

EMERGENCY MEDICAL SERVICES AUTHORITY

10901 GOLD CENTER DR., SUITE 400
RANCHO CORDOVA, CA 95670
(916) 322-4336 FAX (916) 322-1441



September 15, 2021

Mr. Dave Magnino, EMS Administrator
Sacramento County Emergency Medical Services Agency
9616 Micron Avenue, Suite 960
Sacramento, CA 95827

Dear Mr. Magnino:

This letter is in response to Sacramento County's 2020 emergency medical services (EMS) plan, and the St-Elevation Myocardial Infarction (STEMI), Stroke, Trauma, and Quality Improvement (QI) plan submissions to the EMS Authority on July 2, 2021.

The EMS Authority has reviewed the EMS plan, based on compliance with statutes, regulations, and case law. It has been determined the plan meets all EMS system components identified in Health and Safety Code (HSC) § 1797.103 and is approved for implementation pursuant to HSC § 1797.105(b). Based on transportation documentation provided, the EMS Authority has noted your Emergency Ambulance Zone as Non-Exclusive and has enclosed for reference.

The EMS Authority has also reviewed the STEMI, Stroke, Trauma, and QI plans, based on compliance with Chapters 7, 7.1, 7.2, and 12 of California Code of Regulations, Title 22, Division 9, and has approved for implementation.

In accordance with HSC § 1797.254, please submit an annual EMS plan to the EMS Authority on or before September 14, 2022. Please also submit an annual STEMI, Stroke, Trauma, and QI plan concurrently with the EMS plan. If you have any questions regarding the EMS Plan review, please contact Ms. Lisa Galindo, EMS Plans Coordinator, at (916) 431-3688.

Sincerely,

A handwritten signature in blue ink that reads 'Tom McGinnis - EMT-P'. The signature is stylized and includes a small heart symbol above the 'i' in 'Ginnis'.

Tom McGinnis, EMT-P

Chief, EMS Systems Division

Enclosure

tm:lg

<p>Sacramento County 2020 EMS Plan Ground Exclusive Operating Areas</p>	<p>Non-Exclusive</p>	<p>Exclusive</p>	<p>Method to Achieve Exclusivity</p>	<p>Emergency Ambulance</p>	<p>ALS</p>	<p>LALS</p>	<p>All Emergency Ambulance Services</p>	<p>9-1-1 Emergency Response</p>	<p>7-digit Emergency Response</p>	<p>ALS Ambulance</p>	<p>All CCT Ambulance Services</p>	<p>IFT</p>	<p>Standby Service with Transport Auth.</p>	
<p>ZONE</p>	<p>EXCLUSIVITY</p>		<p>TYPE</p>			<p>LEVEL</p>						<p>NOTES</p>		
<p>Sacramento County</p>	<p>X</p>													



Divisions

Behavioral Health Services
Primary Health
Public Health
Departmental Administration

County of Sacramento

July 2, 2021

Dave Duncan, MD, Director
Emergency Medical Services Authority
10901 Gold Center Drive, Suite 400
Rancho Cordova, CA 95670

Dear Dr. Duncan:

Please see the attached annual updates to the Sacramento County 2020 Emergency Medical Services (EMS) Plan, the 2020 Trauma System Annual Update, the 2020 Annual Quality Improvement Program (QIP), 2020 STEMI Critical Care System Annual Update and the 2020 Stroke Critical Care System Annual Update. These are submitted in accordance with *Health and Safety Code Sections 1797.103 and 1797.250 – 1797.258* and *Title 22, Division 9, Chapter 7.1, STEMI Critical Care System, Chapter 7.2, Stroke Critical Care System and Chapter 12, EMS System Quality Improvement.*

EMS PLAN ANNUAL UPDATE

No significant changes were made to the EMS Plan during the past year. Key items are noted in each section.

FORM 1: EMS Plan System Assessment Summary

A. System Organization and Management

1.03 – Employment of Medical Director:

- Medical Director's contract was increased from 0.3 to 0.5 position. This helps with oversight demands resulting from the addition of the STEMI and Stroke Critical Care Programs.

B. Manpower and Training

2.13 – Critical Care Paramedic Training and Accreditation:

- In 2020, a private provider requested this program but the EMS Agency does not have staff nor funding to oversee the program at this time.

D. Response and Transportation

4.01 – Primary Response Area:

- The EMS Agency has executed Advanced Life Support (ALS) Provider Agreements with private providers.
- We worked with Public Fire Service providers to create and execute ALS Provider Agreements. As of April 15, 2021, we have executed ALS Provider agreements with the Public Fire Service providers.

4.05 – Response Time Standards:

- We are currently utilizing National Response Time Standards as benchmarks. Plans are in process to implement Sacramento County Response Time Standards by the end of calendar year 2021.

4.07 – Creation of Exclusive Operating Area and Approval:

- Sacramento County is a Non-Exclusive Operating Area.

E. Assessment of Hospitals and Critical Care Centers

5.04 – Critical Care System:

- STEMI and Stroke Critical Care programs were added in 2019. Designations and contracts were completed in 2020.

F. Data Collection and Evaluation

6.04 – Electronic Patient Health Information Exchange:

- At this time, there are no plans to implement a patient health information exchange program.

6.09 – Ambulance Patient Offload Times:

- EMS stakeholders established the Ambulance Patient Offload Time (APOT) metric at 20 minutes. In 2020, the system wide 90th percentile APOT was forty-seven (47) minutes.

6.10 – Data Collection from Specialty Care Centers:

- Trauma – The three Sacramento County trauma centers submit data electronically; the Placer County trauma center submits data manually.
- STEMI and Stroke – Designated STEMI and Stroke centers submit data manually on a quarterly basis.

H. Disaster Medical Response

8.14 – Mutual Aid Requests in EOA Areas:

- Not applicable. Sacramento County is a non-exclusive operating area.

TABLE 2: Manpower and Training

EMS Agency Certification:

- There was a slight increase in the number of personnel investigations in 2020 as compared to 2019. This increase occurred because staff continued to use and follow the *Recommended Guidelines for Disciplinary Orders and Conditions of Probation for EMT (Basic) and Advanced EMT*. A larger number of initial applicants with prior convictions led to more denials of applications.

Available Training:

- Nearly all prehospital providers are continuing education (CE) providers.

TABLE 4: Response and Transportation

System Standard Response Times (90th Percentile):

- With over one year of data submitted to California EMS Information System (CEMSIS) from all ALS providers, the EMS Agency continues to provide updates of system wide 90th percentile standard response times to stakeholders during regular meetings.

Provider Resource:

- During the fourth quarter of 2020, American West Ambulance started the process to become an ALS provider. They are expected to be approved in 2021.

TRAUMA SYSTEM STATUS REPORT

The narrative includes improvement information provided to EMSA regarding the Sacramento County Trauma System. Key changes included:

Trauma System Goals and Objectives:

- Trauma Review Committee (TRC) provides unique educational opportunities to region wide physicians and administrators.
- The EMS Agency works closely with the trauma centers to ensure accurate data is submitted to the CA Trauma Registry and presented in the quarterly TRC meetings.

System Performance Improvement:

- The EMS Agency worked with the TRC to update several prehospital trauma polices, including adding the use of Tranexamic Acid (TXA) by paramedics. Monitoring usage of TXA is a current project of the QI program.
- Continued to work with trauma surgeons and managers to identify seven (7) relevant indicators to improve the trauma system.
- Worked with prehospital EMS providers to improve documentation practices to ensure prehospital Trauma Alerts are being conducted and reported.

QUALITY IMPROVEMENT PROGRAM ANNUAL UPDATE

2020 Highlights:

- Continued work to define consistent documentation standards and improve the quality and accuracy of data submission.
- Developed and implemented dashboards to report data on three (3) focused elements.
- Continued to improve tracking of ambulance patient off-load times (APOT). Provided comparisons between 2019 and 2020 APOT data to stakeholders on a monthly basis.

Active Projects include the following:

- Continued focus on the "Documentation Initiative" to improve prehospital care. This includes:
 - Cardiac Arrest, New Medications, and Spinal Motion Restriction policy
- Continue to monitor Law Enforcement Administration of Naloxone Program for the following:
 - Properly trained officers in handling and administration
 - Data collection
 - Feedback provision

2019 STEMI CRITICAL CARE SYSTEM ANNUAL UPDATE

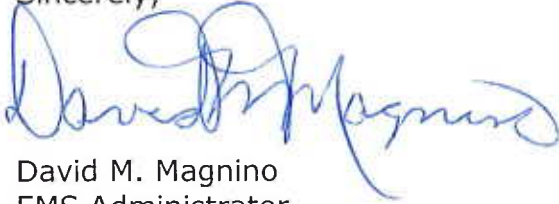
- Approved and executed contracts with several hospitals for designation as Sacramento County approved STEMI Receiving Centers.
- Began the work with STEMI Advisory Committee to identify proposed data reporting platforms available.
- In 2021, STEMI data will be collected via American Heart Association's Get With The Guidelines – Coronary Artery Disease.

2019 STROKE CRITICAL CARE SYSTEM ANNUAL UPDATE

- Approved and executed contracts with ten hospitals for designation as Sacramento County approved Stroke Receiving Center or Comprehensive Stroke Center.
- Began the work with Stroke Advisory Committee to identify proposed data reporting platforms available.

Please do not hesitate to call me at (916) 875-9753 if you have questions.

Sincerely,



David M. Magnino
EMS Administrator



Hernando Garzon, MD
Medical Director

Attachments: (5)
EMS Plan Annual Update
Trauma System Annual Update
Quality Improvement Program Annual Update
STEMI Critical Care System Annual Update
Stroke Critical Care System Annual Update

Cc: Sandy Damiano, PhD, Deputy Director, DHS, Primary Health

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



A. SYSTEM ORGANIZATION AND MANAGEMENT	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
1.01 Organizational Structure	✓		
1.02 EMS Administration Budget	✓		
1.03 Employment of Medical Director	✓		Established contract with Kaiser Permanente for an half-time medical director
1.04 Medical Control	✓		
1.05 Expert Consultation	✓		
1.06 Public Input on Plans, Policies, Procedures	✓		
1.07 Establishment of Policies, Procedures, Protocols	✓		
1.08 Availability of Policies, Procedures, Protocols	✓		
B. MANPOWER AND TRAINING	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
2.01 EMT & AEMT Certification in Central EMT Registry	✓		There is no AEMT certified in Sacramento County. There is no plan to implement an AEMT Program in the future.

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



B. MANPOWER AND TRAINING (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
2.02 EMT & AEMT Discipline	✓		
2.03 EMT & AEMT Certification Status	✓		
2.04 EMT & AEMT Certification Reporting to National Practitioners Database	✓		
2.05 Paramedic Accreditation	✓		
2.06 RN & MICN Standards	✓		
2.07 EMT, AEMT, Paramedic Training Program Compliance	✓		There are no AEMT Training Program(s) in Sacramento County.
2.08 EMT Training Course Challenge	✓		
2.09 EMS Provider Reporting of EMT & AEMT Actions or Omissions	✓		
2.10 Reporting of Paramedic Actions or Omissions	✓		

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



B. MANPOWER AND TRAINING (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
2.11 Suspension of Paramedic License			Not Applicable
2.12 Prophylactic Medical Treatment for Public Safety Personnel, Lifeguards, EMTs, AEMTs, & Paramedics	✓		
2.13 Critical Care Paramedic Training & Accreditation		✓	At this time there is no plan to implement Critical Care Paramedic Training
2.14 Training Standards for EMTs & Paramedics Managing Complex Patients	✓		
2.15 Procedures for Management of Complex Patients	✓		
C. COMMUNICATIONS	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
3.01 Review and Approval of Medical Dispatch Centers	✓		
3.02 City and Fire District Dispatch	✓		
3.03 Medical Dispatch Center Protocols	✓		

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



C. COMMUNICATIONS (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
3.04 EMD Certification	✓		
3.05 Medical Communication System Plan	✓		
3.06 Emergency System for Inter-hospital Communication	✓		
D. RESPONSE AND TRANSPORTATION	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
4.01 Primary Response Area		✓	There are no signed ALS Provider Agreements with the ALS Public Safety Providers at this time. We are working with providers to execute agreements in 2021
4.02 Provider Selection	✓		
4.03 Authorization of Advanced EMT & Paramedic Service Providers	✓		
4.04 Advanced Life Support Provider Application	✓		
4.05 Response Time Standards		✓	At this time, Sacramento County does not have Response Time standards established. We currently utilize the National Response Time Standards as bench marks. Plan to implement by end of calendar year 2021.
4.06 System Status Management	✓		
4.07 Creation of Exclusive Operating Area and Approval		✓	Sacramento County is a Non-Exclusive Operating Area. There is no plan to establish Exclusive Operating Areas in the future

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



E. ASSESSMENT OF HOSPITALS AND CRITICAL CARE CENTERS	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
5.01 Hospital and Health Facility Designation	✓		
5.02 Acute Care Facility Assessment and Specialty Care System Development	✓		
5.03 Patient Safety and Non-Permit Facility in Rural Area			Not applicable
5.04 Critical Care System	✓		STEMI and Stroke Critical Care System programs were added in late 2019 with designations and contracts executed for hospitals.
F. DATA COLLECTION AND EVALUATION	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
6.01 Data Management System Compliancy with CEMISIS/NEMSIS	✓		
6.02 Electronic Health Record Data	✓		
6.03 Integrated Data Management System using CEMISIS/NEMSIS	✓		
6.04 Electronic Patient Health Information Exchange		✓	No plan to implement program in near future.

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



F. DATA COLLECTION AND EVALUATION (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
6.05 Prehospital EMS and Specialty Care Data through CEMISIS/NEMSIS	✓		
6.06 EMS QA/QI Program	✓		
6.07 EMS Service Provider QI Program	✓		
6.08 EMS Quality Core Measures	✓		
6.09 Ambulance Patient Offload Times		✓	APOT metric set at 20min, in 2020 the 90th Percentile APOT time system wide was: 47min
6.10 Data Collection from Specialty Care Centers		✓	We currently receive data from the three trauma centers. We currently request data to be submitted manually on an as needed basis from STEMI / STROKE hospitals.
G. PUBLIC INFORMATION AND EDUCATION	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
7.01 Public Information Improvement	✓		
7.02 Program for Public Awareness of EMS System	✓		
7.03 Public Training on First Aid, Bleeding Control, CPR	✓		

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



G. PUBLIC INFORMATION AND EDUCATION (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
7.04 Public Education on Injury and Illness Prevention	✓		
7.05 Public Training and Education on Disaster Preparedness	✓		In partnership with County Public Health
H. DISASTER MEDICAL RESPONSE	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
8.01 Multi-Casualty Response Plans Using ICS/SEMS	✓		
8.02 Medical Response Plans	✓		
8.03 Distribution of Disaster Casualties	✓		
8.04 MHOAC Coordinator	✓		
8.05 Situation Status Reporting & Communication of Emergency Requests	✓		
8.06 Identification of EMS Resources	✓		
8.07 Medical Mutual Aid Agreements	✓		

FORM 1: EMS PLAN SYSTEM ASSESSMENT SUMMARY



H. DISASTER MEDICAL RESPONSE (cont.)	Minimum Standard		Objective If standard not met, explain how and when standard will be met.
	Meets	Does Not Meet	
8.08 Disaster Medical Training of EMTs & Paramedics	✓		
8.9 Integration of Hospitals' Disaster Emergency Plan	✓		
8.10 Development of Medical & Health Disaster Plan	✓		
8.11 Hospital Evacuation	✓		
8.12 Increase in Prehospital EMS Needs	✓		
8.13 Specialty Care Center Role in Disasters	✓		
8.14 Mutual Aid Requests in EOA Areas			Not applicable - Sacramento County is a Non-Exclusive Area.

FORM 3: AMBULANCE OPERATING ZONE SUMMARY FORM



Date: MArch 1, 2021	
Local EMS Agency or County Name: Sacramento County EMS Agency	
Area Description: (e.g., Zone 1, Zone A) Sacramento County	
Title: Sacramento County	
Geographic Description: (Also attach map) Geographic boundaries of Sacramento County.	
Current Provider Name: (include legal, fictitious, and dba) <small>1. Alpha One Ambulance, 2. American Medical Response, Inc. 3. Bay Medic Transportation, 4. California Highway Patrol, Capitol Protection Division, 5. CALSTAR Air Ambulance, 6. Cosumnes CSD Fire District, 7. Falck Ambulance Services, 8. Folsom City Fire Department, 9. Medic Ambulance Services, 10. NorCal Ambulance 11. REACH Air Ambulance, 12. Sacramento City Fire Department, 13. Sacramento Metropolitan Fire District, 14. Trauma Life Care (TLC) Inc., 15. Pro Transport 1 Ambulance, 16. Sacramento Valley Ambulance,</small>	
<input type="checkbox"/> Exclusive <input checked="" type="checkbox"/> Non - Exclusive	
Type of Exclusivity (HSC § 1797.85): (Check all applicable boxes)	
<input type="checkbox"/> Emergency Ambulance <input type="checkbox"/> Advanced Life Support (ALS) <input type="checkbox"/> Limited Advanced Life Support (LALS)	
Scope of Operations: (Check one box)	
<input type="checkbox"/> 9-1-1 Emergency Ambulance <input type="checkbox"/> 7-Digit Emergency Ambulance	
<input type="checkbox"/> ALS Ambulance <input type="checkbox"/> All ALS Ambulance Services (9-1-1, 7-Digit, IFT)	
<input type="checkbox"/> All CCT/ALS Ambulance Services (CCT, 9-1-1, 7-Digit) <input type="checkbox"/> BLS Non-Emergency Services (IFT)	
<input type="checkbox"/> Critical Care Transport <input type="checkbox"/> Standby Service with Transport Authorization	
<input checked="" type="checkbox"/> All Emergency Services (9-1-1, 7-Digit, IFT, CCT, Non-Emergency, Standby Transportation) <input type="checkbox"/> Other	
<div style="text-align: right;"> <hr style="width: 100%;"/> <hr style="width: 100%;"/> <hr style="width: 100%;"/> </div>	



TABLE 1: SYSTEM ORGANIZATION AND MANAGEMENT

EMS Agency Overview

Local EMS Agency: Sacramento County

Plan Year: 2020

EMS Director/Administrator: David Magnino

EMS Medical Director: Dr. Hernando Garzon

Physical Address: 9616 Micron Ave. Suite 960
Sacramento, CA 95827

Type of Agency: County Health Services Agency
 Public Health Department
 Joint Powers Agency
 Non-Health County Department
 Private Non-Profit Entity

Number of Counties in Local EMS Agency: 1

Counties within Regional Agency: _____

Population of EMS system: 1,495,400

Local EMS Agency responsibility: Hospital Preparedness Program
 Public Health Emergency Preparedness Program
 Other: _____

EMS Agency Organization

Organizational Charts Attached: County Structure EMS Agency

EMS Agency Budget

Fiscal Year: 2020-21

Expenses for EMS agency administration services only:

Expense Category	Total
Salaries and Benefits (not contracted staff)	\$ 977,783
Contract Services	\$ 362,500
Services and Supplies	\$ 1,705,276
Total Expenses*	\$ 3,045,559



TABLE 1: SYSTEM ORGANIZATION AND MANAGEMENT

EMS Agency Budget (cont.)

Revenue received for EMS agency administration services only:

Revenue Category	Total
County General Fund (local tax funds, county health realignment funds, etc.)	\$ 162,319
County Health Realignment Funds	\$
Maddy EMS Fund (LEMSA discretionary funds only)	\$ 249,115
Grant Revenue	\$ 43,175
Fees	\$ 939,043
Other:	\$ 1,651,907
Total Revenue*	\$ 3,045,559

Provide brief explanation if totals do not equal: _____

EMS Agency Fee Structure

Effective Date of Fees: 7/1/2020

	Item	Fee	Comment
Certifications	First responder certification	\$	
	First responder re-certification	\$	
	EMS dispatcher certification	\$	
	EMS dispatcher re-certification	\$	
	EMT certification	\$ 50.28	
	EMT recertification	\$ 50.28	
	EMT accreditation	\$	
	EMT re-accreditation	\$	
	AEMT certification	\$	
	AEMT recertification	\$	
	Paramedic accreditation	\$ 95.32	
	Paramedic re-accreditation	\$ 95.32	
	MICN/ARN certification	\$ 37.57	
	MICN/ARN recertification	\$ 37.57	
Program Approval	EMR training program approval	\$ 1,575	
	EMT training program approval	\$ 1,547.88	
	AEMT training program approval	\$	
	Continuing education provider	\$ 435.48	
	Paramedic training program approval	\$ 8,425.55	
	EMS dispatch program approval	\$	
	MICN/ARN training program approval	\$ 903.31	



TABLE 1: SYSTEM ORGANIZATION AND MANAGEMENT

EMS Agency Fee Structure (cont.)

	Item	Fee	Comment
Designation	Base hospital application	\$	
	Base hospital designation	\$	
	Emergency receiving center designation	\$	
	Pediatric facility approval	\$	
	Pediatric facility designation	\$	
	STEMI/Cardiac center application	\$	
	STEMI/Cardiac center designation	\$ 13,650/\$6,825	In County/Out of County Hospital
	Stroke center application	\$	
	Stroke center designation	\$ 13,650/\$6,825 \$19,425	In County/Out of County/ Comprehensive
	Trauma center application	\$	
	Trauma center designation	\$ Varies	Lv 1 UC Davis = \$123,477. Lv 2: Mercy San Juan=\$67,670. Kaiser South=\$67,364. Roseville=\$5,560
	Other	Ambulance licensure	\$
Ambulance vehicle permits		\$	
Ambulance franchise fee		\$	
Paramedic course tuition		\$	
Other: <u>ALS Provider Fee</u>		\$ 17,253.11	

EMS Agency Staffing

Total full-time equivalent (FTE) staff dedicated to EMS administration: 7.5

Roles	Classification	Contract (Yes/No)	FTE	Annual Salary Range	Actual Annual Salary	Benefits (% of Salary)	Benefits (Cost)
EMS Administrator	EMS Administrator	No	1.0	\$127,034- \$140,032	\$184,617	24%	\$44,585
Asst./Deputy EMS Administrator				\$	\$	%	\$
EMS Medical Director	Medical Director	Yes	0.5	\$	\$122,500	0%	\$0
EMS Coordinator	EMS Coordinator	No	1.0	\$90,744- \$110,300	\$162,457	32%	\$52,157
EMS Specialist	EMS Specialist Lv 2	No	3.0	\$68,716-\$83,520	\$111,878- \$128,206	35%	\$39,381- \$44,686
CQI Coordinator				\$	\$	%	\$
Trauma Coordinator				\$	\$	%	\$
EMS Analyst				\$	\$	%	\$
Senior Procedures Analyst (IT)				\$	\$	%	\$
Administrative Assistant	Administrative Services Officer II	No	1.0	\$79,114- \$96,152	\$126,338	24%	\$30,186
Office Assistant III	Senior Office Assistant	No	1.0	\$41,134-\$50,008	\$74,305	31%	\$23,195
				\$	\$	%	\$
				\$	\$	%	\$
				\$	\$	%	\$
				\$	\$	%	\$



TABLE 2: MANPOWER AND TRAINING

County: Sacramento

Reporting Year: 2020

EMS Agency Training Program

Do you have a process for approving EMS education programs and for monitoring and withdrawing approvals of the EMS education programs to ensure continued compliance with statute? Yes No

Do you have an EMR Training Program? Yes No

EMS Agency Certification

	EMT - I	EMT - II	EMT - P	MICN	NON-EMT – I (Public Safety)
Total certified	757		765	153	19
Number newly certified this year	319		117	58	19
Number recertified this year	438		648	95	0
Total accredited on July 1 of reporting year	391		454	65	1
Number of certification reviews resulting in:					
• Formal investigations	26				
• Probation	1				
• Suspensions	N/A				
• Revocations	N/A				
• Denials	3				
• No action taken	10				
Number of personnel authorized/certified in:					
• Early defibrillation					



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-4870 Expiration Date of Training Program: 07/26/2021

Student Eligibility: Restricted
(Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic 0 Refresher 0

Training Institution: AlphaOne Ambulance Phone Number: (916)635-2011

Address: 10461 Old Placerville Rd Contact Name: Matt Burruel
Sacramento CA 95827 suite 110

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													1052
Number of students completing training													1141



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-3000 Expiration Date of Training Program: CE/3/22/22 EMT-P 9/18/24

Student Eligibility: General Public
 (Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic 750-2500 Refresher _____

Training Institution: American River College Phone Number: 916-484-8843

Address: 4700 College Oak Drive Contact Name: Dr. Grant Goold
Sacramento, CA 95814

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered	12												13
Number of students completing training	200												50



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-4930 Expiration Date of Training Program: CE-1/22/2022/10/18/22

Student Eligibility: Open (Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic \$1400 Refresher _____

Training Institution: California Fire & Rescue Training Authority Phone Number: (916) 475-1668

Address: 3121 Gold Canal Drive Contact Name: Joe Gear
Rancho Cordova, CA 95670

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered	3	0											
Number of students completing training	59	0											



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-4910 Expiration Date of Training Program: 9/30/2020

Student Eligibility: Employees Only
(Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic 0 Refresher 0

Training Institution: CALSTAR Phone Number: 916-921-4026

Address: 4933 Bailey Loop Contact Name: Kim Duggins
McClellan, CA 95652

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													224
Number of students completing training													1760



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-1090 Expiration Date of Training Program: 3/31/2021

Student Eligibility: Restricted
(Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic _____ Refresher _____

Training Institution: Cosumnes Fire Department Phone Number: 916-405-7131

Address: 10573 E. Stockton Blvd Contact Name: Chief Rick Clarke
Elk Grove, CA 95624

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													23
Number of students completing training													687



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-3300 Expiration Date of Training Program: 07/05/2022

Student Eligibility: Open to public
(Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic 500 Refresher 150

Training Institution: Cosumnes River College Phone Number: 916-412-0981

Address: 8401 Center Parkway Contact Name: Matthew McHugh
Sacramento, CA 95823

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered	2	1											2
Number of students completing training	45	20											15



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-4900 Expiration Date of Training Program: 11/30/22

Student Eligibility: Open to General Public
 (Open to general public or restricted) EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic _____ Refresher _____

Training Institution: Dignity Health Collaborative Learning Center **Phone Number:** 916-733-6347

Address: 1700 Tribute Road, Sacramento CA 95815 **Contact Name:** Stacy Williams

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													12
Number of students completing training													1736



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-4860 Expiration Date of Training Program: 03/24/22

Student Eligibility: Restricted
 (Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic 0 Refresher _____

Training Institution: DMAT CA-11 Phone Number: 916-606-5205

Address: 10161 Croydon Way #2 Contact Name: Ed Miles
Sacramento, CA 95827

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													4
Number of students completing training													42



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-1030 Expiration Date of Training Program: 01/21/22

Student Eligibility: Restricted
(Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic 0 Refresher 0

Training Institution: Folsom Fire Department Phone Number: 916-461-6300

Address: 535 Glenn Dr Contact Name: Mark Piacentini
Folsom CA 95630

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													8
Number of students completing training													69



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-4920 Expiration Date of Training Program: 1/15/2022

Student Eligibility: Restricted
 (Open to general public or restricted) Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education Program Cost: Basic 2990 Refresher _____

Training Institution: ISTM Phone Number: 760-880-4102

Address: PO Box 2609 Contact Name: Lawrence Heiskell
Rancho Mirage, CA 92270

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													2
Number of students completing training													49



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-2090 Expiration Date of Training Program: 02/28/22

Student Eligibility: Restricted
 (Open to general public or restricted) Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education Refresher

Program Cost: Basic 0 Refresher 0

Training Institution: Kaiser Permanente North Sacramento Phone Number: 916-973-6626

Address: 2025 Morse Ave Contact Name: Richard Meidinger
Sacramento, CA 95825

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													0
Number of students completing training													0



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-2060 Expiration Date of Training Program: 9/29/2022

Student Eligibility: Restricted
 (Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic na Refresher na

Training Institution: Kaiser Permanente South Sacramento Phone Number: 916-201-4265

Address: 6600 Bruceville Road Contact Name: Wendin Gulbransen
Sacramento CA 95823

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													6
Number of students completing training													36



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-020 Expiration Date of Training Program: June 17, 2022

Student Eligibility: Restricted
 (Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic \$150 / \$250 Refresher _____

Training Institution: Mercy San Juan Medical Center **Phone Number:** 916.962.8721

Address: 6501 Coyle Avenue **Contact Name:** Paula Green RN
Carmichael, California 95608

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													3
Number of students completing training													55



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-2100 Expiration Date of Training Program: 10/25/22

Student Eligibility: Restricted
 (Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic _____ Refresher _____

Training Institution: Methodist Hospital of Sacramento Phone Number: 9164236103

Address: 7500 Hospital Dr. Contact Name: David Perry
Sacramento, CA 95823

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													0
Number of students completing training													0



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-4880 Expiration Date of Training Program: _____

Student Eligibility: Open to Public
(Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic 250.00 Refresher _____

Training Institution: NorCal Emergency Medical Training Phone Number: 916-787-1787

Address: 1512 Eureka Road, Suite 105
Roseville, CA 95661 Contact Name: Dave Mullarky

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													527
Number of students completing training													2847



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 01-0053 Expiration Date of Training Program: 6/13/2021

Student Eligibility: General Public
 (Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic 2195 Refresher 375

Training Institution: Project Heartbeat Phone Number: 510.452.1100

Address: 2033 Howe Ave, Suite 150 Contact Name: Eric Kim
Sacramento, CA 95825

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered	6	3											
Number of students completing training	94	19											



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-3950 Expiration Date of Training Program: 9/19/2021

Student Eligibility: Open to General public
 (Open to general public or restricted) AEMT EMT-I EMT-P EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic _____ Refresher _____

Training Institution: River Delta Fire District Phone Number: (925) 658-0332

Address: 16969 Jackson Slough Road Contact Name: Paul Cutino
Isleton, CA 95641

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													2
Number of students completing training													45



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-1050 Expiration Date of Training Program: 1-26-2022

Student Eligibility: Employees only
(Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic 0 Refresher 0

Training Institution: Sacramento City Fire Department Phone Number: 916-808-1654

Address: 5770 Freeport Blvd, Ste 200 Contact Name: Brian Pedro
Sacramento, CA 95822

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													11
Number of students completing training													565



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-3500 CE-1/17/2022, Paramedic 10/31/2023, EMT 1/17/2024
Expiration Date of Training Program: _____

Student Eligibility: Open EMT-I AEMT EMT-P
 (Open to general public or restricted) EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic E-\$1,500, P-\$13,500 Refresher _____

Training Institution: California State University, Sacramento, College of Continuing Education **Phone Number:** 916-278-4846

Address: 3000 State University Drive **Contact Name:** Kim Ramirez
Sacramento, CA 95819

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered	6				1								1
Number of students completing training	119				34 In Progress								34



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-1020 Expiration Date of Training Program: 09/20/2022

Student Eligibility: Restricted
(Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic N/A Refresher N/A

Training Institution: Sacramento County Airport Fire **Phone Number:** 916-224-8366

Address: 7201 Earhart Dr **Contact Name:** BC Rob Brown
Sacramento, CA. 95837

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													6
Number of students completing training													46



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: 34-1010 Expiration Date of Training Program: 7/31/21

Student Eligibility: Restricted
 (Open to general public or restricted)

Program Level: EMT-I AEMT EMT-P
 EMR Public Safety First Aid
 Continuing Education

Program Cost: Basic \$0 Refresher \$0

Training Institution: Sacramento Metropolitan Fire District Phone Number: 916-616-2451

Address: 10545 Armstrong Ave. Suite 200 Contact Name: Captain Greg Markel
Mather CA 95655

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	
Number of courses offered													38
Number of students completing training													607



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: _____	Expiration Date of Training Program: <u>9/2021</u>
Student Eligibility: <u>Restricted</u> <small>(Open to general public or restricted)</small>	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input checked="" type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input type="checkbox"/> Continuing Education
Program Cost: Basic <u>0</u> Refresher <u>0</u>	
Training Institution: <u>Sacramento Fire CERT</u>	Phone Number: <u>916-718-8786</u>
Address: <u>3230 J Street</u> <u>Sacramento, CA 95816</u>	Contact Name: <u>Robert Ross</u>

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered								16						
Number of students completing training								16						



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-2050</u>	Expiration Date of Training Program: <u>10-14-2021</u>
Student Eligibility: <u>Open</u> <small>(Open to general public or restricted)</small>	Program Level: <input type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic _____ Refresher _____	
Training Institution: <u>University of California, Davis Medical Center</u>	Phone Number: <u>916-734-5323</u>
Address: <u>2315 Stockton, CA PSSB 2100A</u> <u>Sacramento, CA 95817</u>	Contact Name: <u>David M. Buettner</u>

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.		
Number of courses offered													6	
Number of students completing training													186	



TABLE 2: MANPOWER AND TRAINING

Available Training

Continuing Education Number: <u>34-1160</u>	Expiration Date of Training Program: <u>5/19/21</u>
Student Eligibility: <u>Open to Public</u> <small>(Open to general public or restricted)</small>	Program Level: <input checked="" type="checkbox"/> EMT-I <input type="checkbox"/> AEMT <input type="checkbox"/> EMT-P <input type="checkbox"/> EMR <input type="checkbox"/> Public Safety <input type="checkbox"/> First Aid <input checked="" type="checkbox"/> Continuing Education
Program Cost: Basic <u>1200</u> Refresher _____	
Training Institution: <u>Walnut Grove Fire</u>	Phone Number: <u>(916) 776-1284</u>
Address: <u>14160 Grove Street</u> <u>Walnut Grove, CA 95690</u>	Contact Name: <u>Gary Volkman</u>

Training Program Statistics for Reporting Year 2020

Initial = In. Refresher = Ref.	EMT-I		AEMT		EMT-P		EMR		Public Safety		First Aid		Continuing Educ.	
	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.	In.	Ref.
Number of courses offered	0	0											0	0
Number of students completing training	0	0											0	0



TABLE 3: COMMUNICATIONS

County: Sacramento County

Reporting Year: 2020

EMS Agency Communications Structure

Number of primary Public Service Answering Points (PSAP):	<u>13</u>
Number of secondary PSAPs:	<u>1</u>
Number of dispatch centers directly dispatching ambulances:	<u>12</u>
Number of EMS dispatch agencies utilizing EMD guidelines:	<u>13</u>
Number of designated dispatch centers for EMS aircraft:	<u>3</u>

Who is your primary dispatch agency for day-to day emergencies?

Sacramento Regional Fire / EMS Communication Center

Do you have an operational area disaster communication system? Yes No

a) Identify the radio primary frequency: 800 MHz Trunked System

b) Identify other methods: Cell Phone, Satellite Phones and Landline

c) Can all medical response units communicate on the same disaster communication system? Yes No

d) Do you participate in the Operational Area Satellite Information System? Yes No

e) Do you have a plan to utilize the Radio Amateur Civil Emergency Services as a back-up communication system? Yes No

1) Within the operational area? Yes No

2) Between operational area and the region and/or state? Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020

Dispatch Agency: Alpha One Name of Primary Contact: Dan Husum

Address: 10461 Old Placerville Rd. Ste 110 Telephone Number: 916-504-4262
Sacramento, CA 95827

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training 17 EMT-D _____ ALS _____

BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 17

Ownership: Public Private

If Public: Fire Law Other _____

If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020

Dispatch Agency: AMR Sacramento Name of Primary Contact: Timothy Reeser

Address: 1041 Fee Drive Telephone Number: 1-800-913-9112
Sacramento, CA 95815

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training 64 EMT-D 64 ALS _____

BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 64

Ownership: Public Private

If Public: Fire Law Other _____

If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020
Dispatch Agency: Bay Medic Ambulance Name of Primary Contact: Josh Enea
Address: 959 Detroit Avenue Telephone Number: 925-689-9067
Concord, CA 94518

Written Contract: Yes No
Medical Director: Yes No
Availability: Day-to-Day Disaster
Number of Personnel Providing Services:
EMD Training 7 EMT-D _____ ALS 5
BLS 68 LALS _____ Other _____
Total Number of Dispatchers: 8

Ownership: Public Private
If Public: Fire Law Other _____
If Public: City Fire District County Federal State

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020

Dispatch Agency: CHP: Office of Air Operations Name of Primary Contact: Ron Wilson

Address: 601 N. 7th Street Telephone Number: 916-943-3303
Sacramento, CA 95811

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____

BLS _____ LALS 5 Other _____

Total Number of Dispatchers: _____

Ownership: Public Private

If Public: Fire Law Other _____

If Public: City State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento **Reporting Year:** 2020
Dispatch Agency: CHP-Capitol Protectice Services **Name of Primary Contact:** Shawna Hainsworth
Address: 1801 Ninth Street **Telephone Number:** 916-445-2895
Sacramento, CA 95811-7011

Written Contract: **Medical Director:** **Availability:** **Number of Personnel Providing Services:**
 Yes Yes Day-to-Day EMD _____ EMT-D _____ ALS _____
 No No Disaster BLS _____ LALS _____ Other 16

Total Number of Dispatchers: 16

Ownership: **If Public:** **If Public:**
 Public Fire City Fire District
 Private Law County Federal
 Other _____ State

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020

Dispatch Agency: Medic Ambulance Name of Primary Contact: Sandra Whaley

Address: 506 Cough Street Telephone Number: 916-564-9011
Vallejo, CA 94590

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training 13 EMT-D _____ ALS _____

BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 18

Ownership: Public Private

If Public: Fire Law Other _____

If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020

Dispatch Agency: NORCAL Ambulance Name of Primary Contact: John Brooks

Address: 18115 Stockton Blvd Telephone Number: 916-812-9465
Sacramento, CA 95816

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training	<u>14</u>	EMT-D	<u> </u>	ALS	<u>12</u>
BLS	<u>170</u>	LALS	<u> </u>	Other	<u> </u>

Total Number of Dispatchers: 14

Ownership: Public Private

If Public: Fire Law Other _____

If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020

Dispatch Agency: Pro Transport Ambulance Name of Primary Contact: Chris Day

Address: 720 Portal Street Telephone Number: 707-280-0353
Cotati, CA 94930

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training	<u>10</u>	EMT-D	<u> </u>	ALS	<u>8</u>
BLS	<u>108</u>	LALS	<u> </u>	Other	<u> </u>

Total Number of Dispatchers: 10

Ownership: Public Private

If Public: Fire Law Other _____

If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020
Dispatch Agency: Reach & CalStar Name of Primary Contact: Dannielle Lance
Address: 1041 Fee Drive Telephone Number: 800-338-4045
Sacramento, CA 95815

Written Contract: Yes No
Medical Director: Yes No
Availability: Day-to-Day Disaster
Number of Personnel Providing Services:
EMD Training _____ EMT-D _____ ALS _____
BLS _____ LALS _____ Other 22
Total Number of Dispatchers: 22

Ownership: Public Private
If Public: Fire Law Other _____
If Public: City Fire District County Federal State

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020

Dispatch Agency: Sacramento Regional Fire/EMS Communication Center Name of Primary Contact: Kylee Soares

Address: 10230 Systems Parkway Telephone Number: 916-228-3070
Sacramento, CA 95827

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training 41 EMT-D _____ ALS _____

BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 41

Ownership: Public Private

If Public: Fire Law Other JPA

If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020

Dispatch Agency: Sacramento International Airport Name of Primary Contact: Phillip Arnold

Address: 6900 Airport Blvd Telephone Number: 916-874-0177
Sacramento, CA 95837

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training 18 EMT-D _____ ALS _____

BLS _____ LALS _____ Other _____

Total Number of Dispatchers: 18

Ownership: Public Private

If Public: Fire Law Other _____

If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020

Dispatch Agency: Sac Valley Ambulance Name of Primary Contact: Daniel Gilbert

Address: 6220 Belleau Wood Lane Telephone Number: _____
Sacramento, CA 95822

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training	<u>11</u>	EMT-D	_____	ALS	<u>4</u>
BLS	<u>48</u>	LALS	_____	Other	_____

Total Number of Dispatchers: 11

Ownership: Public Private

If Public: Fire Law Other _____

If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No

TABLE 3: COMMUNICATIONS



Dispatch Resource

County: Sacramento Reporting Year: 2020

Dispatch Agency: TLC, Trauma Life Care Medical Transport, INC Name of Primary Contact: Chief P. Bedia

Address: 3637 Mission Avenue, Bldg. A, Ste. 4 Telephone Number: 916-879-4472
Carmichael, CA 95608

Written Contract: Yes No

Medical Director: Yes No

Availability: Day-to-Day Disaster

Number of Personnel Providing Services:

EMD Training _____ EMT-D _____ ALS _____

BLS 20 LALS _____ Other _____

Total Number of Dispatchers: 4

Ownership: Public Private

If Public: Fire Law Other _____

If Public: City County State Fire District Federal

Designated to Coordinate the Use of Air Ambulance or Air Rescue Aircraft: Yes No



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** AlphaOne Ambulance Medical Services, Inc. **Response Area:** Sacramento County

Address: 10461 Old Placerville Road Ste 110

Phone Number: 916-635-2011

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 30

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 26

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 8

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p>COVID testing and vaccinations _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input checked="" type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51717

Name of ePCR Vendor: ImageTrend

Contract Dates: July 1, 2019 - June 30, 2022

Ground Non-Transporting and/or Transporting Agencies

25883 Total number of responses
15653 Number of emergency responses
10230 Number of non-emergency responses

Ground Transporting Agencies

24082 Total number of transports
14061 Number of emergency transports
10021 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 126
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 44



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** American Medical Response **Response Area:** Sacramento

Address: 1101 Fee Drive
Sacramento, CA 95815

Phone Number: 916-563-0838

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 28

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 14

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 1

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: _____

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p>Bariatric Ambulance _____</p> <p> <input checked="" type="checkbox"/> Non-Ambulance Medical Transport Services <input checked="" type="checkbox"/> Litter/Gurney Van <input checked="" type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50088

Name of ePCR Vendor: MEDS

Contract Dates: 1/1/2020 to 12/31/2020

Ground Non-Transporting and/or Transporting Agencies

22860 Total number of responses
11000 Number of emergency responses
11860 Number of non-emergency responses

Ground Transporting Agencies

17917 Total number of transports
7609 Number of emergency transports
10308 Number of non-emergency transports

Air Transporting Services

NA Total number of responses
NA Number of emergency responses
NA Number of non-emergency responses

NA Total number of transports
NA Number of emergency transports
NA Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 215

Total number of certified Advanced EMTs in the field: NA

Total number of certified/accredited Paramedics in the field: 70



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** Bay Medic Ambulance **Response Area:** Sacramento County

Address: 7917 Fruitridge Rd
Sacramento, CA 95820

Phone Number: 925-689-9000

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 5

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 3

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: 534-50120

Name of ePCR Vendor: Trauma Soft

Contract Dates: 1/1/2020 - 12/31/2021

Ground Non-Transporting and/or Transporting Agencies

1,944 Total number of responses
0 Number of emergency responses
1,944 Number of non-emergency responses

Ground Transporting Agencies

1,884 Total number of transports
2 Number of emergency transports
1,882 Number of non-emergency transports

Air Transporting Services

n/a Total number of responses
n/a Number of emergency responses
n/a Number of non-emergency responses

n/a Total number of transports
n/a Number of emergency transports
n/a Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 88
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 5



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** California Highway Patrol **Response Area:** CHP Headquarters

Address: 601 North 7th Street
Sacramento, CA. 95811

Phone Number: 916-843-3303

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input type="checkbox"/> Transport <input type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input checked="" type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input checked="" type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: Inland Counties EMS Agency

Name of ePCR Vendor: Image Trend Elite

Contract Dates: Valid until June 30, 2026

Ground Non-Transporting and/or Transporting Agencies

2 Total number of responses
2 Number of emergency responses
 _____ Number of non-emergency responses

Ground Transporting Agencies

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
 _____ Number of emergency responses
 _____ Number of non-emergency responses

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: _____

Total number of certified Advanced EMTs in the field: _____

Total number of certified/accredited Paramedics in the field: 3



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** CHP - Capitol Protection Section **Response Area:** Downtown Sacramento

Address: 1801 9th Street
Sacramento, CA 95811

Phone Number: 916-341-4740

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input checked="" type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S62-51806

Name of ePCR Vendor: Image Trend, Inc. , ELITE

Contract Dates: _____

Ground Non-Transporting and/or Transporting Agencies

8 Total number of responses
8 Number of emergency responses
 _____ Number of non-emergency responses

Ground Transporting Agencies

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
 _____ Number of emergency responses
 _____ Number of non-emergency responses

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 4

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 2



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** Cosumnes Fire Department **Response Area:** Elk Grove, Galt, Unincorporated areas of Sacramento County

Address: 10573 East Stockton Blvd
Elk Grove Ca 95642

Phone Number: 916.405.7100

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 11

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 8

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input checked="" type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50309

Name of ePCR Vendor: ImageTrend

Contract Dates: 2021

Ground Non-Transporting and/or Transporting Agencies

20305 Total number of responses
20305 Number of emergency responses
 _____ Number of non-emergency responses

Ground Transporting Agencies

11,321 Total number of transports
11,321 Number of emergency transports
 _____ Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
 _____ Number of emergency responses
 _____ Number of non-emergency responses

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 35

Total number of certified Advanced EMTs in the field: _____

Total number of certified/accredited Paramedics in the field: 119



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** Folsom Fire Department **Response Area:** Sacramento County

Address: 535 Glenn Dr
Folsom CA 95630

Phone Number: 916-461-6300

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 5

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 3

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p> Other Specialty Services (water, snow, etc.): _____ Water Rescue, Confined Space _____ </p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50402

Name of ePCR Vendor: Image Trend

Contract Dates: October 2019-Present

Ground Non-Transporting and/or Transporting Agencies

8474 Total number of responses
8474 Number of emergency responses
 _____ Number of non-emergency responses

Ground Transporting Agencies

4711 Total number of transports
4711 Number of emergency transports
 _____ Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
 _____ Number of emergency responses
 _____ Number of non-emergency responses

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 5
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 64



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** Medic Ambulance Service Inc. **Response Area:** Sacramento

Address: 8689 Folsom Blvd
Sacramento Ca, 95820

Phone Number: 916 564-9040

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 30

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 15

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 2

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input checked="" type="checkbox"/> Non-Ambulance Medical Transport Services <input checked="" type="checkbox"/> Litter/Gurney Van <input checked="" type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51960

Name of ePCR Vendor: Water

Contract Dates: 1/1/2021 - 12/31/2021

Ground Non-Transporting and/or Transporting Agencies

13784 Total number of responses
1109 Number of emergency responses
12675 Number of non-emergency responses

Ground Transporting Agencies

12867 Total number of transports
827 Number of emergency transports
12040 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 80
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 10



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** NORCAL Ambulance **Response Area:** Sacramento County
Address: 1815 Stockton Blvd
Phone Number: (916) 860-7900

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 32 Ambulances
Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 21 Ambulances
Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 2 wheel chair vans
Ambulance Strike Team Participant: Yes No
Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): <u>NICU/PICU</u></p> <p> <input checked="" type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input checked="" type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Fire District <input type="checkbox"/> Federal	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50672

Name of ePCR Vendor: Traumasoft

Contract Dates: 10/23/2020-Present

Ground Non-Transporting and/or Transporting Agencies

19051 Total number of responses
14825 Number of emergency responses
4226 Number of non-emergency responses

Ground Transporting Agencies

18764 Total number of transports
14572 Number of emergency transports
4192 Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
 _____ Number of emergency responses
 _____ Number of non-emergency responses

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 162
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 11



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** ProTransport-1 **Response Area:** Sacramento County
Address: 2700 Mercantile Drive
Rancho Cordova, CA 95742
Phone Number: 800-650-4003

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 29
Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 15
Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 2
Ambulance Strike Team Participant: Yes No
Number of Helicopters based in this LEMSA's jurisdiction: _____

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input checked="" type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
---	--	--	---	--	---

Provider Resource (cont.)

CEMSIS Provider ID #: S58-50771

Name of ePCR Vendor: ImageTrend

Contract Dates: October 23, 2015 to Current

Ground Non-Transporting and/or Transporting Agencies

12261 Total number of responses
35 Number of emergency responses
12226 Number of non-emergency responses

Ground Transporting Agencies

12241 Total number of transports
48 Number of emergency transports
12193 Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
 _____ Number of emergency responses
 _____ Number of non-emergency responses

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 64
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 11



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** REACH Air Medical Services **Response Area:** Sac County

Address: 8880 Cal Center Dr Suite 125
Sacramento, CA 95826

Phone Number: 916 921-4000

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 43

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 1

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 1

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> Air <input type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input checked="" type="checkbox"/> Rotary <input checked="" type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input checked="" type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50779

Name of ePCR Vendor: Imagetrend

Contract Dates: August 2020 - August 2021

Ground Non-Transporting and/or Transporting Agencies

_____ Total number of responses
 _____ Number of emergency responses
 _____ Number of non-emergency responses

Ground Transporting Agencies

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Air Transporting Services

63 Total number of responses
37 Number of emergency responses
26 Number of non-emergency responses

27 Total number of transports
4 Number of emergency transports
23 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 0

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 7



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** Sacramento Airport Fire **Response Area:** SMF

Address: 7201 Earhart Drive
Sacramento, CA 95837

Phone Number: (916) 874-0648

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input checked="" type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-51343

Name of ePCR Vendor: ImageTrend

Contract Dates: 2/6/2020 - 4/12/2022

Ground Non-Transporting and/or Transporting Agencies

392 Total number of responses
392 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

0 Total number of responses
0 Number of emergency responses
0 Number of non-emergency responses

0 Total number of transports
0 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 29

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 6



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** City of Sacramento Fire Department **Response Area:** Sacramento

Address: 5770 Freeport Blvd
Sacramento, CA 95822

Phone Number: 916-808-1654

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 27 Ambulances

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 17 Ambulances

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 4 Box vans

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input checked="" type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S534-50810

Name of ePCR Vendor: Health EMS Stryker

Contract Dates: Jan 2020 - Jan 2025

Ground Non-Transporting and/or Transporting Agencies

63165 Total number of responses
63105 Number of emergency responses
60 Number of non-emergency responses

Ground Transporting Agencies

39665 Total number of transports
39665 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
 _____ Number of emergency responses
 _____ Number of non-emergency responses

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 113
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 453



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** Sacramento Metropolitan Fire District **Response Area:** Sacramento County

Address: 10545 Armstrong Ave
Mather, CA 95655

Phone Number: 916-859-4300

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 39

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 25

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 2

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input checked="" type="checkbox"/> Air <input type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): <u>Boat rescue, bike medics, TEMS team</u></p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input checked="" type="checkbox"/> Fire District	If Air: <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input checked="" type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50811

Name of ePCR Vendor: ImageTrend

Contract Dates: 09/22/2019 - 09/21/2022

Ground Non-Transporting and/or Transporting Agencies

98181 Total number of responses
98181 Number of emergency responses
0 Number of non-emergency responses

Ground Transporting Agencies

43,847 Total number of transports
43,847 Number of emergency transports
0 Number of non-emergency transports

Air Transporting Services

121 Total number of responses
121 Number of emergency responses
0 Number of non-emergency responses

3 Total number of transports
3 Number of emergency transports
0 Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 69

Total number of certified Advanced EMTs in the field: 0

Total number of certified/accredited Paramedics in the field: 494



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** Sacramento Valley Ambulance **Response Area:** Sacramento
Address: 6220 Belleau Wood Lane Ste. 4
Phone Number: 916-736-2500

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 17
Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 15
Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 3
Ambulance Strike Team Participant: Yes No
Number of Helicopters based in this LEMSA's jurisdiction: n/a

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input checked="" type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input type="checkbox"/> 9-1-1 <input checked="" type="checkbox"/> Ground <input type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input checked="" type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input type="checkbox"/> BLS <input checked="" type="checkbox"/> CCT <input checked="" type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input checked="" type="checkbox"/> Non-Ambulance Medical Transport Services <input checked="" type="checkbox"/> Litter/Gurney Van <input checked="" type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private	If Public: <input type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: S34-50813

Name of ePCR Vendor: TraumaSoft

Contract Dates: 1/1/21-12/31/2021

Ground Non-Transporting and/or Transporting Agencies

16425 Total number of responses
3 Number of emergency responses
16422 Number of non-emergency responses

Ground Transporting Agencies

14601 Total number of transports
1 Number of emergency transports
14600 Number of non-emergency transports

Air Transporting Services

_____ Total number of responses
 _____ Number of emergency responses
 _____ Number of non-emergency responses

_____ Total number of transports
 _____ Number of emergency transports
 _____ Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 95
 Total number of certified Advanced EMTs in the field: 0
 Total number of certified/accredited Paramedics in the field: 4



TABLE 4: RESPONSE AND TRANSPORTATION

Provider Resource

County: Sacramento **Provider:** Wilton Fire Protection District **Response Area:** Wilton, CA

Address: 9800 Dillard Road
Wilton, CA 95693

Phone Number: 916-687-6920

Number of Ambulances, Air Rescue, or Air Ambulance Vehicles in fleet: 0

Average number of Ambulances and/or Air Rescue Vehicles/Air Ambulances on duty at 12:00 p.m. (noon) on any given day: 0

Number of Non-Ambulance Medical Transport Litter Vans (gurney van) and/or wheelchair vans: 0

Ambulance Strike Team Participant: Yes No

Number of Helicopters based in this LEMSA's jurisdiction: 0

<p>Written ALS Agreement with LEMSA to Participate in EMS System:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Medical Director:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>System Available 24 Hours:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Level of Service:</p> <p> <input type="checkbox"/> Transport <input checked="" type="checkbox"/> ALS <input checked="" type="checkbox"/> 9-1-1 <input type="checkbox"/> Ground <input checked="" type="checkbox"/> Non-Transport <input type="checkbox"/> LALS <input type="checkbox"/> 7-Digit <input type="checkbox"/> Air <input checked="" type="checkbox"/> BLS <input type="checkbox"/> CCT <input type="checkbox"/> IFT </p> <p>Other Specialty Services (water, snow, etc.): _____</p> <p> <input type="checkbox"/> Non-Ambulance Medical Transport Services <input type="checkbox"/> Litter/Gurney Van <input type="checkbox"/> Wheelchair Van </p>
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TABLE 4: RESPONSE AND TRANSPORTATION

Ownership: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	If Public: <input checked="" type="checkbox"/> Fire <input type="checkbox"/> Law <input type="checkbox"/> Other _____	If Public: <input type="checkbox"/> City <input type="checkbox"/> State <input type="checkbox"/> Federal	<input type="checkbox"/> County <input checked="" type="checkbox"/> Fire District	If Air: <input type="checkbox"/> Rotary <input type="checkbox"/> Fixed Wing	Air Classification: <input type="checkbox"/> Auxiliary Rescue <input type="checkbox"/> Air Ambulance <input type="checkbox"/> ALS Rescue <input type="checkbox"/> BLS Rescue
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Provider Resource (cont.)

CEMSIS Provider ID #: Not Applicable

Name of ePCR Vendor: Image Trend (Contract service through Cosumnes CSD Fire)

Contract Dates: Refer to Cosumnes CSD Contract Dates

Ground Non-Transporting and/or Transporting Agencies

464 Total number of responses
443 Number of emergency responses
21 Number of non-emergency responses

Ground Transporting Agencies

n/a Total number of transports
n/a Number of emergency transports
n/a Number of non-emergency transports

Air Transporting Services

n/a Total number of responses
n/a Number of emergency responses
n/a Number of non-emergency responses

n/a Total number of transports
n/a Number of emergency transports
n/a Number of non-emergency transports

Provider Staff Information

Total number of certified EMTs in the field: 35
 Total number of certified Advanced EMTs in the field: 5
 Total number of certified/accredited Paramedics in the field: 10



TABLE 5: ASSESSMENT OF HOSPITALS AND CRITICAL CARE CENTERS

County: Sacramento

Reporting Year: 2019

EMS Agency Facility Details

Are there established guidelines, developed in partnership with acute care hospital administrators, physicians, and nurses, that identify patients who should be considered for transfer to facilities of higher capability? Yes No

Is there collaboration with acute care hospital administrators, physicians, and nurses to establish transfer agreements for patients who should be considered for transfer to facilities of higher capability? Yes No

Is there a process to ensure that all base hospital personnel who provide medical direction to prehospital personnel are knowledgeable about LEMSA policies and procedures and have training in radio communications techniques? Yes No

Is there a process to ensure that all alternative base station personnel who provide medical direction to prehospital personnel are knowledgeable about the EMS Agency's policies and procedures? Yes No

a) Do the base station personnel have training in radio communications? Yes No

EMS Agency Facility Statistics

Emergency Departments

Total number of emergency departments: 9

Total number of comprehensive emergency services: 9

Total number of basic emergency services: _____

Total number of standby emergency services: _____

Hospitals with Written Agreements

Total number of receiving hospitals: 9

Total number of base hospitals: 4

Alternative Receiving Facilities

Do you have designated alternative receiving facilities? Yes No

Number of alternate receiving facilities:
Psychiatric: _____ Sobering Centers: _____ Rural Area _____

Specialty Care System

Do you have a trauma system? Yes No

Do you have a ST-Elevation Myocardial Infarction (STEMI) system? Yes No



TABLE 5: ASSESSMENT OF HOSPITALS AND CRITICAL CARE CENTERS

EMS Agency Facility Statistics (cont.)

Do you have a stroke system? Yes No

Do you have an EMS for children system? Yes No

EMS Agency Specialty Care System Capabilities

Number of *trauma* centers:

Level I ¹ _____ Level II ² _____ Level III _____ Level IV _____

Number of pediatric trauma centers:

Level I ¹ _____ Level II _____

Number of EMS patients meeting trauma triage criteria:

2108

a) Transported to a trauma center by ambulance:

2099

b) Not transported to a trauma center:

9

Number of trauma patients transferred to a trauma center for a higher level of care:

a) From a non-trauma facility:

128

b) From a lower level trauma center:

11

Number of *STEMI* centers/hospitals designated by EMS Agency:

Receiving: ⁵ _____ Referring: _____

Number of *stroke* centers/hospitals (third party accreditation only):

Comprehensive: ¹ _____ Thrombectomy Capable: _____

Primary: ¹⁰ _____ Acute Stroke Ready: _____

Number of *pediatric* receiving centers:

Comprehensive: ¹ _____ General: _____ Advanced: _____ Basic: _____



TABLE 6: PUBLIC INFORMATION AND EDUCATION

County: Sacramento

Reporting Year: 2020

Public Information, Education, and Awareness

Number of programs EMS Agency provided to the public:

<input type="checkbox"/> EMS Awareness	<input type="checkbox"/> Bleeding Control
<input type="checkbox"/> First Aid	<input type="checkbox"/> CPR
<input type="checkbox"/> Prevention Activities	<input type="checkbox"/> Disaster Preparedness

Injury & Illness Prevention

Number of programs EMS Agency provided to the public:

<input type="checkbox"/> Alcohol & Substance Abuse	<input type="checkbox"/> General Injury
<input type="checkbox"/> Asthma Control	<input type="checkbox"/> Home Safety
<input type="checkbox"/> Bicycle Safety	<input type="checkbox"/> Infant Safe Sleep Practices
<input type="checkbox"/> Burn Prevention	<input type="checkbox"/> Mental Health
<input type="checkbox"/> Child Passenger Safety	<input type="checkbox"/> Obesity
<input type="checkbox"/> Childhood Immunizations	<input type="checkbox"/> Pedestrian Safety
<input type="checkbox"/> Diabetes	<input type="checkbox"/> POLST/End of Life Care
<input type="checkbox"/> Distracted Driving	<input type="checkbox"/> Poison Control & Prevention
<input type="checkbox"/> Dog Bite Prevention	<input type="checkbox"/> Product Safety & Recalls
<input type="checkbox"/> Elderly Falls	<input type="checkbox"/> Suicide Prevention
<input type="checkbox"/> Firearm Safety	<input type="checkbox"/> Water Safety
<input type="checkbox"/> General Health	<input type="checkbox"/> Youth Violence Prevention



TABLE 7: DISASTER MEDICAL RESPONSE

County: Sacramento

Reporting Year: 2020

EMS Agency Structure

Are you part of a multicounty EMS system for disaster response? Yes No

Are you a separate department or agency? Yes No

a) To whom do you report? Department of Health Services

If your agency is not within the health department, do you have a plan to coordinate public health and environmental health issues with the health department? Yes No

What healthcare coalitions are you participating in? Sacramento County Health Care Coalition

a) How often do you meet with your healthcare coalitions? Monthly

Do you have connection with your local Disaster Healthcare Volunteer Administrators in your jurisdiction? Yes No

List all neighboring counties which you have written cooperative agreements and/or medical mutual aid/assistance agreements with:

Yolo County, Solano County

EMS Agency Plans, Policies, Programs, and Teams

Do you have the following:

a) Disaster Plan? Yes URL Link: <https://dhs.saccounty.net/PRI/EMS/Documents/PoliciesProceduresProtocols/Police> No

b) Active Shooter Policy? Yes URL Link: _____ No

c) Hazardous Material (Hazmat) Plan? Yes URL Link: _____ No

d) Disaster Medical Cache? Yes URL Link: _____ No

e) Disaster Medical Support Group? Yes URL Link: _____ No

f) Medical Assets? Yes URL Link: _____ No

g) Incident Command Organization Chart? Yes URL Link: _____ No

h) Communications Plan? Yes URL Link: _____ No

i) Ambulance Strike Team Leader Program? Yes No

j) EMS Authority Affiliated Strike Teams (includes a Disaster Medical Support Unit)? Yes No

Identify the provider: _____



TABLE 7: DISASTER MEDICAL RESPONSE

EMS Agency System Operations and Resources

Do you have designated field treatment sites? Yes No

a) Identify the locations: _____

b) How are they staffed? _____

c) Is there a supply system for supporting them for 72 hours? Yes No

Is there a mental/behavioral health program available for responders within your jurisdiction? Yes No

a) Identify the program: EAP

Is there a team medical response capability? Yes No

a) For each team, are they incorporated into the local response plan? Yes No

b) Are they available for statewide response? Yes No

c) Are they part of a formal out-of-state response system? Yes No

Are there HazMat trained medical response teams? Yes No

a) At what HazMat level are they trained? FRO- Haz Tech

b) Is there capability to do decontamination in an emergency room? Yes No

c) Is there capability to do decontamination in the field? Yes No

Identify who the Medical Health Operational Area Coordinator is:

Health Officer EMS Agency Jointly Appointed

Do you have specific training for mass casualty incident policies? Yes No

Are you using the Standardized Emergency Management System (SEMS)? Yes No

a) Does it incorporate a form of Incident Command System (ICS) structure? Yes No

Are you integrated in the Medical/Health Branch of the Operation Section in each operational area Emergency Operations Center within your jurisdiction? Yes No

Have you tested your multicasualty incident plan this year? Yes No

a) Was it a real event? Yes

b) Was it an exercise? None due to COVID Incident.

Do you have formal agreements with the following in your operational area to participate in disaster planning and response:

a) Hospitals? Yes No

b) Community Clinics? Yes No

Annex 1

**2018 EMS PLAN
UPDATE:
APPROVAL LETTERS**

EMERGENCY MEDICAL SERVICES AUTHORITY

10901 GOLD CENTER DR., SUITE 400
RANCHO CORDOVA, CA 95670
(916) 322-4336 FAX (916) 322-1441



May 11, 2021

Mr. Dave Magnino, EMS Administrator
Sacramento County Emergency Medical Services Agency
9616 Micron Avenue, Suite 960
Sacramento, CA 95827

Dear Mr. Magnino:

The Emergency Medical Services (EMS) Authority has reviewed the recently provided advanced life support agreement documentation submitted by Sacramento County EMS Agency for the 2018 EMS plan. It has been determined the 2018 EMS plan now meets all EMS system components identified in Health and Safety Code (HSC) § 1797.103 and is approved for implementation pursuant to HSC § 1797.105(b).

If you have any questions regarding the EMS Plan review, please contact Ms. Lisa Galindo, EMS Plans Coordinator, at (916) 431-3688.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Dave Duncan'.

Dave Duncan, MD
Director

dd:lg

Annex 2

**2019 EMS PLAN
UPDATE:
APPROVAL LETTERS**

EMERGENCY MEDICAL SERVICES AUTHORITY

10901 GOLD CENTER DR., SUITE 400
RANCHO CORDOVA, CA 95670
(916) 322-4336 FAX (916) 322-1441



May 14, 2021

Mr. Dave Magnino, EMS Administrator
Sacramento County Emergency Medical Services Agency
9616 Micron Avenue, Suite 960
Sacramento, CA 95827

Dear Mr. Magnino:

This letter is in response to Sacramento County's 2019 emergency medical services (EMS) plan, and the St-Elevation Myocardial Infarction (STEMI), Stroke, Trauma, and Quality Improvement (QI) plan submissions to the EMS Authority on October 13, 2020.

The EMS Authority has reviewed the EMS plan, based on compliance with statutes, regulations, and case law. It has been determined the plan meets all EMS system components identified in Health and Safety Code (HSC) § 1797.103 and is approved for implementation pursuant to HSC § 1797.105(b). Based on transportation documentation provided, the EMS Authority has noted your Emergency Ambulance Zone as Non-Exclusive and has enclosed for reference.

The EMS Authority has also reviewed the STEMI, Stroke, Trauma, and QI plans, based on compliance with HSC §§ 1797.257 and 1797.258, and Chapters 7, 7.1, 7.2, 12, and 14 of California Code of Regulations, Title 22, Division 9, and has approved for implementation.

In accordance with HSC § 1797.254, please submit an annual EMS plan to the EMS Authority on or before May 14, 2022. Please also submit an annual STEMI, Stroke, Trauma, and QI plan concurrently as part of your EMS plan. If you have any questions regarding the EMS Plan review, please contact Ms. Lisa Galindo, EMS Plans Coordinator, at (916) 431-3688.

Sincerely,

A handwritten signature in blue ink that reads 'Tom McGinnis - EMT-P'.

Tom McGinnis, EMT-P
Chief, EMS Systems Division

Enclosure

tm:lg

Sacramento County 2019 EMS Plan Ground Exclusive Operating Areas	Non-Exclusive		Exclusive		Method to Achieve Exclusivity		Emergency Ambulance		ALS		LALS		All Emergency Ambulance Services		9-1-1 Emergency Response		7-digit Emergency Response		ALS Ambulance		All CCT Ambulance Services		IFT		Standby Service with Transport Auth.									
ZONE	EXCLUSIVITY				TYPE				LEVEL												NOTES													
Sacramento County	X																																	