 1: EMS Plan System Assessment Summary**A. System Organization and Management****1.01 – Organizational Structure:**

- In July 2022, the EMS Agency moved from Primary Health Division to Public Health Division within the Department of Health Services. The EMS Administrator now reports directly to the Deputy Director of Public Health, who is also the Sacramento County's Public Health Officer.

B. Manpower and Training**2.13 – Critical Care Paramedic Training and Accreditation:**

- In 2022, a private provider continued to request this program but the Sacramento County EMS Agency (SCEMSA) does not have staff nor funding to oversee the program at this time.

D. Response and Transportation

4.05 – Response Time Standards:

- SCEMSA utilizes the National Response Time Standards as its benchmarks. In 2022, SCEMSA did not complete the plans to implement Sacramento County Response Time Standards. SCEMSA continues to work on the process to establish County Response Time Standard by end of calendar year 2023.

4.07 – Creation of Exclusive Operating Area and Approval:

- Sacramento County is a Non-Exclusive Operating Area.

E. Assessment of Hospitals and Critical Care Centers

5.04 – Critical Care System:

- SCEMSA's Critical Care System contains Trauma, STEMI and Stroke programs since 2020.

F. Data Collection and Evaluation

6.04 – Electronic Patient Health Information Exchange:

- At this time, there are no plans to implement a patient health information exchange program.

6.09 – Ambulance Patient Offload Times:

- EMS stakeholders established the Ambulance Patient Offload Time (APOT) metric at 20 minutes. In 2022, the system wide 90th percentile APOT was sixty-eight and a half (68.5) minutes. In 2021 the APOT was sixty-one (61) minutes. This is an increase of seven and a half (7.5) minutes.

6.10 – Data Collection from Specialty Care Centers:

- STEMI and Stroke – Designated STEMI and Stroke centers submitted electronic data through American Heart Association, "Get with the Guidelines (GWTG) – Cardiac Artery Disease," for STEMI and GWTG – Stroke for Stroke hospitals.

G. Public Information and Education

7.05 – Public Training and Education on Disaster Preparedness:

- SCEMSA works in partnership with the Sacramento County Public Health Division in conducting public education through press and social media releases.

H. Disaster Medical Response

8.14 – Mutual Aid Requests in EOA Areas:

- Not applicable. Sacramento County is a non-exclusive operating area.

TABLE 2: Manpower and Training

Sacramento County EMS Agency Certification:

- There was a slight decrease in the number of personnel investigations in 2022 (N=35) as compared to 2021 (N = 38). During 2022, SCEMSA's new full time EMS Specialist continued to improve the Professional Standards program, including personnel investigations. SCEMSA began working on an automatically generated report from the on-line application software to meet the requirements of Section 1797.229 Health and Safety Code.

Available Training:

- Nearly all prehospital providers are continuing education (CE) providers.

UPDATE:

TABLE 3: Communication:

Medical Control: Sections 100170 and 100360, Title 22, Division 9, CA Code of Regulations:

- SCEMSA Medical Director maintains medical control by establishing medical policies and procedures directing all aspects of prehospital care from emergency medical dispatch, field providers to receiving hospitals. These medical control policies and procedures include both standing orders and direct voice communications between the field and hospitals.
- SCEMSA medical control policies and procedures apply to both ground units and air provider units when based in Sacramento County.

TABLE 4: Response and Transportation

System Standard Response Times (90th Percentile):

- With over three (3) years of data submitted to California EMS Information System (CEMSIS) from all ALS providers, SCEMSA provides updates of system wide 90th percentile standard response times to stakeholders during regular meetings.

Provider Resource:

- SCEMSA works with current basic life support (BLS) providers to submit data into CEMSIS. SCEMSA's ALS and BLS applications require providers to submit CEMSIS data.

UPDATE:

TABLE 7: Disaster Medical Response:

Disaster Response and Utilizes of Medical Health Operational Area Coordinator (MHOCA): Sections 1797.152 and 1797.153 of CA Health and Safety Code

- SCEMSA follows and utilizes the seventeen (17) function of the MHOAC program in the creation of the County's Medical and Health Disaster Plan.
- SCEMSA MHOAC use the 17 functions in coordination of resources during a disaster and integrate the coordination with the Region IV, Regional Disaster Medical Health Coordinator (RDMHC) program. This includes when resources are needed from outside of Sacramento County.
- SCEMSA administrator shares the MHOAC responsibilities with Sacramento County Public Health Officer on a daily basis.

TRAUMA SYSTEM STATUS REPORT

The narrative includes updated information providing improvements through the Sacramento County Trauma System. Key changes included:

Trauma System Goals and Objectives:

- Trauma Review Committee (TRC) provides unique region wide educational opportunities to physicians and administrators.
- SCEMSA works closely with the trauma centers to ensure accurate data submission to the CA Trauma Registry. Data is presented in the quarterly TRC meetings.
- Due to the COVID-19 pandemic, trauma center inspections and certifications by the American College of Surgeons, Committee on Trauma were conducted virtually for this year.

System Performance Improvement:

- Due to the continued COVID-19 pandemic, the TRC met virtually on a quarterly basis.
- Worked with the TRC to update several prehospital trauma policies, including adding a new policy to address clinical and operational decision-making relative to traumatic arrest.
- Reviewed EMS provider data and identified EMS-transports with a Trauma related Primary Impression per hospital. The data indicates the number of patients, meeting trauma triage criteria (TTC) and transported to a non-trauma hospital, in the majority of the patients paramedics identified and documented paramedic judgement or high-speed motorized vehicle accidents as the positive TTC.

Division of Public Health

Olivia Kasirye, MD, MS
Public Health Officer



Sacramento County Emergency Medical Services Agency

9616 Micron Ave Suite 960
Sacramento, CA 95827
phone (916) 875-9753
www.dhs.saccounty.gov/pub/ems

QUALITY IMPROVEMENT PROGRAM ANNUAL UPDATE

2022 Highlights:

- Continue to monitor documentation compliance and trend improvements via quality improvement audits and documentation dashboards in system monitoring.
- Developed and implemented new dashboards to report data on specialty services and 9-1-1 response times.
- Improved tracking of ambulance patient off-load times (APOT). Provided monthly comparisons between 2021 and 2022 APOT data to stakeholders.
- The posting of the following APOT reports on the EMS Agency's webpage, which are updated bi-weekly:
 - Ambulance Patient Offload Times (APOT) per Month for Sacramento County
 - Ambulance Patient Offload Times (APOT) per Month by Hospital
 - Ambulance Patient Offload Times (APOT) Previous Calendar Week per Hospital

Active Projects include the following:

- Continued focus on documentation, training and monitoring of glucose checks in Stroke patients and Stroke numerical values.
- Monitored 'Scene Times' for STEMI and trauma patient with a positive trauma triage criteria.

2022 STEMI CRITICAL CARE SYSTEM ANNUAL UPDATE

- Expanded the EMS Agency's access to hospital data via the American Heart Association "Get With the Guidelines" (GWTG) data registry.
- Completed the GWTG data integration in early 2022, for more robust reporting in the next plan reporting cycle.
- Worked with the STEMI Advisory Committee to identify areas needing improvement, implements process improvement and training/education, and recognizes excellence in performance and delivery of care.

2022 STROKE CRITICAL CARE SYSTEM ANNUAL UPDATE

- Worked with Stroke Advisory Committee to review and approve Policy Document (PD) 2529 "Stroke Receiving Center Designation" and PD 6002 "Stroke Critical Care System General Provisions" without changes.
- Continues to evaluate the system needs based on communication, review of performance data, and suggested improvement initiatives within our Stroke Community to establish a divert care policy to Comprehensive Stroke hospitals.
- Worked with the Stroke Advisory Committee to expand the EMS Agency's access to hospital data via the American Heart Association "Get With the Guidelines" (GWTG) data registry.
- Completed the GWTG data integration in 2022, for more reporting in the next plan reporting cycle.

Please do not hesitate to call me at (916) 875-9753 if you have questions.

Sincerely,



David M. Magnino
EMS Administrator

Attachments: (5)
EMS Plan Annual Update
Trauma System Annual Update
Quality Improvement Program Annual Update
STEMI Critical Care System Annual Update
Stroke Critical Care System Annual Update

Cc: Oliva Kasirye, MD, Health Officer, DHS, Public Health

Division of Public Health

Olivia Kasirye, MD, MS
Public Health Officer



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Sacramento County 2022 EMS Plan Ground Exclusive Operating Areas	Non-Exclusive	Exclusive	Method to Achieve Exclusivity	Emergency Ambulance	ALS	LALS	All Emergency Ambulance Services	9-1-1 Emergency Response	7-digit Emergency Response	ALS Ambulance	All CCT Ambulance Services	IFT	Standby Service with Transport Auth.
ZONE	EXCLUSIVITY			TYPE			LEVEL						NOTES
Sacramento County	X						X						

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



A. SYSTEM ORGANIZATION AND MANAGEMENT	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
1.01 Organizational Structure	✓		
1.02 EMS Administration Budget	✓		
1.03 Employment of Medical Director	✓		
1.04 Medical Control	✓		
1.05 Expert Consultation	✓		
1.06 Public Input on Plans, Policies, Procedures	✓		
1.07 Establishment of Policies, Procedures, Protocols	✓		
1.08 Availability of Policies, Procedures, Protocols	✓		
B. MANPOWER AND TRAINING	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
2.01 EMT & AEMT Certification in Central EMT Registry			There is no AEMT certified in Sacramento County. There is no plan to implement an AEMT Program in the future.
	✓		

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



B. MANPOWER AND TRAINING (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
2.02 EMT & AEMT Discipline	✓		
2.03 EMT & AEMT Certification Status	✓		
2.04 EMT & AEMT Certification Reporting to National Practitioners Database	✓		
2.05 Paramedic Accreditation	✓		
2.06 RN & MICN Standards	✓		
2.07 EMT, AEMT, Paramedic Training Program Compliance	✓		There are no AEMT Training Program(s) in Sacramento County.
2.08 EMT Training Course Challenge	✓		
2.09 EMS Provider Reporting of EMT & AEMT Actions or Omissions	✓		
2.10 Reporting of Paramedic Actions or Omissions	✓		

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



B. MANPOWER AND TRAINING (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
2.11 Suspension of Paramedic License			Not Applicable
2.12 Prophylactic Medical Treatment for Public Safety Personnel, Lifeguards, EMTs, AEMTs, & Paramedics	✓		
2.13 Critical Care Paramedic Training & Accreditation		✓	At this time there is no plan to implement Critical Care Paramedic Training
2.14 Training Standards for EMTs & Paramedics Managing Complex Patients	✓		
2.15 Procedures for Management of Complex Patients	✓		
C. COMMUNICATIONS	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
3.01 Review and Approval of Medical Dispatch Centers	✓		
3.02 City and Fire District Dispatch	✓		
3.03 Medical Dispatch Center Protocols	✓		

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



C. COMMUNICATIONS (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
3.04 EMD Certification	✓		
3.05 Medical Communication System Plan	✓		
3.06 Emergency System for Inter-hospital Communication	✓		
D. RESPONSE AND TRANSPORTATION	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
4.01 Primary Response Area	✓		
4.02 Provider Selection	✓		
4.03 Authorization of Advanced EMT & Paramedic Service Providers	✓		
4.04 Advanced Life Support Provider Application	✓		
4.05 Response Time Standards		✓	At this time, Sacramento County does not have Response Time standards established. We currently utilize the National Response Time Standards as bench marks. Discussion around possible implementation by end of calendar year 2023.
4.06 System Status Management	✓		
4.07 Creation of Exclusive Operating Area and Approval		✓	Sacramento County is an Non-Exclusive Operating Area. There is no plan to establish Exclusive Operating Areas in the future

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



E. ASSESSMENT OF HOSPITALS AND CRITICAL CARE CENTERS	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
5.01 Hospital and Health Facility Designation	✓		
5.02 Acute Care Facility Assessment and Specialty Care System Development	✓		
5.03 Patient Safety and Non-Permit Facility in Rural Area			Not applicable
5.04 Critical Care System	✓		
F. DATA COLLECTION AND EVALUATION	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
6.01 Data Management System Compliance with CEMESIS/NEMESIS	✓		
6.02 Electronic Health Record Data	✓		
6.03 Integrated Data Management System using CEMESIS/NEMESIS	✓		
6.04 Electronic Patient Health Information Exchange		✓	No plan to implement program in near future.

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



F. DATA COLLECTION AND EVALUATION (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
6.05 Prehospital EMS and Specialty Care Data through CEMSIS/NEMSIS	✓		
6.06 EMS QA/QI Program	✓		
6.07 EMS Service Provider QI Program	✓		
6.08 EMS Quality Core Measures	✓		
6.09 Ambulance Patient Offload Times		✓	APOT metric set at 20 minutes. In 2022, the 90th Percentile APOT time system wide was: 68.47 minutes.
6.10 Data Collection from Specialty Care Centers	✓		We currently receive data from the three trauma centers. In 2022, all STEMI/Stroke hospitals submitted data through 'Get With the Guideline - CAD' and 'GTWG- Stroke' for hospital data.
G. PUBLIC INFORMATION AND EDUCATION	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
7.01 Public Information Improvement	✓		
7.02 Program for Public Awareness of EMS System	✓		
7.03 Public Training on First Aid, Bleeding Control, CPR	✓		

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



G. PUBLIC INFORMATION AND EDUCATION (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
7.04 Public Education on Injury and Illness Prevention	✓		
7.05 Public Training and Education on Disaster Preparedness	✓		In partnership with County Public Health
H. DISASTER MEDICAL RESPONSE	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
8.01 Multi-Casualty Response Plans Using ICS/SEMS	✓		
8.02 Medical Response Plans	✓		
8.03 Distribution of Disaster Casualties	✓		
8.04 MHOAC Coordinator	✓		
8.05 Situation Status Reporting & Communication of Emergency Requests	✓		
8.06 Identification of EMS Resources	✓		
8.07 Medical Mutual Aid Agreements	✓		

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



H. DISASTER MEDICAL RESPONSE (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
8.08 Disaster Medical Training of EMTs & Paramedics	✓		
8.9 Integration of Hospitals' Disaster Emergency Plan	✓		
8.10 Development of Medical & Health Disaster Plan	✓		
8.11 Hospital Evacuation	✓		
8.12 Increase in Prehospital EMS Needs	✓		
8.13 Specialty Care Center Role in Disasters	✓		
8.14 Mutual Aid Requests in EOA Areas			Not applicable - Sacramento County is a Non-Exclusive Area.

FORM 3: AMBULANCE OPERATING ZONE SUMMARY FORM



Date:

April 11, 2023

Local EMS Agency or County Name:

Sacramento County EMS Agency

Area Description: (e.g., Zone 1, Zone A)

Sacramento County

Title:

Sacramento County

Geographic Description: (Also attach map)

Geographic boundaries of Sacramento County.

Current Provider Name: (include legal, fictitious, and dba)

1. Alpha One Ambulance, 2. America West, 3. American Medical Response, Inc. 4. Amwest, 5. Bay Medic Transportation, 6. CalMAT EMSA, 7. California Highway Patrol, Capitol Protection Division, 8. California Highway Patrol, Office of Air Operations, 9. CALSTAR Air Ambulance, 10. City of Isleton Fire Department, 11. Cosumnes CSD Fire District, 12. Folsom City Fire Department, 13. Herald Fire Protection District, 14. Medic Ambulance Services, 15. NorCal Ambulance 16. Performance EMS, 17. Pro Transport 1 Ambulance, 18. REACH Air Ambulance, 19. River Delta Fire District, 20. Sacramento City Fire Department, 21. Sacramento County Airport Fire, 22. Sacramento Metropolitan Fire District, 23. Sacramento Valley Ambulance, 24. Trauma Life Care (TLC) Inc., 25. Versa Care Emergency Medical Services, 26. Wilton Fire Protection District.

☐

Exclusive

☒

Non - Exclusive

Type of Exclusivity (HSC § 1797.85): (Check all applicable boxes)

☐

Emergency Ambulance

☐

Advanced Life Support (ALS)

☐

Limited Advanced Life Support (LALS)

Scope of Operations: (Check one box)

☐

9-1-1 Emergency Ambulance

☐

7-Digit Emergency Ambulance

☐

ALS Ambulance

☐

All ALS Ambulance Services
(9-1-1, 7-Digit, IFT)

☐

All CCT/ALS Ambulance Services
(CCT, 9-1-1, 7-Digit)

☐

BLS Non-Emergency Services
(IFT)

☐

Critical Care Transport

☐

Standby Service with Transport Authorization

☒

All Emergency Services
(9-1-1, 7-Digit, IFT, CCT, Non-Emergency, Standby Transportation)

☐

Other

TABLE 1: SYSTEM ORGANIZATION AND MANAGEMENT

EMS Agency Overview

Local EMS Agency: SACRAMENTO COUNTY

Plan Year: 2022

EMS Director/Administrator: DAVID MAGNINO

EMS Medical Director: DR. HERNANDO GARZON

Physical Address: 9616 MICRON AVE. SUITE 960
SACRAMENTO, CA 95827

Type of Agency:

☒ County Health Services Agency

☐ Public Health Department

☐ Joint Powers Agency

☐ Non-Health County Department

☐ Private Non-Profit Entity

Number of Counties in Local EMS Agency: 1
Counties within Regional Agency: _____

Population of EMS system: 1,576,618

Local EMS Agency responsibility:

☒ Hospital Preparedness Program

☒ Public Health Emergency Preparedness Program

☐ Other:

EMS Agency Organization

Organizational Charts Attached: ☐ County Structure ☒ EMS Agency

EMS Agency Budget

Fiscal Year: 2021-22

Expenses for EMS agency administration services only:

Expense Category	Total
Salaries and Benefits (not contracted staff)	\$ 1,259,807
Contract Services	\$ 320,700
Services and Supplies	\$ 1,894,315
Total Expenses*	\$ 3,474,822

**TABLE 1: SYSTEM ORGANIZATION AND MANAGEMENT****EMS Agency Budget (cont.)**

Revenue received for EMS agency administration services only:

Revenue Category	Total
County General Fund (local tax funds, county health realignment funds, etc.)	\$ 550,179
County Health Realignment Funds	\$ N/A
Maddy EMS Fund (LEMSA discretionary funds only)	\$ 1,723,000
Grant Revenue	\$ 43,175
Fees	\$ 990,000
Other:	\$ 168,468
Total Revenue*	\$ 3,474,822

Provide brief explanation if totals do not equal: _____

EMS Agency Fee StructureEffective Date of Fees: 07/01/2021

	Item	Fee	Comment
Certifications	First responder certification	\$	
	First responder re-certification	\$	
	EMS dispatcher certification	\$	
	EMS dispatcher re-certification	\$	
	EMT certification	\$ 50.28	
	EMT recertification	\$ 50.28	
	EMT accreditation	\$	
	EMT re-accreditation	\$	
	AEMT certification	\$	
	AEMT recertification	\$	
	Paramedic accreditation	\$ 95.32	
	Paramedic re-accreditation	\$ 95.32	
	MICN/ARN certification	\$ 37.57	
	MICN/ARN recertification	\$ 37.57	
Program Approval	EMR training program approval	\$ 1,653.75	
	EMT training program approval	\$ 1,625.28	
	AEMT training program approval	\$	
	Continuing education provider	\$ 457.25	
	Paramedic training program approval	\$ 8,846.82	
	EMS dispatch program approval	\$	
	MICN/ARN training program approval	\$ 948.48	



TABLE 1: SYSTEM ORGANIZATION AND MANAGEMENT

EMS Agency Fee Structure (cont.)

	Item	Fee	Comment
Designation	Base hospital application	\$	
	Base hospital designation	\$	
	Emergency receiving center designation	\$	
	Pediatric facility approval	\$	
	Pediatric facility designation	\$	
	STEMI/Cardiac center application	\$	
	STEMI/Cardiac center designation	\$ 14,333 / 7,166	In County / Out of County
	Stroke center application	\$	
	Stroke center designation	\$ 14,333 / 7,166	In County / Out of County
	Trauma center application	\$	
	Trauma center designation	\$ 129,650.75 / 71,053.27 70,732.66 / 5,837.96	UC Davis / Mercy San Juan / Kaiser Sacramento / Sutter Roseville
Other	Ambulance licensure	\$	
	Ambulance vehicle permits	\$	
	Ambulance franchise fee	\$	
	Paramedic course tuition	\$	
	Other: _____	\$	

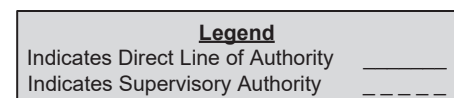
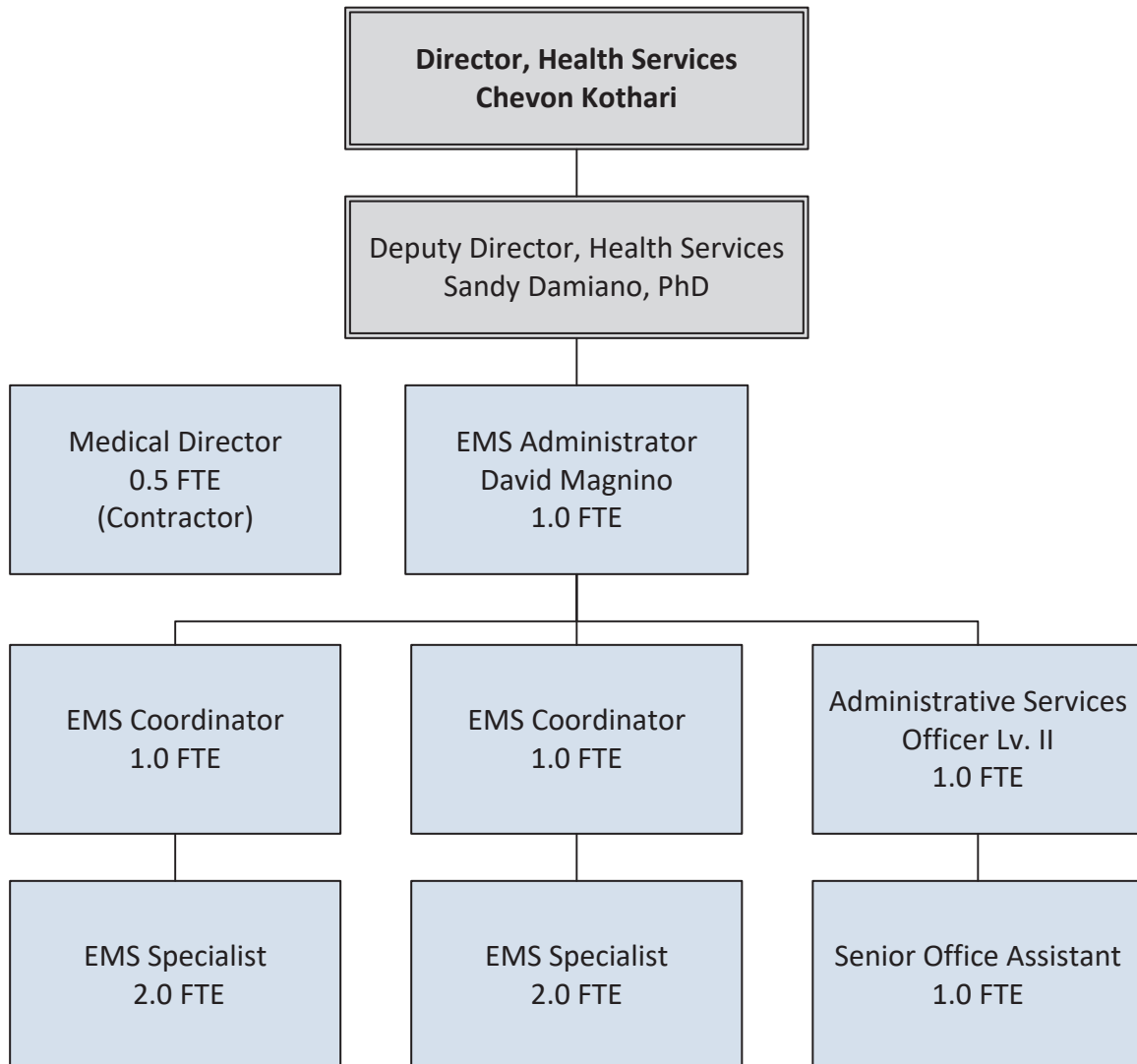
EMS Agency Staffing

Total full-time equivalent (FTE) staff dedicated to EMS administration: 9.5

Roles	Classification	Contract (Yes/No)	FTE	Annual Salary Range	Actual Annual Salary	Benefits (% of Salary)	Benefits (Cost)
EMS Administrator	EMS Administrator	No	1.0	\$ 193,713-208,441	\$ 208,441	28 %	\$ 57,863
Asst./Deputy EMS Administrator				\$	\$	%	\$
EMS Medical Director	Medical Director	Yes	0.5	\$	\$ 122,500	0 %	\$ 0
EMS Coordinator	EMS Coordinator	No	1.0	\$ 139,586-165,963	\$ 133,456	31 %	\$ 51,190
EMS Specialist	EMS Specialist	No	1.0	\$ 109,899-129,846	\$ 114,534	34 %	\$ 39,460
CQI Coordinator				\$	\$	%	\$
Trauma Coordinator				\$	\$	%	\$
EMS Analyst				\$	\$	%	\$
Senior Procedures Analyst (IT)				\$	\$	%	\$
Administrative Assistant	Admin Svc Officer 2	No	1.0	\$ 123,886-146,871	\$ 146,871	32 %	\$ 46,836
Office Assistant III	Senior OA	No	1.0	\$ 72,733-84,680	\$ 81,481	39 %	\$ 31,921
EMS Specialist	EMS Specialist	No	1.0	\$ 109,899-129,846	\$ 129,846	33 %	\$ 42,952
EMS Specialist	EMS Specialist	No	1.0	\$ 109,899-129,846	\$ 124,493	34 %	\$ 41,731
EMS Specialist	EMS Specialist	No	1.0	\$ 109,899-129,846	\$ 109,899	35 %	\$ 38,403
EMS Coordinator	EMS Coordinator	No	1.0	\$ 139,586-165,963	\$ 133,456	31 %	\$ 51,190

(09/2019)

FY 2021-22
Sacramento County
Department of Health Services, Primary Health
Emergency Medical Services
Total FTE = 9.5



**TABLE 2: MANPOWER AND TRAINING**County: SacramentoReporting Year: 2022***EMS Agency Training Program***

Do you have a process for approving EMS education programs and for monitoring and withdrawing approvals of the EMS education programs to ensure continued compliance with statute?

☒ Yes ☐ No

Do you have an EMR Training Program?

☒ Yes ☐ No***EMS Agency Certification***

	EMT - I	EMT - II	EMT - P	MICN	NON-EMT – I (Public Safety)
Total certified	855		820	142	21
Number newly certified this year	414		141	33	10
Number recertified this year	437		679	108	11
Total accredited on July 1 of reporting year	448		475	71	12
Number of certification reviews resulting in:					
• Formal investigations	25		10		
• Probation	4				
• Suspensions	N/A				
• Revocations	1				
• Denials	2				
• No action taken	4		10		
Number of personnel authorized/certified in:					
• Early defibrillation					



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>#34-4870</u>		Expiration Date of Training Program: <u>7/26/23</u>	
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
		Program Cost: Basic <u>\$0.00</u> Refresher <u>\$0.00</u>	
Training Institution: <u>AlphaOne Ambulance</u>		Phone Number: <u>916-635-1111</u>	
Address: <u>10461 Old Placerville Rd, Suite 110</u> <u>Sacramento, CA 95827</u>		Contact Name: <u>Matthew Burruel</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													58	2
Number of students completing training													343	5



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>3400</u>	Expiration Date of Training Program: <u>various</u>				
Student Eligibility: <u>Open to GP</u> <small>(Open to general public or restricted)</small>	Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input checked="" type="checkbox"/> EMT-P <input checked="" type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education				
Program Cost: Basic <u>46 per credit</u> Refresher <u> </u>					
<table style="width: 100%;"> <tr> <td style="width: 50%;"> Training Institution: <u>American River College</u> </td> <td style="width: 50%;"> Phone Number: <u>916-484-8843</u> </td> </tr> <tr> <td> Address: <u>4700 College Oak Drive</u> <u>Sacramento, CA 95814</u> </td> <td> Contact Name: <u>Dr. Grant Goold</u> </td> </tr> </table>		Training Institution: <u>American River College</u>	Phone Number: <u>916-484-8843</u>	Address: <u>4700 College Oak Drive</u> <u>Sacramento, CA 95814</u>	Contact Name: <u>Dr. Grant Goold</u>
Training Institution: <u>American River College</u>	Phone Number: <u>916-484-8843</u>				
Address: <u>4700 College Oak Drive</u> <u>Sacramento, CA 95814</u>	Contact Name: <u>Dr. Grant Goold</u>				

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	5				1		0						27	
Number of students completing training	100				17								27	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-3500</u>	Expiration Date of Training Program: <u>CE/EMT-1/17/24; Paramedic 10/31/23</u>				
Student Eligibility: <u>Open</u> <small>(Open to general public or restricted)</small>	Program Level: <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> EMR <input checked="" type="checkbox"/> Continuing Education </div> <div> <input type="checkbox"/> AEMT <input type="checkbox"/> Public Safety </div> <div> <input checked="" type="checkbox"/> EMT-P <input type="checkbox"/> First Aid </div> </div>				
Program Cost: Basic <small>\$1700 EMT; \$15,000 Para</small> <u> </u> Refresher <u> </u>					
<table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> Training Institution: <u>California State University, Sacramento, College of Continuing Education</u> </td> <td style="width: 50%; vertical-align: top;"> Phone Number: <u>916-278-4846</u> </td> </tr> <tr> <td style="vertical-align: top;"> Address: <u>3000 State University Drive</u> <u>Sacramento, CA 95819</u> </td> <td style="vertical-align: top;"> Contact Name: <u>Kim Ramirez</u> </td> </tr> </table>		Training Institution: <u>California State University, Sacramento, College of Continuing Education</u>	Phone Number: <u>916-278-4846</u>	Address: <u>3000 State University Drive</u> <u>Sacramento, CA 95819</u>	Contact Name: <u>Kim Ramirez</u>
Training Institution: <u>California State University, Sacramento, College of Continuing Education</u>	Phone Number: <u>916-278-4846</u>				
Address: <u>3000 State University Drive</u> <u>Sacramento, CA 95819</u>	Contact Name: <u>Kim Ramirez</u>				

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	11				3								3	
Number of students completing training	229				75; 125 in progress								91	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-4980</u>		Expiration Date of Training Program: <u>10/27/24</u>	
Student Eligibility: <u>Public</u> (Open to general public or restricted)		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input checked="" type="checkbox"/> Public Safety <input checked="" type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
Program Cost: Basic <u>100</u> Refresher <u>80</u>			
Training Institution: <u>Capital City CPR LLC</u>		Phone Number: <u>9165263683</u>	
Address: <u>4311 Attawa Ave #100</u> <u>Sacramento, CA</u>		Contact Name: <u>Ryan Armstrong</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													2	
Number of students completing training													20	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-1090</u>		Expiration Date of Training Program: <u>3/31/2023</u>	
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
Program Cost: Basic _____ Refresher _____			
Training Institution: <u>Cosumnes Fire Department</u>		Phone Number: <u>916-405-7100</u>	
Address: <u>10551 E Stockton Blvd</u> <u>Elk Grove, CA 95624</u>		Contact Name: <u>Julie Carrington</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													37
Number of students completing training													975



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-4900</u>		Expiration Date of Training Program: <u>1/19/25</u>	
Student Eligibility: <u>Open to General Public</u> <small>(Open to general public or restricted)</small>		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
		Program Cost: Basic <small>0 for Dignity Employee</small> _____ Refresher <small>0 for Dignity Employee</small> _____	
Training Institution: <u>Dignity Health/ Common Spirit</u>		Phone Number: <u>513-276-0756</u>	
Address: <u>3400 Data Drive, Rancho Cordova</u> <u>CA 95670</u>		Contact Name: <u>Monica Bourke</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0	0	0	0	0	0	0	0	0	0	0	11	427
Number of students completing training	0	0	0	0	0	0	0	0	0	0	0	0	27148	27148



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-4860</u>		Expiration Date of Training Program: <u>03/24/24</u>	
Student Eligibility: <u>restricted</u> (Open to general public or restricted)		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
Program Cost: Basic <u>0</u>		Refresher <u>0</u>	
Training Institution: <u>DMAT CA-11</u>		Phone Number: <u>(916) 606-5205</u>	
Address: <u>10161 Croydon Way, #2</u> <u>Sacramento, CA 95827</u>		Contact Name: <u>Ed Miles</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													3	
Number of students completing training													23	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-4970</u>		Expiration Date of Training Program: <u>8/15/2024</u>	
Student Eligibility: <u>General Public</u> <small>(Open to general public or restricted)</small>		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
		Program Cost: Basic <u>varies</u> Refresher <u>varies</u>	
Training Institution: <u>Everyday Heroes Training Center</u>		Phone Number: <u>916-607-0001</u>	
Address: <u>9275 E. Stockton Blvd., Suite 400</u> <u>Elk Grove, CA 95624</u>		Contact Name: <u>Rob Juner</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													85	58
Number of students completing training													348	95



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: _____		Expiration Date of Training Program: <u>10/31/2023</u>	
Student Eligibility: <u>Open to general Public</u> (Open to general public or restricted)		Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input type="checkbox"/> Continuing Education	
Program Cost: Basic _____ Semester cost _____ Refresher _____			
Training Institution: <u>Folsom Lake College-Rancho Cordova Center</u>		Phone Number: <u>(916) 996-8601</u>	
Address: <u>10259 Folsom Blvd</u> <u>Rancho Cordova, CA 95670</u>		Contact Name: <u>Mark Swink</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	0	0												
Number of students completing training	0	0												

TABLE 2: MANPOWER AND TRAINING



Available Training

Continuing Education Number: <u>34-1030</u>	Expiration Date of Training Program: <u>1-21-24</u>				
Student Eligibility: <u>Restricted</u> <small>(Open to general public or restricted)</small>	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education				
Program Cost: Basic <u>0</u> Refresher <u>0</u>					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> Training Institution: <u>Folsom Fire Department</u> </td> <td style="width: 50%; vertical-align: top;"> Phone Number: <u>916-461-6310</u> </td> </tr> <tr> <td style="vertical-align: top;"> Address: <u>535 Glenn Dr</u> <u>Folsom CA 95630</u> </td> <td style="vertical-align: top;"> Contact Name: <u>Mark Piacentini</u> </td> </tr> </table>		Training Institution: <u>Folsom Fire Department</u>	Phone Number: <u>916-461-6310</u>	Address: <u>535 Glenn Dr</u> <u>Folsom CA 95630</u>	Contact Name: <u>Mark Piacentini</u>
Training Institution: <u>Folsom Fire Department</u>	Phone Number: <u>916-461-6310</u>				
Address: <u>535 Glenn Dr</u> <u>Folsom CA 95630</u>	Contact Name: <u>Mark Piacentini</u>				

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													4	
Number of students completing training													70	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-4920</u>		Expiration Date of Training Program: <u>01/15/2024</u>	
Student Eligibility: <u>EMT and above</u> (Open to general public or restricted)		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
Program Cost: Basic <u>\$2990</u>		Refresher <u> </u>	
Training Institution: <u>International School of Tactical Medicine</u>		Phone Number: <u>760-880-4102</u>	
Address: <u>P.O. Box 2609</u> <u>Rancho Mirage, CA 92270</u>		Contact Name: <u>Katie Heiskell</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													2	
Number of students completing training													Unknown	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-2090</u>	Expiration Date of Training Program: <u>02/28/2024</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>Kaiser Permanente</u>	Phone Number: <u>916-973-6626</u>
Address: <u>2025 Morse Ave</u> <u>Sacramento, Ca 95825</u>	Contact Name: <u>Rich Meidinger</u>

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													3	
Number of students completing training													46	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number:	<u>34-2060</u>	Expiration Date of Training Program:	<u>9/29/2024</u>
Student Eligibility:	<u>restricted</u> (Open to general public or restricted)	Program Level:	<input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost:		Basic	Refresher
Training Institution:	<u>Kaiser Permanente South Sacramento</u>	Phone Number:	<u>916-201-4265</u>
Address:	<u>6600 Bruceville Road</u> <u>Sacramento CA 95823</u>	Contact Name:	<u>Wendin Gulbransen</u>

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													13
Number of students completing training													246



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number:	<u>34-3300</u>	Expiration Date of Training Program:	<u>07/05/2024</u>
Student Eligibility:	<u>Open to general public</u> (Open to general public or restricted)	Program Level:	<input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input type="checkbox"/> Continuing Education
		Program Cost:	Basic <u>\$46 per unit</u> Refresher <u>\$46 per unit</u>
Training Institution:	<u>Los Rios Community College District - CRC</u>	Phone Number:	<u>916-691-7390</u>
Address:	<u>8401 Center Parkway</u> <u>Sacramento, CA 95623</u>	Contact Name:	<u>Kris Hubbard - Interim Dean</u>

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	2	0												
Number of students completing training	54	0												



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-2020</u>	Expiration Date of Training Program: <u>6/16/2024</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>Mercy San Juan</u>	Phone Number: <u>916-962-8721</u>
Address: <u>6501 Coyle Ave</u> <u>Carmichael, CA 95608</u>	Contact Name: <u>Amelia Hart</u>

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													8	
Number of students completing training													52	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-2100</u>	Expiration Date of Training Program: <u>10/25/2024</u>
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>Methodist Hospital</u>	Phone Number: <u>916-423-6103</u>
Address: <u>7500 Hospital Drive</u> <u>Sacramento, CA 95823</u>	Contact Name: <u>Krystyna Ongjoco</u>

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													3	
Number of students completing training													18	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-4880</u>		Expiration Date of Training Program: _____	
Student Eligibility: <u>Open to general public</u> (Open to general public or restricted)		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
		Program Cost: Basic <u>Varies</u> Refresher <u>Varies</u>	
Training Institution: <u>NorCal Emergency Medical Training</u>		Phone Number: <u>916-787-1787</u>	
Address: <u>1512 Eureka Road Suite 105</u> <u>Roseville Ca 95661</u>		Contact Name: <u>David Mullarky</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													776	
Number of students completing training													3755	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number:	<u>01-0053</u>	Expiration Date of Training Program:	<u>6/13/2023</u>
Student Eligibility:	<u>General Public</u> (Open to general public or restricted)	Program Level:	<input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input type="checkbox"/> Continuing Education
Program Cost:		Basic	<u>2395</u> Refresher <u>375</u>
Training Institution:	<u>Project Heartbeat</u>	Phone Number:	<u>510.452.1100</u>
Address:	<u>2033 Howe Ave, #150</u> <u>Sacramento, CA 95825</u>	Contact Name:	<u>Eric Kim</u>

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered	11	4												
Number of students completing training	121	13												



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>#34-4960</u>		Expiration Date of Training Program: <u>09/16/2024</u>	
Student Eligibility: <u>General Public and Employee Only</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P		
	<input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid		
		<input checked="" type="checkbox"/> Continuing Education	
Program Cost: Basic <u>0</u>		Refresher <u>0</u>	
Training Institution: <u>REACH Air Medical Services</u>		Phone Number: <u>916-956-0062</u>	
Address: <u>8880 Cal Center Dr. Suite 125</u> <u>Sacramento, CA 95826</u>		Contact Name: <u>Margaret Franklin</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													81	
Number of students completing training													2805	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-4950</u>		Expiration Date of Training Program: <u>9/19/2023</u>	
Student Eligibility: <u>Both</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education		
Program Cost: Basic _____ Refresher <u>X</u>			
Training Institution: <u>River Delta Fire District</u>		Phone Number: <u>(925) 658-0332</u>	
Address: <u>16969 Jackson Slough Road</u> <u>Isleton, CA 95641</u>		Contact Name: <u>Paul Cutino</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													1
Number of students completing training													10



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>N/A</u>		Expiration Date of Training Program: <u>2/27/24</u>	
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input checked="" type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input type="checkbox"/> Continuing Education	
		Program Cost: Basic <u>0</u> Refresher <u>0</u>	
Training Institution: <u>Sacramento Fire CERT/HSI</u>		Phone Number: <u>916-808-2378</u>	
Address: <u>3230 J Street</u> <u>Sacramento, CA 95822</u>		Contact Name: <u>Robert Ross</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered							1	1						
Number of students completing training							10	5						



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-1020</u>		Expiration Date of Training Program: <u>9-20-2023</u>	
Student Eligibility: <u>Restricted</u> <small>(Open to general public or restricted)</small>		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input checked="" type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
		Program Cost: Basic <u>NA</u> Refresher <u>NA</u>	
Training Institution: <u>Sacramento County Airport Fire</u>		Phone Number: <u>916-224-8366</u>	
Address: <u>7203 Earhart Drive</u> <u>Sacramento, California 95837</u>		Contact Name: <u>David Dolson(Battalion Chief)</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													24	
Number of students completing training													32	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-1050</u>		Expiration Date of Training Program: <u>1/26/2024</u>	
Student Eligibility: <u>Restricted</u> <small>(Open to general public or restricted)</small>		Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education	
		Program Cost: Basic <u>N/A</u> Refresher <u>N/A</u>	
Training Institution: <u>Sacramento Fire Department</u>		Phone Number: <u>916-808-1654</u>	
Address: <u>3230 J Street</u> <u>Sacramento, CA 95816</u>		Contact Name: <u>Brian Pedro</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													16	
Number of students completing training													581	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-1010</u>		Expiration Date of Training Program: <u>06/30/2024</u>	
Student Eligibility: <u>Restricted</u> (Open to general public or restricted)	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education		
Program Cost: Basic <u>n/a</u> Refresher <u>n/a</u>			
Training Institution: <u>Sacramento Metropolitan Fire District</u>		Phone Number: <u>916-616-2451</u>	
Address: <u>10545 Armstrong Ave, Ste 200</u> <u>Mather CA 95655</u>		Contact Name: <u>Adam Blitz</u>	

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													132
Number of students completing training													493



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-2050</u>	Expiration Date of Training Program: <u>10/14/2023</u>				
Student Eligibility: <u>Restricted</u> <small>(Open to general public or restricted)</small>	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education				
Program Cost: Basic <u>0</u> Refresher <u>0</u>					
<table style="width: 100%;"> <tr> <td style="width: 50%;"> Training Institution: <u>UC Davis Medical Center</u> </td> <td style="width: 50%;"> Phone Number: <u>916-734-5323</u> </td> </tr> <tr> <td> Address: <u>2315 Stockton Blvd</u> <u>Sacramento, CA, 95817</u> </td> <td> Contact Name: <u>Jeremy Veldstra, RN</u> </td> </tr> </table>		Training Institution: <u>UC Davis Medical Center</u>	Phone Number: <u>916-734-5323</u>	Address: <u>2315 Stockton Blvd</u> <u>Sacramento, CA, 95817</u>	Contact Name: <u>Jeremy Veldstra, RN</u>
Training Institution: <u>UC Davis Medical Center</u>	Phone Number: <u>916-734-5323</u>				
Address: <u>2315 Stockton Blvd</u> <u>Sacramento, CA, 95817</u>	Contact Name: <u>Jeremy Veldstra, RN</u>				

Training Program Statistics for Reporting Year 2022

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													16	
Number of students completing training													150	

TABLE 3: COMMUNICATIONS



County: Sacramento County

Reporting Year: 2022

EMS Agency Communications Structure

Number of primary Public Service Answering Points (PSAP):	<u>10</u>
Number of secondary PSAPs:	<u>1</u>
Number of dispatch centers directly dispatching ambulances:	<u>10</u>
Number of EMS dispatch agencies utilizing EMD guidelines:	<u>10</u>
Number of designated dispatch centers for EMS aircraft:	<u>2</u>

Who is your primary dispatch agency for day-to day emergencies?

Sacramento Regional Fire / EMS Communication Center

Do you have an operational area disaster communication system?

☒ Yes ☐ No

a) Identify the radio primary frequency: 800 MHz Trunked System

b) Identify other methods: Cell Phone, Satellite Phones and Landline

c) Can all medical response units communicate on the same disaster communication system?

☐ Yes ☒ No

d) Do you participate in the Operational Area Satellite Information System?

☒ Yes ☐ No

e) Do you have a plan to utilize the Radio Amateur Civil Emergency Services as a back-up communication system?

☒ Yes ☐ No

1) Within the operational area?

☒ Yes ☐ No

2) Between operational area and the region and/or state?

☒ Yes ☐ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento
Reporting Year: 2022

Dispatch Agency: Sacramento International Airport
Name of Primary Contact: Scott Anderson

Address: 6900 Airport Blvd
Telephone Number: 916-874-0736

Sacramento, CA 95837

Written Contract: ☒ Yes ☐ No

Medical Director: ☐ Yes ☒ No

Availability: ☒ Day-to-Day ☐ Disaster

Number of Personnel Providing Services:

EMD Training X EMT-D ALS

BLS LALS Other

Total Number of Dispatchers: 18

Ownership: ☒ Public ☐ Private

If Public: ☒ Fire ☒ Law ☐ Other

If Public: ☐ City ☒ County ☐ State

☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☒ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento Reporting Year: 2022
 Dispatch Agency: Alpha One Name of Primary Contact: Jack Finnigan
 Address: 10461 Old Placerville Rd. Ste 110 Telephone Number: 916-365-1111
Sacramento, CA 95827

Written Contract: ☒ Yes ☐ No Medical Director: ☒ Yes ☐ No Availability: ☒ Day-to-Day ☒ Disaster
 Number of Personnel Providing Services:
 EMD Training 14 EMT-D ALS 14
 BLS 14 LALS Other
 Total Number of Dispatchers: 14

Ownership: ☐ Public ☒ Private If Public: ☐ Fire ☐ Law ☐ Other
 If Public: ☐ City ☐ County ☐ State ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☒ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento Reporting Year: 2022

Dispatch Agency: America West Name of Primary Contact: Sanford Perreira

Address: 9090 Union Park Ste 117 Telephone Number: 916-890-6194
Elk Grove, Ca. 95624

Written Contract: ☐ Yes ☐ No Medical Director: ☒ Yes ☐ No Availability: ☐ Day-to-Day ☐ Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____

BLS 33 LALS _____ Other _____

Total Number of Dispatchers: 12

Ownership: ☐ Public ☒ Private If Public: ☐ Fire ☐ Law ☐ Other _____

If Public: ☐ City ☐ County ☐ State ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☒ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento Reporting Year: 2022

Dispatch Agency: AMR Sacramento Name of Primary Contact: Jennifer Morgan

Address: 1041 Fee Drive Telephone Number: (800) 913-9112
Sacramento, CA 95815

Written Contract: ☒ Yes ☐ No Medical Director: ☒ Yes ☐ No Availability: ☒ Day-to-Day ☐ Disaster

Number of Personnel Providing Services:

EMD Training 43 EMT-D ALS

BLS LALS Other

Total Number of Dispatchers: 43

Ownership: ☐ Public ☒ Private If Public: ☐ Fire ☐ Law ☐ Other

If Public: ☐ City ☐ County ☐ State ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☒ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento
Reporting Year: 2022

Dispatch Agency: Bay Medic Ambulance
Name of Primary Contact: Josh Enea

Address: 959 Detroit Avenue
Telephone Number: 925-689-9067

Concord, CA 94518

Written Contract: ☒ Yes ☐ No
 Medical Director: ☒ Yes ☐ No
 Availability: ☒ Day-to-Day ☐ Disaster
 Number of Personnel Providing Services:

EMD Training 5 EMT-D ALS

BLS 3 LALS Other 3

Total Number of Dispatchers: 10

Ownership: ☐ Public ☒ Private
 If Public: ☐ Fire ☐ Law ☐ Other

If Public: ☐ City ☐ County ☐ State
 ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☒ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento **Reporting Year:** 2022
Dispatch Agency: CHP-Capitol Protectice Services **Name of Primary Contact:** Natasha Hudson
Address: 1801 Ninth Street **Telephone Number:** 916-445-2895
Sacramento, CA 95811-7011

Written Contract: ☒ Yes ☐ No
Medical Director: ☐ Yes ☒ No
Availability: ☒ Day-to-Day ☐ Disaster
Number of Personnel Providing Services:
 EMD Training _____ EMT-D _____ ALS _____
 BLS _____ LALS _____ Other _____
Total Number of Dispatchers: 12

Ownership: ☒ Public ☐ Private
If Public: ☐ Fire ☒ Law ☐ Other _____
If Public: ☐ City ☐ County ☒ State ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☒ No

TABLE 3: COMMUNICATIONS

*Dispatch Resource*

County: Sacramento Reporting Year: 2022

Dispatch Agency: CHP: Office of Air Operations Name of Primary Contact: Ron Wilson

Address: 601 N. 7th Street Telephone Number: 916-943-3303
Sacramento, CA 95811

Written Contract: ☒ Yes ☐ No Medical Director: ☒ Yes ☐ No Availability: ☒ Day-to-Day ☐ Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS 1

BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 0

Ownership: ☒ Public ☐ Private If Public: ☐ Fire ☒ Law ☐ Other _____

If Public: ☐ City ☐ Fire District ☐ County ☐ Federal ☒ State

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☒ Yes ☐ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento
Reporting Year: 2022

Dispatch Agency: Medic Ambulance
Name of Primary Contact: Lisa Curley

Address: 300 Business Drive
Telephone Number: 916-564-9040

Sacramento, CA 95820

Written Contract: ☒ Yes ☐ No
 Medical Director: ☒ Yes ☐ No
 Availability: ☒ Day-to-Day ☒ Disaster
 Number of Personnel Providing Services:

EMD Training 16 EMT-D ALS

BLS LALS Other 3

Total Number of Dispatchers: 19

Ownership: ☐ Public ☒ Private
 If Public: ☐ Fire ☐ Law ☐ Other

If Public: ☐ City ☐ County ☐ State
 ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☒ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento Reporting Year: 2022
 Dispatch Agency: NorCal Ambulance Name of Primary Contact: John Brooks
 Address: 18115 Stockton Blvd Telephone Number: 916-812-9465
Sacramento, CA 95816

Written Contract: ☒ Yes ☐ No Medical Director: ☒ Yes ☐ No Availability: ☒ Day-to-Day ☐ Disaster
 Number of Personnel Providing Services:
 EMD Training 12 EMT-D ALS
 BLS LALS Other
 Total Number of Dispatchers: 24

Ownership: ☐ Public ☒ Private If Public: ☐ Fire ☐ Law ☐ Other
 If Public: ☐ City ☐ County ☐ State ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☒ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento Reporting Year: 2022
 Dispatch Agency: Pro Transport Ambulance Name of Primary Contact: Christine Miyahara
 Address: 720 Portal Street Telephone Number: 323-384-6116
Cotati, CA 94930

Written Contract: ☒ Yes ☐ No Medical Director: ☒ Yes ☐ No Availability: ☒ Day-to-Day ☐ Disaster
 Number of Personnel Providing Services:
 EMD Training 14 EMT-D ALS 9
 BLS 114 LALS Other
 Total Number of Dispatchers: 21

Ownership: ☐ Public ☒ Private If Public: ☐ Fire ☐ Law ☐ Other
 If Public: ☐ City ☐ County ☐ State ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☒ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento Reporting Year: 2022

Dispatch Agency: Reach & CalStar Name of Primary Contact: Dannielle Lance

Address: 1041 Fee Drive Telephone Number: 800-338-4045
Sacramento, CA 95815

Written Contract: ☒ Yes ☐ No Medical Director: ☒ Yes ☐ No Availability: ☒ Day-to-Day ☒ Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____

BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 34

Ownership: ☐ Public ☐ Private If Public: ☐ Fire ☐ Law ☐ Other _____

If Public: ☐ City ☐ County ☐ State ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☒ Yes ☐ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento **Reporting Year:** 2022
Dispatch Agency: TLC, Trauma Life Care Medical Transport, INC **Name of Primary Contact:** Steven Adeosun
Address: 3637 Mission Avenue, Bldg. A, Ste. 4 **Telephone Number:** 208-599-4051
Carmichael, CA 95608

Written Contract: ☒ Yes ☐ No
Medical Director: ☒ Yes ☐ No
Availability: ☒ Day-to-Day ☒ Disaster
Number of Personnel Providing Services:
 EMD Training _____ EMT-D _____ ALS _____
 BLS 17 LALS _____ Other _____
Total Number of Dispatchers: 4

Ownership: ☐ Public ☒ Private
If Public: ☐ Fire ☐ Law ☐ Other _____
If Public: ☐ City ☐ County ☐ State ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☒ No

TABLE 3: COMMUNICATIONS

**Dispatch Resource**

County: Sacramento Reporting Year: 2022

Dispatch Agency: Sac Valley Ambulance Name of Primary Contact: Mike Baker

Address: 6220 Belleau Wood Lane Telephone Number: 916-736-2500
Sacramento, CA 95822

Written Contract: ☐ Yes ☐ No Medical Director: ☐ Yes ☐ No Availability: ☐ Day-to-Day ☐ Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____

BLS _____ LALS _____ Other _____

Total Number of Dispatchers: Unable to obtain

Ownership: ☐ Public ☐ Private If Public: ☐ Fire ☐ Law ☐ Other _____

If Public: ☐ City ☐ County ☐ State ☐ Fire District ☐ Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: ☐ Yes ☐ No

Numerous attempts by email and telephone calls to get information failed



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento

Address: 7203 Earhart Drive
Sacramento, CA 95837

Phone Number: 916-224-8366

Provider: Sacramento County Airport Fire

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Number of Helicopters based in this LEMSA's jurisdiction: 0

Ambulance Strike Team Participant:

☐ Yes ☒ No

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input type="checkbox"/> Transport <input checked="" type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div>Other Specialty Services (water, snow, etc.):</div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51343

Name of ePCR Vendor: ImageTrend

Contract Dates: 2/6/20 - continuous

Ground Non-Transporting and/or Transporting Agencies

843	Total number of responses
842	Number of emergency responses
1	Number of non-emergency responses

Ground Transporting Agencies

0	Total number of transports
0	Number of emergency transports
0	Number of non-emergency transports

Air Transporting Services

	Total number of responses
	Number of emergency responses
	Number of non-emergency responses

	Total number of transports
	Number of emergency transports
	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	24
Total number of certified Advanced EMTs in the field:	
Total number of certified/accredited Paramedics in the field:	5



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

SACRAMENTO

Address:

10461 OLD PLACERVILLE ROAD, SUITE 110
SACRAMENTO, CA 95827

Phone Number:

916-635-2011

Provider:

ALPHAONE AMBULANCE MEDICAL SERVICES, INC.

Response Area:

SACRAMENTO COUNTY

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

37

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

26

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

5

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSA's jurisdiction:

0

<div><div>Written ALS Agreement with LEMSA to Participate in EMS System:</div><div><input type="checkbox"/> Yes <input type="checkbox"/> No</div></div>	<div><div>Medical Director:</div><div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div></div>	<div><div>System Available 24 Hours:</div><div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div></div>	<div><div>Level of Service:</div><div><div><input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div><div><div>Other Specialty Services (water, snow, etc.):</div><div></div></div><div><div><input checked="" type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51717

Name of ePCR Vendor: IMAGETREND

Contract Dates: JULY 1, 2019 - CONTINUOUS

Ground Non-Transporting and/or Transporting Agencies

31213	Total number of responses
20130	Number of emergency responses
11083	Number of non-emergency responses

Ground Transporting Agencies

29479	Total number of transports
18539	Number of emergency transports
10940	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	171
Total number of certified Advanced EMTs in the field:	0
Total number of certified/accredited Paramedics in the field:	39



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

9090 Union Park Way #117
Elk Grove, CA

Phone Number:

(888) 678-6801

Provider:

America West

Response Area:

Sacramento County

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

5

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

4

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

40

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSAs jurisdiction:

<div>Written ALS Agreement with LEMSAs to Participate in EMS System:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input checked="" type="checkbox"/> Transport</div><div><input type="checkbox"/> Non-Transport</div><div><input type="checkbox"/> ALS</div><div><input type="checkbox"/> LALS</div><div><input checked="" type="checkbox"/> BLS</div><div><input type="checkbox"/> 9-1-1</div><div><input checked="" type="checkbox"/> 7-Digit</div><div><input type="checkbox"/> CCT</div><div><input checked="" type="checkbox"/> IFT</div><div><input checked="" type="checkbox"/> Ground</div><div><input type="checkbox"/> Air</div></div> <div>Other Specialty Services (water, snow, etc.):</div> <div></div> <div><div><input checked="" type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input checked="" type="checkbox"/> Litter/Gurney Van</div><div><input checked="" type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51938

Name of ePCR Vendor: Trauma Soft

Contract Dates: Continuous

Ground Non-Transporting and/or Transporting Agencies

<u>3050</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>3050</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>3050</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>3050</u>	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>26</u>
Total number of certified Advanced EMTs in the field:	<u>0</u>
Total number of certified/accredited Paramedics in the field:	<u>0</u>



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

1101 Fee Drive
Sacramento, CA 95815

Phone Number:

916-563-0385

Provider:

American Medical Response

Response Area:

Sacramento County

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

25

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

9

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☒ Yes

☐ No

Number of Helicopters based in this LEMSA's jurisdiction:

0

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div><div>Other Specialty Services (water, snow, etc.):</div><div>NICU</div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50088

Name of ePCR Vendor: Meds (Owned and Operated by AMR)

Contract Dates: N/A

Ground Non-Transporting and/or Transporting Agencies

30235	Total number of responses
18570	Number of emergency responses
11665	Number of non-emergency responses

Ground Transporting Agencies

29479	Total number of transports
12694	Number of emergency transports
9192	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	110
Total number of certified Advanced EMTs in the field:	0
Total number of certified/accredited Paramedics in the field:	75



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

13257 Saticoy St.
Los Angeles CA 91605

Phone Number:

(818) 859-7999

Provider:

Amwest Ambulance

Response Area:

Sacramento County

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

6

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

6

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSAs jurisdiction:

<div>Written ALS Agreement with LEMSAs to Participate in EMS System:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input checked="" type="checkbox"/> Transport <input type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground</div><div><input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air</div><div><input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT</div></div> <div>Other Specialty Services (water, snow, etc.):</div> <div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51849

Name of ePCR Vendor: Trauma Soft

Contract Dates: Continuous

Ground Non-Transporting and/or Transporting Agencies

77 Total number of responses

3 Number of emergency responses

74 Number of non-emergency responses

Ground Transporting Agencies

73 Total number of transports

0 Number of emergency transports

73 Number of non-emergency transports

Air Transporting Services

_____ Total number of responses

_____ Number of emergency responses

_____ Number of non-emergency responses

_____ Total number of transports

_____ Number of emergency transports

_____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 28

Total number of certified Advanced EMTs in the field: _____

Total number of certified/accredited Paramedics in the field: _____



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

10901 Gold Center Dr. Suite 400
Rancho Cordova, CA 95670

Phone Number:

(916) 516-2574

Provider:

Emergency Medical Services Authority

Response Area:

State of California

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☒ Yes

☐ No

Number of Helicopters based in this LEMSA's jurisdiction:

0

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input type="checkbox"/> Transport</div><div><input checked="" type="checkbox"/> ALS</div><div><input type="checkbox"/> 9-1-1</div><div><input type="checkbox"/> Ground</div><div><input checked="" type="checkbox"/> Non-Transport</div><div><input type="checkbox"/> LALS</div><div><input type="checkbox"/> 7-Digit</div><div><input type="checkbox"/> Air</div><div><input checked="" type="checkbox"/> BLS</div><div><input type="checkbox"/> CCT</div><div><input type="checkbox"/> IFT</div></div> <div><div>Other Specialty Services (water, snow, etc.):</div><div>Fixed Site Disaster Medical Services</div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input checked="" type="checkbox"/> Other <u>State EMS Authority</u>	If Public: <input type="checkbox"/> City <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51952

Name of ePCR Vendor: Image Trend

Contract Dates: 2021-Current

Ground Non-Transporting and/or Transporting Agencies

<u>3</u>	Total number of responses
<u>3</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Air Transporting Services

<u> </u>	Total number of responses
<u> </u>	Number of emergency responses
<u> </u>	Number of non-emergency responses

<u> </u>	Total number of transports
<u> </u>	Number of emergency transports
<u> </u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>236</u>
Total number of certified Advanced EMTs in the field:	<u> </u>
Total number of certified/accredited Paramedics in the field:	<u>26</u>



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento

Address: 7717 Cucamonga Ave
Sacramento, CA 95826

Phone Number: 925-689-9000

Provider: Bay Medic Ambulance

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 7

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 3

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

Number of Helicopters based in this LEMSA's jurisdiction:

Ambulance Strike Team Participant: ☐ Yes ☒ No

<div>Written ALS Agreement with LEMSA to Participate in EMS System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service: <div><div><input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT</div><div><input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air</div></div><div>Other Specialty Services (water, snow, etc.):</div><div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50120

Name of ePCR Vendor: TraumaSoft

Contract Dates: 2018 - Current

Ground Non-Transporting and/or Transporting Agencies

2853 Total number of responses

14 Number of emergency responses

2839 Number of non-emergency responses

Ground Transporting Agencies

2688 Total number of transports

14 Number of emergency transports

2674 Number of non-emergency transports

Air Transporting Services

N/A Total number of responses

N/A Number of emergency responses

N/A Number of non-emergency responses

N/A Total number of transports

N/A Number of emergency transports

N/A Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 120

Total number of certified Advanced EMTs in the field: N/A

Total number of certified/accredited Paramedics in the field: 4



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Provider:

CalStar

Response Area:

Sacramento/Oregon/Nevada

Address:

8880 Cal Center Dr.
Sacramento, CA 95826

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

1

Phone Number:

(707) 324-4045

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

1

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSA's jurisdiction:

1

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input checked="" type="checkbox"/> Air</div></div> <div><div>Other Specialty Services (water, snow, etc.):</div><div>Specialty Team Support with Facility Partners</div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input checked="" type="checkbox"/> Rotary <input checked="" type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input checked="" type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51718

Name of ePCR Vendor: Image Trend

Contract Dates: 4/4/2022-3/31/2025

Ground Non-Transporting and/or Transporting Agencies

_____ Total number of responses

_____ Number of emergency responses

_____ Number of non-emergency responses

Ground Transporting Agencies

_____ Total number of transports

_____ Number of emergency transports

_____ Number of non-emergency transports

Air Transporting Services

49 Total number of responses

1 Number of emergency responses

48 Number of non-emergency responses

49 Total number of transports

1 Number of emergency transports

48 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 0

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 5



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

601 N. 7th Street
Sacramento, CA 95811

Phone Number:

(916) 843-3300

Provider:

CHP-Air Operations

Response Area:

Sacramento City

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSA's jurisdiction:

0

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input type="checkbox"/> Transport</div><div><input checked="" type="checkbox"/> ALS</div><div><input checked="" type="checkbox"/> 9-1-1</div><div><input type="checkbox"/> Ground</div></div> <div><div><input checked="" type="checkbox"/> Non-Transport</div><div><input type="checkbox"/> LALS</div><div><input type="checkbox"/> 7-Digit</div><div><input type="checkbox"/> Air</div></div> <div><div><input type="checkbox"/> BLS</div><div><input type="checkbox"/> CCT</div><div><input type="checkbox"/> IFT</div></div>
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Other Specialty Services (water, snow, etc.):

☐ Non-Ambulance Medical Transport Services

☐ Litter/Gurney Van

☐ Wheelchair Van



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input checked="" type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50181

Name of ePCR Vendor: Image Trend

Contract Dates: Current-June 30, 2026

Ground Non-Transporting and/or Transporting Agencies

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 1
Total number of certified Advanced EMTs in the field: _____
Total number of certified/accredited Paramedics in the field: 3



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

1801 9th Street
Sacramento, CA 95811

Phone Number:

916 341-4740

Provider:

California Highway Patrol

Response Area:

State Capitol Area

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSAs jurisdiction:

0

<div>Written ALS Agreement with LEMSAs to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input type="checkbox"/> Transport</div><div><input checked="" type="checkbox"/> ALS</div><div><input checked="" type="checkbox"/> 9-1-1</div><div><input type="checkbox"/> Ground</div></div> <div><div><input checked="" type="checkbox"/> Non-Transport</div><div><input type="checkbox"/> LALS</div><div><input type="checkbox"/> 7-Digit</div><div><input type="checkbox"/> Air</div></div> <div><div><input type="checkbox"/> BLS</div><div><input type="checkbox"/> CCT</div><div><input type="checkbox"/> IFT</div></div>
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Other Specialty Services (water, snow, etc.):

☐ Non-Ambulance Medical Transport Services

☐ Litter/Gurney Van

☐ Wheelchair Van



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input checked="" type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50181

Name of ePCR Vendor: Image Trend

Contract Dates: 2019 - Current

Ground Non-Transporting and/or Transporting Agencies

0	Total number of responses
0	Number of emergency responses
0	Number of non-emergency responses

Ground Transporting Agencies

0	Total number of transports
0	Number of emergency transports
0	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	4
Total number of certified Advanced EMTs in the field:	0
Total number of certified/accredited Paramedics in the field:	3



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

201 2nd Street
Isleton, CA 95641

Phone Number:

(916) 777-7776

Provider:

City of Isleton

Response Area:

Isleton, CA

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSA's jurisdiction:

0

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input type="checkbox"/> Transport <input checked="" type="checkbox"/> Non-Transport</div><div><input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div>Other Specialty Services (water, snow, etc.):</div> <div><div></div><div></div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51818

Name of ePCR Vendor: Emergency Reporting

Contract Dates: Current

Ground Non-Transporting and/or Transporting Agencies

102 Total number of responses

100 Number of emergency responses

2 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports

0 Number of emergency transports

0 Number of non-emergency transports

Air Transporting Services

_____ Total number of responses

_____ Number of emergency responses

_____ Number of non-emergency responses

_____ Total number of transports

_____ Number of emergency transports

_____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 24

Total number of certified Advanced EMTs in the field: _____

Total number of certified/accredited Paramedics in the field: 0



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

535 Glenn Dr
Folsom CA 95630

Provider:

Folsom Fire Department

Response Area:

Folsom and surrounding

Phone Number:

(916) 984-2280

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

5

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

3

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSA's jurisdiction:

0

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div><div>Other Specialty Services (water, snow, etc.):</div><div>Water Rescue (boat), Confined Space</div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50402

Name of ePCR Vendor: Image Trend

Contract Dates: October 2019-Present

Ground Non-Transporting and/or Transporting Agencies

<u>7500</u>	Total number of responses
<u>7499</u>	Number of emergency responses
<u>1</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>5159</u>	Total number of transports
<u>5158</u>	Number of emergency transports
<u>1</u>	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>8</u>
Total number of certified Advanced EMTs in the field:	<u>0</u>
Total number of certified/accredited Paramedics in the field:	<u>65</u>



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

10573 East Stockton Blvd.
Elk Grove, CA 95624

Phone Number:

(916) 405-7130

Provider:

Cosumnes Fire Department

Response Area:

Elk Grove & Galt

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

8

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

8

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSA's jurisdiction:

0

<div><div>Written ALS Agreement with LEMSA to Participate in EMS System:</div><div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div></div>	<div><div>Medical Director:</div><div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div></div>	<div><div>System Available 24 Hours:</div><div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div></div>	<div><div>Level of Service:</div><div><div><input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div><div><div>Other Specialty Services (water, snow, etc.):</div><div></div></div><div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div></div>
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(09/2019)



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input checked="" type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-1090

Name of ePCR Vendor: Image Trend

Contract Dates: 06/13/2016 - Current

Ground Non-Transporting and/or Transporting Agencies

<u>16979</u>	Total number of responses
<u>16979</u>	Number of emergency responses
<u>3</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>10642</u>	Total number of transports
<u>10642</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>44</u>
Total number of certified Advanced EMTs in the field:	<u>0</u>
Total number of certified/accredited Paramedics in the field:	<u>137</u>



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento

Address: 2700 Mercantile Drive Suite 700
Rancho Cordova, CA 95742

Phone Number: (800) 650-4003

Provider: ProTransport-1

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 32

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 20

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 1

Ambulance Strike Team Participant: ☒ Yes ☐ No

Number of Helicopters based in this LEMSA's jurisdiction: 0

Response Area: Sacramento County

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div>Other Specialty Services (water, snow, etc.):</div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input checked="" type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50771

Name of ePCR Vendor: Image Trend

Contract Dates: 11/21-Current

Ground Non-Transporting and/or Transporting Agencies

<u>3100</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>3100</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>3029</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>3029</u>	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>95</u>
Total number of certified Advanced EMTs in the field:	<u>0</u>
Total number of certified/accredited Paramedics in the field:	<u>5</u>



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

12746 Ivie Rd
Herald, CA 95638

Phone Number:

(209) 748-2322

Provider:

Herald Fire Protection District

Response Area:

Herald

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSA's jurisdiction:

0

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input type="checkbox"/> Transport <input checked="" type="checkbox"/> Non-Transport</div><div><input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div>Other Specialty Services (water, snow, etc.):</div> <div><div></div><div></div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> County <input checked="" type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51340

Name of ePCR Vendor: Beyond Lucid Technologies

Contract Dates: Current

Ground Non-Transporting and/or Transporting Agencies

<u>74</u>	Total number of responses
<u>74</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Air Transporting Services

<u> </u>	Total number of responses
<u> </u>	Number of emergency responses
<u> </u>	Number of non-emergency responses

<u> </u>	Total number of transports
<u> </u>	Number of emergency transports
<u> </u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>15</u>
Total number of certified Advanced EMTs in the field:	<u>0</u>
Total number of certified/accredited Paramedics in the field:	<u>0</u>



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

3300 Business Dr.
Sacramento, CA 95820

Phone Number:

(916) 564-9040

Provider:

Medic Ambulance

Response Area:

Sacramento County

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

35

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

15

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

2

Ambulance Strike Team Participant:

☒ Yes ☐ No

Number of Helicopters based in this LEMSAs jurisdiction:

<div>Written ALS Agreement with LEMSAs to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div>Other Specialty Services (water, snow, etc.):</div> <div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input checked="" type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50600

Name of ePCR Vendor: World Advancement of Technology for EMS and Rescue (Water)

Contract Dates: 1/2022-Current

Ground Non-Transporting and/or Transporting Agencies

18331	Total number of responses
1072	Number of emergency responses
17259	Number of non-emergency responses

Ground Transporting Agencies

17181	Total number of transports
889	Number of emergency transports
16292	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	69
Total number of certified Advanced EMTs in the field:	_____
Total number of certified/accredited Paramedics in the field:	5



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

10545 Armstrong Ave. Ste 200
Mather, CA 95655

Phone Number:

(916) 616-2451

Provider:

Sacramento Metropolitan Fire District

Response Area:

Sacramento County

Ambulance Strike Team Participant:

☒ Yes ☐ No

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

38

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

25

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Number of Helicopters based in this LEMSA's jurisdiction:

2

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div><div>Other Specialty Services (water, snow, etc.):</div><div>Boat Medics, Bike Medics, TEMS Medics MIH</div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	If Air: <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input checked="" type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input checked="" type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50811

Name of ePCR Vendor: Image Trend

Contract Dates: 09/22/22 - 09/21/25

Ground Non-Transporting and/or Transporting Agencies

<u>89703</u>	Total number of responses
<u>89590</u>	Number of emergency responses
<u>1</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>37353</u>	Total number of transports
<u>37263</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Air Transporting Services

<u>7</u>	Total number of responses
<u>7</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

<u>7</u>	Total number of transports
<u>7</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>91</u>
Total number of certified Advanced EMTs in the field:	<u>0</u>
Total number of certified/accredited Paramedics in the field:	<u>494</u>



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:	<u>Sacramento</u>	Provider:	<u>NORCAL Ambulance</u>	Response Area:	<u>Sacramento County</u>
Address:	<u>1815 Stockton Blvd</u> <u>Sacramento, CA 95816</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:	<u>50</u>		
Phone Number:	<u>(916) 860-7900</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:	<u>38</u>		
		Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:	<u>3</u>		
Ambulance Strike Team Participant:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Helicopters based in this LEMSA's jurisdiction:	<u>0</u>		

Written ALS Agreement with LEMSA to Participate in EMS System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service: <table><tr><td><input checked="" type="checkbox"/> Transport</td><td><input checked="" type="checkbox"/> ALS</td><td><input checked="" type="checkbox"/> 9-1-1</td><td><input checked="" type="checkbox"/> Ground</td></tr><tr><td><input type="checkbox"/> Non-Transport</td><td><input type="checkbox"/> LALS</td><td><input checked="" type="checkbox"/> 7-Digit</td><td><input type="checkbox"/> Air</td></tr><tr><td></td><td><input checked="" type="checkbox"/> BLS</td><td><input checked="" type="checkbox"/> CCT</td><td></td></tr><tr><td></td><td></td><td><input checked="" type="checkbox"/> IFT</td><td></td></tr></table> Other Specialty Services (water, snow, etc.): _____ <table><tr><td><input type="checkbox"/> Non-Ambulance Medical Transport Services</td><td><input type="checkbox"/> Litter/Gurney Van</td><td><input checked="" type="checkbox"/> Wheelchair Van</td></tr></table>	<input checked="" type="checkbox"/> Transport	<input checked="" type="checkbox"/> ALS	<input checked="" type="checkbox"/> 9-1-1	<input checked="" type="checkbox"/> Ground	<input type="checkbox"/> Non-Transport	<input type="checkbox"/> LALS	<input checked="" type="checkbox"/> 7-Digit	<input type="checkbox"/> Air		<input checked="" type="checkbox"/> BLS	<input checked="" type="checkbox"/> CCT				<input checked="" type="checkbox"/> IFT		<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input checked="" type="checkbox"/> Wheelchair Van
<input checked="" type="checkbox"/> Transport	<input checked="" type="checkbox"/> ALS	<input checked="" type="checkbox"/> 9-1-1	<input checked="" type="checkbox"/> Ground																			
<input type="checkbox"/> Non-Transport	<input type="checkbox"/> LALS	<input checked="" type="checkbox"/> 7-Digit	<input type="checkbox"/> Air																			
	<input checked="" type="checkbox"/> BLS	<input checked="" type="checkbox"/> CCT																				
		<input checked="" type="checkbox"/> IFT																				
<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input checked="" type="checkbox"/> Wheelchair Van																				



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50672

Name of ePCR Vendor: Trauma Soft

Contract Dates: 10/23/2020-Present

Ground Non-Transporting and/or Transporting Agencies

21909 Total number of responses
654 Number of emergency responses
21255 Number of non-emergency responses

Ground Transporting Agencies

21833 Total number of transports
649 Number of emergency transports
21184 Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
 _____ Number of emergency responses
 _____ Number of non-emergency responses

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 253

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 12



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento

Address:

7636 Poppy Way
Citrus Heights CA 95610

Phone Number:

530-521-7456

Provider:

Performance EMS

Response Area:

Sacramento County

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSAs jurisdiction:

0

<div>Written ALS Agreement with LEMSAs to Participate in EMS System:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input type="checkbox"/> Transport <input checked="" type="checkbox"/> Non-Transport</div><div><input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS</div><div><input type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div><div>Other Specialty Services (water, snow, etc.):</div><div>Event Medical Stand by</div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51963

Name of ePCR Vendor: Image Trend

Contract Dates: 2020-Current

Ground Non-Transporting and/or Transporting Agencies

<u>18</u>	Total number of responses
<u>18</u>	Number of emergency responses
<u>0</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>n/a</u>	Total number of transports
<u>n/a</u>	Number of emergency transports
<u>n/a</u>	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>15</u>
Total number of certified Advanced EMTs in the field:	<u>0</u>
Total number of certified/accredited Paramedics in the field:	<u>0</u>



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:
Sacramento

Provider:
Reach

Response Area:
California/Oregon/Nevada

Address:
8880 Cal Center Dr.
Sacramento, CA 95826

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:
2

Phone Number:
(707) 324-4045

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:
2

Ambulance Strike Team Participant:
☐ Yes
☒ No

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:
0

Number of Helicopters based in this LEMSA’s jurisdiction:
1

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <div> <input checked="" type="checkbox"/> Transport <input type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground </div> <div> <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> Air </div> <div> <input type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </div> <div> Other Specialty Services (water, snow, etc.): Specialty Team Transport with Facility Partners </div> <div> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </div>
--	---	--	--



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input checked="" type="checkbox"/> Rotary <input checked="" type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input checked="" type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50779

Name of ePCR Vendor: Image Trend

Contract Dates: 4/4/2022 - Current

Ground Non-Transporting and/or Transporting Agencies

_____ Total number of responses

_____ Number of emergency responses

_____ Number of non-emergency responses

Ground Transporting Agencies

_____ Total number of transports

_____ Number of emergency transports

_____ Number of non-emergency transports

Air Transporting Services

38 Total number of responses

3 Number of emergency responses

35 Number of non-emergency responses

38 Total number of transports

3 Number of emergency transports

35 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 0

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 5



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:

Sacramento County

Address:

16969 Jackson Slough Road
Isleton, CA 95641

Phone Number:

(916) 777-8701

Provider:

River Delta Fire District

Response Area:

30-Square Miles of Sacramento County

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:

0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:

0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:

0

Ambulance Strike Team Participant:

☐ Yes

☒ No

Number of Helicopters based in this LEMSA's jurisdiction:

0

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input type="checkbox"/> Transport <input checked="" type="checkbox"/> Non-Transport</div><div><input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div>Other Specialty Services (water, snow, etc.):</div> <div><div></div><div></div></div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input checked="" type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
---	---	--	--	--	---

Provider Resource (cont.)

CEMSIS Provider ID #: S34-51342

Name of ePCR Vendor: ESO & Emergency Reporting

Contract Dates: January 1, 2022 - Current

Ground Non-Transporting and/or Transporting Agencies

53 Total number of responses

53 Number of emergency responses

0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports

0 Number of emergency transports

0 Number of non-emergency transports

Air Transporting Services

_____ Total number of responses

_____ Number of emergency responses

_____ Number of non-emergency responses

_____ Total number of transports

_____ Number of emergency transports

_____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 45

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 0



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento

Address: 5770 Freeport Blvd, Ste 200
Sacramento, CA 95822

Phone Number: 916-808-1654

Provider: Sacramento Fire Department

Response Area: City of Sacramento

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 30

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 17

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 6 Box vans

Number of Helicopters based in this LEMSA's jurisdiction: 0

Ambulance Strike Team Participant: ☐ Yes ☒ No

Written ALS Agreement with LEMSA to Participate in EMS System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport	<input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input type="checkbox"/> BLS	<input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT	<input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air
			Other Specialty Services (water, snow, etc.): <input type="checkbox"/> Non-Ambulance Medical Transport Services	Water Rescue, Tech Rescue <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van		



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S534-50810

Name of ePCR Vendor: Health EMS Sansio

Contract Dates: Jan 2020-Jan 2025

Ground Non-Transporting and/or Transporting Agencies

82643	Total number of responses
82642	Number of emergency responses
1	Number of non-emergency responses

Ground Transporting Agencies

43254	Total number of transports
43254	Number of emergency transports
0	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	136
Total number of certified Advanced EMTs in the field:	0
Total number of certified/accredited Paramedics in the field:	444



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:	<u>Sacramento</u>	Provider:	<u>Sacramento Valley Ambulance</u>	Response Area:	<u>Sacramento County</u>
Address:	<u>6220 Belleau Wood Lane Suite 4</u> <u>Sacramento, CA 95822</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:	<u>17</u>		
Phone Number:	<u>(916) 736-2500</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:	<u>10</u>		
		Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:	<u>4</u>		
Ambulance Strike Team Participant:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Helicopters based in this LEMSA's jurisdiction:	<u>0</u>		

Written ALS Agreement with LEMSA to Participate in EMS System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service: <table><tr><td><input checked="" type="checkbox"/> Transport</td><td><input checked="" type="checkbox"/> ALS</td><td><input type="checkbox"/> 9-1-1</td><td><input checked="" type="checkbox"/> Ground</td></tr><tr><td><input type="checkbox"/> Non-Transport</td><td><input type="checkbox"/> LALS</td><td><input checked="" type="checkbox"/> 7-Digit</td><td><input type="checkbox"/> Air</td></tr><tr><td></td><td><input checked="" type="checkbox"/> BLS</td><td><input checked="" type="checkbox"/> CCT</td><td></td></tr><tr><td></td><td></td><td><input checked="" type="checkbox"/> IFT</td><td></td></tr></table> Other Specialty Services (water, snow, etc.): _____ <table><tr><td><input type="checkbox"/> Non-Ambulance Medical Transport Services</td><td><input checked="" type="checkbox"/> Litter/Gurney Van</td><td><input checked="" type="checkbox"/> Wheelchair Van</td></tr></table>	<input checked="" type="checkbox"/> Transport	<input checked="" type="checkbox"/> ALS	<input type="checkbox"/> 9-1-1	<input checked="" type="checkbox"/> Ground	<input type="checkbox"/> Non-Transport	<input type="checkbox"/> LALS	<input checked="" type="checkbox"/> 7-Digit	<input type="checkbox"/> Air		<input checked="" type="checkbox"/> BLS	<input checked="" type="checkbox"/> CCT				<input checked="" type="checkbox"/> IFT		<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input checked="" type="checkbox"/> Litter/Gurney Van	<input checked="" type="checkbox"/> Wheelchair Van
<input checked="" type="checkbox"/> Transport	<input checked="" type="checkbox"/> ALS	<input type="checkbox"/> 9-1-1	<input checked="" type="checkbox"/> Ground																			
<input type="checkbox"/> Non-Transport	<input type="checkbox"/> LALS	<input checked="" type="checkbox"/> 7-Digit	<input type="checkbox"/> Air																			
	<input checked="" type="checkbox"/> BLS	<input checked="" type="checkbox"/> CCT																				
		<input checked="" type="checkbox"/> IFT																				
<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input checked="" type="checkbox"/> Litter/Gurney Van	<input checked="" type="checkbox"/> Wheelchair Van																				



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50813

Name of ePCR Vendor: Trauma Soft

Contract Dates: 1/1/2022-12/31/2022

Ground Non-Transporting and/or Transporting Agencies

1162	Total number of responses
0	Number of emergency responses
1162	Number of non-emergency responses

Ground Transporting Agencies

1156	Total number of transports
0	Number of emergency transports
1156	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	35
Total number of certified Advanced EMTs in the field:	0
Total number of certified/accredited Paramedics in the field:	2



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:	<u>Sacramento</u>	Provider:	<u>Trauma Life Care Medical Transport, Inc</u>	Response Area:	<u>Sacramento County</u>
Address:	<u>3637 Mission Ave. Bldg-A, Suite-4</u> <u>Carmichael, CA 95608</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:		<u>4</u>	
Phone Number:	<u>(916) 368-2222</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:		<u>4</u>	
		Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:		<u>2</u>	
Ambulance Strike Team Participant:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Helicopters based in this LEMSAs jurisdiction:		<u>0</u>	

Written ALS Agreement with LEMSAs to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input checked="" type="checkbox"/> Transport <input type="checkbox"/> Non-Transport </div> <div style="width: 50%;"> <input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS </div> <div style="width: 50%;"> <input type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </div> <div style="width: 50%;"> <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Air </div> </div> Other Specialty Services (water, snow, etc.): _____ _____ <div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> Non-Ambulance Medical Transport Services <input checked="" type="checkbox"/> Litter/Gurney Van <input checked="" type="checkbox"/> Wheelchair Van </div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50929

Name of ePCR Vendor: Forte Holdings

Contract Dates: 03/01/2021 - Current

Ground Non-Transporting and/or Transporting Agencies

1140 Total number of responses

0 Number of emergency responses

1140 Number of non-emergency responses

Ground Transporting Agencies

1130 Total number of transports

0 Number of emergency transports

1130 Number of non-emergency transports

Air Transporting Services

0 Total number of responses

0 Number of emergency responses

0 Number of non-emergency responses

0 Total number of transports

0 Number of emergency transports

0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 20

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 0



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County:	<u>Sacramento</u>	Provider:	<u>VersaCare Emergency Medical Services</u>	Response Area:	<u>Northern California</u>
Address:	<u>8850 Greenback Ln - Suite B</u> <u>Orangevale, CA 95662</u>	Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet:			
		<u>0</u>			
Phone Number:	<u>916-521-0966</u>	Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day:			
		<u>0</u>			
		Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans:			
		<u>0</u>			
Ambulance Strike Team Participant:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Helicopters based in this LEMSAs jurisdiction:		
		<u>0</u>			

Written ALS Agreement with LEMSAs to Participate in EMS System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Medical Director: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	System Available 24 Hours: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Level of Service:			
			<input type="checkbox"/> Transport <input checked="" type="checkbox"/> Non-Transport	<input type="checkbox"/> ALS <input type="checkbox"/> LALS <input checked="" type="checkbox"/> BLS	<input type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT	<input type="checkbox"/> Ground <input type="checkbox"/> Air
			Other Specialty Services (water, snow, etc.):		Standby event medical services <u>Bike EMTs, UTV response unit</u>	
			<input type="checkbox"/> Non-Ambulance Medical Transport Services	<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van	



TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51723

Name of ePCR Vendor: Beyond Lucid Technologies

Contract Dates: Current

Ground Non-Transporting and/or Transporting Agencies

<u>8</u>	Total number of responses
<u>0</u>	Number of emergency responses
<u>8</u>	Number of non-emergency responses

Ground Transporting Agencies

<u>0</u>	Total number of transports
<u>0</u>	Number of emergency transports
<u>0</u>	Number of non-emergency transports

Air Transporting Services

_____	Total number of responses
_____	Number of emergency responses
_____	Number of non-emergency responses

_____	Total number of transports
_____	Number of emergency transports
_____	Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field:	<u>17</u>
Total number of certified Advanced EMTs in the field:	<u>0</u>
Total number of certified/accredited Paramedics in the field:	<u>0</u>



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento

Address: 9800 Dillard Rd.
Wilton, CA 95683

Phone Number: (916) 687-6920

Provider: Wilton Fire Protection District

Response Area: Wilton

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Number of Helicopters based in this LEMSA's jurisdiction: 0

Ambulance Strike Team Participant: ☐ Yes ☒ No

<div>Written ALS Agreement with LEMSA to Participate in EMS System:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Medical Director:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>System Available 24 Hours:</div> <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	<div>Level of Service:</div> <div><div><input type="checkbox"/> Transport <input checked="" type="checkbox"/> Non-Transport</div><div><input checked="" type="checkbox"/> ALS <input type="checkbox"/> LALS <input type="checkbox"/> BLS</div><div><input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> 7-Digit <input type="checkbox"/> CCT <input type="checkbox"/> IFT</div><div><input type="checkbox"/> Ground <input type="checkbox"/> Air</div></div> <div>Other Specialty Services (water, snow, etc.):</div> <div><div><input type="checkbox"/> Non-Ambulance Medical Transport Services</div><div><input type="checkbox"/> Litter/Gurney Van</div><div><input type="checkbox"/> Wheelchair Van</div></div>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> County <input checked="" type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51345

Name of ePCR Vendor: Image Trend (Agreement with CSD Fire)

Contract Dates: 6/16 - Current

Ground Non-Transporting and/or Transporting Agencies

596 Total number of responses
592 Number of emergency responses
4 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
_____ Number of emergency responses
_____ Number of non-emergency responses

_____ Total number of transports
_____ Number of emergency transports
_____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 31
Total number of certified Advanced EMTs in the field: _____
Total number of certified/accredited Paramedics in the field: 10



TABLE 5: ASSESSMENT OF HOSPITALS AND CRITICAL CARE CENTERS

County: Sacramento

Reporting Year: 2022

EMS Agency Facility Details

Are there established guidelines, developed in partnership with acute care hospital administrators, physicians, and nurses, that identify patients who should be considered for transfer to facilities of higher capability? ☐ Yes ☒ No

Is there collaboration with acute care hospital administrators, physicians, and nurses to establish transfer agreements for patients who should be considered for transfer to facilities of higher capability? ☒ Yes ☐ No

Is there a process to ensure that all base hospital personnel who provide medical direction to prehospital personnel are knowledgeable about LEMSA policies and procedures and have training in radio communications techniques? ☒ Yes ☐ No

Is there a process to ensure that all alternative base station personnel who provide medical direction to prehospital personnel are knowledgeable about the EMS Agency's policies and procedures? ☒ Yes ☐ No

a) Do the base station personnel have training in radio communications? ☒ Yes ☐ No

EMS Agency Facility Statistics

Emergency Departments

Total number of emergency departments: 11
Note: Includes two (2) out-of-county facilities

Total number of comprehensive emergency services: 11

Total number of basic emergency services: _____

Total number of standby emergency services: _____

Hospitals with Written Agreements

Total number of receiving hospitals: 11
Note: Includes two (2) out-of-county facilities

Total number of base hospitals: 4

Alternative Receiving Facilities

Do you have designated alternative receiving facilities? ☐ Yes ☒ No

Number of alternate receiving facilities:

Psychiatric: _____ Sobering Centers: _____ Rural Area: _____

Specialty Care System

Do you have a trauma system? ☒ Yes ☐ No

Do you have a ST-Elevation Myocardial Infarction (STEMI) system? ☒ Yes ☐ No



TABLE 5: ASSESSMENT OF HOSPITALS AND CRITICAL CARE CENTERS

EMS Agency Facility Statistics (cont.)

Do you have a stroke system? ☒ Yes ☐ No

Do you have an EMS for children system? ☐ Yes ☒ No

EMS Agency Specialty Care System Capabilities

Number of trauma centers:

Level I 1 Level II 3 Level III Level IV
Note: Includes one (1) out-of-county trauma center

Number of pediatric trauma centers:

Level I 1 Level II

Number of EMS patients meeting trauma triage criteria:

2245

a) Transported to a trauma center by ambulance:

2214

b) Not transported to a trauma center:

31

Number of trauma patients transferred to a trauma center for a higher level of care:

Unable to obtain

a) From a non-trauma facility:

Unable to obtain

b) From a lower level trauma center:

Unable to obtain

Number of *STEMI* centers/hospitals designated by EMS Agency:

Receiving: 7 Referring:

Number of *stroke* centers/hospitals (third party accreditation only):

Comprehensive: 4 Thrombectomy Capable:

Primary: 10 Acute Stroke Ready:

Note: Includes two (2) out-of-county primary stroke facilities

Number of *pediatric* receiving centers:

Comprehensive: 1 General: Advanced: Basic:



TABLE 6: PUBLIC INFORMATION AND EDUCATION

County: Sacramento

Reporting Year: 2022

Public Information, Education, and Awareness

Number of programs EMS Agency provided to the public:

<u>0</u>	EMS Awareness	<u>0</u>	Bleeding Control
<u>0</u>	First Aid	<u>0</u>	CPR
<u>0</u>	Prevention Activities	<u>0</u>	Disaster Preparedness

Injury & Illness Prevention

Number of programs EMS Agency provided to the public:

<u>0</u>	Alcohol & Substance Abuse	<u>0</u>	General Injury
<u>0</u>	Asthma Control	<u>0</u>	Home Safety
<u>0</u>	Bicycle Safety	<u>0</u>	Infant Safe Sleep Practices
<u>0</u>	Burn Prevention	<u>0</u>	Mental Health
<u>0</u>	Child Passenger Safety	<u>0</u>	Obesity
<u>0</u>	Childhood Immunizations	<u>0</u>	Pedestrian Safety
<u>0</u>	Diabetes	<u>0</u>	POLST/End of Life Care
<u>0</u>	Distracted Driving	<u>0</u>	Poison Control & Prevention
<u>0</u>	Dog Bite Prevention	<u>0</u>	Product Safety & Recalls
<u>0</u>	Elderly Falls	<u>0</u>	Suicide Prevention
<u>0</u>	Firearm Safety	<u>0</u>	Water Safety
<u>0</u>	General Health	<u>0</u>	Youth Violence Prevention



TABLE 7: DISASTER MEDICAL RESPONSE

County: Sacramento

Reporting Year: 2022

EMS Agency Structure

Are you part of a multicounty EMS system for disaster response? ☐ Yes ☒ No

Are you a separate department or agency? ☐ Yes ☒ No

a) To whom do you report? Department of Health Services

If your agency is not within the health department, do you have a plan to coordinate public health and environmental health issues with the health department? ☒ Yes ☐ No

What healthcare coalitions are you participating in? Sacramento County Health Care Coalition

a) How often do you meet with your healthcare coalitions? Monthly

Do you have connection with your local Disaster Healthcare Volunteer Administrators in your jurisdiction? ☒ Yes ☐ No

List all neighboring counties which you have written cooperative agreements and/or medical mutual aid/assistance agreements with:

Yolo County, Solano County

EMS Agency Plans, Policies, Programs, and Teams

Do you have the following:

- | | | | |
|--|---|---|---|
| a) Disaster Plan? | <input checked="" type="checkbox"/> Yes | URL Link: https://dhs.saccounty.net/PRI/EMS/Documents/PoliciesProceduresProtocols/Police | <input type="checkbox"/> No |
| b) Active Shooter Policy? | <input type="checkbox"/> Yes | URL Link: _____ | <input checked="" type="checkbox"/> No |
| c) Hazardous Material (Hazmat) Plan? | <input type="checkbox"/> Yes | URL Link: _____ | <input checked="" type="checkbox"/> No |
| d) Disaster Medical Cache? | <input type="checkbox"/> Yes | URL Link: _____ | <input checked="" type="checkbox"/> No |
| e) Disaster Medical Support Group? | <input type="checkbox"/> Yes | URL Link: _____ | <input checked="" type="checkbox"/> No |
| f) Medical Assets? | <input type="checkbox"/> Yes | URL Link: _____ | <input checked="" type="checkbox"/> No |
| g) Incident Command Organization Chart? | <input type="checkbox"/> Yes | URL Link: _____ | <input checked="" type="checkbox"/> No |
| h) Communications Plan? | <input type="checkbox"/> Yes | URL Link: _____ | <input checked="" type="checkbox"/> No |
| i) Ambulance Strike Team Leader Program? | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| j) EMS Authority Affiliated Strike Teams (includes a Disaster Medical Support Unit)? | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

Identify the provider: _____



TABLE 7: DISASTER MEDICAL RESPONSE

EMS Agency System Operations and Resources

Do you have designated field treatment sites? ☐ Yes ☒ No

a) Identify the locations: _____

b) How are they staffed? _____

c) Is there a supply system for supporting them for 72 hours? ☐ Yes ☒ No

Is there a mental/behavioral health program available for responders within your jurisdiction? ☒ Yes ☐ No

a) Identify the program: EAP

Is there a team medical response capability? ☒ Yes ☐ No

a) For each team, are they incorporated into the local response plan? ☒ Yes ☐ No

b) Are they available for statewide response? ☒ Yes ☐ No

c) Are they part of a formal out-of-state response system? ☐ Yes ☒ No

Are there HazMat trained medical response teams? ☒ Yes ☐ No

a) At what HazMat level are they trained? FRO- Haz Tech

b) Is there capability to do decontamination in an emergency room? ☒ Yes ☐ No

c) Is there capability to do decontamination in the field? ☒ Yes ☐ No

Identify who the Medical Health Operational Area Coordinator is:

☐ Health Officer ☐ EMS Agency ☒ Jointly Appointed

Do you have specific training for mass casualty incident policies? ☒ Yes ☐ No

Are you using the Standardized Emergency Management System (SEMS)? ☒ Yes ☐ No

a) Does it incorporate a form of Incident Command System (ICS) structure? ☒ Yes ☐ No

Are you integrated in the Medical/Health Branch of the Operation Section in each operational area Emergency Operations Center within your jurisdiction? ☒ Yes ☐ No

Have you tested your multicasualty incident plan this year? ☐ Yes ☒ No

a) Was it a real event? _____

b) Was it an exercise? None due to COVID Incident.

Do you have formal agreements with the following in your operational area to participate in disaster planning and response:

a) Hospitals? ☒ Yes ☐ No

b) Community Clinics? ☐ Yes ☒ No

Annex 1

2021 EMS PLAN UPDATE: APPROVAL LETTERS

CALIFORNIA EMERGENCY MEDICAL SERVICES AUTHORITY

10901 GOLD CENTER DR., SUITE 400
RANCHO CORDOVA, CA 95670
(916) 322-4336 FAX (916) 322-1441



November 2, 2022

Mr. David M. Magnino, B.S. / EMT-P
EMS Administrator
Sacramento County Emergency Medical Services Agency
9616 Micron Ave, Suite 960
Sacramento, CA 95827

Dear Mr. Magnino,

This letter is in response to Sacramento 2021 Emergency Medical Services (EMS) plan, and the Trauma, St-Elevation Myocardial Infarction (STEMI), Stroke, and Quality Improvement (QI) plan submissions to the EMS Authority on May 16, 2022.

The EMS Authority has reviewed the EMS plan, based on compliance with statutes, regulations, and case law. It has been determined that the plan meets all EMS system components identified in Health and Safety Code (HSC) § 1797.103 and is approved for implementation pursuant to HSC § 1797.105(b). Based on the transportation documentation provided, please find enclosed the ground exclusive operating area status, as compiled by the EMS Authority.

The EMS Authority has also reviewed the Trauma, STEMI, Stroke and QI plans, based on compliance with Chapters 7, 7.1, 7.2, and 12, of the California Code of Regulations, Title 22, Division 9, and has approved for implementation.

In accordance with HSC § 1797.254, please submit an annual EMS plan to the EMS Authority on or before November 2, 2023. Concurrently with the EMS Plan please submit an annual Trauma, STEMI, Stroke, and QI plan. If you have any questions regarding the EMS Plan review, please contact Mr. Mark Olivas, Interim EMS Plans Coordinator, at (916) 384-1925.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Tom McGinnis', written over a blue circular stamp.

//for//

Tom McGinnis
Chief, EMS Systems Division

Enclosure

AW: rd

10901 GOLD CENTER DR., SUITE 400
RANCHO CORDOVA, CA 95670
(916) 322-4336 FAX (916) 322-1441

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Annex 2

2020 EMS PLAN UPDATE: APPROVAL LETTERS

EMERGENCY MEDICAL SERVICES AUTHORITY

10901 GOLD CENTER DR., SUITE 400
RANCHO CORDOVA, CA 95670
(916) 322-4336 FAX (916) 322-1441



September 15, 2021

Mr. Dave Magnino, EMS Administrator
Sacramento County Emergency Medical Services Agency
9616 Micron Avenue, Suite 960
Sacramento, CA 95827

Dear Mr. Magnino:

This letter is in response to Sacramento County's 2020 emergency medical services (EMS) plan, and the St-Elevation Myocardial Infarction (STEMI), Stroke, Trauma, and Quality Improvement (QI) plan submissions to the EMS Authority on July 2, 2021.

The EMS Authority has reviewed the EMS plan, based on compliance with statutes, regulations, and case law. It has been determined the plan meets all EMS system components identified in Health and Safety Code (HSC) § 1797.103 and is approved for implementation pursuant to HSC § 1797.105(b). Based on transportation documentation provided, the EMS Authority has noted your Emergency Ambulance Zone as Non-Exclusive and has enclosed for reference.

The EMS Authority has also reviewed the STEMI, Stroke, Trauma, and QI plans, based on compliance with Chapters 7, 7.1, 7.2, and 12 of California Code of Regulations, Title 22, Division 9, and has approved for implementation.

In accordance with HSC § 1797.254, please submit an annual EMS plan to the EMS Authority on or before September 14, 2022. Please also submit an annual STEMI, Stroke, Trauma, and QI plan concurrently with the EMS plan. If you have any questions regarding the EMS Plan review, please contact Ms. Lisa Galindo, EMS Plans Coordinator, at (916) 431-3688.

Sincerely,

A handwritten signature in blue ink that reads 'Tom McGinnis - EMT-P'. The signature is stylized and includes a small heart symbol above the 'i' in 'Ginnis'.

Tom McGinnis, EMT-P
Chief, EMS Systems Division

Enclosure

tm:lg

[illegible]

Sacramento County

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Trauma

Critical Care System Plan 2022 Annual Update

Prepared By:

Sacramento County
Department of Health Services
Division of Public Health
Emergency Medical Services Agency

**SACRAMENTO COUNTY
TRAUMA CRITICAL CARE SYSTEM PLAN
2022 ANNUAL UPDATE
April 1, 2023**

In accordance with State of California Code of Regulations, Title 22, Division 9, Chapter 7, Sacramento County submits this Trauma Care System Plan update.

Trauma Critical Care System Summary

The Sacramento County Trauma Care System is a network of three (3) in county and one (1) out-of-county trauma centers. Sacramento County Emergency Medical Services Agency (SCEMSA) designates trauma centers to provide emergency medical care to any patient who, after evaluation by prehospital emergency medical service (EMS) personnel, requires direct transportation to a facility specializing in trauma care.

The system undergoes review on a continuous basis. Reviews include quarterly Trauma Review Committee (TRC) meetings. Trauma surgeons and other professionals within Sacramento County and nearby counties conduct the meetings.

Trauma Critical Care System Changes

The TRC reviewed trauma related policies, listed later in this document, as part of the SCEMSA'S biannual policy review process. Most policy documents underwent only minor changes. However, one major change to the Sacramento County Trauma Care System in 2022 was the implementation of Policy Document (PD) # 8032 – Traumatic Cardiac Arrest, further discussed on page six.

Trauma Critical Care System Facilities

The following hospitals are in-compliance with current American College of Surgeons (ACS) standards and remain designated trauma-receiving facilities for Sacramento County trauma patients:

In-County

University of California Davis Medical Center

2315 Stockton Boulevard
Sacramento, CA 95817
(916) 734-2011
Level I Trauma Center
(Adult and Pediatric)

In-County

Mercy San Juan Medical Center

6501 Coyle Avenue
Carmichael, CA 95608
(916) 537-5000
Level II Trauma Center

In-County

Kaiser Permanente Medical Center - South Sacramento

6600 Bruceville Road
Sacramento, CA 95823
(916) 688-2000
Level II Trauma Center

Out-of-County

Sutter Roseville Medical Center

One Medical Plaza
Roseville, CA 95661
(916) 781-1200
Level II Trauma Center

**SACRAMENTO COUNTY
TRAUMA CRITICAL CARE SYSTEM PLAN
2022 ANNUAL UPDATE
April 1, 2023**

Trauma Critical Care System Goals and Objectives

The Trauma Critical Care System is a network of dedicated prehospital and hospital professionals tasked with maintaining or expanding the Sacramento region-wide Trauma Review Committee (TRC) forum through ongoing communication and teamwork. The focus is to enable detailed review and analysis of data, including unexpected surgical outcomes and to facilitate comprehensive data collaboration.

Goal 1. *Improve mechanisms for ensuring continuing compliance with trauma critical care system standards through continuous quality improvement (CQI) activities and data collection from both designated trauma centers and non-trauma centers.*

The TRC reviews local trauma protocols and policies, making suggestions for ongoing trauma care improvement in the prehospital and hospital settings. The TRC provides unique educational opportunities to physicians and administrators throughout the region and has been in place for nearly two decades. Contributing participants include trauma managers and surgeons from Sacramento, El Dorado, Placer, San Joaquin, and Yolo Counties, as well as regional forensic pathologists.

Goal 2. *Improve integration and coordination of trauma services within the emergency medical services system through continued data collection and analysis, as well as collaborative Trauma Critical Care System policy development through advisory committees.*

Inland Counties Emergency Medical Agency (ICEMA) functions as the repository of the Sacramento County trauma and EMS data. Under this system, trauma centers and EMS providers submit data directly to ICEMA, which hosts the California Emergency Medical Services Information System (CEMSIS). This system allows SCEMSA to review data as it is submitted, decreasing the time between submission, analysis, and review at advisory meetings.

SCEMSA works closely with the three (3) Sacramento County trauma centers to identify and correct any software issues associated with the direct submission of data to CEMSIS. Staff works to develop comprehensive reports, which incorporate the data fields requested from the TRC to identify positive trends and outcomes.

Figures 1, 2 & 3 below illustrate EMS-transports with a Trauma related Primary Impression per hospital. Red indicates the number of patients, who met trauma triage criteria (TTC), transported to each hospital. In the majority of cases involving patients meeting TTC taken to non-trauma hospitals, paramedics identified and documented paramedic judgement or high-speed motorized vehicle accidents as the positive TTC.

**SACRAMENTO COUNTY
TRAUMA CRITICAL CARE SYSTEM PLAN
2022 ANNUAL UPDATE
April 1, 2023**

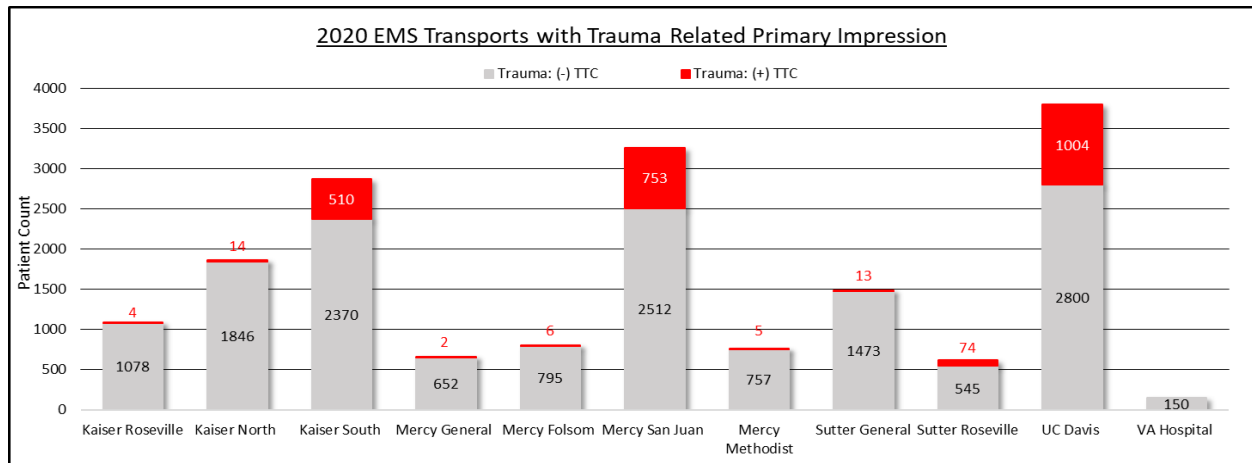


Figure 1

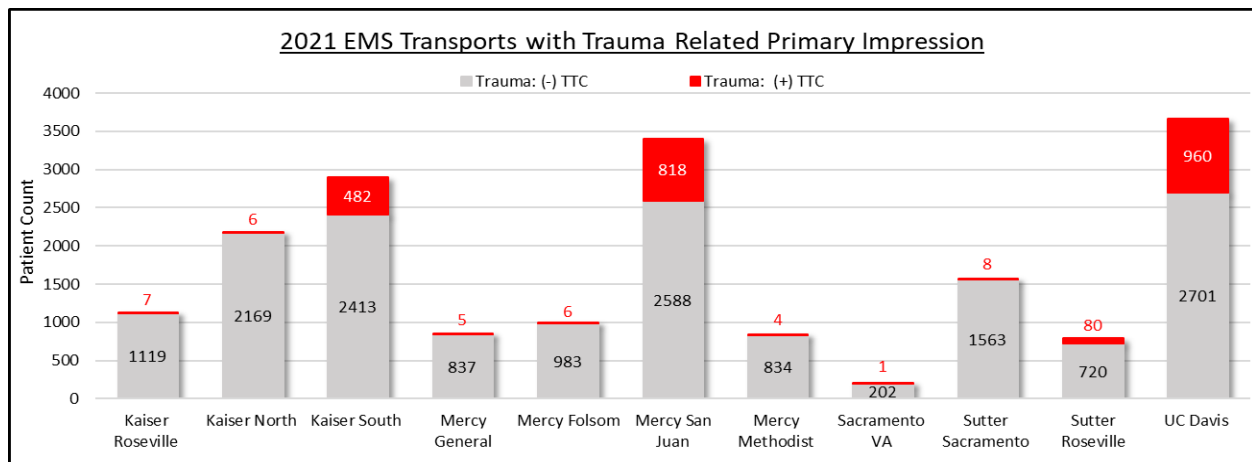


Figure 2

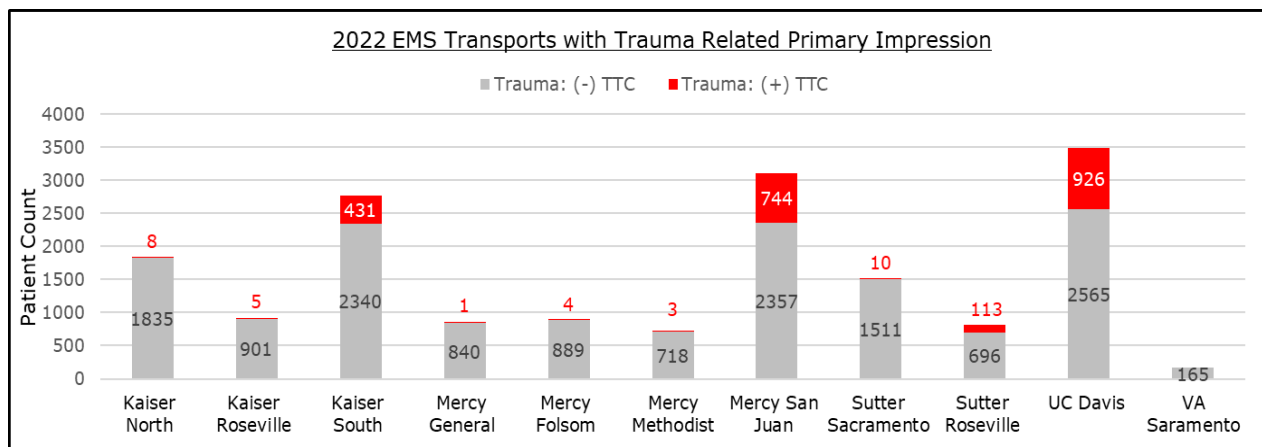


Figure 3

**SACRAMENTO COUNTY
TRAUMA CRITICAL CARE SYSTEM PLAN
2022 ANNUAL UPDATE
April 1, 2023**

Goal 3. *Improve coordination with adjacent counties of local trauma activities with regional trauma services, through involvement in CQI activities with out-of-county trauma centers and trauma systems.*

SCEMSA supports and participates in the North Regional Trauma Coordinating Committee (RTCC), resulting in improved communication among the North RTCC, out-of-county trauma centers, and SCEMSA.

Goal 4. *Improve accountability and objective evaluation of the trauma care system through data collection and analysis, utilizing a trauma registry and an audit and review process.*

In addition to ongoing local and regional trauma data review and analysis, each Sacramento County designated trauma center's data registry undergoes inspection every three (3) years. An independent, nationally recognized team of trauma surgeon experts from the American College of Surgeons Committee on Trauma conducts the inspections. Members of the inspection team review a sampling of patient charts. Data records undergo review for appropriateness and identify areas of improvement to practice when indicated.

The ACS has been working on site visits for Sacramento County hospitals following extensions provided during the COVID-19 State of Emergency. The current ACS standings for our hospitals are as follows:

- *University of California, Davis Medical Center (Adult and Pediatric)* – Current Verification Cycle: April 21, 2025. ACS Verification as a Level I trauma center following a site visit in April of 2022.
- *Mercy San Juan Medical Center* – Current Verification Cycle: September 22, 2025. ACS Verification as a Level II trauma center following a site visit in August of 2021.
- *Kaiser Permanente Medical Center - South Sacramento* – Current Verification Cycle: March 16, 2022. Verification COVID-19 Extension: March 16, 2023. ACS did not complete a site visit by the end of 2022.

Changes to Implementation Schedule

No changes in the current implementation schedule.

**SACRAMENTO COUNTY
TRAUMA CRITICAL CARE SYSTEM PLAN
2022 ANNUAL UPDATE
April 1, 2023**

System Performance Improvement

Prioritization of the Trauma Critical Care System objectives and goals, and active engagement at RTCC meetings drive Trauma Critical Care System improvement through:

➤ **Policy Review**

In 2022, due to COVID-19, the TRC continued to conduct meetings via Zoom in a virtual setting. The policy reviews conducted via email communication with the TRC members included:

#2007 **Trauma Hospital Data Elements** – Existing data points amended, added, and/or deleted as necessary.

#2026 **Trauma Review Committee** – Clerical updates only.

#5052 **Trauma Destination** – Trauma Triage Criteria definition added.

#6000 **Trauma Care System-General Provisions** – Added language clarifying that each designated trauma center shall be familiar with PD# 7500 – Disaster Medical Services Plan.

#8032 **Traumatic Cardiac Arrest** – In 2022, SCEMSA put into effect a new policy to address clinical and operational decision-making relative to traumatic arrest. This policy specifically addresses the use of vasoactive agents in the presence of traumatic arrest.

#9017 **Pediatric Trauma** – Clerical updates only.

**SACRAMENTO COUNTY
TRAUMA CRITICAL CARE SYSTEM PLAN
2022 ANNUAL UPDATE
April 1, 2023**

➤ Data submission and presentation

One (1) fulltime EMS Specialist oversees the Continuous Quality Improvement (CQI) Program and conducts data collection and presentation. The specialist works with trauma hospitals and surgeons to identify relevant indicators to improve the Trauma System.

Indicators include:

- Mechanism of injury
- Mode of Arrival
- Inter Facility Transports Data
- Patient Age
- Injury Severity Score Range
- Emergency Department Disposition
- Hospital Discharge Disposition

At the end of 2022, SCEMSA hired two new EMS Specialists, one as an additional CQI specialist and the other a Critical Care Specialist. They will both aid in trauma data collection and presentation, as well as system improvements based on collaboration with the hospitals.

➤ Additional reports as part of ongoing Trauma CQI

➤ Benchmarking key data points helps to evaluate overall Trauma System performance.

Trauma System participants regularly review data elements, which include:

- Prehospital scene times
- Wait time for inpatient rehabilitation beds for traumatic brain injury and spinal cord injury patients
- Secondary transfers of pediatric traumas
- Tranexamic Acid (TXA) Utilization
- Under-triage for trauma patients

SCEMSA continues expanding its collaboration between EMS providers and trauma centers through review and analysis of patient care data to effect system changes, which improve patient care and trauma incident outcomes in Sacramento County. Calendar year 2023 will bring more robust reporting on this topic.



STEMI

Critical Care System Plan 2022 Annual Update

Prepared By:

Sacramento County
Department of Health Services
Division of Public Health
Emergency Medical Services Agency

**SACRAMENTO COUNTY
STEMI CRITICAL CARE SYSTEM PLAN
2022 ANNUAL UPDATE
April 1, 2023**

In accordance with State of California Code of Regulations, Title 22, Division 9, Chapter 7.1, Sacramento County submits this ST Elevation Myocardial Infarction (STEMI) Critical Care System Plan Update.

STEMI Critical Care System Plan

The STEMI Care Committee reviews and evaluates prehospital and hospital care reports of patients that suffered a life-threatening, acute heart attack. Committee participants include representatives in public and private Advanced Life Support (ALS) transportation, nurses, physicians and other disciplines. The STEMI Care Committee identifies, through case and data review, areas needing improvement, implements process improvement and training/education, and recognizes excellence in performance and delivery of care.

2022 Overview

Sacramento County Emergency Medical Services Agency (SCEMSA) continues to improve the quality and accuracy of data reporting in order to improve STEMI care provided at Sacramento County STEMI receiving hospitals. SCEMSA continues to monitor documentation compliance and trend improvements via quality improvement audits and documentation dashboards for overall system monitoring.

Sacramento County providers transported 129,114 patients to the emergency room in 2022, of which, 608 were documented in prehospital patient care records as having a primary impression of STEMI. Of those 608, over 88% required a "STEMI Alert" to a Sacramento County designated STEMI-receiving Center (Figure 1). Furthermore, almost 55% of the STEMI alerted patients were documented as having an ECG negative for STEMI while only approximately 45% had an ECG positive for STEMI (Figure 2).

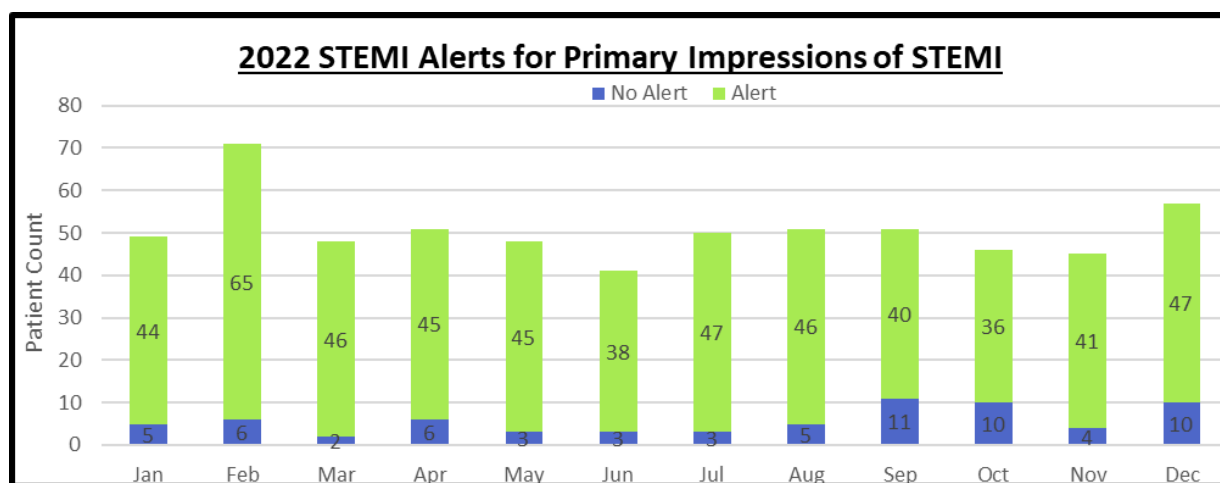


Figure 1

**SACRAMENTO COUNTY
STEMI CRITICAL CARE SYSTEM PLAN
2022 ANNUAL UPDATE
April 1, 2023**

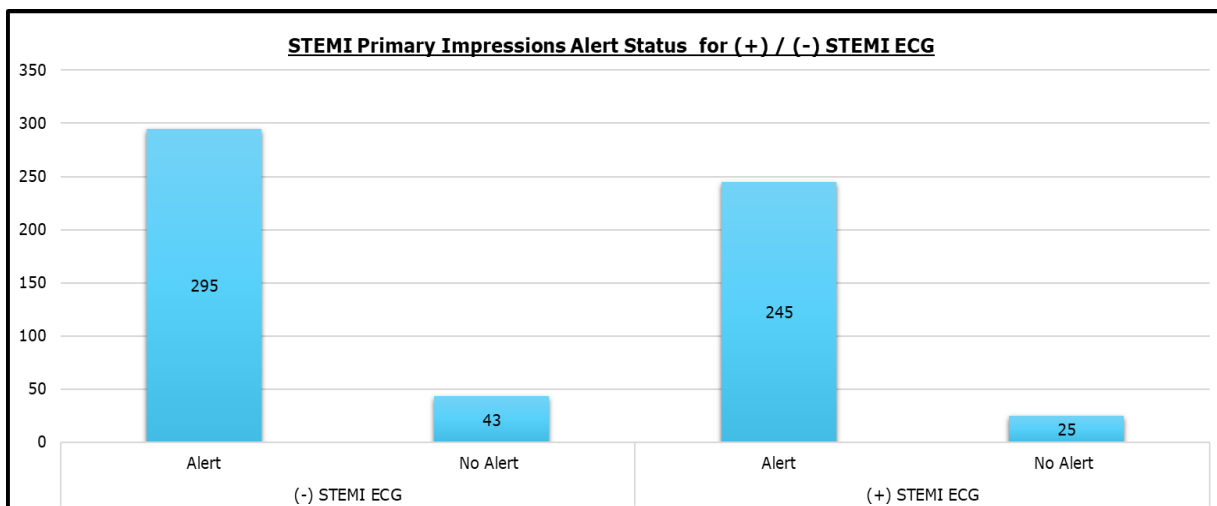


Figure 2

2022 Update

The STEMI Care Committee is the multi-stakeholder group which advises the SCEMSA Medical Director and Medical/Operational Advisory Committees to improve communication, review performance data and identify areas in need of improvement. It provides active feedback and offers potential quality improvement initiatives within our STEMI critical care system.

SCEMSA operates an established STEMI Critical Care System through executed contracts with seven (7) hospitals, five (5) within Sacramento County, and two (2) within the City of Roseville.

SCEMSA continues expanding its collaboration with EMS providers and STEMI-receiving hospitals through review and analysis of patient care data to effect system changes which improve patient care and STEMI incident outcomes in Sacramento. This includes expanding SCEMSA access to hospital data via the American Heart Association "Get With the Guidelines" data registry. This data integration was completed in early 2022, and more robust reporting is expected on this topic in the next plan reporting cycle.



Stroke

Critical Care System Plan 2022 Annual Update

Prepared By:

Sacramento County
Department of Health Services
Division of Public Health
Emergency Medical Services Agency

**SACRAMENTO COUNTY
STROKE CRITICAL CARE SYSTEM PLAN
2022 ANNUAL UPDATE
April 1, 2023**

In accordance with State of California Code of Regulations, Title 22, Division 9, Chapter 7.2, Sacramento County submits this Stroke Critical Care System Plan Update.

Stroke Critical Care System Plan

The Stroke Care Committee reviews and evaluates prehospital and hospital care reports of patients that suffered a life-threatening acute stroke. Committee participants include representatives in public and private Advanced Life Support (ALS) transportation, nurses, physicians, and other disciplines. The Stroke Care Committee identifies, through case and data review, areas in need of improvement, implements process improvement, and training/education and recognizes excellence in performance and delivery of care.

2022 Overview

Sacramento County Emergency Medical Service Agency (SCEMSA) continues to improve the quality and accuracy of data reporting in order to improve Stroke patient care provided at Sacramento County Stroke receiving hospitals. SCEMSA continues to monitor documentation compliance and trend improvements via quality improvement audits and documentation dashboards for overall system monitoring.

Sacramento County providers transported 129,114 patients to the emergency room in 2022, of which, 3,597 were documented in prehospital patient care records as having a primary impression of "Stroke/CVA/TIA." Of the stroke-related transports, over 88% were communicated as "Stroke Alerts" to Sacramento County Stroke Receiving Centers, facilitating the rapid delivery of specialty care upon ambulance arrival. These numbers are reflected in Figure 1.

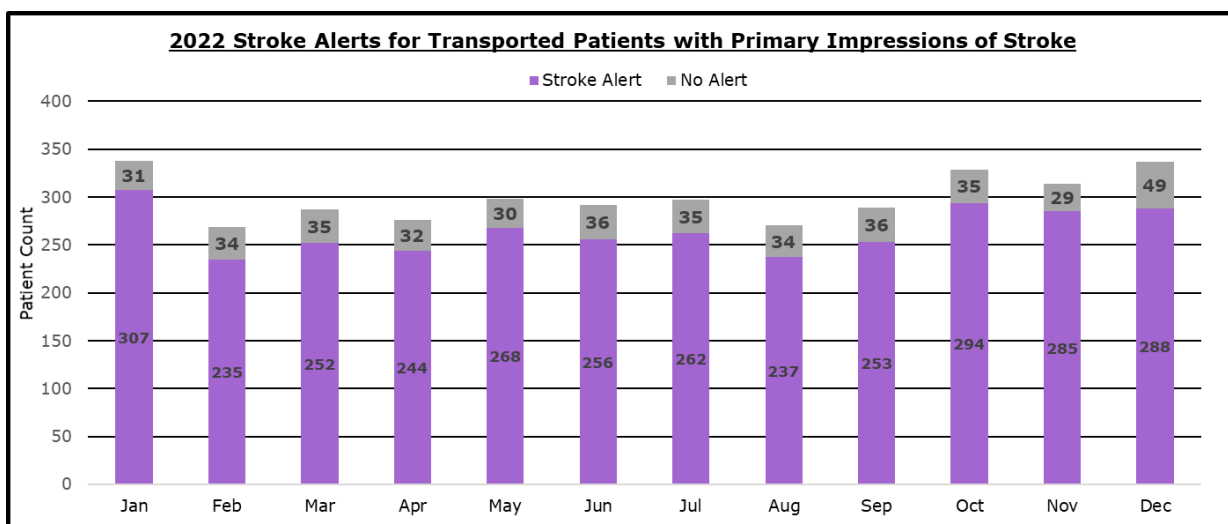


Figure 1

**SACRAMENTO COUNTY
STROKE CRITICAL CARE SYSTEM PLAN
2022 ANNUAL UPDATE
April 1, 2023**

2022 Update

The Stroke Care Committee is the multi-stakeholder group which advises the SCEMSA Medical Director and Medical/Operational Advisory Committees to improve communication, review performance data, identify areas in need of improvement. It provides active feedback and potential quality improvement initiatives within our Stroke system.

SCEMSA operates an established Stroke Critical Care System through executed contracts with ten (10) hospitals, eight (8) within Sacramento County and two (2) within the City of Roseville. Four (4) of these facilities are Comprehensive Stroke Receiving Centers.

In 2022 SCEMSA, along with the Stroke Care Committee, reviewed and approved Policy Document (PD) 2529 "Stroke Receiving Center Designation" and PD 6002 "Stroke Critical Care System General Provisions" without changes.

Current policies and protocols do not have prehospital providers divert care to Comprehensive Stroke hospitals, but SCEMSA continues to evaluate the system needs based on communication, review of performance data, and suggested improvement initiatives within our Stroke Community.

SCEMSA continues expanding its collaboration with EMS providers and Stroke receiving hospitals through review and analysis of patient care data to effect system changes which improve patient care and stroke incident outcomes in Sacramento. This includes expanding SCEMSA access to hospital data via the American Heart Association "Get With the Guidelines" data registry. This data integration was completed in 2022. More reporting is expected on this topic in the next plan reporting cycle.



Quality Improvement Program

2022 Plan Annual Update

Prepared By:

Sacramento County

Department of Health Services

Division of Public Health

Emergency Medical Services Agency

**SACRAMENTO COUNTY
QUALITY IMPROVEMENT PROGRAM PLAN
2022 ANNUAL UPDATE
May 11, 2023**

In accordance with State of California Code of Regulations (CCR), Title 22 – Division 9, Chapter 12, and Sacramento County EMS Agency (SCEMSA) submits this Emergency Medical Services (EMS) System Quality Improvement Program Plan Update.

Quality Improvement Program (QIP)

The QIP provides comprehensive evaluations of prehospital patient care. Participants include representatives in communications, public and private Advanced Life Support (ALS) transportation, EMS training, and hospital emergency medical care. The QIP identifies, through prehospital patient care data review, areas needing improvement, implements process improvement and training/education, and recognizes excellence in performance and delivery of care.

Description of Agency

SCEMSA is located at 9616 Micron Ave, Suite 960, Sacramento, CA and oversees the hospitals' emergency departments and prehospital emergency medical providers servicing Sacramento County. SCEMSA does not hold any Exclusive Operating Area (EOA) agreements. SCEMSA is an equal opportunity county and strives for equality and transparency within the Agency.

Sacramento County EMS System providers include:

- Twenty-five (25) approved prehospital public and private Advanced Life Support (ALS) transportation and non-transport EMS Providers and two (2) Basic Life Support (BLS) EMS Providers
- Nine(9) hospitals this includes four (4) base hospitals and 3 trauma centers:

Base Hospitals	Trauma Centers
1. Kaiser South	1. Kaiser South
2. Mercy San Juan	2. Mercy San Juan
3. Methodist	3. UC Davis
4. UC Davis	

- Forty-eight (48) Training and Continuing Education Programs consisting of Emergency Medical Responder, Emergency Medical Technician, Paramedic, Mobile Intensive Care Nurse, Continuing Education, and CCR Title 22, Division 9, Chapter 1.5 Optional Scope program that includes Naloxone administration by Law Enforcement First Responders.

2022 Overview

SCEMSA works diligently to define consistent documentation standards and improve the quality and accuracy of data reporting capabilities to meet or exceed the State of California standards. With ten (10) different electronic patient care report (ePCR) platforms in use, every provider is submitting data to the CA EMS Information System (CEMSIS) using the latest Schematron. SCEMSA monitors documentation compliance and trend improvements via quality improvement audits and documentation dashboards in system monitoring.

**SACRAMENTO COUNTY
QUALITY IMPROVEMENT PROGRAM PLAN
2022 ANNUAL UPDATE
May 11, 2023**

2022 Update

The Technical Advisory Group (TAG)

TAG is a multi-stakeholder group that advises on the QIP. In 2022, the TAG continued to focus on optimizing data collection and documentation practices to provide the highest quality data for quality improvement by providing quarterly reports and feedback to stakeholders.

TAG Developments / Focus 2021:

- QIP compliance and evaluation method
- APOT continuous evaluation of APOT 1, 2.
- Cardiac Arrest with Return of Spontaneous Circulation (ROSC) policy change effectiveness monitored
- Quarterly system overview
- Quarterly Provider Dashboards of Specialty Services and 911 Responses

TAG Developments / Focus 2022:

- Monitored Scene times for STEMI
- Monitored Glucose Checks for Stroke
- Stroke Numeric Values
- Policy 5050 – ED to waiting room
- Monitoring of Scene times for trauma with positive trauma triage criteria
- Updates to documentation guidelines

Ambulance Patient Offload Times (APOT)

Sacramento County hospitals continue to experience some of the highest APOT times in the State. APOT Reports have been updated to meet the new guidelines set by the EMSA. The following APOT reports are available on SCEMSA's webpage and are updated bi-weekly:

- Ambulance Patient Offload Times (APOT) per Month for Sacramento County
- Ambulance Patient Offload Times (APOT) per Month by Hospital
- Ambulance Patient Offload Times (APOT) Previous Calendar Week per Hospital

Each report includes the APOT 90th percentile, the average and the patient count for the timeframe. In addition to making the times available, a monthly report which includes APOT 1, APOT 2 and APOT-3, is shared with stakeholders. (Figure 2). The APOT 3 metric was created by SCEMSA and is defined as total accumulated time on APOT in minutes. This measures the impact on EMS providers that takes place due to the loss of unit hours available for calls of service due to extended wait times. SCEMSA's continuous effort to reduce APOT included the implementation of new policy#5054 Assess and Refer for low Acuity Patients during the COVID-19 Outbreak. SCEMSA developed this policy which became effective on November 16, 2021. SCEMSA continues to monitor this policy and its effects on APOT.

**SACRAMENTO COUNTY
QUALITY IMPROVEMENT PROGRAM PLAN
2022 ANNUAL UPDATE
May 11, 2023**

Monthly APOT-1 per Month 2021 vs 2022

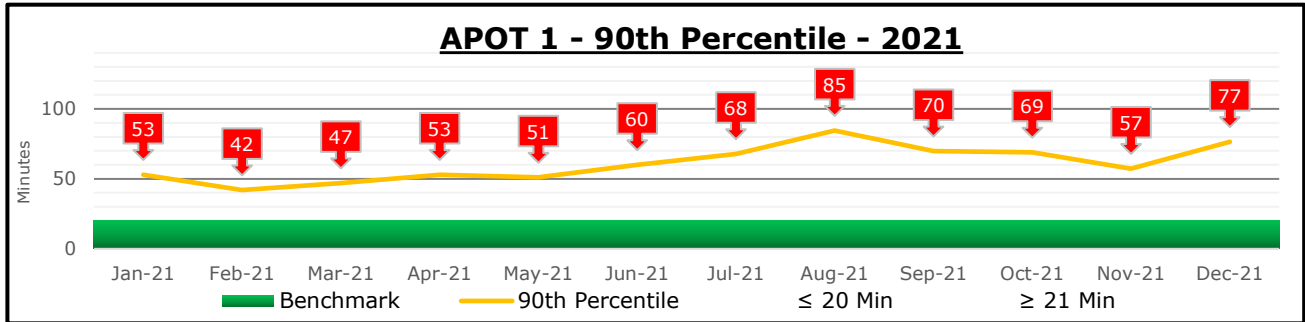


Figure- 2 a

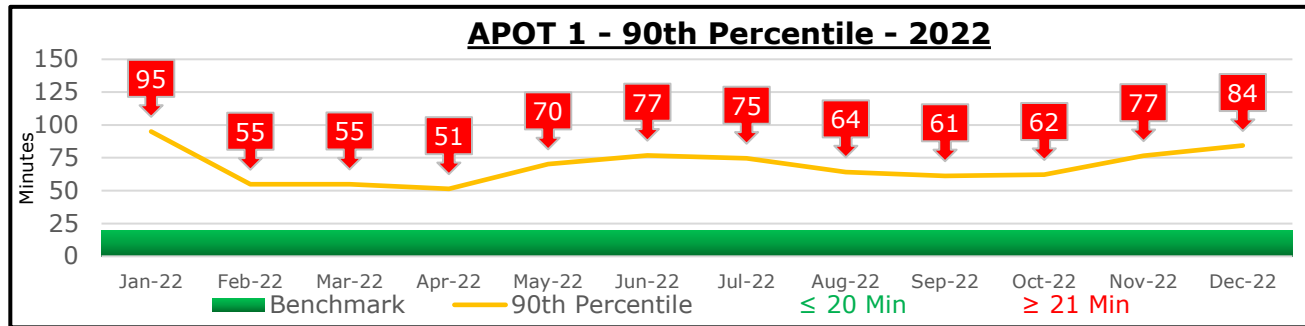


Figure- 2 b

Excess Hours per Month 2021 vs 2022

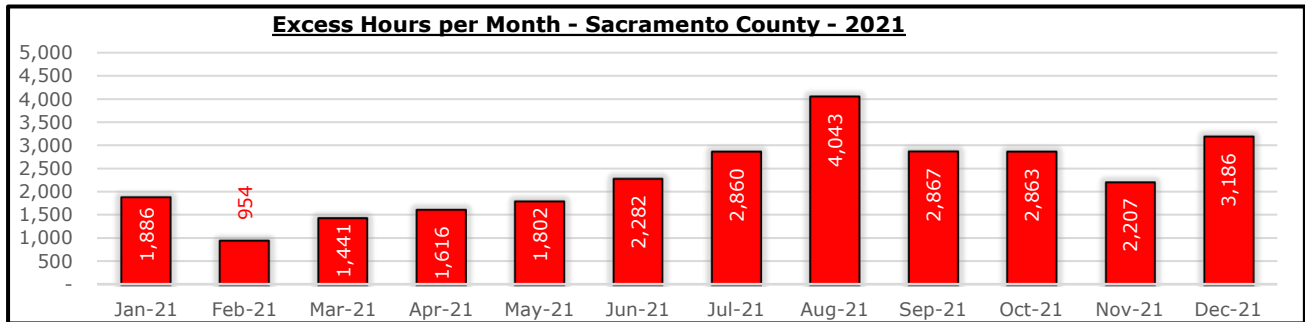


Figure- 3a

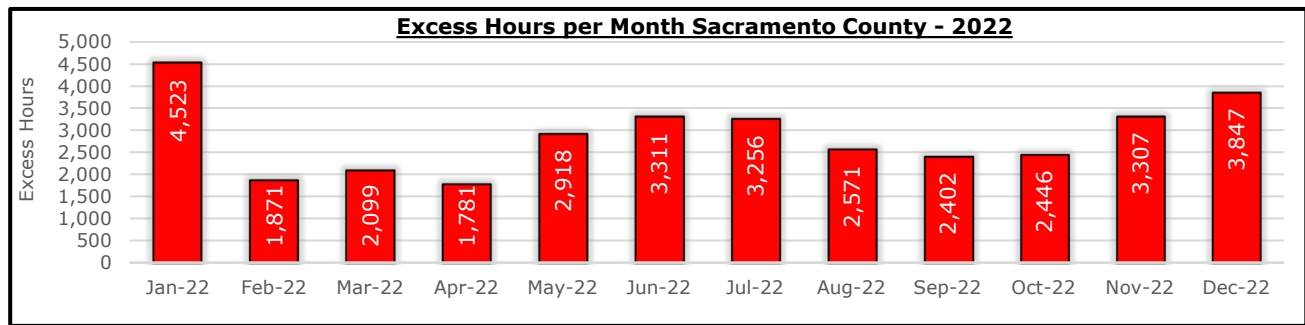


Figure- 3b

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Scene Times for STEMI Patients transported to area hospitals

SCEMSA works closely with provider agencies to monitor scene times for STEMI patients.

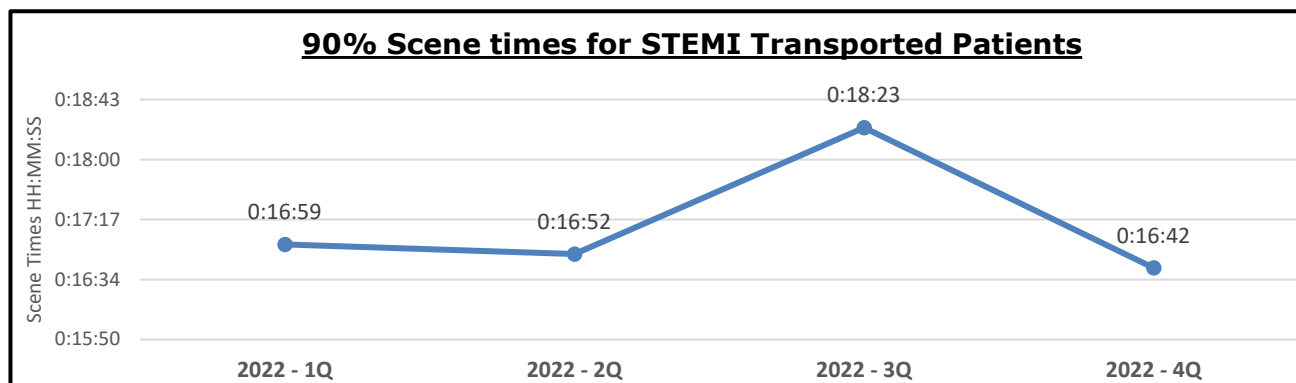


Figure- 4

Stroke Numeric Values, CPSS findings vs Hospital final Diagnosis.

SCEMSA worked with Dr. Keenan at UCD to compare stroke scales scores to LVO diagnosis. In Figure 5 we can see the EMS Cincinnati Stroke Scale and scores compared to the hospital final diagnosis of LVO Stroke.

Hospital LVO Status by EMS CPSS and Stroke Score Value 2021-4Q				
CPSS Positive				
Stroke Score Value	Negative LVO	Positive LVO	Blank LVO	Grand Total
Stroke Score - 0	62	9	24	95
Stroke Score - 1	104	19	30	153
Stroke Score - 2	55	15	11	81
Stroke Score - 3	15	12	4	31
Not Recorded	29	10	5	44
Grand Total	265	65	74	404
CPSS Non-Conclusive				
Stroke Score Value	Negative LVO	Positive LVO	Blank LVO	Grand Total
Stroke Score - 0	18	1	17	36
Stroke Score - 1	21	2	21	44
Stroke Score - 2	1		1	2
Stroke Score - 3				
Not Recorded	24	2	19	45
Grand Total	64	5	58	127
CPSS Negative				
Stroke Score Value	Negative LVO	Positive LVO	Blank LVO	Grand Total
Stroke Score - 0	40		12	52
Stroke Score - 1	4		6	10
Stroke Score - 2	2			2
Stroke Score - 3				
Not Recorded	24	2	8	34
Grand Total	70	2	26	98
CPSS Not Recorded/ Not Applicable				
Stroke Score Value	Negative LVO	Positive LVO	Blank LVO	Grand Total
Stroke Score - 0	7		3	10
Stroke Score - 1	2	1	1	4
Stroke Score - 2		1		1
Stroke Score - 3				
Not Recorded	6	3	4	13
Grand Total	15	5	8	28

Hospital LVO Percentage by EMS CPSS and Stroke Score Value 2021-4Q				
CPSS Positive				
Stroke Score Value	Negative LVO	Positive LVO	Blank LVO	Stroke Value Grand Total
Stroke Score - 0	65.26%	9.47%	25.26%	95
Stroke Score - 1	67.97%	12.42%	19.61%	153
Stroke Score - 2	67.90%	18.52%	13.58%	81
Stroke Score - 3	48.39%	38.71%	12.90%	31
Not Recorded	65.91%	22.73%	11.36%	44
Grand Total	65.59%	16.09%	18.32%	404
CPSS Non-Conclusive				
Stroke Score Value	Negative LVO	Positive LVO	Blank LVO	Grand Total
Stroke Score - 0	50.00%	2.78%	47.22%	36
Stroke Score - 1	47.73%	4.55%	47.73%	44
Stroke Score - 2	50.00%	0.00%	50.00%	2
Stroke Score - 3				
Not Recorded	53.33%	4.44%	42.22%	45
Grand Total	50.39%	3.94%	45.67%	127
CPSS Negative				
Stroke Score Value	Negative LVO	Positive LVO	Blank LVO	Grand Total
Stroke Score - 0	76.92%	0.00%	23.08%	52
Stroke Score - 1	40.00%	0.00%	60.00%	10
Stroke Score - 2	100.00%	0.00%	0.00%	2
Stroke Score - 3				
Not Recorded	70.59%	5.88%	23.53%	34
Grand Total	71.43%	2.04%	26.53%	98
CPSS Not Recorded/ Not Applicable				
Stroke Score Value	Negative LVO	Positive LVO	Blank LVO	Grand Total
Stroke Score - 0	70.00%	0.00%	30.00%	10
Stroke Score - 1	50.00%	25.00%	25.00%	4
Stroke Score - 2				
Stroke Score - 3	0.00%	100.00%	0.00%	1
Not Recorded	46.15%	23.08%	30.77%	13
Grand Total	53.57%	17.86%	28.57%	28

Figure- 5

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Core Measures:

SCEMSA evaluates the Core Measures on a quarterly basis and submits the annual report as required by the Emergency Medical Services Authority. Figure 8 below illustrates the Core Measures for Sacramento County prehospital providers. In addition to quarterly and annual evaluations, SCEMSA generates Core Measure individual reports for each provider to assist with identifying opportunities for improvement.

Measure ID #	Measure Name	Numerator Value (Subpopulation)	Denominator Value (Population)	Reported Value (%)	Notes and Comments
TRA-2	Transport of Trauma Patients to a Trauma Center	1878	2223	84%	
HYP-1	Treatment Administered for Hypoglycemia	1689	2228	76%	
STR-1	Prehospital Screening for Suspected Stroke Patients	3953	4142	95%	Suggestion: Prehospital Screening/ alerts should specify eDisposition. 12 of Treated and transported. Current specifications in this report captures any first unit on scene that transfers care to another unit and it includes any cancelled call.
PED-3	Respiratory Assessment for Pediatric Patients	549	573	96%	
RST-4	911 Requests for Services That Included a Lights and/or Sirens Response	152732	238647	64%	
RST-5	911 Requests for Services That Included a Lights and/or Sirens Transport	12433	109089	11%	For this measure specifications use eResponse.07 ground transport only, if ALS Ground Transport and BLS Ground transports our numbers change Num: 13,193 / Den: 128,120 resulting in 10.29%

Figure- 6

Quarterly Dashboards

SCEMSA continues to generate quarterly dashboards (Annex #3) to monitor and trend care provided for Trauma, STEMI, Stroke, and Pediatrics. Additionally, the dashboards trend call volume, call types and response times. SCEMSA shares the data with individual provider agencies along with the system totals for comparison.

Medical and Operational Advisory Committee (MAC/OAC)

The MAC/OAC includes all stakeholders and provides input on education, training, quality improvement, and data collection. The MAC/OAC conduct quarterly policy review which are effective on July 1st each year. When applicable, SCEMSA makes administrative edits as necessary with revised policy becoming effective immediately.

Accomplishments in 2022 include:

- Conducting all meetings via Zoom due to COVID-19 restrictions
- Addressing system challenges
- Policy reviews and updates
- Extended Optional Scope Policy Reviews
- Implementation of policies
- Education and training for new equipment

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Policy Changes and Implementation

<p>PD# 2007 – Trauma Hospital Data Elements</p>	<p>Under Policy A.:</p> <p>Added:</p> <ul style="list-style-type: none"> 2. EMS Patient Care Report Number (Ground/Air Ambulance) Universal Unique Identifier (UUID). 7. Incident Location County 8. Incident Location Zip Code 11. ED/Hospital Arrival Date 12. ED/Hospital Arrival Time 13. ED Discharge/Death Date 14. ED Discharge/Death Time 15. ED Discharge Disposition 16. Trauma Surgeon Arrival Date 17. Hospital Discharge Disposition 18. ICD-10 Injury Diagnosis Codes 19. ICD-10 External Diagnosis Code (Mechanism of Injury) 20AIS Diagnosis Codes 21. Other Transportation Mode (Mode of Arrival) <p>Removed:</p> <ul style="list-style-type: none"> 22. Date of Death or Discharge 23. Time of Death or Discharge 24. Hospital Transferred To 25. Discharge Destination 26. ICD-10 Diagnosis Codes 27. AIS Diagnosis Codes 28. AIS Body Region and AIS Severity Data 29. ICD-10 (Mechanism of Injury) Code 30. Mode of Arrival
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PD# 2010 – Medical Advisory Committee	<p>Under Policy A.:</p> <p>Language was changed from “The committee shall meet every other month” to “every three months”.</p> <p>Minor grammatical edits made.</p>
PD# 2020 – Operational Advisory Committee	<p>Under Policy A.:</p> <p>Language was changed from “The committee shall meet every other month” to “every three months”.</p>
PD# 2060 – Hospital Services	<p>Added: * The Sacramento Veterans Administration Medical Center (VAMC) shall receive only the following patients:</p> <ul style="list-style-type: none"> • Veteran patients requesting to be transported to the VAMC. • Patients under Cardio-Pulmonary Resuscitation (CPR) when the VAMC is the time closest facility. • Patients with an unstable airway when the VAMC is the time closest facility.
PD# 2085 – Do Not Resuscitate (DNR)	<p>Under Purpose:</p> <p>Added: Emergency Medical Technicians (EMT’s).</p> <p>Under Protocol:</p> <p>C. Added: The statement of “is no longer valid, and treatment should be provided in accordance with appropriate program document”.</p> <p>I. 2. Added: Durable Power of Attorney.</p> <p>J. Added: If possible, attach a photo of the DNR form, POLST, Living Will, or DNR Medallion to the ePCR.</p> <p>K. Added: Any DNR form, POLST form, Living Will, or DNR Medallion shall be transported with a patient and made available to hospital staff on arrival.</p>

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<p>PD# 2101 – Patient Initiated Refusal of Service and/or Transport</p>	<p>Under Policy:</p> <p>G. Added: Patients with Physician Orders for Life Sustaining Treatment (POLST) form indicating no transport may decline transportation, as per PD# 2085 – Do Not Resuscitate (DNR).</p> <p>Under Procedure:</p> <p>2. Added: Document the patient assessment was performed.</p> <p>3. b. Added: Gravely disabled.</p> <p>4. d. Added: (SBP < 90mmHg, resting Heart Rate > 120, or a Respiratory Rate > 20).</p> <p>4 g. Added: decision making.</p> <p>4 j. Added: Brief Resolved Unexplained Event (BRUE).</p>
<p>PD# 2200 – Medical Oversight</p>	<p>Under Definitions:</p> <p>Q. Added: Base Hospital Physician or a SCEMSA certified MICN.</p> <p>Under Policy:</p> <p>C. 1. Added: BHOs are protocol driven orders from SCEMSA policies which can only be given by currently certified MICN's or BHP.</p> <p>D. 1. Added: BPOs are physician orders given by a BHP outside of existing SEMSA policy/protocols, but which must be within medic Standard Operating Procedures (SOP).</p> <p>D. 2. Added: BPOs must be approved by a BHP but can be communicated to the medics by the MICN.</p> <p>Cross Reference Added:</p> <p>PD# 2525 – Prehospital Notification.</p>
<p>PD# 2221 – Paramedic Scope of Practice</p>	<p>Under Basic Scope of Practice:</p> <p>F. Added: Bi-level Positive Airway Pressure (Bi-PAP).</p>
<p>PD# 2223 – Paramedic Scope of Practice Utilization</p>	<p>Under Policy:</p> <p>Added: A. When ALS equipment is available, a California state licensed Paramedic employed by a locally designated ALS provider</p>

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PD# 2223 – Paramedic Scope of Practice Utilization (Cont.)	<p>at the time of an incident as a Paramedic may provide the Sacramento County Emergency Medical Services Agency (SCEMSA) scope of practice (SOP), PD# 2221 and patient assessment indicates ALS interventions are indicated.</p> <p>Cross Reference Added: PD# 2221 – Paramedic Scope of Practice</p>
PD# 2305 – EMS Patient Care Report-Completion and Distribution	<p>Under Title: Added: Submission.</p> <p>Under Policy: Removed: When a patient is transported, the PCR will be delivered with the patient to the receiving hospital.</p> <p>I. Added: Providers are responsible for timely software updates as needed by CEMSIS to ensure continuous ePCR uploads during software upgrades.</p> <p>J. Added: Providers must work with SCEMSA and CEMSIS to ensure > 95% ePCR upload success.</p>
PD# 2511 – Infectious Disease Ambulance Response Team (IDART)	<p>Under Example of Ambulance Patient Compartment Wrap: Added: 1. 6 mil (1 mil = 0.0254 mm).</p> <p>Under Training Requirements: 2. Added: Bullet Points</p> <ul style="list-style-type: none"> • Full process of donning and doffing PPE • Full process of setting up and removal of ambulance isolation set up. <p>Review and exercising of decontamination of ambulance and equipment.</p>
PD# 2524 – Extended Ambulance Patient Off-Load Times (APOT)	<p>Under Policy: A. 4. Added: Limited procedures necessary to triage patients to an appropriate area within the ED or other area of the hospital.</p> <p>5. Language removed.</p>

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<p>PD# 4050 – Certification-Accreditation Review Process</p>	<p>Under Procedure:</p> <p>A. Added: The relevant employer and SCEMSA shall adhere to the provisions of this policy, in applicable situations, when investigating or implementing any actions for a disciplinary cause.</p> <p>B. Added: EMSA may fine, deny, suspend, or revoke any accreditation/license/certification or may place any accreditation/license/certification issued under the Health & Safety Code, Division 2.5, on probation upon the finding by the Director of the occurrence of any of the actions listed below in Denial or Revocation of a Certificate, C and D.</p> <p>C. Added: SCEMSA may deny, suspend, or revoke any Paramedic accreditation, EMT/EMR certification, or may place any Paramedic accreditation, EMT/EMR certification, issued under the Health & Safety Code, Division 2.5, on probation upon the finding by the Medical Director of the occurrence of any of the actions listed under Denial or Revocation of a Certificate, C and D.</p> <p>Under Responsibilities of Relevant Employer:</p> <p>Added: EMR, EMT, And Paramedics.</p> <p>Under Responsibilities of Relevant Employer for EMR, EMT, and Paramedics:</p> <p>C. Added: The relevant employer shall notify the Medical Director within three (3) working days after an allegation has been validated as potential for disciplinary cause.</p> <p>D. Added: The relevant employer shall notify the Medical Director that has jurisdiction in the county in which the alleged action occurred within three (3) business days of the occurrence</p> <p>Under Jurisdiction of the Medical Director:</p> <p>C. Added: EMR and Paramedic.</p> <p>D. Added: EMR and Paramedic Accreditation.</p>
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<p>PD# 4050 – Certification-Accreditation Review Process (Cont.)</p>	<p>F. Added: EMR and Paramedic Accreditation.</p> <p>Under Temporary Suspension Order:</p> <p>A. Added: EMR, EMT or Paramedic Accreditation.</p> <p>A. 1. Removed: EMT Certificate.</p> <p>Under Certificate Holder Probation:</p> <p>B. Added: EMR/EMT and Paramedic Accreditation.</p> <p>Under Suspension of Certificate:</p> <p>Accreditation is added to title.</p> <p>A. Added: EMR/EMT certificate, or Paramedic accreditation</p> <p>D. Added: EMR, EMT or Paramedic</p> <p>Denial of Revocation of a Certificate:</p> <p>Accreditation is added to the title.</p> <p>A. Added: Accreditation.</p> <p>B. Added: Accreditation.</p> <p>C. Added: EMR and Paramedic accreditation.</p> <p>D. Added: EMR/EMT and Paramedic accreditation.</p> <p>G. Added: EMT certificate.</p> <p>Cross Reference Added:</p> <p>PD# 4055 – Criminal Background Checks.</p>
<p>PD# 4302 – Continuing Education Provider</p>	<p>Under Protocol:</p> <p>A.1. Added: Sacramento County Emergency Medical Services Agency</p> <p>Minor grammatical edits made.</p>
<p>PD# 5010 – Transfer of Care Non-Transporting Paramedic to Transporting Paramedic</p> <p>PD# 5010 – Transfer of Care Non-Transporting Paramedic to Transporting Paramedic (Cont.)</p>	<p>Under Protocol:</p> <p>F. Added: PD# 2305 – EMS Patient Care Report: Completion and Distribution.</p> <p>G. Added: PD# 7500 – Disaster Medical Services Plan</p>

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PD# 5052 – Trauma Destination	<p>Under Definitions:</p> <p>A. Added: Trauma Triage Criteria</p>
PD# 5054 – Assess and Refer for Low Acuity Patients During the Covid-19 Outbreak	<p>Policy Sundowned</p>
PD# 6000 – Trauma Care System-General Provisions	<p>Under Policy:</p> <p>Added: N. Each designated trauma center shall be familiar with PD# 7500 – Disaster Medical Services Plan</p> <p>Removed: O. Mass Casualty Incident (MCI): Additional policy direction for Multi Casualty Incidents in MCI PD#7510 directs EMS responders regarding the response, organization, personnel, equipment, resources and procedures for field operations during a multiple casualty incident. The policy is intended to be utilized in combination with the California OES Region IV and MCI Plan PD# 7500.</p> <p>Cross Reference Added:</p> <p>PD# 7500 – Disaster Medical Services Plan</p>
PD# 7601 – Quality Improvement Program-Technical Advisory Group (TAG)	<p>Added: Section titled Attendance with bullet points:</p> <p>A. Committee members are expected to attend all meetings.</p> <p>B. If unable to attend a meeting, a member is expected to notify SCEMSA in advance, in writing, and identify a replacement from their institution or agency to fill their position for that meeting.</p> <p>C. Any committee member resigning their position on the committee is responsible for having their facility or agency select a replacement, and for notifying SCEMSA, in writing, of the change in advance.</p> <p>Under Policy: Minor grammatical edits made.</p>
PD# 8002 – Diabetic Emergencies	<p>Policy separated from PD# 8061 – Decreased Sensorium.</p> <p>In Title:</p> <p>Added: (Hypoglycemia/Hyperglycemia)</p>

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<p>PD# 8002 – Diabetic Emergencies (Cont.)</p>	<p>Under Purpose:</p> <p>A. Added –To serve as a treatment standard for patients exhibiting signs and symptoms of a diabetic emergency.</p> <p>Under Hypoglycemia:</p> <p>Bullet Point 2. Added: Blood Glucose level \leq 60mg/dl.</p> <p>Bullet Point 3. Added: History of Diabetes.</p> <p>Under BLS:</p> <p>3. Added: If trauma suspected, assess for traumatic injury and/or need for Spinal Motion Restriction (SMR).</p> <p>ALS:</p> <p>5. Added: Airway management as needed per PD# 8020.</p> <p>Bullet Point 6. Added: In the event of glucometer failure, administer 10-12.5 grams of Dextrose or 1 mg of glucagon based on clinical assessment.</p> <p>Bullet Point 7. Added: Cardiac monitoring.</p> <p>NOTE:</p> <p>Bullet Point Added: fifteen (15) minutes.</p> <p>Hyperglycemia BLS:</p> <p>Bullet Point 2. Added: Management.</p> <p>Bullet Point 3. Added: Reference to PD# 8044.</p> <p>Hyperglycemia ALS:</p> <p>Bullet Point 1. Added: Perform blood glucose determination, if blood glucose \geq 350 mg/dl and no evidence of fluid overload, initiate vascular access, and administer a Normal Saline bolus of 500ml.</p> <p>Bullet Point 3. Added: Noninvasive Ventilations (NIV) as needed per PD# 8829.</p> <p>Bullet Point 4. Added: Cardiac Monitoring.</p> <p>Bullet Point 5. Added: Ondansetron when indicated for Nausea/Vomiting per PD# 8063.</p> <p>Cross References Added:</p>
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PD# 8002 – Diabetic Emergencies (Cont.)	PD# 8044 – Spinal Motion Restriction PD# 8829 – Noninvasive Ventilations PD# 8063 – Nausea and Vomiting PD# 8015 – Trauma PD# 8020 – Respiratory Distress: Airway Management PD# 8003 – Seizures
PD# 8003 – Seizures	Policy separated from PD# 8061 – Decreased Sensorium. Under Protocol: A. Added: For any Altered Level of Consciousness (ALOC), consider AEIOUTIPS with definitions. Under BLS: Added – Bullet Point 3. Assess for possible trauma per PD# 8015. Bullet Point 4. Added: PD# 8044 reference. Under ALS: Bullet Point 3. Added: PD# 8002 reference. Bullet Point 4. Added: Assess and treat the possibility of substance abuse per PD# 8004. 5. Added: Midazolam, under first bullet, point 2 mg increments. Cross References Added: PD# 8044 – Spinal Motion Restrictions (SMR) PD# 8015 – Trauma PD# 8004 – Suspected Narcotic Overdose
PD# 8004 – Suspected Narcotic Overdose	Policy separated from PD# 8061 – Decreased Sensorium. Under Protocol: A. Added: For any Altered level of Consciousness (ALOC), consider AEIOUTIPS with definitions. B. Added: (Consider any of the following). Bullet Point 4. Added: Pinpoint pupils.

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PD# 8004 – Suspected Narcotic Overdose (Cont.)	<p>Bullet Point 5. Added: Bystander or patient history of drug use, or drug paraphernalia on site.</p> <p>Under BLS: Bullet Point 3. Added: Naloxone: 2mg Intranasal (IN), or per dosing of pre-loaded IN Naloxone device. 2mg dose may be repeated x 1 for max dose of 4 mg. Bullet Point 5. Added: If trauma is suspected, assess for traumatic injury per PD# 8015. Bullet Point 6. Added: PD# 8044 reference.</p> <p>Cross References Added: PD# 8044 – Spinal Motion Restriction (SMR) PD# 8015 – Trauma PD# 8002 – Diabetic Emergencies PD# 8003 – Seizures</p>
PD# 8007 – Abdominal Pain	<p>Under Cross Reference: Removed: PD# 8827 – 12 Lead</p>
PD# 8020 – Respiratory Distress-Airway Management-Respiratory Failure	<p>NOTES Added: Track and vent dependent patients shall undergo the same level of airway monitoring as any patient with an advanced airway.</p>
PD# 8025 – Burns	<p>Under NOTE: Added: University of CA Davis Medical Center Burn Center Removed: Cardiac arrest shall go to the closest emergency department (ED)</p>
PD# 8028 – Environmental Emergencies	<p>Under Snake Bite – BLS: Added: Bullet Point 7. Added: Degree of Envenomation and Presentation Charts.</p>
PD# 8029 – Hazardous Materials	<p>Under Cross Reference: Removed: PD# 8836 – Medication Administration: DuoDote Auto Injectors</p>

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<p>PD# 8030 – Discomfort-Pain of Suspected Cardiac Origin</p>	<p>Under Protocol – ALS :</p> <p>Bullet Point 1. Added: With a priority to obtain a single good quality 12 lead ECG within 10 minutes of patient contact.</p> <p>Bullet Point 2. Added: Scene time for a STEMI should be ≤ 10 minutes.</p> <p>Bullet Point 5. Added: 12 lead</p> <ul style="list-style-type: none"> • Do not treat with Nitroglycerine added. • Administer ASA 324 mg PO added. • Obtain vascular access (when possible, avoid using right wrist or hand, as this is often used for cardiac catheterization) added. • With a STEMI pre-alert notification added. <p>6. Added: Nitroglycerine (NTG) may be given if not contraindicated</p>
<p>PD# 8030 – Discomfort-Pain of Suspected Cardiac Origin (Cont.)</p>	<p>NTG Contraindications Added:</p> <ul style="list-style-type: none"> • ECG is consistent with an Acute MI/STEMI • B/P is ≤ 90 systolic or drops > 30mm/HG from baseline after administration. <p>Heart rate is ≤ 50</p>
<p>PD# 8031 – Non-Traumatic Cardiac Arrest</p>	<p>In Title:</p> <p>Added: Non-Traumatic</p> <p>Under Purpose:</p> <p>Added: NOTE: For traumatic arrest see PD# 8032 – Traumatic Cardiac Arrest</p> <p>Under Post Resuscitation Considerations NOTE:</p> <p>Added: C. 3. b. Once ROSC is obtained</p> <p>Under Termination of Resuscitation Considerations:</p> <p>Added: In 2. Pulseless Electrical Activity</p> <p>Minor grammatical edits made</p>

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PD# 8042 – Childbirth	<p>Sections added:</p> <p>Special Circumstance:</p> <p>Added: When a midwife is present and accompanies transporting medics to the receiving center (response to a birthing center).</p> <p>Definitions:</p> <p>Added: A. and B.</p> <p>Protocol:</p> <p>Added: Sections A., and B.</p> <p>Added: Bullet Points 1., 2., and 3. under B.</p> <p>Cross Reference:</p> <ul style="list-style-type: none"> Added: PD# 2039 – Physician and/or Registered Nurse at the Scene
PD# 8061 – Decreased Sensorium (Adult)	<p>Sundown of Policy – The policy was separated into 3 policies.</p>
PD# 8062 – Behavioral Crisis-Restraint	<p>Under Protocol – BLS:</p> <p>1. Added: Ensure EMS provider safety. Request law enforcement as needed to ensure scene safety is maintained at all times.</p> <p>a. Added: If law enforcement response is requested but does not respond, or response is delayed:</p> <ul style="list-style-type: none"> Prehospital personnel will proceed with the assessment, treatment and transportation as noted below to the extent possible while maintaining scene and personnel safety. If it is unsafe to approach the patient, exit the scene and stage at a safe location. Contact the on duty supervisor to respond to the scene. Contact base hospital to discuss and consult about the situation and possible need for law enforcement evaluation for a 5150 application. Prehospital personnel will not perform any of the items noted below in #8 which are designated as the responsibility of law enforcement. Delayed or non-response by law enforcement after a request for assistance is made shall be documented in ePCRs.

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PD# 8062 – Behavioral Crisis-
Restraint (Cont.)

2. Added: If the scene has been determined safe, protect the patient from further injury.

5. Added: If possible, perform a Blood Glucose check.

6. Added: with a calm and reassuring approach and manner prior to involuntary restraint of the patient. Before restraining any patient, prehospital personnel must ensure there are sufficient properly trained personnel available to physically restrain the patient safely.

7. Added: Pre-hospital personnel will not perform any of the items noted below. These actions are the responsibility of law enforcement.

- Law enforcement personnel are responsible for the capture, detention, and restraint of assaultive or potentially assaultive patients.
- Law enforcement agencies retain primary responsibility for safe transport of patients under arrest.
- Handcuffs may only be applied by law enforcement personnel. Handcuffs should be replaced with leather or cloth restraints prior to transport. Patients under arrest, if handcuffed, must always be accompanied in the ambulance the law enforcement personnel.
- Prehospital personnel and law enforcement officers should mutually agree on the need for law enforcement assistance during transport of patients on a psychiatric detention.
- All restrained patients will be placed in a sitting, supine, Semi-fowlers or fowlers position.

Added – 9. Assessment of the patient's mental status, cardiovascular and respiratory status shall be made every 15 minutes.

Under Note:

Added: Pre-notification to the ED is required if the patient is chemically or physically restrained.

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<p>PD# 8062 – Behavioral Crisis- Restraint (Cont.)</p>	<p>Under Protocol ALS:</p> <p>Added: Respiratory.</p> <ul style="list-style-type: none"> • Supplemental O₂ as necessary to maintain SpO₂ ≥ 94%. Use lowest concentration and flow rate of O₂ as possible. <p>Under Precautions:</p> <p>C. Added: Hogtie restraints are prohibited is.</p> <p>D. Added: Sandwiching the patient between backboards is prohibited.</p> <p>F. Added: Prehospital personnel should not physically inhibit a patient’s attempt to leave the ambulance. However, every effort shall be made to release the patient into a safe environment. If a patient does leave the ambulance, prehospital personnel are to remain on scene, or at a safe staging location, until law enforcement arrives, or until law enforcement indicates that they will not respond to the incident. Any decision by law enforcement for non-response shall be documented clearly with time and date on ePCR is.</p> <p>G. Added: Prehospital personnel will notify hospital staff if the patient leaves while on hospital grounds.</p> <p>Under Notes:</p> <p>A. Added: Avoid using benzodiazepines for patients with alcohol intoxication.</p> <p>B. Added: Consider all possible medical/trauma causes for behavior crisis’s (e.g. hypoglycemia, overdose, substance abuse, hypoxia, seizure, head injury, etc.)</p> <p>C. Added: Do not irritate the patient with a prolonged exam. Be thorough but quick.</p> <p>D. Added – Do not overlook the possibility of associated domestic violence or child abuse.</p> <p>Cross References Added:</p> <p>PD# 2032 – Controlled Substances</p> <p>PD# 8002 – Diabetic Emergencies</p> <p>PD# 8004 – Suspected Narcotic Overdose</p> <p>PD# 2525 – Prehospital Notification</p>
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PD# 8065 - Hemorrhage	<p>Under Approved Tourniquet Devices:</p> <p>Added: SAM Extremity Tourniquet (SAM-XT)</p> <p>Added: Tactical Mechanical Tourniquet (TMT)</p> <p>Removed: Mechanical Advantage Tourniquet™</p> <p>Removed: Emergency and Military Tourniquet™</p>
PD# 9005 – Pediatric Decreased Sensorium	<p>Sundown of Policy – The policy was separated into 3 policies.</p>
PD# 9007 – Pediatric Diabetic Emergencies	<p>Policy separated from PD# 9005 – Pediatric Decreased Sensorium.</p> <p>Under Purpose:</p> <p>A. Added: To establish treatment standard for patients exhibiting signs and symptoms of a diabetic emergency.</p> <p>Under Hypoglycemia – BLS:</p> <p>3. Added: If trauma suspected, assess for traumatic injury and/or need to Spinal Motion Restriction (SMR) per PD# 8044.</p> <p>4. Added: If patient is seizing, protect the patient from further injury</p> <p>5. Added: If Blood Glucose is ≤ 60 mg/dl.</p> <p>Under Hypoglycemia – ALS:</p> <p>1. Added: Titrate to an appropriate Systolic Blood Pressure for patient's age.</p> <p>3. Added: Patient doesn't tolerate oral glucose.</p> <p>6. Added: Airway management as needed per PD# 8020.</p>
PD# 9010 – Pediatric Overdose and/or Poison Ingestion	<p>Sundown of Policy</p>
PD# 9011 – Pediatric Overdose	<p>New Policy Created.</p>
PD# 9017 – Pediatric-Trauma	<p>Minor grammatical edits with no change to the policy.</p>
PD# 9021 – Pediatric Behavioral Crisis-Restraint	<p>New policy created.</p>

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Paramedic Skill Verification Sheet	Under Skills Verification: 8. Removed: DuoDote Auto Injectors PD# 8836. 8. Added: Nerve Agent Exposure PD# 8027.
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Administration of Naloxone

SCEMSA monitors the administration of Naloxone. Monitoring includes:

- Ensuring law enforcement agencies train all officers in proper handling of Naloxone.
- Collecting documentation and reports of incidents requiring Naloxone administration
- Tracking patient care report data to ensure proper documentation from EMS provider.
- Providing feedback and continuous support to law enforcement

Figure 7 compares the years 2021 to 2022 incidents in which law enforcement administered Naloxone.

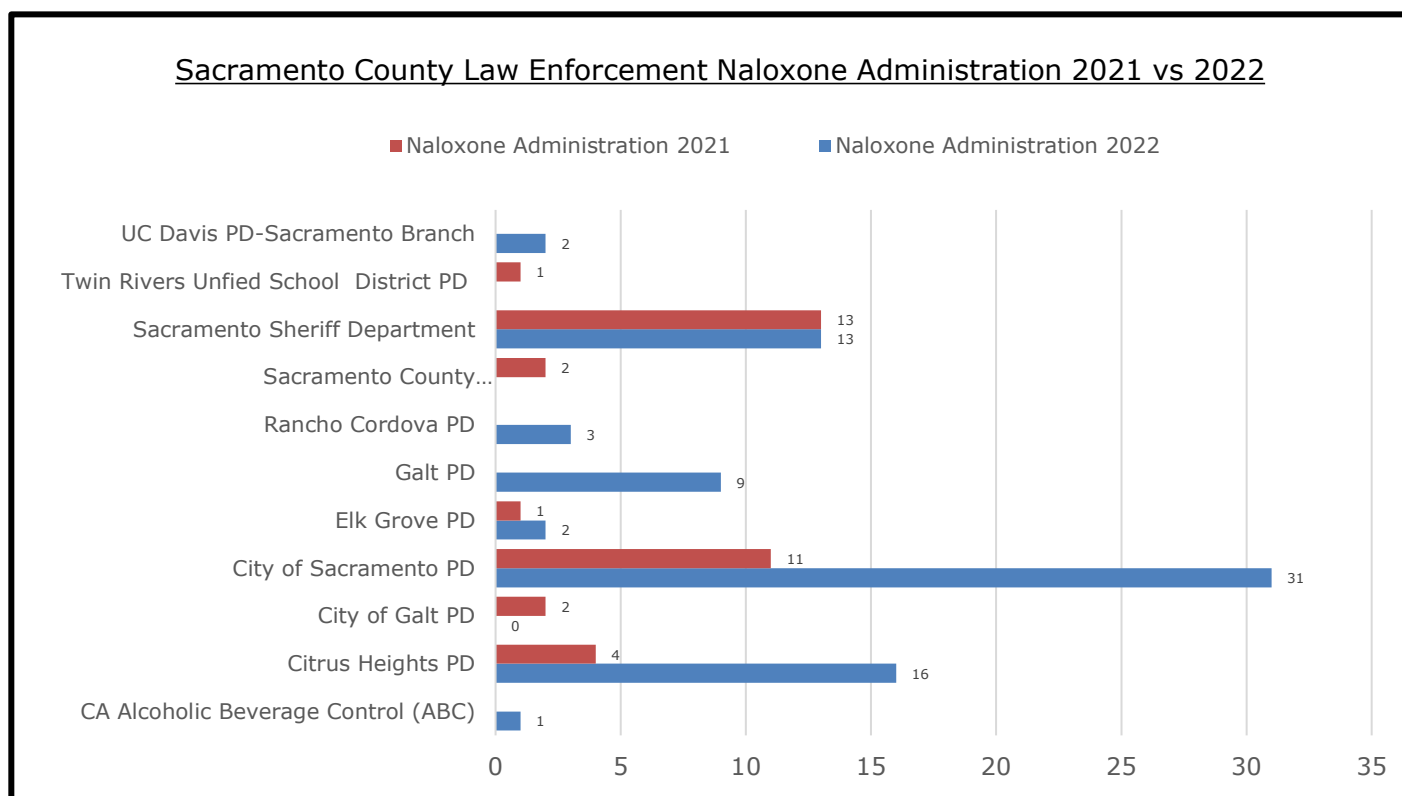


Figure- 7

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Figure 8 illustrates year 2021 Narcan use by EMS ambulance providers per month in Sacramento County compared to 2022. No significant change is seen in the comparison.

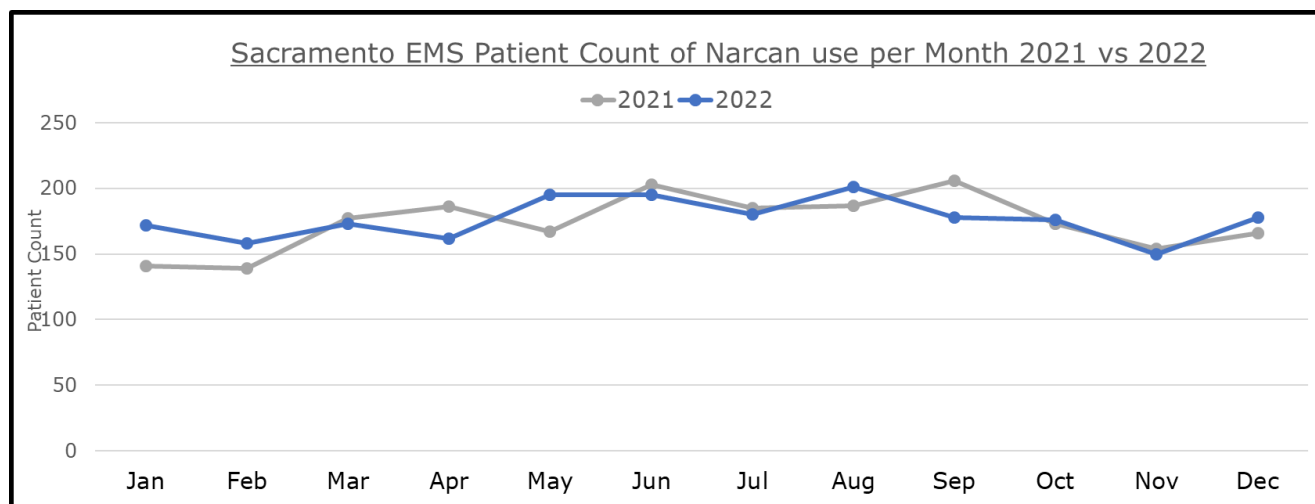


Figure- 8

Documentation Guideline

In anticipation to the implementation of NEMSIS 3.5 SCEMSA updated the documentation guidelines (ANNEX 2) to reflect the changes that will become effective September 2032. CEMSIS reports are currently being updated to reflect these changes.

2023 Plan

SCEMSA works on improving reporting capabilities and provider accountability to meet or exceed the State of California standards while continuing to build relationships with EMS providers and hospitals throughout the region. Areas of focus include:

- Monitoring APOT times
- Education
- Training
- Documentation Practices
- Monitoring of Core Measures performance indicators,
- Feedback to stakeholders.

SCEMSA will continue to collaborate with stakeholders to identify and address system needs. As well, continue to work in identifying solutions to assist in reducing APOT times in the region.