

### **Multicounty EMS Agency Name**

Agreement #\_\_\_\_\_

Quarter Report Number\_\_\_\_

# Reporting Period \_\_\_\_\_

Quarterly Reports are due to EMSA by the 15<sup>th</sup> calendar day of the month following the end of each quarter. The fourth quarter report is due by August 1<sup>st</sup>, and must include a Supplemental Year-End Data Report.

Quarterly Reports must contain a detailed description of work performed, the duties of all parties, and a summary of activities that have been accomplished during the quarter to meet the following eight EMS system components.

### Component 1 - System Organization and Management

Objective - To develop and maintain an effective management system to meet the emergency medical needs and expectations of the total population served.

Tasks: The responsibilities of the EMS agency, at a minimum, include:

- Staff development, training, and management
- Allocating and maintaining office space, office equipment, and office supplies
- Executing and maintaining contracts with member counties, service providers, consultants, and contractual staff
- Attending or participating in a minimum of 3 EMSA/LEMSA meetings annually (following advance notice and reasonable justification provided by the LEMSA, EMSA will make a determination on the flexibility of the attendance requirement on a case-by-case basis, and in the event the quarterly EMSA/LEMSA meeting is canceled, attendance at the meeting will not be counted for/against the LEMSA)
- Workload gap(s) identified in BCP 4120-022-BCP-2022-A1



### Component 2 - Manpower and Training

Objective - To ensure LEMSA authorized personnel functioning within the EMS system are properly trained, licensed/certified/authorized and/or accredited to safely provide medical care to the public.

Tasks: The responsibilities of the EMS agency, at a minimum, include:

- Ongoing assessment of local training program needs
- Authorizing and approving training programs and curriculum for all certification levels
- Providing training programs and classes as needed
- Providing ongoing certification/authorization/accreditation or personnel approval of local scope of practice for all certification levels
- Developing and maintaining treatment protocols for all certification levels
- Maintaining communication link with QI program to assess performance of field personnel
- Conducting investigations and taking action against certification when indicated
- Authorizing, maintaining, and evaluating EMS continuing education programs
- Workload gap(s) identified in BCP 4120-022-BCP-2022-A1

### **Component 3 - Communications**



Objective - To develop and maintain an effective communications system that meets the needs of the EMS system.

Tasks: The responsibilities of the EMS agency, at a minimum, include:

- On-going assessment of communications status and needs
- Assuring appropriate maintenance of EMS related communications systems
- Approving ambulance dispatch centers
- Providing acceptable procedures and communications for the purpose of dispatch and on-line medical control
- Approving emergency medical dispatch (EMD) training and/or operational programs
- Workload gap(s) identified in BCP 4120-022-BCP-2022-A1

### Component 4 - Transportation

Objective - To develop and maintain an effective EMS response and ambulance transportation system that meets the needs of the population served.

Tasks: The responsibilities of the EMS agency, at a minimum, include:

- Designating EMS responders including first responders, Limited Advanced Life Support (LALS)/Advanced Life Support (ALS) providers, ambulance providers, and Prehospital EMS Aircraft providers
- Monitoring local ordinances related to EMS
- Establishing policies and procedures to the system for the transportation of patients to trauma centers and/or specialty care hospitals as needed



- Implementing and maintaining contracts with providers
- Creating exclusive operating areas
- Inspecting ambulance or LALS/ALS providers
- Developing and enforcing performance standards as needed
- Workload gap(s) identified in BCP 4120-022-BCP-2022-A1

### **Component 5 - Assessment of Hospitals and Critical Care Centers**

Objective - To establish and/or identify appropriate facilities to provide for the standards and care required by a dynamic EMS patient care delivery system.

Tasks: The responsibilities of the EMS agency, at a minimum, include:

- Designating base hospital(s) or alternate base stations for on-line medical control and direction
- Identifying ambulance receiving centers including hospitals and alternative receiving facilities in rural areas
- Identifying and designating, as needed, trauma centers and other specialty care facilities
- Periodically assessing specialty care system and plan(s) as needed
- Coordinating specialty care patients to appropriate specialty care center(s) or approved receiving hospitals
- Periodically assessing hospitals (e.g., trauma centers, STEMI centers, stroke centers, pediatric critical care centers, emergency departments approved for



pediatrics (EDAP)/pediatric receiving centers (PedRC),pediatric intensive care unit (PICU)

- Completing hospital closure impact reports
- Workload gap(s) identified in BCP 4120-022-BCP-2022-A1

# Component 6 - Data Collection and Evaluation

Objective - To provide for appropriate system evaluation through the use of quality data collection and other methods to improve system performance and evaluation.

Tasks: The responsibilities of the EMS agency, at a minimum, include:

- Reviewing reportable incidents
- Reviewing prehospital care reports including Automated External Defibrillator (AED) reports
- Processing and investigating quality assurance/improvement incident reports
- Monitoring and reporting on EMS System Core Measures by March 31<sup>st</sup> each year, and acknowledging completion of the monitoring and reporting as of March 31<sup>st</sup> each year
- Providing near real time data to CEMSIS, or at no less than monthly intervals
- Implementing Health and Safety Code Section 1797.227, including providing data from Electronic Health Records (EHR) using the current NEMSIS and CEMSIS version standards

• Engaging healthcare partners and Health Information Organizations in your jurisdiction in discussions and planning efforts to integrate EMS into developing health information exchange networks that promote interoperability and the use of the Search, Alert, File, Reconcile Model



• Workload gap(s) identified in BCP 4120-022-BCP-2022-A1

## Component 7 - Public Information and Education

Objective - To provide programs to establish an awareness of the EMS system, how to access and use the system, and provide programs to train members of the public in first-aid and CPR.

Tasks: The responsibilities of the EMS agency, at a minimum, include:

- Information and/or access to CPR and first-aid courses taught within the EMS system
- Involvement in public service announcements involving prevention or EMS related issues
- Availability of information to assist the population in catastrophic events, as appropriate
- Participating in public speaking events and representing the EMS agency during news events and incidents
- Seeking opportunities to collaborate with key partners, including local public health and other community organizations, to promote healthcare and injury prevention activities
- Workload gap(s) identified in BCP 4120-022-BCP-2022-A1

### Component 8 - Disaster Response

Objective - To collaborate with the affected county/county's Office of Emergency Services, public health department(s), and EMS responders in the preparedness and response of the region's EMS system in the event of a disaster or catastrophic event within the affected operational area, region, or neighboring jurisdictions.

Tasks: The responsibilities of the EMS agency, at a minimum, include:

• Participating in disaster planning, training, and exercises, as needed



- Identifying medical disaster preparedness, mitigation, response, and recovery needs, as requested
- Coordinating the Medical Health Operational Area Coordination (MHOAC) Program or coordinating with the MHOAC Program of the affected county/counties, as appropriate
- Coordinating the Regional Disaster Medical Health Coordination (RDMHC) Program or coordinating with the RDMHC Program within the member county/county's California Office of Emergency Services mutual aid region
- Developing policies and procedures for EMS personnel in response to multicasualty or disaster incidents
- Participating in the development of mutual aid agreements, as requested
- Collaborating with EMS providers on Incident Command Systems (ICS) and Standardized Emergency Management System (SEMS) training, as requested
- Providing opportunities/exercises for Ambulance Strike Team Leader Trainees to complete their Position Task Books (PTB), as available
- Workload gap(s) identified in BCP 4120-022-BCP-2022-A1