

3340 Glenwood Street, Eureka, CA 95501 (707) 445-2081 (800) 282-0088 FAX (707) 445-0443

MEMORANDUM:

DATE: January 13, 2011

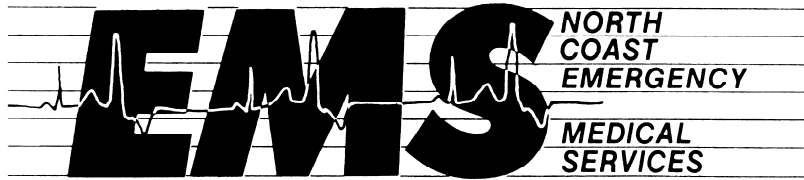
TO: Joint Powers Governing Board Members
County Health Officers
Lake County Administrative Officer
Prehospital Care Medical Directors
Prehospital Care Nurse Coordinators
Fire Chiefs' Associations/EMS Liaisons
EMCC Chairpersons

FROM: Tracy D'Amico, Administrative Assistant

RE: E-Informational Mailing

-
1. Policy Change Notice #91
 - a. Delete Polices # 2105, #4001, #4006, & #4009
 - b. Add Policy #4010
 - c. Add revised Policy #5438

 2. For Your Information:
 - a. Second Quarter Progress Report General Fund Contract #EMS-1051
 - b. Second Quarter Report for Contract #EMS-1070



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CHANGE NOTICE

CHANGE #91

January 13, 2011

TO: ALL PREHOSPITAL CARE POLICY MANUAL HOLDERS

INSTRUCTIONS	POLICY #	POLICY DESCRIPTION	# OF PAGES
DELETE	4001	Certification / Accreditation/Authorization Process	4
DELETE	4006	Crime Charge and/or Conviction Notification	2
DELETE	4009	Denial of EMT-1 and/or EMT II Certification	2
ADD	4010	Emergency Medical Technician Incident Investigation, Determination of Action, Notification and Administrative hearing Process	9
REPLACE	5438	Zofran (Ondansetron)	1

SUBJECT: Emergency Medical Technician Incident Investigation, Determination of Action, Notification and Administrative Hearings Process

- I. Authority and Reference (incorporated herein by references)
 - A. Division 2.5 of Health and Safety Code
 - B. California code of Regulations, Title 22
 - C. North Coast EMS Policies and Procedures

- II. Purpose
 - A. To establish a policy and procedure governing reportable situations and the evaluation and determination regarding whether or not disciplinary cause exists.

- III. Definitions

Certificate - means a valid Emergency Medical Technician (EMT) certificate issued pursuant to Division 2.5 of the California Health and Safety Code.

Certifying entity - as used in this policy, means the Medical Director of the North Coast EMS Agency.

Certification Action - means those actions that may be taken by the North Coast EMS Medical Director that include denial, suspension, revocation of a certificate, or placing a certificate holder on probation.

Certificate Holder – for the purpose of this policy, shall mean the holder of a certificate, as that term is described above.

CCR – means the California Code of Regulations, Title 22, Division 9.

Discipline - means either a disciplinary plan adopted by a relevant employer pursuant to Section 100206.2 of the CCR or certification action taken by a Medical Director pursuant to Section 100204 of the CCR, or both a disciplinary plan and certification action.

Disciplinary Cause - means an act that is substantially related to the qualifications, functions, and duties of an EMT and is evidence of a threat to the public health and safety, per Health and Safety Code Section 1798.200.

SUBJECT: Emergency Medical Technician Incident Investigation, Determination of Action, Notification and Administrative Hearings Process

Disciplinary Plan - means a written plan of action that can be taken by a relevant employer as a consequence of any action listed in Section 1798.200 (c). The Disciplinary Plan shall be submitted to the NORTH COAST EMS Medical Director and may include recommended certification action consistent with the Recommended Guidelines for Disciplinary Orders and Conditions of Probation for EMTs (MDOs).

Functioning outside of medical control - means any provision of prehospital emergency medical care which is not authorized by, or is in conflict with, any policies, procedures, or protocols established by the Merced County EMS agency, or any treatment instructions issued by the base hospital providing immediate medical direction.

Model Disciplinary Orders (MDO) - means the Recommended Guidelines for Disciplinary Orders and Conditions of Probation (EMSA document #134) which were developed to provide consistent and equitable discipline in cases dealing with disciplinary cause.

Prehospital emergency medical personnel - means those persons who have been certified/authorized/accredited as qualified to provide prehospital emergency medical care pursuant to Division 2.5, HSC.

Relevant employer(s) - means those ambulance services permitted by the Department of the California Highway Patrol or a public safety agency that the certificate holder works for or was working for at the time of the incident under review, as an EMT either as a paid employee or a volunteer.

Valid, Validate or Validated – for the purpose of this policy means to determine by preliminary investigation, within reasonable certainty, that a violation of Health and Safety Code §1798.200 may have occurred and that said violation may be reason for disciplinary cause.

IV. Policy

- A. Any information received from any source, including discovery through medical audit or routine follow-up on complaints, which purports a violation of, or deviation from, state or local EMS laws, regulations, policies, procedures or protocols will be evaluated pursuant to this policy and consistent with the CCR, Title 22, Division 9, Chapter 6.

SUBJECT: Emergency Medical Technician Incident Investigation, Determination of Action, Notification and Administrative Hearings Process

V. Procedure

A Responsibilities of Relevant Employer

1. Under the provisions of the CCR and this policy, relevant employers:
 - a) May conduct investigations to determine disciplinary cause.
 - b) Shall notify the North Coast EMS Medical Director within three (3) working days after an allegation has been validated as potential for disciplinary cause.
 - c) Upon determination of disciplinary cause, the relevant employer may develop and implement a disciplinary plan, in accordance with the Model Disciplinary Orders (MDOs).
 - 1) The relevant employer shall submit that disciplinary plan to the North Coast EMS along with the relevant findings of the investigation related to disciplinary cause, within three (3) working days of adoption of the disciplinary plan.
 - 2) The employer's disciplinary plan may include a recommendation that the Medical Director consider taking action against the holder's certificate to include denial of certification, suspension of certification, revocation of certification, or placing a certificate on probation.
 - d) Shall notify the Medical Director within three (3) working days of the occurrence of any of following:
 - 1) The employee is terminated or suspended for a disciplinary cause,
 - 2) The employee resigns or retires following notification of an impending investigation based upon evidence that would indicate the existence of a disciplinary cause, or
 - 3) The employee is removed from employment-related duties for a disciplinary cause after the completion of the employer's investigation.

B Jurisdiction of the North Coast EMS Medical Director

1. The Medical Director shall cause to have conducted investigations to validate allegations for disciplinary cause when the EMT is not an employee of a relevant employer or the relevant employer does not conduct an investigation. Upon determination of disciplinary cause, the Medical Director may take certification action as necessary against a certificate holder.
2. The Medical Director may, upon determination of disciplinary cause and according to the provisions of this policy, take certification action

SUBJECT: Emergency Medical Technician Incident Investigation, Determination of Action, Notification and Administrative Hearings Process

3. against an EMT to deny, suspend, or revoke, or place a certificate holder on probation, upon the findings by the Medical Director of the occurrence of any of the actions listed in Health and Safety Code, Section 1798.200 (c) and for which any of the following conditions are true:
 - a) The relevant employer, after conducting an investigation, failed to impose discipline for the conduct under investigation, or the Medical Director makes a determination that discipline imposed by the relevant employer was not in accordance with the MDOs and the conduct of the certificate holder constitutes grounds for certification action.
 - b) The Medical Director determines, following an investigation conducted in accordance with this policy, that the conduct requires certification action.
3. The Medical Director, after consultation with the relevant employer or without consultation when no relevant employer exists, may temporarily suspend, prior to a hearing, a certificate holder upon a determination of the following:
 - a) The EMT has engaged in acts or omissions that constitute grounds for revocation of the certificate; and
 - b) Permitting the EMT to continue to engage in certified activity without restriction poses an imminent threat to the public health and safety.
4. If the Medical Director takes any certification action the Medical Director shall notify the State EMS Authority of the findings of the investigation and the certification action taken by entering said information into the state registry.

C Evaluation of Information

1. A relevant employer who receives an allegation of conduct listed in Section 1798.200 (c) of the Health and Safety Code against a certificate holder and once the that relevant employer has validated the allegation, shall notify the North Coast EMS Medical Director, within three (3) working days, of the certificate holder's name, certification number, and the allegation(s).
2. When North Coast EMS receives a complaint against a certificate holder, North Coast EMS shall forward the original complaint and any supporting documentation to the relevant employer for investigation, if there is a relevant employer, within three (3) working days of receipt of the information. If there is no relevant employer or the relevant employer does not wish to investigate the complaint, the Medical Director shall evaluate the information received from a credible source, including but not limited to, information obtained from an application,

SUBJECT: Emergency Medical Technician Incident Investigation, Determination of Action, Notification and Administrative Hearings Process

medical audit, or public complaint, alleging or indicating the possibility of a threat to the public health and safety by the action of an applicant for, or holder of, a certificate issued by North Coast EMS or pursuant to Division 2.5, H&SC.

3. The relevant employer or Medical Director shall conduct an investigation of the allegations in accordance with the provisions of this policy, if warranted.

D Investigations Involving Firefighters

1. The rights and protections described in Chapter 9.6 of the Government Code shall only apply to a firefighter during events and circumstances involving the performance of his or her official duties.
2. All investigations involving certificate holders who are employed by a public safety agency as a firefighter shall be conducted in accordance with Chapter 9.6 of the Government Code, Section 3250 et. seq.

E Due Process

1. The certification action process shall be in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

F Determination of Action

1. Upon determining the disciplinary or certification action to be taken, the relevant employer or Medical Director shall complete and place in the personnel file or any other file used for any personnel purposes by the relevant employer or North Coast EMS, a statement certifying the decision made and the date the decision was made. The decision must contain findings of fact and a determination of issues, together with the disciplinary plan and the date the disciplinary plan shall take effect.
2. In the case of a temporary suspension order pursuant to Section 100209 (c) of the CCR, it shall take effect upon the date the notice required by Section 100213 of the CCR is mailed to the certificate holder.
3. For all other certification actions, the effective date shall be thirty days from the date the notice is mailed to the applicant for, or holder of, a certificate unless another time is specified or an appeal is made.

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G Temporary Suspension Order

1. The North Coast EMS Medical Director may temporarily suspend a certificate prior to hearing if there is a valid complaint that the certificate holder has engaged in acts or omissions that constitute grounds for denial or revocation according to Section 100216(c) of the CCR and, if in the opinion of the Medical Director, permitting the certificate holder to continue to engage in certified activity would pose an imminent threat to the public health and safety.
2. Prior to, or concurrent with, initiation of a temporary suspension order of a certificate pending hearing, the Medical Director shall consult with the relevant employer of the certificate holder.
3. The notice of temporary suspension pending hearing shall be served by registered mail or by personal service to the certificate holder immediately, but no longer than three (3) working days from making the decision to issue the temporary suspension. The notice shall include the allegations that allowing the certificate holder to continue to engage in certified activities would pose an imminent threat to the public health and safety.
4. Within three (3) working days of the initiation of the temporary suspension by North Coast EMS, North Coast EMS and the relevant employer shall jointly investigate the allegation in order for the North Coast EMS Medical Director to make a determination of the continuation of the temporary suspension.
 - a) All investigatory information, not otherwise protected by the law, held by North Coast EMS and the relevant employer shall be shared between the parties via facsimile transmission or overnight mail relative to the decision to temporarily suspend.
 - b) North Coast EMS shall serve within fifteen (15) calendar days an accusation pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code (Administrative Procedures Act).
 - c) If the certificate holder files a Notice of Defense, the administrative hearing shall be held within thirty (30) calendar days of North Coast EMS's receipt of the Notice of Defense.
 - d) The temporary suspension order shall be deemed vacated if the North Coast EMS fails to serve an accusation within fifteen (15) calendar days or fails to make a final determination on the merits within fifteen (15) calendar days after the Administrative Law Judge (ALJ) renders a proposed decision.

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H Final Determination of Certification Action by the Medical Director

1. Upon determination of certification action following an investigation, and appeal of certification action pursuant to Section 100211.1 of the CCR, if the respondent so chooses, the Medical Director may take the following final actions on an EMT certificate:
 - a) Place the certificate holder on probation
 - b) Suspension
 - c) Denial
 - d) Revocation

I Placement of a Certificate Holder on Probation

1. The North Coast EMS Medical Director may place a certificate holder on probation any time an infraction or performance deficiency occurs which indicates a need to monitor the certificate holder's conduct in the EMS system, in order to protect the public health and safety. The term of the probation and any conditions shall be in accordance with the MDOs. North Coast EMS may revoke the EMT certificate if the certificate holder fails to successfully complete the terms of probation.

J Suspension of a Certificate

1. The Medical Director may suspend an individual's EMT certificate for a specified period of time for disciplinary cause in order to protect the public health and safety.
2. The term of the suspension and any conditions for reinstatement shall be in accordance with the MDOs.
3. Upon the expiration of the term of suspension, the individual's certificate shall be reinstated only when all conditions for reinstatement have been met. The Medical Director shall continue the suspension until all conditions for reinstatement have been met.
4. If the suspension period will run past the expiration date of the certificate, the EMT shall meet the recertification requirements for certificate renewal prior to the expiration date of the certificate.

K Denial or Revocation of a Certificate

1. The Medical Director may deny or revoke any EMT certificate for disciplinary cause that has been investigated and verified by application of this policy.
2. The North Coast EMS Medical Director shall deny or revoke an EMT certificate if any of the following apply to the applicant:

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- a) Has committed any sexually related offense specified under Section 290 of the Penal Code.
 - b) Has been convicted of murder, attempted murder, or murder for hire.
 - c) Has been convicted of two (2) or more felonies.
 - d) Is on parole or probation for any felony.
 - e) Has been convicted and released from incarceration for said offense during the preceding fifteen (15) years for the crime of manslaughter or involuntary manslaughter.
 - f) Has been convicted and released from incarceration for said offense during the preceding ten (10) years for any offense punishable as a felony.
 - g) Has been convicted of two (2) or more misdemeanors within the preceding five (5) years for any offense relating to the use, sale, possession, or transportation of narcotics or addictive or dangerous drugs.
 - h) Has been convicted of two (2) or more misdemeanors within the preceding five (5) years for any offense relating to force, threat, violence, or intimidation.
 - i) Has been convicted within the preceding five (5) years of any theft related misdemeanor.
3. The Medical Director may deny or revoke an EMT certificate if any of the following apply to the applicant:
- a) Has committed any act involving fraud or intentional dishonesty for personal gain within the preceding seven (7) years.
 - b) Is required to register pursuant to Section 11590 of the Health and Safety Code.
4. Subsection 3. (a) and (b) shall not apply to convictions that have been pardoned by the Governor, and shall only apply to convictions where the applicant/certificate holder was prosecuted as an adult. Equivalent convictions from other states shall apply to the type of offenses listed in (a) and (b). As used in this Section, “felony” or “offense punishable as a felony” refers to an offense for which the law prescribes imprisonment in the state prison as either an alternative or the sole penalty, regardless of the sentence the particular defendant received.
5. This Section shall not apply to those EMT’s who obtain their California certificate prior to July 1, 2010; unless:
- a) The certificate holder is convicted of any misdemeanor or felony after July 1, 2010.
 - b) The certificate holder committed any sexually related offense specified under Section 290 of the Penal Code.

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- c) The certificate holder failed to disclose to the certifying entity any prior convictions when completing his/her application for initial EMT certification or certification renewal.
6. Nothing in this Section shall negate an individual's right to appeal a denial of an EMT certificate pursuant to this policy.
7. Certification action by the North Coast EMS Medical Director shall be valid statewide and honored by all certifying entities for a period of at least twelve (12) months from the effective date of the certification action. An EMT whose application was denied or an EMT whose certification was revoked by the North Coast EMS Medical Director shall not be eligible for EMT application by any other certifying entity for a period of at least twelve (12) months from the effective date of the certification action. An EMT whose certification is placed on probation must complete their probationary requirements with the EMS Agency that imposed the probation.

L Notification of Final Decision of Certification Action

1. For the final decision of certification action, the North Coast EMS Medical Director shall notify the applicant/certificate holder and his/her relevant employer(s) of the certification action within ten (10) working days after making the final determination.
2. The notification of final decision shall be served by registered mail or personal service and shall include the following information:
 - a) The specific allegations or evidence which resulted in the certification action;
 - b) The certification action(s) to be taken, and the effective date(s) of the certification action(s), including the duration of the action(s);
 - c) Which certificate(s) the certification action applies to in cases of holders of multiple certificates;
 - d) A statement that the certificate holder must report the certification action within ten (10) working days to any other LEMSA and relevant employer in whose jurisdiction s/he uses the certificate.

Approved: 

Approved as to Form: 

Dated 11/3/10

Subject: Scope of Practice/Procedure - Paramedic
Zofran (Ondansetron)

Associated Polices:

I. Policy

- A. Only North Coast EMS approved ALS Zofran provider agencies may carry and employ Zofran.
- B. Prior to receiving North Coast EMS Zofran approval, ALS provider must document that all that ALS provider agency's paramedic personnel have received adequate training in the use of Zofran. All provider Zofran documentation must be endorsed by the Prehospital Care Medical Director of the Base Hospital (or Modified Base Hospital) to which that provider has been assigned.
- C. All paramedics must complete **at least 1 hour** of training on the use of Zofran.

II. Indications

Intractable nausea and/or vomiting.

III. Therapeutic Effects

A serotonin 5-HT₃ receptor antagonist that acts as an antiemetic by reducing the activity of the vagus nerve.

IV. Contraindications

- A. Known sensitivity to Ondansetron (Zofran) or other 5-HT₃ antagonists including.
 - 1. Granisetron (Kytril)
 - 2. Dolasetron (Anzemet)
 - 3. Palonosetron (Aloxi)

V. Adverse Effects

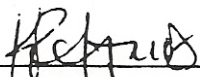
- A. Hypotension
- B. Tachycardia

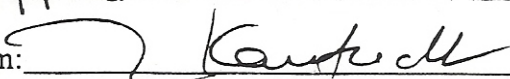
VI. Administration and Dosage

- A. Consider fluid bolus 250cc normal saline if patient has been experiencing significant vomiting. Repeat as needed.
- B. Administer 4 mg IM, PO (dissolvable tablet) or slow IV (over 30 seconds).
- C. Pediatrics: Greater than 4 years of age. 4mg IV slowly over 2 to 5 minutes/IM/IO. May repeat once in 30 minutes. 4mg PO orally dissolvable tablets.
- D. Contact base hospital physician for repeat dosages.

VII. Special Information

Appears to be safe for use during pregnancy.

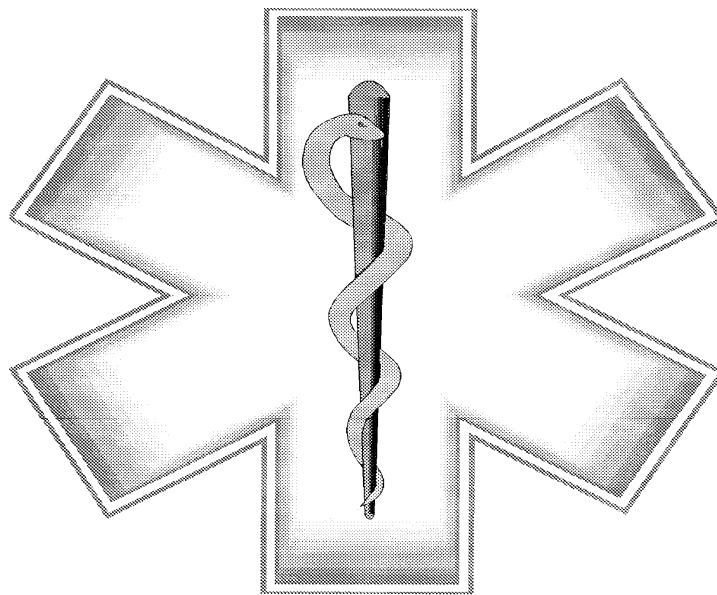
Approved: 

Approved as to Form: 

NORTH COAST EMERGENCY MEDICAL SERVICES

3340 Glenwood Street, Eureka, California 95501

Serving Del Norte, Humboldt, Lake and southern Trinity Counties



Second Quarter Progress Report

October 1, 2010 to December 31, 2010

General Fund Contract # EMS-1051

January 15, 2010

Overview:

In Fiscal Year 2010-2011, North Coast Emergency Medical Services (EMS) continued to serve as the local EMS agency for the functions delegated by Del Norte, Humboldt, Lake and southern Trinity Counties. The Agency managed the regional EMS system in accordance with state law, regulation and guideline, under direction of the Joint Powers Governing Board and in coordination with a large network of organizations and individuals. North Coast EMS staff and contractors facilitated the planning, coordination and evaluation of the EMS system through a program of community consensus, patient and EMS participant advocacy and continuous quality improvement (CQI).

Highlights during the second quarter: continued to submit Trauma and EMS CEMSIIS data to the Authority; attended EMSAAC and Trauma Summit III meetings, distributed EDAP funding (Maddy) to hospitals; submitted progress and annual reports for the North Coast Paramedic Training Program at College of the Redwoods; evaluated impact of Butte decision; conducted agency audit; continued to work with EMSA to revise Regional #104 document and EMS System Guidelines and Standards document; etc.

The Joint Powers Governing Board directed the activities of North Coast EMS during the second quarter of FY 2010-11. The Board consisted of the following members: Supervisor Rob Brown, Lake County, Chairperson; Supervisor Martha McClure, Vice-Chairperson, Del Norte County; and Supervisor Mark Lovelace, Humboldt County. Alternates to the JPA Board were: Supervisors Mike Sullivan, Del Norte County; Ann Lindsay, M.D., Humboldt County; and Supervisor Denise Rushing, Lake County. The Agency was managed by the following general fund employees (totaling 4.8 FTE):

- Larry Karsteadt, Executive Director (1.0 FTE)
- Louis Bruhnke, EMT-P, Associate Director (1.0 FTE)
- Wendy Chapman, Programs Manager (1.0 FTE)
- Maris Hawkins, Fiscal Manager (0.8 FTE)
- Tracy D'Amico, Administrative Assistant (1.0 FTE)

Several part-time independent consultants totaling less than 0.5 FTE were involved with general fund operations, including:

- Ken Stiver, M.D., Regional Medical Director
- Pam Mather, R.N., Regional Nurse Coordinator
- Cindy Henderson, EMT-P, AED and ETAD Review
- Jay Myhre, EPCIS Programmer
- Ezequiel Sandoval, Office Computer Maintenance
- Moss, Levy and Hartzhiem, Agency Audit

North Coast Emergency Medical Services General Fund #1051 Second Quarter Progress Report

Fiscal Year 2010-2011

The following report on progress at North Coast EMS during the second quarter of Fiscal Year 2010-11 meets the requirements of the California EMS Authority General Fund Contract #EMS-1051 and the document entitled: “EMSA Policy for Funding Regional EMS Agencies with State General Fund (July 2005; EMSA #104).”

1.0 System Organization and Management

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

Task: The organization and management responsibilities of the regional EMS agency, at a minimum, include:

- 1. Staff development, training and management:** North Coast EMS personnel attended or participated in state EMS functions, including: EMS for Children Conference in Sacramento, EMSAAC Conference in San Francisco, EMS for Children Conference Planning Meeting, EMSAAC Legislative Committee Calls, EMSAAC QIP Coordinators Meeting and Calls, EMSAAC QI Coordinators Data Subcommittee Calls, State Trauma Advisory Committee Calls, Flex Fund Planning & Program Calls, North Regional Trauma Coordinating Committee Call, EMS System Planning Guidelines Calls, Regional Council of Rural Counties Calls, EMSA/LEMSA Meetings, EMSA/Regional Calls, Western States Affiliates Mission Lifeline AHA Call, State Trauma Advisory Committee Calls and Trauma Summit III Meeting in San Francisco, CALPIERS Meeting, Hospital Association Meeting, CEMSIS Trauma Call, CAHAN Meeting, Rural Health Council Call; and, in local EMS functions: Humboldt/Del Norte Medical Advisory Committee (MAC) Meetings, Lake and Humboldt County Emergency Medical Care Committee (EMCC) Meetings, Humboldt County Child Death Review Team Meeting, Humboldt County Injury Prevention Committee Meetings, Humboldt County Child Passenger Safety Committee Meetings, Youth Safe Driving Committee Meetings, Humboldt Bay Regional Simulation Center, Humboldt, Del Norte and Lake County Fire Chiefs Association Meetings, Lake County Trauma Advisory Committee Meeting, Humboldt Cardiac Coordinating Committee Meeting, and the Joint Powers Governing Board Meeting.

- 2. Allocating and maintaining office space, office equipment, supplies:** North Coast EMS acquired supplies as needed , including the long planned Polycom Phone for use in Lake County. Two office computers were replaced. In Quarter 1, we purchased the new state required EMT 2010 printer so we could issue certifications.

- 3. Executing and maintaining contracts with member counties, service providers, consultants and contract staff:** North Coast EMS continued to receive Maddy Funds from all three counties and dispensed funds to designated EDAPs. These funds have been used to purchase Glide Scopes, pediatric crash carts, continuing education programs, etc at hospitals throughout the region. We invoiced the remaining funds from the Humboldt Area Foundation grant to the American Heart Association (around \$3,900) that will be used to upgrade the STAR ECG and help fund Pam Mather's contract. We received the state GF contract and submitted abbreviated first quarter GF and CEMSIS reports to the EMSA, and reinitiated a review of all local contracts. We continued to monitor base hospitals, EDAPs, trauma centers, training programs, CE Providers, ALS Providers as staff time allowed; discontinued the North Coast Paramedic Training Program Consortium Agreement; completed the Fiscal Audit; and continued staff contracts.

2.0 Staffing and Training

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

Workload Indicators for the Staffing Training responsibilities:

- 1. Total number and type of training programs conducted by regional agency:** The second North Coast Paramedic Training Program class continued at College of the Redwoods. The Consortium Agreement terminated and full responsibility for the program shifted to CR. Annual and progress reports were submitted to national accreditation and North Coast EMS is planning to assess compliance to state standards next quarter. Because we are no longer directly involved with conducting this program, we will no longer report on it here in the future. We are planning to coordinate a pediatric training program for this Spring if possible.

3.0 Communications

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

Task: The communications responsibilities of the regional EMS agency, at a minimum, include:

- 1. On-going assessment of the communications status and needs:** North Coast EMS and Lake County (thank to Dr. Tait) are assessing Med-Net frequencies, and we continue to facilitate meetings/discussions to ensure that all providers, hospital and Mt. Top Repeaters are narrowband compliant prior to the deadline.
- 2. Approval of ambulance dispatch centers (as delegated):** This function is not delegated, but all three counties have centralized dispatch for ambulances (with the exception of Hoopa Ambulance in Humboldt County). The Agency continues to support efforts to optimize use of dispatch for EMS responders in all three counties, including ongoing support of direct dispatch of the REACH ALS helicopter located in Lake County.

- 3. Approval of emergency medical dispatch (EMD) training and/or operational programs:** North Coast EMS continues to utilize Priority Dispatch Corp, USA Emergency Medical Dispatch (EMD) training and certification, which is currently in place at two dispatch centers, including: CALFIRE Fortuna and Eureka Policy Department. The Agency completed the process to update EMD policies and contracts with users according to state EMD Guidelines.

4.0 Transportation

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

Task: The response and transportation responsibilities of the regional EMS agency, at a minimum, include:

- 1. Inspection of ambulance or LALA/ALS providers (as delegated):** North Coast EMS previously discontinued ALS inspections other than for cause due to staff reductions. We are awaiting receipt of the contract to authorize Briceland Fire as a non-transporting ALS Provider and look forward to the potential addition of Humboldt Fire District #1 as a non-transporting ALS provider in the future.
- 2. Development of performance standards as needed.** Numerous policies and procedures were executed or drafted for public review in one periodic mailing. Authorized ALS Providers and Base Hospitals continue to submit quarterly QIP reports, each with a pre-selected relevant quarterly focus. These are summarized by staff and used to enhance system coordination and patient care. We also continue to work with our partners in all three counties to implement or enhance STEMI programs and are working on development of an Against Medical Advice Policy.

5.0 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.

Task: The facilities and critical care responsibilities of the regional EMS agency, at a minimum, include:

- 1. Complete hospital closure impact reports:** None were requested or completed in this quarter.
- 2. Emergency Departments Approved for Pediatrics (EDAPs):** North Coast EMS continued to receive and distribute funding for EDAPs as stated in 1.0 (3) above. At this time all targeted facilities (six of seven) are EDAP designated).
- 3. Base Hospital Monitoring:** North Coast EMS continued to monitor base hospitals as staff time allowed, including assessments of: successful verification of PdLN assignment at St. Helena Clearlake Hospital; successful verification of PCMD assignment at J. Phelps Hospital; and, successful verification of PdLN and PCNC assignment at St. Joseph Hospital.

4. Trauma Center Designation: The process to designate additional trauma centers in Humboldt County is on hold until next fiscal year. We plan to proceed with a formal site visit to Sutter-Lakeside Hospital to verify ongoing compliance with the Level IV standards this fiscal year. Staff continues to participate in the North – Regional Trauma Coordinating Committee process, and the state process to develop a Statewide Trauma Plan as a member of the State Trauma Advisory Committee. We recently led a discussion at the State TAC level to ensure that the RTCC role was appropriately addressed. Also, we continue to submit CEMSIS – Trauma data to the EMSA from our two trauma centers, although the patch at Sutter-Coast has still not been developed.

5. Cardiac Subsystem Development: North Coast EMS continues to work with the American Heart Association and local partners to develop a formal STEMI program in Humboldt County. Hopefully this will be completed with designation of St. Joseph Hospital as a STEMI Receiving Center before the end of June. The Executive Director continued to participate as an EMSAAC appointed member of the State STEMI Task Force and Western Affiliates Work Group.

6.0 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.

Task: The data collection and system evaluation responsibilities of the regional EMS agency, at a minimum, include:

- 1. Review of reportable incidents:** North Coast EMS reviews all received reportable incidents. During the quarter at least two reviews were conducted but no formal actions were taken at this time.
- 2. Review of prehospital care reports including Automated External Defibrillators (AED) reports:** The Agency maintains the regional prehospital care computerized reporting system and annually submits the AED report to the EMSA. All PCRs are electronically submitted, we prepare data reports upon request and were the first LEMSA in the state to successfully submit CEMSIS-EMS data to the EMSA. Aero medical transports in Lake County, trauma patient information at Sutter-Lakeside and Sutter-Coast Hospitals, internship records and Prehospital Care Records are routinely reviewed, and case review is conducted as needed. Please see the separate CEMSIS quarterly report for more information.
- 3. Quality Improvement Program:** North Coast EMS oversees an extensive Quality Improvement Program and utilizes an EMSA approved Regional QIP Plan. QIP Plans have been approved by North Coast EMS for all Base Hospitals and ALS Providers, who are also required to submit quarterly QIP reports. The EMS Coordinator summarizes the QIP quarterly reports each quarter to highlight excellence and selects, with input from QIP Liaisons, a different QIP focus each quarter. North Coast EMS utilizes Trauma and EMS data whenever possible to assist with our decision making process and routinely submits CEMSIS data to the State. Please see the separate CEMSIS quarterly report for more information.

4. **Trauma Advisory Committee:** We conduct periodic Lake County Trauma Advisory Committee meetings; one occurred this quarter. In Del Norte County, the Trauma Coordinator participates in Oregon and Redding based TACs and our local MAC meetings when possible.
5. **Processing and investigation of quality assurance/improvement incident reports:** The Agency has numerous policies regarding processing and investigation of incident reports. A few cases were reviewed this quarter.

7.0 Public Information and Education (PI&E)

Objective: To collaborate with community partners so that the population within the jurisdiction of the regional EMS agency has access to information and public information courses as it relates to emergency medical services.

Task: The public information and education responsibilities of the regional EMS agency, at a minimum, include:

1. **Involvement in the public service announcements involving prevention or EMS related issues:** North Coast EMS staff participate in local injury and illness prevention, children's safety programs as staff time permits. We also help the EMSA coordinate annual state EMSC conference and continue to work with the AHA to help promote public education on cardiac disease.
2. **Participation in public speaking events, and represent EMS agency during news events and incidents:** Agency staff participated in numerous EMS meetings this quarter including the State EMS for Children conference.

8.0 Disaster Medical Response

Objective: To collaborate with Office of Emergency Services, Public Health and EMS responders in the preparedness and response of the regions EMS system in the event of a disaster or catastrophic event within the region or in neighboring jurisdiction.

Task: The disaster medical response system responsibilities of the EMS region, at a minimum, include:

1. **Coordination with the regional disaster medical/health coordinator system:** North Coast EMS coordinates with the RDMHC as needed, including attending disaster planning meetings and observing exercises and drills as staff time permits.
2. **Collaborate with all EMS personnel on training of incident command and Standardized Emergency Management System (SEMS):** All North Coast EMS approved EMT-I and paramedic training programs include incident command, MCI and disaster training. The Agency collaborates with county disaster resources to help ensure SEMS training and maintains a Regional MCI Plan. North Coast EMS submitted letters of support for county HPP funding and we plan to work with our county colleagues and EMSAAC to assess future use of HPP LEMSA funding.

North Coast Emergency Medical Services Agency

Contract Number: EMS-1070

3340 Glenwood Street, Eureka, California 95501

Second Quarter Report: - October1, 2010 to December 30, 2010 (1/6/11)

Performance Requirement:

Program Reports: North Coast EMS Agency shall submit quarterly reports to EMSA that summarizes all accomplishments during the report term. All reports shall be submitted in a format and manner as prescribed by EMSA, to include: name of agency, full address, contract number, start and end date of report period. An original and one copy of each Quarterly Progress Report shall be sent to the EMS Authority. Quarterly reports are due on the 15th calendar day of the month following the end of each quarter. Failure to submit Quarterly Progress Reports on time may delay payment of claims for reimbursement.

Vendor Qualifications: It is the responsibility of the North Coast EMS Agency to ensure that their vendor's software is either a Gold or Silver NEMESIS/CEMSIS compliant product.

Services to Be Performed: The executed CEMSIS contract was received on October 22, 2010.

North Coast EMS Agency shall perform the following services:

Goal: To establish consistent and standardized data policy development, prevention activities related to traffic safety, system evaluation and quality improvement measures.

North Coast EMS continues to transmit regional prehospital care reports to the State EMS Authority according to the required CEMSIS format.

Objective:

- 1 . Acquire any necessary hardware and software to accomplish the objectives of the grant.

All ALS Providers in the region except Del Norte Ambulance are currently utilizing with the new CEMSIS compliant EPCIS 2010 program with the necessary hardware. The software has been installed on the Del Norte Ambulance computer but it has not yet been picked up from our office.

2. Coordinate with EMSA for receipt, storage, retrieval and transmission of all data in the format required by the project

As stated above, North Coast EMS successfully coordinated with the EMSA the first transmission of CEMSIS- EMS data in the State to the EMSA for the last two quarters.

3. Successfully complete the data transmission in the CEMSIS- specified transmission format by the required date

As stated above, North Coast EMS successfully coordinated with the EMSA the first transmission of CEMSIS- EMS data in the State to the EMSA for the last two quarters.

4. Provide oversight and management of the project objectives, time lines and budget

Continuous

5. Evaluate the transmission capability and adjust transmission protocol, as required.

Activity 1: Transmit Pre-hospital data to the EMS in approved CEMSIS format by July 30, 2010 for at least two providers.

Target date was delayed slightly but North Coast EMS was instrumental in working closely with the EMSA to ensure that they could receive EMS data from North Coast EMS.

Activity 2: Expand transmission of data for up to nine or more additional users by June 30, 2011 including Trinity County.

Completed - although the planned addition of Trinity County did not occur as expected due a scope of practice difference that required more time for EMSA approval. We are hopeful that Trinity County will join us in full next year with enough time to evaluate and organize a scope of practice transition period.

Activity 3: Utilize EPCIS 2010 data to help evaluate the EMS system, traffic safety and quality improvement measures by June 30, 2011.

Continuous as staff time allows.

Activity 4: Enhance EPCIS 2010 with provider input from both North Coast and Marin counties and develop the Manual.

Ongoing