



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE AGENDA



Wednesday, September 13, 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. July 12, 2023 EMCC Meeting Minutes-*Approval*

IV. REPORTS

A. Medical Advisory Subcommittee (MAC): July 12, 2023 Minutes tabled.

a. EMS Quality Improvement Program Highlights (Blake Andersen)

B. Operations Subcommittee (Ops): July 12, 2023 Draft Meeting Minutes.

C. EMS Agency report (Teresa Rios)

D. MHOAC Activities (Debra Hopgood)

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-(3/23)-(Steve Brooks) *Report*
 - 1. Membership renewal and appointments
 - 2. EMCC member attendance review and consideration of failure to meet attendance standard (S. Brooks) *Action*
- B. Monterey County Emergency Medical Services Ordinance Revision (9/22)-(Debra Hopgood) *Report*
- C. Modifications to the Structure of the EMS Agency's Advisory Committees (11/22)-(Debra Hopgood) *Action*
- D. EMCC Bylaws Revision (Debra Hopgood) *Action*

VII. NEW BUSINESS

- A. Medical Advisory Subcommittee Endorsements by EMCC (Debra Hopgood) *Action*
 - 1. Chris Bourquin-Law Chiefs, alternate
- B. Health Data Exchange (HDE) (Blake Andersen) *Report*
- C. ET-3 program discontinuation (Blake Andersen) *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. None

IX. NEXT MEETING

The next regularly scheduled EMCC meeting is scheduled for Wednesday, November 8, 2023 at 10:30 a.m.

X. ADJOURNMENT

Attachments:

- 1. Zoom Meeting Information
- 2. EMCC July 12, 2023 draft meeting minutes
- 3. EMS Operations Committee July 12, 2023 draft meeting minutes
- 4. MHOAC staff report

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MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE AGENDA



5. 800MHZ radio testing report
6. ReddiNet MCI drill report
7. Contract Compliance report
8. Fire-based ambulance provider report
9. EMCC member attendance 2022-2023
10. EMS Committee Structure-staff report
11. EMS Policy #1020 EMS Advisory Committees draft
12. EMCC bylaws
13. MAC appointments report
14. Health Data Exchange (HDE) Staff report
15. ET-3 Program-staff 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.

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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, September 13, 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, July 12, 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 10:30 a.m. and roll call was taken. A quorum was present.
	Will Hiller	Ambulance Contractor	X		
	Jeff Watkins	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		
	Spencer Harnett	EMT/Paramedic	X		
	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		
	Kelsey Scanlon	Dept. of Emergency Mngmt		X	
	LeeAnn Magoski	Emergency Communications		X	
	Alternate Members	Representing	Present	Absent	
	Michael Esslinger	911 EOA Ambulance Provider	X		
	Mike DeLeo	ALS Fire	X		
	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	X		
		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		X	
	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
	Phillip Brown Rachel Kneeland Jeff Horner Ben Hitchcock Ryan Alexander Justin Reyes Paul Blaha Sam Balesteri Paul Wood Nicholas Hall Chris Montera	
II. PUBLIC COMMENT	A. None.	
III. APPROVAL OF PAST EMCC MEETING MINUTES		
A. May 10, 2023 EMCC Meeting Minutes	A. Motion to approve the Meeting Minutes of the May 10, 2023 meeting by H. Robins. Second by J. Schaffer. Motion passed.	A. Minutes approved.
IV. REPORTS		
A. May 10, 2023 Medical Advisory Subcommittee (MAC): Draft Meeting Minutes	A. MAC agenda is included in the agenda packet. CQI-TAG report is also in the agenda packet. STEMI QI did not meet. Stroke QI met to look at the stroke system from a patient point of view, scene time, and time to CT scan. Trauma QI met and reviewed trends in trauma care, minimizing	A. As noted



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
<p>and QI report. (Jesse Allured)</p> <p>B. Operations Subcommittee (Ops):</p> <p>C. EMS Agency Update (Teresa Rios)</p>	<p>scene time, traumatic cardiac arrest, TXA-missed opportunities, and data accuracy.</p> <p>B. No report. May EMS Ops Committee meeting was cancelled.</p> <p>C. Agenda packet includes a staff report on the EMS Agency activities. T. Rios highlights that the EMS Agency is starting to look at high frequency users and will bring a report to include strategies on managing this, review of a concern from CHOMP that patients are being transported by EMS who have weapons and contraband on them,</p>	<p>B. Report</p> <p>C. EMS Agency starting to look at a review of high frequency users and a strategy to manage this issue. Will return with a report and potential actions. EMS Agency requests that U/O reports are submitted when a patient is brought to the ED with a weapon or contraband. The EMS Agency will follow up with law enforcement. EMS Agency will send a memo to hospitals to emphasize this issue.</p>



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
<p>D. MHOAC Activities (Jesse Allured)</p>	<p>D. Written report included in the agenda packet. J. Allured highlights that the Public Health DOC is demobilizing, there is an abundance of PPE materials available, CDPH asking for information on Heat Emergency, and planning is starting for EMS management of Car Week.</p>	<p>D. As noted</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>A. Data reports provided in the agenda packet. Testing results remained consistent. EMS Agency continues monthly meetings with the hospitals to ensure open communication.</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 for April and May for overall compliance. AMR has adjusted their deployment plan to help manage areas with ongoing response time compliance concerns. Main change is earlier moving of ambulances into the South County area. Also reviewing crew performance. Chute time is a main area for working with the crews. AMR has been fully staffed more recently than any time since 2019. AMR full staffing is 19 units on duty during the day. Maintaining a full staff is a challenge with fire department hiring. Also working with CTF and SVSP to work on understanding ambulance deployment issues that are impacted by prison calls. 2. MPDS performance was over 70% on EMD compliance. 	<p>A. Report</p> <p>B. Report.</p>



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
C. Fire-Based Providers Response Time Reports (Kimberley Hernandez)	C. (Report in September)	C. EMS Agency to report on response time reports for first responders at next EMCC.
VI. OLD BUSINESS		
A. EMCC Membership	A. A few recommendations from the recommending bodies are still needed. Thanks to all those who have completed the required paperwork. Request to complete the Oath of Office as soon as possible. The EMS Agency has included a chart of EMCC member attendance in the meeting packet. Members may be removed if they fail to attend a minimum number of meetings. Missing 3 consecutive meetings or 3 of five consecutive meetings may lead to the Committee recommending removal. Will bring this back to the EMCC at the next EMCC meeting for action.	A. EMS Agency staff will reach out to members to obtain recommendation for Board appointment. EMS Agency will reach out to members to encourage completion of the requirements
B. Monterey County EMS Ordinance Revision (Debra Hopgood)	B. Ordinance revision continues. Working on language to address AB 389, fees, interfacility transfers, and general clean-up. Also working with County Counsel's office. Needs to have Ordinance completed prior to release of the RFP. Will be released for review by EMCC when approved by County Counsel's office. Will distribute to EMCC members and it will be widely available for review and comments.	B. As noted



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
C. 2022 EMS Annual Report (Debra Hopgood)	C. Draft of the report is in the agenda packet. Mostly unchanged from the draft brought to the last EMCC. Seeking endorsement of the EMS Annual Report. Motion to endorse by J. Schaffer. Second by H. Robins. Motion carries.	C. Submit EMS Annual Report to the Board
D. EMCC Annual Report to the Board of Supervisors (Debra Hopgood)	D. Draft Report on behalf of the EMCC is in the packet for review. EMCC is to provide an annual report to the Board and EMS Agency. Will be submitted with the EMS Agency Report to the Board. Motion to endorse the Report by H. Robins. Second by J. Anthony. Motion carries.	D. Submit the EMCC Report to the Board with the EMS Annual Report
E. EMS Training Programs	E. The EMS Agency has completed review of the MPC EMT training program and found it to be in compliance with Title 22 requirements and EMS policy requirements. The program appears to be well-run, up to date in content, and utilizing qualified staff. Both EMT training programs appear to be well supported by their institutions. Attendance seems to be down a little over the last few years. The cost of an EMT course may be a barrier at over \$1,000 for the course to include tuition, vaccinations, textbook, and other supplies. The course hours have increased making EMT training a significant commitment by the student. The EMT training program through MPUSD faced multiple challenges and has been closed for a couple of years. The EMS Agency also reviewed several of the approved EMS CE providers and found them to be in compliance with Title 22 regulations and EMS policies.	E. No action
F. EMS Agency Advisory Committees- Modifications to Structure	F. EMS Agency looking to revise the reporting structure of the advisory committees. By having the advisory committees in a reporting structure to the EMCC, it has brought some challenges. Looking to reconstitute MAC and EMS Ops committees to not report to EMCC. Will report as advisory committees to the EMS medical director and EMS Agency director. Reports will change from a report of the minutes to a report from the	F. EMS Agency will continue to develop advisory committee bylaws. Bring bylaws to EMCC for endorsement.



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
	<p>medical director and EMS director. Will bring back at the next EMCC meeting for endorsement. This change will restore committee reporting structure to past practice. Request for EMS Agency staff to include a list of pros and potential adverse issues for making this change and include this in the staff report.</p>	<p>Create a report on issues and pros and cons of making the change to the committee reporting.</p>
VII. NEW BUSINESS		
A. MAC Membership Endorsement (Jesse Allured)	<p>A. Seeking endorsement of four nominees for membership at MAC:</p> <ol style="list-style-type: none"> 1. Chief Jeff Watkins representing law enforcement chiefs 2. Dr. Ian Stehmeier representing SVH ED physicians as the alternate 3. Dr. Orchard representing Natividad ED physicians 4. Dr. Klick representing Natividad ED physicians as the alternate <p>Motion to endorse by J. Schaffer. Second by H. Robins. Motion carries. N. Greenson abstains.</p>	A. As noted
B. SWOT Analysis (Debra Hopgood)	<p>B. SWOT Analysis survey results were received. About 20 responses were received. Compiled into the SWOT response document included in the meeting materials. Praise for having progressive policies and protocols with strong specialty care centers. Weaknesses include a lack of feedback through an HDE and the use of multiple e-PCR systems. Opportunities for additional training was identified as an area of improvement. Risks include funding, IFT and CCT. Responses will be posted on the website.</p>	B. Post SWOT results to the website
C. Health Data Exchange (HDE) (Jesse Allured)	<p>C. Report in the meeting packet. Report describes the levels of data exchanges. Looking to bring back the data working group to work on HDE. Will be working with ESO to facilitate HDE. Chris Montera from ESO addressed issues with implementing a true data exchange so field providers can get patient outcome info. Needed for QI activities. Moving to work from the NEMESIS 3.5 standards with target date of September 27.</p>	C. Create the Data Working Group and schedule meeting. Push training in the NEMESIS 3.5



MONTEREY COUNTY EMS AGENCY EMERGENCY MEDICAL CARE COMMITTEE



Item	Discussion	Deliverable/Action
	Required by California by the end of the year. ESO will be providing many notices prior to the start of 3.5. Trainings will be available through ESO that can be distributed to field personnel.	standards to the field.
VIII. ANNOUNCEMENTS/ FOR THE GOOD OF THE ORDER	<ul style="list-style-type: none">• None	<ul style="list-style-type: none">• As noted
IX. NEXT MEETING	<ul style="list-style-type: none">• The next regular EMCC meeting will be September 13, 2023 at 10:30 a.m.	<ul style="list-style-type: none">• As noted
X. ADJOURNMENT	<ul style="list-style-type: none">• Meeting adjourned by Jim Langborg at a.m.	<ul style="list-style-type: none">• Meeting was adjourned.

DRAFT



MONTEREY COUNTY EMS AGENCY OPERATIONS SUBCOMMITTEE (OPS)

Meeting Minutes
July 12th, 2023

Draft



Emergency Medical Services Agency
1441 Schilling Place
Salinas, California
1:00 – 2:30 p.m.

Item	Discussion				Deliverable/Action																															
<p>1. CALL TO ORDER A. Introductions</p>	<p>Will Hiller called the meeting to order at 1:02 p.m. A quorum was present. Introductions of committee members, staff, and guests were done.</p>				<p>A. It should be noted that Olivia Madrigal attend via Zoom, so she was unable to vote during this meeting.</p>																															
<table border="1"> <thead> <tr> <th data-bbox="590 695 867 735">Members</th> <th data-bbox="867 695 1136 735">Representing</th> <th data-bbox="1136 695 1268 735">Present</th> <th data-bbox="1268 695 1402 735">Absent</th> </tr> </thead> <tbody> <tr> <td data-bbox="590 735 867 846">Justin Reyes</td> <td data-bbox="867 735 1136 846">Fire-based Ambulance Provider</td> <td data-bbox="1136 735 1268 846">X</td> <td data-bbox="1268 735 1402 846"></td> </tr> <tr> <td data-bbox="590 846 867 922">Tina Nieto, <i>Vice Chair</i></td> <td data-bbox="867 846 1136 922">Law Enforcement</td> <td data-bbox="1136 846 1268 922"></td> <td data-bbox="1268 846 1402 922">X</td> </tr> <tr> <td data-bbox="590 922 867 998">Cassie Caldera</td> <td data-bbox="867 922 1136 998">Base Hospital Coordinator</td> <td data-bbox="1136 922 1268 998"></td> <td data-bbox="1268 922 1402 998">X</td> </tr> <tr> <td data-bbox="590 998 867 1109">Scott Houchin</td> <td data-bbox="867 998 1136 1109">Fire Department from an incorporated City</td> <td data-bbox="1136 998 1268 1109"></td> <td data-bbox="1268 998 1402 1109">X</td> </tr> <tr> <td data-bbox="590 1109 867 1219">Will Hiller, <i>Chair</i></td> <td data-bbox="867 1109 1136 1219">Primary Ambulance Contractor</td> <td data-bbox="1136 1109 1268 1219">X</td> <td data-bbox="1268 1109 1402 1219"></td> </tr> <tr> <td data-bbox="590 1219 867 1365">Olivia Madrigal</td> <td data-bbox="867 1219 1136 1365">Monterey County Emergency Communications Department</td> <td data-bbox="1136 1219 1268 1365">X</td> <td data-bbox="1268 1219 1402 1365"></td> </tr> <tr> <td data-bbox="590 1365 867 1401">Jeff Horner</td> <td data-bbox="867 1365 1136 1401">Air Ambulance</td> <td data-bbox="1136 1365 1268 1401">X</td> <td data-bbox="1268 1365 1402 1401"></td> </tr> </tbody> </table>				Members		Representing	Present	Absent	Justin Reyes	Fire-based Ambulance Provider	X		Tina Nieto, <i>Vice Chair</i>	Law Enforcement		X	Cassie Caldera	Base Hospital Coordinator		X	Scott Houchin	Fire Department from an incorporated City		X	Will Hiller, <i>Chair</i>	Primary Ambulance Contractor	X		Olivia Madrigal	Monterey County Emergency Communications Department	X		Jeff Horner	Air Ambulance	X	
Members	Representing	Present	Absent																																	
Justin Reyes	Fire-based Ambulance Provider	X																																		
Tina Nieto, <i>Vice Chair</i>	Law Enforcement		X																																	
Cassie Caldera	Base Hospital Coordinator		X																																	
Scott Houchin	Fire Department from an incorporated City		X																																	
Will Hiller, <i>Chair</i>	Primary Ambulance Contractor	X																																		
Olivia Madrigal	Monterey County Emergency Communications Department	X																																		
Jeff Horner	Air Ambulance	X																																		



**MONTEREY COUNTY EMS AGENCY
OPERATIONS SUBCOMMITTEE (OPS)**

**Meeting Minutes
July 12th, 2023**

Draft



Item	Discussion			Deliverable/Action
	Spencer Harnett	EMT/Paramedic from the Contracted 911 Ambulance Provider	X	
	<i>Vacant</i>	EMT or Paramedic from a Fire-based Ambulance Provider		
Ex-Officio Member				
	Dr. John Beuerle	EMS Medical Director	X	
Alternates				
	Lee Ann Magoski	Monterey County Emergency Communications Department		X
	Vacant	Law Enforcement Agency		X
	Ryan Alexander	Fire Department from an incorporated city	X	
EMS Agency Staff				
	Teresa Rios	EMS Director	X	
	Steve Brooks	EMS Analyst	X	



**MONTEREY COUNTY EMS AGENCY
OPERATIONS SUBCOMMITTEE (OPS)**

**Meeting Minutes
July 12th, 2023**

Draft



Item	Discussion				Deliverable/Action
	Roxann Seepersad	Epidemiologist		X	
	Kimberley Hernandez	EMS Analyst	X		
	Debra Hopgood	Management Analyst III	X		
	Blake Andersen	EMS Analyst	X		
	Jesse Allured	EMS Analyst	X		
2. PUBLIC COMMENT	None				<ul style="list-style-type: none"> • None
3. APPROVAL OF MINUTES A. OPS Subcommittee Minutes of January 24 th and February 8 th , 2023— <i>Approval</i>	OPS Subcommittee Minutes of February 8 th and January 24 th , 2023 were approved as written. <i>M/S Will Hiller/Chief Reyes</i>				<ul style="list-style-type: none"> • As noted
4. CORRESPONDENCE	None				<ul style="list-style-type: none"> • None
5. REPORTS A. EMS Agency Update	A. Teresa- A written staff report was included in the agenda packet. She opened the floor to any questions or comments. No one had anything else to add.				<ul style="list-style-type: none"> • As noted



**MONTEREY COUNTY EMS AGENCY
OPERATIONS SUBCOMMITTEE (OPS)**

**Meeting Minutes
July 12th, 2023**

Draft



Item	Discussion	Deliverable/Action
<p>6. OLD BUSINESS</p> <p>A. Ops Subcommittee By-Laws/Policy 1020 Clean-Up</p>	<p>A. Debra Hopgood- The EMS Agency is still in the process of transitioning the Operations Subcommittee, which is a standing subcommittee that must report to EMCC, to an Operations Working Group, which would report to the EMS Director. A memo highlighting the changes and a copy of the new proposal for Policy 1020 were included in the membership packets.</p>	<ul style="list-style-type: none"> The EMS Agency will revisit this topic at the next EMCC meeting so members can have a chance to review the policy changes, offer their input, and vote on whether to endorse the proposal.
<p>7. NEW BUSINESS</p> <p>A. Officer Elections</p> <p>B. NEMSIS 3.5 Update</p>	<p>A. Blake Andersen – As stated in the EMS Agency’s policies, new officer elections are to occur in July. The positions available were Chair and Vice Chair. For the position of Chair, Will Hiller was nominated. <i>M/S Jeff Horner/Chief Reyes</i></p> <p>For the position of Vice Chair, Chief Reyes was nominated. <i>M/S Jeff Horner/Spencer Harnett</i></p> <p>All nominations were unanimously approved.</p> <p>B. Jesse Alured – ESO will transition all of their customers to the new NEMSIS 3.5 version. By the</p>	<ul style="list-style-type: none"> Information only The EMS Agency offered to provide the stakeholders



MONTEREY COUNTY EMS AGENCY OPERATIONS SUBCOMMITTEE (OPS)

Meeting Minutes
July 12th, 2023

Draft



Item	Discussion	Deliverable/Action
C. Combative Patients and Use of Restraints	<p>year the state will no longer accept reports that under the 3.4 version.</p> <p>C. Blake Andersen – During a CQI-TAG meeting, it was brought to the attention of the EMS Agency that there has been a recent uptick in combative patients and assaults against AMR employees. The Agency’s response was to attend multiple town hall meetings with AMR providers and gather input from these providers, then we drafted changes to Policies 4508 and M-5. These changes will be released by the end of the week and open for public comment.</p>	<p>with a list of changes that will be happening with the 3.5 transition.</p> <ul style="list-style-type: none"> • As noted
D. High-Performance CPR	<p>D. Blake Andersen – After attending a Resuscitation Academy, the EMS Agency has been looking to implement a High-Performance CPR model to Monterey County. During our last CQI TAG meeting we presented our draft model of High-Performance CPR, along with guidance on Head Up and Mechanical CPR. The EMS Agency also stated it would work on creating a meeting with county providers to gather their input on the program and to discuss potential hurdles and best practices. Chief Reyes inquired about looking at Dr. Antevy’s Florida protocols for CPR, especially at how to address</p>	<ul style="list-style-type: none"> • As noted



**MONTEREY COUNTY EMS AGENCY
OPERATIONS SUBCOMMITTEE (OPS)**

**Meeting Minutes
July 12th, 2023**

Draft



Item	Discussion	Deliverable/Action
	public outreach and Telecommunicator CPR. Blake explained some of the hurdles with t-CPR in our system, but did elaborate that the Agency would be open to reviewing this information.	
8. ANNOUNCEMENTS FOR THE GOOD OF THE ORDER	Jeff Horner- CALSTAR has been working with County Communications on the development of a simultaneous dispatch for air resources. After a 90 day review, CALSTAR has seen faster response times with the average time saved being four minutes.	<ul style="list-style-type: none">• Information only
8. NEXT MEETING	The next regularly scheduled Operations Subcommittee meeting will be held on Wednesday, September 13 th , 2023, at 1:00 p.m., location to be determined.	<ul style="list-style-type: none">• Informational only
9. ADJOURNMENT	Meeting adjourned at 1:25 pm.	<ul style="list-style-type: none">• As noted



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: September 13, 2023

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

From: Debra Hopgood, Medical Health Operational Area Coordinators (MHOAC)

Regarding: Monterey County MHOAC Activities

Recent MHOAC activities have focused on the demobilization of the remaining COVID tests and personal protective equipment (PPE) as well as revisions and updates to the CHEMPACK plan for Monterey County.

1. COVID Data Update as of 09/05/2023:

- Deaths – The total number of confirmed deaths statewide is 103,414. In Monterey County, there have been a total of 837 confirmed deaths.
- Test Positivity – Test positivity has decreased. The current California 7-day test positivity rate is at 14.0%. In Monterey County, the current 7-day test positivity rate is at 15.7%.
- Hospitalizations – Hospitalizations have shown an increase since the last report but remain well below past peaks. The most recent weekly number of new hospitalizations due to confirmed COVID-19 cases in California was 2,620. The number for Monterey County was 21.
- Vaccination Rate – Vaccination rates have not seen significant increases. Currently 73.2% of the eligible population (325,823 people) in Monterey County is fully vaccinated. The state rate is 72.9%.

2. Supply and Personal Protective Equipment (PPE) Requests:

We are currently working to complete a final distribution of COVID tests and non-expired PPE that are housed in the County’s warehouse. Expired PPE that we can no longer distribute will be disposed of appropriately.

The items currently available for distribution are:

- COVID-19 Tests – Primarily over the counter, but also a small number of joint COVID/Flu tests that require a CLIA waiver for use.
- Gowns – “Average” size
- N95 Masks

These items are available to medical/health providers and other organizations in Monterey County. Any requests for the above items may be submitted through the online MHOAC Resource Request Form at: <https://apps.co.monterey.ca.us/EMSRequest/>.

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

After we have distributed the final quantities of PPE and COVID tests, we anticipate that all resource requests will follow the procedures outlined in the California Public Health and Medical Emergency Operations Manual (EOM) and the Standardized Emergency Management System (SEMS).

3. **CHEMPACK Plan Update and Training:**

The EMS Agency has been working in concert with the Health Department's Emergency Preparedness staff and the California Department of Public Health to bring training on the CHEMPACK program to Monterey County. The courses will be open to EMS, fire, law enforcement, hospital personnel, public health, emergency management, and communications center personnel.

The training will be offered free of charge and the EMS Agency will make continuing education credit available for EMS personnel. The class will cover the CHEMPACK program, when CHEMPACK assets might be needed, how to request the assets, and deployment.

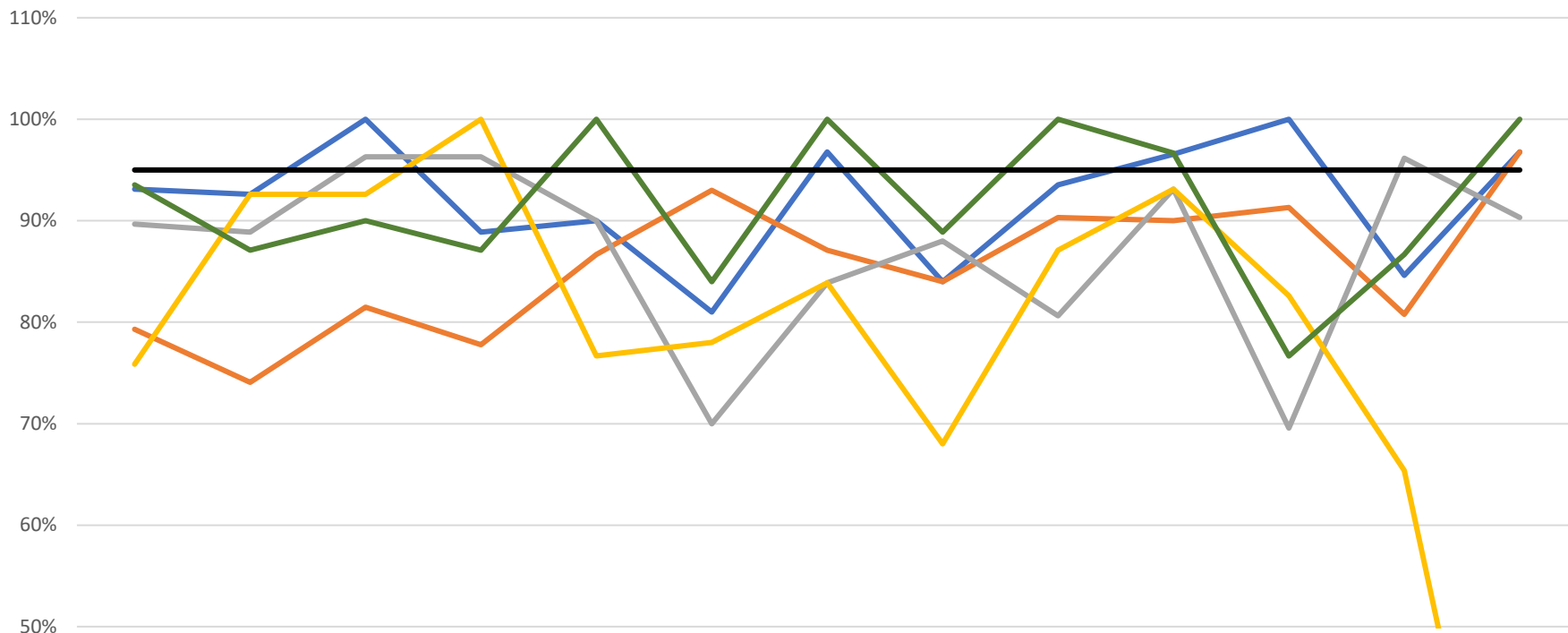
The classes are tentatively scheduled for:

- October 25th, 2023 from 1:30 to 3:30 PM at the Marina Training Center at 299 12th Street, Marina, CA 93933.
- October 26th, 2023 from 9:00 to 11:00 AM in the Cayenne Room at the Schilling Center at 1441 Schilling Place, Salinas, CA 93901.

More information including confirmed times, a flyer, and a registration link will be sent out soon.

800MHz Disaster Medical Radio System Testing

Response Compliance March 2022-March 2023

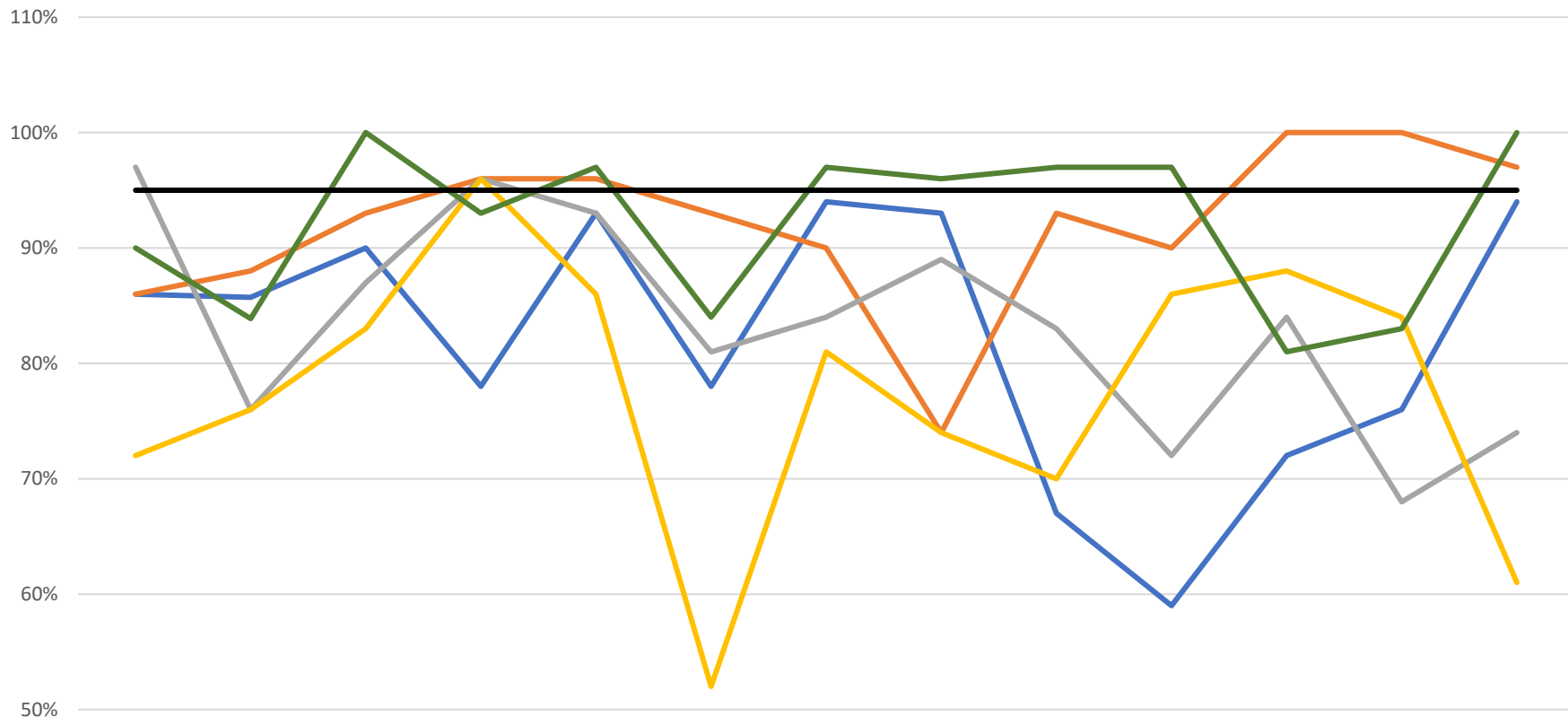


	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23
CHOMP	93%	93%	100%	89%	90%	81%	97%	84%	94%	97%	100%	85%	97%
MMH	79%	74%	81%	78%	87%	93%	87%	84%	90%	90%	91%	81%	97%
NMC	90%	89%	96%	96%	90%	70%	84%	88%	81%	93%	70%	96%	90%
SVH	76%	93%	93%	100%	77%	78%	84%	68%	87%	93%	83%	65%	13%
AMR	94%	87%	90%	87%	100%	84%	100%	89%	100%	97%	77%	87%	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 July 2022 – July 2023



	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23
CHOMP	86%	86%	90%	78%	93%	78%	94%	93%	67%	59%	72%	76%	94%
MMH	86%	88%	93%	96%	96%	93%	90%	74%	93%	90%	100%	100%	97%
NMC	97%	76%	87%	96%	93%	81%	84%	89%	83%	72%	84%	68%	74%
SVH	72%	76%	83%	96%	86%	52%	81%	74%	70%	86%	88%	84%	61%
AMR	90%	84%	100%	93%	97%	84%	97%	96%	97%	97%	81%	83%	100%
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)

September 13, 2023

Presented by
Kimberley Hernandez

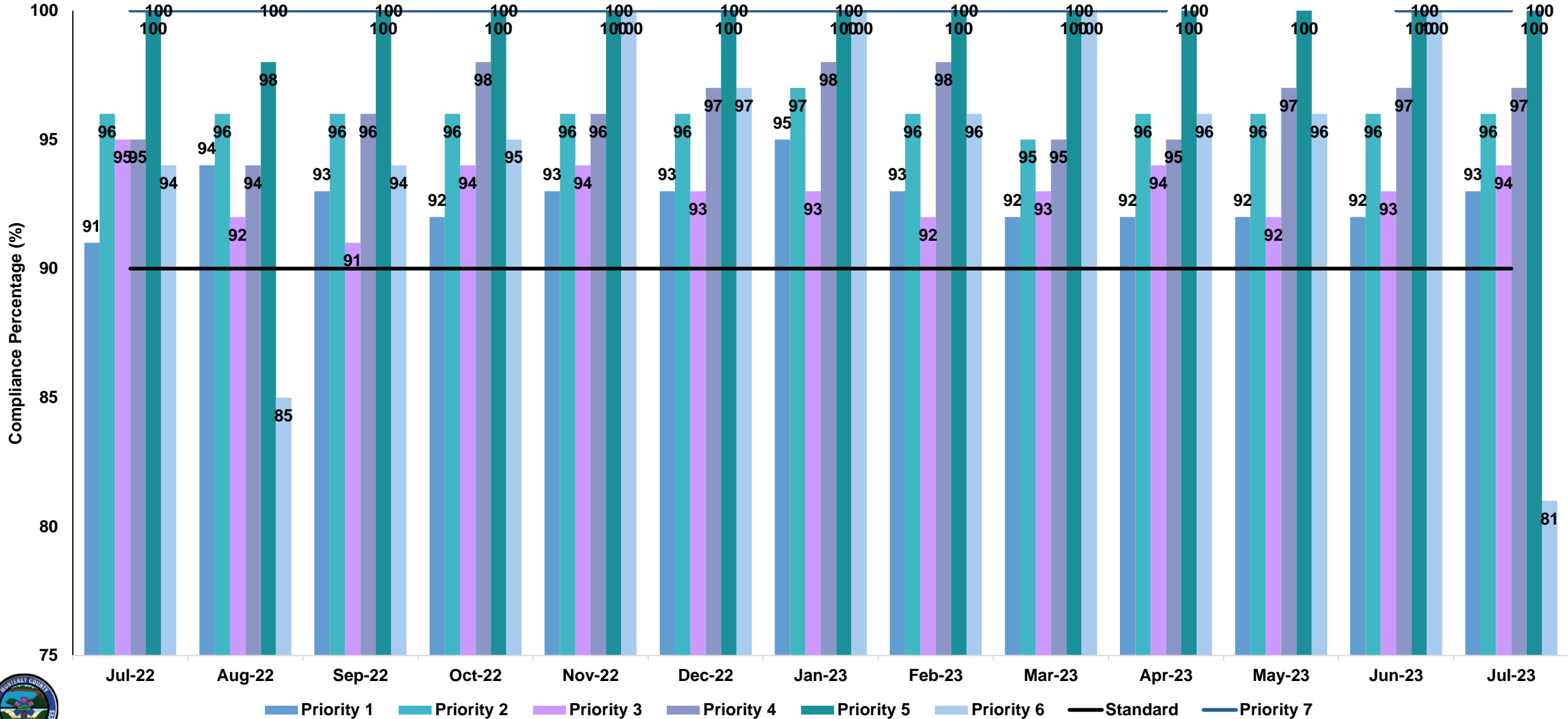


COUNTY OF MONTEREY
HEALTH DEPARTMENT
Nationally Accredited for Providing Quality Health Services



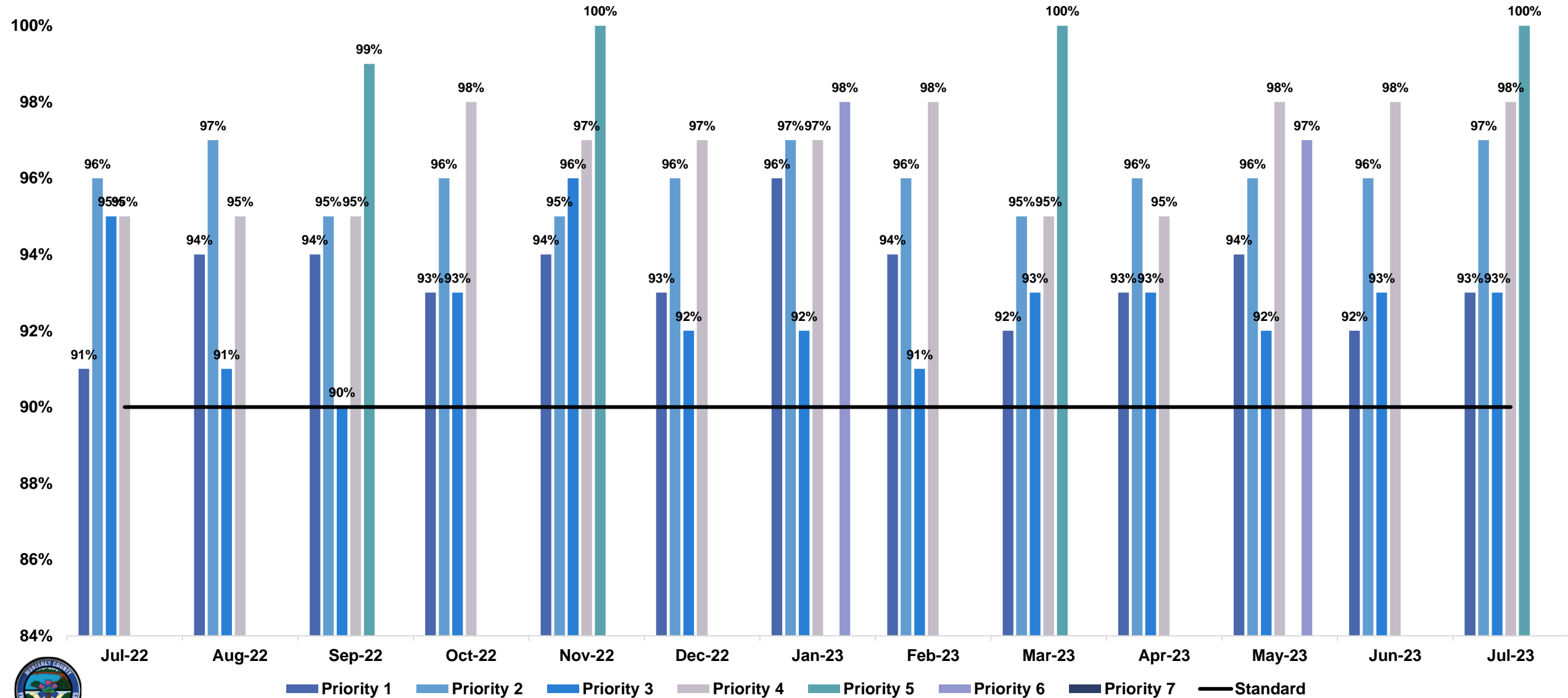
Response Time Compliance by Priority

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



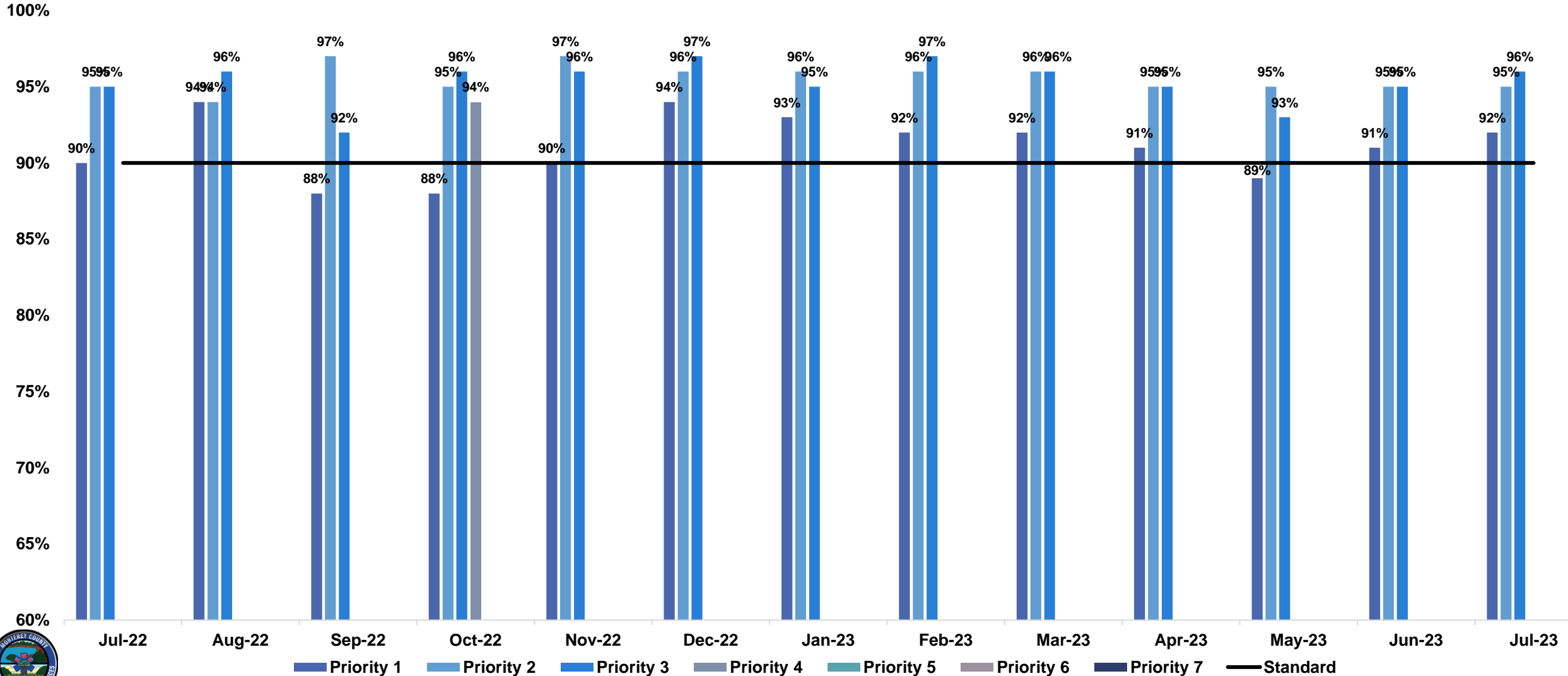
Response Time Compliance: **Green** Response Area

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



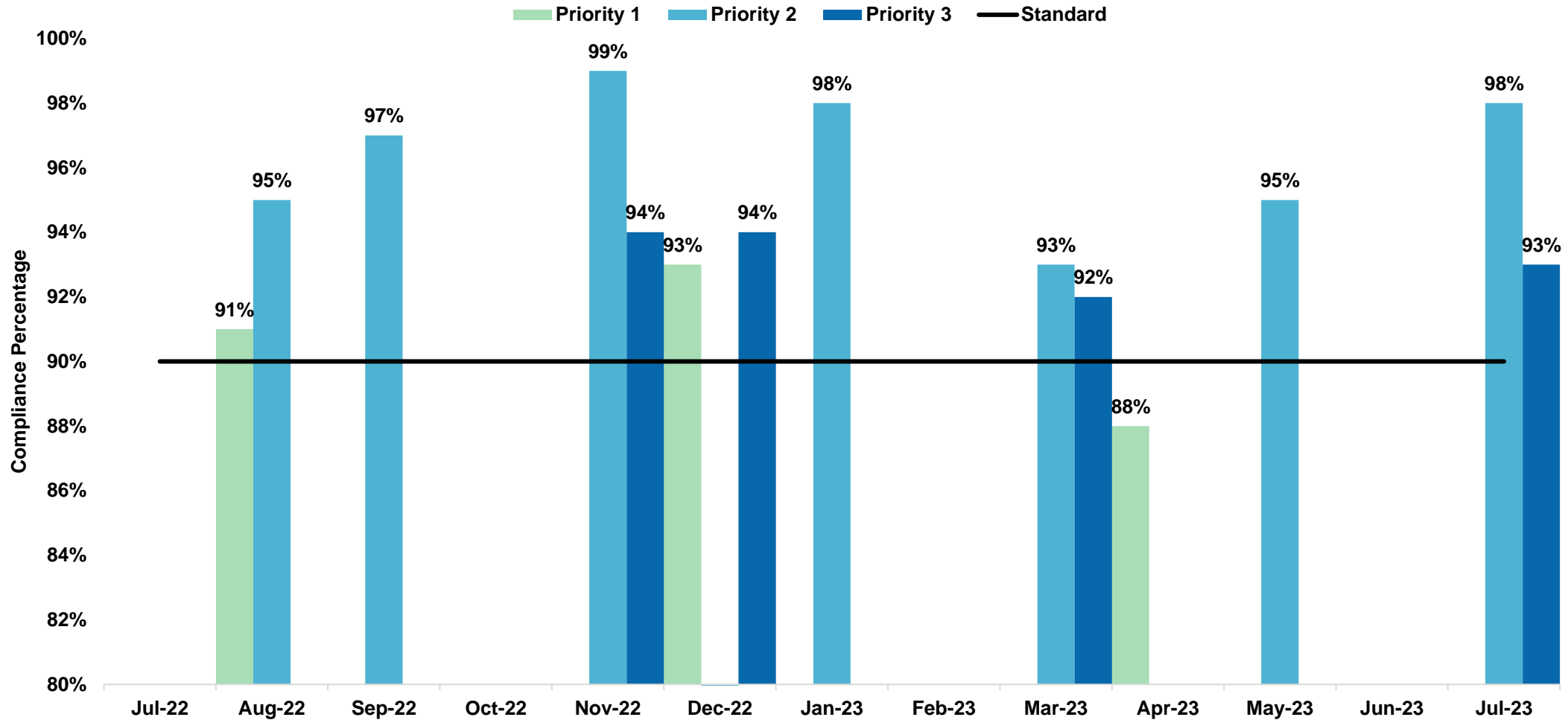
Response Time Compliance: Yellow Response Area

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

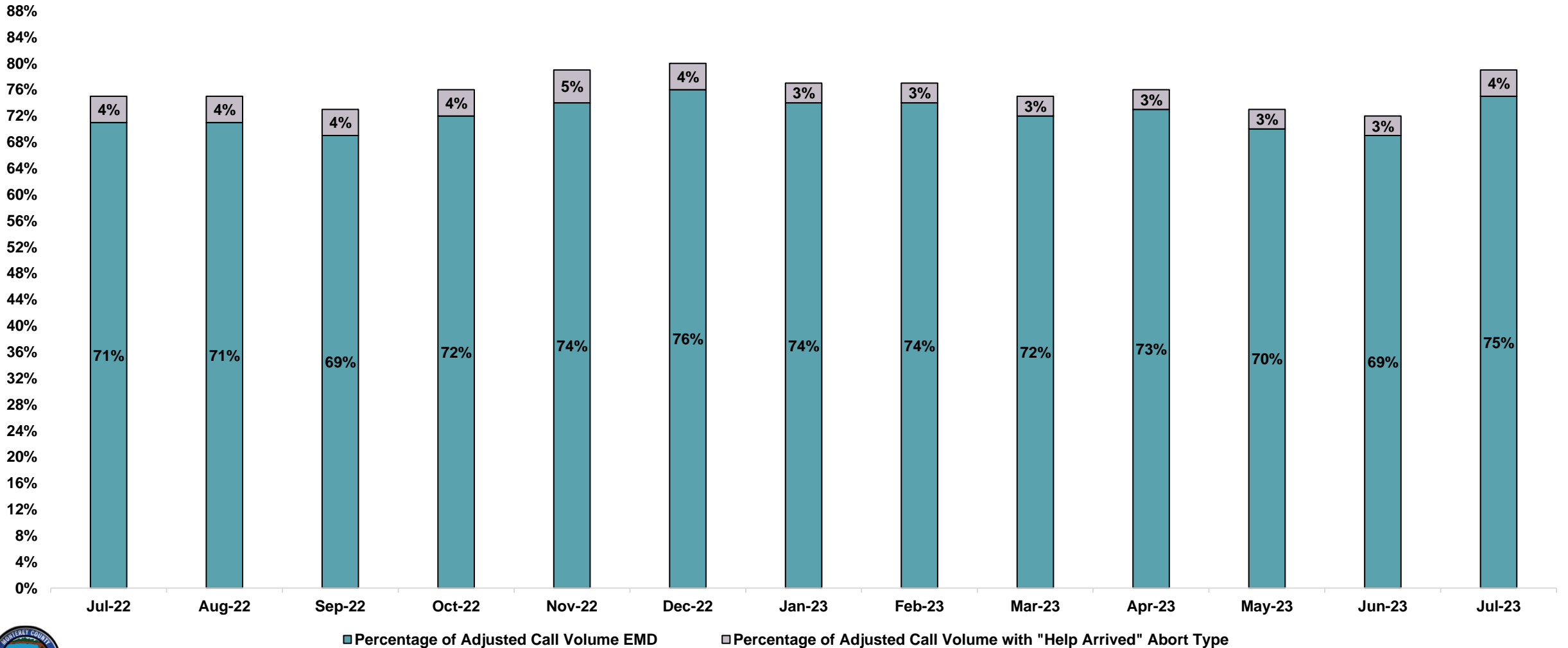


- Priority 4 & 6 (not depicted) has had no calls since 2017.
- Priority 5 had 2 calls since 2017.



Medical Priority Dispatch System Performance

July 2022-July 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 July 2022-July 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: September 13, 2023

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

From: Kimberley Hernandez, EMS Analyst

Subject: Alternate Ambulance Service Providers 90th Percentile Response Times Report

The Monterey County Emergency Medical Services (EMS) system comprises multiple agencies and facilities, all working together to provide timely emergency medical response and care to those experiencing a medical emergency. While American Medical Response (AMR) is currently the exclusive operating area ambulance service provider, Fort Hunter Liggett, City of Carmel Fire Ambulance, and Monterey County Regional Fire District are designated alternate ambulance service providers.

This report provides referential information on the 90th Percentile Response Times of medically related incidents by Carmel Fire Ambulance and Monterey County Regional Fire District throughout Monterey County. Fort Hunter Liggett is excluded from this report due to low call volume.

Analytical Methods:

Data Collection:

The EMS Agency used the Emergency Communications Department Computer Aided Dispatch (CAD) system's reporting software Advanced Reporting Module for responses between January 1, 2023 – June 30, 2023.

- Key components of data collection:
 - Monterey County Regional Fire Ambulance Units (A5563, A5564, A5565, and A5566)
 - Carmel Fire Ambulance Units (A7165, A7166)
 - Medically related problems (UIA, VIA, MED, STAB, GSW)
 - Incident Number
 - Dispatch Data & Time
 - Unit On-Scene Date & Time
 - Fire Response Area (MCF, MNT, and other areas within Monterey County)
- Potential outliers were manually reviewed to reduce possible reporting errors.

Data Analysis:

- The Response Time Interval for each call was determined by calculating the difference between the Unit Notified by Dispatch Time and the Unit On-Scene Time for each medical call, measured and recorded in integer minutes and seconds.
- 90th Percentile Response Times were computed using Response Time Intervals by month.

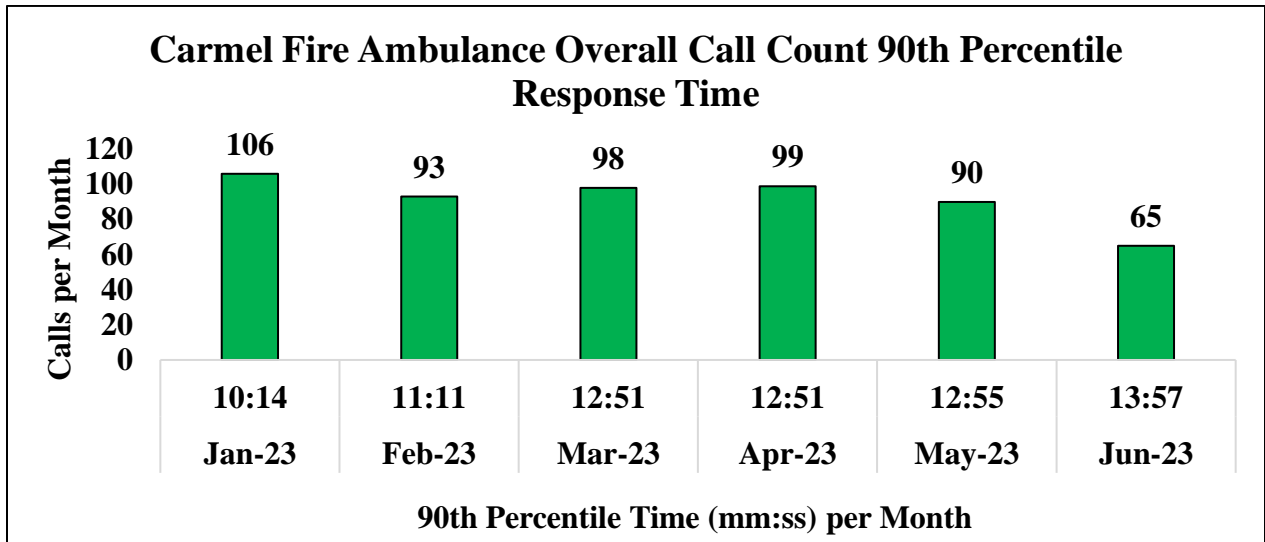
- Includes stratification of overall 90th Percentile Response Time per month by responses into Fire Response Area only, responses outside of Fire Response area but within Monterey County as identified in CAD, and limited to calls with medically related problem codes only.

Results:

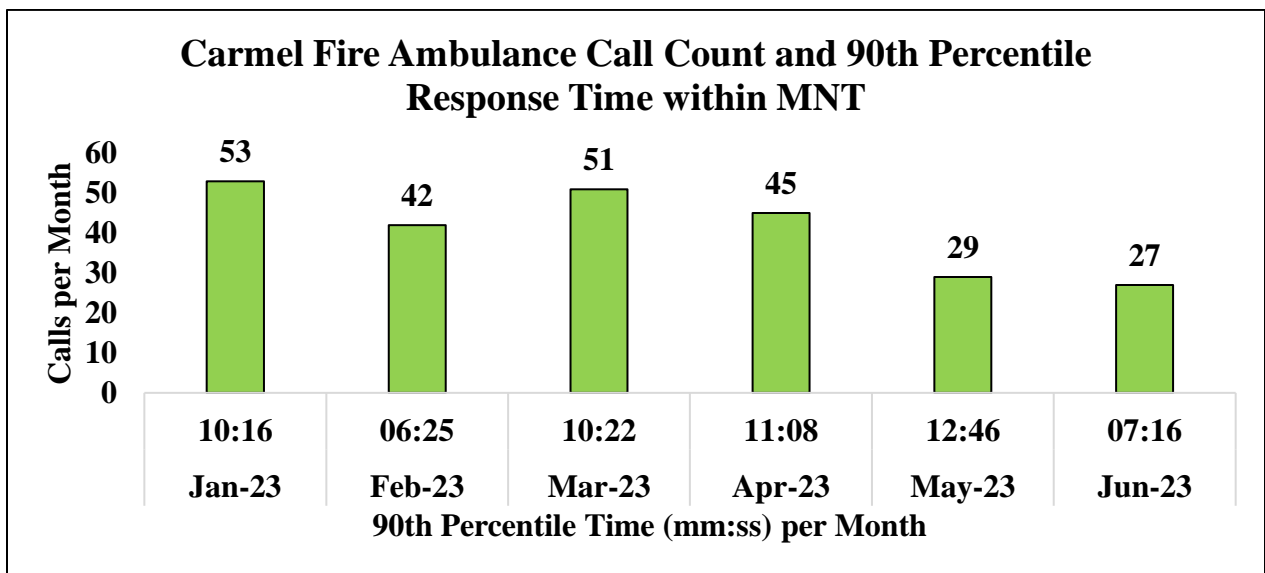
The following data focuses on the first half of 2023 (January-June). EMS System participants should interpret the information cautiously, as small numbers contribute to unstable statistical results.

Carmel Fire Ambulance January-June 2023:

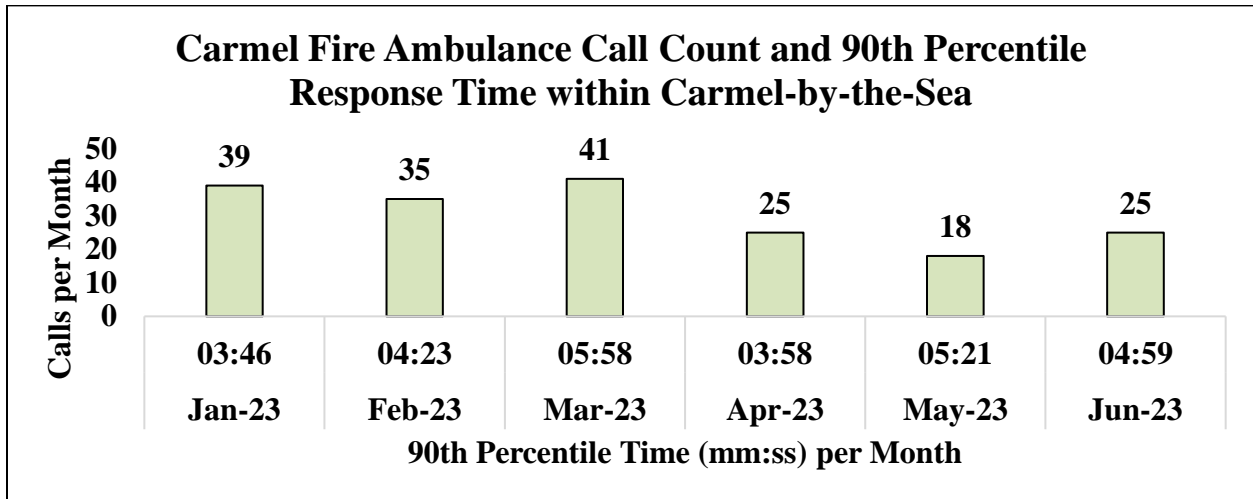
Carmel Fire Ambulance responded to 551 calls, with an average 90th percentile time of 12 minutes and 20 seconds for approximately 92 calls per month.



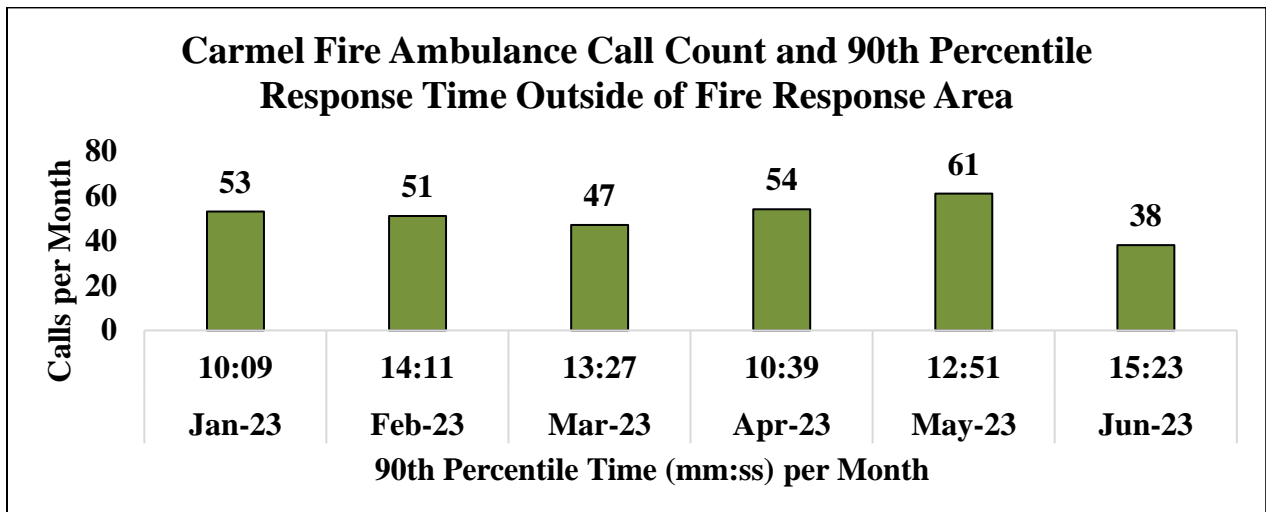
Carmel Fire Ambulance responded to 247 calls within their CAD-designated Response Area (MNT), with an average 90th percentile time of 9 minutes and 42 seconds for approximately 41 calls per month.



Carmel Fire Ambulance responded to 183 calls within Carmel-by-the-Sea, with an average 90th percentile time of 4 minutes and 44 seconds for approximately 31 calls per month.

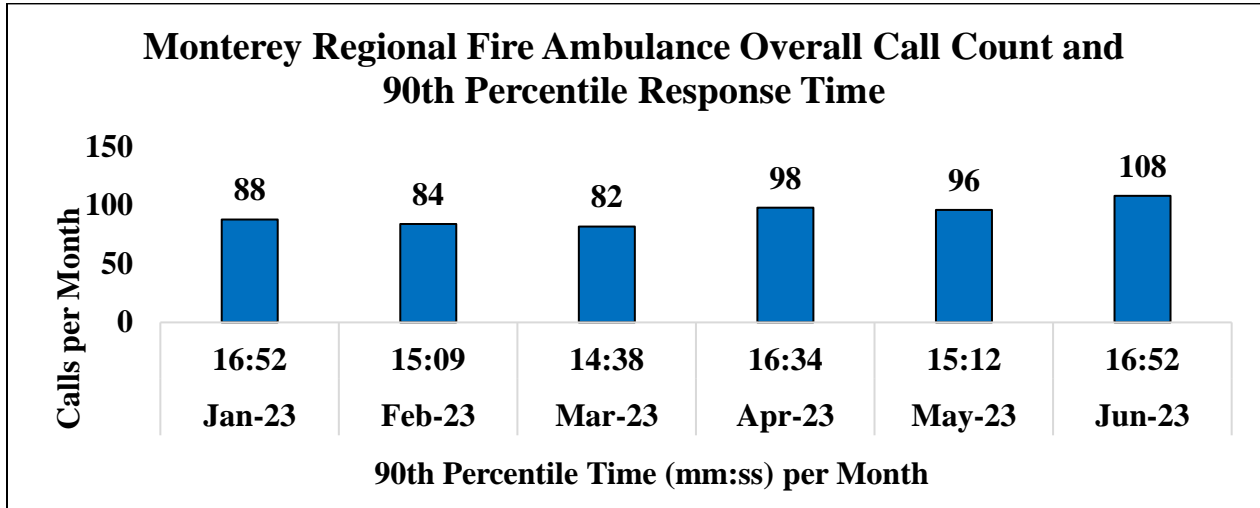


Carmel Fire Ambulance responded to 304 mutual aid calls outside of MNT, with an average 90th percentile time of 12 minutes and 47 seconds for approximately 51 calls per month.

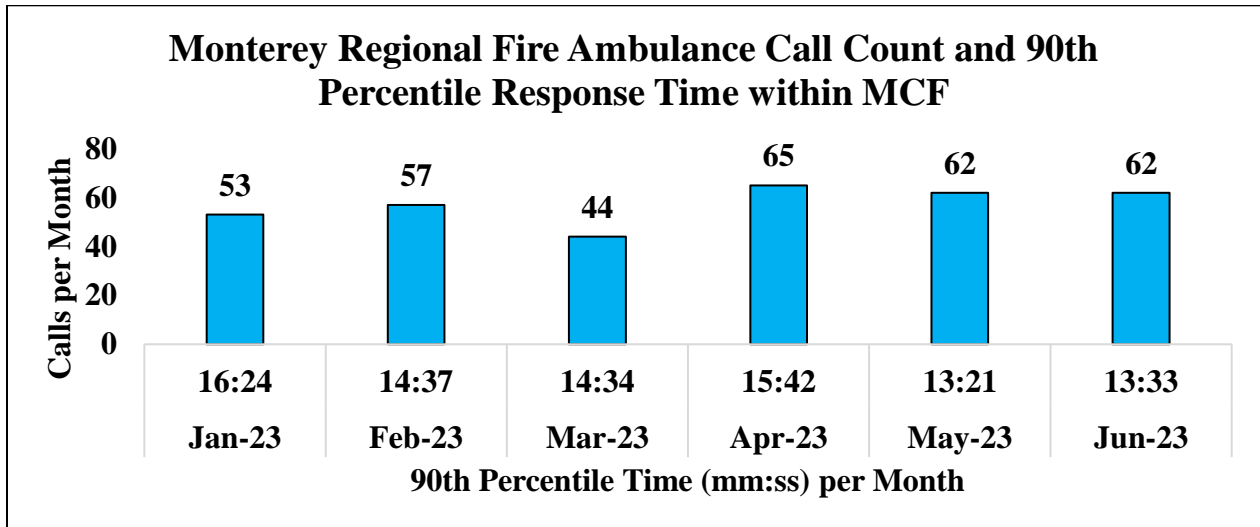


Monterey Regional Fire Ambulance January-June 2023:

Monterey Regional Fire Ambulance responded to 556 calls, with an average 90th percentile time of 15 minutes and 53 seconds for approximately 93 calls per month.

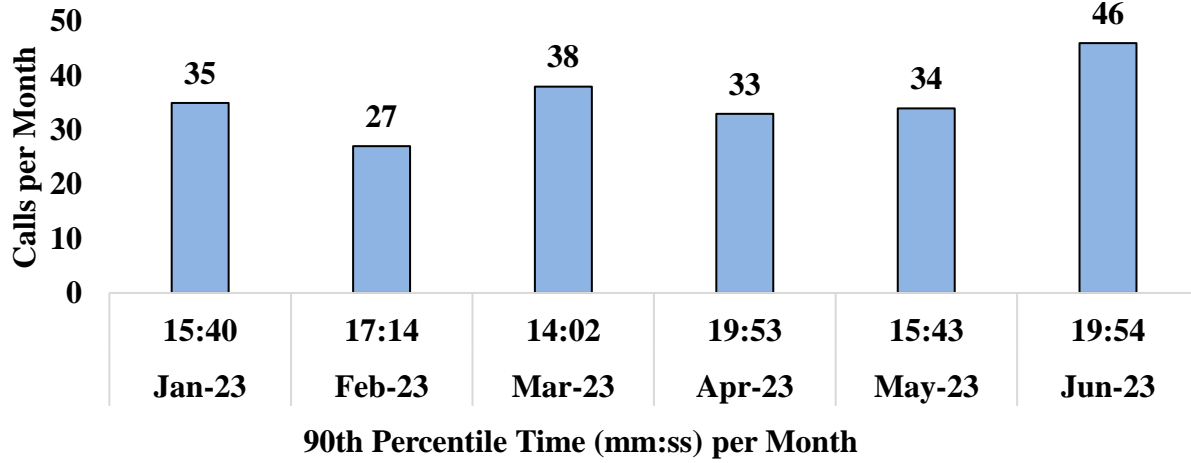


Monterey Regional Fire Ambulance responded to 343 calls within their CAD-designated Response Area (MCF), with an average 90th percentile time of 14 minutes and 42 seconds for approximately 57 calls per month.



Monterey County Regional Fire Ambulance responded to 213 mutual aid calls outside of MCF, with an average 90th percentile time of 17 minutes and 4 seconds for approximately 36 calls per month.

Monterey Regional Fire Ambulance Call Count and 90th Percentile Response Time outside MCF





EMERGENCY MEDICAL CARE COMMITTEE



Committee Manager:
Steve Brooks

CURRENT MEMBERS

Name	Constituency	2022-2023													7/12/2023
		7/6 AB361	7/13 Cancel	8/3 AB361	8/30 AB361	9/14	10/12 AB361	11/9	12/7 AB361	1/4 AB361	1/11	2/8 AB361	3/8	5/10	
Will Hiller	911 EOA Ambulance	X		X	X	X	X	X	X	X	X	X	X		X
Tina Nieto	Law Enforcement	X		X		X	X	X	X	X		X			X
Carla Spencer	Hospital Administration	X			X	X		X				X	X	X	X
Samuel Klemek	ALS - Fire				X	X		X	X		X	X	X	X	
Jim Langborg-Chair	BLS - Fire	X		X	X		X	X		X	X	X	X	X	X
Harry Robins	Citizen Representative	X		X	X	X	X	X	X		X	X	X	X	X
Jodi Schaffer	Citizen Representative			X	X	X		X		X		X	X	X	X
Luz Garcia	Citizen Representative														
Paul Wood-Vice Chair	City Managers	X			X		X				X	X			O
Dr. Nikolas Greenson	Emergency Physicians			X	X	X	X			X	X		X	X	X
Greta Steinbruner	EMT/Paramedic														X
Jon Anthony	MOCO Parks Department				X	X	X		X	X	X	X	X	X	X



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: July 12, 2023

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

From: Monterey County EMS Agency

Regarding: Modifications to the Structure of the EMS Agency's Advisory Committees

California Health and Safety Code Sections 1797.270 through 1797.276 establish the requirements for Emergency Medical Care Committees (EMCCs). The statute states that the EMCC “shall act in an advisory capacity to the county board or board of supervisors” and that “the county board of supervisors shall prescribe the membership, and appoint the members, of the emergency medical care committee.” This advisory role to the Board of Supervisors (BOS) establishes the EMCC as subject to the requirements of the Ralph M. Brown Act (California Government Code 54950 et seq.). The Brown Act includes requirements related to notice of meetings, publishing agendas, and in-person attendance (unless certain strict requirements are met) amongst others.

The Monterey County EMS Agency advisory committee structure establishes the EMCC in accordance with statutory requirements. The EMS Agency's current committee bylaws establish the other committees as standing subcommittees of the EMCC. The current standing subcommittees of the EMCC are:

- Medical Advisory Subcommittee (MAC)
- Operations Subcommittee (OPS)
- STEMI (ST Elevation Myocardial Infarction) Quality Improvement Committee
- Stroke Quality Improvement Committee
- Trauma Evaluation and Quality Improvement Committee (TEQIC)

Because of this structure, the other committees and working groups are also subject to the requirements of the Brown Act. As such, throughout the pandemic, the committees needed to comply with the additional requirements of AB361 including multiple additional meetings related to remote meetings and, as of the end of the state of emergency, are currently required to meet in person. Additionally, the current structure creates some confusion as to the status of the quality improvement-related committees. Their subject matter and topics discussed require confidential meetings that cannot be open to the public. Statutes, however, do not require the EMS Agency to utilize the structure currently in place.

The EMS Agency, in consultation with County Counsel, recommends a modification of this structure to remove the standing subcommittees and going forward establish ad hoc task forces, working groups and/or quality assurance committees to advise the EMS Director, EMS Medical Director and EMCC, as needed. Additionally, the proposed structure will provide clarity related

to the status of the quality improvement/quality assurance committees. Under the new structure, the EMCC would remain unchanged. The current standing subcommittees would be dissolved and replaced by the following:

1. Establish a Medical Advisory Quality Assurance Committee (MAC) to serve as an advisory group to the EMS Agency's Director and Medical Director. The composition of the committee would remain unchanged. The STEMI QI and Stroke QI Committees as well as TEQIC would become subcommittees of the MAC.
2. Establish an Operations Working Group (OPS) to serve as an advisory group to the EMS Agency's Director. The composition of the committee would remain unchanged.

The composition of the membership of each of the two new groups will remain unchanged. The EMS Agency's Director and Medical Director will provide regular reports to the EMCC relaying any pertinent items related to the proceedings of these groups.

The EMS Agency will update the bylaws of the EMCC to reflect the changes outlined above. Additionally, the update of EMCC's bylaws will incorporate other minor revisions such as changes in department or staff titles.

These changes will continue to satisfy statutory requirements while allowing increased flexibility and encouraging committee participation and attendance.

Monterey County EMS System Policy



Policy Number: 1020
Effective Date: ~~7/1/2023~~
Review Date: ~~6/30/2026~~

EMS ADVISORY COMMITTEES

I. PURPOSE

To define the structure and roles of the EMS committees that advise the Board of Supervisors, EMS Director, and EMS Medical Director.

II. POLICY

- A. Advisory committees, composed of EMS system constituents, shall convene to review EMS system matters relevant to their scope of responsibility and recommend actions to the EMS Director and EMS Medical Director concerning matters of policy, procedure, and protocol.
- B. The EMS Agency Medical Director, as mandated by California Health and Safety Code, Section 1797.220, provides medical control and assures medical accountability throughout the planning, implementation and evaluation of the EMS System. The EMS Agency Medical Director retains the final decision through his/her medical authority for the EMS system.
- C. The EMS Director, as mandated by the Monterey County Code of Ordinances, Section 15.40.030, shall be responsible for overseeing the EMS Agency, as it serves as the lead agency for the EMS system in the County and shall be responsible for coordinating all system participants in the EMS area. The EMS Agency shall plan, coordinate, monitor and evaluate the implementation of the EMS system.

III. ~~EMERGENCY MEDICAL CARE COMMITTEE~~ ~~STANDING ADVISORY COMMITTEE AND SUBCOMMITTEES~~

- A. The Monterey County Board of Supervisors establishes ~~ed~~ bylaws for the Emergency Medical Care Committee (EMCC), ~~following standing advisory committee and subcommittees~~. The bylaws formally establish the purpose, membership, structure, and rules for the EMCC each committee/subcommittee. These bylaws, as amended from time to time, are incorporated here by reference.
 - ~~1. Emergency Medical Care Committee (EMCC).~~
 - ~~2. Medical Advisory Subcommittee (MAC).~~
 - ~~3. Operations Subcommittee (OPS).~~

IV. ADDITIONAL COMMITTEES, TASK FORCES, AND WORKING GROUPS

- A. The EMS Director may appoint ad hoc task forces, quality assurance committees, or working groups as needed.

Monterey County EMS System Policy 1020

B. The EMS Director shall determine the membership and terms of these task forces, committees, and working groups.

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V. OPERATIONS WORKING GROUP

A. Purpose: The Operations Working Group (OPS) shall serve as an advisory group to the EMS Agency's Director on operational issues involving prehospital and emergency medical services.

B. Appointment Process: Appointed by the EMS Director.

C. Term of Office: Two years, commencing on the first of July, unless the member is replaced. The terms of the first six members listed below shall expire on odd-numbered years, the terms of the balance of the members listed below shall expire on even-numbered years. With the members' assent, the EMS Director may automatically reappoint members to a subsequent term.

D. Alternates: Members wishing to have an alternate may do so by submitting a written request to the Chair, giving the name of the proposed alternate member. The proposed alternate must belong to and represent the same group, agency, or entity represented by the member. The EMS Director may appoint the proposed alternate member as appropriate.

E. Officers: The Chair and Vice-Chair are elected annually by the members. The term of the Chair and Vice-Chair is for one year.

F. Meeting Frequency: OPS generally meets every other month or by request of the Chair or the EMS Director.

G. Location: As set by agenda.

H. Membership:

1. One fire chief representative from an incorporated city within Monterey County.
2. One fire chief representative from a fire protection district within Monterey County.
3. One representative from a law enforcement agency within Monterey County.
4. One Monterey County Base Hospital Coordinator.
5. One representative from the County's primary ambulance contractor.
6. One representative from a fire-based ambulance provider.
7. One representative from the Monterey County Emergency Communications Department.

Monterey County EMS System Policy 1020

8. One representative from an EMS aircraft provider.
9. One field (EMT or paramedic) representative from the contracted 911 ambulance provider.
10. One field (EMT or paramedic) representative from a fire-based ambulance provider.
11. EMS Agency Medical Director (ex-officio, non-voting member).

VI. MEDICAL ADVISORY QUALITY ASSURANCE COMMITTEE

- A. Purpose: The Medical Advisory Quality Assurance Committee (MAC) shall serve as an advisory group to the EMS Agency's Director and Medical Director on medical control and other medical issues.
- B. Appointment Process: Appointed by the EMS Director.
- C. Term of Office: Two years, commencing on the first of July, unless the member is replaced. The terms of the first seven members listed below shall expire on odd-numbered years, the terms of the balance of the members listed below shall expire on even-numbered years. With the members' assent, the EMS Director may automatically reappoint members to a subsequent term.
- D. Alternates: Members wishing to have an alternate may do so by submitting a written request to the Chair, giving the name of the proposed alternate member. The proposed alternate must belong to and represent the same group, agency, or entity represented by the member. The EMS Director may appoint the proposed alternate member as appropriate.
- E. Officers: The Chair of the MAC is the EMS Agency Medical Director.
- F. Meeting Frequency: The MAC generally meets every other month or by request of the Chair or the EMS Director.
- G. Location: As set by agenda.
- H. Membership:
 1. One emergency-department physician from Community Hospital of the Monterey Peninsula.
 2. One emergency-department physician from Mee Memorial Hospital.
 3. One emergency-department physician from Natividad Medical Center.
 4. One emergency-department physician from Salinas Valley Health.

Monterey County EMS System Policy 1020

5. The Registered Nurse who is designated as the Base Hospital Coordinator from Community Hospital of the Monterey Peninsula.
6. The Registered Nurse who is designated as the Receiving Hospital Coordinator from Mee Memorial Hospital.
7. The Registered Nurse who is designated as the Base Hospital Coordinator from Natividad.
8. The Registered Nurse who is designated as the Base Hospital Coordinator from Salinas Valley Health.
9. One paramedic representing field staff of the contracted ambulance provider.
10. One paramedic representing field staff of paramedic service providers other than the contracted ambulance provider.
11. One Monterey County-certified Emergency Medical Technician, representing the first-responder agencies.
12. One representative from the County's primary ambulance contractor.
13. One representative from the authorized air ambulance providers.
14. One representative from a law-enforcement agency that provides prehospital emergency medical services, nominated by the Monterey County Chief Law Enforcement Officers' Association.

VII. CLINICAL QUALITY IMPROVEMENT COMMITTEES

A. Division 9 (Prehospital Emergency Medical Services) of Title 22 (Social Security) of the California Code of Regulations authorizes and requires the local EMS agency to develop clinical standards and quality improvement processes for the EMS system including specialty care systems related to trauma, stroke, and ST-elevation myocardial infarction (STEMI). In furtherance of this, the EMS Director has established the following ~~standing~~ Clinical Quality Improvement ~~SubeC~~Committees. Meeting attendance is only open to committee members, appointed by the EMS Director, who must sign a confidentiality agreement and guests, approved by the EMS Director, who must sign a confidentiality agreement. Clinical Quality Improvement ~~SubeC~~Committee meetings are not open to the public. Persons who violate the provisions of the confidentiality agreement may be removed from the respective Clinical Quality Improvement ~~SubeC~~Committee by the EMS Director.

1. Continuous Quality Improvement Technical Advisory Group (CQI TAG).
2. ST-Elevation Myocardial Infarction (STEMI) Quality Improvement Committee.
3. Stroke Quality Improvement Committee.
4. Trauma Evaluation and Quality Improvement Committee (TEQIC).

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~~B.~~

~~C. IV. STANDING CLINICAL QUALITY IMPROVEMENT SUBCOMMITTEES~~

~~D.~~ The EMS Director appointed the standing Clinical Quality Improvement ~~Sub~~Committees to advise the EMS Director, ~~the~~ EMS ~~Agency~~ Medical Director, and/or the other ~~standing~~ advisory committees ~~and subcommittees~~ on subjects related to specialty care programs and prehospital clinical care. With the concurrence of the EMS Director, the Chair of a Clinical Quality Improvement ~~Sub~~Committee may appoint ad hoc working groups. Such working groups shall address topics within the scope of that ~~sub~~committee.

~~B.~~

~~E.C.~~ Continuous Quality Improvement Technical Advisory Group (CQI TAG)

1. Purpose: The CQI TAG conducts reviews of cases and assesses the operations and quality of clinical care provided in the prehospital setting, emphasizing the period between the reception of the call at the primary public safety answering point (PSAP), through the first responder and ambulance provider to the emergency department. Additionally, the CQI TAG receives reports from the TEQIC, Stroke, and STEMI QI Committees and reports these to the Medical Advisory Subcommittee (MAC).
2. Members Appointed by: EMS Director, in consultation with the EMS Agency Medical Director and Staff.
3. Terms of Office: Two years, commencing on the first of July, unless the member is replaced.
4. Meeting Frequency: The Committee meets no less than quarterly or by request of the Chair, EMS Medical Director, or EMS Director.
5. Committee reports to: Medical Advisory Quality Assurance Committee, Subcommittee
6. Location: As set by agenda.
7. Quorum: No quorum requirement.
8. Membership:
 - a. One (1) representative from the Monterey County EOA ALS provider.
 - b. One (1) representative from the Monterey County EOA ALS provider's dispatch center.
 - c. One (1) Representative from the Monterey County Communications Center.
 - d. One (1) Base Hospital Coordinator from Natividad.
 - e. One (1) Base Hospital Coordinator from Salinas Valley ~~Health Memorial~~ Hospital.

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- f. One (1) Base Hospital Coordinator from Community Hospital of the Monterey Peninsula.
- g. One (1) ED Physician/Nurse Manager from Mee Memorial Hospital.
- h. One (1) representative from each of the ALS transport Fire Departments operating in Monterey County.
- i. One (1) representative from each of the ALS non-transport Fire Departments operating in Monterey County.
- j. One (1) representative from each of the BLS non-transport Fire Departments operating in Monterey County.
- k. One (1) representative from each of air ambulance provider operating in Monterey County.
- l. One (1) representative from the California Highway Patrol Air Operations in Monterey County.
- m. One (1) representative from a paramedic training program located in Monterey County.

B-D. ST-Elevation Myocardial Infarction (STEMI) Quality Improvement Committee

- 1. Purpose: The STEMI Quality Improvement Committee reviews STEMI system care and advises the Monterey County EMS Agency on STEMI system policy, organization, training, and equipment.
- 2. Members Appointed by: EMS Director, in consultation with the EMS Agency Medical Director and Staff.
- 3. Terms of Office: Two years, commencing on the first of July, unless the member is replaced.
- 4. Meeting Frequency: The Committee generally meets quarterly or by request of the Chair, EMS Medical Director, or EMS Director.
- 5. Committee reports to: ~~†~~The Continuous Quality Improvement Technical Advisory Group (CQI TAG).
- 6. Location: As set by agenda.
- 7. Quorum: No quorum requirement.
- 8. Membership:
 - a. One (1) STEMI/ Chest Pain Coordinator from Salinas Valley ~~Health~~Memorial Hospital.
 - b. One (1) Interventional Cardiologist/Cardiac Cath Lab representative from Salinas Valley ~~Health~~Memorial Hospital.
 - c. One (1) STEMI/Chest Pain Coordinator from Community Hospital of the Monterey Peninsula.
 - d. One (1) Interventional Cardiologist/Cardiac Cath Lab representative from Community Hospital of the Monterey Peninsula.

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- e. One (1) representative from Natividad.
- f. One (1) representative from Mee Memorial Hospital.
- g. One (1) representative from the Monterey County EOA ALS provider.
- h. One (1) representative from each Monterey County ALS transport Fire Departments.
- i. One (1) representative for all Monterey County BLS non-transport Fire Departments.
- j. One (1) representative from each Monterey County ALS non-transport Fire Department.
- k. One (1) representative from each Air Ambulance provider operating in Monterey County.
- l. One (1) representative from a San Benito County EMS provider or hospital.

C.E. Stroke Quality Improvement Committee

1. Purpose: The Stroke Quality Improvement Committee reviews stroke system care and advises the Monterey County EMS Agency on stroke system policy, organization, training, and equipment.
2. Members Appointed by: EMS Director, in consultation with the EMS Agency Medical Director and Staff.
3. Terms of Office: Two years, commencing on the first of July, unless the member is replaced.
4. Meeting Frequency: The Committee generally meets quarterly or by request of the Chair, EMS Medical Director, or EMS Director.
5. Committee reports to: ~~†~~The Continuous Quality Improvement Technical Advisory Group (CQI TAG).
6. Location: As set by agenda.
7. Quorum: No quorum requirement.
8. Membership:
 - a. One (1) Stroke Coordinator/ Designee from Salinas Valley ~~Health Memorial Hospital.~~
 - b. One (1) Stroke Coordinator/ Designee from Community Hospital of the Monterey Peninsula.
 - c. One (1) base hospital coordinator from Salinas Valley ~~Health Memorial Hospital.~~
 - d. One (1) base hospital coordinator from Community Hospital of the Monterey Peninsula.
 - e. One (1) representative from Hazel Hawkins Memorial Hospital.

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- f. One (1) representative from Natividad.
- g. One (1) representative from Mee Memorial Hospital.
- h. One (1) representative from the Monterey County EOA ALS provider.
- i. One (1) representative from each Monterey County ALS transport Fire Department.
- j. One (1) representative for all Monterey County BLS non-transport Fire Departments.
- k. One (1) representative from Monterey County ALS non-transport Fire Departments.
- l. One (1) representative from each air Ambulance provider operating in Monterey County.
- m. One (1) Clinical and Education Specialist from Santa Cruz and San Benito County EOA ALS provider.

D.F. Trauma Evaluation and Quality Improvement Committee (TEQIC):

1. Purpose: The Trauma Evaluation and Quality Improvement Committee (TEQIC) reviews trauma system care and advises the Monterey County EMS Agency on trauma system policy, organization, training, and equipment. Its goals are the evaluation and administration of the trauma system including system vulnerabilities, the development of policy and/or approaches to related issues such as major trauma and burn-related prehospital care, injury surveillance, trauma transfers, repatriation, and long-term outcomes.
2. Members Appointed by: EMS Director, in consultation with the EMS Agency Medical Director and Staff.
3. Terms of Office: Two years, commencing on the first of July.
4. Meeting Frequency: The Committee generally meets quarterly or by request of the Chair, the EMS Medical Director, or EMS Director.
5. Committee reports to: ~~¶~~The Continuous Quality Improvement Technical Advisory Group (CQI TAG).
6. Location: As set by agenda.
7. Quorum: No quorum requirement.
8. Membership:
 - a. One (1) representative from the Monterey County EOA ALS provider's dispatch center.
 - b. One (1) representative from the Monterey County EOA ALS provider field operations/quality improvement.
 - c. One (1) representative from each Monterey County ALS transport Fire department.

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- d. One (1) representative from each Monterey County ALS non-transport Fire Department.
- e. One (1) representative for all BLS First Responder agencies.
- f. One (1) representative from the Monterey County Coroner's Office.
- g. One (1) representative from Monterey County Law Enforcement.
- h. One (1) representative from CALSTAR.
- i. One (1) representative from Mercy Air.
- j. One (1) representative from ~~the~~ Natividad Transfer Center.
- k. One (1) surgeon or ED physician representing Salinas Valley ~~Health Memorial Hospital~~.
- l. One (1) Surgeon or ED physician representing Community Hospital ~~of~~ the Monterey Peninsula.
- m. One ED Physician or nurse representative from George L. Mee Memorial Hospital.
- n. Trauma Program Manager from Natividad.
- o. Trauma Program Medical Director from Natividad.
- p. One (1) Emergency Department physician from Natividad.
- q. Base hospital coordinator from Natividad.
- r. One (1) representative from ~~the~~ San Benito County EMS Agency.
- s. One (1) representative from Hazel Hawkins Memorial Hospital.
- t. One (1) Clinical and Education Specialist from the EOA provider in Santa Cruz and San Benito Counties.
- u. One (1) medical director for the Santa Cruz and San Benito County EMS Agencies.

~~V. COMMITTEE RELATIONSHIPS AND INTERACTIONS~~

~~A. In this committee, subcommittee, and working group hierarchy, the Clinical Quality Improvement Committees, through the Continuous Quality Improvement Technical Advisory Group (CQITAG) report to the Medical Advisory Subcommittee (MAC), which provides recommendations to the EMCC, EMS Medical Director and EMS Director. Similarly, working groups created by the Operations Subcommittee reports to the Operations Subcommittee, which provides recommendations to the EMCC, EMS Medical Director and EMS Director.~~

~~B. The structure among the EMCC, the Medical Advisory Subcommittee, Operations Subcommittee, and the Trauma, Stroke, and STEMI quality improvement subcommittees are illustrated on schematic on the following page:~~

~~VI. AUTHORITY~~

Monterey County EMS System Policy 1020

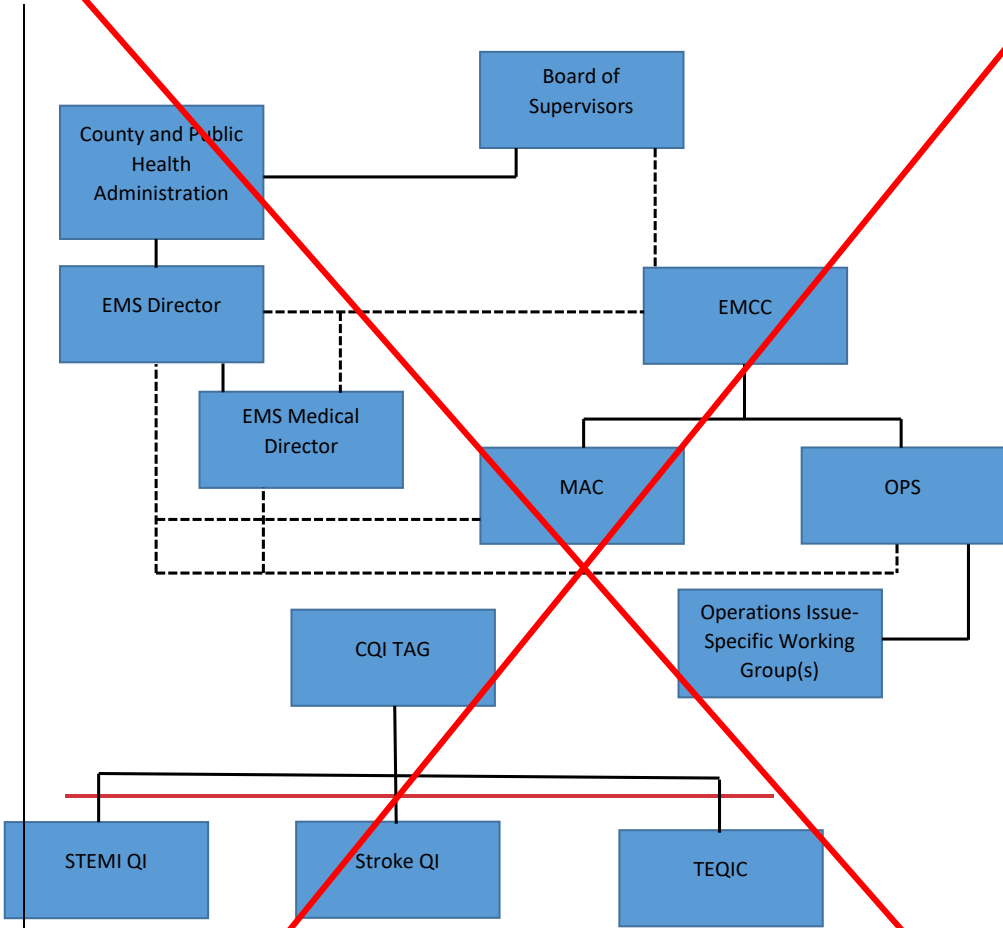
~~California Health and Safety Code, Section 1797 et seq. and 1798 et seq;~~

~~California Government Code, Section 54950 et seq.;~~

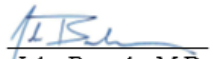
~~California Code of Regulations, Title 22, Division 9;~~

~~Monterey County Code of Ordinances, section 15.40.030~~

Monterey County EMS System Policy 1020



END OF POLICY


John Beuerle, M.D.
EMS Medical Director


Teresa Rios
EMS Bureau Chief

**BYLAWS OF THE
MONTEREY COUNTY
EMERGENCY MEDICAL
CARE COMMITTEE**

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I. PURPOSE AND AUTHORITY

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1.1 Authority. These bylaws of the Monterey County Emergency Medical Care Committee are adopted pursuant to Chapter 15.40 of the Monterey County Code and Section 1797.270 of Division 2.5 of the California Health and Safety Code.

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1.2 Purpose. The purpose of these bylaws is to establish procedures for the conduct of meetings of the Monterey County Emergency Medical Care Committee and to provide guidelines for the other activities of the Committee members.

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1.3 Definitions.

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“Board” means the Monterey County Board of Supervisors.
“Committee” means the Emergency Medical Care Committee appointed by the Board in accordance with Health and Safety Code Sections 1797.270, et seq.
“EMS Director” means the Director of the Emergency Medical Services Agency.

1.4 EMS Agency Staff. The EMS Agency Staff shall provide clerical and staff assistance to the Committee, as directed by the EMS Director. Committee members shall direct requests of staff to the EMS Director.

II. MEMBERS

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2.1 Numbers, Appointments and Term. There are twelve (12) voting members on the Committee. Each member may have an alternate, who may vote in the absence of the member. The members and alternates are appointed by the Monterey County Board of Supervisors. The term of appointment for the member and alternate shall be two years commencing on the first of July, unless the member is replaced as described in subsection 2.3 below. A member and his/her alternate may continue to serve beyond the two-year term, if necessary, until the Board is able to appoint a replacement. Members and alternates of the Committee shall be so classified by the Board of Supervisors that half of the membership have terms expiring on June 30 of each year:

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- 1 A representative from a fire-protection agency that provides prehospital emergency medical services at the “basic life support” level, nominated by the Monterey County Fire Chiefs’ Association.
- 1 A representative from a fire-protection agency that provides prehospital emergency medical services at the EMT–Paramedic level, nominated by the Monterey County Fire Chiefs’ Association.
- 1 A representative from law-enforcement agency that provides prehospital emergency medical services, nominated by the Monterey County ~~Police~~ Chiefs’ Law Enforcement Officers Association.

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- 1 A representative of hospital administration nominated by the local Hospital Council.
- 1 A representative of City Managers nominated by the Monterey County City Managers' Association.
- 1 A representative nominated by the Monterey County Resource Management Agency ~~Department~~ that works in Parks Operations.
- 3 Three citizen representatives nominated by the EMS Director with attention to appropriate geographic representation.

_____ 1 An emergency physician, ~~nominated by the Medical Advisory Subcommittee~~ nominated by the EMS Agency Medical Director.

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- 1 A Monterey County accredited EMT-Paramedic nominated by the EMS Director.
- 1 A representative of the contracted 911 Monterey County Exclusive Operating Area ambulance provider nominated by the management of the Exclusive Operating Area ambulance provider.

The EMS Director, the ~~Director of the Department Office~~ of Emergency ~~Management Services Manager~~, and the Monterey County Emergency Communications Department Director shall serve as ex officio, non-voting members of the Emergency Medical Care Committee.

2.2. Duties. The Committee shall advise the Board of Supervisors and the EMS Director on EMS system issues, including CSA 74 funding, the EMS Agency budget and training; ensure that all EMS constituents will be actively engaged in decisions regarding EMS system resources; and provide input on the development and implementation of County EMS policies, protocols, and procedures.

2.3. Vacancies and Removal of Members. A Vacancy occurs on the Committee when a member's term expires, a member resigns or dies, a member ceases to hold the office or employment which qualified the member for nomination or appointment to the Committee, or when a position is declared vacant by the Board of Supervisors upon the recommendation of the Committee due to the incumbent member's incapacity or failure to attend meetings. A vacancy shall be filled by appointment in the same manner as the appointment of the original Committee member. Any appointment to fill a vacancy shall be for the remainder of the unexpired term. If a Committee member is absent from three consecutive regular meetings, or from three of any five consecutive meetings, the Committee may recommend to the Board of Supervisors that the Board of Supervisors declare a vacancy and appoint a replacement member. The Secretary will monitor

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attendance and, whenever such absences have occurred, will put the matter on the next Committee agenda for discussion and recommendation to the Board.

2.4. Compensation. Members of the Emergency Medical Care Committee shall receive no compensation for their services.

2.5. Conflicts of Interest. No Committee member shall participate in any matter that comes before the Committee, or in any matter in which he or she is required to act in his or her capacity as a Committee member, where the Committee member has or may have a direct or indirect economic interest that may be affected as a result of such action, unless such participation is otherwise required or permitted by law. No Committee member shall undertake any activity that is inconsistent, incompatible, or in conflict with or inimical to his or her duties as a Committee member.

2.6. Appointment Requirements. Before he/she can officially serve his/her appointment, the member must complete the following

- (a) Administer the Oath of Office with the staff of the Clerk of the Board's Office or before a notary public, and sign and file the Oath of Office with the Clerk of the Board's Office;
- (b) Complete and file a current Statement of Economic Interest (Form 700) with the Clerk of the Board's Office; and
- (c) Complete a course in ethics approved by the Fair Political Practices Commission of the Attorney General within the last two years and provide a course completion certificate to the Clerk of the Board's Office.

2.7. Membership Requirements. Members are required to annually complete and file a current Statement of Economic Interest (Form 700) with the Clerk of the Board's Office by the first day of April; and provide the Clerk of the Board's Office an ethics course-completion certificate approved by the Fair Political Commission of the Attorney General every two years.

2.8. Notice to Members. Whenever written notice is required by these bylaws to be given or delivered to any of the members, notice shall be deemed given or delivered when the notice is left at the member's residence or usual place of business by personal messenger, when the notice is electronically sent by e-mail to the mail address given to the EMS Agency by the member, or five days after the notice is deposited in the U.S. Mail, first class postage prepaid, properly addressed to the member.

III. OFFICERS

3.1. List of Officers. The officers of the Emergency Medical Care Committee shall be the Chair, Vice-Chair, and Secretary.

3.2. Qualification, Selection, and Term. The Chair and Vice Chair shall be members of

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the Committee. The EMS Director shall designate an EMS Agency staff member to be the Secretary for the Committee; the Secretary is not authorized to vote at Committee Meetings. The Chair and Vice-Chair shall be elected by the Committee by July 1 st of each year, and shall serve for a period of one (1) year and until a successor has been duly elected. A Committee member shall not simultaneously hold more than one office.

3.3. Duties of Chair. The Chair shall preside at all meetings of the Committee; ~~be an ex-officio member of all subcommittees;~~ execute correspondence, conveyances, and other written instruments as authorized by the Committee; and appoint subcommittees, or representatives to various committees related to EMS services, as required.

3.4. Duties of Vice-Chair. The Vice-Chair shall, in the absence of the Chair, assume the duties of the Chair and perform such reasonable duties as may be required by the Committee or the Chair of the Emergency Medical Care Committee.

3.5. Duties of Secretary. The Secretary shall be responsible for maintaining Committee meeting minutes and other records that may be required by the Committee's activities, and shall perform such reasonable duties as may be required by the Committee or the Chair of the Emergency Medical Care Committee.

3.6. Vacancies and Removal of Officer. A vacancy in any office shall be filled by nomination and election by the Committee as soon as it is reasonable possible. Officers may be removed by a majority vote of the Committee for failure to performance the duties of the office or for malfeasance in office.

IV. AD HOC TASK FORCES, QUALITY ASSURANCE COMMITTEES, AND WORKING GROUPS

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~~4.1. Medical Advisory Subcommittee. The Medical Advisory Subcommittee is appointed by the EMS Director in consultation with the Emergency Medical Care Committee to provide input to the EMS Director, EMS Medical Director, and the Emergency Medical Care Committee on medical control and other medical issues. Membership and terms of this subcommittee shall be determined by the EMS Director in consultation with the Committee.~~

~~4.2. Operations Subcommittee. The Operations Subcommittee is appointed by the EMS Director in consultation with the Emergency Medical Care Committee to provide input to the EMS Director, EMS Medical Director, and the Emergency Medical Care Committee on operational issues involving pre-hospital emergency medical services. Membership and terms of this subcommittee shall be determined by the EMS Director in consultation with the Committee.~~

4.13. Other Standing and Ad Hoc Task Forces, SubQuality Assurance Committees, and

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Working Groups. The EMS Director may appoint ~~other standing subcommittees or ad hoc task forces, or subcommittees, quality assurance committees, or working groups~~ as needed, to advise the EMS Director, EMS Medical Director, and/or the Emergency Medical Care Committee on medical control or operational issues involving prehospital emergency medical services. Membership and terms shall be determined by the EMS Director in consultation with the Emergency Medical Care Committee.

~~4.4. Appointment and Terms of Standing and Ad Hoc Subcommittee. EMS Agency Staff members may be appointed as members of subcommittees. The Committee Chair may serve as an ex officio member of standing and ad hoc subcommittee.~~

~~4.5. Staff Assistance to Standing and Ad Hoc Subcommittees. EMS Agency staff shall provide assistance to subcommittees on request, as directed by the EMS Director.~~

~~4.6. Role of Standing and Ad Hoc Subcommittee. The role of each standing or ad hoc subcommittee is limited to the matter expressly assigned to the standing or ad hoc subcommittee by the EMS Director in consultation with the Committee. Standing and ad hoc subcommittees do not make binding decisions; and only provide recommendations and advice to the EMS Director, EMS Medical Director, and/or the Emergency Medical Care Committee.~~

V. MEETINGS

5.1. Regular Meetings – Time and Place. The Emergency Medical Care Committee shall establish a regular meeting location, date and time. The Committee shall meet at least annually to review operations of the ambulance services, and emergency medical care and training.

5.2. Special Meetings. Special meetings may be called at any time by the Committee Chair, for a specific announced purpose. At the request of the EMS Director, the Chair shall call such a special meeting. Written notice of a special meeting must be received by all Committee members at least 24 hours before the meeting. The notice must also be posted at least 24 hours before the meeting in a location that is freely accessible to the public.

5.3. Quorum. No action shall be taken by the Committee unless a quorum is present at the meeting, except as otherwise provided herein or as allowed under Roberts' Rules of Order. For Committee meetings, a quorum shall be a majority of the voting members then serving on the Committee.

5.4. Majority Vote. Actions of the Committee shall be by a majority vote of the voting members present and voting on the motion or resolution. A member who abstains from any vote shall be counted for the purpose of determining whether a quorum is present, but the vote of such abstaining member shall not be counted either for or against a measure in determining whether a majority vote has been obtained.

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5.5. Minutes. A record of proceedings in the form of minutes of the Committee shall be kept on file with the EMS Agency. A voting member who dissents from a majority vote of the Committee on a motion or resolution may submit to the Secretary, before the next regular Committee meeting, a written opinion on the relevant issue(s) for inclusion in the minutes.

5.6. Public Meetings. All meetings of the Committee shall be open to the public, unless otherwise provided by law.

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5.7. Ralph M. Brown Act.

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- (a) All meetings of the Committee ~~and any standing subcommittees~~ shall be conducted in conformity with the Ralph M. Brown Act, Government Code Sections 54950 et seq.

5.8. Voting. Voting on all motions of the Committee shall be by voice vote, calling for ayes and noes, except that if any member of the Committee or the Secretary requests a roll-call vote, either before or after the voice-vote is taken, then the vote shall be by roll call.

5.9. Agendas of Regular Meetings. At least 72 hours before regular meetings, an agenda shall be posted at the Committee's regular place of posting. The agenda shall contain a brief description of each item of business to be transacted or discussed at the meeting.

5.10. Time for Public Comment.

(a) The Chair shall provide an opportunity for members of the public to address the Committee for a period not to exceed three (3) minutes on any issue not on the Committee's agenda. The Committee will listen to all communications but need not take any action. Public participation need not be allowed on discussion of procedural issues, such as continuances, the order in which agenda items will be considered, and the like, and public participation need not be allowed on items that are presented by staff to the Committee for information only.

(b) The agenda for each regular meeting will include a regular time near the beginning of the agenda to receive public comment on items that are within the jurisdiction of the Committee and are not otherwise discussed at the meeting. The Committee is not required to respond to any issues raised during the public comment period, and may not take any action on such issues other than to refer the item to staff or schedule action for a future agenda.

5.11. Non-Agenda Items. The members may take no action on any item not previously placed on the agenda except in the following situations:

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(a) The members determine by a majority vote that an emergency situation exists. An emergency situation means work stoppage or other activity that severely impairs

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health, safety or both, or crippling disaster that severely impairs public health, safety, or both.

(b) The members determine by vote of at least two-thirds of the authorized number of members, or when less than two-thirds of the authorized number of members are present, then by unanimous vote of the members present, that the need to take action arose after the agenda was posted.

(c) The item was continued from a prior meeting held less than five (5) days before the current meeting, and the item was properly placed on the agenda for the previous meeting.

5.12. Robert's Rules of Order. Except as otherwise provided in these bylaws or in rules and regulations adopted by the members, all meetings of the members shall be conducted under Robert's Rules of Order.

5.13. Meeting Procedure. The order of business at any regular meeting shall be determined by the Chair.

5.14. Continuances and Adjournment. The members may continue any item to another meeting specified in the order of continuance, may adjourn any meeting to a time and place specified in the order of adjournment. Less than a quorum may so continue an item or adjourn a meeting. If all members are absent from any meeting, the Secretary may so adjourn the meeting, and shall provide notice of any new meeting date and time as required by law.

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VI. ADOPTION AND AMENDMENT OF BYLAWS:

6.01. These bylaws shall be adopted or amended by resolution and approval of the Monterey County Board of Supervisors.

Approved by Resolution No. _____ of the Board of Supervisors on ____ / ____ / ____.

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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: September 13, 2023
To: Monterey County Emergency Medical Care Committee (EMCC)
From: Monterey County EMS Agency
Regarding: Medical Advisory Subcommittee (MAC) Alternate Member Appointment

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 alternate appointment:

- **Chris Bourquin**, Chief of Police – City of Del Rey Oaks, representing the Law Enforcement Agencies and nominated by the Monterey County Chief Law Enforcement Officers Association

Bio: Chief Bourquin is the Chief of Police for the City of Del Rey Oaks Police Department and a member of the Monterey County Chief Law Enforcement Officers Association. He moved to Del Rey Oaks with his family in 1972. Chief Bourquin began his work with the department in March 1995 as a reserve officer and then as a full-time officer beginning in June 1995. In his nearly 28 years with Del Rey Oaks, he has held positions as a Field Training Officer, Sergeant, Commander, and Acting Chief. He is a graduate of both the FBI-LEEDA Supervisory and Command Leadership Institutes as well as the POST Executive Development Program. Chief Bourquin lives in Monterey County with his wife. Amongst his goals is to maintain the vision of his department as a model small town police department.



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: September 6th, 2023

To: Monterey County EMS Agency Medical Advisory Subcommittee (MAC)

From: Blake Andersen, EMS Analyst

Regarding: Health Data Exchange (HDE) Implementation Report

This report is to provide the committee with update on the progress of the Health Data Exchange (HDE) project, an initiative of critical importance to the EMS system to ensure compliance with requirements of hospital designation agreements, local policies and protocols, and various California State regulations, as well as to improve patient care, streamline operations, and elevate the overall quality of our services.

The EMS Agency successfully reinstated the EMS Data System Working Group. The first meeting of was held on August 28th. Representatives from all four hospitals, ESO, key stakeholders, and EMS Agency staff were in attendance. At the meeting,

- ESO provided an overview of HDE.
- Group participants shared their experience with HDE and the challenges such as
 - Issues with the exchange of demographic information
 - Missing patient outcome reports
 - Non-transporting providers are not receiving feedback.
 - Hospitals experiencing issues with hospital charts not linking patient care reports.
- ESO mentioned possible reasons the problems are occurring. EMS to explore these reasons further at meeting with ESO.
- The EMS Agency shared ESO's list of essential elements for the groups review. It was later distributed among group participants with a request to provide feedback to gain consensus as to what elements hospitals need to share.
- ESO offered to schedule a separate meeting with Monterey County Regional Fire District and AMR to address specific issues they are experiencing.

Following the August 28th, the EMS Agency

- Met with ESO to further explore the issues brought up at the August 28th meeting and explore solutions.

- Scheduled meeting with AMR and SVH to look into the with hospital charts not linking patient care reports.
- Is in the process of scheduling a meeting with Monterey County Regional Fire District and AMR to address specific issues they are experiencing.

The EMS Agency's next steps are to

- Continue to work with ESO to identify potential solutions to the issues identified
- Report findings at the next the EMS Data System Working Group. Discuss findings and gain consensus on course of action. The next meeting is being planned for the week of September 18th.

Hospital HDE Connection and Data Point Sharing Status

Natividad:

Working with ESO to expand the data points and to include hospital notes.

CHOMP

IT staff confirmed receipt of completed questionnaire from ESO and reported they are working through the review and creating required artifacts with their Technical Architecture Review Board. They also reported that their risk assessment vendor is already working with ESO.

Mee Memorial

Reported ready to start the process. A kickoff meeting is being scheduled.

SVH

Meeting with ESO and AMR scheduled to follow up on issues related to not receiving PCRs and to discuss expansion of data points being shared and to include hospital notes.



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: September 13, 2023
To: Emergency Medical Care Committee (EMCC)
From: Blake Andersen, EMS Analyst
Regarding: EMS Agency ET-3 Update

On June 28th, the Centers for Medicare & Medicaid Services (CMS) made the announcement that the Emergency, Triage, Treat, and Transport model (ET3) will be terminated by December 31st of this year. According to CMS, it was in the “public interest” to end this program early, citing low patient utilization and high costs.

After an internal discussion and careful consideration, the Monterey County EMS Agency will terminate the program locally effective September 30, 2023. We appreciate the work and energy that went into bringing this innovative program to Monterey County, but we must shift the focus of our efforts to meeting our regulatory requirements and building sustainable programs.

If you have any questions or concerns, please contact the EMS Agency.

Department of Health & Human Services
Centers for Medicare & Medicaid Services
7500 Security Boulevard,
Baltimore, Maryland 21244



June 28, 2023

TO: ET3 Model Participants

SUBJECT: Notice of Termination of the Emergency Triage, Treat, and Transport Model

Thank you for your continued efforts and commitment to the Emergency Triage, Treat, and Transport (ET3) Model.

After careful consideration, the Centers for Medicare & Medicaid Services (CMS) has decided to end the ET3 Model (the “Model”) early, on December 31, 2023, which is two years prior to the ET3 Model Participation Agreement’s (the “Agreement”) original Performance Period end date.

Article 19.3(b) of the Agreement provides that CMS may immediately or with advance notice terminate the Agreement by promptly notifying the Participant, in writing, of the effective date of the termination and the reason for such termination. CMS may terminate the Agreement if CMS determines in its sole discretion that CMS no longer has the funds to support the Model or that continuing the Model is no longer in the public interest.

CMS has determined that it is in the public interest to end the ET3 Model. CMS made this determination based on a number of factors, including the current number of interventions. Current and projected number of interventions are lower than the number anticipated when the Model was designed. This affects the cost of operating the Model relative to its expected benefits, the ability of CMS to conduct a robust quantitative evaluation of the Model’s impact, and the Model’s ability to achieve the estimated Medicare savings in the Model’s design. For these reasons, CMS has determined that it is not in the public interest to test the Model in Performance Year 4 (i.e., Calendar Year 2024) through Performance Year 5 (i.e., Calendar Year 2025) and has good cause to unilaterally amend the Agreement to modify its Performance Period.

As a result of this decision, CMS intends to release an amendment to the Agreement within 30 days of this notice to modify the Model performance period. Article 21.4 of the Agreement provides that CMS may unilaterally amend the Agreement or any Appendix thereto as specified in the Agreement, including its Appendices, or for good cause or as necessary to comply with applicable federal or State law, regulatory requirements, accreditation standards or licensing guidelines or rules.

This decision does not affect Model Participants’ participation in the Model through December 31, 2023, the ability to bill for ET3 interventions with a date of service through December 31, 2023, or the ability to receive performance-based payments. In addition, this does not impact Participants’ ability to apply for any subsequent or future models. If you have any questions, please email ET3Model@cms.hhs.gov.

Thank you for your participation in the ET3 Model.

Sincerely,

A handwritten signature in black ink that reads "Arrah Tabe-Bedward". The signature is written in a cursive, flowing style.

Arrah Tabe-Bedward, Deputy Director
Center for Medicare and Medicaid Innovation
Centers for Medicare & Medicaid Services