Multicounty EMS Agency Name

Agreement #C22-016

**3rd Quarter Task Report**

January 1 - March 31, 2023

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

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

**Component 1 - System Organization and Management**

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

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

* + - Staff development, training, and management

|  |
| --- |
| This Report was expanded on 2/2/2023 and on 4/5/2023 to further elaborate on the work gaps identified in the BCP.  North Coast EMS personnel virtually participated in the following state EMS activities: EMSA/LEMSA, EMSC Techincal, EMSA Trauma Regulation Workgroup, State Trauma Summit (Executive Director Karsteadt was a presenter), BH/SUD Collaborative, TPOXX Data Collection, LEMSA Quarterly meeting, Partnership Health Plan Public Health, EMSAAC Legislative, MHOCSA Training (hosted by Humboldt County and North Coast EMS), CDPH HPP Disaster Audit Entrance Meeting, Regional MHOAC, EMSAAC Legislative Committee, Trauma Summit Planning; and, in the following local EMS meetings and other activities: Humboldt/Del Norte Medical Advisory Committee (MAC), Lake County Emergency Medical Care Committee (EMCC), Lake County Inter-facility Transfer/Priority 1, Lake Health Care Coalition, 5150 Hold, Del Norte, Humboldt & Lake) HPP, Humboldt- Del Norte Redwood Coalition, EndPoint EMS, Connie Stewart, OA Meeting Fortuna, MRCH/SJH Discussions, STEMI/Stroke, Regional Trauma Advisory, Humboldt Co Crisis Triage Center, Health Care Coalition Pediatric Surge, Staff and Contractor Communications (Medical Director, Regional EMS Coordinator, Fiscal Manager, Trauma, EOA, STEMI/Stroke, Behavioral Health, IT, EMSC, HPP Lisaisons), Humboldt County Child Death Review Team, Humboldt County Child Passenger Safety, Humboldt, Del Norte Fire Chiefs Association, and other meetings. All five EMS Plan Updates were approved by EMSA (Regional EMS, Trauma, STEMI, EMSC and QI), we contracted with Morgan Fox as the Lake County HPP and EMS Liaison, and the Executive  Please note that the targeted full-time RN position was unfeasible. The JPA Governing Board approved the budget with modest staff salary incresases which left $15,000 for the proposed postion at $40/hour, far too low to hire a full or part time RN. Also, at this time, all employee positions have been filled as follows: Larry Karsteadt, Executive Director, Wendy Chapman Associate Director, Kayce Hurd EMT-P Regional EMS/Disaster Coordinator, Lee Hawkins Fiscal Manager and Nicole Mobley Executive Assistant (all are fulltime). |

* 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, continued or plan to continue in this FY administrative contracts with: EMSA General Fund, JPA member counties, 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 - Behavioral Health/5150 contractor, Dennis Louy, Patrick Lynch and Morgan Fox as County HPP Liaisons for Del Norte, Humboldt and Lake County respectively, Selinda Shontz – STEMI and Stroke, Pam Mather - EOAs and CQI, ICEMA – Image Trend management; Coastal Valley's EMS re: C.A.R.E.S. and Endpoint EMS. All contractors are part-time, independent, may engage in other contracts and provide expert services otherwise not available to North Coast EMS staff. North Coast EMS continued to receive from, and distribute by request, Pediatric Maddy Funds in all three counties. We continued contracts with and/or approvals of: seven designated Paramedic Base and Receiving Hospitals, 14 Paramedic Service Providers, numerous First Responder agencies, three Emergency Medical Dispatch Centers, six EDAPs, four Trauma Centers and one STEMI Receiving Center. This quarter, all five Annual EMS Plan Updates were approved by EMSA: the Regional EMS Plan, the Trauma Plan with the state required Fiscal Utilization Report; the EMSC Plan with the EDAP Trust Fund Report; the STEMI Plan and the QIP Plan.  Development of the planned Stroke System was delayed because St. Joseph Hospital is considering becoming a certified Stroke Center within the next year and all parties agreed to hold off on our Stroke System development process until the certification decision is clearer. Existing staff and contractors continued to administer the Regional, Trauma, STEMI and EMSC Systems pursuant to state regulations and other duties dispite the inability to hire an RN. The fiscal deficit between trauma center fees and costs most likely continues but will be reassessed as part of the next Annual Trauma Plan Update.  Site surveys to Trauma Centers an EDAPs are planned for those hospitals in need of surveys as stated in the upcoming EMS System Annual Plan Updates. We also are planning to reinstitutue paramedic base hospital surveys next fiscal year if staff and contractor time allows. Currently, compliance is assessed routinely through our extensive Quality Improvement Program (see the upcoming Annual QIP Update).  During Quarter 3, EMSA changed the due date for the five approved Plan Updates from October 2023 to now and completion of these updates is currently our highest priority. We plan to seek JPA Board approval of the five updates on April 27, 2023 and pending Board action, plan to submit the updates promoptly thereafter. |

* 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)

|  |
| --- |
| This quarter North Coast EMS attended the state level meetings listed above This quarter, we participated in all EMSA/LEMSA associated meetings. |

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

|  |
| --- |
| The North Coast EMS State General Fund allocation was increassed by the EMSA and the executed contract includes the workload gaps identified in the BCP. Since then, the JPA Governing Board approved staff salary increases (thank you!) and we contracted with Morgan Fox as the Lake County HPP and EMS Liaison. Morgan was the only applicant and she has an excellent background in Disaster planning and coordination. We will continue to work with her and Lake County representatives to identify her EMS role in Lake County, but it generally includes attending EMS and Disaster meetings, working with the entire EMS community, and coordinating with North Coast EMS to optiize her EMS contributions.  The JPA Governing Board approved the budget with modest staff salary incresases which left $15,000 for the proposed postion at $40/hour, far too low to hire a full or part time RN. As stated above, we subsequently hired Morgan Fox who is not an RN but lives in Lake County and is doing an excellent job.  The plan to update the Regional MCI Plan has been delayed by other priorities but we hope to complete the update this this Fiscal Year as staff time allows. |

**Component 2 - Manpower and Training**

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

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

* Ongoing assessment of local training program needs

|  |
| --- |
| North Coast EMS has numerous mechanisms for determining training program needs, including: meetings where EMS system and training needs are or can be discussed; staff attendance at state and federal meetings where state and national standards and best practices may be reviewed; communications with regional EMS instructors; review of QIP reports from base hospitals and providers as staff time allows; input from stateholders, etc. Contractor Curry continued to take the lead on development or distribution of tools to support the management of 5150 and psychiatric patients especially during the pandemic. We also particpated in discussions with SJH, EPD and others specific to development of an AeRTeam response in Eureka with a medical component and are actively involved with northern California Behavioral Health planning and discussions. |

* 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 and instructor requirements. These programs include: Public Safety, First Responder, EMT-I, Paramedic, Continuing education, etc. |

* Providing training programs and classes as needed

|  |
| --- |
| No classes were hosted this quarter. |

* 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. |

* 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 continued to update, add and modify policies and protocols in concert with the Policy Review Committee. |

* Maintaining communication link with QI program to assess performance of field personnel

|  |
| --- |
| North Coast EMS has extensive QI policies and submitted the Annual QIP Plan Update to the EMSA. We previously approved all base hospital and ALS Providers QIP Plans and require all approved ALS providers and designated base hospitals to submit periodic QIP reports summarizing activities in each of the QIP regulation required categories. We also select a focused review topic each quarter as staff time allows. |

* Conducting investigations and taking action against certification when indicated

|  |
| --- |
| North Coast EMS did not take any actions against a certificate holder and participated in a few case reviews this quarter. Regional EMS Coordinator continues the process to review PCRs and maintain the case review log to ensure loop closure. |

* Authorizing, maintaining, and evaluating EMS continuing education programs

|  |
| --- |
| North Coast EMS has approximately 33 approved CEU providers and policies are in place to authorize new and review existing providers if needed. |

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

|  |
| --- |
| The North Coast EMS State General Fund allocation was increassed by the EMSA and the executed contract includes the workload gaps identified in the BCP. Since then, the JPA Governing Board approved staff salary increases (thank you!) and we contracted with Morgan Fox as the Lake County HPP and EMS Liaison. Specific to Manpower and Training, she will work with North Coast EMS to help coordinate local Triage Tuesday trainings and continue to identify her EMS role, is attending all disaster and EMS meetings, routinely communicating with North Coast EMS representatives, and is currently meeting with key fire, hopsital and Public Health personnel in Lake County. See above. |

**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 the 9-1-1 dispatch center for Lake County. Other EMD providers include Eureka Police Department and CALFRE ECC for Humboldt/Del Norte Counties. We also previously approved the air medical dispatch plan for Lake County to utilize a single dispatch frequency by REACH Flight Guard upon activation by the St. Helena ECC. The CALFIRE ECC in Fortuna is approved as the Del Norte and Humboldt air medical dispatch center. |

* Assuring appropriate maintenance of EMS related communications systems

|  |
| --- |
| We plan to continue to work with each county, hospitals and providers to help ensure future Med Net and/or field to hospital Communication Systems integrity. The JPA Board also approved use of a portion of the Med-Net Mt-Top Repeater Trust to help replace repeaters in Lake 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 occassionally be dispatched through a separate process. The Del Norte County Sheriffs Dispatch Center is continues to be responsible for receiving the 9-1-1 call, but if an ambulance is needed, DNA utilizes the Oregon based EMD dispatch center. 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 air medical dispatch centers in Del Norte/Humboldt and Lake respectfully, the latter in conjunction with Napa County EMS. |

* 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. As the EMD oversight body, we are available to QI any and all EMD related issues. |

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

|  |
| --- |
| North Coast EMS continues to approve the EMD training programs at the Eureka Police Department, the CALFIRE ECC in Fortuna and the CALFIRE St Helena ECC (jointly with Napa County EMS). |

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

|  |
| --- |
| The North Coast EMS State General Fund allocation was increassed by the EMSA and the executed contract includes the workload gaps identified in the BCP. Since then, the JPA Governing Board approved staff salary increases (thank you!) and we contracted with Morgan Fox as the Lake County HPP and EMS Liaison. This quarter the Agency reimbursed or will soon reimburse Med-Net Mt Top Repeater moneys from the Med-Net Trust Fund to help cover Med-Net Repeater replacement costs, which will help ensure that the Med-Net System is fully functional and that there are no gaps at this time. |

**Component 4 - Transportation**

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

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

* Designating EMS responders including first responders, Limited Advanced Life Support (LALS)/Advanced Life Support (ALS) providers, ambulance providers, and Prehospital EMS Aircraft providers

|  |
| --- |
| North Coast EMS designates First Responder training programs (see 2.1 above). The Humboldt and Lake County County Board of Supervisors adopted ambulance ordinances that allow Public Health to issue permits or contracts with ambulance providers. Del Norte County has a contract with DNA. All ambulance providers, four non-transporting providers and one air medical provider are North Coast EMS approved ALS Providers. North Coast EMS has policies and ongoing MOUs specific to in- and out-of-area EMS helicopters., although state paramedic regulations allow cross jurisdictional use of paramedics for mutual aid purposes and we have continuing reciprocity agreements with all or most surrounding LEMSAs. |

* Monitoring local ordinances related to EMS

|  |
| --- |
| Humboldt and Lake 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. The North Coast EMS participated in all previous ordinance updates as is required by statute. |

* 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. North Coast EMS currently has four designated trauma centers, one in Del Norte County that receives all injured patients, two in Humboldt County with 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 transported Humboldt County STEMI patients directly to the designated STEMI Receiving Center in Eureka. Substantive policy changes are reviewed through our Policy Review Committee process prior to adoption. |

* Implementing and maintaining contracts with providers

|  |
| --- |
| All North Coast EMS authorized ALS Providers have executed contracts. |

* Creating exclusive operating areas

|  |
| --- |
| EOA contractor Pam Mather and North Coast EMS finalized contracts with CAE and AMRA and implemented the EOA grandfathering process pursuant to EMSA approval of the Humboldt County Transportation Plan effective 1/1/2022. We have entered the montioring phase of these EOAs and submitted an update to the JPA Board this quarter. We also continued to assess the Del Norte Ambulance EOA grandfathering request, and previously determined that they are eligible for grandfathering. In collaboration with Supervisors Darrin Short and Valerie Starkey of DNC, we are contining a process to also assess Competitive EOA or status quo options for presentation to the BOS. To assist with a potential Competitive Bid process in DNC, we entered into a contract with EndpointEMS and recently submitted our assessment to the DNC BOS. We are in the process of preparing background documents for submssion to the BOS at this time. Also, we are again planning to conduct a grandfathering EOA process this fiscal year on behalf of South Lake County Fire Protection District, but this was delayed by COVID, the Humboldt and DNC EOA processes. |

* Inspecting ambulance or LALS/ALS providers

|  |
| --- |
| North Coast EMS conducts or 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 have developed ambulance performance standards associated with the Humboldt County Transportation Plan as part of the EOA grandfathering process. Response time monitoring has been initiated. Pending the outcome of the DNC EOA process options, similar monitoring criteria may be established for Del Norte Ambulance. |

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

|  |
| --- |
| The North Coast EMS State General Fund allocation was increassed by the EMSA and the executed contract includes the workload gaps identified in the BCP. Since then, the JPA Governing Board approved staff salary increases (thank you!) and we contracted with Morgan Fox as the Lake County HPP and EMS Liaison. Specific to Transportation, Morgan is currently meeting with all Lake County permitted ambulance providers to introduce herself, identify opportunities work focus opportunities. The primary issue in Lake County with transportation is the ongoing Interfacility Transfer delay issue that includes monthly IFT meetings, case review, etc, with continuos attempts to reduce IFT delays. Morgan has attended these meetings and we have discussed the IFT history at length. See above. |

**Component 5 – Assessment of Hospitals and Critical Care Centers**

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

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

* Designating base hospital(s) or alternate base stations for on-line medical control and direction

|  |
| --- |
| 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. We need additional staff time to adequately monitor base hospitals. The potential State GF allocation increase mentioned above should allow this to occur once again on a periodic basis if we are able to hire or contract with additional staff. |

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

|  |
| --- |
| All seven hospitals are designated Paramedic Receiving Centers; another is a state designated mental health receiving facility. We have two alternate receiving centers at two Standby Hospitals (Adventist-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 recently approved Trauma Plan Annual Update. Three Basic Level IV trauma centers and one Level III trauma center are designated within the three county region, one continues under probation. Trauma Registry data transmission from all four trauma centers to the state repository continues and North Coast EMS works with each trauma center to ensure uniform and timely data transmission pursuant to state and ACS standards. This quarter the Annual Trauma Plan Update was apprvoed by EMSA. Also, the Executive Director presented a power point to the 2022 Trauma Summit participants on the history of rural trauma system development in California.  North Coast EMS designated SJH as a STEMI Receiving Center, activated the Humboldt County STEMI system on 3/3/16 and we continue to oversee this program. A virtual site survey is planned for this fiscal year. A Humboldt County STEMI/Stroke Committee meeting was convened last quarter and another will be held this quarter. CARES data was compiled and sent to Coastal Valley's EMS. We also received STEMI data from SJH and submitted APOT Reports to EMSA and distributed these to the region. This quarter the Annual STEMI Plan Update was approved by EMSA.  The Core Measure Reports are also completed as requested by EMSA.  Six of the seven hospitals are Emergency Departments Approved for Pediatric (EDAP) designated, and we plan to work with the one non-designated hospital to be re-designated. This quarter the Annual EMSC Plan Update was approved by EMSA. |

* Periodically assessing specialty care system and plan(s) as needed

|  |
| --- |
| See the recently completed and EMSA approved Annual Trauma Plan Update. |

* Coordinating specialty care patients to appropriate specialty care center(s) or approved receiving hospitals

|  |
| --- |
| For Lake County, 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, higher level patients meeting critical trauma patient criteria are triaged and bypass the Level IV trauma center in Arcata to the Level III in Eureka. |

* Periodically assessing hospitals (e.g., trauma centers, STEMI centers, stroke centers, pediatric critical care centers, emergency departments approved for pediatrics (EDAP)/pediatric receiving centers (PedRC), pediatric intensive care unit (PICU)

|  |
| --- |
| North Coast EMS continued to receive and distribute by request, Pediatric Maddy “Richie’s” funding to our designated EDAPs upon request and review.  North Coast EMS continues to encourage best prehospital and hospital stroke patient management practices. Also, pending additional state funding, formal Stroke System development is targeted for next year. See above.  North Coast EMS formally designated SJH as a STEMI Receiving Center in 2016 and continues to conduct HCCC (now STEMI/Stroke) meetings and monitor and enhance the STEMI system. We plan to develop a formal Stroke System this year.The 5150 Handbook is periodically updated and available on our web site – northcoastems.com. Behavorial Health contractor Stacey Curry continues to work on development of uniform medical screening criteria for Behavorial Health patients, standarize timelines for a 5150 hold, 5150 online training programs and we continue to support county Behavorial Health (BH) grants and Crisis Response Teams etc in each county. We are actively involved in the Northern California Hospital Council Behavior Health meetings, and are pleased to report that Humboldt County os soon to receive one or more significant grants to expand local capicity!!!! Very exciting!!  Site surveys are planned as stated above to various designated centers. |

* Completing hospital closure impact reports

|  |
| --- |
| None were requested or completed this quarter. |

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

|  |
| --- |
| The North Coast EMS BCP workload gaps were identified with input from staff and contractors and submitted to EMSA. EMSA submitted the BCP to Agency, which was approved along with the first GF budget increase in decades. The primary gaps were to increase staff reimbursement to more competitive salaries and increase staff/contractors FTEs. The JPA Governing Board substequently approved staff wage increases and additional contractor time, including a Lake County specific combined HPP Liaison and EMS contract position. We contracted with Morgan Fox and are assessing her role relative to Hospital and Critical Care Assessment. Because we have specialized contractors and staff, detailed contracts with each Paramedic Base Hospital, one EDAP and one Trauma Center in Lake County, Morgan's role will likley be to assist if needed, perhaps attend future site surveys, and help resolve any issues in the future. See above. |

**Component 6 - Data Collection and Evaluation**

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

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

* Reviewing reportable incidents

|  |
| --- |
| North Coast EMS reviews all discovered or received reportable incidents. During this quarter we took no formal action but reviewed or plan to review disclosure protected cases during TAC and STEMI meetings, and as needed. |

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

|  |
| --- |
| These reports were discontinued by EMSA years ago. North Coast EMS participates in the C.A.R.E.S. program. |

* Processing and investigating quality assurance/improvement incident reports

|  |
| --- |
| North Coast EMS oversees an extensive Quality Improvement Program and utilizes our Regional QIP Plan, which was recently submitted to EMSA. QIP Plans have been approved by North Coast EMS for all Base Hospitals and ALS Providers, who also submit quarterly QIP updates upon request. This quarter, we continued to coordinate a process to review, consolidate and last quarter submitted the Annual QIP Plan Update. |

* 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 as requested the state requested Core Measures Report and APOT data. Our APOT averages fortunately continue to be relatively low. |

* Providing near real time data to CEMSIS monthly, or at no less than monthly intervals

|  |
| --- |
| See above. ImageTrend data goes directly to ICEMA upon completion of each e-PCR by EMTs and paramedics. Several other vendors e-PCR programs have been approved for use and data continues to be submitted to ICEMA by each ALS Provider. The North Coast EMS JPA Governing Board previously approved an Annual ImageTrend Base/Access Fee for all providers to cover our ICEMA ImageTrend access costs. |

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

|  |
| --- |
| 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 that promote interoperability and the use of the Search, Alert, File, Reconcile Model

|  |
| --- |
| The EMS super-utilizers study being conducted in Lake County was completed a few years ago, and we recently participated in a call to discuss the feasibility of a super-utilizer program. |

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

|  |
| --- |
| The North Coast EMS BCP workload gaps were identified with input from staff and contractors and submitted to EMSA. EMSA submitted the BCP to Agency, which was approved along with the first GF budget increase in decades. The primary gaps were to increase staff reimbursement to more competitive salaries and increase staff/contractors FTEs. The JPA Governing Board substequently approved staff wage increases and additional contractor time, including a Lake County specific combined HPP Liaison and EMS contract position. We contracted with Morgan Fox. Specific to Data Collection and Evaluation, we have a contractor and staff specialist to coordinate the Data, QI and System Evaluation processes but Morgan's presence in Lake County could certainly help resolve local issues, we plan to include her in the Quarterly QIP Report review process to help orient her to this aspect of EMS, and will contiue to identify opportunities for her to augment these EMS functions. |

**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 several Public Safety First Aid training programs that include CPR and first aid training. |

* 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. |

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

|  |
| --- |
| North Coast EMS participates in the HPP disaster grant program and is involved with COVID and medical disaster planning. Each county has PSAs and other means of providing information to the pubic during catastrophic events. |

* Participating in public speaking events and representing the EMS Agency during news events and incidents

|  |
| --- |
| Executive Director Karsteadt gave a presentation on the history of rural trauma system development in California at the Trauma Summit 2022. |

* 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, HPP, the MHOAC program, and injury prevention activities. |

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

|  |
| --- |
| The North Coast EMS BCP workload gaps were identified with input from staff and contractors and submitted to EMSA. EMSA submitted the BCP to Agency, which was approved along with the first GF budget increase in decades. The primary gaps were to increase staff reimbursement to more competitive salaries and increase staff/contractors FTEs. The JPA Governing Board substequently approved staff wage increases and additional contractor time, including a Lake County specific combined HPP Liaison and EMS contract position. We contracted with Morgan Fox as mentioned above. She will likley assist with the coordination of educational programs in Lake County such as Triage Tuesday, etc, and could serve as a local source of LEMSA/EMS System PIE in coordination with North Coast EMS if needed. |

**Component 8 - Disaster Response**

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

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

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

|  |
| --- |
| North Coast participated in numerous collaborative HPP COVID and disaster related activities, including planning and coordination with each region and county. We are planning to re-initiate a process to review and expand the Regional MCI Plan this fiscal year and will update related policies and protocols as needed. HPP required redundant radio drills were conducted or are planned, we participated in development of Burn and Infectious Disease Annexes, and North Coast EMS County Disaster Liaisons continue to be available to support the MHOAC programs and assist with HPP Deliverables. This quarter we experienced a significant earthquake that included the third most severe shaking in the history of the State. The Rio Dell area was hit very hard with damage to many homes. A total of two potentially related deaths for cardiac arrest and 17 injuries were reported. |

* Identifying disaster preparedness, mitigation, response, and recovery needs, as requested

|  |
| --- |
| We contracted with Morgan Fox to be The Lake County HPP and EMS Liaison, and we are very excited to have her onboard. Morgan is parttime with $15,000 allocatred annually for EMS related work and $10,000 of HPP funding for Disaster related work. As part of our HPP disaster planning activities we continue to evaluate existing North Coast EMS and regional disaster preparedness needs with our HPP,OES and Public Health partners. This includes review of numerous documents, attending meetings and working collaboratively with each JPA member county and the State. Through the North Coast EMS County Liaison contractors, North Coast EMS worked with our Public Health Departments to achieve the HPP Disaster grant deliverables and define supporting activities associated with the FY 22-23 HPP work plan. We are working on the Mid-Year HPP Report and, with our HPP partners, the 2023-24 Capabilities document. |

* Coordinating the Medical Health Operational Area Coordination (MHOAC) Program or coordinating with the MHOAC Program of the affected county/counties, as appropriate

|  |
| --- |
| North Coast EMS staff and HPP contractors coordinated with the MHOAC in each county, attended meetings, participate in local, state and Regional Medical Disaster meetings and events and participated or coordinated numerous state, regional and county COVID and non-COVID HPP related activities designed to support and assist each MHOAC. |

* Coordinating the Regional Disaster Medical Health Coordination (RDMHC) Program or coordinating with the RDMHC Program within the member county/county’s California Office of Emergency Services mutual aid region

|  |
| --- |
| See above. |

* Developing policies and procedures for EMS personnel in response to multi-casualty or disaster incidents

|  |
| --- |
| North Coast EMS has MCI and disaster related plan and policies and updates these as needed. We plan to update the North Coast Regional EMS MCI Plan this fiscal year and related policies, if needed, although this was delayed by other priorities including the ongoing pandemic. At this time, the MCI Plan update process is still on hold to many other high priorities and EMS System needs. However, we plan to continue to update the draft document this FY. |

* Participating in the development of mutual aid agreements, as requested

|  |
| --- |
| North Coast EMS has historically facilitated development of mutual aid agreements and all ambulance providers have mutual aid arrangements with surrounding providers. North Coast EMS has no existing barriers to cross-jurisdictional utilization of paramedics provided state standards are followed. We also continue to participate in IFT discussions in Lake County that involves mutual aid. Recently, a mutual aid arrangement was established between the Lake County Fire Chiefs Association and CAE to staff two additonal ambulances in or near Lake County, and we understand that IFTs issues have improved. Hopefully this will be sustainable. |

* Collaborating with EMS providers on Incident Command Systems (ICS) and Standardized Emergency Management System (SEMS) training, as requested

|  |
| --- |
| North Coast EMS supports ongoing ICS and SEMS training. Local training programs are conducted periodically and each approved Public Safety, First Responder, EMT-I and paramedic training program includes these topics. |

* Providing opportunities/exercises for Ambulance Strike Team Leader Trainees to complete their Position Task Books (PTB), as available

|  |
| --- |
| Not available at this time. |

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

|  |
| --- |
| The North Coast EMS BCP workload gaps were identified with input from staff and contractors and submitted to EMSA. EMSA submitted the BCP to Agency, which was approved along with the first GF budget increase in decades. The primary gaps were to increase staff reimbursement to more competitive salaries and increase staff/contractors FTEs. The JPA Governing Board substequently approved staff wage increases and additional contractor time, including a Lake County specific combined HPP Liaison and EMS contract position. We contracted with Morgan Fox as mentioned above. Approximately 40% of her time will be focused on help us to carry out the HPP Disaster Medical Deliverables, participate in the process to update MCI Plans and Policies, attend local disaster meetings and events, assist with the coordination of disaster related events and help identify opportunties for support of the Lake County MHOAC program. The planned updazte of the Regional MCI Plan has been delayed by other priorities but is planned for this fiscal year as staff time allows. See above. |