

San Benito County
Office of Emergency Services
Emergency Medical Services Division



ANNUAL REPORT

June 2017

INTRODUCTION

The San Benito County Emergency Medical Services Division of the Office of Emergency Services serves as the lead agency for the countywide Emergency Medical Services program. EMS is responsible for coordinating all system participants within the County and is also responsible for planning, implementing, monitoring, and evaluating the local EMS system. This includes establishing policies addressing the financial aspects of system operation, and making provisions for collection, analysis, and dissemination of EMS related data.

This document is the annual written report on Community Service Area (CSA) 36 as required by the San Benito County Code §19.07.004(A), a snapshot of the San Benito County Emergency Medical Services (EMS) system's performance in 2016.

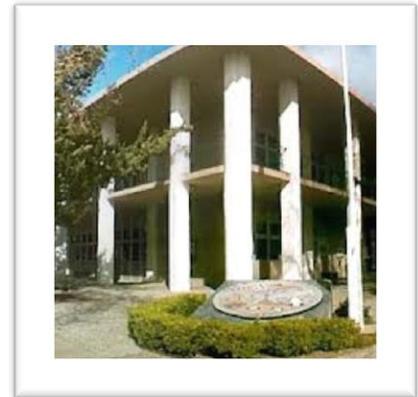
Our dedicated professionals responded to 2748 emergency calls, and this report reflects their invaluable efforts. It is a privilege to present this report on behalf of all participants in the San Benito *County EMS system*.



Kris Mangano
EMS Coordinator

FINANCIAL MANAGEMENT

CSA36 was established by the Board of Supervisors in December 1990 and affects all parcels in San Benito County. The legal description of the County of San Benito serves as the description of parcels subject to this Benefit Assessment and is included in this report as **Attachment A**.



The EMS Agency administers the CSA-36. These funds support the provisions of EMS within San Benito County; Advanced Life Support (paramedic services), including coordination and oversight of medical protocols, personnel, training, communications, and the administration of the Emergency Medical Services Agency. The latest update to the CSA 36 Fund Policy was adopted by the Board of Supervisors on May 1, 2012, and is included in this report as **Attachment B**.

Proposed Fiscal Year 2017/2018 CSA 36 Assessment

The Benefit Assessment Unit (BAU) is charged countywide and funds are used for the essential services of the EMS Agency. There is a twenty dollar (\$20) maximum charge for the BAU, and the minimum is \$14.00. The number of BAUs for FY 2017/2018 is 23,490.30. This represents an increase of 328.25 BAUs from FY 2016/2017. The assessment rate for FY 2017/2018 is proposed at \$20.00 to fund improvements to the Emergency Medical Services System within the County of San Benito. Additionally, funds will be used for relocation and build out of space at 2301 Technology Parkway for the EMS/OES offices as we have outgrown our current space.

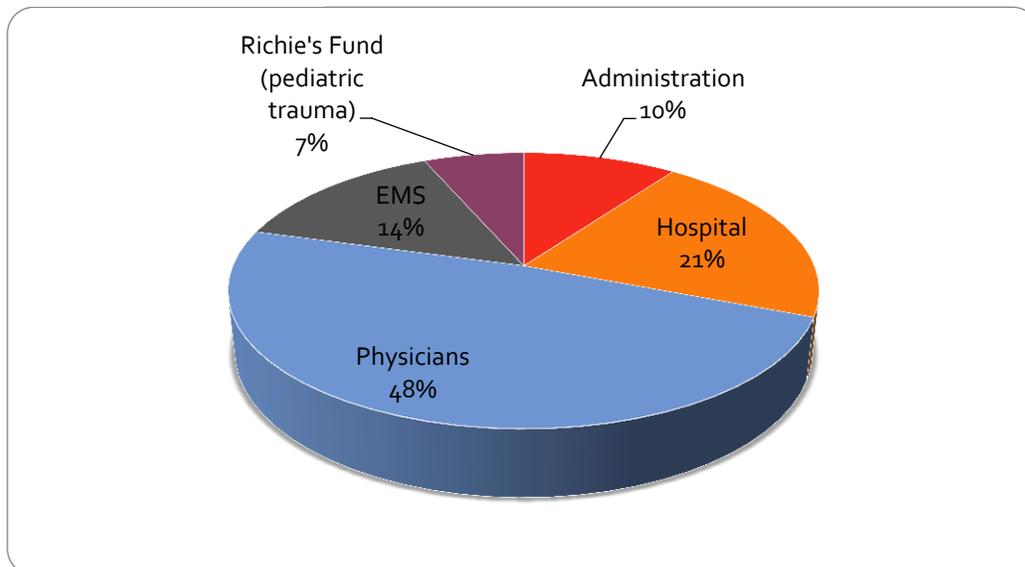
The chart below provides an overview of the dollars allocated from CSA 36 for the EMS budget in 2015/2016, 2016/2017, and proposed for FY 2017/2018.

	ACTUAL	ACTUAL	PROPOSED
	2015/2016	2016/2017	2017/2018
Expenditures	322,577.5	324,268.70	328,864.20
Benefit Assessment Units	23,041.25	23,162.05	23,490.30
CSA Charge	\$14.00	\$14.00	\$20.00

Other Sources of Revenue for the EMS Program Include:

- Maddy Funds (Government Code, Sections 76000 & 76000.5) is also administered by the EMS Agency. Pursuant to state law, up to 10% of the proceeds are available to fund the program's administration. The remaining 90% compensates health care providers for emergency medical services provided to individuals who do not have healthcare insurance and cannot afford to pay for emergency medical care, and for discretionary EMS purposes. The source of the fund is derived from penalties and assessments collected by the courts for certain violations of the Vehicle and Penal Codes, and;
- A service contract with the California Department of Parks & Recreation, Hollister Hills State Vehicular Recreation Area, and;
- Additional funding and the acquisition of fixed assets are made available through the Hospital Preparedness Program (HPP) Grant. Funds are used to pay for satellite and web-based communications. Emergency preparedness equipment and supplies are also acquired through the HPP Grant, and;
- In July 2013 the Board of Supervisors adopted a fee schedule for various services provided by the EMS Agency to cover the cost of those services. An updated fee schedule will be submitted for approval in the next month.

Maddy Fund Distribution



Equipment for Local EMS Provider Agencies

During the FY 2017/2018, it is proposed that monies continue to support the purchase and maintenance of EMS supplies and equipment. The local agencies that receive funding are the primary public safety first responders:

- Aromas Tri-County Fire Department
- Hollister Fire Department
- Hollister Police Department
- San Benito County Fire Department
- San Benito County Sheriff's Office
- San Juan Bautista Fire Department

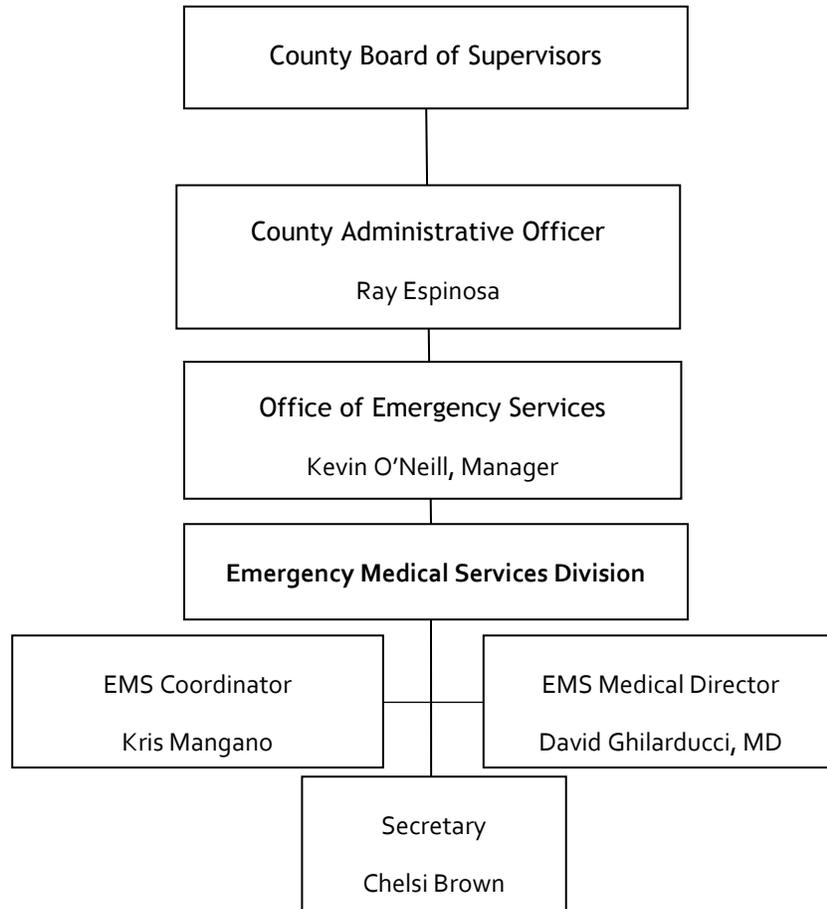
Local Public Access Defibrillator Program

Each year, more than 250,000 Americans die from sudden cardiac arrest. Early Defibrillation is one of the keys to success of the cardiac arrest Chain of Survival, when combined with early access to the 911 System, early CPR and access to Advanced Life Support (ALS). Defibrillation within three minutes of sudden cardiac arrest increases the chances of survival to 70 percent. Shock within one minute of collapse raises the survival rate to 90 percent.

With the placement of Automated External Defibrillators (AEDs) in County and City buildings, trained non-medical personnel can use these simplified electronic machines to treat a person in cardiac arrest, drastically increasing their survival rate. Funds realized from the increase of CSA 36 will afford us the opportunity to place 30 AEDs in County and City buildings and provide training.

EMS SYSTEM

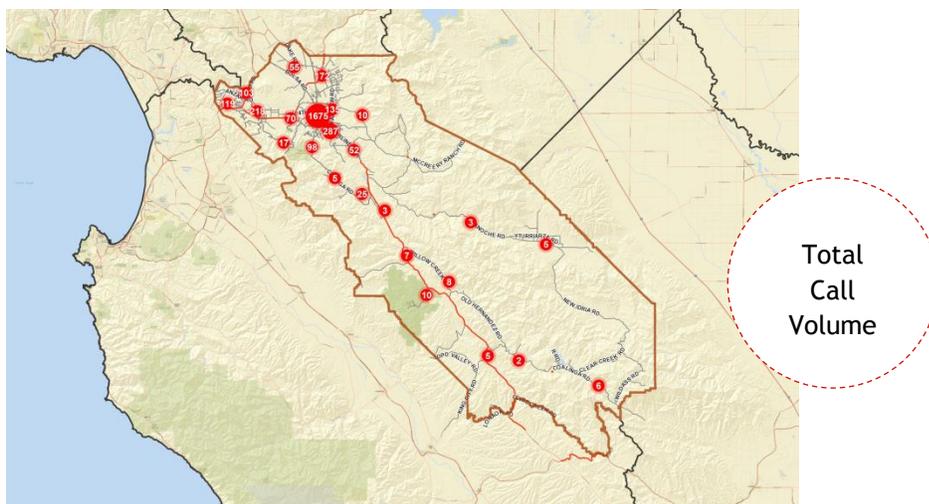
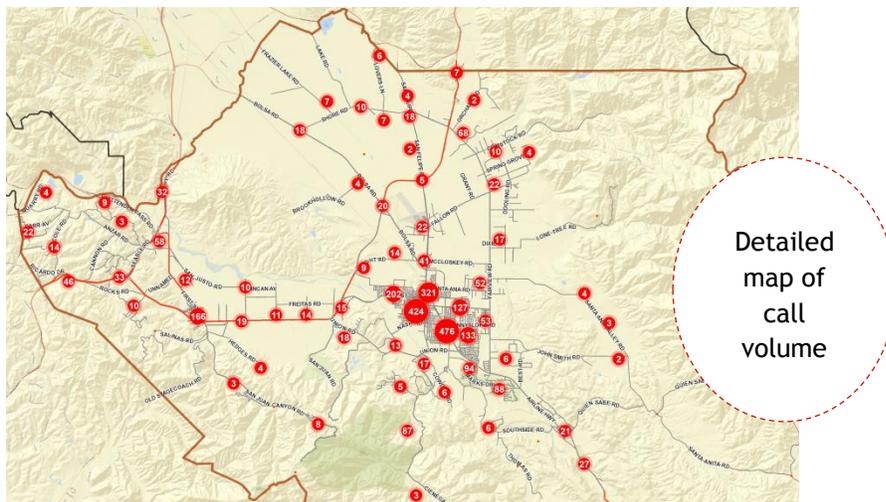
Organizational Structure



San Benito County Emergency Medical Care Committee (EMCC), acts in an advisory capacity to the Board of Supervisors and the EMS Director in regards to operational and medical issues. Per the bylaws, the EMCC shall advise and recommend EMS systems planning and oversight to the Board of Supervisors.

First Responders

The San Benito County EMS system has 6 non-transporting first response agencies, which are an important component of the EMS response. These agencies include Fire Departments and Districts, Law Enforcement agencies, State Parks and National Parks services. First Responders provide medical care at the Emergency Medical Technician (EMT) or Paramedic (EMT-P) level. The San Benito County EMS system has 3 ground ambulance transport providers, specifically American Medical Response as the contracted 911 ambulance provider for the San Benito County Exclusive Operating Area (EOA). The EMS system is also served by CALSTAR air ambulance. Typically, air ambulances (helicopters), are used to transport critically injured patients to Trauma Centers. For the January 1, 2016 - December 31, 2016 calendar year, American Medical Response responded to 2748 emergency calls. In addition, they provided 217 inter-facility transports; from Hazel Hawkins Hospital to a specialty care facility, including trauma centers, stroke and cardiac care centers and nursing homes.



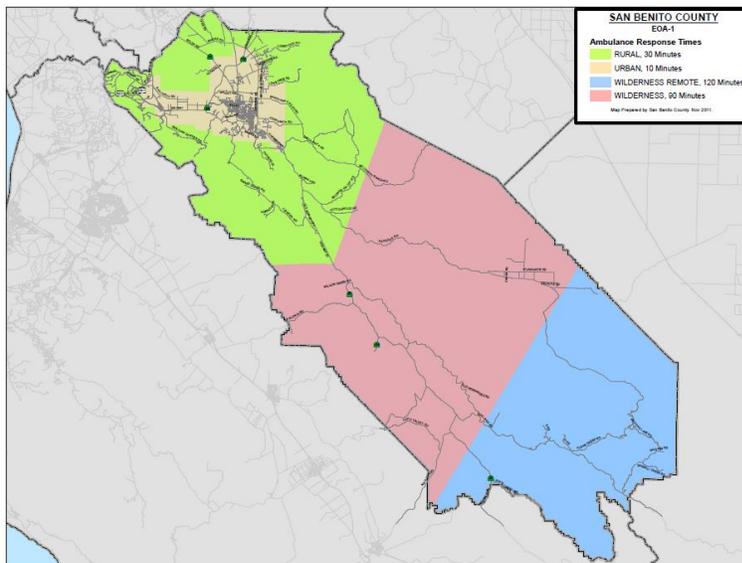
Dispatch Time Compliance

Santa Cruz Regional 911, our contracted Public Safety Answering Point (PSAP), also known as “dispatch” is responsible for answering 911 calls. After initial law enforcement triage, medical calls are transferred to secondary PSAPs, located in the same center, where Emergency Medical Dispatch (EMD) process takes place, and then an EMS response is dispatched according to professional emergency medical dispatch protocols. Dispatchers are trained and certified to standards and provide potentially life-saving pre-arrival instructions to the 911 caller. Santa Cruz Regional 911 received 3597 medical calls from residents and visitors of San Benito County in 2016.

Our contract with Santa Cruz Regional 911 stipulates dispatch time interval performance standards, specifically that 100% of all 911 calls are dispatched within 90 seconds of the dispatcher receiving the call information.

Ambulance Response Time Requirements & Performance

San Benito County is located in the Coast Range Mountains of California. The County borders Santa Clara County to the North, Merced and Fresno Counties to the East, Monterey County to the South and Santa Cruz County to the West. The County covers roughly 1,391 square miles with an estimated population of just under 60,000 people. The County has one Emergency Operational Area (EOA) consisting of urban, rural, wilderness and remote wilderness Response Zones.



American Medical Response had an average response time compliance of 95.33% in the EOA.

Emergency Medical Services System Partners

American Medical Response
 Aromas Tri-County Fire District
 Bureau of Land Management
 CalFire
 California Highway Patrol
 CALSTAR / REACH
 Hazel Hawkins Hospital
 Hollister Fire Department

Hollister Hills State Park
 Hollister Police Department
 Marquee Medical Transport
 Pinnacles National Park
 Pro Transport
 Rural Metro
 San Benito County Sheriff's Department
 Stanford Life Flight

Certification & Accreditation

Paramedics are required to obtain a California paramedic license from the State of California EMS Authority. Once a paramedic has obtained a license to practice as a paramedic, the paramedic must accredit themselves in the jurisdiction in which they are employed. Accreditation ensures that the paramedics meet the county's minimum requirements to practice and have complied with county's EMS quality improvement plan. Paramedics are required to verify compliance and update their accreditation with the County every two years.

EMTs are required by state law to possess a State of California EMT certificate before they can practice. An EMT obtains a State of California EMT certificate by applying to one of California's local EMS agencies or a certifying entity. An EMT certificate obtained through the county is valid statewide for two years.

Recent Accomplishments & Significant Events

- Policies, Procedures and Protocols - During FY 2016/2017, the EMS Agency, working closely with the EMS Medical Director, Dr. David Ghilarducci, began to comprehensively revise the EMS Policies, Procedures and Protocols Manual. Revisions include numbering sections, making policies easier to locate and creating or revising many policies, procedures and/or protocols. These manuals are critically important because they define the standards for the operations of the San Benito County EMS System, and prescribe the clinical treatments provided to all patients with the EMS System. Within the next 60 days the revised manual will be released to first responders.
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- Stroke Program - Hazel Hawkins Memorial Hospital recently became certified as a “TeleStroke” center; patients suffering from stroke or other neurologic emergencies now have 24/7 access to neurologist utilizing remote access video equipment to receive a real-time evaluation and consultation via live video. First Responders were educated on Stroke Alert notifications to the Emergency Department.
- The EMS Agency participated in the development and review of a full scale Active Shooter Exercise in November. The exercise, “Operation Red Carpet” was held at Premiere Cinemas in Hollister. The exercise provided first responders with an opportunity to train and evaluate capabilities, plans, and procedures in a training setting. It focused on decision-making, coordination, and integration with other agencies during a Multi-Casualty Incident. Participants included the FBI, Hollister Fire Dept., Hollister Police Dept., San Benito County Sheriff’s Dept., San Benito County Probation Dept., American Medical Response, San Benito County Behavioral Health Dept. SCR911, Stanford Life Flight Air Ambulance, Hazel Hawkins Hospital, the American Red Cross and CERT volunteers.
- Website and Smartphone App - Once the policies, procedures and protocols manual is released, the EMS Webpage and Smartphone App will be updated to include the current manual. The website will also be updated to include upcoming EMS educational forums and events, and content about the EMS System.
- Community Outreach - In partnership with AMR, Hollister Fire, and CALSTAR, we will be offering “hands-only CPR” training at several Farmers Markets and at the Kids in the Park event.
- State-Wide Medical Health Exercise - we are in the planning stages with San Benito County Public Health to coordinate a full scale exercise that will take place in November. We will be working with public safety agencies as well as Hazel Hawkins Hospital.
- 911 Ambulance Contract review will begin mid-2018, as the current contract expires June 30, 2019. Funds from CSA 36 will allow us to review the current system design and make necessary recommendations for the new contract.

Attachment A

THE LEGAL DESCRIPTION OF THE COUNTY OF SAN BENITO, CALIFORNIA AND COUNTY SERVICE AREA #36:

Commencing at a point in the center of the Pajaro River, said point being the northwest corner of the Rancho Las Arromitas y Agua Caliente, and being on the northern boundary line of Monterey, and running thence in a southerly direction along the southwest boundary of said Rancho to the southwest corner thereof; thence southerly in a direct line to the summit of said Gabilan Range of Mountains, and thence southeasterly along the summit of said Gabilan Mountains to the Chalone Peak; thence southeasterly in a direct line to the division line of the parts of San Lorenzo Sobrantes Rancho owned respectively by Breen and Dunn; thence along said dividing line of said Rancho to the southern boundary thereof; thence due south to the San Lorenzo Creek; thence southeasterly up the center of said Lorenzo or Lewis Creek, and up the north fork thereof, to the summit of the divide between the waters of said Lewis Creek and San Benito Creek; thence following said divide southerly to the eastern boundary of Monterey and the summit of the Coast Range Mountains; Thence northerly, following the summit of said mountains to where the range line between T. 18SI, or R. 12 and 13 E., M. D. B. & M., crosses the same; thence northerly along said range line to the northeast corner of T. 18 S., R. 12 E., ; thence northerly along said township line to the south line of T. 16 N., R. 13 E., M. D. B. & M., thence west to the southeast corner of T. 16 S., R. 12 E., M. D. B. & M.; thence northwest in a straight line to the northeast corner of T. 14 S., R. 9 E.; thence in a straight line northwesterly, running toward the northeast corner of T. 13 S., R. 7 E., to a point where said line intersects the county line between San Benito and Merced; thence along the boundary line between San Benito and Merced to the northeast corner of San Benito and southeast corner of Santa Clara; thence following the county line between Santa Clara and San Benito to the place of beginning.

Attachment B

San Benito County
Funding Policy for County Service Area 36
May 1, 2012

I. Purpose

- A. To provide a policy for the allocation of funds collected under County Service Area 36 (CSA 36).

II. Background

- A. On October 3, 1990 the San Benito County Board of Supervisors passed Resolution 90-124 which declared the intent to establish CSA 36 and provide funding for:
 - Coordination of the Emergency Medical Services system
 - Advanced Life Support (ALS) services
 - Training, equipment and improved radio communications
 - Expansion of early defibrillation programs
 - Hospital medical direction
- B. On December 4, 1990 the San Benito County Board of Supervisors passed Resolution 90-149 creating CSA 36.

III. Funding Priorities

- A. Administration of the countywide EMS system by the San Benito County Emergency Medical Services Agency (EMS Agency) as required by Health & Safety Code 1797.200
- B. Advanced Life Support Services (ALS) subsidy, if necessary and required to sustain countywide paramedic services and determined by the County Board of Supervisors and ambulance provider under contract.
- C. Base Hospital Subsidy, if necessary to provide for medical direction as determined by the County Board of Supervisors and the hospital under contract.
- D. Communications Systems necessary to support EMS functions and Advanced Life Support Services. This includes radio communications systems, and infrastructure to include initial purchase, maintenance, and replacement of equipment as necessary.
- E. Early defibrillation devices and training necessary for saving lives. This includes:
 - Initial purchase, maintenance and replacement of equipment as needed
 - Training for first responder agencies and the public
 - A Public Access Defibrillator Program
- F. Equipment and supplies used to maintain the scope of practice for the highest standard of care as determined by the EMS Medical Director. These may include, but are not limited to:
 - Equipment needed to adhere to new standards of the ALS scope of practice

- Training program equipment and supplies

(The intent of the funding is not to supplant the responsibility of first responder agencies to provide standard equipment and supplies or personal protective equipment as part of standard practices or legal requirements.)

- G. Training to maintain the scope of practice for the highest standard of care as determined by the EMS Medical Director.

IV. Equipment Purchased

- A. Equipment purchased by the EMS Agency for first responder agencies will be considered a loan from the EMS Agency to the provider. The provider and EMS Agency will sign an agreement for the loan of the equipment. The provider will be responsible for the cost to maintain and repair the equipment.