



North Coast EMS Agency

Agreement #C18-006

2nd Quarter Task Report October 1 - December 31, 2018

Below each bulleted item, include a summary of the activities that have taken place during the quarter related to the individual tasks.

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

North Coast EMS personnel attended or participated in the following state EMS activities including: Health Informaton Exchange meetings and calls (Redwood MedNet), EMSA/LEMSA meeting(phone), EMSAAC meeting (SF), EMSA meeting (SF), and, in the following local EMS meetings and other activities: Humboldt/Del Norte Medical Advisory Committee (MAC) meetings, Lake County Emergency Medical Care Committee (EMCC) meetings, Lake County Inter-facility transfer meetings, Lake County concerns meetings, EMSC TACTICAL call with UCDMC and S-SV EMS, Policy Review Committee meetings, Advanced EMT call with Del Norte Ambulance, STEMI meeting at St Joseph Hospital (SJH), Trauma Center meetings at SJH, Mad River Community Hospital (MRCH), and Sutter-Coast Hospital (SCH) (three of four trauma centers), Joint Powers Governing Board meeting, Humboldt County Child Death Review Team meetings, Humboldt County Child Passenger Safety Committee meeting, Humboldt County Fire Chiefs Association meetings, Emergency Preparedness and HPP Disaster related meetings and calls, and other meetings.

- Allocating and maintaining office space, office equipment, and office supplies

North Coast EMS routinely maintains office space, equipment and supplies.

- Executing and maintaining contracts with member counties, service providers, consultants, and contractual staff

We executed or continued to execute administrative contracts with: EMSA General Fund, JPA member counties, UCDMC for the third year of the federal EMS for Children TACTICAL REGIONALIZATION grant, the HPP disaster medical grant with CDPH, Dr. Stiver as Regional Medical Director, Rita Henderson as EDAP and Trauma Nurse Contractor, ePCR IT programmer Jay Myhre, Ezequiel Sandoval - Office IT, Moss Levy and Hartzhiems - fiscal audit, Stayce Curry - Regional Behavioral Health contractor, Kayce Hurd –



Paramedic and EMT policy revisions, Dennis Louy and Elizabeth Wardell RN as County HPP Liaisons for Del Norte and Humboldt, Selinda Shontz – STEMI, ICEMA – Image Trend management; Coats Eureka Media Design. We contracted with Kimberly Baldwin as the Lake County HPP Liaison and initiated the process to solicit a Regional Medical Director (Dr. Stiver is phasing out after decades as our Medical Director and we thank him greatly for his many years of service) and EOA Oversight Officer. North Coast EMS continued to receive from, and distribute by request, Pediatric Maddy Funds in all three counties. We continued contracts with seven designated Paramedic Base and Receiving Hospitals, 14 Paramedic Service Providers, numerous First Responder agencies, three Emergency Medical Dispatch Centers, seven EDAPs, four Trauma Centers and one STEMI Receiving Center. By request we initiated a process to revise the Paramedic Base Hospital contract with SLH and continued the process to finalize the REACH Medical Holdings. LLC aero medical contract.

- 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)

North Coast EMS attended the last meeting by phone.

Component 2 - Staffing 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

North Coast EMS has numerous mechanisms for determining training program needs, including: meetings where EMS system and training needs are discussed or can be requested; staff attendance at state and federal meetings where best practices are reviewed; communications with regional EMS instructors; review of quarterly QIP reports from base hospitals and providers, input from stateholders, etc. We have continued to work with local instructors, responders law enforcement and county representatives to support and clarify state standards and policies associated with the addition of Naloxone to the local scope of practice. Several providers are now approved for Public Safety training and Naloxone. We are sponsoring and funding local First Responder training programs as part of the EMSC grant through UCDCM. We are also adding Epi Pens and Glucometers to the basic scope of practice for EMT's. Due to repeated alerts from some of our EMS provider agencies that they are unable to reliably stock narcotic analgesics, we continue the process to prepare a request to EMSA that we be allowed to add IV Acetaminophen and Ketamine to our local optional scope of practice. We also queried the EMSA and issued a memo that clarifies that no paramedic at the state or local level will be subject to disciplinary action because they were unable to follow protocol due to a medication shortage. To replace the EMSA discontinued use of Pediatric Intubation,



EMSA approved use of iGel for the region and this is being rolled out. We also discontinued use of Naso Tracheal Intubation by EMSA request.

In the Lake County issues meeting, the group requested more local training opportunities which we are happy to provide pursuant to topic input from the Fire Chiefs and other EMS partners. We are planning to host a presentation on the Tehama County shooting in Lake County, the annual EMSC conference and potentially, a SIM CENTER training opportunity focused on ED physicians (as the first priority) this Spring. Other training opportunities are under consideration. We are also assessing, with Del Norte Ambulance and other county representatives, the potential addition of a pilot Advanced EMT program for Del Norte County, and have recently inquired about the potential for a paramedic training program at Mendocino College that could help serve the interests of Lake County.

- Authorizing and approving training programs and curriculum for all certification levels

North Coast EMS has numerous approved training programs that have been verified to meet or exceed state minimum standards, including curriculum requirements. These programs include: Public Safety, First Responder, EMT-I, Paramedic, MICN, continuing education, etc. North Coast EMS has approved the expanded Public Safety and First Responder scope of practice to include Naloxone, added iGel to the paramedic scope of practice, and continue to work on the addition of Epinephrine (Public Safety, First Responder, EMT) and Ketamine and IV Tylenol (paramedic) scope additions. All other prior paramedic scope additions were continued or are under review by EMSA. Nasotracheal intubation has been removed from our local optional paramedic scope of practice as of January 1, 2019 by EMSA request. Please see the soon to be updated EMS Plan for more information regarding approved training programs.

- Providing training programs and classes as needed

We continue the process to approving Public Safety First Aid and coordinating First Responder courses as needed for the three counties, including Naloxone utilization for Public Safety and First Responder personnel according to state standards. The First Responder programs utilize our EMSC grant with UCD-MC to offset instructor training costs and, as stated above, we are working on hosting or co-hosting additional classes or conferences. The EMSC and HPP grants also continue to fund the purchase local training equipment, including Crash Kelly's for each county, etc.

- Providing ongoing certification/authorization/accreditation or personnel approval of local scope of practice for all certification levels

North Coast EMS issues numerous EMT-I certifications, paramedic accreditations and MICN authorizations annually. We have policies specific to BLS and ALS scope of practice and numerous continuously updated protocols and policies specific to the EMT-I and EMT-P scope of practice. We conducted a three-county wide Policy Committee teleconference meeting this quarter, are expanding the Basic and Advanced scope of practice and are assessing options for further enhancement of our policy review processes.



- Developing and maintaining treatment protocols for all certification levels

North Coast EMS has numerous policies specific to the BLS and ALS scope of practice and continuously updates protocols and policies specific to the EMT-I and EMT-P scope of practice. We convened one or two Policy Review Committee meetings via teleconferencing this quarter to ensure routine regionwide review and revision of North Coast EMS clinical policies. We are in the process of adding Epi Pen and Glucometer use to the Public Safety, First Responder and EMT scope of practice according to state standards and we are also assessing opportunities to continue improve the protocol review processes.

- Maintaining communication link with Quality Improvement program to assess performance of field personnel

North Coast EMS has extensive QI policies and the updated QIP Plan was recently approved by the EMSA. We previously approved base hospital and ALS Providers QIP Plans and require all approved ALS providers and designated base hospitals to submit quarterly QIP reports summarizing activities in each of the QIP regulation required categories. We also select a focused review topic each quarter.

- Conducting investigations and taking action against certification when indicated

North Coast EMS did not take any actions against a certificate holder but reviewed or are reviewing one or two cases.

- Authorizing, maintaining, and evaluating EMS continuing education programs

North Coast EMS has approximately 33 approved CEU providers. Please see the soon to be updated EMS Plan for specifics.

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

North Coast EMS previously approved, jointly with Napa County, the Emergency Medical Dispatch program at CALFIRE ECC in St. Helena, which is now the 9-1-1 dispatch center for Lake County. We also approved the aero medical dispatch plan for Lake County to utilize a single dispatch frequency by REACH Flight Guard upon activation by the St. Helena ECC.

- Assuring appropriate maintenance of EMS related communications systems

We plan to continue to work with each county, hospital and provider to help ensure future Med Net Communication Systems integrity. The JPA Governing Board previously approved requests to utilize the Med Net Trust Fund to conduct Mt. Top Repeater repairs in Humboldt County and to assist with the funding of Del Norte Ambulance cell



phone use rather than the more expensive repair of the Camp 6 Mt. Top Repeater located in Del Norte County.

- Approving ambulance dispatch centers

All three counties have centralized and North Coast EMS approved dispatch centers for ambulances. Hoopa {K'ima:w} Ambulance may occasionally be dispatched through a separate process in Humboldt County and the CALFIRE ECC in Fortuna, and CALFIRE ECC in Napa are North Coast EMS approved aero medical dispatch centers in Del Norte/Humboldt and Lake respectfully.

- Providing acceptable procedures and communications for the purpose of dispatch and on-line medical control

Communications procedures and medical control policies have been in place for decades and are updated as needed.

- Approving emergency medical dispatch (EMD) training and/or operational programs

North Coast EMS approved the national EMD training programs at the Eureka Police Department, the CALFIRE ECC in Fortuna and the CALFIRE St Helena ECC.

Component 4 - Response and 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

North Coast EMS designates First Responder training programs (see 2.1 above) Each County Board of Supervisors permits or contracts with ambulance providers. All ambulance providers, four non-transporting providers and one fixed wing aircraft provider are North Coast EMS approved ALS Providers. North Coast EMS has policies and MOUs specific to in- and out-of-area EMS helicopters. This quarter, we also drafted a comprehensive ALS Provider/Air Medical Approval Agreement with Cal-Ore/REACH (REQCh Medical Holdings. L.C.) that covers all three counties. It continues to be under review by Cal-Ore/REACH at this time but should be finalized soon.

- Monitoring local ordinances related to EMS

All three county ambulance ordinances are approved by the respective Boards of Supervisors and enforcement is the responsibility of the Public Health Departments with the assistance of North Coast EMS as needed. Lake County is interested in revising their ordinance and Humboldt County is interested in North Coast EMS assuming oversight responsibility of the Ambulance Ordinance as we roll out the Humboldt County Transportation (EOA) Plan. The Del Norte County Board of Supervisors, with North Coast



EMS input, approved the Del Norte County contract with Del Norte Ambulance and Lake County has expressed interest in updating it's ordinance. North Coast EMS participated in previous ordinance updates.

- Establishing policies and procedures to the system for the transportation of patients to trauma centers and/or specialty care hospitals as needed

North Coast EMS has established and periodically updates policies and procedures for the transportation of patients to trauma and other specialty centers as needed. North Coast EMS currently has four designated trauma centers, one in Del Norte County that receives all injured patients, two in Humboldt County with recently developed triage and destination criteria, and one in Lake County with triage criteria identical to Coastal Valley's EMS. We also have a STEMI destination policy that sends all STEMI patients directly to the designated STEMI Receiving Center. All policies are approved through public process.

- Implementing and maintaining contracts with providers

North Coast EMS has executed contracts with all approved ALS Providers and has a process to approve use of Naloxone by interested and trained providers. We also provided reference information for Lake County Fire relative to dispensing Naloxone following state standards, and conducted an assessment with the overseeing physician, fire department and base hospital specific to DEA record keeping in Lake County relative to paramedic use of narcotics. We concurred that records were kept appropriately and thank all of those involved for thoroughly evaluating this matter.

- Creating exclusive operating areas

North Coast EMS and EMSA determined that completed the sale of Arcata Mad River Ambulance to Cal-Ore/REACH (i.e., REACH Medical Holdings, L.C.) continued eligibility for EOA grandfathering. We initiated the process to solicit an EOA Oversight Officer to roll out the EOA and contract implementation process for CAE and AMRA pursuant to EMSA approval of the Humboldt County Transportation Plan.

- Inspecting ambulance or LALS/ALS providers

North Coast EMS delegates ambulance inspections to Base Hospital Prehospital Care Nurse Coordinator (PCNC)s for new ALS providers or for cause. No inspections have needed to be conducted recently.

- Developing and enforcing performance standards as needed

See above. We are planning to implement ambulance performance standards associated with the Humboldt County Transportation Plan following execution of the contract with a qualified EOA Oversight Officer.

Component 5 - Facilities and Critical Care

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

All seven base hospitals are designated by contract, six as “modified base hospitals” that are no longer required to utilize MICNs. Last quarter, the remaining base hospital, Sutter-Lakeside, requested information regarding Modified Base Hospital designation, we sent a contract sample but have not received anything back. SLH also requested a contract revision that we updated immediately, but at this time, we have not received follow-up information. We need additional staff time to adequately monitor base hospitals.

- Identifying ambulance receiving centers including hospitals and alternative receiving facilities in rural areas

All seven hospitals are designated receiving paramedic centers; another is a state designated mental health receiving facility. We have two alternate receiving centers at our two Standby Hospitals (St Helena Clearlake and Jerold Phelps), both of which were approved by the EMSA and North Coast EMS as Alternative Paramedic Receiving Hospitals years ago.

- Identifying and designating, as needed, trauma centers and other specialty care facilities

Please see the annual Trauma Plan update submitted to EMSA this quarter. Three Level IV trauma centers (two as Basic and one as With Surgery) and one Level III trauma center are designated within the three county region. Initial trauma centers fees were previously approved by the JPA Board and an interim annual fee of \$5,000 was approved by the JPA Governing Board this quarter while we continue to assess costs, relative volume information and receive input from trauma center representatives. At this time, three of the four trauma centers paid the interim fee and we will update the JPA Governing Board at the next meeting.

Importantly, after years of problems with Trauma Registry data transmission from Sutter-Coast and Sutter-Lakeside Hospitals, due to issues with the Trauma 1 program, both are now successfully transmitting data to the state registry and to North Coast EMS, and we are making progress on transmission for SJH and MRCH as well. We continued to work with all four trauma centers to enhance data collection, system evaluation and QI review processes and are planning Trauma Advisory Committee meetings for next quarter and a follow-up trauma center site survey at Sutter-Lakeside Hospital in 2019.

North Coast EMS designated SJH as a STEMI Receiving Center and activated the Humboldt County STEMI system on 3/3/16. We plan to conduct a Humboldt County Cardiac Committee meeting next quarter and met with SJH personnel, including the new Interventionalist and Director of the Cath Lab and other personnel, this quarter to review the program. The new state STEMI regulations are in the process of being adopted and we plan to update the three-county STEMI Plan and program as needed to ensure compliance.



All seven hospitals are Emergency Departments Approved for Pediatric (EDAP) designated and we conducted an assessment of site survey activity over the last few years. Follow-up site surveys were previously conducted at Redwood and SJH and delayed follow-up letters were sent this quarter that continued designation. We are planning to conduct follow-up site survey's at both EDAPs in Lake County, J. Phelps and Sutter-Coast in 2019, starting in Lake County. Also, we are planning to implement the new and soon to be adopted EMS for Childrens regulations to ensure ongoing EMSC program compliance. We also continued the federally funded EMSC program with UCD-MC.

- Periodically assessing trauma system and plan as needed

EMSA approved the updated Trauma Care System Plan with requirements to ensure transmission of trauma registry data to the state trauma registry by June 30, 2019. The Lancer Trauma 1 issues at both Sutters have been resolved and we continue to work to transmit data from both trauma centers in Humboldt Counties. Trauma contractor Rita Henerson is currently taking online trauma registry courses to enhance our ability to review and query trauma data. A key need is to continue to enhance the processes utilized to assess the trauma system through Quality Improvement at each designated trauma center, review of Trauma Registry data, disclosure protected review of patient care in Trauma Advisory Committees, attendance at the North-Regional Trauma Advisory Committee meetings, etc. This should include timely review and enhancement as needed of decisions to redirect or bypass critical trauma patients in Humboldt and Lake Counties for 9-1-1 and IFTs. We are planning to conduct TAC meetings in Lake and Del Norte/Humboldt Counties early next calendar year.

- Coordinating trauma patients to appropriate trauma center(s) or approved receiving hospitals

North Coast EMS has an approved Trauma Triage Policy that integrates with Coastal Valley's EMS policy and is very similar to the national standard. Patients meeting Trauma Triage Criteria are directly transported to our designated trauma centers, or in Lake County, by air to the closest higher level TC located out of county. Sutter-Coast Hospital in Del Norte County receives all trauma patients due to geography. In Humboldt County, patients meeting critical trauma patient criteria are triaged and bypassed, or not, on a case by case basis at the Level IV trauma center with surgery.

- Periodically assessing hospitals (e.g., pediatric critical care centers, emergency departments approved for pediatrics, other specialty care centers)

North Coast EMS continued to receive and distribute, by request, Pediatric Maddy "Richie's" funding to our seven designated EDAPs. This quarter we continued participation in the UCD MC EMSC TACTICAL Regionalization grant and updated the EDAP Fund document, supported requests from EDAPs to purchase pediatric related equipment and training, etc, including trauma kits for schools in Lake County.

North Coast EMS formally designated SJH as a STEMI Receiving Center in 2016 and continues to conduct HCCC meetings and to monitor and enhance the STEMI system.



We met this quarter with the new Cardiologist and liaison, and others at the STEMI Receiving Center to provide an orientation to the program. The 5150 Handbook is periodically updated and available on our web site – northcoastems.com. Behavioral Health contractor Statey Curry continues to work on development of uniform medical screening criteria for Behavioral Health patients, standardize timelines for a 5150 hold and we continue to support county Behavioral Health grants to support Crisis Response Teams etc in each county.

- Completing hospital closure impact reports

None were requested or completed this quarter.

Component 6 - Data Collection and System 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

North Coast EMS reviews all discovered or received reportable incidents. During this quarter we took no formal action and received two requests to review a case. One was resolved at the state level and the other is under review. We also conducted, by request, an assessment with the overseeing physician, fire department and base hospital specific to DEA record keeping in Lake County relative to paramedic use of narcotics. We concurred that records were kept appropriately and thank all of those involved for thoroughly evaluating this important matter.

- Reviewing prehospital care reports including Automated External Defibrillators (AED) reports

These reports were discontinued by EMSA years ago.

- Processing and investigating quality assurance/improvement incident reports

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 also submit quarterly QIP updates. We plan to revise the QIP Plan and submit it along with the EMS Plan update in early February if accepted by the JPA Governing Board.

- Monitoring and reporting on EMS System Core Measures by March 31st each year, and acknowledging completion of the monitoring and reporting as of March 31st each year

North Coast EMS submitted the Core Measures report on October 21, 2018.

- Providing data to CEMSIS monthly



See above. ImageTrend data goes directly to ICEMA upon completion of each e-PCR by EMTs and paramedics. Two other vendors (a proprietary ImageTrend program and ESO) have been approved for use and data continues to be submitted to ICEMA by each ALS Provider. Last fiscal year, North Coast EMS delayed Governing Board approved reimbursement by providers of our ImageTrend costs because we had not yet received the final bill from ICEMA due. The final billing has been received and we plan to distribute invoices to recover our FY 2017-18 ImageTrend costs early next quarter. All providers have been notified of our intention to bill them soon.

- Implementing Health and Safety Code Section 1797.227, including providing data using the current versions of NEMSIS and CEMSIS standards from Electronic Health Records (EHR)

All ALS Providers utilize NEMSIS and CEMSIS compliant EHR programs.

- Engaging healthcare partners and Health Information Organizations in your jurisdiction in discussions and planning efforts to integrate EMS into developing health information exchange networks according to the models being developed under the ONC grant

North Coast EMS previously received grant funding for a HIE Discovery Grant that was completed and serves as an excellent resource. In conjunction with Redwood Med Net, we are currently participating in a study designed to utilize HIE data from on one or more hospitals located in Lake County and from Lake County Fire to identify and track EMS super-utilizers. We plan to work with Redwood Med Net, Lake County Fire Districts, Sutter-Lakeside Hospital and St. Helena Clearlake Hospital (now Adventist Clearlake) to expand this project. We are also continuing to work with Redwood Med Net to assess the new EMSA opportunity to apply for HIE funds with plans to apply for the grant if the required benchmarks prove feasible and attainable.

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

North Coast EMS has approved a few Public Safety First Aid training programs that includes CPR and first aid training. Approved scope options currently include Naloxone and Epi pens. We continue to assist Law Enforcement in their process to utilize Naloxone by trained personnel pursuant to state standards.

- Involvement in public service announcements involving prevention or EMS related issues

North Coast EMS staff members participated in local injury and illness prevention and children's safety programs. We also endorsed the acquisition of trauma kits by Lake



County EDAPs.

- Availability of information to assist the population in catastrophic events, as appropriate

North Coast EMS participates in the HPP program and is involved with disaster planning. Each county has PSAs and other means of providing information to the public in catastrophic events.

- Participating in public speaking events and representing the EMS agency during news events and incidents

Nothing new this quarter. Last quarter we assisted in a non-operational roll the Mendocino Complex Fires, including entering into an emergency short term contract with Kimberly Baldwin to assist the MHOAC, and by sending staff to the Lake County EOC. We forgot to mention this last time here.

- Seeking opportunities to collaborate with key partners, including local public health and other community organizations, to promote healthcare and injury prevention activities

North Coast EMS continues to seek opportunities to collaborate with key EMS and Public Health partner to promote healthcare and injury prevention activities. We also are convening regular meetings with Lake County Public Health and other representatives to continue to address issues.

Component 8 - Disaster Medical Response

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

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

- Participating in disaster planning and drills as needed

As part of our HPP disaster planning role, funded by CDPH, the North Coast EMS Disaster Coordinator and our HPP County Disaster Liaisons continue to attend and participate in state, regional and local disaster planning meetings and drills. This year's HPP multi-county LEMSA objectives include strengthening county Healthcare Coalitions, include focus on planning and training EMS personnel in the transition from a single incident MCI to a disaster response, the transport of Ebola and other highly infectious diseases, and patient triage and tracking. North Coast EMS has, over the past five HPP funding cycles, engaged system participants in discussion regarding an OA (county) specific concept of operations for disaster response, including operational integration with the MHOAC disaster planning and response program. These discussions have led to the development of North Coast EMS hospital and provider disaster preparedness and SEMS/EOM communications and reporting policy, and revision of the Humboldt County EOP to integrate an EMS representative into the County EOC. North Coast EMS previously initiated a process to draft EOA contract language that will ensure our EMS provider in



Humboldt County agencies are prepared to support the Humboldt County MHOAC program during a disaster. These policies, these contracts, as well as OA (county) specific SOPs will inform this year's training objectives. The EOA rollout process was delayed while we evaluated the sale of AMRA, but the sale's continued eligibility for grandfathering was approved by EMSA this quarter and we are soliciting an EOA Oversight Officer to assist with this process.

North Coast EMS has participated in EMSAAC Disaster Committee/EMSA development of MHOAC Program Guide and many other disaster related meetings or calls. North Coast EMS staff attended a Lake County Mendocino Complex debriefing and continues to work with Lake County Public Health to reassess disaster and MHOAC related roles.

- Identifying disaster preparedness needs

As part of our HPP disaster planning activities we have been evaluating existing North Coast EMS and regional disaster preparedness needs. This includes review of numerous documents, attending meetings and working collaboratively with each JPA member county. Through the North Coast EMS County Liaison contractors, North Coast EMS worked with our Public Health Department partners to review the HPP objectives and define supporting activities for our 2017-2018 HPP Work Plan. The contract with CDPH was executed last quarter. The Del Norte and Humboldt County Disaster Liaison continued HPP related activities and this quarter we contracted with Kimberly Baldwin as the permanent Lake County Disaster Liaison.

- Coordinating the operational area disaster medical/health coordinator

North Coast EMS staff and HPP contractors coordinated with the MHOAC in each county, attended meetings, participated in local, state and regional Medical Disaster meetings and events.

- Coordinating the regional disaster medical/health coordinator system

See above.

- Developing policies and procedures for EMS personnel in response to a multi-casualty or disaster incident

North Coast EMS has MCI and disaster related policies and updates these as needed. In Humboldt County, we are working with Sheriff Office and other representatives to assess, and as needed, update the North Coast EMS MCI Plan and related policies.

- Facilitating mutual aid agreements

North Coast EMS has facilitated development of mutual aid agreements for decades and all ambulance providers have mutual aid arrangements with surrounding providers. We also continued utilization of outside fire and ambulance resources according to existing mutual aid policies

- Collaborating with all EMS personnel on training of incident command and Standardized Emergency Management System (SEMS)



North Coast EMS has supported and worked with County OES and other EMS organizations to help ensure ICS and SEMS training. Local training programs are conducted periodically and each approved EMT-I and paramedic training program includes these topics. North Coast EMS has supported and worked with County OES and other EMS organizations to help ensure ICS and SEMS training.