



North Coast EMS Agency

Agreement #C18-006

4th Quarter Task Report April 1 - June 30, 2019

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: Trauma Regulation Workgroup, EMSAAC/EMDAC Legislative calls, EMSA and Regional Agency communications re: Regional Funding Document #104 updates and General Fund augmentation calls, the EMSC Technical Committee meeting in Palm Springs, the EMSAAC Conference in Yosemite, 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 Priority 1 meetings, meetings with Del Norte Ambulance, Trauma Center Fee meetings, EMSC TACTICAL call with UCDMC and S-SV EMS, Policy Review Committee meetings, a focused STEMI meeting regarding 12-lead EKG transmission, Humboldt County Child Death Review Team meetings, Humboldt County Child Passenger Safety Committee meeting, Humboldt, Del Norte and Lake County Fire Chiefs Association meetings, Emergency Preparedness and HPP Disaster related meetings and calls, and other meetings. two Joint Powers Governing Board meetings, and IFT meetings specific to Lake County with Hospital Association, Public Health and other representatives. We also: hired a new Medical Director (Matt Karp, M.D.), a new Administrative Assistant (Nicole Mobley), our Fiscal Manager (Maris Hawkins) was on medical leave for an extended period, and we selected Pam Mather as the EOA Oversight Officer beginning next fiscal year. Our Quality Improvement Plan was approved by EMSA and we continued to oppose SB 438 and AB 1540 communications.

- 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 second federal EMS for Children TACTICAL REGIONALIZATION grant, the HPP disaster medical grant with CDPH, Dr. Karp 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, Elizabeth Wardell RN and Kimberly Baldwin as County HPP Liaisons for Del Norte Humboldt and Lake County respectively, Selinda Shontz – STEMI, ICEMA – Image Trend management; Coats Eureka Media Design, Coastal Valley's EMS re: C.A.R.E.S and Kayce Hurd (protocol and policy development). With the exception of Rita (.4 FTE) these are all very part time contractors. 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. We also finalized 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)

Nothing new to report.

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 Public Safety First Aid training programs as part of the EMSC grant through UCDMC. We are also adding Epi Pens and Glucometers to the basic scope of practice for EMT's and Public Safety personnel. 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. To replace the EMSA discontinued use of Pediatric Intubation, EMSA approved use of iGel for the region and this is now rolled out. Del Norte Ambulance and contractor Kayce Hurd continue to take the lead to develop policies needed to implement an Advanced EMT pilot program for Del Norte County, and Stayce Curry continues to take the lead on development of tools to support the management of 5150 patients.

- **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 and Epi Pens, added iGel to the paramedic scope of practice, and continue to work on the addition of Ketamine and IV Tylenol (paramedic) scope additions. All other prior paramedic scope additions were continued or are under review by EMSA except nasotracheal intubation was been removed from our local optional paramedic scope of practice as of January 1, 2019 by EMSA request. Please see the 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 and Public Safety First Aid 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.

- **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 and update 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 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 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 co-reviewing several cases.

- Authorizing, maintaining, and evaluating EMS continuing education programs

North Coast EMS has approximately 33 approved CEU providers.

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 previously 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. We continued EMD program approval of Eureka PD and CAL FIRE Fortuna. The latter is also approved as the Del Norte and Humboldt aero medical dispatch center.

- 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. We also have participated in communications to help improve 12-lead ECG transmission to the STEMI Receiving Center in Humboldt County.

- Approving ambulance dispatch centers

All three counties have centralized and North Coast EMS approved dispatch centers for ambulances. City Ambulance of Eureka is the primary ground ambulance dispatch center in Humboldt County, although Hoopa {K'ima:w} Ambulance may occasionally be dispatched through a separate process. The Del Norte County Sheriffs Dispatch Center is responsible for ambulance dispatch in Del Norte County although discussion has been



initiated to consider other options. Lake County utilizes the CALFIRE ECC in Napa County for ambulance dispatch. CALFIRE ECC in Fortuna and CALFIRE ECC in Napa County are the 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 continues to approve the national EMD training programs at the Eureka Police Department, the CALFIRE ECC in Fortuna and the CALFIRE St Helena ECC (jointly with Napa County EMS).

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 executed a comprehensive ALS Provider/Air Medical Approval Agreement with Cal-Ore/REACH (REACH Medical Holdings. L.C.) that covers all three counties.

- 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. 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 in Eureka. 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 this quarter, updated the contract with REACH Medical Holdings. We also have a process in place to implement use of Naloxone by interested Public Safety providers.

- **Creating exclusive operating areas**

This quarter we interviewed two candidates for the EOA Oversight Officer position and selected Pam Mather. She will begin to roll out the EOA process next fiscal year 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 this quarter.

- **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 Pam Mather.

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 as Paramedic Base and Receiving Centers, six as "Modified Base Hospitals" that are no longer required to utilize MICNs. This quarter Sutter-Lakeside Hospital appointed a new PCNC. 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 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 and approved by EMSA last quarter. Three Level IV trauma centers (two as Basic and one With Surgery) and one Level III trauma center are designated within the three county region. Annual trauma centers fees were approved by the JPA Board this quarter while we continue to assess costs, relative volume information and receive input from trauma center representatives. At this time, three of four trauma centers have paid the annual fee and we expect payment by the fourth trauma center soon.

We conducted a Humboldt-Del Norte TAC meeting this quarter and plan to conduct a joint Lake County and Humboldt County TAC next quarter. We are planning to participate in the trauma center site survey at Sutter-Coast Hospital with Oregon and Sutter-Lakeside Hospital in 2019.

Trauma Registry data transmission from two of four trauma centers to North Coast EMS is working and we continue to work with each trauma center to ensure uniform data entry so we can compare "apples to apples" information and timely data transmission to us pursuant to state and ACS standards.

North Coast EMS designated SJH as a STEMI Receiving Center and activated the Humboldt County STEMI system on 3/3/16 and we continue to oversee this program.

All seven hospitals are Emergency Departments Approved for Pediatric (EDAP) designated. We are planning to conduct follow-up site surveys at both EDAPs in Lake County, J. Phelps and Sutter-Coast in FY 2019-20, 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 last quarter with requirements to ensure transmission of trauma registry data to the state trauma registry by June 30, 2019. Two of four centers are now compliant and we requested and received an extension for the remaining two centers. 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 Coordinating 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 a joint three-county TAC meeting next quarter.



- 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 by 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 supported requests from EDAPs to purchase pediatric related equipment and training, etc.

North Coast EMS formally designated SJH as a STEMI Receiving Center in 2016 and continues to conduct HCCC meetings and monitor and enhance the STEMI system. The 5150 Handbook is periodically updated and available on our web site – northcoastems.com. Behavioral Health contractor Stacey 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 and Crisis Response Teams etc in each county. Stacey recently prepared online U-Tube 5150 training videos for each county - somewhere in the vicinity of 80 viewers participated in Lake County alone.

- 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 but reviewed or are reviewing several cases.

- 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 updated the QIP Plan as part of the EMS Plan update this quarter - both were approved by the JPA Governing Board and EMSA this quarter.

- 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 last Core Measures report and is working on the next submission.

- 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. North Coast EMS continues to pay upfront and ongoing costs for the providers to utilize the ICEMA ImageTrend e-PCR program and is being retrospectively reimbursed for those direct costs on a more timely basis.

- 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 project 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.

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 several Public Safety First Aid training programs that include CPR and first aid training. Approved scope options currently include Naloxone and Epi pens. We continue to work with 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 help fund the acquisition of trauma kits in schools 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.

- 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 partners to promote healthcare and injury prevention activities.

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. North Coast EMS also continued to participate in EMSAAC Disaster Committee/EMSA development of MHOAC Program Guide and many other disaster related meetings or calls.

- **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 achieve the HPP objectives and define supporting activities associated with the current year's HPP Work Plan and we are awaiting receipt of next years scope of work from CDPH. WE are planning a site survey with CDPH next quarter.

- **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 and recently re-clarified state regulation and forwarded copies of long continuing ALS Reciprocity Agreements with surrounding LEMSAs relative to Lake County. North Coast EMS has no existing barriers to cross-jurisdictional utilization of paramedics provided state standards are followed.

- **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.