EMERGENCY MEDICAL SERVICES AUTHORITY

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



September 28, 2020

Mr. Travis Kusman, Emergency Medical Services Administrator San Mateo County Emergency Medical Services Agency 801 Gateway Boulevard, 2nd Floor South San Francisco, CA 94080

Dear Mr. Kusman:

This letter is in response to San Mateo County's 2019 emergency medical services (EMS) plan submission to the EMS Authority on July 8, 2020. The EMS Authority has reviewed the 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 <u>approved</u> for implementation pursuant to HSC § 1797.105(b).

Based on the documentation provided, the EMS Authority has compiled a list of your Emergency Ambulance Zone areas within your jurisdiction and has enclosed for reference.

In accordance with HSC § 1797.254, please submit an annual EMS plan to the EMS Authority on or before September 28, 2021. If you have any questions regarding the EMS Plan review, please contact Ms. Lisa Galindo, EMS Plans Coordinator, at (916) 431-3688.

Sincerely,

Dave Duncan, MD

Director

Enclosure

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San Mateo 2019 EMS Plan Ground Exclusive Operating Areas	Hon	Exclusive	Metrod to Act	iniewe Linest	Striple Striple	, Jan	ALL RE	Gentle Sei	18 18 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	indigence A	Arribularice All Se	Artibulance	Strate of Strate	incontrol of the state of the s
ZONE		EXCLU	JSIVITY		TYPE					LEVE	L			NOTES
San Mateo County											Mary 1		EXPORT	
San Mateo County, except the City of South San Francisco		×	Competitive	X				х	х	Х				

2019

EMS SYSTEM PLAN UPDATE



San Mateo County EMS Agency

801 Gateway Boulevard, Second Floor South San Francisco, California 94080

May 2020



San Mateo County 2019 EMS Plan Executive Summary

The San Mateo County EMS system remained stable and continues to make progress toward achieving several of our systems' long-term goals. The EMS Agency continues to experience successful collaborations with key system partners including our ALS Fire First Responder Agencies, contracted ALS ambulance provider, American Medical Response (AMR), and our receiving and specialty care centers, several of which are located within other EMS agency jurisdictions.

Accomplishments Since Our Last Report

- Execution of a new Emergency Ambulance Services with Advanced Life Support Ambulance Transport Agreement with American Medical Response effective July 1, 2019.
- Executed a new Agreement with the San Mateo County Pre-Hospital Emergency Medical Services Group to be Designated Paramedic First Response Service Provider effective July 1, 2019.
- EMS Agency continues management of the Health System Emergency Preparedness Program merging the HPP and PHEP programs under the EMS Division in San Mateo County.
- San Mateo County STEMI System began using American Heart Association's Get-with-the-Guidelines STEMI data collection system.
- Completed and implemented new adult, pediatric, trauma, and reference protocols and tools for prehospital care providers.
- Developed and implemented a new iPhone and Android app that provides access to all protocols and EMS policies.
- Participated in National Cardiac Arrest to Enhance Survival (CARES) registry system.
- Continue to utilize a high-performance cardiopulmonary resuscitation (CPR) response protocol with the goal of continued improvement in overall survival of cardiac arrest.
- Continue to expand healthcare participation using ReddiNet® as our emergency communication system and expanded the system to all skilled nursing facilities within San Mateo County.
- Provided mutual aid resources, including RDMHC services, to the Northern California wildfires.
- Continue to participate in county-wide system implementation of a new computer-aided dispatch system.
- Received a \$1.5M grant from California Department of Health Care Services as part of a Center for Medicare/Medicaid Services 90/10 funding and CARESTAR Foundation matching funds for the +EMS Health Information Exchange.
- Participated in bi-monthly county-wide death review committee with the goal of identifying preventable deaths. The review committee led by the County Health Leadership team has representatives of San Mateo Older Adults Program, Public Health, Family Health, Behavioral Health and Recovery Services, Correctional Health and EMS.
- Conducted 3 full scale exercises with partners like Healthcare Coalition, FBI, National Guard, AMR,
 CERT, Fire, Law, OES, San Francisco International Airport, Corner's Office, and Red Cross.
- Activated San Mateo County Health Policy Group for three (3) exercises.



Disaster Medical Response

- 1. The EMS Agency continued development of the San Mateo County Operational Area Medical Health Emergency Operations Plan (EOP), which provides general guidance for preparation, response, and recovery to all-hazard events which pose risk to the healthcare system and/or result in illness or injury amongst the population within San Mateo County.
- 2. The San Mateo County Public Health Officer and the San Mateo County EMS Agency Administrator, at the direction of the Chief of San Mateo County Health have appointed the EMS Administrator to serve as the Medical Health Operational Area Coordinator (MHOAC). The EMS Agency maintains an on-call EMS Duty Officer 24-hours a day to serve as the MHOAC's designee after hours or when the MHOAC is unavailable.
- 3. The San Mateo County Healthcare Coalition (HCC) was established in 1999 to coordinate strategic planning activities amongst healthcare facilities of various healthcare delivery sectors, public health agencies, other government entities, and community partners to prepare for, respond to, and recover from emergencies and other incidents that impact the public's health. The HCC meets regularly and was active during the Public Safety Power Shutoff events of 2019 that affected the majority of the Bay Area and the COVID-19 pandemic response.

San Mateo County's HCC membership was comprised of:

- 8 Acute care hospitals
- 3 Ambulatory surgical centers
- 15 Intermediate care facilities for individuals with intellectual disabilities
- 8 Dialysis centers
- EMS providers agencies serving within the 9-1-1 system
- 14 Home health agencies
- 1 Public health department
- 13 Programs of all-inclusive care for the elderly
- 10 Long-term care facilities
- 8 Hospice inpatient and outpatient facilities
- 4 Federally qualified healthcare facility

Public Information and Education

The EMS Agency continues its effort to provide community education and training. Highlights for the past year include:

- Joint agency public service announcements and outreach for stroke at local BART and CalTrain stations, which reached more than 1,700 persons
- Hands-Only CPR training of hundreds of pubic participants across San Mateo County
- Stop the Bleed training of hundreds of public participants across San Mateo County
- Continue to host the Bay Area Paramedic Journal Club for EMS providers



A. SYSTEM ORGANIZATION AND MANAGEMENT

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short- range plan	Long-range plan
Agen	cy Administration:					
1.01	LEMSA Structure		Х			
1.02	LEMSA Mission		Х			
1.03	Public Input		Х			
1.04	Medical Director		X	×		
Planr	ning Activities:					
1.05	System Plan		Х			
1.06	Annual Plan Update		Х			
1.07	Trauma Planning*		X	X		
1.08	ALS Planning*		Х			
1.09	Inventory of Resources		X			
1.10	Special Populations		Х	X		
1.11	System Participants		X			
Regu	latory Activities:					
1.12	Review & Monitoring		Х			
1.13	Coordination		X			
1.14	Policy & Procedures Manual		X			
1.15	Compliance w/Policies		X			
Syste	m Finances:					
1.16 Mecha	Funding anism		Χ			
Medic	cal Direction:					
1.17	Medical Direction*		Х			
1.18	QA/QI		Х	Х		



1.19 Policies, Procedures, Protocols	×	Х		
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A. SYSTEM ORGANIZATION AND MANAGEMENT (continued)

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
1.20	DNR Policy		Х			
1.21	Determination of Death		×			
1.22	Reporting of Abuse		Х			
1.23	Interfacility Transfer		Х			
Enha	nced Level: Advanced	Life Support				
1.24	ALS Systems		Х	Х		
1.25	On-Line Medical Direction		х	Х	20	
Enha	nced Level: Trauma Ca	re System:	A PARTY NAMED IN			
1.26	Trauma System Plan	10	X			1
Enhai	nced Level: Pediatric E	mergency Medic	cal and Critica	l Care System:		
1.27	Pediatric System Plan		X			1
Enhai	nced Level: Exclusive	Operating Areas				
1.28	EOA Plan		X			



B. STAFFING/TRAINING

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Local	I EMS Agency:					
2.01	Assessment of Needs		Х			
2.02	Approval of Training		Х			
2.03	Personnel		X			
Dispa	atchers:					
2.04	Dispatch Training		Х	Х		ie .
First	Responders (non-tra	ansporting):				
2.05	First Responder Training	. 15	Х	Х		. 4
2.06	Response		Х			
2.07	Medical Control		Χ			
Trans	sporting Personnel:					
2.08	EMT-I Training		Х	Х		
Hosp	ital:					
2.09	CPR Training		Х			
2.10	Advanced Life Support		Х			
Enha	nced Level: Advanc	ed Life Support:				
2.11	Accreditation Process		Х			
2.12	Early Defibrillation		Х			
2.13	Base Hospital Personnel		Х			=



C. COMMUNICATIONS

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short- range plan	Long- range plan
Comr	munications Equipm	ent:				
3.01	Communication Plan*		×	Х		
3.02	Radios		Х	X		
3.03	Interfacility Transfer*		х			
3.04	Dispatch Center		Х			20
3.05	Hospitals		Х	X		
3.06	MCI/Disasters		Х			
Publi	c Access:					
3.07	9-1-1 Planning/ Coordination		Х	Х		
3.08	9-1-1 Public Education		X	21		
Reso	urce Management:					
3.09	Dispatch Triage		Х	Х		
3.10	Integrated Dispatch		Х	Х		



D. RESPONSE/TRANSPORTATION

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short- range plan	Long- range plan
Unive	ersal Level:			Appropriate Control of		
4.01	Service Area Boundaries*		X	Х	F-10-	
4.02	Monitoring		Х	X		
4.03	Classifying Medical Requests		×			
4.04	Prescheduled Responses		×			
4.05	Response Time*		X			
4.06	Staffing		Х			
4.07	First Responder Agencies		х			
4.08	Medical & Rescue Aircraft*		×			
4.09	Air Dispatch Center		Х			
4.10	Aircraft Availability*		×			2
4.11	Specialty Vehicles*		X	X		
4.12	Disaster Response		X			
4.13	Intercounty Response*		Х			
4.14	Incident Command System		Х			
4.15	MCI Plans		X			
Enhai	nced Level: Advanced	d Life Support:				
4.16	ALS Staffing		Х	Х		
4.17	ALS Equipment		Х			
Enhai	nced Level: Ambulan	ce Regulation:				
4.18	Compliance		Х			
Enhai	nced Level: Exclusive	Operating Perm	its:			
4.19	Transportation Plan		X			



4.20	"Grandfathering"	X	
4.21	Compliance	X	
4.22	Evaluation	X	



E. FACILITIES/CRITICAL CARE

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Unive	ersal Level:					
5.01	Assessment of Capabilities		Х	X		
5.02	Triage & Transfer Protocols*		Х			
5.03	Transfer Guidelines*		X			
5.04	Specialty Care Facilities*		X			, i
5.05	Mass Casualty Management		Х	X		
5.06	Hospital Evacuation*		X			
Enha	nced Level: Advan	ced Life Support				
5.07	Base Hospital Designation*		Х			
Enha	nced Level: Trauma	a Care System:				
5.08	Trauma System Design		Х			di.
5.09	Public Input		Χ			
Enha	nced Level: Pediati	ric Emergency M	edical and Cri	tical Care System		
5.10	Pediatric System Design		Х			
5.11	Emergency Departments		Х	Х		
5.12	Public Input		Х			
Enha	nced Level: Other	Specialty Care Sy	/stems:			
5.13	Specialty System Design		Х			
5.14	Public Input		X			



F. DATA COLLECTION/SYSTEM EVALUATION

*		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Unive	ersal Level:					
6.01	QA/QI Program		X	X		
6.02	Prehospital Records		Х			
6.03	Prehospital Care Audits		Х			
6.04	Medical Dispatch		×			
6.05	Data Management System*		Х			
6.06	System Design Evaluation		Х			
6.07	Provider Participation		Х			- 3
6.08	Reporting		Χ			
Enha	nced Level: Advanced	d Life Support				
6.09	ALS Audit		Х	Х		
Enhai	nced Level: Trauma C	are System:				
6.10	Trauma System Evaluation		Х			
6.11	Trauma Center Data		Χ	х		



G. PUBLIC INFORMATION AND EDUCATION

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Unive	ersal Level:					
7.01	Public Information Materials		Х	X		
7.02	Injury Control		Х	×		
7.03	Disaster Preparedness		×	X		
7.04	First Aid & CPR Training		X	×		



H. DISASTER MEDICAL RESPONSE

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short- range plan	Long-range plan
Unive	ersal Level:					
8.01	Disaster Medical Planning*		X			
8.02	Response Plans		X	X		
8.03	HazMat Training		Х			
8.04	Incident Command System		×	×		
8.05	Distribution of Casualties*		X		100	
8.06	Needs Assessment		X	X		
8.07	Disaster Communications*		х			
8.08	Inventory of Resources	1	×	X		
8.09	DMAT Teams		Х	X		
8.10	Mutual Aid Agreements*		Х			
8.11	CCP Designation*		X			
8.12	Establishment of CCPs		X			
8.13	Disaster Medical Training		Х	X		
8.14	Hospital Plans		Χ	X		
8.15	Interhospital Communications	5	Х			
8.16	Prehospital Agency Plans		Х	X X		
Enha	nced Level: Advanced	Life Support:				
8.17	ALS Policies		Χ			
Enha	nced Level: Specialty	Care Systems:				
8.18	Specialty Center Roles		X			
Enha	nced Level: Exclusive	Operating Areas/	Ambulance Re	egulations:		
8.19	Waiving Exclusivity		Х			



TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT

rting Year: 2019	
E: Number (1) below is to be completed for each county. The balance of Table 2 referency.	s to each
Percentage of population served by each level of care by county: (Identify for the maximum level of service offered; the total of a, b, and c should equal	100%.)
County: San Mateo County	
A. Basic Life Support (BLS) B. Limited Advanced Life Support (LALS) C. Advanced Life Support (ALS)	0% 0% 100%
Type of agency: ☐ Public Health Department ☐ County Health Services Agency ☐ Other (non-health) County Department ☐ Joint Powers Agency ☐ Private Non-Profit Entity ☐ Other:	
The person responsible for day-to-day activities of the EMS agency reports to: ☐ Public Health Officer ☐ Health Services Agency Director/Administrator ☐ Board of Directors ☐ Other:	
Indicate the non-required functions which are performed by the agency: ☑ Implementation of exclusive operating areas (ambulance franchising) ☑ Designation of trauma centers/trauma care system planning ☑ Designation/approval of pediatric facilities ☑ Designation of other critical care centers ☑ Development of transfer agreements ☑ Enforcement of local ambulance ordinance ☑ Enforcement of ambulance service contracts ☑ Operation of ambulance service ☑ Continuing education ☑ Personnel training ☑ Operation of oversight of EMS dispatch center	
	E: Number (1) below is to be completed for each county. The balance of Table 2 refersive. Percentage of population served by each level of care by county: (Identify for the maximum level of service offered; the total of a, b, and c should equal county: A. Basic Life Support (BLS) B. Limited Advanced Life Support (LALS) C. Advanced Life Support (ALS) Type of agency: Public Health Department County Health Services Agency Other (non-health) County Department Joint Powers Agency Private Non-Profit Entity Other: The person responsible for day-to-day activities of the EMS agency reports to: Public Health Officer Health Services Agency Director/Administrator Board of Directors Other: Indicate the non-required functions which are performed by the agency: Implementation of exclusive operating areas (ambulance franchising) Designation/approval of pediatric facilities Designation of other critical care centers Development of transfer agreements Enforcement of local ambulance ordinance Enforcement of ambulance service Continuing education



	☐ Administration of critical incident stress debriefing team (CISD)		
	□ Administration of disaster medical assistance team (DMAT)		
	□ Administration of EMS Fund [Senate Bill (SB) 12/612]		
	☐ Other:		
	☐ Other:		
	□ Other:		
5.	EXPENSES		
	Salaries and benefits (All but contract personnel)	\$	1,527,384
	Contract Services (e.g. medical director)	\$	5,009,542
	Operations (e.g. copying, postage, facilities)	\$	109,218
	Travel	\$	<u>15,572</u>
	Fixed assets	\$	0
	Indirect expenses (overhead) Ambulance subsidy	\$	<u>81,950</u> <u>0</u>
	EMS Fund payments to physicians/hospital	\$	<u>⊍</u> 974,197
	Dispatch center operations (non-staff)	*	0
	Training program operations		0
	Other: Measure K	\$	28,210
	Other: Fees to EMSA (EMT and paramedic)	\$	21,481
	TOTAL EXPENSES	\$	7,767,554
6.	SOURCES OF REVENUE		
	Special project grant(s) [from EMSA]	\$	<u>0</u>
	Preventive Health and Health Services (PHHS) Block Grant	\$	<u>0</u>
	Office of Traffic Safety (OTS)	\$	<u>0</u>
	State general fund (Maddy, Richie)	\$	974,197
	County general fund	\$	<u>0</u>
	Other local tax funds (e.g., EMS district)	\$	<u>41,416</u>
	County contracts (e.g. multi-county agencies)	\$	647,699
	Certification fees	\$	27,720



Training program approval fees					
Training progra	\$	<u>0</u>			
Job Training P	artnership ACT (JTPA) funds/other payments	\$	<u>0</u>		
Base hospital	application fees	\$	<u>0</u>		
Trauma center	application fees	\$	<u>0</u>		
Trauma center	designation fees	\$	<u>0</u>		
Pediatric facilit	y approval fees	\$	<u>0</u>		
Pediatric facilit	y designation fees	\$	<u>0</u>		
Other critical c	are center application fees	\$	<u>0</u>		
STEMI facility	\$	125,000			
Thrombectomy Capable Stroke Center application fee			7,500		
Ambulance service/vehicle fees			<u>0</u>		
Contributions		\$	<u>0</u>		
EMS Fund (SE	3 12/612)	\$	457,049		
Other fees:	EMS admin fee for Maddy & Richie funds	\$	426,348		
Other fees:	AMR pass-through to JPA	\$	4,739,670		
Other fees:	Medi-Cal admin activities (MAA)	\$	300,000		
Other fees:	EMSA portion of certification fees	\$	20,954		
TOTAL REVE	NUE	\$	7,767,554		

TOTAL REVENUE SHOULD EQUAL TOTAL EXPENSES.

IF THEY DON'T, PLEASE EXPLAIN.



7. Fee structure

 $\hfill \square$ We do not charge any fees

○ Our fee structure is:

First responder certification	\$ N/A
EMS dispatcher certification	\$ N/A
EMT-I certification	\$ <u>125</u>
EMT-I recertification	\$ <u>87</u>
EMT-defibrillation certification	\$ N/A
EMT-defibrillation recertification	\$ N/A
AEMT certification	\$ N/A
AEMT recertification	\$ N/A
EMT-P accreditation	\$ <u>50</u>
Mobile Intensive Care Nurse/Authorized Registered Nurse certification	\$ N/A
MICN/ARN recertification	\$ N/A
EMT-I training program approval	\$ N/A
AEMT training program approval	\$ N/A
EMT-P training program approval	\$ N/A
MICN/ARN training program approval	\$ N/A
Base hospital application	\$ N/A
Base hospital designation	\$ N/A
Trauma center application	\$ N/A
Trauma center designation	\$ N/A
Pediatric facility approval	\$ N/A
Pediatric facility designation	\$ N/A
Other critical care center application	
Type: <u>STEMI</u>	\$ <u>N/A</u>
Type: Thrombectomy Capable Stroke Center	\$ <u>7,500</u>
Other critical care center designation	
Type: <u>STEMI</u>	\$ <u>25,000</u>
Type: Primary Stroke Center	\$ N/A
Type: Thrombectomy Capable Stroke Center	\$ N/A
Type: Comprehensive Stroke Center	\$ N/A



 Ambulance service licence
 \$ N/A

 Ambulance vehicle permits
 \$ N/A

 Other:
 \$ N/A

 Other:
 \$ N/A

 Other:
 \$ N/A



TABLE 2: SYSTEM ORGANIZATION AND MANAGEMENT (cont.)

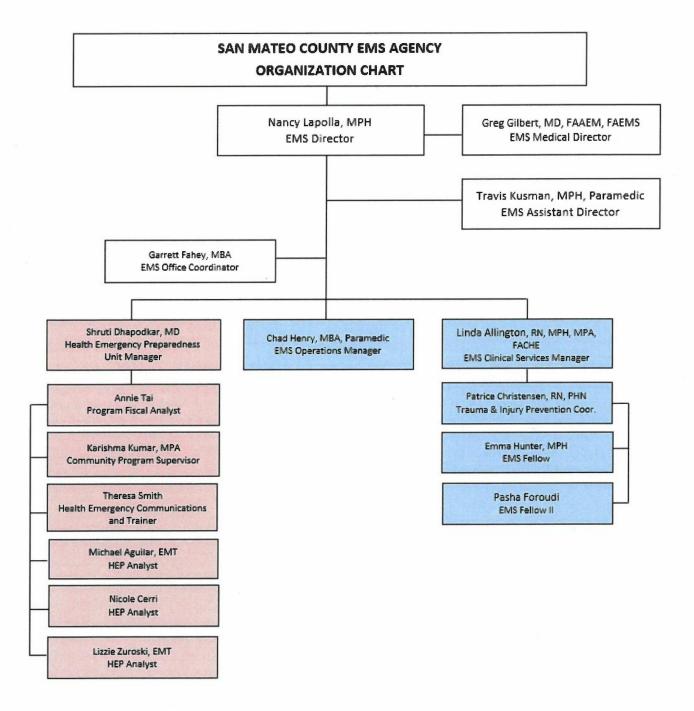
Category	Actual Title	FTE Positions (EMS only)	Top Salary by hourly equivalent	Benefits (% of salary)	Comments
EMS Admin./Coord./Director	EMS Director	1.0	\$91.14	40%	
EMS Admin./Coord./Director	Assistant EMS Director	1.0	\$91.14	40%	
Asst. Admin. or Admin. Asst. or Admin. Mgr.	Clinical Services Manager II	1.0	\$83.46	40%	
Asst. Admin. or Admin. Asst. or Admin. Mgr.	Health Services Manager I	1.0	\$61.69	40%	
ALS Coord./Field Coord./Trng Coordinator	Public Health Nurse (PHN)	1.0	\$55.86	40%	
Program Coordinator/Field Liaison (Non-clinical)	Management Analyst	1.0	\$53.78	40%	
Trauma Coordinator	See PHN above				
Medical Director	EMS Medical Director	0.33	\$200.00	0%	Contract with Stanford Hospital; MD is not a EMS Agency employee
Other MD/Medical Consult/Training Medical Director					
Disaster Medical Planner	Health Emergency Preparedness Program Manager	1.0	\$62.67	40%	
Dispatch Supervisor					
Medical Planner					
Data Evaluator/Analyst					
QA/QI Coordinator	See Clinical Services Manager II above				



Public Info. & Education Coordinator	Community Program Specialist II	1.0	\$39.81	40%
Executive Secretary	Administrative Assistant II	1.0	\$42.45	40%
Other Clerical				
Data Entry Clerk				
Other	Health Emergency Communications and Trainer	1.0	\$39.81	40%
Other	Health Emergency Preparedness Analyst	1.0	\$22.00	40%
Other	EMS Management Fellow	1.0	\$40.00	40%
Other	Special Care Coordinator	0.25	\$64.11	0%

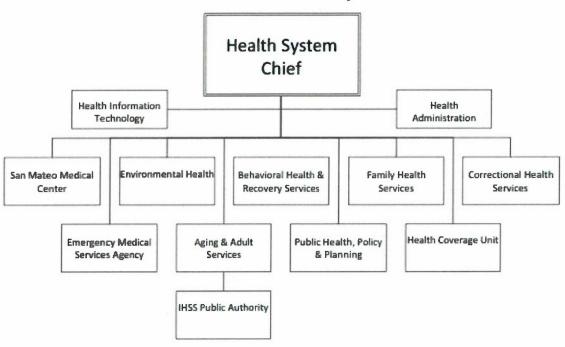
Include an organizational chart of the local EMS agency and a county organization chart(s) indicating how the LEMSA fits within the county/multi-county structure.







San Mateo Health System



FY 2017-19



TABLE 3: SYSTEM RESOURCES AND OPERATIONS - Personnel/Training

EMS System:

San Mateo County

Reporting Year:

2019

NOTE: Table 3 is to be reported by agency.

	EMT - Is	EMT - IIs	EMT - Ps	MICN
Total Certified	350	N/A		N/A
Number newly certified this year	137	N/A		N/A
Number recertified this year	213	N/A		N/A
Total number of accredited personnel on July 1 of the reporting year			560	N/A
Number of certification reviews result	ing in:			
a) formal investigations	4	N/A		N/A
b) probation	3	N/A	N/A	N/A
c) suspensions	0	N/A	N/A	N/A
d) revocations	1	N/A		N/A
e) denials	0	N/A		N/A
f) denials of renewal	0	N/A		N/A
g) no action taken	0	N/A	N/A	N/A

1.	Number of EMS dispatch agencies utilizing EMD Guidelines:	<u>1</u>	
2.	Early defibrillation: a) Number of EMT=I (defib) certified	N/A	
	b) Number of public safety (defib) certified (non-EMT-I)	N/A	
3.	Do you have a first responder training program	□ yes	⊠ no



TABLE 4: COMMUNICATIONS

Note: Table 4 is to be answered for each county.

County: San Mateo				
Reporting Year: 2019				
1.	Number of	orimary Public Servic	ce Answering Points (PSAP)	14
2.	Number of s	secondary PSAPs		1
3.			ectly dispatching ambulances	1
4.			ies utilizing EMD guidelines	1
5.	Number of o	designated dispatch	centers for EMS Aircraft	1
6.		primary dispatch ag County Public Safety	gency for day-to-day emergencies? <u>y Communications</u>	
7.		r primary dispatch a County Public Safety	gency for a disaster? <u>y Communications</u>	
8.	Do you have	e an operational area	a disaster communication system?	⊠ Yes □ No
	a. Radio pri	imary frequency	700MHz trunked	
	b. Other me	ethods	Microwave (21.8 – 22.4 GHz; 23.0 – 23.6 GHz); Fire VHF radio channels	
		nedical response uni ications system?	ts communicate on the same disaster	⊠ Yes □ No
	d. Do you p (OASIS)?		erational Area Satellite Information System	⊠ Yes □ No
		ave a plan to utilize as a back-up comm	the Radio Amateur Civil Emergency Services nunication system?	⊠ Yes □ No
	1) Within	n the operational are	ea?	⊠ Yes □ No
	2) Betwe	en operation area ar	nd the region and/or state?	⊠ Yes □ No



TABLE 5: RESPONSE/TRANSPORTATION

Reporting Year: 2019

Note: Table 5 is to be reported by agency.

Early Defibrillation Providers

Number of EMT-Defibrillation providers 1.

0

SYSTEM STANDARD RESPONSE TIMES (90TH PERCENTILE)

Enter the response times in the appropriate boxes:

	METRO/URBAN	SUBURBAN/ RURAL	WILDERNESS	SYSTEMWIDE
BLS and CPR capable first responder	n/a	n/a	n/a	n/a
Early defibrillation responder	6:59 minutes	11:59 minutes	21:59 minutes	6:59 – 21:59 minutes
Advanced life support responder	6:59 minutes	11:59 minutes	21:59 minutes	6:59 – 21:59 minutes
Transport Ambulance	12:59 minutes	19:59 minutes	39:59 minutes	12:59 – 39:59 minutes



TABLE 6: FACILITIES/CRITICAL CARE

Reporting Year:

2019 (*data reported is for July 2018-June 2019)

NOTE: Table 6 is to be reported by agency.

Trauma

Trauma patients:

Number of patients meeting trauma triage criteria	<u>1,906*</u>
Number of major trauma victims transported directly to a trauma center by ambulance	1,906*
3. Number of major trauma patients transferred to a trauma center	<u>128*</u>

4. Number of patients meeting triage criteria who weren't treated at a trauma center

N/A - Non-trauma centers do not submit data to **LEMSA**

Emergency Departments

Total number of emergency departments	11 (including 4 out of				
vestilities of the grant general gener	county)				
Number of referral emergency services	0				
1. Number of referral efficigency services	<u>u</u>				
2. Number of standby emergency services	1				
Number of basic emergency services	10 (includes 4 out of county)				
4. Neuroland of community and community complete	0				
Number of comprehensive emergency services	<u>0</u>				
Receiving Hospitals					

 Number of receiving hospitals with written agreements 	<u>7</u>
2. Number of base hospitals with written agreements	<u>1</u>



TABLE 7: DISASTER MEDICAL

Reporting Year: 2019

County:

San Mateo

NOTE: Table 7 is to be answered for each county.

SYSTEM RESOURCES

1.	Casualty Collections Points (CCP)	
	a. Where are your CCPs located? CCPs are located adjacent to each hos	pital. Alternate sites
	designated as needed.	
	b. How are they staffed? Staffed by hospital and volunteer healthcare per	sonnel.
	c. Do you have a supply system for supporting them for 72 hours?	☐ Yes ☒ No
2.	CISD Do you have a CISD provider with 24-hour capability?	⊠ Yes □ No
3.	Medical Response Team a. Do you have any team medical response capability? b. For each team, are they incorporated into your local response plan? c. Are they available for statewide response? d. Are they part of a formal out-of-state response system?	✓ Yes✓ No✓ Yes✓ No✓ Yes✓ No✓ Yes✓ No
4.	 Hazardous Materials a. Do you have any HazMat trained medical response teams? b. At what HazMat level are they trained? <u>First Responder, Technician, and Specialist depending on the fire agency.</u> c. Do you have the ability to do decontamination in an emergency room? d. Do you have the ability to do decontamination in the field? 	✓ Yes □ No✓ Yes □ No✓ Yes □ No
OP	ERATIONS	
1.	Are you using a Standardized Emergency Management System (SEMS) that incorporates a form of Incident Command System (ICS) structure?	⊠ Yes □ No
2.	What is the maximum number of local jurisdiction EOCs you will need to interact with in a disaster?	20



3.	Have you tested your MCI Plan this year in a:		
	a. real event?		□ No
	b. exercise?		□ No
4.	List all counties with which you have a written medical mutual aid agreement:		
	All counties that have entered into the California Mutual Aid Region II - Assis	tance Co	<u>ooperative</u>
	Agreement for Emergency Medical and Health Disaster Assistance agreement	<u>nt</u>	
5.	Do you have formal agreements with hospitals in your operational area to participate in disaster planning and response?	⊠ Yes	□ No
6.	Do you have a formal agreement(s) with community clinics in your operational areas to participate in disaster planning and response?	⊠ Yes	□ No
7.	Are you part of a multi-county EMS system for disaster response?	⊠ Yes	□ No
8.	Are you a separate department or agency?	☐ Yes	⊠ No
9.	If not, to whom do you report? Health System Chief		
8.	If your agency is not in the Health Department, do you have a plan to coordinate public health and environmental health issues with the Health Department?	N/A	



Table 8: Resource Directory

Reporting \	Year: 2019	Note: Table 8 is to be		Transportation/Provider		copies as ne	eded.				
County:	San Mateo		Provider:		e-Hospita	l Respo		Zone:			ity n Francisco
Address:	1510 Rollin	es Road e, California 94041	_ '	Number of Ambulance	Vehicles	s in Fleet:			n/a		
Phone Number:	(650) 235-1	1255		Average Number of Ar At 12:00 p.m. (noon) o					n/a		
Written	Contract:	Medical Director:	System	Available 24 Hours:		<u>l</u>	_evel	of Ser	vice:		
⊠ Yes	□ No	⊠ Yes □ No	⊠ Yes	□ No		ansport on-Transport		ALS BLS LALS	□ 9-1□ 7-0□ CO□ IF1	Digit T	☑ Ground☐ Air☐ Water
Own	ership:	If Public:	<u>lf</u>	Public:		<u>lf Air:</u>			Air Clas	sific	ation:
3500 A	Public Private	☑ Fire☐ Law☐ OtherExplain:	⊠ City □ State □ Feder	☑ County☑ District	0	Rotary Fixed Wing				bula escu	nce e
45,990Total number of responses0Total number of transports45,990Number of emergency responses0Number of emergency transports0Number of non-emergency responses0Number of non-emergency transports											
0 0	Number of e	0 Number of emergency responses 0 Number of emergency transports					trans		orts		



Table 8: Resource Directory

Re	porting	Year:	
110	DOLLING	Loui.	

2019

Response/Transportation/Providers

Note: Table 8 is to be completed for each provider by county. Make copies as needed.

County: San Mateo		Provider: American Medical Res	Response	Zone: All except City of South San Francisco		
Address: 1510 Rolling	ns Road e, California 94041	Number of Ambulance	Vehicles in Fleet:	26		
Phone Number: (650) 235-	1333	Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 19				
Written Contract:	Medical Director:	System Available 24 Hours:	of Service:			
⊠ Yes □ No	⊠ Yes □ No	⊠ Yes □ No	☐ Non-Transport ⊠	ALS ⊠ 9-1-1 ⊠ Ground BLS ⊠ 7-Digit □ Air LALS □ CCT □ Water □ IFT		
Ownership	If Bublio	If Dublica	If Air:	Air Classification:		
Ownership: ☐ Public ☐ Private	If Public: ☐ Fire ☐ Law ☐ Other Explain:		☐ Rotary ☐ Fixed Wing	☐ Auxiliary Rescue ☐ Air Ambulance ☐ ALS Rescue ☐ BLS Rescue		
39,405 Number of e	Transporting Agencies ser of responses emergency responses non-emergency responses Transporting Agencies 35,432 2,830 Number of transports Number of emergency transports Number of non-emergency transports					
0 Number of e	er of responses mergency responses on-emergency responses	Air Ambulance Services 0 0 0 0	Total number of transports Number of emergency transports Number of non-emergency transports			



Table 8: Resource Directory

Reporting	Year:	2019
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Response/Transportation/Providers

Note: Table 8 is to be completed for each provider by county. Make copies as needed

County:	Note. Table 8 is to be t	Provider: South San Francisco		Zone: City of South San		
San Mateo		Department		Francisco		
	Canal Street	Number of Ambulanc	e Vehicles in Fleet:	5		
Phone Number: (650) 829	-3950	Average Number of Ambulances on Duty At 12:00 p.m. (noon) on Any Given Day: 3				
Written Contract:	Medical Director:	System Available 24 Hours:	of Service:			
☐ Yes ☒ No Wedworth-Townsend Provider	⊠ Yes □ No	⊠ Yes □ No	☐ Non-Transport ☐ LALS ☐ CCT ☐ V			
Ownership: If Public:		If Public: If Air: A		Air Classification:		
⊠ Public □ Private	☑ Fire☐ Law☐ OtherExplain:	☑ City☐ State☐ District☐ Federal	□ Rotary □ Fixed Wing	☐ Auxiliary Rescue☐ Air Ambulance☐ ALS Rescue☐ BLS Rescue		
4,107 Number of	4,107 Number of emergency responses 208 Number of emergency transports					
0 Number of	er of responses emergency responses non-emergency responses	Air Ambulance Services 0 0 0 0	0 Total number of transports Number of emergency transports			



Date: 2019

EMS PLAN AMBULANCE ZONE SUMMARY FORM

In order to evaluate the nature of each area or subarea, the following information should be compiled for each zone individually. <u>Please include a separate form for each exclusive</u> and/or nonexclusive ambulance zone.

Local EMS Agency or County Name: San Mateo County

Area or Subarea (Zone) Name or Title: San Mateo County, except the City of South San Francisco

Name of Current Provider(s): American Medical Response – West (AMR) Include company name(s) and length of operation (uninterrupted) in specified area or subarea.

AMR has provided service under this name since January 1999. The company was the selected proposer per a Request for Proposal (RFP) competitive process conducted in 1997/98, 2007/2008, and again in 2018. This provider had been the contract holder since 1990 under the names of Baystar, Medtrans/Laidlaw, and AMR. Therefore, AMR has provided uninterrupted emergency ambulance since January 1990.

Area or Subarea (Zone) Geographic Description: San Mateo County, except the City of South San Francisco

Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6): Include intent of local EMS agency and Board action.

Competitive Process – Section 1797.224. Emergency ambulance service – all emergencies. Until 1989, exclusivity language contained in the plan was "advanced life support." Language in plan was amended to "emergency ambulance service" in 1989 with the approval of the EMS Authority. The San Mateo County Board of Supervisors approved both the RFP and the contract in 1998 and granted a five-year contract extension in 2003. Contract included emergency ambulance service and paramedic first response (fire service was a subcontractor to the contractor). A subsequent five-year contract was awarded through an RFP competitive process in 2008 and went into effect in July 2009, was extended in June 2014 and expired June 2019. Current contract was awarded through an RFP competitive process in 2018 and went into effect in July 2019. Current contract does not include paramedic first response. There is a separate contract with the San Mateo County Pre-Hospital Emergency Medical Services Group (JPA) for paramedic fire first response services that went into effect July 2019. The EMS Agency plans to conduct future ambulance RFPs at periodic intervals to ensure the most appropriate level of ambulance service is available to meet the needs of San Mateo County.

Type of Exclusivity ("Emergency Ambulance," "ALS," or "LALS" [HS 1797.85]): Include type of exclusivity (Emergency Ambulance, ALS, LALS, or combination) and operational definition of exclusivity (e.g., 911 calls only, all emergencies, all calls requiring emergency ambulance service, etc.).

Type of Exclusivity = Emergency Ambulance. Levels of Exclusivity = Limited Ambulance Services.



Emergency Response: 1) 9-1-1 Emergency Response and 2) 7-Digit Emergency Response. ALS Ambulance.

Method to achieve exclusivity, if applicable (HS 1797.224):

If <u>grandfathered</u>, pertinent facts concerning changes in scope and manner of service. Description of current provider including brief statement of uninterrupted service with no changes to scope and manner of service to zone. Include chronology of all services entering or leaving zone, name or ownership changes, service level changes, zone area modifications, or other changes to arrangements for service.

If <u>competitively-determined</u>, method of competition, intervals, and selection process. Attach copy/draft of last competitive process used to select provider or providers.

Emergency ALS ambulance transport services competitive process was approved by and is on file with EMSA. The EMS Agency concluded an RFP competitive process for ALS emergency ambulance services and negotiated a new contract prior to the expiration of the June 2019 contract. The new contract began July 1, 2019.



Local EMS Agency or County Name: San Mateo County

Area or Subarea (Zone) Name or Title: City of South San Francisco

Name of Current Provider(s): City of South San Francisco Fire Department Include company name(s) and length of operation (uninterrupted) in specified area or subarea.

Area or Subarea (Zone) Geographic Description: City of South San Francisco

Statement of Exclusivity, Exclusive or non-Exclusive (HS 1797.6):

Include intent of local EMS agency and Board action.

City of South San Francisco qualifies for exclusivity within its jurisdiction.

Type of Exclusivity ("Emergency Ambulance," "ALS," or "LALS" [HS 1797.85]): Include type of exclusivity (Emergency Ambulance, ALS, LALS, or combination) and operational definition of exclusivity

Include type of exclusivity (Emergency Ambulance, ALS, LALS, or combination) and operational definition of exclusivity (e.g., 911 calls only, all emergencies, all calls requiring emergency ambulance service, etc.).

Emergency ambulance. Emergency Response = 911 Emergency Response, 7-Digit Emergency Response. Transport Services = ALS Ambulance Services.

Method to achieve exclusivity, if applicable (HS 1797.224):

If <u>grandfathered</u>, pertinent facts concerning changes in scope and manner of service. Description of current provider including brief statement of uninterrupted service with no changes to scope and manner of service to zone. Include chronology of all services entering or leaving zone, name or ownership changes, service level changes, zone area modifications, or other changes to arrangements for service.

If <u>competitively-determined</u>, method of competition, intervals, and selection process. Attach copy/draft of last competitive process used to select provider or providers.

Non-Competitive (grandfathering). The EMS Agency believes South San Francisco Fire meets the criteria for "grandfathering" in Section 1797.224, and as such qualifies for exclusivity within its jurisdiction. On March 4, 1975, the San Mateo County Board of Supervisors approved Resolution No. 34702 authorizing an agreement with City of South San Francisco to establish a paramedic response and transport unit in cooperation with the County, and its effort to establish a comprehensive emergency medical system. Since that time South San Francisco Fire Department has provided continuous paramedic transport services within the County for the City of South San Francisco. This has been documented in EMS Plans, internal documents, and various media publications going back to 1974.



MEDICAL SERVICES								
TABLE 9: FACILITIES	TABLE 9: FACILITIES							
County: San Mateo								
Note: Complete information	n for each f	acility by county. Make	copies a	as needed.				
Facility: Seton Hospita			_ Te	elephone Number: (650)	992-4000			
Address: 1900 Sullivar Daly City, Ca	The state of the s	015	_					
Buly Oity, Camorria 54616								
Written Contract: Service: Base Hospital: Burn Center:								
			Standby Emergency Comprehensive Emergency	⊠ Yes □ No	☐ Yes ⊠ No			
Pediatric Critical Care Center¹ ☐ Yes ☒ No			Trauma Center:	If Trauma Cent	er what level:			
EDAP ² PICU ³		⊠ Yes □ No □ Yes ⊠ No		□ Yes ⊠ No	☐ Level I	□ Level II		
					☐ Level III	☐ Level IV		
0====]				
STEMI Center:		Stroke Center:						

STEMI Center:	Stroke Center:
⊠ Yes □ No	⊠ Yes □ No

¹ Meets EMSA Pediatric Critical Care Center (PCCC) Standards

Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



MEDICAL SERVICES							
TABLE 9: FACILITIES							
County: San Mateo	n for ooob	facility by pounty. Make a	!			· · · · · · · · ·	
San Francisco Address: 1200 El Cam	anente Me co ino Real	edical Center - South California 94080	0		742-2200		
Written Contract:		<u>Ser</u>	vice:		Base Hospital:	Burn Center:	
☑ Yes ☐ No☐ Referral Emergency☑ Basic Emergency			Standby Emergency Comprehensive Emergency	⊠ Yes □ No	☐ Yes ⊠ No		
Pediatric Critical Care Center¹ ☐ Yes ☒ No EDAP² ☒ Yes ☐ No PICU³ ☐ Yes ☒ No				<u>Trauma Center:</u> ☐ Yes ☒ No	<u>If Trauma Ce</u> ☐ Level II	nter what level: Level II Level IV	
STEMI Center:		Stroke Center:		7			

☐ Yes ☒ No

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



MEDICAL SERVICES						
TABLE 9: FACILITIES						
County: San Mateo						
Note: Complete information	n for each facility by county. Make copies a	as needed.				
Address: 1501 Trousda		elephone Number: <u>(650) 6</u>	95-5400			
Written Contract:	Service:		Base Hospital:	Burn Center:		
⊠ Yes □ No	□ Referral Emergency□ Basic Emergency□	⊠ Yes □ No	□ Yes ⊠ No			
Pediatric Critical Care EDAP ² PICU ³	Center¹ ☐ Yes ☒ No ☒ Yes ☐ No ☐ Yes ☒ No	Trauma Center: ☐ Yes ☒ No	If Trauma Cente	er what level: □ Level II □ Level IV		

STEMI Center:	Stroke Center:
⊠ Yes □ No	⊠ Yes □ No

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



MEDICAL SERVICES							
TABLE 9: FACILITIES							
County: San Mateo							
Note: Complete information for each facility by county. Make copies as needed.							
Facility: San Mateo Medical Center Telephone Number: (650) 573-2222 Address: 222 West 39 th Street							
San Mateo, California 94403							
Written Contract:	Service	<u> </u>	Base Hospital:	Burn Center:			
⊠ Yes □ No	□ Referral Emergency□ Basic Emergency□	Standby Emergency Comprehensive Emergency	⊠ Yes □ No	□ Yes ⊠ No			
Pediatric Critical Care EDAP ² PICU ³	Center¹ ☐ Yes ☒ No ☒ Yes ☐ No ☐ Yes ☒ No	Trauma Center: ☐ Yes ☒ No	If Trauma Cente	Level IV			
				L LCVCITV			

STEMI Center:

☐ Yes ☒ No

Stroke Center:

☐ Yes ☒ No

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



TIFORH!				
TABLE 9: FACILITIES				
County: San Mateo				
Facility: Sequoia Ho Address: 170 Alamed			367-5561	
Written Contract:	Service	<u> </u>	Base Hospital:	Burn Center:
⊠ Yes □ No	□ Referral Emergency□ Basic Emergency□	Standby Emergency Comprehensive Emergency	⊠ Yes □ No	□ Yes ⊠ No
Pediatric Critical Car EDAP ² PICU ³	e Center¹ ☐ Yes ☒ No ☒ Yes ☐ No ☐ Yes ☒ No	<u>Trauma Center:</u> ☐ Yes ⊠ No	If Trauma Cente	er what level: Level II Level IV
		7		

ke Center:
Yes □ No

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



MEDICAL SE	RVICES					
TABLE 9: FACILITIES						
County: San Mateo						
Note: Complete informatio	n for each facility by county. Make cop	ies as needed.				
Redwood Cit	Redwood City					
South San Francisco, California 94080						
Written Contract:	Servi	ce:	Base Hospital:	Burn Center:		
⊠ Yes □ No		☐ Standby Emergency ☐ Comprehensive Emergency	⊠ Yes □ No	□ Yes ⊠ No		
Pediatric Critical Care	Center¹ ☐ Yes ☐ No ☐ Yes ☐ No	Trauma Center:	If Trauma Cent	er what level:		
PICU ³	☐ Yes ⊠ No	☐ Yes ☒ No	☐ Level II	☐ Level II☐ Level IV		

STEMI Center:	Stroke Center:
⊠ Yes □ No	⊠ Yes □ No

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



MEDICAL SERVICES						
TABLE 9: FACILITIES						
County: San Mateo						
Note: Complete information	n for each facility	by county. Make	copies a	as needed.		
Facility: Stanford Hos 300 Pasteur Stanford, Cal			_ _ _ _ fa	Santa Clara County hospital thacility, Base Hospital, pediatricenter (designated by Santa Cl	Base Hospital, PCCC	
Written Contract:		Se	rvice:		Base Hospital:	Burn Center:
⊠ Yes □ No	□ Referral Emergency⊠ Basic Emergency			Standby Emergency Comprehensive Emergency	⊠ Yes □ No	□ Yes ⊠ No
Pediatric Critical Care Center¹			<u>Trauma Center:</u> ⊠ Yes □ No	If Trauma Cento	er what level: □ Level II □ Level IV	
STEMI Center:		Stroke Center:				_ 50.0

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



MEDICAL SE	RVICES						
TABLE 9: FACILITIES							
County: San Mateo							
Note: Complete information	on for each facility by county. Make copies	as needed.					
Facility: Seton - Coastside Telephone Number: (650) 723-3921 Address: 600 Marine Boulevard Moss Beach, California 94038							
Written Contract:	Service:		Base Hospital:	Burn Center:			
⊠ Yes □ No	☐ Referral Emergency ☐ ☐ Basic Emergency ☐	Standby Emergency Comprehensive Emergency	⊠ Yes □ No	□ Yes ⊠ No			
Pediatric Critical Care EDAP ² PICU ³	Center¹ ☐ Yes ☒ No ☒ Yes ☐ No ☐ Yes ☒ No	Trauma Center: ☐ Yes ☒ No	If Trauma Cente ☐ Level I ☐ Level III	Level IV			

STEMI Center:	Stroke Center:
☐ Yes ⊠ No	☐ Yes ⊠ No

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



TABLE 9: FACILITIES						
County: San Mateo						
Note: Complete information	n for each	facility by county. Make of	copies a	as needed.		
Facility: Palo Alto VA Address: 3801 Miranda			_ Te	elephone Number: (650)	493-5000	
Palo Alto, Ca			_			
*Santa Clara County facility that serves San Mateo County as a receiving hospital						
Written Contract:		Se	rvice:		Base Hospital:	Burn Center:
□ Yes ⊠ No		Referral Emergency		Standby Emergency	☐ Yes ⊠ No	☐ Yes ☒ No
	⊠ E	Basic Emergency		Comprehensive Emergency		
Pediatric Critical Care EDAP ²	Center ¹	☐ Yes ☒ No ☐ Yes ☒ No		Trauma Center:	If Trauma Cente	er what level:
PICU ³		☐ Yes ⊠ No		☐ Yes ☒ No	□ Level I	□ Level II
					☐ Level III	☐ Level IV
STEMI Center:		Stroke Center:	· · · · · · · · · · · · · · · · · · ·	1		
STERN Center.		otione deliter.				

☐ Yes ☒ No

☐ Yes ☒ No

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



No na								
TABLE 9: FACILITIES	TABLE 9: FACILITIES							
County: San Mateo	County: San Mateo							
Note: Complete information	n for each	facility by county. Make co	pies	as needed.				
Facility: Dominican H Address: 1555 Soquel	Drive		7	Telephone Number: (831)	462-7700		(
Santa Cruz, (<u>California</u>	95065		Santa Cruz County facility the ecciving hospital	at serves San Mateo Co	ounty as a		
Written Contract:		Serv	vice:		Base Hospital:	Burn Center:		
□ Yes ⊠ No		Referral Emergency Basic Emergency		Standby Emergency Comprehensive Emergency	⊠ Yes □ No	☐ Yes ⊠ No		
							1	
Pediatric Critical Care EDAP ²	Center ¹	☐ Yes ☒ No		Trauma Center:	If Trauma Cent	er what level:		
PICU ³	*	⊠ Yes □ No □ Yes ⊠ No		□ Yes ⊠ No	☐ Level III	☐ Level II ☐ Level IV	C	
							X	
STEMI Center:	ž.	Stroke Center:						
☐ Yes ⊠ No		☐ Yes ⊠ No						



MEDICAL SERVICES							
TABLE 9: FACILITIES							
County: San Mateo							
Note: Complete information	n for each facility by county. Make o	copies a	as needed.				
Facility: University of California San Francisco Telephone Number: Medical Center* (415) 353-1611							
	Address: 1975 4 th Street						
San Francisco	o, California 94158		San Francisco County facility esignated PCCC only	that serves San Mateo	County as a		
Written Contract:	Se	rvice:		Base Hospital:	Burn Center:		
☐ Yes ☒ No ☐ Referral Emergency ☒ Basic Emergency			Standby Emergency Comprehensive Emergency	□ Yes ⊠ No	☐ Yes ⊠ No		
	•						
Pediatric Critical Care (EDAP ² PICU ³	Center¹ ⊠ Yes □ No ⊠ Yes □ No ⊠ Yes □ No		Trauma Center: ☐ Yes ☒ No	If Trauma Center ☐ Level I ☐ Level III	□ Level II □ Level IV		
STEMI Center:	Stroke Center:]				
☐ Yes ☒ No	☐ Yes ⊠ No						

¹ Meets EMSA Pediatric Critical Care Center (PCCC) Standards

Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



CALLEGENIE V	MEDICAL SERVICES						
TABLE 9:	FACILITIES				Sec.		
County: Sa	an Mateo						
Note: Comp	olete information	for each	facility by county. Make c	opies	as needed.		
Facility: California Pacific Medical Center – Davies Campus*		Telephone Number: (415) 600-6464					
Address:	Castro and Do						
-	San Francisco	o, Callion	111a 34114		*San Francisco County facility designated PCCC only	that serves San Mated	o County as a
Written	Contract:		Ser	vice	<u> </u>	Base Hospital:	Burn Center:
☐ Yes	s ⊠ No		Referral Emergency Basic Emergency		Standby Emergency Comprehensive Emergency	□ Yes ⊠ No	□ Yes ⊠ No
Pediatric Critical Care Center¹ ⊠ Yes □ No				Trauma Center:	If Trauma Cent	er what level:	
EDAP ² PICU ³			✓ Yes✓ No✓ Yes✓ No		☐ Yes ⊠ No	☐ Level II	☐ Level II
97	TEMI Center:		Stroke Center:		7		·
	☐ Yes ⊠ No		☐ Yes ⊠ No				

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



MEDICAL SERVICES							
TABLE 9: FACILITIES							
County: San Mateo							
Note: Complete information	n for each	facility by county. Make c	opies	as needed.			
Address: 1001 Portrero	o Avenue	isco General Hospital*	_ T	elephone Number: (628)	206-8000		•
San Francisco, California 94110 *San Francisco County facility that serves San Mateo County as a trauma center designated by San Francisco LEMSA							
Written Contract:		Ser	rvice:		Base Hospital:	Burn Center:	
☑ Yes ☐ No☐ Referral Emergency☑ Basic Emergency			Standby Emergency Comprehensive Emergency	⊠ Yes □ No	□ Yes ⊠ No		
Pediatric Critical Care Center¹ ☐ Yes ☒ No			Trauma Center:	If Trauma Cent	er what level:		
EDAP ² PICU ³		□ Yes ⊠ No □ Yes ⊠ No		⊠ Yes □ No	□ Level III	☐ Level II☐ Level IV	
STEMI Center:		Stroke Center:		1			
□ Voc ⊠ No		□ Voc ⊠ No					

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



MEDICAL SERVICES								
TABLE 9: FACILITIES								
County: San Mateo								
Note: Complete informatio	n for each facility by county. Make c	copies as needed.						
Facility: St. Francis Hospital* Telephone Number: (415) 353-6300 Address: 900 Hyde Street San Francisco, California 94109								
<u> </u>	*San Francisco, California 94 109 *San Francisco County facility that serves San Mateo County as a burn center only							
Written Contract:	<u>Ser</u>	rvice:	Base Hospital:	Burn Center:				
☐ Yes ☒ No ☐ Referral Emergency ☒ Basic Emergency		☐ Standby Emergency☐ Comprehensive Emergen	□ Yes ⊠ No	⊠ Yes □ No				
Pediatric Critical Care Center¹ ☐ Yes ☒ No EDAP² ☐ Yes ☒ No PICU³ ☐ Yes ☒ No		Trauma Center: ☐ Yes ☒ No	If Trauma Cent □ Level I	er what level:				
	L 103 Ø 140		☐ Level III	☐ Level IV				

STEMI Center:	Stroke Center:
☐ Yes ☒ No	□ Yes ⊠ No

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



MEDICAL SERVICES							
TABLE 9: FACILITIES							
County: San Mateo							
Note: Complete information	n for each facility by c	ounty. Make copies a	as needed.				
Facility:Santa Clara Valley Medical Center*Telephone Number:(408) 885-3228Address:751 South Bascom Avenue							
San Jose, California 95128 *Santa Clara County facility that serves San Mateo County as a burn center only							
Written Contract:		Service:		Base Hospital:	Burn Center:		
☐ Yes ☒ No ☐ Referral Emergency ☒ Basic Emergency			Standby Emergency Comprehensive Emergency	□ Yes ⊠ No	⊠ Yes □ No		
Pediatric Critical Care Center¹ ☐ Yes ☒ No EDAP² ☐ Yes ☒ No			Trauma Center:	If Trauma Cente	er what level:		
PICU ³		Yes ⊠ No	□ Yes ⊠ No	☐ Level III	☐ Level II☐ Level IV		
STEMI Center:	Str	oke Center:]				

STEMI Center:	Stroke Center:
☐ Yes ⊠ No	☐ Yes ⊠ No

Meets EMSA Pediatric Critical Care Center (PCCC) Standards
 Meets EMSA Emergency Departments Approved for Pediatrics (EDAP) Standards
 Meets California Children Services (CCS) Pediatric Intensive Care Unit (PICU) Standards



TABLE 10: APPROVED TRAINING PROGRAMS

County: San Mateo Reporting Year: 2019

NOTE: Table 10 is to be completed by county. Make copies to add pages as needed.

Training Institution: Address:	College of San Mateo 1700 West Hillsdale Bouleva San Mateo, California 94402	ard	Telephone Number: (650) 574-6347
Student Open to Eligibility*: public	general Cost of Program: Basic: \$982 Refresher: \$139	**Program Level EMT-I Number of students completing training per year: Initial training Refresher: Continuing Education: Expiration Date: Number of courses: Initial training: Refresher: Continuing Education:	70 8 n/a 6/30/2023 2 1 n/a

^{*}Open to general public or restricted to certain personnel only.

**Indicate whether EMT-I, AEMT, EMT-P, MICN, or EMR; if there is a training program that offers more than one level complete all information for each level.



Training Institution: Address:	Skyline College 3300 College Drive San Bruno, California 94066		Telephone Number:	(650) 738-4284
Student Open to o		**Program Level <u>EMT-I</u> Number of students completing training per year	:	
	Refresher: \$50	Initial training Refresher: Continuing Education: Expiration Date: Number of courses: Initial training: Refresher: Continuing Education:	Not reported Not reported Not reported 3/31/2021 3 1 Varies	

^{*}Open to general public or restricted to certain personnel only.

** Indicate whether EMT-I, AEMT, EMT-P, MICN, or EMR; if there is a training program that offers more than one level complete all information for each level.



Training Institution: Address:	480 No	an Francisco Fire Department th Canal Street an Francisco, California 94080		Telephone Number:	(650) 877-8664
Student Open to g	general	Cost of Program: Basic: \$1,650 Refresher: \$500	**Program Level EMT-I Number of students completing training per year: Initial training Refresher: Continuing Education: Expiration Date: Number of courses: Initial training: Refresher: Continuing Education:	Not reported Not reported Not reported 6/30/2023 1-2 year 10 per year Varies	

^{*}Open to general public or restricted to certain personnel only.

** Indicate whether EMT-I, AEMT, EMT-P, MICN, or EMR; if there is a training program that offers more than one level complete all information for each level.



TABLE 11: DISPATCH AGENCY

County: San Mateo

NOTE: Make copies to a		Complete information	TOI CAOII PI		ounty.					
Name:	San Mateo Cou	San Mateo County Public Safety Communications				Primary Contact:		Lisa Lucett, Fire/EMS Dispatch Manager		
Address:	501 Winslow St	reet	-			ag				
Telephone Number:	(650) 363-4900									
Written Contract:	Medical Director:	□ Day-to-Day	Number	Number of Personnel Providing Services:						
⊠ Yes □ No	⊠ Yes □ No	⊠ Disaster	<u>30</u> 0	EMD Train	ning <u>(</u>	<u>)</u>	EMT-D LALS	<u>0</u> n/a	ALS Other	
Ownership:		If Public:	_		0.5	_		1. 011.01.01 .0		
□ Private			If Public	☐ City		у 🗆	State 🗆 F	Fire Distric	t 🗆 Federal	
		⊠ Law								
		□ Other								
		Explain:								

Reporting Year: 2019