



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE AGENDA



Wednesday, May 10, 2023

10:30 A.M. to 12:00 P.M.

Monterey County Emergency Medical Services Agency

Cinnamon Room

1441 Schilling Place, Salinas, CA 93901

Zoom attendance information is attached
Available for members of the public only
EMCC members must be present on site

I. CALL TO ORDER/INTRODUCTIONS

II. PUBLIC COMMENT

Any member of the public may address the Committee for a period not to exceed three (3) minutes on any issue not on the Committee's agenda. The EMCC will listen to all communications but may not take any action.

III. APPROVAL OF PAST EMCC MEETING MINUTES

A. March 8, 2023 EMCC Meeting Minutes-*Approval*

IV. REPORTS

A. Medical Advisory Subcommittee (MAC): March 8, 2023 Draft Meeting Minutes-
(Jesse Allured)

a. EMS Quality Improvement Program Highlights (Blake Andersen)

B. Operations Subcommittee (Ops): March 8, 2023 Meeting cancelled.

C. EMS Agency Director Report (Teresa Rios)

D. MHOAC Activities (Jesse Allured)

V. EMS SYSTEM PERFORMANCE METRICS

A. Communications Testing (Kimberley Hernandez)—*Report*

- 800MHz. Radio
- ReddiNet

B. Contract Compliance Working Group (Kimberley Hernandez)—*Report*

- AMR Response Time Performance
- MPDS

C. Fire-Based Transport Provider Report (March/September)

To promote a green environment, full agenda packets are not provided at the meeting. However, a full packet, including the agenda and supporting documents, is available for review at the EMS Agency during working hours 72-hours before the meeting. Full agenda packets are also available on the EMS Agency's Website at www.MoCoEMS.org



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE AGENDA



VI. OLD BUSINESS

- A. EMCC Membership-(Steve Brooks) *Report*
 - 1. Membership renewal
 - 2. Form 700
- B. Monterey County Emergency Medical Services Ordinance Revision (9/22)-(Debra Hopgood) *Report*
- C. 2022 EMS Annual Report (Debra Hopgood) *Report*
- D. EMCC Annual Report to the Board of Supervisors (Debra Hopgood) *Report*

VII. NEW BUSINESS

- A. Medical Advisory Subcommittee Endorsements (Jesse Allured) *Action*
 - 1. EMCC endorsement of nominees for MAC
- E. EMS Operations Subcommittee Endorsements (Blake Andersen) *Action*
 - 1. EMCC endorsement for EMS Operations Committee nominees
- F. Nomination and election of EMCC officers (Steve Brooks) *Action*
- G. EMS Training Programs (Steve Brooks) *Report*

VIII. ANNOUNCEMENTS/ FOR THE GOOD OF THE ORDER

Any member of the committee may make announcements or comments. The EMCC may not discuss or take any action on any item raised during announcements, except to decide whether to place the matter on a subsequent agenda.

- A. Kelsey Scanlon appointment as Director of Department of Emergency Management (DEM)

IX. NEXT MEETING

The next regularly scheduled EMCC meeting is scheduled for Wednesday, July 12, 2023 at 10:30 a.m. Room information will follow.

Special EMCC meeting on June 21, 2023 to review and comment on the EMS Ordinance revision. (Tentative)

X. ADJOURNMENT

Attachments:

- 1. Zoom Meeting Information
- 2. EMCC March 8, 2023 draft meeting minutes
- 3. MAC March 8, 2023 draft meeting minutes
- 4. EMS Agency Director's report

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5. MHOAC staff report
6. 800MHZ radio testing report
7. ReddiNet MCI drill report
8. Contract Compliance report
9. EMCC membership staff report
10. EMS Agency Annual Report
11. EMCC Report
12. MAC appointments report
13. EMS Ops appointment report
14. EMS Training Program oversight report

Notices

PLEASE NOTE: IF ALL BOARD MEMBERS ARE PRESENT IN PERSON, PUBLIC PARTICIPATION BY ZOOM IS FOR CONVENIENCE ONLY AND IS NOT REQUIRED BY LAW. IF THE ZOOM FEED IS LOST FOR ANY REASON, THE MEETING MAY BE PAUSED WHILE A FIX IS ATTEMPTED BUT THE MEETING MAY CONTINUE AT THE DISCRETION OF THE CHAIRPERSON.

Meeting access issues through Zoom: Please contact Kimberley Hernandez at: (831) 755-4738 or hernandezk4@co.monterey.ca.us.

ALTERNATE AGENDA FORMATS: If requested, the agenda shall be made available in appropriate alternative formats to persons with a disability, as required by Section 202 of the Americans with Disabilities Act of 1990 (42 USC Sec. 12132), and the federal rules and regulations adopted in implementation thereof. Individuals with a disability requiring a modification or accommodation, including auxiliary aids or services, to participate in the public meeting may make these requests to the EMS Director at least 3 days prior to the Emergency Medical Care Committee Meeting.

TO ADDRESS THE COMMITTEE ON A MATTER ON THE AGENDA: When the agenda item is called, raise your hand, and wait for recognition by the Committee Chair. In order that all interested parties have an opportunity to speak, please be brief and limit your comments to the specific subject under discussion. Time limitations shall be at the discretion of the Chair, with equal time allocated to opposing sides of an issue insofar as possible. Allocated time may not be reserved or granted to others, except as permitted by the Chair.

To promote a green environment, full agenda packets are not provided at the meeting. However, a full packet, including the agenda and supporting documents, is available for review at the EMS Agency during working hours 72-hours before the meeting. Full agenda packets are also available on the EMS Agency's Website at www.MoCoEMS.org



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE AGENDA



TO ADDRESS THE COMMITTEE ON A MATTER NOT ON THE AGENDA: When the agenda item for public comment is called, raise your hand and wait for recognition by the Committee Chair. Public comments shall not pertain to matters on the agenda. Time limitations shall be at the discretion of the Chair, with equal time allocated to opposing sides of an issue insofar as possible. Allocated time may not be reserved or granted to others, except as permitted by the Chair.

DOCUMENT DISTRIBUTION: Documents related to agenda items that are distributed to the Committee less than 72 hours prior to the meeting shall be available for public inspection at the EMS Agency Office, 1441 Schilling Place, Salinas, California. Documents distributed to the Committee at the meeting by EMS Agency staff will be available at the meeting.

MEETING AUDIO AND VIDEO RECORDED: This meeting is audio and video recorded. A copy of the recording is available following the meeting on the EMS Agency website at www.MoCoEMS.org

To promote a green environment, full agenda packets are not provided at the meeting. However, a full packet, including the agenda and supporting documents, is available for review at the EMS Agency during working hours 72-hours before the meeting. Full agenda packets are also available on the EMS Agency's Website at www.MoCoEMS.org

You are invited to a Zoom webinar.

When: **Wednesday, May 10, 2023 10:30 AM to 12:00 PM Pacific Time (US and Canada)**

Topic: Monterey County EMS - Emergency Medical Care Committee (EMCC)

Please click the link below to join the webinar:

<https://montereycty.zoom.us/j/92680990619>

Attending the Meeting by Video



Using a computer or laptop:

Simply click the following link to get started: <https://montereycty.zoom.us/j/92680990619>

You will need to make sure that your computer or laptop is properly connected to working speakers and/or a microphone if you choose to participate with audio. If you plan on using your computer or laptop for video only, you can also join the audio portion of the meeting simultaneously by following the phone call instructions below, using a phone.

Using an Android Phone or Tablet:

Click on the link below to visit the Zoom app page on the Google Play store and select to install the app.



https://play.google.com/store/apps/details?id=us.zoom.videomeetings&hl=en_US

Once the app has finished downloading to your device simply click the Zoom webinar link to begin:

<https://montereycty.zoom.us/j/92680990619>

Please note, you are not required to create or have a Zoom account.

Using an iPhone or iPad:

Click on the link below to visit the Zoom app page on the App Store and select to Get then Install the app.



<https://apps.apple.com/us/app/zoom-cloud-meetings/id546505307>

Once the app has finished downloading to your device simply click the Zoom webinar link to begin:

<https://montereycty.zoom.us/j/92680990619>

Please note, you are not required to create or have a Zoom account.

Attending the Meeting by Phone Call

To participate by phone call, you can use any of these numbers below:

162.255.37.11 (US West)
162.255.36.11 (US East)
115.114.131.7 (India Mumbai)
115.114.115.7 (India Hyderabad)
213.19.144.110 (Amsterdam Netherlands)
213.244.140.110 (Germany)
103.122.166.55 (Australia Sydney)
103.122.167.55 (Australia Melbourne)
149.137.40.110 (Singapore)
64.211.144.160 (Brazil)
149.137.68.253 (Mexico)
69.174.57.160 (Canada Toronto)
65.39.152.160 (Canada Vancouver)
207.226.132.110 (Japan Tokyo)
149.137.24.110 (Japan Osaka)

Enter this Meeting ID number: **926 8099 0619** when prompted. Please note there is no Participant Code, you will just hit # again after the recording prompts you. You will be placed in the meeting as an Attendee.

Public Comments

There will be time allocated in the meeting for Public Comments.

If you attend the Meeting through ZOOM via video and would like to make general public comment, or comment on a specific item on the agenda, you may Raise your Hand. If you are attending the meeting via Phone Call enter *9 on your keypad.



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



**Meeting Minutes
Wednesday, January 11, 2023**

**Emergency Medical Services Agency
1441 Schilling Place, Salinas, CA 93901
Cinnamon Room
Meeting Available via Zoom
10:30-12:00**

Item	Discussion				Deliverable/Action
I. CALL TO ORDER/ INTRODUCTIONS	Members	Representing	Present	Absent	<ul style="list-style-type: none"> Meeting was called to order at 10:45 a.m. and roll call was taken. A quorum was present.
	Will Hiller	Ambulance Contractor	X		
	Tina Nieto	Law Enforcement		X	
	Sam Klemek	ALS – Fire	X		
	Jim Langborg, Chair	BLS – Fire	X		
	Harry Robins	Citizen Representative	X		
	Jodi Schaffer	Citizen Representative	X		
	Luz Garcia	Citizen Representative		X	
	Paul Wood-Vice Chair	City Managers		X	
	Dr. Nikolas Greenson	Emergency Physicians	X		
		EMT/Paramedic		N/A	
	Carla Spencer	Hospital Administration	X		
	Jon Anthony	Monterey County Parks Department	X		



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion				Deliverable/Action
	Ex Officio Members	Representing	Present	Absent	
	Teresa Rios	EMS Agency Director	X		
	Tracy Molfino	Office of Emergency Services		X	
	LeeAnn Magoski	Emergency Communications		X	
	Alternate Members	Representing	Present	Absent	
	Michael Esslinger	911 EOA Ambulance Provider			
	Chief Roger Rinehart	ALS Fire			
	Chief Cheryl Goetz	BLS Fire			
	<i>Vacant</i>	Citizen Rep 1			
	<i>Vacant</i>	Citizen Rep 2			
	<i>Vacant</i>	Citizen Rep 3			
	Ben Harvey	City Managers			N/A
	Dr. Noah Hawthorne	Emergency Physicians			
	<i>Vacant</i>	EMT/Paramedic			
	Jo Coffaro	Hospital Administration			
		Law Enforcement			
	Bandy Smith	Monterey County Parks Department			
	EMS Agency Staff	Representing	Present	Absent	
	Dr. John Beuerle	EMS Agency Medical Director	X		
	Steve Brooks	EMS Analyst	X		
	Roxann Seepersad	Epidemiologist II			
	Debra Hopgood	MA III	X		
	Kimberley Hernandez	EMS Analyst	X		
	Jesse Allured	EMS Analyst	X		
	Blake Andersen	EMS Analyst	X		
	Guests in Attendance				



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
	Sam Balesteri Rachel Kneeland Jeff Horner Ben Hitchcock Saundra Flores Scott Houchin 	
II. PUBLIC COMMENT	A. Question about the RFP will be addressed in the EMS Agency report.	
III. APPROVAL OF PAST EMCC MEETING MINUTES		
A. January 11, 2023 EMCC Meeting Minutes	A. Motion to approve the Meeting Minutes of the January 11, 2023 and February 8, 2023 meetings by H. Robins. Second by N. Greenson. Motion carried.	A. Minutes approved.
B. February 8, 2023 EMCC Special Meeting Minutes		
IV. REPORTS		



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
<p>A. January 11, 2023 Medical Advisory Subcommittee (MAC): Draft Meeting Minutes and QI report. (Jesse Allured)</p>	<p>A. MAC agenda is included in the agenda packet. CQI-TAG report is also in the agenda packet. CQI-TAG update by B. Andersen highlights that TQIC met for the first time in about a year. Discussion of pediatric trauma, presentation on the policy and protocol update, Dr. Beuerle provided information on the updated trauma triage criteria from ACS, and a presentation on high performance CPR. Discussion of patient restraint use due to several recent incidents of EMS personnel being assaulted. QI Plan submission requirements and expectations were presented with a sample QI Plan provided. Deadline for QI Plan submission is 5/30/23.</p>	<p>A. As noted</p>
<p>B. January 11, 2023 Operations Subcommittee (Ops):</p>	<p>B. Ops Committee minutes are included in the agenda packet.</p>	<p>B. Report</p>
<p>C. EMS Agency Update (Debra Hopgood)</p>	<p>C. Agenda packet includes a staff report on the EMS Agency activities. The EMS Agency has started working on the RFP for ambulance service. Using lessons learned from previous RFPs and including recent system improvements. Must be protective of the process. The RFP process is heavily regulated and trying to balance the local desires with the process requirements. Will be working to provide a report at the next EMCC. The timeline is to award the contract one year before the expiration of the current contract expiration of 6/30/2025. Requires approval of the RFP by the EMS Authority. Will release the RFP draft for EMCC review this summer.</p>	<p>C. Report</p>
<p>D. MHOAC Activities (Debra Hopgood)</p>	<p>D. Written report included in the agenda packet. J. Allured presented on the MHOAC activities for the 2023 Winter Storm event. Participated in the EOC activation. Priorities to ensure integrity of the EMS system, monitoring of road closures related to access to the Monterey Peninsula, and supported evacuation of population from flooded areas. Provided</p>	<p>D. As noted</p>



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
	<p>daily reports to the State EOC. Monterey County, with Santa Cruz County were the most impacted areas in Region 2. H. Robins asked about evacuation of CHOMP due to a water emergency. Suggests planning for a water disruption due to water main break. CHOMP had a recent evacuation exercise that was fire related.</p>	
<p>V. EMS SYSTEM PERFORMANCE METRICS</p> <p>A. Communications Testing (Kim Hernandez) Report</p> <ul style="list-style-type: none"> • 800Mhz Radio • ReddiNet <p>B. Contract Compliance Working Group (Kimberley Hernandez)</p> <ol style="list-style-type: none"> 1. AMR Response/ Dispatch Time Performance 2. MPDS <p>C. Fire-Based Providers Response Time Reports (Kimberley Hernandez)</p>	<p>A. Data reports provided in the agenda packet. Testing results remained consistent. Staff turnover caused a slight dip at SVMH that has since returned to normal</p> <p>B.</p> <ol style="list-style-type: none"> 1. Report included in agenda packet. All Zones were compliant with 90% or greater compliance. 2. MPDS performance was the highest ever with December at 76%. Committee members commented that data reports have improved in quality in response to member requests. <p>C.</p>	<p>A. Report</p> <p>B. Report.</p> <p>C. EMS Agency will report in a summary format.</p>
<p>VI. OLD BUSINESS</p> <p>A. EMCC Membership</p>		



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
<p>A. EMS Agency will reach out to members who are expiring to obtain recommendations and member information needed for Board appointment. Once appointed, the member must complete the Oath of Office as a requirement for being seated on the committee.</p> <p>Members are required to complete and submit Form 700. Due no later than April 1, 2023.</p> <p>There are open positions for members and alternates that the EMS Agency is looking to fill. EMS Agency is looking for diversity in membership. Letters of recommendation should be sent to the EMS Agency for inclusion in the nomination packet that goes to the Board.</p> <p>B. Monterey County EMS Ordinance Revision</p> <p>C. Fort Hunter Liggett FD-Change in Service Levels (Debra Hopgood)</p>	<p>A. EMS Agency will reach out to members who are expiring to obtain recommendations and member information needed for Board appointment. Once appointed, the member must complete the Oath of Office as a requirement for being seated on the committee.</p> <p>Members are required to complete and submit Form 700. Due no later than April 1, 2023.</p> <p>There are open positions for members and alternates that the EMS Agency is looking to fill. EMS Agency is looking for diversity in membership. Letters of recommendation should be sent to the EMS Agency for inclusion in the nomination packet that goes to the Board.</p> <p>B. Ordinance revision continues.</p> <p>C. Agreement with Fort Hunter Liggett has been approved on 2/28/23. Will circulate the agreement for signatures soon. Will allow FHLFD to provide mutual aid and will allow FHLFD to use the military scope of practice that exceeds local scope of practice especially as it relates to trauma.</p>	<p>A. EMS Agency staff will reach out to members to obtain recommendation for Board appointment.</p> <p>EMS Agency will reach out to members to encourage completion of the requirements</p> <p>B. As noted</p> <p>C. As noted</p>
<p>VII. NEW BUSINESS</p> <p>A. MAC Membership Endorsement (Jesse Allured)</p>	<p>A. Recommend endorsement of Justin Reyes to fill the ALS Fire representative to MAC. Motion to endorse Justin Reyes as member, Chelsi Mettler and David Thompson as alternates to MAC and Justin Reyes as</p>	<p>A. As noted</p>



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
<ol style="list-style-type: none"> 1. Justin Reyes-ALS Fire Representative 2. Chelsi Mettler-Natividad Base Coordinator-Alternate 3. David Thompson-SVMH Base Coordinator-Alternate 	<p>member of EMS Ops committee. Motion by J. Schaffer. Second by H. Robbins. Motion carries.</p>	
<p>B. EMS Operations Subcommittee Membership Endorsement (Blake Andersen)</p> <ol style="list-style-type: none"> 1. Justin Reyes-Non-Contract Ambulance Provider 	<p>B. Motion to endorse included with the MAC endorsements.</p>	<p>B. As noted.</p>
<p>C. EMCC Annual Report to the Board (Teresa Rios)</p>	<p>C. EMCC is to provide a report to the Board of Supervisors on an annual basis. The EMS Agency Report has probably been used as the annual report from EMCC to the Board. The Annual Report has included a letter from the EMCC. The EMS Agency Annual Report may continue to be used as the EMCC report or EMCC may submit a separate report. Members request additional time from the usual receipt of EMCC materials to review the Report. Aiming for the report submitted in 2024 to have EMCC involvement to provide a summary letter and review of the draft report.</p>	<p>C. As noted</p>



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
D. ET-3 Program Review and Continuation (Debra Hopgood)	D. ET-3 has reached the 6-month mark and planned review. EMS Agency has reviewed the program and intends to continue the program. Only a few patients have taken advantage of the program. Being brought to CQI-TAG to review for opportunities to improve utilization. Focus on helping patients be more comfortable with telehealth. No inappropriate use of the program was identified.	D. AB 361 requirements remain in effect
E. Brown Act and AB 2449 (Susan Blich)	E. Governor’s State of Emergency order has ended effective February 28, 2023. Recommend using the previous Brown Act meeting requirements should any member wish to meet remotely. Will require the remote site to be posted on the agenda by address and it must be accessible to the public. Recommend not using AB 2449 options for meeting remotely. Reach out to Susan Blich for assistance if a member wishes to meet remotely. Teleconference must be through a platform such as Zoom. Meeting must stop if telecommunications is interrupted. Limits on meeting remotely presented. AB 2449 allows for Just Cause and Emergency Circumstances for meeting remotely. Each have their own conditions. Must be a majority of members meeting on site. N. Greenon questions the need to meet in person when the vote is “non-binding”.	E. EMS Agency staff will notice members of meeting attendance requirements.
VIII. ANNOUCEMENTS/ FOR THE GOOD OF THE ORDER A. CAO Report B. Mercy Air Recognition	<ul style="list-style-type: none"> • The Monterey County CAO is Sonia De La Rosa. She is a former resident of Monterey County who has returned to Monterey County. The CAO report highlighted the emergency response efforts by County staff to the winter emergency. • Mercy Air was recognized for their participation in Operation Santa and for their compassion in assisting patients with programs to assist in payment for services. 	<ul style="list-style-type: none"> • As noted
IX. NEXT MEETING	<ul style="list-style-type: none"> • The next regular EMCC meeting will be May 10, 2023 at 10:30 a.m. 	<ul style="list-style-type: none"> • As noted



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
X. ADJOURNMENT	<ul style="list-style-type: none">Meeting adjourned by Jim Langborg at 11:05 a.m.	<ul style="list-style-type: none">Meeting was adjourned.

DRAFT



**Monterey County EMS Agency
Medical Advisory Subcommittee (MAC)**



Meeting Minutes: January 24, 2023

**Monterey County EMS Agency
1441 Schilling Place
Salinas, California 93901
Virtual by Zoom
0830 to 1000 Hours**

Item	Discussion	Deliverable/Action								
1) Call Meeting to Order & Introductions	MAC members and guests introduced themselves. The following people were present.	<ul style="list-style-type: none"> Meeting called to order at 08:32 Attendance as noted Confirmed we had a MAC 'quorum' <p>Jamie Tovar will be a representing Mee Memorial as a voting member starting 01/25/2023</p>								
	<table border="1"> <thead> <tr> <th>Members</th> <th>Representing</th> <th>Present</th> <th>Absent</th> </tr> </thead> <tbody> <tr> <td>Dr. John Beuerle (Chair)</td> <td>EMS Agency</td> <td align="center">X</td> <td></td> </tr> </tbody> </table>		Members	Representing	Present	Absent	Dr. John Beuerle (Chair)	EMS Agency	X	
	Members		Representing	Present	Absent					
	Dr. John Beuerle (Chair)		EMS Agency	X						
	<table border="1"> <tbody> <tr> <td>1. Dr. Michelle Kalinski</td> <td>CHOMP ED Physician</td> <td></td> <td align="center">X</td> </tr> </tbody> </table>		1. Dr. Michelle Kalinski	CHOMP ED Physician		X				
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<table border="1"> <tbody> <tr> <td>8. <i>Vacant</i></td> <td>Mee ED Receiving</td> <td></td> <td align="center">X</td> </tr> </tbody> </table>	8. <i>Vacant</i>	Mee ED Receiving		X						
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<table border="1"> <tbody> <tr> <td>9. <i>Vacant</i></td> <td>First Responder Paramedic (ALS)</td> <td></td> <td align="center">X</td> </tr> </tbody> </table>	9. <i>Vacant</i>	First Responder Paramedic (ALS)		X						
9. <i>Vacant</i>	First Responder Paramedic (ALS)		X							



Monterey County EMS Agency Medical Advisory Subcommittee (MAC)



10. <i>Vacant</i>	First Responder EMT (BLS)		X	Josh Savinon will be a representing EMT (BLS) First Responders as a voting member starting 01/25/2023
11. <i>Vacant</i>	Primary Ambulance Paramedic (ALS)		X	
12. Benjamin Hitchcock	Contracted Ambulance Provider	X		
13. Jeff Horner	Air Ambulance Provider	X		
14. Tina Nieto	Law Enforcement Agencies		X	
Alternates				
1. Dr. Reb Close	CHOMP ED Physician	X		
2. Dr. Cole Klick	NMC ED Physician		X	
3. <i>Vacant</i>	SVMH ED Physician		X	
4. Dr. Bryan Darger	Mee ED Physician		X	
5. <i>Vacant</i>	CHOMP Base		X	
6. <i>Vacant</i>	NMC Base		X	
7. <i>Vacant</i>	SVMH Base		X	
8. Michelle Villanueva	Mee ED Receiving		X	
9. <i>Vacant</i>	First Responder Paramedic (ALS)		X	
10. <i>Vacant</i>	First Responder EMT (BLS)		X	
11. <i>Vacant</i>	Primary Ambulance Paramedic (ALS)		X	



Monterey County EMS Agency Medical Advisory Subcommittee (MAC)



	12. Rachel Kneeland	Contracted Ambulance Provider		X	
	13. Christopher Cuzner	Air Ambulance Provider		X	
	14. <i>Vacant</i>	Law Enforcement Agencies		X	
	EMS Agency Staff				
	Teresa Rios	EMS Director	X		
	Dr. John Beuerle	EMS Med Director	X		
	Steve Brooks	EMS Analyst	X		
	Kimberley Hernandez	EMS Analyst	X		
	Debra Hopgood	Management Analyst III	X		
	Roxann Seepersad	Epidemiologist II		X	
	Blake Anderson	EMS Analyst	X		
	Jesse Allured	EMS Analyst	X		
	Guests				
	Devon Haggie	FHL	X		
	Carlos Vega	Marina FD	X		
	Justin Reyes	MCRFD	X		
	Ryan Alexander	Salinas FD	X		
	Josh Savinon	Greenfield FD	X		
2) Public Comment	No items				• Information only



Monterey County EMS Agency Medical Advisory Subcommittee (MAC)



3) Approval of Minutes	<p>A. Approval of November 9, 2022 – MAC Meeting minutes.</p> <p>B. Approval of December 7, 2022 – MAC AB361 Special Meeting minutes.</p> <p>C. Approval of January 4, 2023 – MAC AB361 Special Meeting minutes.</p>	<ul style="list-style-type: none"> • Motion for approval – J. Horner. Second – B. Hitchcock. Roll call vote conducted. Motion carried.
4) Correspondence	<p>None Received.</p>	<ul style="list-style-type: none"> • Information only
5) Reports A. EMS Agency Updates B. MHOAC Activities C. Ambulance Patient Offload Times (APOT)	<p>T. Rios: A staff report was included in the agenda packet however a verbal report was also given. Meaningful highlights included approval of a paramedic training institution, implementation of ET3 and the planning required for the Tri-County EMS Buprenorphine project. A heartfelt appreciation to the EMS stakeholders was expressed.</p> <p>J. Allured: A staff report was included in the agenda packet and was supplemented with a brief verbal report. Pursuant to the 2023 Winter Storm event, the MoCo Op Area EOC is still activated at Level 3 (lowest level) in order to support the on-going road closures on Highway 1 in the Big Sur communities and general recovery efforts. The end of the State of Emergency is slated to occur on February 28, 2023. We are evaluating what that end in emergency declaration means for us locally. In addition, a MHOAC Program Memo – Staff Report was included in the agenda packet.</p> <p>K Hernandez: A staff report was included in the agenda packet and was supplemented with a verbal report. Overall, APOT data remained stable and continues to be reported weekly.</p>	<ul style="list-style-type: none"> • Information only • Information only • Information only



Monterey County EMS Agency Medical Advisory Subcommittee (MAC)



<p>6) Old Business</p> <p>A. LOSOP – Blood & Blood Product Transfusion Monitoring</p> <p>B. MAC Membership Updates</p> <p>C. Triage Tag Days</p> <p>D. 2023 Policy/Protocol Review Cycle</p>	<p>D. Hopgood: The EMS Agency is still moving forward with this project and submitting an LOSOP application and developing related training materials.</p> <p>J. Allured: A staff report was included in the agenda packet and was supplemented with a verbal report. There are still a few open vacancies on the committee. These include representation from an ALS Fire and a paramedic from the Contracted Ambulance Provider. In addition, there are also a handful of alternate vacancies open which we are making efforts to fill.</p> <p>S. Brooks: Three (3) Triage Tag Day trainings were held on November 14, 15, and 17, 2022. In preparation, the EMS Agency created a PowerPoint training for use by EMS service provider organizations to train their personnel. The training included a review of START Triage, the MDS Triage Tag currently used in Monterey County, and information about the use of the triage tags on the training days. The PowerPoint was also distributed to EMS providers as a pdf for individual study. Push notifications through the MoCo EMS app leading up to and on the training days were sent. Despite these efforts, less than 25% of EMS patients received triage tags. The EMS Agency will be evaluating in an effort to be successful in the next Triage Tag Day training.</p> <p>S. Brooks: A staff report, including proposed updates was included in the agenda packet and was supplemented with a verbal report provided an update. The EMS Agency has received and reviewed all public comments. The policies have been revised accordingly, and updated policies/protocols are posted online and were also sent to interested stakeholders. The EMS Agency additionally held</p>	<ul style="list-style-type: none"> • Information only • Information only. The EMS Agency will continue to work to identify and fill open positions. • Information only. The EMS Agency will continue to work to identify opportunities for improvement. • Information only
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Monterey County EMS Agency Medical Advisory Subcommittee (MAC)



<p>E. Tri-County EMS Buprenorphine LOSOP Item</p> <p>F. Health Data Exchange (HDE) Implementation</p> <p>G. MAC Bylaws Clean Up</p> <p>H. MCRFD – EMT Expanded Scope Program</p>	<p>three (3) separate virtual townhall meetings to allow stakeholders an opportunity to further engage in the process.</p> <p>J. Allured: Provided a brief project overview and status update. On 12/13/2022, the CA EMSA Authority approved the Tri-County EMS Buprenorphine LOSOP. AMR locally has begun training their personnel. We are still planning on a 4/1/2023 ‘go-live’ date.</p> <p>K Hernandez: We are still working with Mee Memorial to set-up appropriate meetings. We are holding a second meeting with NMC in the coming weeks to further the HDE capabilities with their facility. The EMS Agency met with CHOMP last week and are eager to continue dialogue with implementing a true ‘bi-directional’ exchange of data. SVMH has had HDE implemented since 9/2021. This project will slowly be migrating to J. Allured.</p> <p>D. Hopgood: No report, this item is a place holder for policy 1020 that will go into effect on 7/1/2023.</p> <p>S. Brooks: Approval of EMT-Expanded Scope Program discussed. Chief Reyes provided additional context and discussion for the committee to consider in supporting an endorsement</p>	<ul style="list-style-type: none"> • Information only • Information only. • Information only. • Motion for approval and endorsement of MCRFD’s EMT Expanded Scope Program – B. Hitchcock. Second – J. Horner. Roll call vote conducted. Motion carried.
<p>7) New Business</p> <p>A. 2023 EMS Agency – Meeting Calendar</p> <p>B. MAC Nominations</p>	<p>J. Allured: A 2023 EMS Agency – Meeting Calendar document was included in the agenda packet.</p> <p>J. Allured: A staff report was included in the agenda packet and was supplemented with a verbal report. We introduced two nominations:</p>	<ul style="list-style-type: none"> • Information only • Information only



Monterey County EMS Agency Medical Advisory Subcommittee (MAC)



<p>C. MAC Committee Membership Information & Term</p> <p>D. AB 361 Requirements for Remote Meetings</p>	<ol style="list-style-type: none"> 1) Mr. Josh Savinon - representing EMT (BLS) First Responders, nominated by the Fire Chief's Association. Josh is a Firefighter with Greenfield FD. 2) Ms. Jamie Tovar - representing Mee Memorial. Jamie is a Registered Nurse (RN) with Mee Memorial. <p>J. Allured: The EMS Agency will be sending correspondence to each MAC member to verify contact information and to highlight each member's current term expiration date.</p> <p>Dr. John Beuerle/J. Allured: Consider finding, pursuant to AB 361 and in order for the MAC to continue meeting remotely, that the COVID-19 pandemic state of emergency declared by Governor Newsom is still in effect; the MAC has reconsidered the circumstances of the state of emergency; and the Monterey County Health Officer continues to recommend social distancing measures for meetings of the legislative bodies.</p>	<ul style="list-style-type: none"> • Information only • Motion for approval – Dr. Greenson. Second – C. Soboleski. Roll call vote conducted. Motion carried.
<p>8) EMS System QI Program</p>	<p>B. Anderson/D. Hopgood: A staff report was included in the agenda packet and was supplemented with a verbal report.</p> <ol style="list-style-type: none"> 1) STEMI and CVA groups have not met since our last meeting but are currently reviewing/refining GWTG data. The EMS Agency is currently developing a STEMI and CVA system of care annual plan. 2) TEQIC has also not met since our last meeting. NMC was recently reverified as a Level II trauma center by ACS through 11/7/2025! This is a huge accomplishment and speaks to the incredible quality of care and high-level of commitment to the residents and visitors of Monterey County. The EMS Agency is developing an annual Trauma System Status Report 	<ul style="list-style-type: none"> • Information only



Monterey County EMS Agency Medical Advisory Subcommittee (MAC)



	3) CQI-TAG met in mid-December. CQI-TAG will be looking at improvements to the cardiac system of care.	
9) Future Agenda Items:	No future agenda items provided	
10) Announcements/Good of the Order	None	<ul style="list-style-type: none">• Information only
11) Next meeting date	<p>The next special meeting MAC to reconsider AB361 remote meeting requirements is tentatively scheduled for Wednesday, February 8, 2023, at 09:15. Location and Zoom information will follow.</p> <p>The next regularly scheduled MAC meeting is scheduled for Wednesday, March 8, 2023, at 08:30 AM. Location and Zoom information will follow.</p>	<ul style="list-style-type: none">• Information only
12) Adjournment	Meeting adjourned at 09:29 AM	



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Animal Services Behavioral Health Clinic Services
Emergency Medical Services Environmental Health Public Administrator/Public Guardian Public Health

Date: May 10, 2023
To: Emergency Medical Care Committee (EMCC)
From: Teresa Rios, EMS Director
Regarding: EMS Agency Updates Report

The EMS Agency is pleased to report on the following accomplishments and activities:

SWOT Analysis. The EMS Agency recently released a SWOT Analysis to receive stakeholder comments to help improve patient care and the EMS system. The EMS Agency last performed a SWOT Analysis in 2021 which provided useful feedback.

2023 Policy and Protocol Review Cycle. The policies and protocols updated in the 2023 review cycle have been distributed for training. A test on the updates was included with the training materials. The EMS app is in the process of being updated with a test version under review. The policies and protocols will be added to the EMS Agency website in mid-June. The effective date is July 1, 2023.

Public Access AED Tracking and Use. Public Access AED locations have been entered into the PulsePoint AED registry. Photos of the AED location(s) at each site are being included to facilitate access to the AED at time of need. There are 733 AEDs entered in PulsePoint.

EMS Ordinance Update. Work continues on updating the EMS Ordinance to include statutory and regulatory requirements and to update old language.

Buprenorphine. Use of buprenorphine was on hold while we waited on EMS Authority approval to utilize an alternate base hospital for online medical direction specific to the use of buprenorphine. Delivery of buprenorphine has been delayed due to ordering issues. Expect to have buprenorphine available on the AMR ambulances across the tri-county area as soon as it is received.

2023 Winter Storms. EMS Agency staff provided support to the EOC primarily through MHOAC functions related to recovery efforts in Pajaro. Staff also spearheaded planning for the potential disruption of traffic on major roads and highways that would have blocked patient transport and impacted hospital staffing as personnel would have been prevented from getting to work.

Paramedic Training Program. The first cohort of 15 paramedic students are entering or have begun their field internship phase of the training. The second cohort of 15 students has started their didactic training. Plans are underway to begin the third cohort of up to 18 students in November. This start date was selected to better coordinate clinical and field internships with the paramedic program in Santa Cruz.

EMS system assessment. Currently engaged with system stakeholders to assess system needs such as better meeting the needs of behavioral health patients related to transfer of patients to out of county facilities, SWOT analysis to be conducted to gather info from all stakeholders,

Quality Improvement. EMS Agency staff have been analyzing EMS system data and reviewing EMS system functions. Ketamine use is one example where EMS Agency staff are reviewing all uses of ketamine and providing feedback to the provider organization to address issues and to recognize appropriate use and documentation.



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Animal Services Behavioral Health Clinic Services
Emergency Medical Services Environmental Health Public Administrator/Public Guardian Public Health

Date: May 10, 2023

To: Monterey County EMS Agency – Emergency Medical Care Committee (EMCC)

From: Debra Hopgood & Jesse Allured, Monterey County Medical Health Operational Area Coordinators (MHOACs)

Regarding: Monterey County MHOAC Activities

The MHOAC Program remained extremely busy during these past several months. This was in part due to the ongoing COVID-19 response/mitigation efforts, lingering issues related to the 2023 Winter Storm Atmospheric River Event and the 2023 Pineapple Express Storm & Flooding Event.

1. **2023 Pineapple Express Storm & Flooding Event:** The MHOAC Program was activated on 03/09/2023 within the Medical/Health Branch under the Operations Section Chief as part of the County Emergency Operations Center (EOC). While technically still activated, the MHOAC Program stopped providing in-person staffing at the EOC on a regular basis on 03/24, but still provided coverage as needed. Local, State and Federal governmental bodies issued proclamations/declarations of emergency due to the storm and flooding impacts.

Due to the amount of Medical/Health priorities, the MHOAC role was separated into two primary areas of focus, ‘Medical’ and ‘Health’.

Medical: This area of focus centered around EMS operations and emergency patient transportation needs. The MHOAC requested an ambulance strike team (AST) in consultation with the EOC and MCRFD/AMR to be prepositioned in the County to support hospital decompression and shuttling patients to hospitals once transported over the Salinas River via high-water vehicles if needed (3/12). Several medical/health operational area coordination meetings occurred during the peak of the event.

Health: This area of focus also assumed the duties of the Medical/Health Branch Director and helped to support any/all medical and behavioral health needs at numerous temporary evacuation points (TEPs) and emergency shelters countywide. At one point, the MHOAC was supporting seven emergency shelters while contemporaneously ensuring the stability of the EMS system of care. Once residents of the Pajaro community were allowed to re-enter the area, the MHOAC also worked to ensure medical and behavioral resource availability directly in the community.

Throughout the duration of the incident, the MHOAC set several EOC incident objectives, including but not limited to:

- Ensured the integrity of EMS system;
- Monitored road closures, specifically those that provide access to the Peninsula (Hwy 68 x River Road, Hwy 1 x 156 and Hwy 1 near Big Sur);
- Prepared for Monterey Bay Peninsula isolation and the impacts to ambulance response/transportation and hospital staffing/resource needs; and
- Supported medical aspects of TEPs and emergency shelters.

In conjunction with EOC leadership and local/regional system partners, the MHOAC Program:

- Planned and coordinated response activities with a myriad of medical/health partners;
- Worked with the Monterey County Health Department, the American Red Cross, Region II representatives, and the state EMS Authority to coordinate medical and behavioral health staffing for the shelters from these organizations as well deployment of a Cal MAT team and disaster healthcare workers/volunteers from counties throughout the Region.
- Worked with EOC Logistics to ensure fulfillment of numerous requests for medical-related supplies including equipment, medications, personal protective equipment, and COVID testing supplies.
- Activated an EMS Plan with direction for Hospital/EMS providers concerning emergency transportation and pt. destination (3/12);
- Coordinated planning activities with acute care facilities to ensure hospitals have implemented their continuity of operations planning and response activities and their staffing needs are supported;
- Updated and activated a Monterey/San Luis Obispo County ‘Highway 1’ Road Closures – Update & EMS Transportation Plan (3/29); and
- Drafted a Landslide Risk (Arroyo Seco Road - West of Carmel Valley Road) and EMS Transportation Plan (4/14).
- Participated in several press briefings and community meetings to ensure that evacuees and residents received information regarding the available medical and behavioral health services.

2. COVID Data Update as of 05/03/2023:

- Cases and Deaths – California has 11,235,532 confirmed cases of COVID-19, resulting in 101,669 confirmed deaths. In Monterey County, there have been 98,734 total confirmed cases of COVID-19, resulting in 811 total confirmed deaths.
- Test Positivity and Case Rate – The current California 7-day test positivity rate is at 5.1%. In Monterey County, the current 7-day test positivity rate is at 4.9%.
- Hospitalizations – The current number of hospitalizations due to confirmed COVID-19 cases in California is 1,318. Local hospitalizations currently stand at 18.
- Vaccination Rate – Vaccination rates have not seen significant increases. Currently 73.1% of the eligible population (325,401 people) in Monterey County is fully vaccinated. The state rate is 72.8%. Additionally, 56.4% of the booster-eligible population (182,709 people) in Monterey County have received at least one dose of the booster. The state rate is 61.5%.

The MHOAC Program continues to monitor and support COVID-19 mitigation efforts. Governor Newsom announced that the State of Emergency related to COVID-19 has ended, effective February 28, 2023.

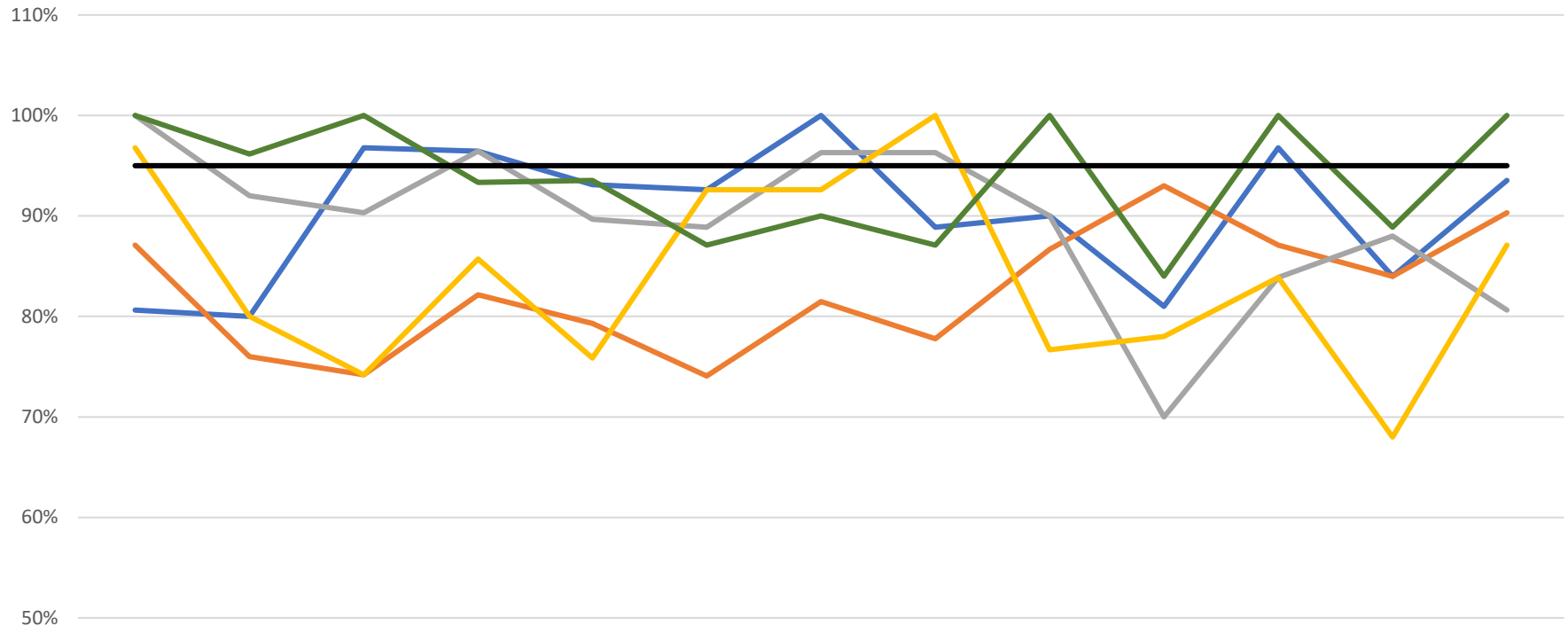
3. **Monkeypox (MPX):** The MHOAC Program continues to support MPX activities, including the coordination of both vaccine and medication for treatment. We also report the status of all deployed bottles of oral tecovirimat (TPOXX) on a monthly basis to the Region/State (CA Department of Public Health - CDPH).
4. **Supply and Personal Protective Equipment (PPE) Requests:** Related to the items above, the MHOAC Program continues to assist with resource requests (RRs) to support local provider agencies. Resources requests will continue to be available for pick-up only at the County Contracts and Purchasing Department in Salinas on Wednesdays from 2:00 PM to 4:00 PM. Pending supply availability, requests placed by 12:00 PM Monday will be ready for pick-up on Wednesday.

Due to the State of Emergency ending and the Monterey County PHD DOC demobilization on the horizon, the MHOAC Program, the Monterey County Department of Emergency Management (DEM), the PHD and OES Region II are working to in concert to ensure currently housed medical/health PPE resources are distributed and or disposed of appropriately.

In the event a provider agency has an emergent/immediate need for the supplies requested (e.g., ongoing outbreak), please reach out the Monterey County MHOAC and/or PH Department using normal means of communication. We encourage all providers to continue to collaborate with vendors to self-procure resources via normal means/open market.

800MHz Disaster Medical Radio System Testing

Response Compliance March 2022-March 2023

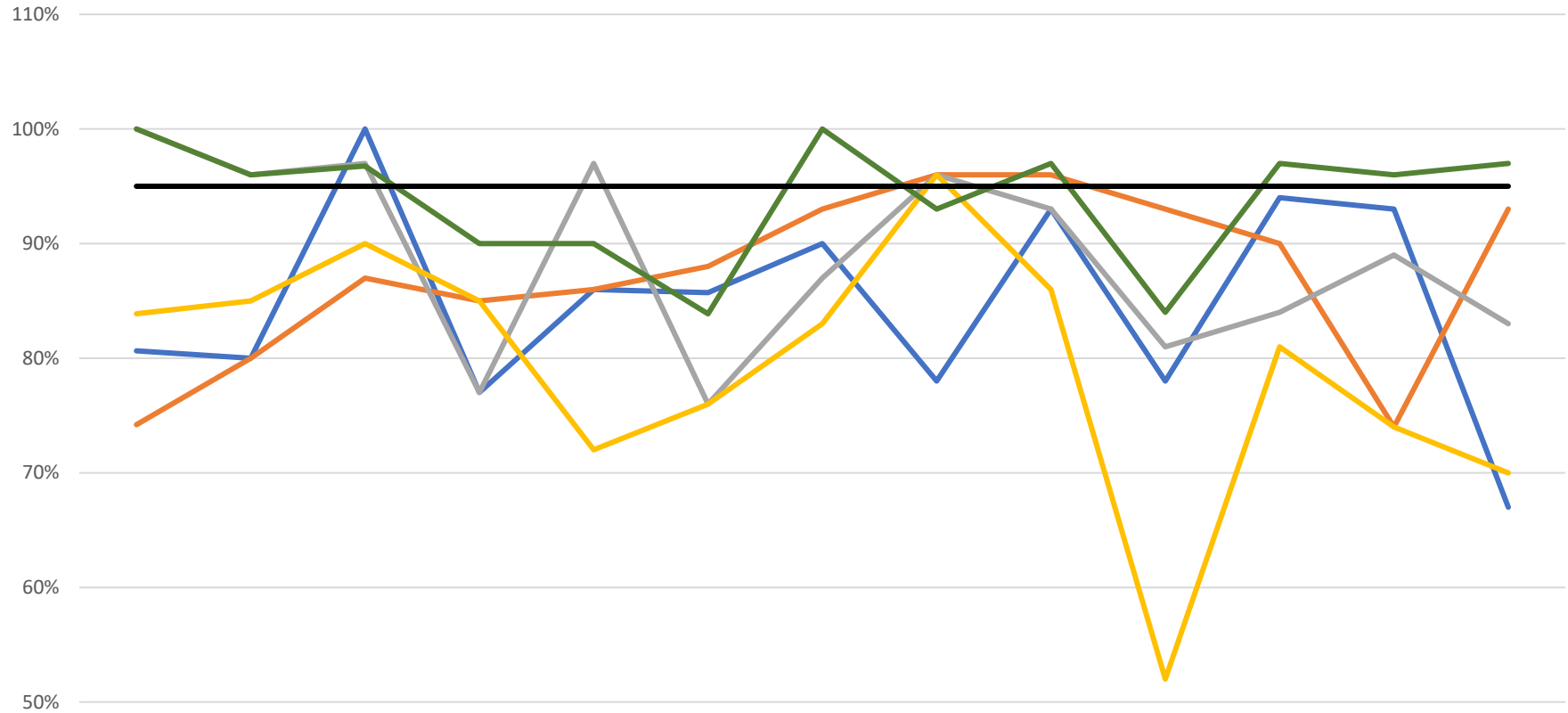


	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
CHOMP	81%	80%	97%	96%	93%	93%	100%	89%	90%	81%	97%	84%	94%
MMH	87%	76%	74%	82%	79%	74%	81%	78%	87%	93%	87%	84%	90%
NMC	100%	92%	90%	96%	90%	89%	96%	96%	90%	70%	84%	88%	81%
SVH	97%	80%	74%	86%	76%	93%	93%	100%	77%	78%	84%	68%	87%
AMR	100%	96%	100%	93%	94%	87%	90%	87%	100%	84%	100%	89%	100%
STANDARD	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%

— CHOMP
 — MMH
 — NMC
 — SVH
 — AMR
 — STANDARD

ReddiNet MCI Drills

Response Compliance March 2022 – March 2023



	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
CHOMP	81%	80%	100%	77%	86%	86%	90%	78%	93%	78%	94%	93%	67%
MMH	74%	80%	87%	85%	86%	88%	93%	96%	96%	93%	90%	74%	93%
NMC	100%	96%	97%	77%	97%	76%	87%	96%	93%	81%	84%	89%	83%
SVH	84%	85%	90%	85%	72%	76%	83%	96%	86%	52%	81%	74%	70%
AMR	100%	96%	97%	90%	90%	84%	100%	93%	97%	84%	97%	96%	97%
STANDARD	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%

— CHOMP
 — MMH
 — NMC
 — SVH
 — AMR
 — STANDARD

Monterey County Health Department Emergency Medical Services Agency

Ambulance Provider Contract Compliance

Emergency Medical Care Committee
(EMCC)

May 10, 2023

Presented by
Kimberley Hernandez

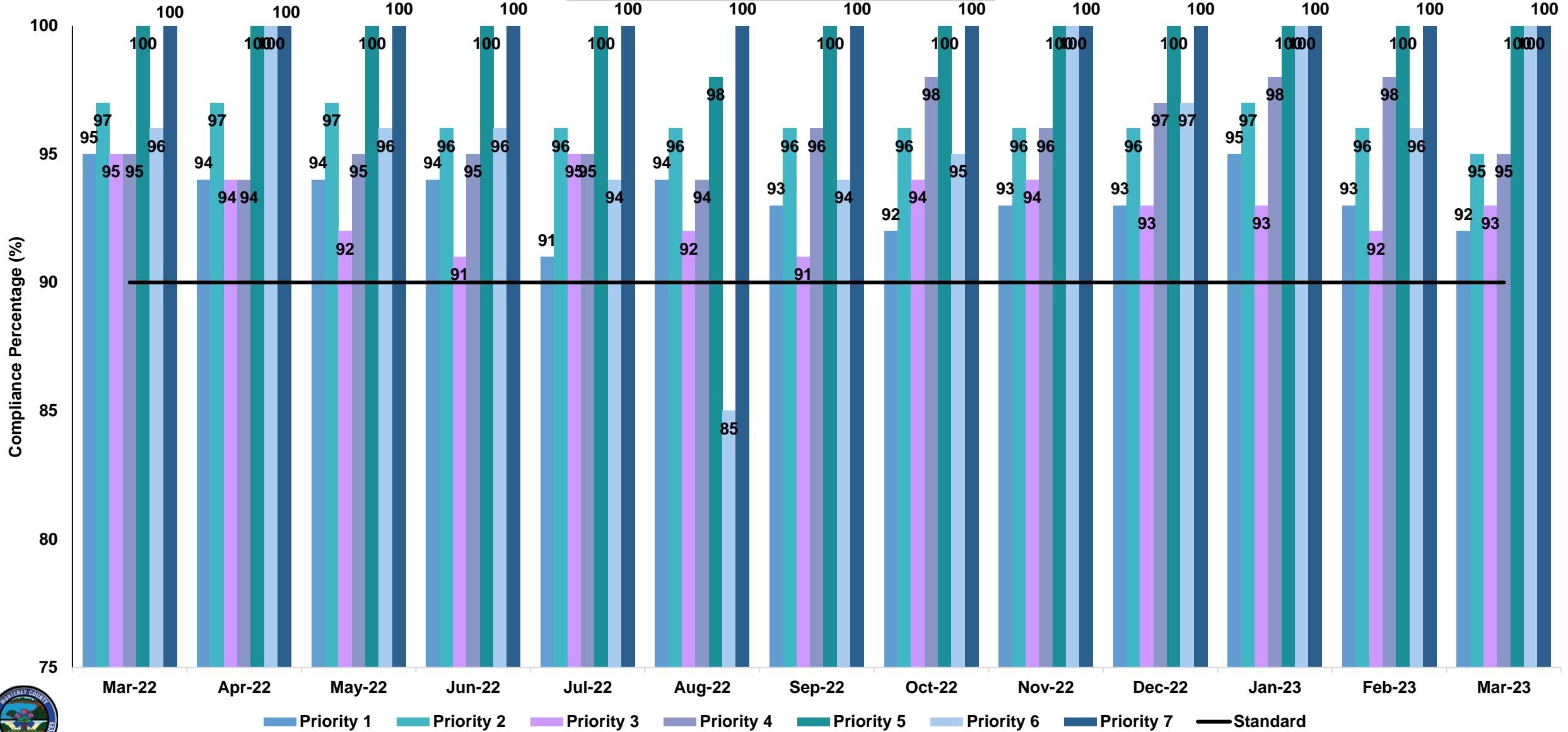


COUNTY OF MONTEREY
HEALTH DEPARTMENT
Nationally Accredited for Providing Quality Health Services



Response Time Compliance by Priority

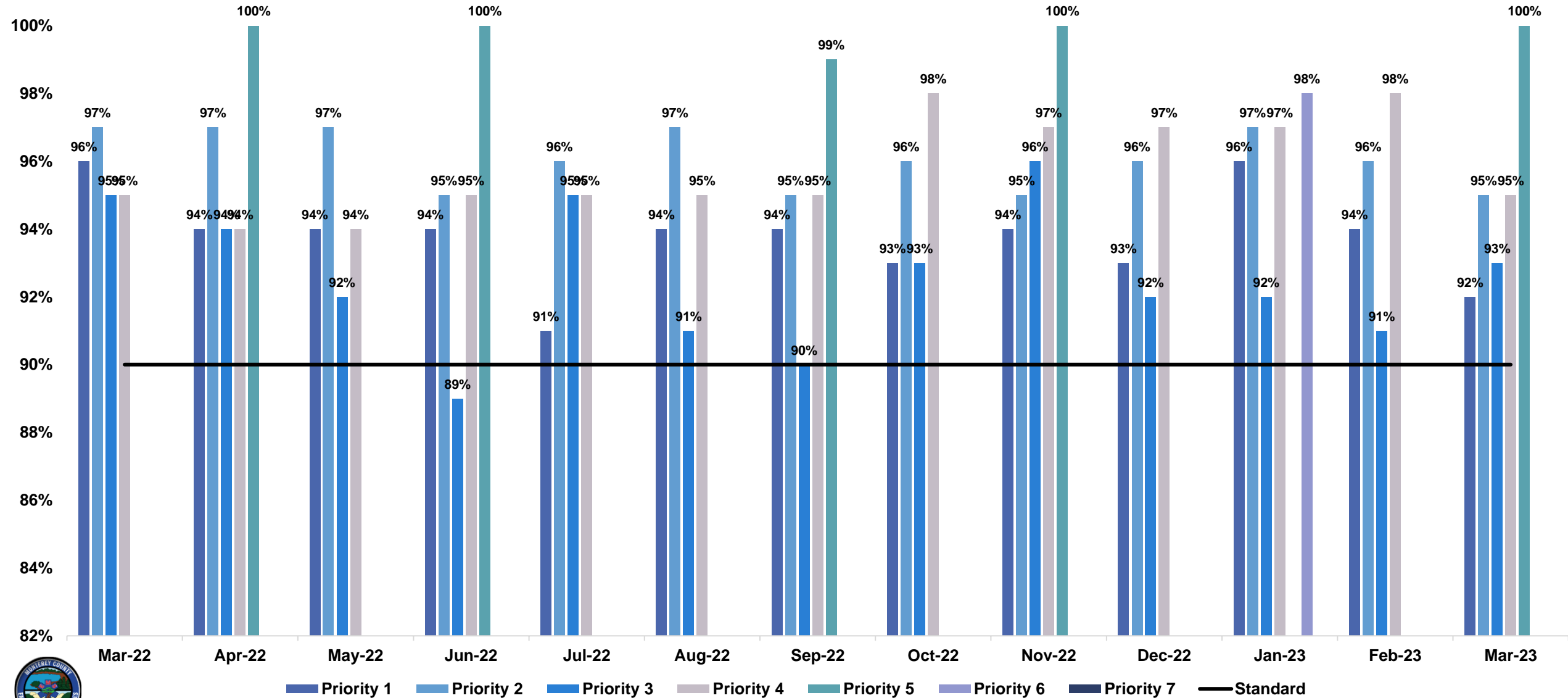
AMR Overall Response Time Compliance By Priority
March 2022-March 2023



■ Priority 1
 ■ Priority 2
 ■ Priority 3
 ■ Priority 4
 ■ Priority 5
 ■ Priority 6
 ■ Priority 7
 — Standard

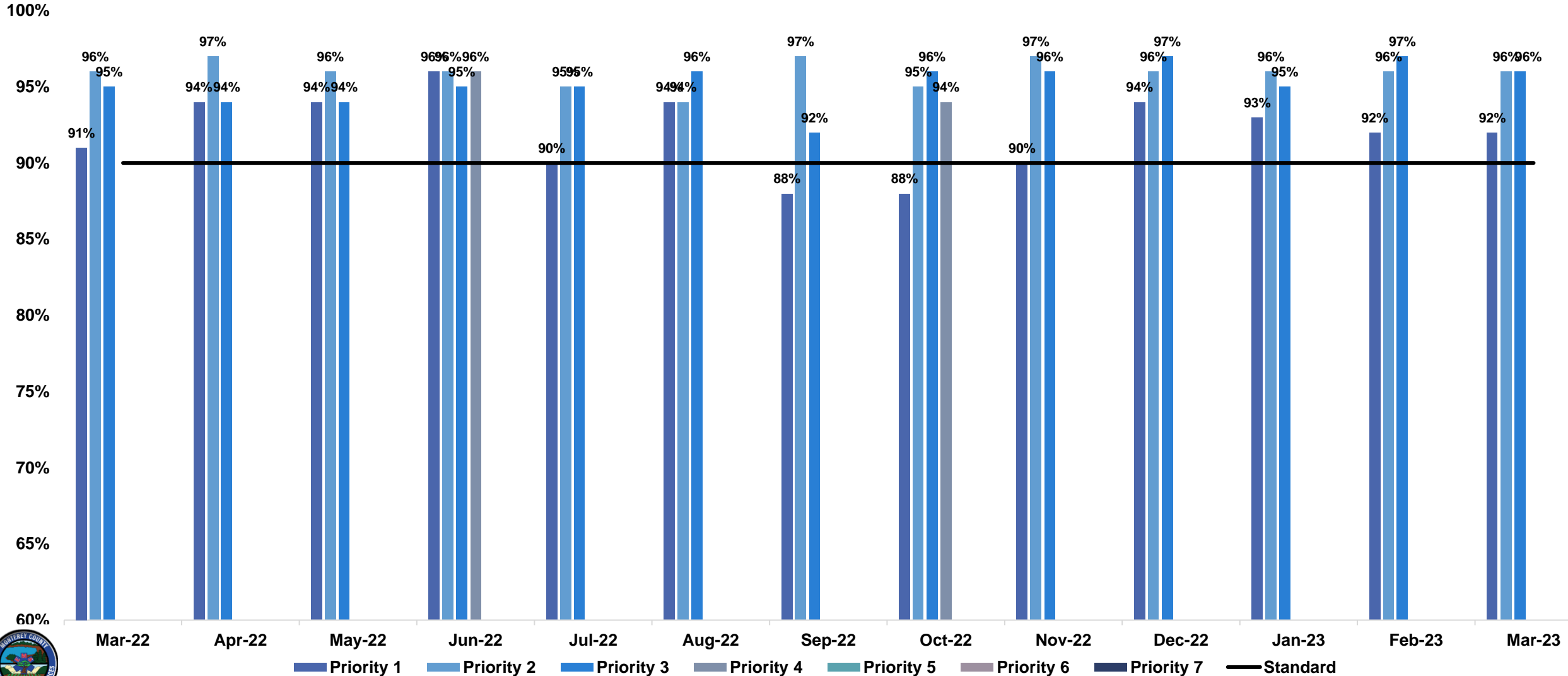
Response Time Compliance: **Green** Response Area

AMR Response Time Compliance By Priority for GREEN ZONE
 March 2022-March 2023
 Note: Missing priority values denote "100 call" rule not met for the month



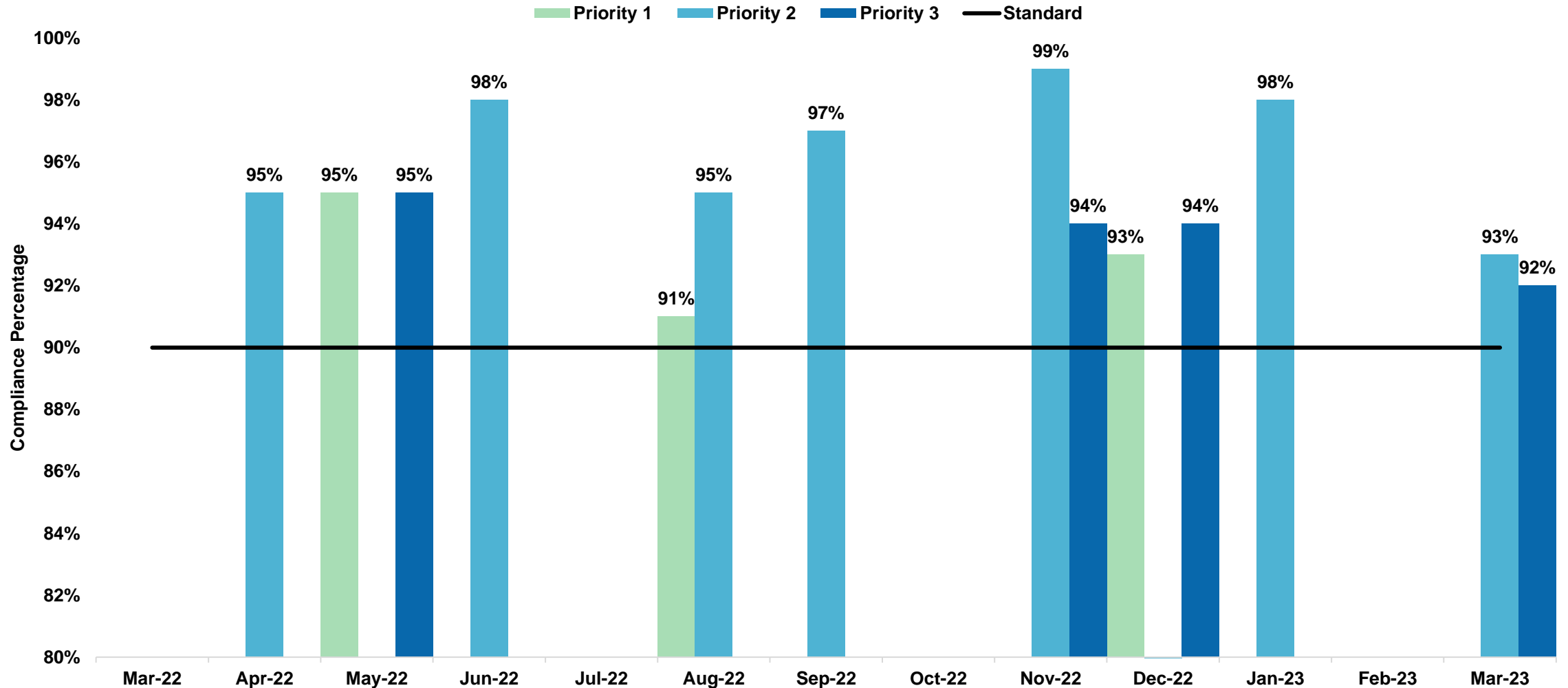
Response Time Compliance: Yellow Response Area

AMR Response Time Compliance By Priority: YELLOW ZONE
 March 2022-March 2023
 Note: Missing priority values denote "100 call" rule not met for month



Response Time Compliance: Orange Response Area

AMR Response Time Compliance By Priority: ORANGE ZONE
March 2022-March 2023
Note: Missing priority values denote "100 call" rule not met for the month.

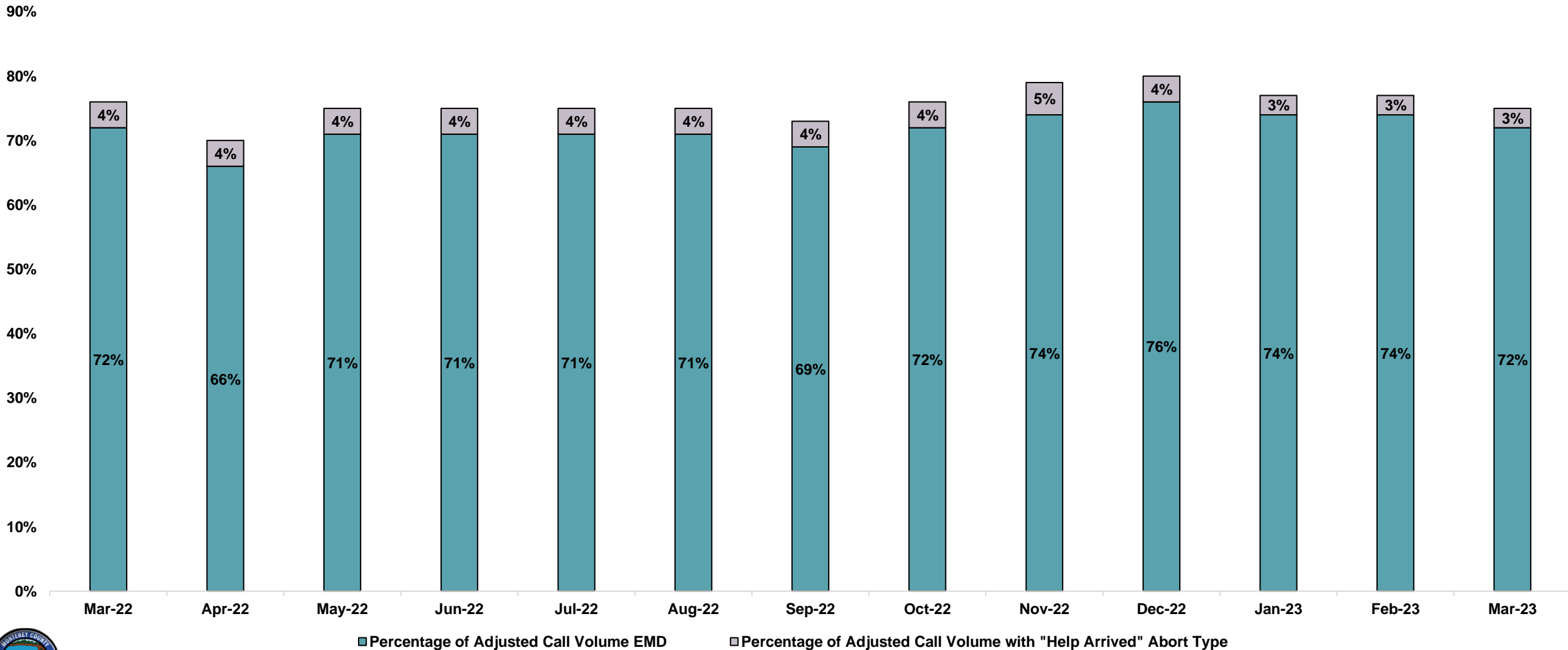


- Priority 4 & 6 (not depicted) has had no calls since 2017.
- Priority 5 had 2 calls since 2017.



Medical Priority Dispatch System Performance

March 2022-March 2023



100-Response Rule (“100 Call Rule”) –

ALS Provider Agreement: A-11610 §18.12

- For the purposes of determining compliance with response-time requirements within each Response Area monthly, the following method shall be used. For every month in which 100 or more responses of any Priority originate within the Response Area, 90% compliance is required for the calendar month. However, for any month within which fewer than 100 responses originate, compliance shall be calculated in subsequent month(s) once responses for that Response Area exceed 100 responses.



Ambulance Response Times by Zone

ALS Provider Agreement: A-11610 § 18.3

All times shall be calculated in minutes	Green	Yellow	Orange	Red
Priority - 1	8	12	16	ASAP
Priority - 2	10	16	20	ASAP
Priority - 3	12	20	24	ASAP
Priority - 4	Scheduled Pick-up Time			
Priority - 5	Green Zone: 60 minutes; Yellow Zone: 120 minutes			
Priority - 6	Scheduled Pick-up Time			
Priority - 7	Immediate, Unscheduled Response Request			



Sources:

- AMR Performance Metrics. Submitted to LEMSA March 2022-March 2023.
- AMR Agreement: A-11610. Agreement NO:A-11610. Agreement between the County of Monterey and American Medical Response West. 2010.
- California law. Healthy and Safety Code. Division 2.5:Emergency Medical Services. Chapter 3, Article 1, Section 1797.120(b).



END





COUNTY OF MONTEREY HEALTH DEPARTMENT

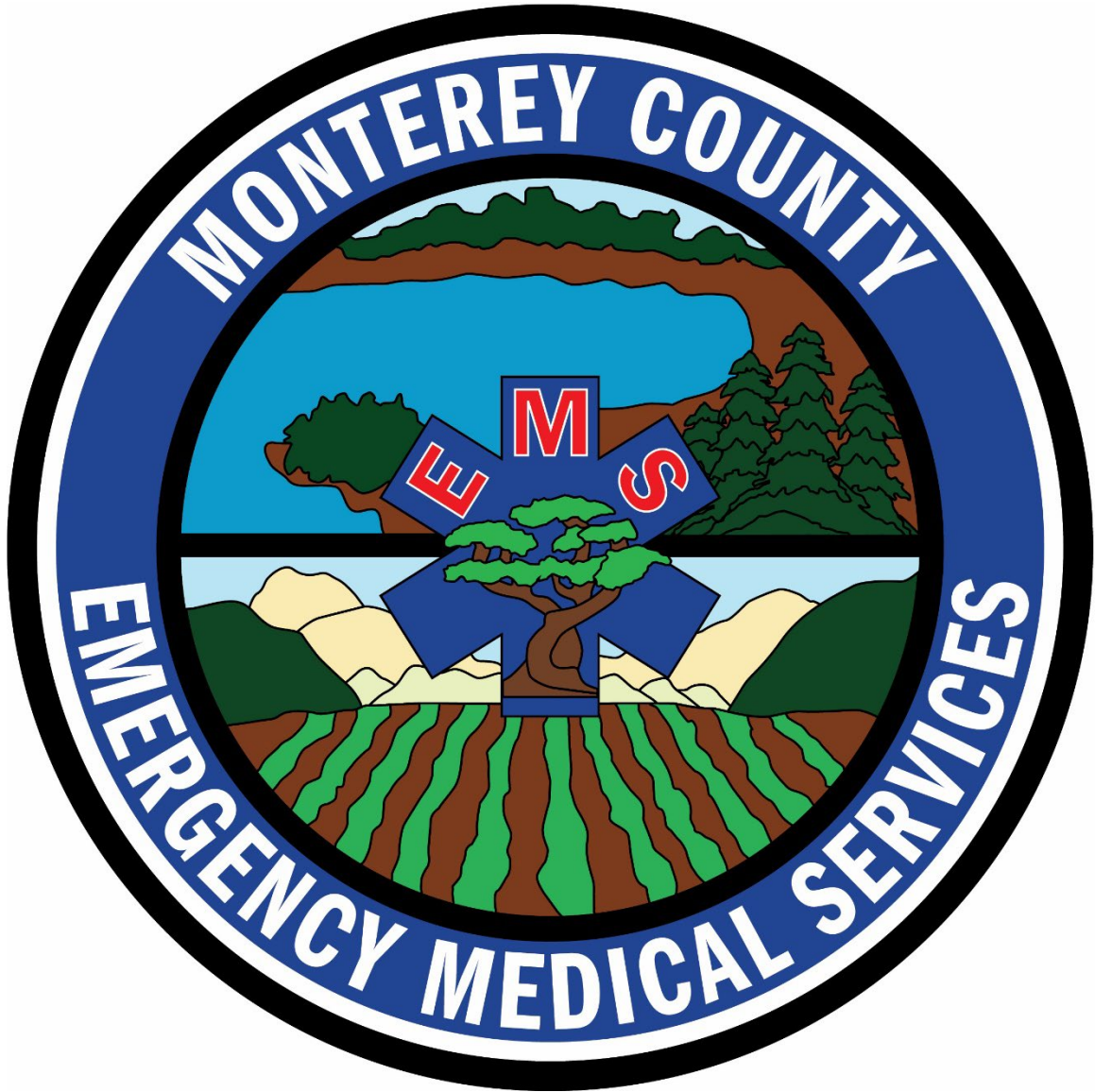
Elsa Jimenez, Director of Health

Administration Animal Services Behavioral Health Clinic Services
Emergency Medical Services Environmental Health Public Administrator/Public Guardian Public Health

Date: May 10, 2023
To: Emergency Medical Care Committee (EMCC)
From: Monterey County EMS Agency
Regarding: EMCC Membership

EMS Policy 1020 states that the term of office for each EMCC member is for a period of two (2) years, commencing on the first of July. The term of the following EMCC members and alternates is set to expire on June 30, 2023. The table below also includes the status for Spencer Harnett who has been nominated by the EMS Director to fill the paramedic position on EMCC.

Member	Representing	Status
Will Hiller	Manager-Ambulance Contractor	Recommendation from AMR pending
Sam Klemek	ALS Fire	Pending recommendation from Fire Chiefs
Jeff Watkins	Law Enforcement	Recommendation from Law Chiefs pending
Jon Anthony	Monterey County Resource Management Agency	Recommendation from RMA pending
Harry Robins	Citizen Representative	Considering request for reappointment
Jody Schaffer	Citizen Representative	Considering request for reappointment
Spencer Harnett	Paramedic	Recommendation received and nomination sent for Board approval
Alternate	Representing	Status
Michael Esslinger	Manager-Ambulance Contractor	Recommendation from AMR pending
	ALS Fire	Pending Recommendation from Fire Chiefs
Steve Russo	Law Enforcement	Recommendation from Law Chiefs pending
Bandy Smith	Monterey County Resource Management Agency	Recommendation from RMS pending
<i>Vacant</i>	Citizen representative	EMS Agency is actively recruiting for this position
<i>Vacant</i>	Citizen representative	EMS Agency is actively recruiting for this position



MONTEREY COUNTY EMERGENCY MEDICAL SERVICES AGENCY

2022 ANNUAL REPORT TO THE BOARD OF SUPERVISORS

COUNTY OF MONTEREY | HEALTH DEPARTMENT

EMS AGENCY MISSION STATEMENT

The mission of the Monterey County Emergency Medical Services (EMS) Agency is to lead the Monterey County EMS System through establishing highest standards of emergency medical care, system operations, and medical disaster preparedness for the benefit of the people of Monterey County.

OUR VISION

To create a model EMS system that uses research, best practices, and quality improvement processes to equip providers of pre-hospital emergency medical care to provide compassionate and clinically appropriate care for the people of Monterey County.

VALUE STATEMENTS

The Monterey County EMS Agency is committed to:

- Advocating for the patient in all that we do.
- Personal, professional, and organizational integrity.
- Treating people with dignity, respect, honesty, and fairness.
- Working collaboratively in an environment of trust, transparency, safety, and teamwork.
- Leadership that brings accountability, responsibility, and success to our organization.
- Maintaining a working environment that fosters passion, creativity, and enjoyment.
- Striving to achieve excellence through expertise, innovation, and continued learning.

EMS AGENCY DIRECTOR'S MESSAGE

Honorable Chair and Members of the Board of Supervisors,

I am pleased to present the 2022 Monterey County EMS Agency Annual Report. This report represents our attempt to encapsulate the innumerable tasks and projects that go into our efforts to fulfill our responsibility for planning, implementing, and evaluating the Monterey County EMS System. Most of the EMS Agency's work occurs in the background as our system partners, including dispatchers, first responders, ambulance providers, and hospitals, do their very visible work in the public eye. System design and management, plan development and implementation, policy and protocol development and improvement, and stakeholder coordination are not topics that make for successful TV shows. Yet, they are the necessary backbone of a highly functioning EMS system. The EMS Agency is proud of our efforts behind the scenes to facilitate the work and coordination of our system partners to ensure that all residents of and visitors to Monterey County have access to an excellent EMS System.

At the EMS Agency we often speak of the need to think about the challenges we encounter in the EMS System in new ways beyond the traditional paradigms. Many of the past pillars of EMS are no longer sufficient to meet the needs of the community and the increasingly complex healthcare environment. These complex challenges call for multi-faceted solutions. In many instances, there is not one ideal solution. Thus, we seek to add new tools to our toolbox and ensure our ability to address challenges in a plethora of ways. At the same time, the EMS Agency must balance the utility and value of each added tool against the cost to our system stakeholders and, ultimately, to the patients we care for.

In our 2021 report we highlighted our efforts to strengthen our partnerships with our stakeholders and to identify and create pathways for direct engagement with those providing care in Monterey County. In 2022, we continued and expanded upon these efforts by actively pursuing new paths and partnerships. In addition to continually adding new methods and programs, we must strive to establish new partnerships to make progress towards conquering the complex challenges we face.

In 2022 the EMS Agency sought and received approval from the state to move forward with a program permitting our paramedics to administer Buprenorphine to patients experiencing symptoms of withdrawal from opioids. This program not only provides the EMS System with a new tool to help in the fight against the public health emergency of opioid addiction, but it also allows us to strengthen our existing relationships and establish new partnerships. The program is a tri-county endeavor bringing together Monterey, San Benito, and Santa Cruz County EMS agencies, hospitals, and clinic-based treatment programs to develop, implement, and evaluate, the program as a team. Additionally, the program has expanded and strengthened the pre-existing partnerships with these groups within Monterey County.

Other efforts to forge new and strengthen existing relationships and partnerships took place in the area of education. In 2022, the EMS Agency approved a paramedic training program through the South Bay Regional Public Safety Training Consortium at Monterey Peninsula College that will provide local training and help to increase the pool of paramedics to address local system needs for paramedics. The EMS Agency continued our efforts to directly interface with our stakeholders by offering courses directly to our field providers and hospital staff. These educational offerings are typically led by Dr. John Beuerle, the Agency's Medical Director. One course this year addressed the

all too prevalent issue of human trafficking and came about as a result of a unique partnership with the YWCA Monterey County.

Late in 2022, the EMS Agency worked with American Medical Response to implement the Emergency Triage, Treat, and Transport (ET3) Model in Monterey County. This is a pilot program that permits AMR's crews to direct a subset of patients experiencing lower acuity conditions towards a telehealth physician evaluation instead of automatically transporting the patient to a local emergency department. The use of ET3 can lower the costs for patients and insurance providers while at the same time removing some of the burden from overfilled emergency departments. Unfortunately, there has been a resistance on the part of the patients to take advantage of this new program. We have learned from other systems that have implemented ET3 that it is not unusual for the program to have a slow start. In 2023, the EMS Agency will work with AMR to address the barriers that keep patients from taking advantage of this program.

Additionally, the EMS Agency sought to increase our direct contact with the general public through a series of educationally focused social media postings. These postings relay important health and safety information are often tailored to be pertinent to a particular event, holiday, or season. They help community members prevent, prepare for, and respond to a variety of situations and ultimately become stronger and more well informed as well as helping to establish the EMS Agency as a reliable and trusted organization.

We are proud of our accomplishments. We recognize and appreciate the role of our partners and stakeholders in the ongoing development of the EMS System. We reaffirm our commitment to building an advanced and equitable EMS System for everyone in Monterey County.

Respectfully submitted,



Teresa Rios
EMS Bureau Chief

EMS AGENCY MEDICAL DIRECTOR'S MESSAGE

The Monterey County EMS System faced many challenges over the past three years. We were tested by a global pandemic that required high levels of planning, teamwork, courage, fortitude, and ingenuity. We battled floods and wildland fires, a narcotic epidemic, and we worked together to utilize our finite resources to continue to meet the needs of an ever-increasing number of patients. We emerged from those challenges stronger than we were before, and we used that inertia to develop new projects to improve the delivery of 911 services throughout the county.

Training, education, and outreach were an important focus of 2022. The EMS Agency worked with the South Bay Regional Public Safety Training Consortium to launch a paramedic training program through Monterey Peninsula College, where students receive EMS training, college credit, and an opportunity to serve as Advanced Life Support providers in their local communities. We worked with American Medical Response to create community educational posts through social media, focusing on such topics as avoidance of drunk driving and guidelines for street safety for children. In March 2022, the EMS Agency continued its series of continuing education with a lecture designed to improve effective communication between base hospital physicians and EMS personnel requesting medical direction. In August 2022, we partnered with the YWCA Monterey County to offer a course for prehospital and hospital providers to improve awareness, prevention, and recognition of victims of human trafficking. In December 2022, we hosted the first of a series of meetings with paramedic preceptors, providing an opportunity for training and ongoing dialogue between the EMS Agency and the dedicated mentors who work with new paramedics to hone their skills in the clinical setting.

In response to the ongoing narcotic epidemic, Monterey County joined forces with Santa Cruz and San Benito County EMS Agencies in a Tri-County program to enable paramedics to administer buprenorphine to patients in opioid withdrawal or following a near-fatal opioid overdose. The medication alleviates human suffering, reduces the likelihood of a fatal narcotic overdose in the future, and enables patients to take the first step toward substance use recovery. Patients are then transported to a local hospital and receive follow-up support from a Substance Use Navigator. The Tri-County initiative is a paradigm shift in how we approach and treat addiction, and it provides hope and assistance to patients during a time when they need it the most.

In addition to these projects, we continue to focus on our core responsibilities: coordinating EMS operations and quality improvement; procuring and distributing resources and supplies; approving EMT certifications and paramedic accreditations; working closely with our EMS, Fire, and hospital partners on annual revisions to EMS policies and protocols; and ensuring adequate and effective ambulance service throughout Monterey County.

When I look back on our year of challenges and accomplishments, I am reminded that our success relies on the hard work and collaborative efforts of hundreds of individuals: firefighters, EMTs, paramedics, first responders, air ambulance crews, dispatchers, law enforcement officers, hospital personnel, EMS analysts, administrators, epidemiologists, support staff, and community representatives, all working together toward a common goal. It is a privilege to be part of that

process, to work with so many talented and dedicated individuals, and to know that we are making a difference in the lives of the people we serve.

Sincerely,

A handwritten signature in blue ink, appearing to read 'John Beuerle', with a long horizontal flourish extending to the right.

John Beuerle, M.D.
EMS Medical Director

INTRODUCTION

Over the past several years, the Monterey County Emergency Medical Services Agency has worked to develop and improve and our Annual Report to the Board of Supervisors. In 2022 the EMS Agency transitioned our report to a format that we believe will help readers more easily navigate the content and identify the topics of interest to them. This year's report is divided into three sections based upon the following structure:

1. **Monterey County EMS System Overview** – This section provides background information regarding the EMS Agency and the EMS System. It describes the structure of the EMS Agency and the variety of roles that we play in managing and leading the EMS System. The section also explains the various components of the EMS System from dispatch to prehospital personnel, and through to the emergency department and specialty care centers throughout Monterey County.
2. **2022 EMS System Data** – This section provides data for 2022 related to several key components of the EMS System including EMS student training programs, processing of applications for certification and accreditation, emergency medical dispatch operations, ambulance call volume, disaster response efforts, and finances. The section also explains the EMS Agency's role in each of these areas.
3. **2022 Accomplishments and Highlights** – This section provides the reader with an overview of some of the EMS Agency's key accomplishments throughout the course of 2022. While the items discussed are but a small fraction of the improvements made to the EMS System, we feel that they represent significant strides towards our overall vision of creating and continuously improving a model EMS System for the people of Monterey County.

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MONTEREY COUNTY EMS SYSTEM OVERVIEW

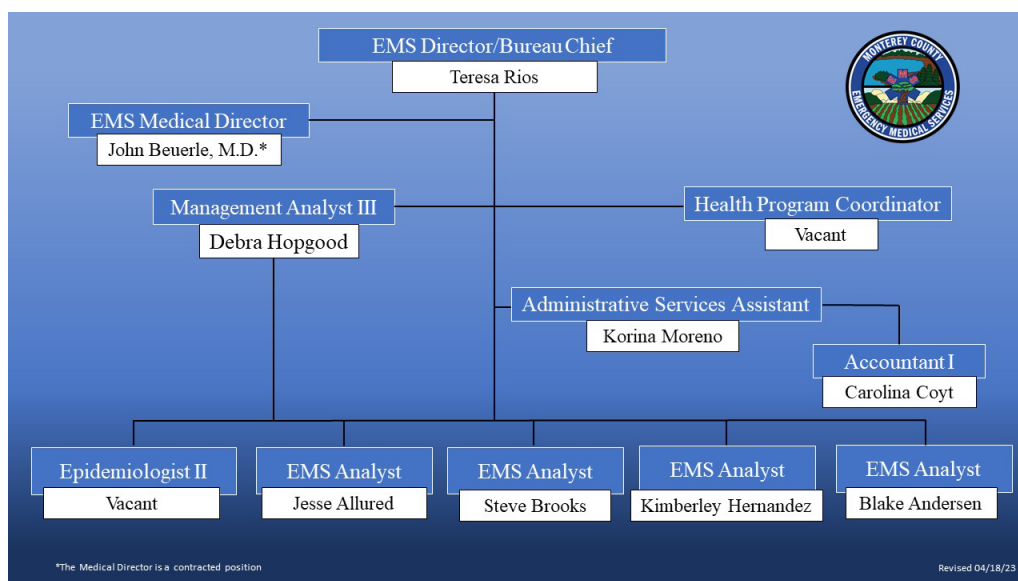
The Monterey County Emergency Medical Services (EMS) System is comprised of ground and air ambulance providers, dispatch/communications centers, fire and rescue service providers, hospital emergency departments, specialty care centers for trauma, stroke, and heart attack patients, and the Monterey County EMS Agency. The purpose of the EMS System is to provide high quality, patient-centered Emergency Medical Services with integrity, equity, dedication, expertise, effectiveness, efficiency, and collaboration at the forefront. The collaborative efforts of these EMS System partners strengthen our ability to provide emergency medical services to citizens of and visitors to Monterey County.



THE MONTEREY COUNTY EMS AGENCY

The Emergency Medical Services Agency is a Bureau within the Monterey County Health Department and is designated by the Board of Supervisors as the local Emergency Medical Services Agency (LEMSA) that oversees the delivery of EMS within Monterey County. The LEMSA ensures that regulations pertaining to the EMS system are carried out as intended by the California Emergency Medical Services Authority. The role of the Monterey County EMS Agency is defined by California statute to plan, implement, and evaluate the EMS System. Additionally, the statute requires the EMS Agency to have a licensed physician as the medical director to provide medical control and to ensure medical accountability.

THE MONTEREY COUNTY EMS AGENCY ORGANIZATIONAL CHART



THE EMS AGENCY'S ROLE IN THE MONTEREY COUNTY EMS SYSTEM

A high performing EMS System consists of multiple agencies with a variety of functions working together to provide care to those suffering from a medical emergency. The EMS Agency is responsible for managing and coordinating these agencies to ensure that patients in our community receive a coordinated and appropriate EMS response when calling 9-1-1 and, ultimately, the best possible care. However, the EMS Agency's responsibilities do not stop when a patient reaches the doors of the hospital. The EMS Agency is also responsible for ensuring that our local hospitals are able to appropriately receive patients from EMS and, when needed, provide online medical direction to EMS providers in the field. Additionally, the EMS Agency has the responsibility for designation and oversight of specialty care centers for the treatment of trauma, stroke, and ST elevation myocardial infarction (STEMI) patients in Monterey County.

We approach our role emphasizing the Triple Aim.



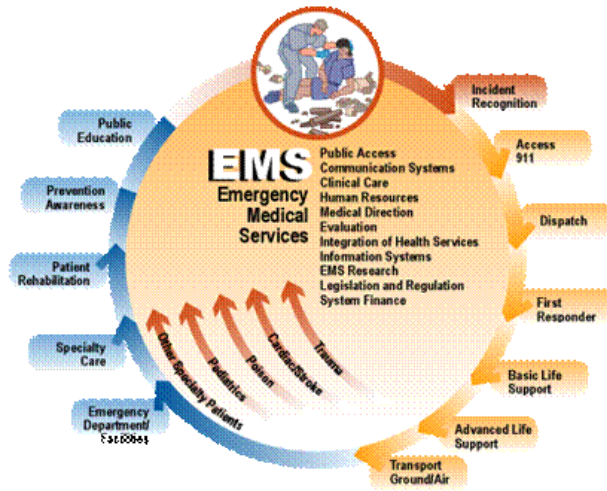
- *Implement efficient and effective structures, processes, and outputs*
- *Measure clinical, operational, and financial performance indicators*
- *Engage in continuous Quality Improvement*
- *Embrace concept of Just Culture*
- *Maintain transparency*
- *Ensure equity*

EMS SYSTEM MANAGEMENT

Essential functions performed by the Monterey County EMS Agency include:

- Serving as an advocate for patients.
- Collaborating with other health officials to ensure a unified, coordinated approach in the delivery of health care.
- Ensure equity in the provision of emergency medical services.
- Carrying out regulations relative to the EMS systems.
- Certifying, accrediting, and authorizing EMS field personnel.
- Authorizing and approving local EMS training programs.
- Developing/approving medical treatment protocols and policies for local EMS service providers (EMTs, Paramedics, and dispatchers) to assure medical control of the EMS system.
- Organize EMS dispatch and communication standards, including medical dispatch protocols
- In collaboration with public health, developing local medical and health disaster plans and coordinating medical and health response to disasters (natural and man-made).
- Designating trauma centers and other specialty care centers.
- Coordinating activities and communications between various agencies that provide EMS System services so that care appears seamless to the patient.
- Coordinating community education programs regarding injury prevention, CPR, public access defibrillation, etc.
- Collecting, analyzing, and reporting on EMS data.
- Contracting for the provision of emergency ambulance service.
- Providing oversight for EMS quality improvement and quality assurance activities.

- Resolving consumer complaints.
- Providing information to public officials.
- Advocating for sufficient and stable funding for emergency medical services.



MONTEREY COUNTY EMS SYSTEM PROVIDER AGENCIES

Our dispatchers, first responders, Emergency Medical Technicians, Paramedics, and hospital staff provide thorough, timely, compassionate care at all times for all people in need. They are trained, caring professionals who have chosen to help others, often at their most dire time of need, and at any hour of the day or night. This dedicated service has been exemplary especially throughout the additional challenges of the COVID-19 pandemic. The Monterey County EMS Agency thanks our EMS Providers and everyone at their agencies who work hard to support them and make it possible for them to perform their work.

Ground Ambulance Service Providers

- ❖ American Medical Response
- ❖ City of Carmel Fire Ambulance
- ❖ Fort Hunter Liggett Fire Department
- ❖ Monterey County Regional Fire District

Air Ambulance Service Providers

- ❖ CALSTAR Air Medical Services
- ❖ Mercy Air Services

Fire Departments

- ❖ Big Sur Fire
- ❖ CAL Fire
- ❖ CTF Fire Department
- ❖ Fort Hunter Liggett Fire Department
- ❖ Gonzales Fire Department
- ❖ Greenfield Fire District
- ❖ King City Volunteer Fire Department
- ❖ Marina Fire Department
- ❖ Mid Coast Fire Brigade
- ❖ Monterey County Regional Fire District
- ❖ Monterey Fire Department
- ❖ North Monterey County Fire District
- ❖ Presidio of Monterey Fire Department
- ❖ Salinas Fire Department
- ❖ Seaside Fire Department
- ❖ U.S. Forest Service

Hospitals and Medical Centers

- ❖ Community Hospital of the Monterey Peninsula
- ❖ Mee Memorial Hospital
- ❖ Natividad
- ❖ Salinas Valley Health

Law Enforcement Agencies

- ❖ California Highway Patrol – Monterey
- ❖ Carmel Police Department
- ❖ Del Rey Oaks Police Department
- ❖ Gonzales Police Department
- ❖ Greenfield Police Department
- ❖ King City Police Department
- ❖ Marina Police Department
- ❖ Monterey County Sheriff's Office
- ❖ Monterey Police Department
- ❖ Pacific Grove Police Department
- ❖ Salinas Police Department
- ❖ Sand City Police Department
- ❖ Seaside Police Department
- ❖ Soledad Police Department



EMS SYSTEM PERSONNEL

EMS personnel arrive at emergency scenes such as medical emergencies, traumatic incidents, and natural disasters to provide immediate care. They provide assessment, treatment, and transportation. EMS personnel typically have one of three levels of EMS training – Emergency Medical Responder (EMR), Emergency Medical Technician (EMT), and Paramedic. Additionally, Registered Nurses (RNs) may work on EMS aircraft or on ground Critical Care Transport (CCT).

Emergency Medical Responder (EMR)

EMRs provide vital assistance at the scene of an emergency or accident. In many instances, they are the first person to arrive at the scene and they provide lifesaving help until other medical providers arrive.

Monterey County should be proud of its history in training EMS personnel to the level of EMR. Many years ago, EMS leadership determined that bringing Paramedic-level services required all EMS responders to be trained to provide EMS care and to assist Paramedics. EMR training continues in some of the more rural areas of the County as a way to utilize people in a first responder role who would otherwise not volunteer with the local fire agency due to the time and other requirements to become an EMT. The EMS Agency distributes CSA-74 funds to the fire departments and districts to assist with the cost of training.

Currently, there is no certification in California for EMR. EMR is a training course that provides a course completion certificate to document the training. The EMS Agency is responsible for approving the training program, course content, and testing materials. It is through this approval process that the EMS Agency ensures that the EMR-trained responder is capable of providing the level of care in which they have been trained.

Emergency Medical Technician (EMT)

Most EMS providers have received training as an EMT. EMTs provide care at the basic life support (BLS) level. EMTs do everything an EMR does and can perform several additional treatments such as finger stick blood glucose testing, administering aspirin to patients experiencing chest pain, or administering epinephrine by auto-injector to patients experiencing severe allergic reactions/anaphylaxis.

The EMS Agency provides initial EMT certification for qualified applicants who have completed EMT training, passed the certifying examination, and are not disqualified due to a criminal background or background of misconduct as a healthcare provider that would make them unfit to provide care for the people of Monterey County. When this has been verified by EMS Agency staff, the EMS Agency provides EMT certification to the applicant. The EMS Agency performs a thorough review of each application to ensure all the requirements are met.

Public safety is our highest priority. To that end, the EMS Agency receives reports through the Live Scan fingerprint process on the criminal background of EMTs who are certified or applying for certification through the Agency. The EMS Agency follows guidance established by the California EMS Authority related to criminal background actions to ensure consistency across the State. The EMS Agency also receives reports from the National Practitioner Data Bank on the healthcare background of each EMT and EMT applicant to ensure that they do not have a history of problems related to the provision of medical care or licensure.

Paramedic

Paramedics provide care at the advanced life support (ALS) level. They have more stringent education and training requirements and are authorized to perform more complex levels of assessment and care interventions including several invasive procedures.

Paramedics are licensed through the State EMS Authority. The Paramedic's ability to practice in Monterey County is provided through accreditation. The EMS Agency provides accreditation only to Paramedics affiliated by employment with a Paramedic service provider organization. Monterey County EMS also requires Paramedics to have additional training in trauma, cardiac, and pediatric care not required for licensure but required for accreditation to practice in the Monterey County EMS System.

The EMS Agency accreditation process ensures that Paramedics are able to function in the Monterey County EMS System by demonstrating that they know and are able to function under the policies and treatment protocols established by the EMS Agency and EMS Medical Director.



EMS OPERATIONS

EMS operations include many of the logistical and practical considerations involved in ensuring that appropriately trained EMS personnel reach patients in need of medical assistance in a timely and safe manner. Providing highly trained EMS responders begins with the initial training received, continues with certification and accreditation processes, and is maintained through continuing education and training.

Emergency Medical Technician (EMT) Training Programs

The EMS Agency is responsible for approving and monitoring EMT training programs held within Monterey County. There are two active EMT training programs in Monterey County at Hartnell College and MPC. The EMT training program which was part of a healthcare careers program through the Monterey Peninsula School District has been discontinued.

Both EMT training programs received approval for the maximum of four years from the last review of their program by EMS Agency staff. Expiration of approval will come in 2023 and EMS Agency staff will again review these programs to ensure compliance with California regulations and Monterey County EMS policies.

Paramedic Training Program

The EMS Agency is also responsible for approving and monitoring paramedic training programs. The EMS Agency ensures that the program complies with all California EMS Authority (EMSA) and Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) requirements. This process includes a thorough review of topics such as staff qualifications, syllabus and curriculum, equipment and facilities, and agreements for hospital and field student internships as well as a site visit.

Certification and Accreditation

The EMS Agency fulfills one of its core functions by providing for the initial certification and renewal of certification for EMTs. EMT certification is an important function of the EMS Agency as we seek to ensure the public health and safety by ensuring that each EMT applicant meets the qualifications for initial or continued certification. Besides ensuring completion of appropriate medical training and evaluations, the EMS Agency performs both a criminal and medical background check. The criminal background check is through the California Department of Justice Live Scan program where we also receive out of state information from the FBI. The applicant's medical background is checked through a National Practitioner Data Back review

Paramedic accreditation is an ongoing effort on the part of the EMS Agency. The accreditation process is to ensure that California licensed paramedics have met the qualifications to work in the Monterey County EMS system and understand and are able to function under Monterey County EMS policies and treatment protocols. The EMS Agency also reviews each active paramedic every two years to ensure that they continue to meet EMS policy requirements to continue to function within the Monterey County EMS system. One of these requirements is that they are trained and tested on several critical, but not often used, skills every year. The training and testing has been delegated to the paramedic employer who documents that the paramedic has completed the training and testing and continues to meet all other requirements for continued accreditation.

The other two key components of EMS Operations are dispatch operations and field operations. Dispatch operations ensures that the needed resources arrive expeditiously while field operations involve the actual response to an incident by EMS System personnel.

Emergency Medical Call Dispatch

9-1-1 Call Receipt

Calling 9-1-1 is the first connection between the person needing emergency medical services and the EMS System. Monterey County Emergency Communications Department (MCECD) receives the majority of 9-1-1 calls placed in Monterey County. The California Highway Patrol (CHP) also maintains a dispatch center in Monterey County and receives a portion of 9-1-1 calls made by cell phone within Monterey County. Most of the 9-1-1 callers reporting a medical emergency are transferred to the EMS Dispatch Center for further processing. However, 9-1-1 calls such as those involving an active shooter or other dangerous situations may be retained by MCECD personnel as they gather information necessary for the safety of all emergency responders.

EMS Dispatch

The EMS Dispatch Center (EMS Dispatch) is operated by AMR, the County's ambulance services contractor. EMS Dispatch is staffed with dispatchers who are certified Emergency Medical Dispatchers (EMDs) that have been trained in the Medical Priority Dispatch System (MPDS). MPDS is a well-researched and unified system used to prioritize medical calls and dispatch appropriate aid to medical emergencies. The goal of MPDS is to prioritize the highest acuity medical emergencies so

they receive the fastest response from the closest available resources. EMDs use MPDS for caller interrogation to ensure that the proper pre-arrival instructions are given to assist the patient or reporting party until responders arrive. This may be through guidance in performing cardiopulmonary resuscitation (CPR), control of serious bleeding, childbirth, choking, or assistance with other types of medical emergencies. Call interrogation was implemented in Monterey County in 2019 for better management of system resources and to ensure that the right resource is sent to the patient.

Ambulance Services

Ambulance Provider Contract – Exclusive Operating Area (EOA)

A primary function of the EMS Agency is to ensure there are adequate and effective ambulance services throughout Monterey County. In 2021, the EMS Agency successfully negotiated a three-year extension of the ambulance services agreement with American Medical Response (AMR). This ensures the continued provision of emergency ambulance services in the Exclusive Operating Area (EOA), which covers the majority of Monterey County, until the end of June 2025. The ambulance provider contract covers response to 9-1-1 calls, interfacility transports for patients who need continued medical monitoring during transport from one medical facility to another, and for medical standby services at special events within the county's EOA.

Contract Compliance

The current agreement for ambulance services requires a high level of performance by American Medical Response (AMR). The EMS Agency meets with AMR to monitor performance and to address issues that could hinder performance. A Contract Compliance Working Group (CCWG) comprised of citizen representatives, EMS Agency staff, a local emergency room physician, and AMR leadership, monitors AMR's performance by reviewing a wide range of metrics to maintain a system that delivers vital pre-hospital emergency medical services to the community.

QUALITY ASSURANCE AND IMPROVEMENT

Quality Assurance (QA) and Quality Improvement (QI) are at the core of everything the EMS Agency does, from clinical programs to ambulance service contract compliance to policies and protocols. They EMS QA and QI programs are critical to our ability to improve patient experience and overall EMS system.

The EMS system QA program aims to ensure that EMS professionals in the system are appropriately following policies, procedures, and protocols or meeting established regulatory standards. QA ensures that individuals within the system are doing the right things in the right way. QA is a part of quality improvement (QI) and is needed to establish confidence that performance is at the expected levels in advance of making improvements to a system.

The EMS system QI program focuses on systems rather than individuals. QI measures current processes and then creates and modifies the system to make things better. It involves a continuous reassessment to improve the delivery of a product. This “product” may be anything from high-quality patient care to educational offerings, or even the process for obtaining an EMT certification. QI strives toward meeting the current and evolving needs of patients and system stakeholders. The EMS Agency uses this mindset to inform our actions and continuously looks for potential areas of improvement throughout all components of the EMS System.

Unusual Occurrence Reports

An important component of the EMS Agency’s quality assurance and improvement programs involves identifying opportunities for improvement whether they be individual or system wide. The EMS Agency has a process in place by which anyone can submit a report regarding an incident, situation, or concern relating to the EMS System. These submissions are known as Unusual Occurrence (UO) reports. EMS Agency personnel review all available information pertinent to the UO report, compile a summary of the UO, and based on their review, draft recommendations for any needed actions.

Depending on the findings reached, actions may include identification of individual educational opportunities, performance improvement plans, disciplinary action, system-wide changes or training, or some combination of these items. Some reviews do not result in a need for action or may result in a recognition of clinical excellence.

Case reviews take place within a “Just Culture” framework and examine the system around individual behavior and action to look for opportunities for system/process design improvements. The term “Just Culture” refers to a system of shared accountability wherein the EMS Agency is accountable for the systems we have designed and for responding to the behaviors of EMS providers in a fair and just manner. EMS providers, in turn, are accountable for the quality of their choices and for reporting both their errors and system vulnerabilities. The goal is to foster an environment focused on learning from errors to support quality improvement.

POLICY AND PROTOCOL DEVELOPMENT

It is the policies and treatment protocols that provide structure within the EMS System. The policies set standards for the medical care of the patient, direction for transport destination decisions, coordination and interactions between the various providers and organizations, and the management and coordination of the EMS System itself.

To ensure policies and protocols remain current, the EMS Agency, in collaboration with agency partners, reviews all existing policies and protocols regularly. The EMS Agency also develops new policies and protocols to ensure compliance with new, or changes in existing regulation, and to reflect best practices.

SPECIALTY CARE SYSTEMS

A highly functioning EMS System is made up of a system of systems, which is part of what makes EMS so complex. The EMS System, as a whole, functions by bringing a variety of responders together to provide the care and transport needed by the patient. Within the EMS System, there are systems of specialty care designed to get the patient with specific conditions to a hospital capable of treating their condition. In Monterey County, the specific conditions addressed with specialty care systems are: ST Segment Elevation Myocardial Infarction (STEMI), Stroke, and Trauma.

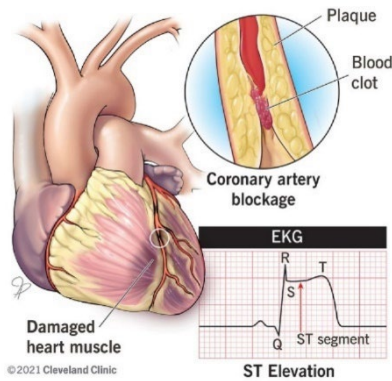
The California EMS Authority (EMSA), through its regulations, tasks the EMS Agency with:

- Development of plans addressing the provision of specialty care services within Monterey County.
- Designation of facilities to provide specialty care services. This designation process consists of the creation and adoption of standards for facilities related to topics such as staffing, personnel qualifications, facility and equipment availability, internal hospital written policy and procedure requirements, and quality improvement processes. Additionally, the EMS Agency conducts a review of written documentation as well as a site survey of the hospital. Once the EMS Agency has verified that a facility meets the established standards for a given specialty care service, the Agency works with the facility to implement a designation agreement. Specialty Care Centers must apply for redesignation on an established timeline.
- Ensuring that EMS providers are trained in the specialty care patient identification criteria, patient care methodologies, and treatment protocols.
- Developing a process for early notification of the facility of the impending arrival of a specialty care patient.
- Developing policies that provide a clear understanding of the structure of the specialty care system and the manner in which it utilizes the available resources.
- Collecting and analyzing data related to each specialty care service.
- Developing a process for periodic performance evaluation of each specialty care system.
- Developing quality assurance/improvement (QA/QI) processes and committees for each specialty care system.
- Ensuring that specialty care service providers and other hospitals that treat specialty care patients participate in quality improvement processes.

Another piece of the STEMI, stroke and trauma systems oversight by the EMS Agency is quality assurance/quality improvement (QA/QI). Each committee has its own QA/QI committee. Representation of all of the components of the STEMI, Stroke, and Trauma systems in a single committee, respectively, makes communication, identification of issues, and issue resolution within the system more effective. The EMS Agency's Trauma Evaluation and Quality Improvement Committee (TEQIC), STEMI QA/QI Committee, and Stroke QA/QI Committee fill this role in Monterey County. The committees bring together representatives from the EMS system like the emergency communications/dispatch center, first responder agencies, ground and air transport providers, law enforcement, the Coroner's Office, specialty care and non-specialty care hospitals in Monterey County, and representatives from the various specialty care teams to help improve the system and streamline communication between organizations. Each group reviews data specific to its specialty care area, provides input regarding policy and treatment protocol development/modification, serves as a forum for education, and functions as a peer review group by conducting regular case reviews. Information and improvements gleaned from the QA/QI meetings are communicated back to stakeholders throughout the EMS System.

STEMI System of Care

The ST-Segment Elevation Myocardial Infarction (STEMI) is a severe type of heart attack. It happens when an artery supplying blood to the heart suddenly becomes partially or completely blocked by a blood clot. For this reason, STEMIs require prompt recognition and treatment to bring about the best outcome for the patient. The EMS STEMI system of care is designed to primarily identify those patients with a STEMI and to transport the patient directly to a hospital with the specialized staff and treatment capabilities required by the patient.



At the front end of this system is the paramedic who can perform a 12-Lead ECG, an electrocardiogram performed while the patient is at rest that uses 12 wires that connect sticky electrode patches on the patient’s chest, arms and legs to a computer, to identify the STEMI and transmit it to the emergency department where the ED physician can activate the hospital’s staff and interventional cardiologist to meet the patient upon his or her arrival in the emergency department.

At the back end of this system is the specialized hospital designated to receive STEMI patients from paramedics. Both Community Hospital of the Monterey Peninsula (CHOMP) and Salinas Valley Health (SVH) have been designated by the EMS Agency to treat STEMI patients in Monterey County. Both hospitals have a cardiac catheterization suite and interventional cardiologists readily available to treat coronary artery blockages that cause a STEMI. This helps ensure that patients experiencing a STEMI receive timely care in a manner consistent with established standards.

Stroke System of Care

Stroke is a time-critical illness that occurs because the blood supply to part of the brain is interrupted or reduced, thus preventing the brain tissue from getting needed oxygen and nutrients. The more quickly a stroke patient is identified and transported to an appropriate hospital, the more likely it is that there will be a good outcome.

The EMS Stroke system of care functions much like the STEMI system in that it is a system within the overall EMS System designed to improve the speed in which stroke patients receive care in the hospital.

EMS personnel have been trained in the use of a specific stroke assessment tool that identifies stroke patients so they can be transported to one of the designated Stroke Receiving Centers. Both CHOMP and SVH have received designation as a Stroke Receiving Center.



Trauma System of Care

Monterey County's trauma system of care was initiated in January 2015. Since that time, the County has provided specialty trauma care to thousands of patients with traumatic injuries. The County's system of EMS Dispatch and pre-arrival instructions, EMS field triage, rapid transport to a Trauma Center, and care by a dedicated and specially trained trauma team has resulted in lives saved and a reduction in disabilities associated with traumatic injuries.

Natividad is the Trauma Center designated by the EMS Agency to serve Monterey County. Natividad is accredited by the American College of Surgeons (ACS) as a Level II Trauma Center for adult patients. The EMS Agency is tasked with ensuring that Natividad provides care in a manner consistent with EMSA and American College of Surgeons requirements.



Pediatric patients with critical or serious injuries are usually transported by air ambulance to a Pediatric Trauma Center in Santa Clara County.

The EMS Agency bases our trauma triage criteria on the Center for Disease Control (CDC) Field Trauma Triage Criteria. This system categorizes the severity of the patient's injuries and helps ensure that patients with life-or-limb threatening injuries are rapidly identified and triaged to the closest, most appropriate Trauma Center. A similar triage system helps emergency department physicians at non-trauma center hospitals rapidly triage patients who arrive by means other than an ambulance and immediately transfer patients meeting trauma triage criteria to an appropriate Trauma Center.

DISASTER MANAGEMENT

California's disasters often have an impact on public health and the medical system. EMS is a key part of the countywide disaster management system. EMS providers are usually the first medical care teams to arrive at the scene of a disaster. Thus, EMS must be prepared to successfully respond to the public health and medical consequences of disasters.

The EMS Agency's Role in Disaster Management

The EMS Agency takes the lead in ensuring that EMS service provider agencies are prepared to respond to disasters and mass casualty incidents (MCIs) involving multiple patients. Advance preparations include building a robust system of mutual aid partners, regulating medical supply inventories, participation in training and exercise opportunities, and drafting and editing various disaster-related plans.

The EMS Agency provides staff to serve as an EMS Duty Officer. This position is on-call 24 hours per day every day of the year. EMS Communications notifies the EMS Duty Officer of significant incidents providing the EMS Agency with situational awareness. The EMS Duty Officer can confer with responding agencies and provide guidance as needed.

Depending on the scope and scale of the incident, the EMS Duty Officer may also decide to activate the Medical Health Operational Area Coordinator or MHOAC.

Medical Health Operational Area Coordinator (MHOAC)

The Medical Health Operational Area Coordinator (MHOAC) is a role with a set of duties defined by the California Health and Safety Code Section 1797.153. These regulations task the MHOAC with responsibility for seventeen essential functions related to health and medical needs. During normal operations, the MHOAC is responsible for collaborating with local and regional emergency planners to develop and maintain medical and health disaster plans. In Monterey County, the EMS Agency staffs the MHOAC position and maintains a 24-hour-per-day, 365-days-per-year single point of contact for the program.

When the local Department of Emergency Management (DEM) activates the Emergency Operations Center (EOC) due to a declared emergency, the MHOAC role becomes one of heightened significance. In the event of a local, state, or federal declaration of emergency, the MHOAC performs essential functions within the Operations Branch of the EOC and becomes a primary point of contact for the coordination of medical and health resources between local, regional, and state authorities. Largely concerned with the procurement and distribution of necessary resources during emergencies and disasters, the MHOAC becomes increasingly vital to an effective emergency response the longer an emergency persists.

EMS ADVISORY COMMITTEES



There is one primary advisory committee to the EMS Agency, the Emergency Medical Care Committee (EMCC). The EMCC has two subcommittees, the Medical Advisory Subcommittee (MAC) and the EMS Operations Subcommittee (OPS). These committees are made up of members from various components of the EMS System, and in the case of the EMCC, members of the public. The EMS Agency seeks out the wisdom, knowledge, and experience from those individuals who provide the care, directly manage the response and care provided by their organization, and those who live within Monterey County. Each member provides a unique perspective on EMS issues as a representative of his/her constituency. The varied viewpoints from our committee members help ensure that the EMS Agency makes effective decisions with regards to policies, treatment protocols, and system function. Our committee members play an additional vital role in communicating system changes to other members of their constituencies.

Emergency Medical Care Committee (EMCC)

The EMCC advises on larger EMS System issues and includes members of the public to ensure the needs of the public are accounted for. The EMCC includes participants in the EMS System and members of the public who live throughout the County to ensure representation from all areas of the County. The EMS Agency leverages this broad-based experience for perspective on the EMS System.

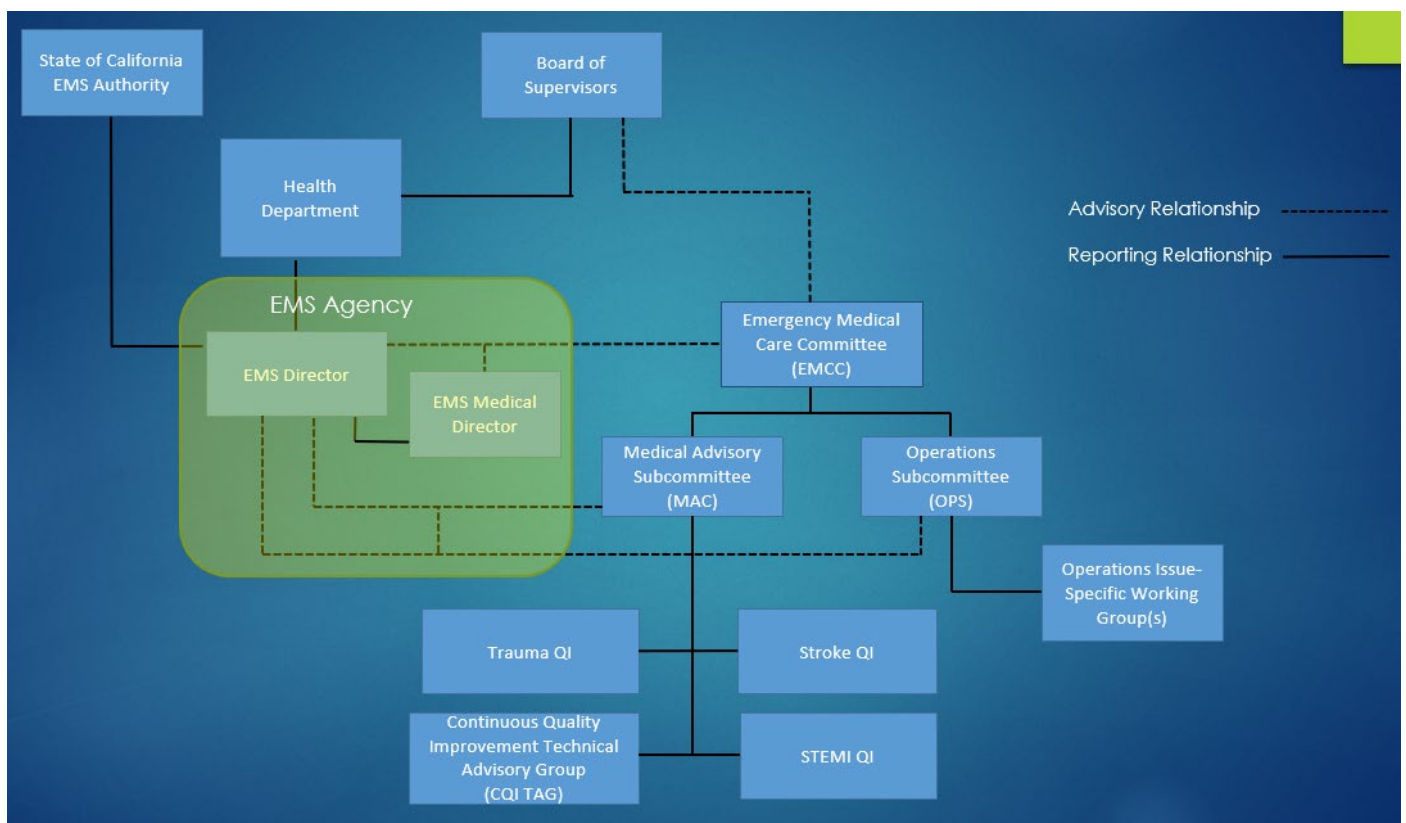
The EMCC receives reports on ambulance contract compliance, EMS System metrics such as ambulance patient offload times, MHOAC activities during disasters or other emergencies such as the COVID-19 pandemic, and response times by the fire-based ambulance providers.

Medical Advisory Subcommittee (MAC)

The MAC has a clinical focus and provides input to the EMS Director, EMS Medical Director, and the EMCC on medical control and other medical issues. This committee includes representatives from all four hospitals in Monterey County, first-responder agencies, both ground and air ambulance providers, and law enforcement. The MAC is where treatment protocols and policies are reviewed and our EMS stakeholders from the field and hospitals are able to provide their viewpoints and advice so that policies and protocols comply with regulations and reflect best practice.

EMS Operations Subcommittee (Ops)

The OPS subcommittee focuses on operational issues, along with system strategy and coordination. This subcommittee is comprised of first-responder agencies, both ground and air ambulance providers, law enforcement, a County 9-1-1 Communications representative, and hospital representatives from the Monterey County EMS System.



2022 EMS SYSTEM DATA

EMS SYSTEM PERSONNEL TRAINING

Training Program Name	Initial Training	Refresher Training
Hartnell College	60	0
Monterey Peninsula College	56	15
TOTAL	116	15

CERTIFICATION AND ACCREDITATION APPLICATIONS PROCESSED

In 2022, the EMS Agency processed a total of 462 applications for EMT certification or Paramedic accreditation. Overall, there was a 22% increase in the number of applications processed by the EMS Agency. EMT applications increased 16% since 2021 while paramedic applications increased 39%.



EMT		Paramedic	
Initial EMT Certification	70	Initial Paramedic Accreditation	23
EMT Certification Renewal	210	Continued Paramedic Accreditation	113
Transfer or Reinstatement of EMT Certification	46	Reinstatement of Paramedic Accreditation	0
Total EMT Applications	326	Total Paramedic Applications	136

EMERGENCY MEDICAL CALL DISPATCH

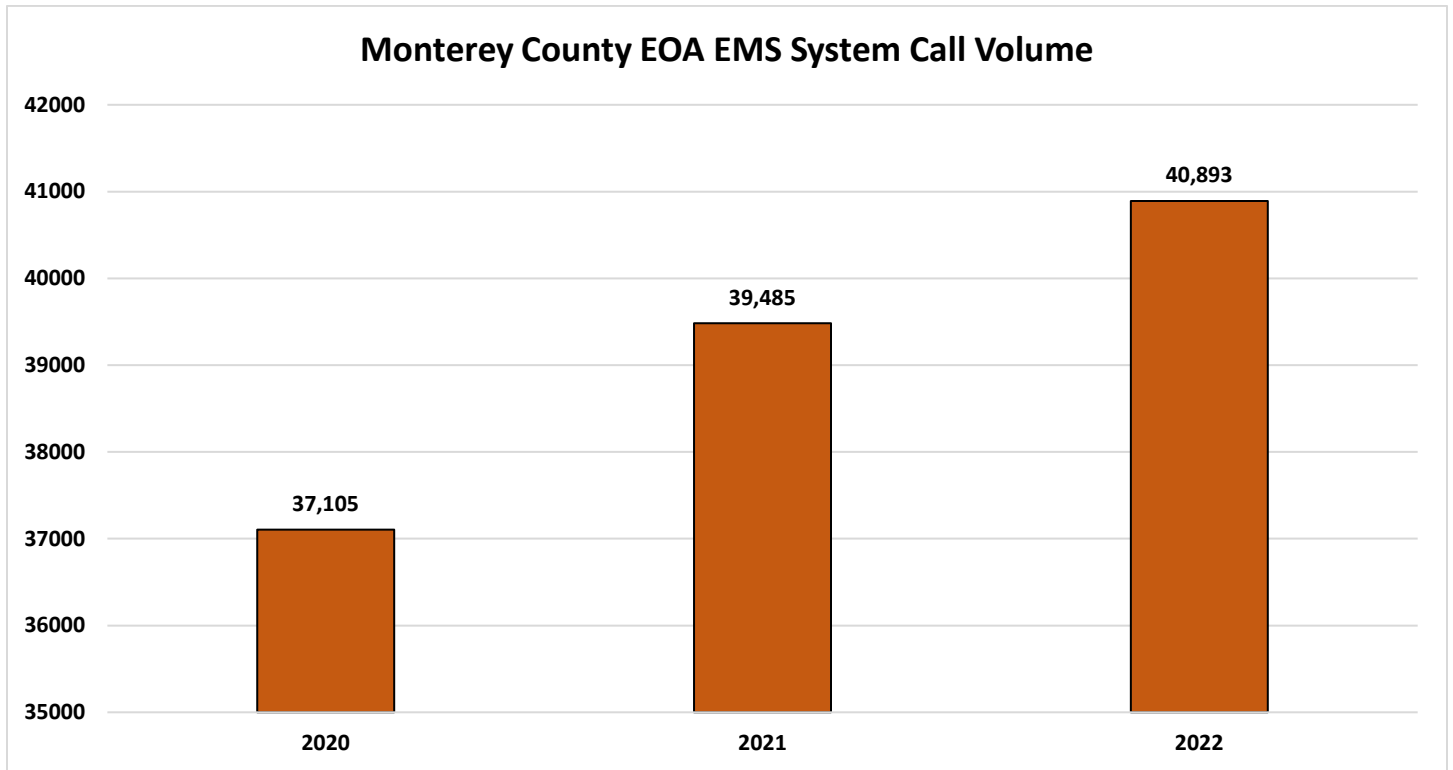
In 2022, the fine-tuning made to ensure the correct call categories were included in the formula by eliminating calls that never go through the call interrogation process resulted in a 4% increase in the number of calls that went through the call interrogation process (EMD'd).

Year	Total Calls	Number of Calls EMD'd	Percentage of Calls EMD'd
2021			68%
2022	33,377	23,904	72%

AMBULANCE SERVICES

Ambulance Call Volume

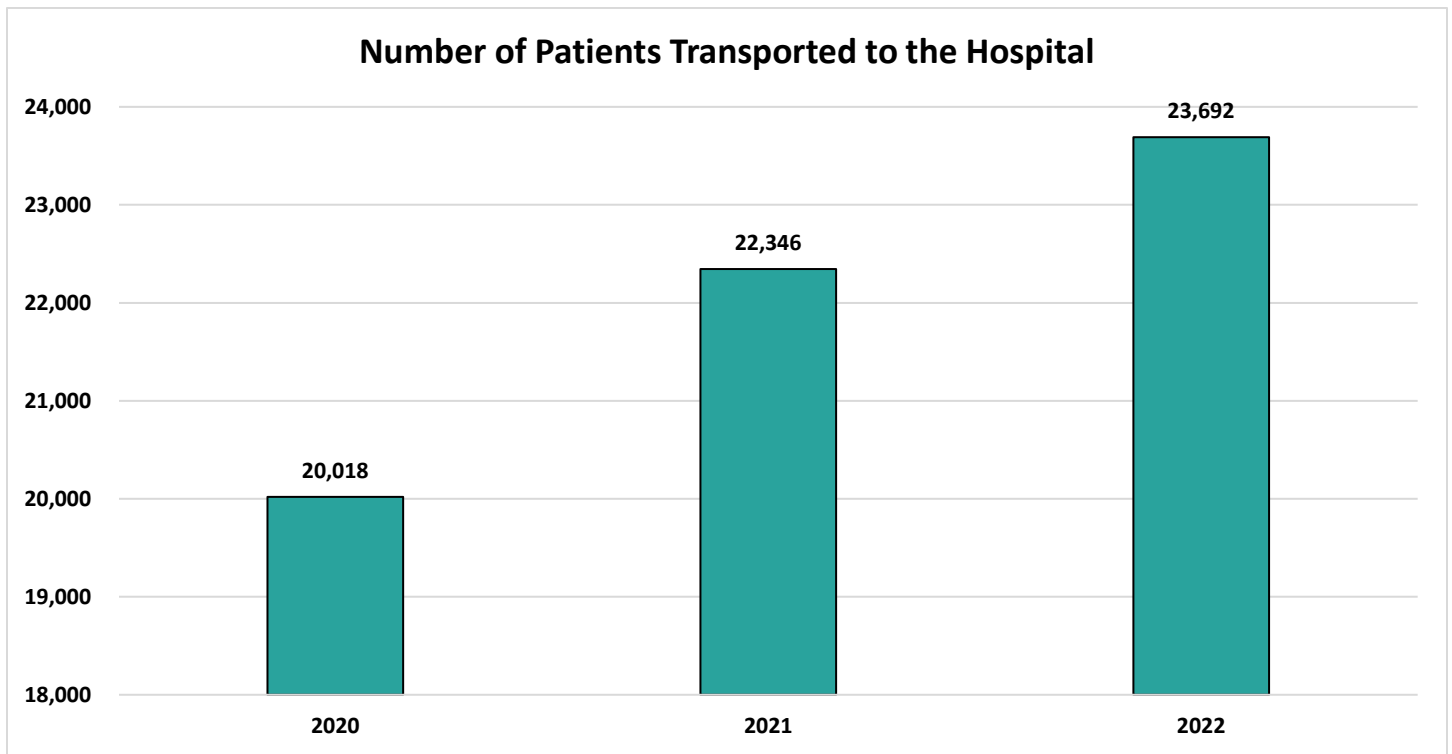
The chart below compares the total number of calls for emergency medical assistance that originated within the EOA during 2020, 2021, and 2022. Call volume has normalized to pre-COVID levels. The chart reflects a 1,408 (3.57%) increase in call volume between 2021 and 2022.



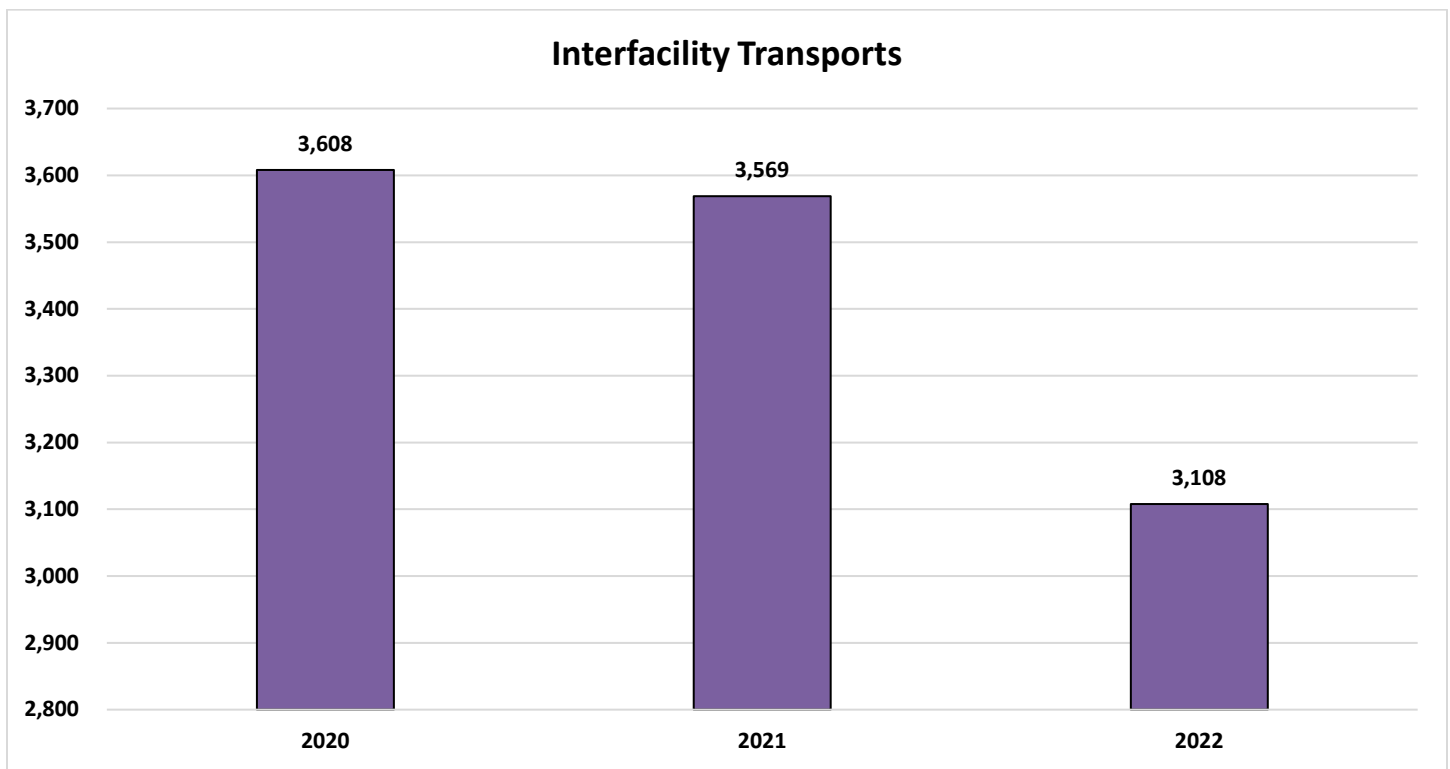
Ambulance Transport Volume

The chart below depicts the number of calls for emergency medical assistance within the EOA that originated through the 9-1-1 system that resulted in patient transport during 2020, 2021, and 2022. Approximately 72.60% of all calls placed to 9-1-1 for medical assistance resulted in the patient being transported to the hospital in 2022.

Similar to the overall call volume, the number of patients transported to the hospital has normalized to pre-COVID levels. The chart below also reflects a 1,346 (6.02%) increase in the number of patients transported between 2021 and 2022.



In addition to transporting patients to hospitals, the ambulance provider transports patients who need continued medical monitoring from one medical facility to another. These types of transports are referred to as Interfacility Transports (IFTs). The chart below includes the number of IFTs in 2020, 2021, and 2022. The data show that there was a 12.92% decrease in the number of IFTs between 2021 and 2022.



QUALITY ASSURANCE AND IMPROVEMENT

In 2022, the EMS Agency received 61 UO reports. These reports led to system-wide changes including improvements related to the processes surrounding the transmission of electrocardiograms (EKGs) from EMS providers to hospitals for patients suspected of having a ST-elevation myocardial infarction (STEMI), communication of upcoming training drills/exercises to ensure the awareness of all potentially impacted stakeholders, and the development of standardized guidelines for addressing those instances when EMS providers encounter challenges related to the transport of behavioral health patients to out-of-county receiving facilities.

POLICY AND PROTOCOL DEVELOPMENT

In 2022, the EMS Agency put into effect 56 new and revised policies and protocols through the annual review process. New policies or protocols included a policy related to approval of paramedic training programs and treatment protocols addressing routine childbirth, resuscitation of newly born infants, drowning and non-fatal drowning, and agitated or combative patients. Areas with significant revision include field trauma triage criteria, end of life care, patient destination guidance, and unusual occurrence reporting.

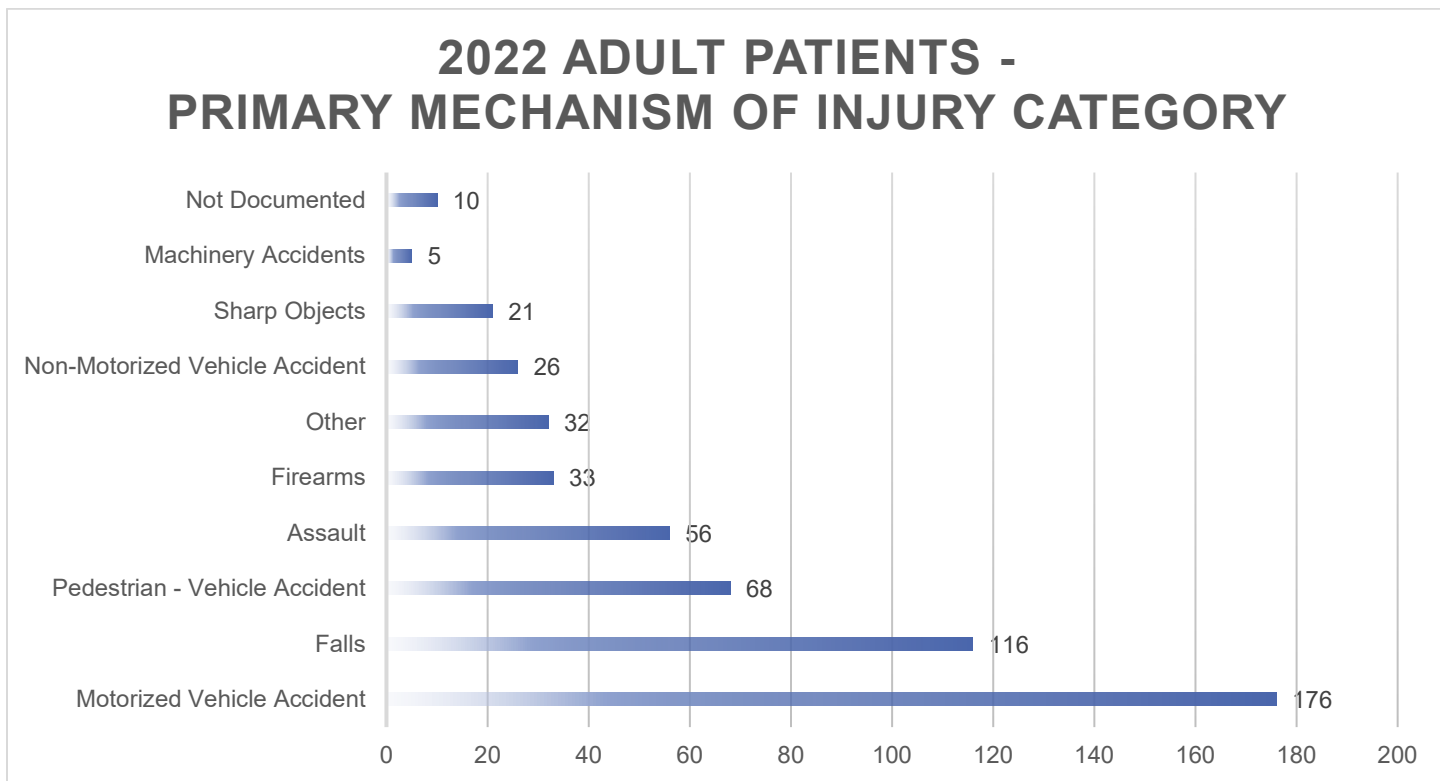
SPECIALTY CARE SYSTEMS

Traumatic injuries constitute one of the most commonly encountered reasons for calls for EMS service. The injuries evaluated by EMS may range from a minor laceration to significant trauma impacting multiple organs or systems within the body. Because of the range of injuries encountered and difficulty evaluating internal injuries, the EMS Agency has adopted the Center for Disease Control

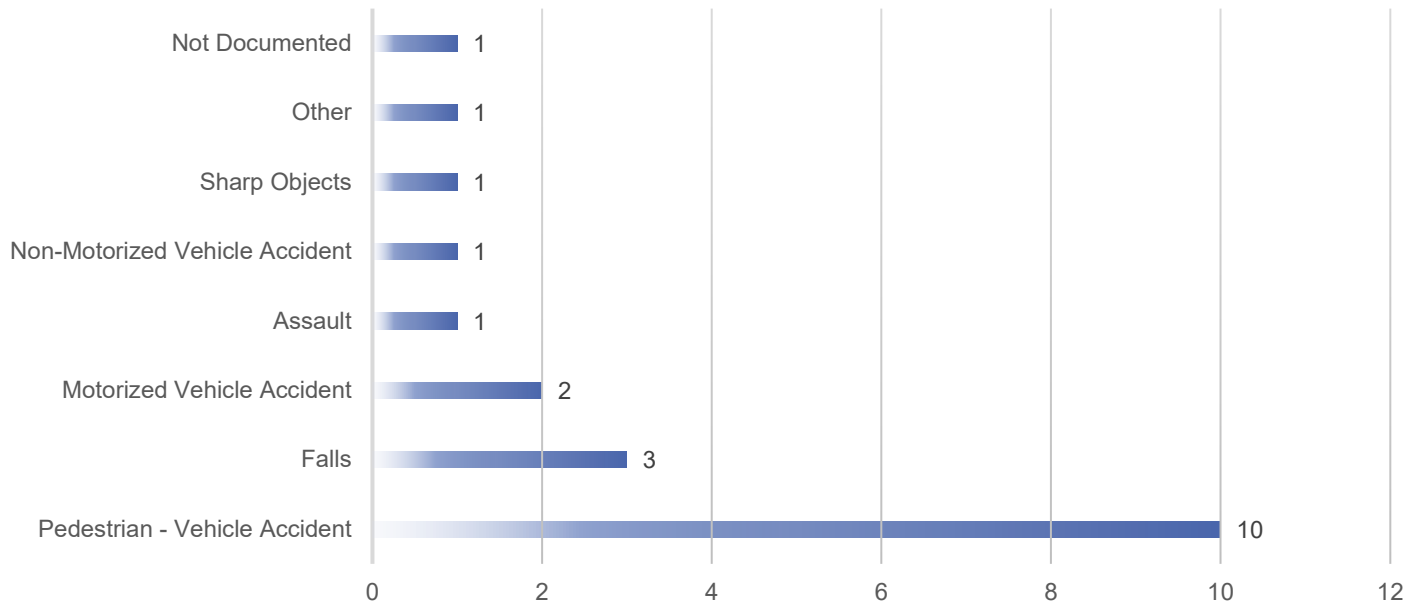
(CDC) Field Trauma Triage Criteria to give EMS providers a framework by which to determine the potential severity of a patient’s injuries. The CDC’s Field Trauma Triage Criteria assigns patients to a different “Step” in an algorithm based on their vital signs, injuries, mechanism of injury, or other factors that may affect the patient’s response to their injuries. This same framework also helps guide EMS providers to select the appropriate destination for patients who have sustained traumatic injuries and thus helps ensure that patients most in need receive the specialized care available at a trauma center.

In 2022, in Monterey County there were a total of 563 patients who were identified as meeting Step 1, 2, and/or 3 of the CDC Field Trauma Triage Criteria. These patients are the potentially most severely injured and likely will benefit from evaluation and treatment at a trauma center. Of these 563 patients, 543 were adults and 20 were pediatric patients (defined as less than 15 years of age). 515 of these patients were transported by EMS with 92% (472 patients) transported to a trauma center.

The mechanism of injury encountered varied between adult and pediatric patients. Adult patients were most likely to need EMS services for injuries resulting from motorized vehicle accidents (32%) followed by falls (21%). In contrast, pediatric patients were most likely to sustain injuries from pedestrian-vehicle accidents (50%) followed by falls (15%). The EMS Agency’s development and tracking of this type of data may help inform the selection of future community education campaigns.



2022 PEDIATRIC PATIENTS - PRIMARY MECHANISM OF INJURY CATEGORY



DISASTER MANAGEMENT

One of the responsibilities of the MHOAC program during COVID has been the procurement and distribution of supplies. The MHOAC has coordinated over 2,600 resource requests since the beginning of the pandemic. Most of these requests included multiple different items. Almost 800 of these requests occurred in 2022. The EMS Agency worked closely with members of the Contracts and Purchasing and Department of Emergency Management teams in coordinating the receipt and delivery of all supplies.

The items in the following table highlight just a small number of the types of items distributed through the MHOAC during 2022. The program has also facilitated the procurement and distribution of laboratory and pharmacy products including medications for the treatment of COVID-19; testing-related supplies and vaccine administration supplies such as needles, syringes, and sharps containers; and temperature-controlled storage/transport devices.



Testing Supplies

Over 200,000 COVID tests



Gloves

Over 360,000 gloves



Gowns

Almost 100,000 gowns



N95 Masks

Over 420,000 N95 masks



Surgical/Procedure Masks

Over 150,000 masks



Hand Sanitizer

Over 6000 gallons of hand sanitizer

FINANCES

County Service Area (CSA) 74

In 1988, Monterey County sponsored a ballot measure for the establishment of the CSA-74 benefit assessment on real property within the county to finance a countywide Paramedic Emergency Medical Services (EMS) program. On March 7, 2000, Monterey County voters approved Measure A, replacing the former CSA-74 benefit assessment with an equivalent special tax, in compliance with Proposition 218. The special tax is collected and administered by the EMS Agency and is used "for the purpose of funding the countywide Paramedic EMS System, which will provide advanced life-saving support to victims in response to emergency calls."

The special tax for CSA 74 is assessed in accordance with the Monterey County Land Use Codes. The basic unit is a single-family dwelling. The current rate per parcel is \$12.00. All other land uses are either a percentage or multiple of that basic unit. Trailer Spaces and Hotel Rooms are calculated differently as there may be many of them on a single parcel.

The break down based on billed parcels for FY21-22 is as follows:

CSA Units	119,729	\$1,712,310
Trailer spaces and hotels rooms	<u>415</u>	<u>\$148,736</u>
Total	120,144	\$1,861,046

In addition to supporting operations of the EMS Agency to comply with its responsibility to oversee the EMS System, CSA-74 funds are also used to supplement the countywide EMS training efforts and equipment acquisition of emergency first responders. The amount disbursed to each participating agency is calculated using the methodology established in the MOU dated June 17, 2011. During FY20-21, the EMS Agency streamlined the expenditure report and fund application form to make it easier for participating agencies to submit expenditure reports and funding requests and the required supporting documents. This resulted in positive feedback and quicker submittal of expenditure reports from the participating agencies during FY21-22.

During FY21-22, the EMS Agency continued to use CSA-74 monies to pay for the costs of the countywide, integrated electronic patient care reporting (ePCR) system to ensure compliance with Assembly Bill 1129, which revised the California Health and Safety Code, Section 1797.227 to require local emergency medical care providers to submit electronic data.

Maddy Fund

In 1989, the Monterey County Board of Supervisors established the County Emergency Medical Services Fund (EMSF) under Section 1797.98 of the Health and Safety Code (Maddy Fund) to provide for collection and distribution of fine proceeds authorized by the California State Legislature adopting of Senate Bill 612 and 1773. These laws allow counties to levy an assessment of \$4.00 per \$10.00 of fines for specified traffic violations.

Pursuant to state law, the money in the fund is disbursed and utilized in the following manner:

- Up to 10% of the proceeds are available to fund the program's administration.
- The remaining 90% compensates health care providers for emergency medical services provided to individuals who do not have healthcare insurance and cannot afford to pay for emergency medical care and for discretionary EMS purposes.

The distribution breakdown of the remaining 90% of the funds is as follows:

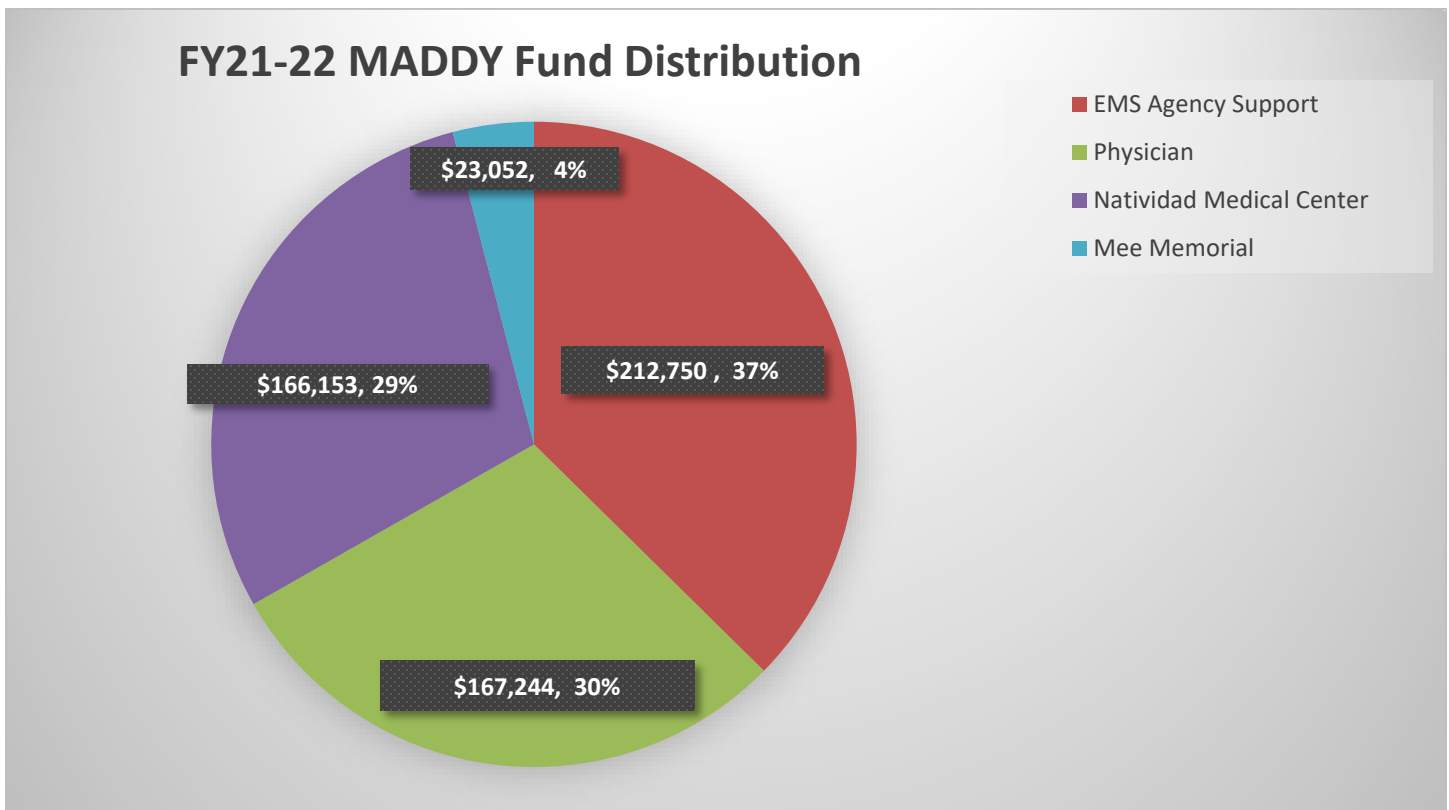
- 58% to reimburse physicians for a portion of unreimbursed indigent services;
- 25% to reimburse hospitals which provide a disproportionate share of unreimbursed emergency medical care and
- 17% for Health Department's Emergency Medical Services Agency discretionary activities.

Maddy funds are distributed on a quarterly basis to physicians and on an annual basis to the hospitals.

Health & Safety Code Section 1797.98(b) (4) also allows each administering agency to maintain a reserve fund of up to 15% of the amount of the fund reimbursable to physicians and hospitals. The purpose of the reserve is to ensure that physicians and hospitals continue to receive reimbursement for a portion of their services. The EMS Agency had not established a reserve. Beginning FY2022-23, the EMS Agency will begin to maintain a reserve in accordance with State law.

In 2019, the EMS Agency began working with providers to transition to a secure, electronic submittal of claims to increase data accuracy. Due to the COVID-19 pandemic, this work was suspended. The EMS Agency's effort to transition providers to a secure, electronic submittal of claims was resumed in the latter part of 2021. The EMS Agency, Health IT, and providers' teams have been working together to complete the transition. However, due to staffing shortages and some technical difficulties, the transition could not be completed in FY21-22. The EMS Agency is confident that the transition will be completed in 2023.

A table showing the disbursement of Maddy Funds in FY21-22 appears below:



It is worth noting that there has been no change in the per parcel rate since FY 2000-01 and therefore, the revenue generated from CSA-74, the EMS Agency's primary source of funding, has not kept up with the continued rise in costs. Applying an average inflation rate of 2.50% per year

between 2001 and today, the per parcel rate today would have increased to \$20.66, or a cumulative 72.15% increase. In addition, we experienced a decrease of approximately \$65,000 in the EMS Agency's share of Maddy revenue in FY2021-22 compared to the revenue generated in FY20-21. As a result, the EMS Agency has been exploring the implementation of fees to generate additional revenue with the goal of maintaining the fiscal stability of the EMS Agency.

2022 ACCOMPLISHMENT HIGHLIGHTS

PARAMEDIC TRAINING PROGRAM

In November 2021, the South Bay Regional Public Safety Training Consortium (SBPSTC) met with the EMS Agency to express their intentions to build a Paramedic Training Program through one of their member colleges, Monterey Peninsula College (MPC) thanks to a grant secured by the City of Monterey Fire Department.

EMS Agency staff worked closely with SBPSTC's Program Director to ensure that SBPSTC's proposed program fulfilled all of the standards contained within Monterey County EMS System Policy #2200 (Paramedic Training Program Approval), California EMS Statutes, and California Code of Regulations, Division 9, Title 22. Approval of a paramedic training program also requires receipt of a Letter of Review (LoR) from the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) prior to the start of classes.

After several months of hard work and dedication to ensure all requirements were met, SBPSTC received their LoR from CoAEMSP and approval from the Monterey County EMS Agency effective June 27, 2022. Approval is for four years and is contingent on SBPSTC continuing to meet statutory, regulatory, and Monterey County EMS policy requirements.

On July 12, 2022, SBPSTC commenced training its first cohort of 15 students.

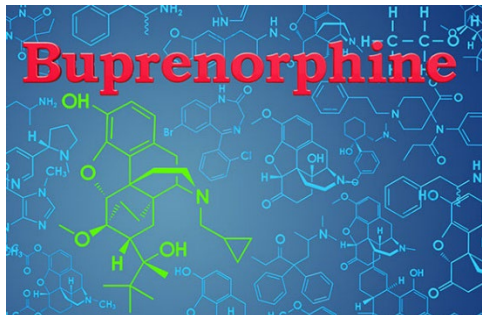
SBPSTC's Paramedic Training Program at MPC is both a Certificate and Associate Degree Program, which allows students to further their educational goals by receiving college credit.

Having a paramedic program within Monterey County will benefit local EMTs who wish to increase their knowledge and skills in order to seek licensure as a paramedic. Local paramedic providers will have a local training option for their staff that will be convenient and reduce logistical barriers from travel to a more distant training program. And, the people of Monterey County will have the benefit of a local source of paramedics to help maintain staffing levels of paramedics with our local ambulance and fire services.



PARAMEDIC ADMINISTRATION OF BUPRENORPHINE – A TRI-COUNTY EFFORT TO REDUCE DEATH FROM OPIOID USE DISORDER (OUD)

The opioid crisis continues to plague our nation so much so that the Secretary of Health and Humans Services renewed the 2017 determination that a public health emergency exists nationwide. In the County of Monterey, CHOMP has led an effort to combat this crisis through the Prescribe Safe Program. The Monterey County EMS Agency has supported this effort by implementing a Narcan Leave Behind program in 2020. In addition, in 2022 the EMS Agency partnered with the Santa Cruz and San Benito County EMS Agencies in a buprenorphine administration project. As a Tri-County initiative, we applied and received CA State EMS Authority (EMSA) authorization to allow our paramedics to administer buprenorphine in the pre-hospital setting as a local optional scope of practice (LOSOP) item.



Buprenorphine is an opioid used to treat OUD as well as acute/chronic pain. It can be used under the tongue (sublingual), in the cheek (buccal), as a skin patch (transdermal), by injection, or as an implant. This Tri-County project will allow local EMS providers to administer buprenorphine by a sublingual film (seen below in Image A).

Opioid withdrawal is a syndrome of distressing physical and psychological symptoms that can occur after stopping illicit opioids or prescription opioid medication. Withdrawal symptoms can also occur after precipitated withdrawal, such as after naloxone administration. Symptoms are painful and unpleasant, often leading patients to relapse. Buprenorphine administration in the prehospital setting provides relief from withdrawal symptoms and establishes a pathway for the patient to receive medication assisted treatment through a designated 'Bridge' program. Key elements of the Bridge program model include low-barrier, immediate access to medication assisted treatment; navigation to ongoing care in the community; and a culture of harm reduction.



Image A. Example of the form of Buprenorphine paramedics can administer

Our tentative timeline for initial implementation is April 15, 2023.

Our Tri-County long-term outcome goal for the first year following implementation is two-fold; one goal focusing on EMS response and transport processes and the other goal focusing on hospital-based outreach and follow-up processes (described as EMS and Substance-Use-Navigator [SUN] Outcome Measures – below).

EMS Outcome Measure A: To offer buprenorphine to 80% of EMS patients in opioid withdrawal who meet criteria under applicable LEMSA protocol(s) by April 1, 2024.

SUN Outcome Measure B: To initiate connection with 80% of patients who are administered buprenorphine in the prehospital setting with a Substance Use Navigator (SUN) who can help the patient with ongoing system navigation and substance use

We strongly believe that initiating buprenorphine treatment in the prehospital setting to individuals experiencing opioid withdrawal or to those who experience a nonfatal opioid overdose provides an opportunity to reduce both all-cause and overdose mortality and morbidity among individuals with Opioid Use Disorder.

EDUCATION AND OUTREACH EFFORTS

Throughout 2022 the EMS Agency undertook a concerted effort to increase both the type and number of education and outreach events. We view these efforts as an opportunity to connect with stakeholders from the various components of the EMS system as well as with the community as a whole.



Educational efforts for our EMS system participants focus on needs identified through our quality improvement programs and initiatives.

Our community outreach efforts focus on preventative health and safety education for citizens of Monterey County. The EMS Agency can serve as a valuable resource for health and safety information while demonstrating our value and commitment to the communities we serve.

Paramedic Preceptor Training

A paramedic preceptor is an experienced paramedic with a desire and passion to train the next generation of paramedics in the out-of-hospital clinical setting. The preceptor is responsible for creating a positive learning environment by educating, supervising, and evaluating the paramedic student. A preceptor should serve as a role model for the attitude, demeanor, professionalism, leadership, communication, teamwork, and critical-thinking capabilities required of a successful paramedic. Monterey County EMS Agency system policy establishes the qualifications and requirements to become a paramedic preceptor.



	<p style="text-align: center;">MONTEREY COUNTY EMS AGENCY PARAMEDIC PRECEPTOR TRAINING AGENDA</p> <p style="text-align: center;">Thursday, September 15, 2022 10:00 A.M. to 12:00 P.M. Monterey County Emergency Medical Services Agency Cayenne Room 1441 Schilling Place, Salinas, CA 93901</p> <p style="text-align: center;">Zoom attendance information is attached</p>	
<p>I. CALL TO ORDER/INTRODUCTIONS (10 min)</p> <p>A. Call to order</p> <p>B. Introductions</p> <p>II. PURPOSE AND GOALS (10 min)</p> <p>A. Purpose</p> <ol style="list-style-type: none">1. Provide information from the EMS Agency useful to preceptors and interns.2. Provide a forum for discussion of topics to assist preceptors in their responsibility to effectively train interns and provide clear and accurate information to the interns.3. To provide a direct conduit of information from the EMS Agency to the preceptors. <p>B. Goals</p> <ol style="list-style-type: none">1. To improve the knowledge and skills of paramedic preceptors.2. To have better prepared new paramedics entering the Monterey County EMS system. <p>III. EMS POLICIES AND PROTOCOLS (20 min)</p> <p>A. Policies</p> <ol style="list-style-type: none">1. 4100-Prehospital Determination of Death2. 4504-Drowning and Non-Fatal Drowning3. 3080-Hospital Communications		

In December 2022, EMS Agency staff and the EMS Medical Director hosted a meeting with Monterey County paramedic preceptors. The purpose of the meeting was for EMS Agency staff to present EMS policies and treatment protocols that were either new or seem to be the source of unexpected actions by paramedics and EMTs. The opportunity to ask questions about the policies and protocols to the EMS Medical Director helped to solidify the information and knowledge of the preceptors. The

preceptors will be able to take this information to their paramedic students and help ensure an accurate understanding of EMS policies and protocols from the beginning of their EMS career.

EMS Agency staff also walked through several areas of patient care record documentation that are often completed inconsistently. The intent of this is to improve patient care documentation and to ensure common understanding of the expectations for patient care reporting. The meeting included discussion on best practices in training paramedic students in the field.

This meeting was well-received by the paramedic preceptors who found the opportunity to hear directly from and ask questions directly to EMS Agency staff and EMS Medical Director beneficial. The next paramedic preceptor meeting is planned for the first half of 2023

EMS Provider Continuing Education

The EMS Agency began to offer continuing education courses to our stakeholders in 2021. These efforts continued and expanded throughout 2022. These continuing education courses provide EMS providers and hospital staff with opportunities to refresh or expand their knowledge base. Additionally, the courses include free continuing education credit that assists our EMS providers to meet the requirements to maintain their certification or license.

In 2022, the EMS Agency organized and offered a course for physicians working at the Base Hospitals throughout Monterey County. Base Hospital physicians provide concurrent medical direction and guidance for EMS providers in the field. Because of this, it is vital that the physician's obtain and maintain a thorough knowledge of EMS system protocols and policies. Dr. John Beuerle, the EMS Agency's Medical Director, prepared and presented the training materials. The training session was recorded, and it is available on the EMS website to allow physicians to refresh their knowledge as needed or to be utilized by new physicians as they begin working in Monterey County.




BASE HOSPITAL PHYSICIAN ORIENTATION

The EMS Agency also partnered with YWCA Monterey County to offer a course for prehospital and hospital care providers addressing the topic of human trafficking awareness, prevention, and recognition. Instructors included law enforcement representatives with special knowledge and training on the topic and a survivor of human trafficking. The course was well attended and provided participants with vital information to incorporate into their day-to-day contacts with patients from throughout our county.

COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN TRAINING FOR MONTEREY COUNTY MEDICAL RESPONDERS AND COMMUNICATIONS CENTER PERSONNEL

August 22, 2022
9:00AM – 12:00PM
Monterey College of Law
Community Justice Center
2620 Colonel Durham Street, Seaside
(Beside the Public Safety Training Center)






Detective Jason Collins has over twenty-four years of experience with Sacramento Police Department, is currently assigned to their Human Trafficking Unit and to the Sacramento FBI Child Exploitation Task Force.

Sergeant Shannon Catalano's has fourteen years of experience with Santa Clara Sheriff's Office as investigator and is currently the Detective Sergeant in the Human Trafficking Unit.

Marjorie Saylor is a survivor of child sexual abuse and teen rape that pushed her into the arms of sexual exploitation in the adult industry which she bravely escaped in July of 2013. Marjorie now takes every opportunity to share her experiences and why she ended up there to help shed light on what is such a major problem within the US.

Register at: <https://tinyurl.com/2f96we52>
3.0 Hours of Continuing Education Credit, Offered free of charge to all provider levels
Monterey County EMS Agency – Continuing Education Provider # 27-000

MONTEREY COUNTY EMS AGENCY CONTINUING EDUCATION CERTIFICATE

Name _____
License/Certification _____


Has completed a course of instruction in
Commercial Sexual Exploitation of Children Training

This course has been approved for 3.0 hour of Continuing Education by an approved California EMS CE Provider and was **Instructor** based.

Instructors: **Detective Jason Collins**
Sergeant Shannon Catalano
Marjorie Saylor

August 22, 2022

Program Director _____ Date _____



Monterey County EMS Agency
1441 Schilling Place
Salinas, CA 95001
California CE Provider #27-0001

This document must be retained for a period of four years.

Community Education and Outreach

In 2022, the EMS Agency collaborated with AMR to increase EMS System visibility and engagement in the community by creating various informational and educational posts to share on social media platforms. Community education through social media is an effective way to reach a larger audience and can help raise awareness about important issues to build a stronger and more informed community. EMS Agency and AMR staff increased their social media presence by following several community-organized Facebook pages to facilitate the re-posting of AMR and/or Agency-created posts. The EMS Agency and AMR develop targeted campaigns throughout the year with a focus on topics that would be most relevant to the community we serve. Some topics of posts created were:

- Flu Recovery Tips
- Drunk Driving Avoidance
- Street Safety

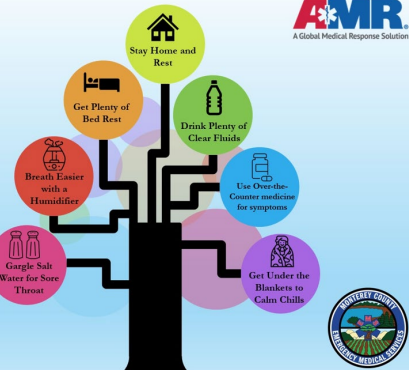


SAFETY TIPS: RECOVERING FROM THE FLU

Recover from the flu with these helpful tips and turn the page after the flu...

The flu is a contagious respiratory illness caused by influenza viruses that infect the nose, throat, and lungs. It can cause mild to severe illness and can sometimes lead to death. Each year, 200,000 people are hospitalized due to complications from the flu.




If you have been diagnosed with the flu, follow your health care provider's recommendations. Most people can recover from the flu at home without medical care. A normal case of the flu usually resolves after three to seven days, although cough and fatigue can persist for more than two weeks.

American Medical Response and the Monterey County EMS Agency offer the following recommendations for flu patients recovering at home, after seeing a health care provider:

Drunk Driving Avoidance Safety Tips

Plenty of people know that drinking and driving don't mix but, unfortunately, many still do it. According to the Centers for Disease Control and Prevention, 29 people die in motor vehicle crashes that involve an alcohol impaired driver each day. Use these tips from American Medical Response and the Monterey County EMS Agency to avoid being one of those 29 people...

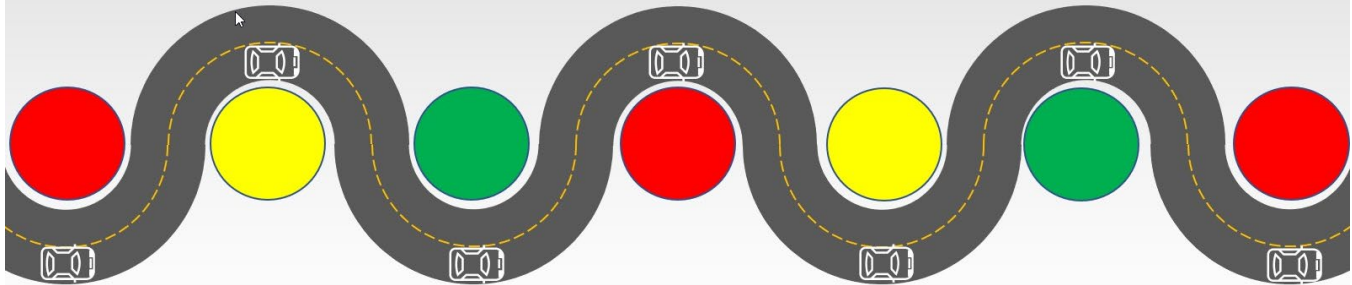




Safety Tips: Street Safety



Playing outside is a fun way for children to get exercise and fresh air, especially when the weather is nice. However, it is important that families practice street safety to avoid preventable accidents. Every year, emergency rooms treat more than 9,000 children for injuries that occurred when they were alone in or near motor vehicles.

American Medical Response and the Monterey County EMS Agency would like you to remember to adhere to the following street safety guidelines:



Supervise Outdoor Play.

Accompany children when they are playing outside and walking across or near roads.

Look Both Ways

Teach children to look left and right before stepping into the street and remind them to continue looking

Check The Driveways

Before pulling out of a driveway, walk all the way around your car to ensure that no children are nearby.

Set a Good Example

Put down phones or any other distracting devices when walking around cars.

In addition, the EMS Agency participates in community events such as National Night Out, an annual community-building event that encourages the community to come out and get to know one another, build camaraderie, and have the opportunity to communicate with law enforcement agencies and other government agencies that participate. EMS Agency staff attended the event held in August. The goal is to engage with community members, answer questions, educate the community on various topic related to emergency medicals services such as when to call 9-1-1, what to do during a medical emergency, how the EMS system works, and to provide prevention tips.

LOOKING AHEAD

While the EMS system achieved many goals in 2022, the EMS system continues to face challenges. The EMS Agency's responsibility is to implement solutions to these challenges that address the needs of the patients and stakeholders without raising cost to the users of the system.

One of these challenges is finding a way to meet the needs of behavioral health patients who require transport to an out-of-county facility for continued care. This is not a challenge unique to the County of Monterey. In the County of Monterey, the current ambulance agreement requires AMR to transport these patients, regardless of where the behavioral health facility is located. The number of facilities that provide continued care for behavioral health patients has decreased dramatically since the current agreement went into effect in 2010. At the same time, the numbers of behavioral health patients have increased. With these changes, hospitals find it more difficult to secure placement for patients. In addition, ambulance service providers are having to travel greater distances to deliver patients to appropriate facilities. The farther away the receiving facility is, the more taxing transporting the patient becomes on the system because ambulances are taken out of the EMS system for an extended period. The longer a patient must travel in an ambulance increases safety risks for the patients and the ambulance crews.

Critical Care Transport (CCT) services for critically injured patients who need to be transported between medical care facilities present another challenge. In the County of Monterey, the current ambulance service agreement requires AMR to maintain a Registered Nurse (RN) on-call 24/7 to accompany and provide medical care to critically ill or injured patients who require transport to the appropriate medical facility. With only one RN available, the challenges arise when there may be more than one critically injured patient in needs of transport. The EMS Agency is exploring ways to expand capabilities to ensure patients receive the care they need when they need it.

As reported in the Finance section of this report, the CSA-74 special tax, which is the primary funding source of the EMS Agency, has not changed since FY 2000-01 and therefore, the revenue generated has not kept up with the continued rise in costs. A projection using a conservative average inflation rate of 2.50% per year between 2001 and today, indicates that the per parcel rate today should have increased to \$20.66, or a cumulative 72.15% increase. We also reported that we experienced a decrease of approximately \$65,000 in the EMS Agency's share of Maddy revenue in FY2021-22 compared to the revenue generated in FY2020-21. As a result, the EMS Agency has been exploring the implementation of fees to generate additional revenue with the goal of maintaining the fiscal stability of the EMS Agency. In 2023, the EMS Agency plans to bring for the Board of Supervisor's approval a schedule of fees to recoup some of the cost for the services we provide.

Our goals for 2023 include to continue to strengthen our relationship with stakeholders, establish new partnerships for more efficient use of resources, "add more tools to our toolbox" to better serve the needs of patients and stakeholders of Monterey County. The EMS Agency will continue to work with stakeholders to explore ways to address the needs of behavioral health and critically ill and injured patients while addressing the challenges that meeting these patients present to the EMS system. We will also continue to explore ways to expand the services available in Monterey County, particularly to address equity issues as it relates to south county. Lastly, our goal is to see full implementation of the bi-directional Health Data Exchange (HDE), a key tool to provide clinical outcome data to the EMS system and thus allow us the opportunity to further improve patient care and experience and the EMS system.

CONCLUSION

The EMS Agency would like to thank the Board of Supervisors for the opportunity to present the 2022 EMS Annual Report to highlight some of the work the team, along with our agency partners, achieved during 2022, bring attention to of the challenges our system faces today, and outline our goals for 2023. We are proud of what we have accomplished, grateful of the relationship with our partner agencies, and honored and committed to serving our community.



**Monterey County EMS Agency
EMERGENCY MEDICAL CARE COMMITTEE (EMCC)**

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Advisory Committee Meeting Time/Location: The second (2nd) Wednesday of each odd month from 10:30 AM to 12:00 PM. All meetings in 2022 were held at 1441 Schilling Place, Salinas with attendance also available via Zoom.

Chair: Tino Arellano (January 2022 to March 2022), Tina Nieto (March 2022 to July 2022), Jim Langborg (July 2022 to December 2022).

Vice Chair: Tina Nieto (January 2022 to March 2022), Vacant (March 2022 to July 2022), Paul Wood (July 2022 to December 2022).

Reporting Period: January 1, 2022 to December 31, 2022.

This report in conjunction with the Monterey County Emergency Medical Services (EMS) Agency's 2022 Annual Report to the Board of Supervisors is intended to fulfill the annual reporting requirements for emergency medical care committees established in California Health and Safety Code Section 1797.276.

I. Purpose:

The Monterey County Board of Supervisors formally established the membership, purpose, structure, and rules of the EMCC through the Bylaws of the EMCC, Board Resolution Number 10-069, on April 6, 2010.

The EMCC advises the Board of Supervisors, and the EMS Director on EMS system issues, ensures that all EMS constituents are actively engaged in the decisions regarding EMS system resources, and provides input on the development and implementation of the County's EMS policies, protocols, and procedures.

II. Membership:

The EMCC is a multidisciplinary committee with membership consisting of representation of specific Emergency Medical Services (EMS) stakeholder groups and organizations including three (3) citizen representatives from throughout Monterey County. There are twelve (12) authorized, voting seats, and two (2) non-voting, ex-officio seats on the advisory committee.

A representative from a fire-protection agency that provides prehospital EMS at the Basic Life Support level, nominated by the Monterey County Fire Chiefs' Association.	Chair Jim Langborg, Chief, Greenfield Fire Department
A representative from a fire-protection agency that provides prehospital EMS at the Advanced Life Support level, nominated by the Monterey County Fire Chiefs' Association.	Samuel Klemek, Chief, Salinas Fire Department
A representative from a law enforcement agency that provides prehospital EMS, nominated by the Monterey County Police Chief's Association.	Tina Nieto, Chief, Marina Police Department

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A representative of hospital administration nominated by the local Hospital Council.	Carla Spencer, Director of Emergency Services, Salinas Valley Health
A representative of City Managers nominated by the Monterey County City Managers' Association.	Vice Chair Paul Wood, City Manager, City of Greenfield
A representative nominated by the Monterey County Resource Management Agency that works in Parks Operations.	Jon Anthony, Park Ranger Supervisor, Monterey County Resource Management Agency
Three citizen representatives nominated by the EMS Director with attention to appropriate geographic representation.	Harry Robbins Luz Garcia, PA-C Jodi Schaffer
An emergency physician nominated by the Medical Advisory Subcommittee.	Dr. Nikolas Greenson, Medical Director, Salinas Valley Health
A Monterey County accredited EMT-Paramedic nominated by the EMS Director.	VACANT
A representative from management of the Monterey County EOA ambulance contractor	William Hiller, American Medical Response
Monterey County Office of Emergency Services Manager (ex-officio).	Gerry Malais
EMS Director (ex-officio).	Teresa Rios

III. Member Training and Orientation:

- Form 700 – Statement of Economic Interests.
- Ethics.
- Ralph M. Brown Act (Brown Act) Requirements.
- AB 361 – Amendments to the Brown Act permitting legislative bodies to meet virtually during the COVID-19 public health emergency when certain conditions are met.
- AB 389 – Establishing requirements related to items to consider when contracting for the provision of emergency ambulance services.
- Monterey County EMS System Policy 1020 – EMS Advisory Committees.
- Robert's Rules of Order.

IV. Subcommittees and Working Groups:

A. Medical Advisory Subcommittee (MAC)

The Medical Advisory Subcommittee provides input to the EMS Director, EMS Medical Director, and the EMCC on medical control and other medical issues.

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EMERGENCY MEDICAL CARE COMMITTEE (EMCC)**

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B. Operations Subcommittee (OPS)

The Operations Subcommittee provides input to the EMS Director, EMS Medical Director, and the EMCC on operational issues involving pre-hospital and emergency medical services.

C. Contract Compliance Working Group (CCWG)

A Contract Compliance Working Group (CCWG) comprised of members of EMCC including citizens representatives, a local emergency department physician, AMR leadership, and EMS Agency staff meets every two months to monitor AMR's performance by reviewing a wide range of metrics to maintain a system that delivers vital pre-hospital emergency medical services to the community.

Citizen Representative	Harry Robbins
Citizen Representative	Jodi Schaffer
Citizen Representative	Luz Garcia
Emergency Department Physicians	Dr. Nikolas Greenson, Salinas Valley Health
American Medical Response (AMR)	Michael Esslinger
American Medical Response (AMR)	William Hiller
American Medical Response (AMR)	Sandra Flores
American Medical Response (AMR)	Benjamin Hitchcock
American Medical Response (AMR)	Rachel Kneeland
American Medical Response (AMR)	Angelica Lopez Rios

Some areas of focus for the CCWG in 2022 included:

- Quarterly Priority 1 Drill-down to monitor late responses to monitor Priority 1 calls with extended response times. The data reviewed includes: call disposition, the reason, frequency, and location of extended response as well as how "late" each response was.
- Interfacility Transfer (IFT) Review to monitor types of transfers (Advanced Life Support (ALS), Basic Life Support (BLS), Behavioral Health, Critical Care Transport (CCT), and in County vs. Out of County (OOC)) and where the transfer originated from.
- South County Medical Response Review to delve further into response times in the four South County jurisdictions by reviewing the percentage of late and compliant calls in each jurisdiction.

The CCWG reviewed these areas primarily to see if there were actual EMS system problems that the EMS Agency or AMR needed to address. At EMCC and other committee meetings, committee members sometimes make anecdotal reports of systemic problems. However, after review, we found these concerns to be one-off or unique situation and not indicative of systemic problems.

V. Standing Reports Received:

The EMCC regularly receives reports related to the following items:

- American Medical Response (AMR) response time performance.
- AMR dispatch time performance.
- AMR Medical Priority Dispatch System (MPDS) performance.

**Monterey County EMS Agency
EMERGENCY MEDICAL CARE COMMITTEE (EMCC)**

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- Fire-Based Transport Providers response time performance.
- 800 MHz radio communications testing.
- ReddiNet Mass Casualty Incident (MCI) testing.

VI. Activities:

The EMCC, over five (5) regular meetings in the past year (the July meeting of the EMCC was cancelled in 2022) and one special joint meeting with the MAC, was involved in or kept its membership informed regarding the following items:

- Activities of the MAC, OPS, and CCWG.
- Review members for appointment to the MAC and OPS groups.
- Monterey County EMS System Policies, Procedures, and Treatment Guidelines.
- Review of ambulance response times within the South County.
- Medical Health Operational Area Coordinator (MHOAC) activities.
- EMS System quality improvement (QI) activities.
- Adoption and implementation of the PulsePoint Automated External Defibrillator (AED) registry to record and share AED location information.
- AB 361 remote meeting requirements and determinations.
- The 2021 EMS Agency Annual Report to the Board of Supervisors.
- Implementation of and changes to the Local Optional Scope of Practice (LOSOP) program to permit testing for COVID-19 and administration of the COVID-19 vaccine by EMS personnel.
- The EMS Agency application for and subsequent award of a grant to offset expenses related to implementation of a vaccination program for COVID-19 including the subsequent distribution to service providers throughout Monterey County.
- Negotiation and execution of Amendment 11 to the Advanced Life Support (ALS) Service Agreement between Monterey County and AMR.
- Program design and implementation of the Emergency Triage, Treat, and Transport (ET3) model.
- Additions to the staff of the EMS Agency.
- Program design and implementation of a LOSOP to permit EMS personnel to administer Buprenorphine to patients experiencing symptoms of opioid withdrawal.
- Implementation of an agreement with the American Heart Association (AHA) permitting access to their Get With The Guidelines (GWTG) database containing information from Salinas Valley Health and Community Hospital of the Monterey Peninsula related to the care of patients experiencing Strokes or ST-Elevation Myocardial Infarctions (STEMIs).
- The Fort Hunter Liggett Fire Department's (FHLFD's) change in service levels provided.
- Implementation of a Paramedic Training Program in Monterey County.
- An EMS Agency report regarding unintended impacts on the EMS System from an active shooter exercise held by the Presidio of Monterey and Defense Language Institute Foreign Language Center.
- Disbursement of County Service Area (CSA)-74 Funds.

**Monterey County EMS Agency
EMERGENCY MEDICAL CARE COMMITTEE (EMCC)**

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VII. Accomplishments:

- Endorsement of the following items or programs brought forth by EMS Agency staff:
 - Multiple committee members for the MAC and OPS groups.
 - Adoption and implementation of the PulsePoint AED registry.
 - The 2021 EMS Agency Annual Report to the Board of Supervisors.
 - Implementation of the ET3 Model.
 - Implementation of a program permitting paramedics to administer Buprenorphine.



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Animal Services Behavioral Health Clinic Services
Emergency Medical Services Environmental Health Public Administrator/Public Guardian Public Health

Date: May 10, 2023
To: Monterey County Emergency Medical Care Committee (EMCC)
From: Monterey County EMS Agency
Regarding: Medical Advisory Subcommittee (MAC) Appointments

EMS Policy 1020 states the Monterey County EMS Director appoints members to the MAC in consultation with the EMCC.

It is recommended that the EMCC concur with the EMS Director and endorse the following MAC appointments:

1. **Spencer Harnett**, Paramedic/FTO – AMR Monterey as a paramedic, representing the Primary ALS Ambulance Service Provider.

Bio: Mr. Spencer Harnett is a paramedic, preceptor, FTO, and alternate supervisor with AMR Monterey. He is currently the Chief Shop Steward for IAFF4513. Mr. Harnett is interested in participating in some of the county meetings and believes he would provide value to the committees due to his extensive experience and varied knowledge within the local EMS system. Mr. Harnett received his B.A. cum laude from CSUMB in 2019 with a major in Collaborative Health and Human Services, concentrating in public administration & non-profit management and community health. Additionally, Mr. Harnett obtained a minor in Spanish Language and Hispanic Cultures. In addition to said academic achievements, Mr. Harnett has lived and worked in Monterey County for close to 8 years. *“I feel as though I am connected with the county, and I am aware of what the citizens need from an EMS agency”*.

2. **Philip Brown**, Registered Nurse (RN) representing Community Hospital of the Monterey Peninsula (CHOMP). Mr. Brown has recently been announced as the Assistant Emergency Department/CDU Director and Base Hospital Coordinator.

Bio: Mr. Brown received his BSN from Fresno State University followed by his MBA from Louisiana State University. Mr. Brown holds nursing credentials in California, South Carolina, and Georgia. Mr. Brown has numerous years of experience in the acute care setting, most recently serving as the Director of Emergency Services, Stroke & Emergency Preparedness Coordinator, and the Nursing Administration House Supervisor for Sonoma Valley Hospital. Mr. Brown is a member of the Emergency Nurses Association Member and American College of Healthcare Executives.

It is recommended that the EMCC concur with the EMS Director and endorse the following MAC alternate appointments:

1. **Christy Soboleski**, RN representing CHOMP. Ms. Soboleski is the current Emergency Department/CDU Director and also serves as the Base Hospital Coordinator. Ms. Soboleski is currently the primary MAC representative and would like to support Phillip Brown as an alternate member.

EMS Policy 1020 further states that the term of office for each MAC member is for a period of two (2) years, commencing on the first of July. The term of the following MAC members and alternates is set to expire on June 30, 2022.

It is recommended that the EMCC concur with the EMS Director and endorse the following MAC appointments as they continue their membership as primary or alternate for another term effective 07/01/2023 until 06/30/2025:

Constituency	Primary Member	Alternate Member
CHOMP	Dr. Michelle Kalinski	Dr. Reb Close
Mee Memorial Hospital	Dr. Noah Hawthorne	Dr. Bryan Darger
Salinas Valley Health	Dr. Nikolas Greenson	-
CHOMP	Philip Brown	Christy Soboleski
Mee Memorial Hospital	Jamie Tovar	Michelle Villanueva
Natividad	Cassandra Caldera	Chelsi Mettler

*Dr. Orchard and Dr. Klick, both of whom represent Natividad have their annual department meeting on May 9th where a decision will be made regarding future MAC nominations.



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Animal Services Behavioral Health Clinic Services
Emergency Medical Services Environmental Health Public Administrator/Public Guardian Public Health

Date: May 10, 2023
To: Monterey County Emergency Medical Care Committee (EMCC)
From: Monterey County EMS Agency
Regarding: EMS Operations Committee Appointments

EMS Policy 1020 states the Monterey County EMS Director appoints members to the EMS Operations Committee in consultation with the EMCC.

It is recommended that the EMCC concur with the EMS Director and endorse the following EMS Operations Committee appointments:

1. **Spencer Harnett**, Paramedic/FTO – AMR Monterey as a paramedic, representing the Primary ALS Ambulance Service Provider.

Bio: Mr. Spencer Harnett is a paramedic, preceptor, FTO, and alternate supervisor with AMR Monterey. He is currently the Chief Shop Steward for IAFF4513. Mr. Harnett is interested in participating in some of the county meetings and believes he would provide value to the committees due to his extensive experience and varied knowledge within the local EMS system. Mr. Harnett received his B.A. cum laude from CSUMB in 2019 with a major in Collaborative Health and Human Services, concentrating in public administration & non-profit management and community health. Additionally, Mr. Harnett obtained a minor in Spanish Language and Hispanic Cultures. In addition to said academic achievements, Mr. Harnett has lived and worked in Monterey County for close to 8 years. *“I feel as though I am connected with the county, and I am aware of what the citizens need from an EMS agency”*.



COUNTY OF MONTEREY HEALTH DEPARTMENT

Elsa Jimenez, Director of Health

Administration Animal Services Behavioral Health Clinic Services
Emergency Medical Services Environmental Health Public Administrator/Public Guardian Public Health

Date: May 10, 2023
To: Emergency Medical Care Committee (EMCC)
From: Steve Brooks, EMS Analyst
Regarding: EMS Training Program Oversight

The Monterey County EMS Agency is charged under California Health and Safety Code sections 1797.206 and 1797.208 with oversight of EMS training programs conducted in Monterey County. EMS training programs for which the EMS Agency has oversight includes:

1. Paramedic training programs
2. EMT-Basic training programs
3. Public Safety First Aid training programs
4. EMS Continuing Education (CE) providers

A paramedic training program conducted at the MPC Public Safety Training Center through the South Bay Regional Public Safety Training Consortium was approved to begin instruction in 2022. The first cohort is beginning their field training as paramedic interns. The second cohort is getting started with their didactic training with a third cohort planned to start in November 2023. The program will undergo an accreditation review in 2024.

There are two EMT training programs in Monterey County with one at Hartnell College and the other at MPC. Both programs will be reviewed for continued approval by the EMS Agency in 2024. The review at Hartnell has been completed with Hartnell receiving approval to April 30, 2027. The EMT program at Hartnell College was found to meet all statutory, regulatory, and Monterey County EMS policy requirements. The MPC EMT training program review is scheduled for May 25, 2023.

Monterey County has multiple EMS CE providers. The EMS Agency monitors and reviews the CE providers at least every four years. The chart below shows the CE providers and their approval expiration dates. The EMS Agency will have multiple EMS CE providers subject to the four (4) year review in 2023.

CE Provider #	CE Provider Name	Effective Date	Expiration Date-	Last Review Date	Updated Expiration Date	Review Results
27-0001	Monterey County EMA Agency					
27-0002	CHOMP	11/28/2006	5/31/2020	7/10/2019	7/31/2023	No deficiencies. CE certificates were revised.
27-0003	Natividad	9/1/2010	8/31/2022	8/23/2018	8/31/2026	No deficiencies. CE certificates were revised. Course roster variations has been standardized.
27-0004	SVMH	7/19/2013	12/31/2020	7/2/2019	7/31/2023	No deficiencies.
27-0013	Jennifer Carlquist	8/6/2021	8/31/2025	New	N/A	N/A
27-0014	MCRFD	6/16/2004	2/29/2020	7/17/2019	7/31/2023	No deficiencies.
27-0015	Monterey Peninsula Unified	8/13/2004	3/31/2020	5/15/2019	3/31/2020	Will not renew approval.
27-0018	Hartnell College	3/15/2005	11/30/2020	4/11/2023	4/30/2027	No deficiencies.
27-0019	Mid-Coast Fire Brigade	6/20/2005	2/29/2020	7/17/2019	7/31/2023	No deficiencies.
27-0020	Monterey Fire Dept.	9/27/2005	2/29/2020	6/10/2019	6/30/2023	No deficiencies.
27-0022	Rescue Instruction Operations	4/25/2006	1/31/2020	10/31/2019	10/31/2023	No deficiencies.
27-0027	Monterey Peninsula College	9/1/2012	8/31/2020	5/1/2019	5/31/2023	No deficiencies.
27-0029	North Monterey County Fire District	2/1/2011	1/31/2021	7/9/2019	7/31/2023	No deficiencies. Will update curriculum from the National Standard Curriculum.
27-0030	Seaside FD	2/1/2011	1/31/2021	10/17/2019	10/31/2023	Will provide copy of updated CE certificate.
27-0031	FHLFD	7/1/2009	6/30/2021	5/17/2022	5/31/2026	Program reviewed as part of the paramedic audit. Expiration date extended.
27-0035	Cachagua VFD	10/16/2017	10/31/2021	6/30/2019	7/31/2023	No deficiencies.

CE Provider #	CE Provider Name	Effective Date	Expiration Date-	Last Review Date	Updated Expiration Date	Review Results
27-0037	Presidio of Monterey FD	9/22/2017	9/30/2021	7/15/2019	7/31/2023	No deficiencies.
27-0038	Big Sur Fire	2/1/2018	2/28/2022	5/26/2022	5/31/2026	New program.
27-0039	AMR	5/30/2018	5/31/2020	5/26/2022	5/31/2026	New program.
27-0040	Medics for Life	6/18/2018	6/30/2022	New-6/18/2018	6/30/2026	New program.
27-0041	Salinas FD	12/10/2018	12/31/2022	New-12/10/2018	12/31/2026	New program.
27-0042	Trifecta Responder Training	4/3/2019	4/30/2023	New-4/3/2019	4/30/2023	New program.
27-0043	Health Education Services Inc.	9/2/2021	9/30/2025	New	N/A	New program.

The EMS Agency is also charged with approval of providers of Public Safety First Aid courses that are intended to meet the requirements for public safety first aid as described in California Code of Regulations, Title 22. A broad range of training levels are included as meeting the requirements from basic first aid and CPR training to paramedic training. As EMT and paramedic training programs have separate and specific requirements outlined in Title 22, the EMS Agency is responsible for developing the standards for first aid to Emergency Medical Responder (EMR) to ensure they meet the requirements under Title 22. The EMS Agency has approved a provider of public safety first aid training in 2022 to join with previously approved providers of EMR training.

EMR training has been approved for:

1. Medics for Life
2. Mid-Coast Fire Brigade
3. Monterey County Regional Fire District
4. Rescue Instruction Operations