



## North Coast EMS Agency

### Agreement #C19-019

### 3rd Quarter Task Report January 1 - March 31, 2020

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***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: EMSAAC/EMDAC Legislative calls, EMSA and Regional Agency communications, the EMSC Technical Committee, the the LEMSA Administrator and Medical Director and EMSAAC calls, CDPH HPP meetings, LEMSA/EMSA calls and beginning in January, numerous statewide COVID-19 calls, 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 or calls, meeting with CAE, AMRA, Cal-ORE REACH and separately, call with Del Norte Ambulance re: ImageTrend Base Rate, EMSC TACTICAL call with UCDMC, Policy Review Committee meeting, Humboldt-Del Norte Trauma Advisory Committee meeting\*, Humboldt-Del Norte Cardiac Committee meeting\*, contractor communications (Medical Director, Trauma Nurse, STEMI/Stroke, Policy Review, Behavioral Health, IT), Humboldt County Child Death Review Team meeting, 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, Stroke Planning meeting, Dr. Baird retirement gathering, Derek Cole EOA call, Sutter-Lakeside Hospital Trauma Center orientation call, EOA contract review call, and many COVID-19 calls. We also: completed the Sutter-Coast Hospital Trauma Center site survey follow-up report and mitigation plan, received a six month EMSC TACTICAL grant extension, canceled or postponed meetings\* and EDAP site surveys due to COVID-19. We are concerned about the potential loss of Maddy revenue because of COVID reduced driving and the likelihood of reduced traffic citations.

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



North Coast EMS routinely maintains office space, equipment and supplies. A new certification printer installed, we discontinued plans to shift to a Cloud based telephone option, replaced trauma laptop computer, etc.

- 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 last year of the second federal EMS for Children TACTICAL REGIONALIZATION grant (received six month extension), 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, Patrick Lynch and Kimberly Baldwin as County HPP Liaisons for Del Norte Humboldt and Lake County respectively, Selinda Shontz – STEMI and Stroke, ICEMA – Image Trend management; Ellen Coats Eureka Media Design, and Coastal Valley's EMS re: C.A.R.E.S. 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 EDAP funds 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.

- 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 one EMSA/LEMSA 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 and conferences where state and national standards and best practices are reviewed; communications with regional EMS instructors; review of quarterly QIP reports from base hospitals and providers; input from stateholders, etc. Several providers are now approved for Public Safety training and Naloxone and we have implemented a process to review and assist



providers who are unable to acquire medications due to shortages. Stayce Curry continues to assist each county in 5150 education, standardized the "clock" within Humboldt County, and updated web based training programs specific to each county, and now, COVID-19 planning and coordination.

- 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, MICN, Continuing Education, Naloxone etc.

- 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 are able to utilize our EMSC grant with UCD-MC to reimburse instructor training costs. The planned EMSC conference portion of the federal grant was postponed due to COVID-19 with a six month extension to utilize the underspent amount.

- 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 and are assessing options for further enhancement of our policy review and update processes and scope of practice expansion.

- 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.

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

North Coast EMS has extensive QI policies and the last QIP Plan Update was approved by the EMSA. The QIP Plan is due soon but we will likely request a second extension. We previously approved all 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 participated in one case review this quarter.
- Authorizing, maintaining, and evaluating EMS continuing education programs  
North Coast EMS has 33 approved CEU providers and policies are in place to authorize new and review existing providers if needed.

### **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. This quarter we approved COVID-19 queries by EMD dispatchers.
- 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 and/or field to hospital Communication Systems integrity. We also 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 ground ambulance dispatch in Del Norte County. Lake County utilizes the CALFIRE ECC in Napa County for ambulance dispatch with our joint approval. 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 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). All ambulance providers, four non-transporting providers and REACH Medical Holdings are North Coast EMS approved ALS Providers. The latter is also an approved EMS Aircraft Provider. North Coast EMS has policies and MOUs specific to in- and out-of-area EMS helicopters.

- Monitoring local ordinances related to EMS

Two 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 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 Humboldt County STEMI patients directly to the designated STEMI Receiving Center in Eureka. All policies are approved through the Policy Review Committee.

- Implementing and maintaining contracts with providers

North Coast EMS has executed contracts with all approved ALS and Naloxone providers.



- **Creating exclusive operating areas**  
EOA contractor Pam Mather drafted the EOA grandfathering contract for CAE and AMRA pursuant to EMSA approval of the Humboldt County Transportation Plan. We plan to meet with representatives to review the contract in the near future.
- **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 needed to be conducted this quarter.
- **Developing and enforcing performance standards as needed**  
See above. We will consider implementation of ambulance performance standards associated with the Humboldt County Transportation Plan as part of the EOA grandfathering process.

### **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. 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; an eighth hospital 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 recently approved by EMSA. 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 and paid last year while we continue to assess costs, relative volume information and receive input from trauma center representatives. The trauma survey follow-up report was sent to Sutter-Coast Hospital this quarter and their mitigation plan was received. All TAC meetings were canceled and three planned



surveys delayed due to COVID-19. We conducted a phone conference with Sutter-Lakeside Trauma Center representatives to help orient new personnel to the Trauma System.

Trauma Registry data transmission from all four trauma centers to the state repository continues with ongoing issues. North Coast EMS continues to work with each trauma center to ensure uniform data entry so we can compare "apples to apples" information and timely data transmission pursuant to state and ACS standards. Contractor Rita Henderson is tracking ongoing compliance of each Trauma Center. We are also reviewing a Del Norte County case with trauma center representatives. The JPA Governing Board concurred with our plan to ease trauma registry compliance requirements during the Pandemic.

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. This sites survey will also be delayed by COVID-19.

North Coast EMS assessed each hospitals stroke patient readiness afer reviewing stroke mortality data and will consider implementing a Stroke System pursuant to new state regulations in the future.

All seven hospitals are Emergency Departments Approved for Pediatric (EDAP) designated. We were planning to conduct follow-up site survey's at both EDAPs in Lake County, J. Phelps and Sutter-Coast but these were postponed by COVID-19. Also, the new EMS for Childrens Plan was approved by EMSA and the federally funded EMSC program with UCD-MC was extended for six months.

- Periodically assessing trauma system and plan as needed

See above.

- Coordinating trauma patients to appropriate trauma 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, 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. We are continuing to assess the Lake County Trauma Catchment Area and drafted a Re-triage Policy.

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



See EMSC Plan. 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 use the North Coast EMS Trust Fund to purchase pediatric related equipment and training and a hospital radio, etc.

See STEMI Plan: 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, 5150 online training programs and we continue to support county Behavioral Health grants and Crisis Response Teams etc in each county. We are also assisting with Mental Health integration into COVID planning.

- 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 reviewed one case.

- 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. The QIP Plan and EMS Plan updates were due by the end of March 2020 but we requested and received an extension due to COVID-19.

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

North Coast EMS submitted the last state requested Core Measures data.





- Providing data to CEMSIS monthly

See above. ImageTrend data goes directly to ICEMA upon completion of each e-PCR by EMTs and paramedics. Three other vendors 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 was being retrospectively reimbursed for those direct costs. Our largest provider, CAE, shifted to a new program and this will impact our budget as we will continue to have to pay ICEMA around \$15,000 a year for North Coast EMS access. We are considering a per volume provider base rate to help cover this cost.

- 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

In conjunction with Redwood MedNet, we are currently participating in a project to utilize HIE data from on one or more hospitals and providers located in Lake County to identify and track EMS super-utilizers and ultimately better integrate their care with other county health and medical services.

## **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. 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.



- 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.

The advent of the COVID-19 pandemic has pre-empted nearly all other disaster related initiatives or activities, although all prior planning has been put to the test. The



pandemic represents a clear disaster response as opposed to an MCI, with the need for continuous monitoring and information exchange with other coalition partners. In particular, North Coast EMS' previous focus on ensuring appropriate EMS operational presence in the Humboldt County EOC has been realized to good effect. Similarly North Coast EMS has been working closely with coalition partners in Del Norte and Lake Counties, as well as participating in statewide discussions as the pandemic response continues.

Much of North Coast EMS's focus has been on ensuring EMS representation in OA planning discussions, protecting front line EMS responders through evaluation and guidance regarding PPE, and identifying potential future challenges through review of response efforts being conducted elsewhere in the state and in the world.

- **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.

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The North Coast EMS Executive Director, Medical Director, and Associate Director continue to participate in constituent county planning and response discussions, and well as in statewide discussions with state and LEMSAs colleagues.

In each of our constituent counties, the respective North Coast EMS County Disaster Liaison contractor has been tasked with engaging with their public health counterparts and other OA coalition members to identify COVID-19 needs and best practices as they apply to EMS and other response activities.

- **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.

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- 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. This activity has been delayed in order to focus on the demands of the COVID-19 response.

- 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.