



2024-2025

SACRAMENTO COUNTY EMERGENCY MEDICAL SERVICES AGENCY

Our mission is to ensure high-quality,
patient-centered prehospital care for the
people of Sacramento County.





TABLE OF CONTENTS

- Message from the Medical Director
- About SCEMSA
- Meet The Team
- Sacramento County at a Glance
- EMS Providers
- Hospital Services
- Continuing Education & Training Programs
- Recent Projects

MEDICAL DIRECTOR MESSAGE

Dr. Gregory Kann

Sacramento County EMS Medical Director

The past 18 months—from 2024 through mid-2025—have been a time of remarkable progress and innovation across our EMS system. With deep appreciation for the dedication and partnership of our providers, healthcare partners, and system leaders, I'm proud to share some highlights of what we've accomplished together.

A major milestone has been our collective success in reducing Ambulance Patient Offload Time (APOT) from an average of over 70 minutes down to just 32 minutes in July – with a 12-month low of 27 minutes achieved in November of 2024. This improvement has required sustained collaboration and coordination, and we thank our APOT working group partners, as well as Dr. Dale Ainsworth (Associate Professor, Department of Public Health, Sacramento State University), for their leadership and facilitation in this crucial effort. Our success in this area has been recognized at the state level, and I've had the privilege of presenting our approach and results at multiple state EMS conferences as a model for collaborative system improvement.

We continue to pursue smarter and more compassionate care pathways. On April 1, 2025 we launched Triage to Alternate Destination (TAD) for behavioral health patients in collaboration with our EMS providers and our community mental health partners – Wellspace Health, Sierra Vista Hospital and the Sacramento County Mental Health Treatment Center. This program ensures that patients in behavioral crisis receive timely, specialized care in the right setting thereby avoiding unnecessary Emergency Department visits. In further support of behavioral health care in the field, we've expanded the medication toolbox available to paramedics with the addition of oral Olanzapine (Zyprexa), improving the safe and effective management of agitated patients and reducing the need for physical or chemical restraint.

Our trauma system continues to evolve with forward-thinking medical care. We achieved state-level approval for pre-hospital blood transfusion, and we are proud to be a leading local EMS agency in adopting 2g TXA (tranexamic acid) protocols for trauma patients, supporting earlier and more effective hemorrhage control in the field.

MEDICAL DIRECTOR

MESSAGE CONTINUED

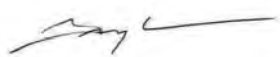
Our Mobile Integrated Health (MIH) outreach continues to grow, helping to reduce unnecessary 911 utilization, and support long-term health outcomes. This aligns with our ongoing commitment to policy modernization, including the expansion of ALS to BLS protocols, while maintaining a two-tiered EMS response model that matches the right level of care to patient need.

In support of workforce flexibility and innovation, we launched a pilot program to explore implementation of the National Scope of Practice for Advanced EMT (A-EMT) providers in Sacramento County. This initiative aims to evaluate the operational, clinical and regulatory pathways to safely expand the capabilities of this important provider level in our system.

Looking ahead, we've begun exploratory discussions on the triage of selected out-of-hospital cardiac arrest patients to ECMO-capable centers, an area with growing national interest. Our system is also actively involved in research on cardiac arrest outcomes, post-resuscitation care, and the impacts of APOT on patient healthcare outcomes.

On a personal note, I was honored to be named the California EMS Medical Director of the Year for 2024. This recognition reflects not only my commitment to excellence but more importantly, the hard work, innovation, and collaboration of our entire EMS community.

Thank you for your continued dedication. Together, we are shaping a smarter, stronger, and more responsive EMS system for the Sacramento Region.



Gregory Kann MD FACEP
Medical Director
Sacramento County EMS Agency



ABOUT SCEMSA

The Sacramento County Emergency Medical Services Agency (SCEMSA) is a vital part of the Department of Health Services. We oversee and coordinate emergency medical care across the County to ensure high-quality, timely, and professional services are available to all residents.

SCEMSA works with ambulance providers, fire departments, hospitals, law enforcement, and community partners to build and maintain a responsive EMS system. We ensure that emergency care—from the moment a call is placed to 911 to when the patient is safely transferred to a hospital—is safe, effective, and consistent.

We regulate and manage the prehospital EMS system under state law. This includes:

- Coordinating emergency medical response and specialty systems of care (Trauma, ST-elevation myocardial infarction [STEMI], and Stroke),
- Setting training standards and certifying EMTs and paramedics,
- Investigating professional standards conduct and ensuring accountability,
- Monitoring EMS performance and improving the system using data,
- Supporting disaster and emergency preparedness for the healthcare system.

SCEMSA is committed to making sure every Sacramento County resident receives the right care, at the right time, in the right place. From bustling midtown streets to the county's most rural communities, our EMS system stands ready around the clock. Our work strengthens public safety, improves healthcare outcomes, and supports disaster response throughout the county.

MEET THE TEAM

EMS System Administrator

Tom McGinnis, MHA, EMT-P

The EMS Administrator leads Sacramento County's emergency medical system, ensuring residents receive high-quality care when it matters most. This role oversees the coordination of EMS providers, develops and enforces policies, ensures compliance with state and local regulations, and works closely with hospitals, fire agencies, law enforcement, and community partners. From managing budgets to guiding disaster response, the EMS Administrator helps keep our emergency system strong, efficient, and ready to serve 24/7.



EMS Medical Director

Gregory Kann, MD FACEP

The EMS Medical Director provides medical leadership and oversight for Sacramento County's emergency medical system. This role guides the clinical direction of EMS, ensures care meets the highest medical standards, and works closely with hospitals, EMS providers, and public safety agencies. From developing protocols to reviewing complex cases, the EMS Medical Director helps ensure that residents receive safe, effective, and evidence-based prehospital care.

Operations / Emergency Preparedness Coordinator

Ben Merin, BS, EMT-P

The EMS Operations & Emergency Preparedness Coordinator supports the daily functions of Sacramento County's emergency medical system while ensuring readiness for large-scale incidents and disasters. This role develops operational plans, coordinates with EMS providers and public safety partners, and organizes training and exercises. By managing logistics and preparedness efforts, the Coordinator helps keep the EMS system ready to respond to any emergency.



MEET THE TEAM

Clinical / Specialty Systems of Care Coordinator

Katey Cloonan, BS, EMT

The Clinical & Specialty Systems of Care Coordinator oversees Sacramento County's specialty care programs, including trauma, STEMI, and stroke systems. This role works closely with hospitals, EMS providers, and public safety partners to ensure patients with time-sensitive conditions receive rapid, appropriate care. Responsibilities include coordinating with hospitals on system standards, monitoring performance, ensuring compliance with medical protocols, and supporting data-driven improvements that enhance patient outcomes.



Triage to Alternate Destination Coordinator

Kristin Bianco, EMT-P

The Triage to Alternate Destination (TAD) Coordinator manages Sacramento County's program that allows specially trained paramedics to transport eligible patients directly to mental health urgent care centers or sobering centers instead of hospital emergency departments. This role works with EMS providers, hospitals, behavioral health services, and community partners to ensure safe, effective care, reduce emergency department crowding, and connect patients with the most appropriate resources for their needs.



Advanced Life Support Liaison Specialist

Jenna Alexander, MA, EMT-P

The Advanced Life Support (ALS) Liaison works with EMS providers, hospitals, and the County Medical Director to keep Sacramento County's ALS policies current and effective. This role conducts annual inspections of ALS units, teaches paramedic orientation, and ensures providers are trained and equipped to deliver high-quality care. By addressing operational issues and supporting education, the ALS Liaison helps maintain excellence in advanced prehospital services.



MEET THE TEAM

Quality Improvement and Data Analysis

Specialist

Dorthy Rodriguez, EMDQ

The Quality Improvement and Data Analysis specialist tracks and analyzes EMS and hospital performance to ensure Sacramento County meets state and local standards. This role manages data collection, reporting, and dashboards, evaluates new policies, and supports quality improvement efforts across the EMS system. By working closely with providers, hospitals, and advisory groups, this specialist helps maintain an accountable, data-driven system that improves patient care.



Specialty Care Data & Quality Improvement Specialist

Chris DeVere, EMT-P

The Specialty Care Data & Quality Improvement Specialist analyzes data from hospitals and EMS providers to track performance in trauma, STEMI, stroke, and ambulance offload times. This role identifies trends, ensures accurate reporting, and works with hospitals and EMS agencies to improve patient care. By turning data into action, the Specialist helps guide policy updates, support quality improvement projects, and strengthen Sacramento County's specialty care systems.



Critical Care Programs Specialist

Vacant

The Critical Care EMS Specialist supports Sacramento County's specialty care systems and emergency preparedness programs. This role manages the Multi-Casualty Incident (MCI) Plan, develops and updates specialty care policies for trauma, STEMI, and stroke, and coordinates the Trauma Improvement Committee. Working with hospitals, EMS providers, and public safety partners, the Specialist helps ensure the county is ready for large-scale emergencies and delivers consistent, high-quality care.



MEET THE TEAM

Professional Standards Program and Investigations Specialist

Amanda Morse, AS, EMT

The Professional Standards Specialist enforces federal, state, and local regulations for emergency medical care and transportation in Sacramento County. This role investigates complaints, reviews evidence, and takes appropriate corrective or disciplinary action when violations occur. As Custodian of Records, the Specialist also manages criminal background checks to ensure EMS personnel meet professional standards.



Continuing Education (CE) Provider and Training Program Specialist

Jenna Jimenez, USAF Veteran, AS, AA, EMT

The Continuing Education & Training Specialist oversees all EMS training and continuing education programs in Sacramento County, including EMT, paramedic, MICN, and EMR courses. This role manages program approvals, site visits, and compliance with state and national standards, while also tracking optional scope items, AED registrations, and Narcan program requirements. By ensuring high-quality education and regulatory compliance, the Specialist helps maintain a well-trained and prepared EMS workforce.



Budget and Contracts Administrative Services Officer

Holly Winberry, BA

The EMS Administrative Services Officer manages the agency's budgets, contracts, and administrative operations. This role oversees purchasing, fiscal reporting, and grant facilitation, coordinates contracts from bidding to execution, and serves as the main point of contact for facilities and technology systems. By providing essential financial and operational support, the Administrative Services Officer helps keep the EMS Agency running efficiently and effectively.



MEET THE TEAM

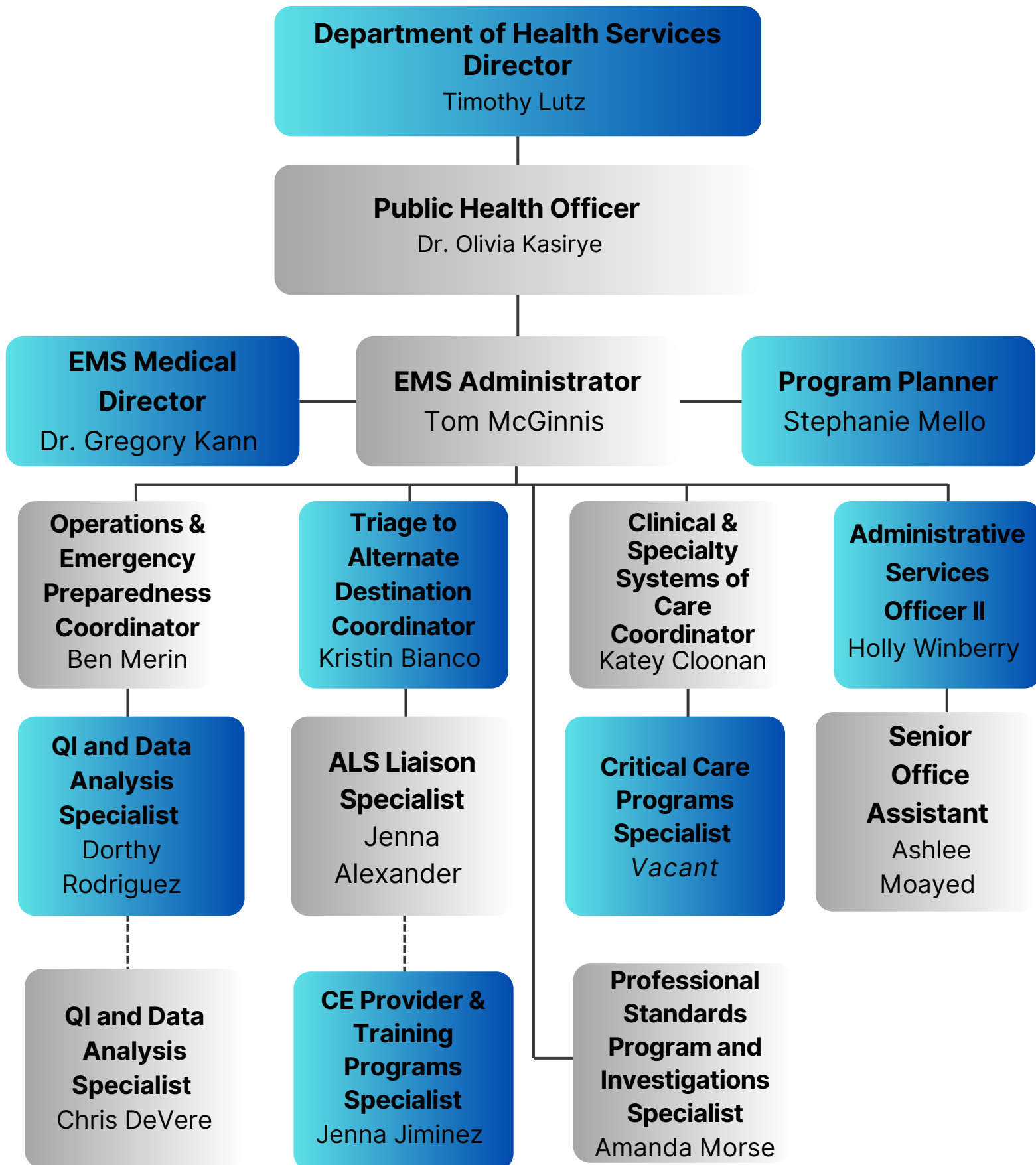
Certifications and Administrative Support Senior Office Assistant

Ashlee Moayed, AA

The Senior Office Assistant provides front-line customer service and administrative support for Sacramento County EMS, managing calls, emails, and licensure applications for emergency medical personnel. This role oversees the ImageTrend Licensure System, builds new applications and forms, and develops tools to support agency programs. Additionally, the Senior Office Assistant manages the agency's social media, leads website projects, and ensures ADA compliance for public-facing resources.



ORGANIZATIONAL CHART



SACRAMENTO COUNTY AT A GLANCE

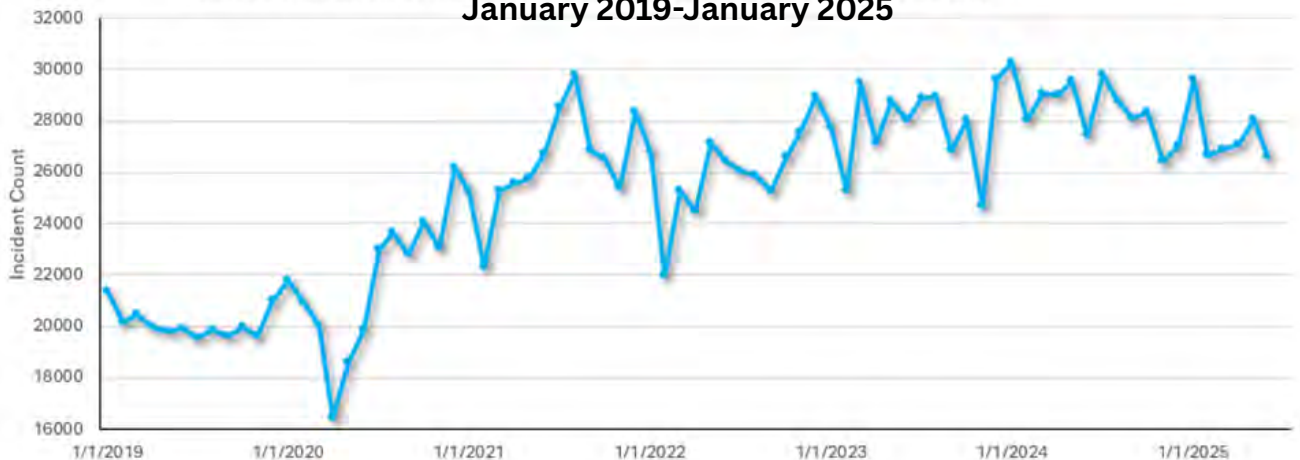
Population 1,578,398

Square Miles 994

**Incorporated
Cities** 7



**Total EMS Responses by Month
January 2019-January 2025**



Counts include emergency calls, interfacility transfers, and other medical responses.



Sacramento's Hospital Bed Capacity

340

Emergency
Room Beds

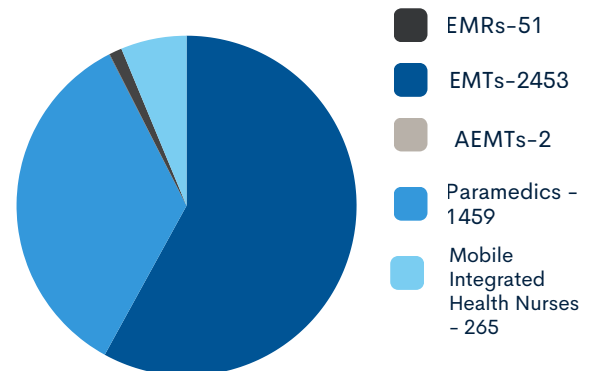


2300

Staffed
inpatient
beds



Number of EMS Personnel



2024 SACRAMENTO COUNTY EMS AT A GLANCE

1,578,398 Sacramento County
Population

Sacramento County has one of the largest populations in California, and its EMS system is in place to meet the emergency medical needs of this growing community.



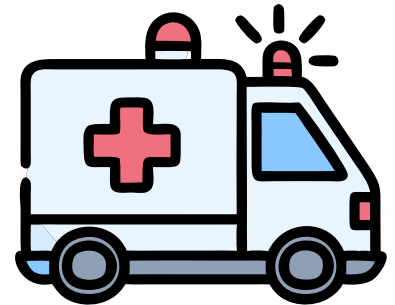
246,594 Total EMS
Responses in 2024

Total 911 EMS responses represents the number of emergency calls dispatched to provide immediate medical assistance to the community.

56.4%

of 911 total EMS responses in
2024 resulted in a patient being
transported to the hospital

Not every 911 call results in transport to a hospital - some patients are treated on scene or directed to more appropriate care options.



125,656 Non-Emergency
Ambulance Responses

These routine calls - often moving stable patients between hospitals (known as Interfacility Transfers, or IFTs) - make up a large share of our EMS workload. They keep ambulances busy around the clock, even when it's not a life-or-death emergency.

13,471 Emergency Transports to
Emergency Departments

Emergencies where the ambulance transported a patient to the hospital with lights and sirens, indicating a serious condition requiring immediate care.



COUNTYWIDE EMS PROVIDERS

Sacramento County is served by both fire departments and private ambulance companies, working in coordination to provide emergency response and patient transport.

ADVANCED LIFE SUPPORT (ALS) SERVICES PROVIDERS – FIRE DEPARTMENTS

- Cosumnes CSD Fire Department
- Folsom Fire Department
- Sacramento City Fire Department
- Sacramento Metropolitan Fire District
- Sacramento County Airport Fire Department
- Wilton Fire Protection District



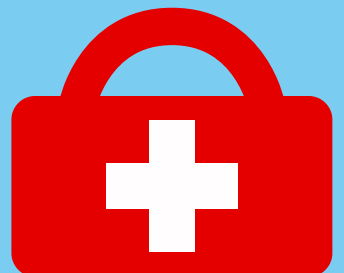
ADVANCED LIFE SUPPORT (ALS) SERVICES PROVIDERS – AMBULANCE COMPANIES



- AlphaOne Ambulance
- American Medical Response
- Bay Medic Transportation
- California Highway Patrol
- Medic Ambulance Service
- NORCAL Ambulance
- ProTransport-1
- REACH Air Medical Services

BASIC LIFE SUPPORT (BLS) SERVICE PROVIDERS

- AMWest
- America West
- Citizens Medical Response
- Courtland Fire Protection District
- County Medical Response
- Falcon Ambulance
- Herald Fire Protection District
- Isleton Fire Department
- River Delta Fire District
- S7 Medical Transport
- Trauma Life Care Medical Transport Inc.
- VersaCare Emergency Medical Services, Inc.
- Walnut Grove Fire Protection District



COUNTYWIDE HOSPITAL SERVICES

9 ACUTE CARE HOSPITALS

- Kaiser Permanente - North
- Kaiser Permanente - South
- Mercy Hospital Folsom
- Mercy General Hospital
- Mercy San Juan Medical Center
- UC Davis Medical Center
- Methodist Hospital Sacramento
- Sutter Medical Center Sacramento
- Veterans Affairs Medical Center

2 OUT OF COUNTY ACUTE CARE HOSPITALS

- Sutter Roseville Medical Center
- Kaiser Permanente - Roseville



TRAUMA HOSPITALS

- Kaiser Permanente - South
- Mercy San Juan Medical Center
- UC Davis Medical Center
- Sutter Roseville Medical Center

ST ELEVATED MYOCARDIAL INFARCTION RECEIVING CENTERS



- Kaiser Permanente - South
- Kaiser Permanente - Roseville
- Mercy General Hospital
- Mercy San Juan Medical Center
- Sutter Medical Center Sacramento
- Sutter Roseville Medical Center
- UC Davis Medical Center



STROKE RECEIVING CENTERS

- Kaiser Permanente - North
- Kaiser Permanente - South
- Mercy General Hospital
- Mercy San Juan Medical Center
- Sutter Medical Center Sacramento
- UC Davis Medical Center
- Methodist Hospital Sacramento
- Sutter Roseville Medical Center
- Kaiser Permanente - Roseville
- Mercy Hospital Folsom

EMS Continuing Education & Training Programs

SCEMSA oversees accredited education programs to ensure EMS providers maintain skills and meet continuing education requirements



EMS Continuing Education Training Programs

A continuing education program provides ongoing training to keep professionals' skills current, ensure compliance with standards, and improve the quality of care.

- AlphaOne Ambulance Medical Services
- American River College
- California State University, Sacramento
- Capital City CPR, LLC
- Cosumnes Fire Department
- Cosumnes River College
- Dignity Health Collaborative Learning Centers
- EMS XCEL, LLC
- Folsom Fire Department
- International School of Tactical Medicine
- Kaiser Permanente - North
- Kaiser Permanente - South
- NorCal EMS Training
- Sacramento City Fire Department
- Sacramento Metropolitan Fire District
- Walnut Grove Fire District
- Sacramento County Department of Airports
- Sacramento County EMS Agency
- Sotera Analytic Solutions, LLC
- University of California Davis Medical Center
- River Delta Fire District
- REACH Air Medical Services



Emergency Medical Responder Programs

Entry-level training that prepares individuals to provide immediate lifesaving care before EMTs or paramedics arrive.

- Walnut Grove Fire Department
- American River College
- Cosumnes Fire Department (Community Services District)
- Cosumnes River College
- Herald Fire District
- Sac Fire Community Emergency Response Team



Emergency Medical Technician Programs

Training that prepares providers to deliver essential emergency care, stabilize patients, and transport them safely to the hospital.

- American River College
- California State University, Sacramento
- Cosumnes River College
- Folsom Lake College - Rancho Cordova
- Project Heartbeat, LLC
- River Delta Fire District
- Walnut Grove Fire Department



Paramedic Programs

Advanced training that prepares providers to deliver the highest level of prehospital emergency care, including medications, advanced procedures, and critical decision-making.

- American River College
- California State University, Sacramento



Mobile Intensive Care Nurse (MICN)

Specialized training for registered nurses to provide medical direction to paramedics in the field and ensure patients receive the right care and destination.

- Mercy San Juan Medical Center
- Methodist Hospital
- UC Davis Medical Center

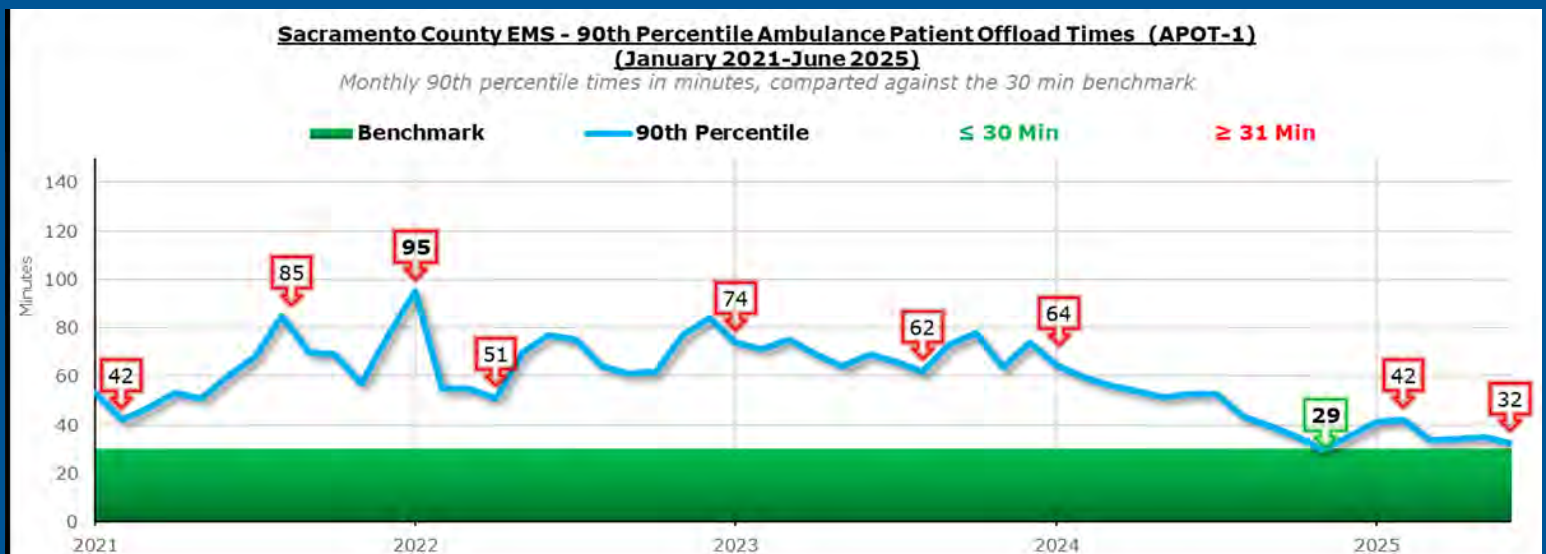


AMBULANCE PATIENT OFFLOAD TIMES

Ambulance Patient Offload Time (APOT) refers to the time it takes for a patient to be transferred into the care of emergency department staff after arriving at a hospital by ambulance. In busy hospitals, a bed may not be immediately available, requiring ambulance crews to wait with their patient until space and staff are ready. During this time, the ambulance is unavailable to respond to other 911 calls, potentially delaying emergency care for others in need.

Extended APOTs are often driven by crowded emergency departments, high patient volumes, and staffing shortages. These delays directly impact how quickly EMS can respond to the next emergency.

To reduce APOT, we've engaged in ongoing, collaborative efforts with key EMS stakeholders—including emergency departments, field providers, and EMS leadership. Our approach also brings broader healthcare partners into the conversation, such as hospital executives, skilled nursing facilities, psychiatric treatment centers, and managed healthcare plans. This inclusive, systems-level strategy is unique to California and is beginning to reveal innovative solutions for managing APOT more effectively.



This graph shows Ambulance Patient Offload Times (APOT) for Sacramento County from January 2021 to June 2025, comparing actual times to the 30-minute benchmark.

SACRAMENTO COUNTY'S EFFORTS TO LOWER APOT

REGIONAL SUMMIT & COLLABORATIVE CULTURE

In February 2024, SCEMSA organized an APOT Summit bringing together EMS, fire departments, hospitals, county officials, and private ambulance services. The goal: shift the mindset from finger-pointing to “caring for the next patient.” This teamwork sparked widespread process improvements.



LOCAL HOSPITAL TASK FORCES

Sacramento County's Hospitals formed internal task forces to quickly offload patients from ambulances into ED care. Process tweaks and staff reallocations helped shave minutes off offload times.



FORMAL APOT MITIGATION PROTOCOLS (AB 40 COMPLIANCE)

As of September 2024, all hospitals must maintain APOT Mitigation Plans aligned with Assembly Bill 40.

These include triggers when offload times exceed 30 minutes, activating surge protocols, staff alerts, transferring patients, suspending elective admissions, opening alternate care sites, and more rapid internal coordination



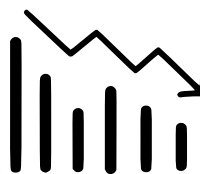
ONGOING DATA MONITORING AND FEEDBACK

Hospitals and SCEMSA now regularly monitor APOT metrics, enabling data-driven escalation and continuous improvement. Reports, dashboards, and direct notifications help expose bottlenecks and guide change



RESULTS & BENCHMARKS

Within a year, the 90th percentile (near-worst) offload time dropped dramatically—from an average of 73 minutes in December 2023 to under 30 minutes by late 2024–2025.



TRIAGE TO ALTERNATE DESTINATION (TAD)



WHEN CAN TAD BE UTILIZED?

- 911 patients whose needs can be safely met outside a hospital ER
- Mental health crisis without serious medical issues
- Alcohol intoxication with no other medical problems
- Direct transport to mental health urgent care or a sobering center
- Not for life-threatening emergencies (chest pain, severe bleeding, trouble breathing, major injuries) – these patients will always go to an ER

TRIAGE TO ALTERNATE DESTINATION IN SACRAMENTO COUNTY

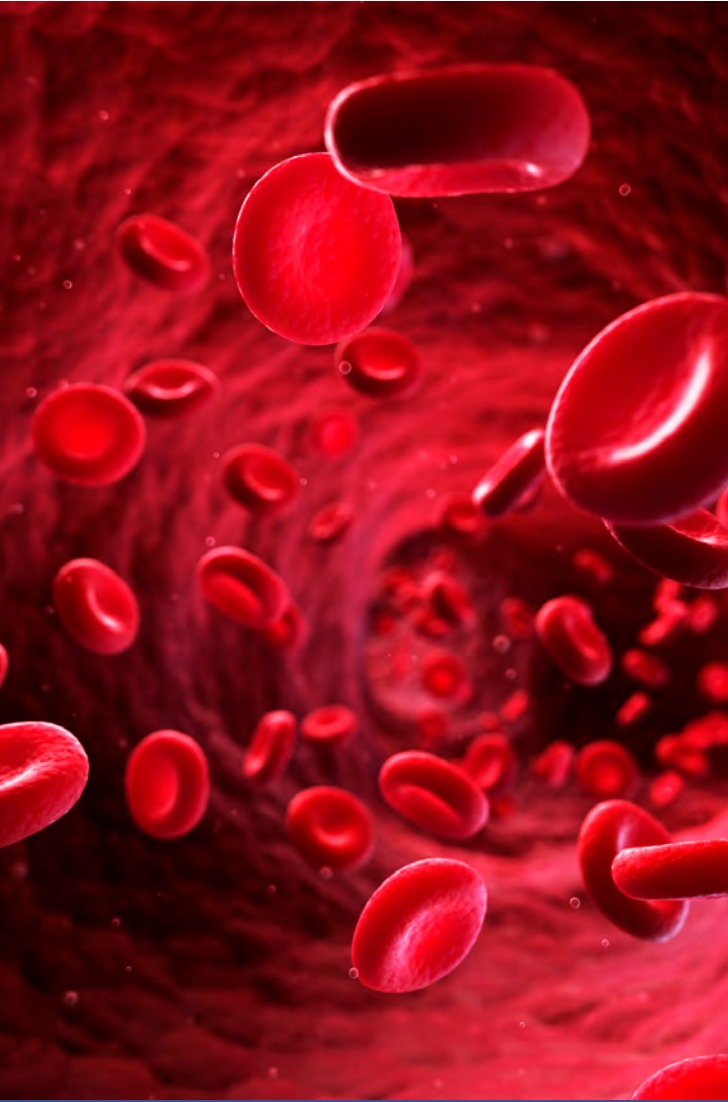
Not every patient that calls 911 needs to be transported to the ER. TAD paramedics can safely take certain patients to mental health facilities or sobering centers instead—getting help faster and keeping ERs available for critical care.



MAKING A DIFFERENCE

TAD helps patients get the right care faster while easing strain on hospital emergency rooms. By taking eligible patients directly to specialized care, it reduces ER crowding, shortens ambulance delays, and keeps emergency resources available for people with life-threatening conditions.

ADVANCING EMS WITH PREHOSPITAL BLOOD



BRINGING BLOOD TO THE FIELD

In trauma cases, rapid blood loss can be life-threatening within minutes. Providing whole blood at the scene or during transport gives patients the best chance of survival by restoring oxygen delivery and supporting clotting before they reach the hospital.

A SYSTEM-WIDE EFFORT

This program is a collaboration between EMS providers, trauma centers, and local blood banks. Paramedics will carry and administer whole blood under strict protocols, ensuring it's available where it's needed most—saving lives before patients even arrive at the hospital.





SACRAMENTO COUNTY EMERGENCY MEDICAL SERVICES AGENCY

