

EMERGENCY MEDICAL CARE COMMITTEE CONTRA COSTA COUNTY

Wednesday, June 10, 2020 4:00 – 5:30 p.m. Zoom Virtual Meeting

Agenda

4:00 p.m.	1.	Introduction of Members and Guests
4:05	2.	Approval of Minutes from December 11, 2019 (no March meeting minutes)
4:07	3.	Comments from the Public Members of the public may speak up to 3 minutes each on matters either on or not on this agenda.
4:10	4.	Chair's Report Jon King, EMCC Chair
4:15	5.	Members' Reports
4:20	6.	Fire Chiefs' Report Fire Executive Chief Representative
4:25	7.	Health Care Coalition Biannual Report to EMCC (I) Lisa Vajgrt-Smith, Contra Costa Emergency Preparedness Coordinator
4:35	8.	EMCC Legislative Report Emergency Nurses Association Representative
4:40	9.	Update on Ambulance Ordinance Marshall Bennett, Contra Costa EMS Prehospital Care Coordinator
4:50	10.	Quarterly Update on Alliance Ambulance Services Chief Terence Carey, Contra Costa County Fire Protection District
5:00	11.	Approval of 2019 EMS System Plan Objectives (A) Mike Williams, Contra Costa EMS Director
5:05	12.	EMS Medical Director's Report David Goldstein, MD, Contra Costa EMS Medical Director
5:10	13.	EMS Director's Report incl. COVID-19 Update Mike Williams, Contra Costa EMS Director
5:25	14.	Agenda Items for next meeting: September 9, 2020
5:30	15.	Adjournment

*(I)-Informational / *(A)-Action

Reasonable accommodations can be made for persons with disabilities planning to attend the EMCC Meeting by contacting EMS Staff at least 24 hours in advance at (925) 608-5454.

Any disclosable public records related to an item on a regular meeting agenda and distributed by the County to a majority of members of the Emergency Medical Care Committee less than 96 hours prior to that meeting are available for public inspection at 777 Arnold Drive, Suite 110, Martinez, during normal business hours.



EMERGENCY MEDICAL CARE COMMITTEE CONTRA COSTA COUNTY

MEETING MINUTES

December 11, 2019

Members Present Representing

Executive Committee:

Jon King Police Chiefs' Association

Ellen Leng Alameda-Contra Costa Medical Association

Michele Bell Air Medical Transportation Provider

Terence Carey Contra Costa Fire Chiefs' Association

Jack Clapp Public Provider Field Paramedic

John Duggan Ambulance Providers (CC Contract)

David Goldstein EMS Agency Medical Director

Joseph Gorton Public Managers' Association

James Lambert Hospital Council Bay Area Division

David Lilienstein Emergency Dept. Physicians (CC Receiving

Hospital)

Michael Lyons Private Provider Field Paramedic

Cameron Metzger EMS Training Institution

Karin Schnaider District III

Allan Tobias District IV

Members Absent Representing

Chair: Kacey Hansen Trauma Center (CC Contract)

Mark Forrette District II

Pat Frost EMS Agency Director

Ara Gregorian California Highway Patrol

Elaina Petrucci Gunn American Heart Association

Jennifer Lucas American Red Cross

Denise Pangelinan Communications Center Managers' Assoc.

David Samuelson Emergency Nurses Assoc. East Bay

Jason Vorhauer Contra Costa Office of the Sheriff

Introduction of Members and Guests

STAFF PRESENT

Marshall Bennett Contra Costa County EMS

Ben Keizer Contra Costa County EMS

Rachel Morris Contra Costa County EMS

Gia Prado Contra Costa County EMS

OTHERS PRESENT

Joseph Drago REACH

Michael Johnson American Medical Response

Chad Newland American Medical Response

Jill Ray District II

Hannah Robbins Alameda-Contra Costa Medical Association

Rebecca Rozen Hospital Council of Northern and Central California

Executive Committee Member King called the meeting to order at 4:08 p.m.

2.	Approval of Minutes from September 11, 2019 Member Carey motioned to approve the Minutes from September 11, 2019. Member Bell seconded; none opposed. Motion
	passed. September 2019 minutes are approved.
3.	Comments from the Public
	No Comments
4.	Chair's Report
	No Report
5.	Members' Reports
	Member Schnaider presented the slate of officers for the 2019-2021 term as follows: Chair – Member King; Vice Chair –
	Member Hansen; Executive Committee: Member Leng. Currently the fourth position of an additional Executive Committee
	member is vacant. Member King asked for a motion to approve the current slate of nominations. Member Tobias motioned to
	approve the nominations; seconded by Member Bell; none opposed; motion passed. Member King then asked if there are any
	volunteers for the vacant position. Member Lambert asked for more information on the position, which Staff Support Morris
	provided. Member Lambert volunteered for the vacant position. Member King asked for a nomination for Member Lambert,
	which was provided by Member Schnaider; seconded by Member Tobias. Member King then asked for a motion to approve
	the full slate of nominations. Member Schnaider motioned to approve the nominations; seconded by Member Tobias; none
	opposed; motion passed.
6.	Fire Chiefs' Report – Chief Terry Carey, Contra Costa County Fire Protection District (CCCFPD)
0.	-The executive Fire Chiefs' want to go on record to express support for LEMSA staff Ben Keizer in affiliation with the CE
	Provider Program. They look forward to working together in 2020.

-The Board of Supervisors, acting as the Fire Service Board, approved Contra Costa County Fire to purchase 30 Lucas Devices. Each apparatus will have a Lucas Device available. This purchase was made in partnership with AMR. Contra Costa Fire is appreciative of the Fire Board for approving the purchase and will be putting out a public service announcement at the request of the Board.

EMCC Legislative Undate

- 7. EMCC Legislative Update
- No Update
- 8. EMCC Annual (Draft) Report Action: Review/Approve for Submission to the Board of Supervisors (Action Item)
 There was a question asked by Member King about an item listed under the Activities section regarding the ambulance ordinance. The item stated that a final draft had been released from County Counsel; however, it turns out that the draft is still with County Counsel and the LEMSA is still waiting to receive the draft for review. Staff support Morris agreed that she will update the item in the Annual Report prior to submitting it to the Board of Supervisors. After that discussion, Member Tobias motioned for the report to be accepted; seconded by Member Lilienstein; none opposed. Motion passed. Annual EMCC draft report approved, pending update, and will be submitted to the BOS as a consent item at the next possible Board of Supervisors meeting.
- 9. Quarterly Update on Alliance Ambulance Services Chief Terry Carey, Contra Costa County Fire Protection District (CCCFPD)

 Continuing to work on wall time issues. A meeting was held with hospital partners at the direction of the Board of
 Supervisors. The meeting was held in October and a report is being produced that will go to the Board of Supervisors on the
 meeting outcomes, including a potential change to the term "never event." There is a concern with the upcoming flu season as
 that can be a challenging time for resources. The group plans to meet again in January to continue discussions on the issue.
 - Contra Costa Fire is continuing in contract negotiations with AMR. The current contract expires at the end of 2020. Both sides agreed they are having positive discussions.
 - Continuing to discuss compliance numbers and brainstorming ways to keep numbers up. The threshold is 90 percent; haven't gone below the threshold but continue to experience challenges.
 - ConAir currently has one active aircraft, which is going well. The second aircraft is delayed but anticipated to go live in 2020.
 - Issues at the end of the BART line have improved, but a change in weather could potentially have a negative effect on conditions. Contra Costa Fire is meeting with LEMSA and partners on the issue.
- 10. Update on draft Letter of Support for Additional EMS System Dedicated Funding

 Member Goldstein addressed the Committee regarding the previous request made by Pat Frost for a draft letter of support for additional EMS System dedicated funding. The LEMSA is no longer requesting a letter. At this time, there will not be an EMS specific funding request going forward.
- 11. EMS Medical Director's Report David Goldstein, MD, Contra Costa EMS Agency Medical Director
 - Member Goldstein was invited by Santa Clara County as a guest; the County is looking at the Alliance model. Discussions included challenges we face, which may seem exclusive to us in Contra Costa County, but are also experienced in other counties.
 - Discussion of term "never event"- the term can be polarizing and can initiate a mandatory report to the state/Feds that brings inspectors to a hospital, where they can look at anything, not just specific to the reported event. An effort will be made to come up with another term, acceptable to all groups. APOT issues are experienced in Contra Costa County, but are not exclusive to our County.
 - The LEMSA is looking to have a more comprehensive approach towards the opiate overdose problem. The situation has improved slightly in that there are more resources and open dialogue on the issue. The County has expanded the number of available clinics and manage 500-600 people. The focus is on how to get available resources to the people who need them. There was discussion on the involvement of Emergency Departments, and the use of Narcan and Buprenorphine. The County is working on a potential three-year trial involving trained paramedics giving patients Buprenorphine on scene under the direction of a trained physician. A workgroup made up of various stakeholders continues to meet on the issue.
 - Member Goldstein announced Pat Frost, previous EMS Director, will be retiring in March 2020. As of now, he will be in both the EMS Medical Director and interim EMS Director roles.
- 12. Roundtable

Member Bell announced she will be transitioning with REACH to another county, so she will be resigning from the EMCC after today. She brought Joe Drago as a guest to the meeting, who will be transitioning to the Program Director and Clinical Director for REACH in Contra Costa County in January.

- 13. Proposed agenda item(s) for March 11, 2020
 - Report on impacts of PG&E PSPS event, including impacts to Agencies.
 - Update on ambulance ordinance.
- 14. Adjournment at 5:15pm

Scata	EMCC Mambaus	12/12/2012	2/12/2010	6/43/3040	0/11/2010	12/11/2012	2/11/2020	6/10/2020	0/0/2020
Seats	EMCC Members	12/12/2018	3/13/2019	6/12/2019	9/11/2019	12/11/2019	3/11/2020	6/10/2020	9/9/2020
B 1 Alameda Contra Costa Medical Association	Ellen Leng	Present	Present	Present	Present	Present			
B 2 American Heart Associaton	Elaina Petrucci Gunn	Absent	Present	Absent	Present	Absent			
B 3 American Red Cross B 4	Jennifer Lucas	Absent	Present	Absent	Absent	Absent			
California Highway Patrol	Ara Gregorian	Absent	Absent	Absent	Absent	Absent			
B 5 Communications Center Managers' Association	Denise Pangelinan	Absent	Present	Absent	Present	Absent	N		
B 6 Contra Costa Fire Chiefs'		Absent	Flesent	Absent	Flesent	Absent	1 1		
Association	Terence Carey	Present	Present	Present	Present	Present			
B 7 Contra Costa Police Chiefs' Association	Jon King	Present	Present	Present	Present	Present			
B 8 Emer. Nurses Assoc. East Bay Chapter	David Samuelson	Absent	Present	Present	Absent	Absent			
B 9 Hospital Council	lamaa lambaut	A h =	Document	Donasant	A la 4	Donasant			
East Bay	James Lambert	Absent	Present	Present	Absent Vacant	Present			
B 10 Public Managers' Association	Joseph Gorton	Present (Napper)	Present (Napper)	Present (Napper)	(Napper Resigned)	Present (Gorton)	N 4		
B 11							I \/I		
Trauma Center (Contra Costa Contract)	Kacey Hansen	Absent	Absent	Present	Absent	Absent	IVI		
B 12 Contra Costa Office of the Sheriff	Jason Vorhauer	Present	Absent	Present	Present	Absent			
B 13 Contra Costa Health Services - Behavioral Health	Vacant	Vacant	Vacant	Vacant	Vacant	Vacant			
C 1 Ambulance Providers (Contra Costa Contract)	John Duggan	Present	Present	Present	Present	Present			
C 2 Air Medical Transportation Provider	Michele Bell	Present	Present	Present	Present	Present	L		
C 3 EMS Training Institution	Cameron Metzger	Present	Present	Absent	Present	Present	T		
C 4 Private Provider Field Paramedic	Michael Lyons (as of Dec. 2019)	Vacant	Vacant	Vacant	Vacant	Present	1		
C 5 Public Provider Field	Jack Claure		D		Donoros	Donorost			
Paramedic C 6	Jack Clapp	Absent	Present	Present	Present	Present			
Emergency Department Physicians	David Lilienstein	Absent	Present	Present	Absent	Present	IV		
District I (Gioia)	Vacant	Absent (Stieler)	Absent (Stieler)	Vacant (Stieler Resigned)	Vacant	Vacant			
District II		,	,						
(Andersen) District III (Burgis)	Mark Forrette Karin Schnaider	Present Absent	Present Present	Absent	Present Present	Absent Present			
District IV (Mitchoff)	Allan Tobias	Absent	Absent	Present	Absent	Present			
District V									
(Glover) E 1	Vacant	Vacant	Vacant	Vacant	Vacant	Vacant			
Ex Officio E 2 Ex Officio	Pat Frost David Goldstein	Present Present	Present Present	Absent Present	Present Present	Absent Present			
LA OTHER	Quorum	1 1636111	1 1696111	1 1656111	1 1696111	1 1656111			

Advisory Body + Brown Act done

Meeting Attendance Requirements per the Bylaws:

- A. EMCC members shall attend EMCC meetings.

 B. A member who cannot attend a meeting must notify the Chair and may have one excused absence in a twelve month period.

 C. Whenever a member does not attend two regularly scheduled meetings, within a rolling twelve month period, complete their Brown Act requirements or fails to meet the criteria for sitting on the advisory body the EMS Agency shall notify the nominating agency/organization of the
- absences and request appropriate action.

 D. Members must complete the required Ethics and Brown Act training provided by the County within three months of appointment and submit the "Training Certification for Member of County Advisory Body" form to EMS staff prior to participating at any meeting.

 E. Members who do not complete the Ethics and Brown Act training within 3 months may not turble profitable until the penuliament in fulfilling.
- further participate until the requirement is fulfilled.

 F. Ethics and Brown Act training is recommended to be completed every two years while serving on a County Advisory Committee.

2019 Emergency Medical Services (EMS) System Plan¹

SYSTEM PLAN SMART² OBJECTIVES

Progress from Last Reporting Period

No.	Standard	Meets State Standard	FY 2018-2019 Objectives	Progress to Date
1.06	Annual system Plan Update	Yes	Annual EMS System Update to State EMS Authority (EMSA)	Progress to Date: Met update and submit annually
1.08	ALS Planning	Yes	Support successful ambulance provider transition and monitor for system gaps	Progress to Date: Met Performance reliably tracked and reported annually
1.10	Special Populations	Yes	Exploration of alternative delivery models to match patient need to resource.	Progress to Date: In Progress Ongoing. Engaged with Contra Costa Health Services and local Health System partners to create alternatives to address frequent users, substance abuse and homeless populations,
1.11	System Participants	Yes	Stakeholder participation in update, approval and implementation of new ambulance ordinance	Progress to Date: In Progress Ordinance review by EMCC and BOS with implementation within next 12-18 months
1.13	Coordination	Yes	Exploration of coordination of EMS Dispatch Centers with Nurse Call centers to support appropriate use of 9-1-1 or specialty dispatch and triage call centers	Progress to Date: Not started Continue to support and engage stakeholders within 1-5 years
			Annually update of prehospital care policies and procedures based on evidence-based care.	Progress to Date: Ongoing Updated policies and protocols posted on EMS website at www.cccems.org.
1.14	Policy and Procedure Manual	Yes	Annually evaluate all patient care based on evidence-based care optimizing patient benefit and patient safety. Implement First Pass analytics for support CQI efforts.	Progress to Date: Ongoing Annually. Continue to enhance systems of care policies and practices to support improved patient outcomes with implementation of First Pass.

 $^{^{1}}$ Pending approval -by the EMCC on March 11, 2020

² SMART: Specific, Measurable, Achievable, Realistic and Timely

No.	Standard	Meets State Standard	FY 2018-2019Objectives	Progress to Date
1.16	System Finances	Yes	Annually review of costs and fees to support sustainable EMS System and EMS Agency oversight and operations.	Progress to Date: Ongoing Monitor and manage current funding effectively to support sustainable programs and activities. Implemented MAA and updated annual ambulance payor mix report
1.20	DNR (Do Not Resuscitate)	Yes	Pilot site for (POLST) registry with EMS System Stakeholders over 12 months.	Progress to date: Met Member of POLST Conversation Project within county. Pilot project completed December of 2018 with report to EMSA. Data infrastructure insufficient to implement in prehospital setting
1.27	Pediatric Emergency Medical and Critical Care System	Yes	Pediatric EMS for Children (EMSC) System Program Plan update and regulation implementation within 1-5 years.	Progress to date: In progress. Explore and prepare for EMSC System of Care implementation by June 2020 consistent with State regulations
1.28	Exclusive Operating Area (EOA)	Yes	Update of county ambulance ordinance within 12-18 months. Review of EOA IV 224 status to determine ambulance exclusivity eligibility. EOA I, II and V in appeals.	Progress to date: In progress Ambulance ordinance update in progress. ERA IV non-exclusive with 224 status in legal and legislative review in progress. Contract renewal ERAIV due April 30, 2020. EOA I, II and V award continues in appeals. Alliance five year extension approval due December 31, 2020.
2.01	Local EMS Agency Staffing and Assessment of Needs	Yes	EMS System Study and Modernization Project review of LEMSA staffing needs and workflows to support statutory requirements every 2 years.	Progress to date: Ongoing. Re-align LEMSA staffing in line with required statutory functions, quality and medical oversight.
2.04	Dispatch Training	Yes	Promote support high quality Emergency Medical Dispatch (EMD) dispatcher training and performance consistent for Center of Excellence Accreditation within 3-5 years.	Progress to date: Ongoing. Dispatch medical oversight policies consistent with Center of Excellence national standards and support for unifiedand accredited dispatch.
2.12	Early Defibrillation	Yes	Continued expansion of public access Automated External Defibrillation (AED) and Law AED programs with integration into dispatch. Review and update annually	Progress to Date: Ongoing. Continue to engage community first responders and citizen responders. Using CodeSTAT, CARES, AED registry, PAD and Public training

No.	Standard	Meets State Standard	FY 2018-2019Objectives	Progress to Date
5.06	Hospital Evacuation Plan	Yes	Update medical surge and transportation plans for hospitals incorporating standardized training with HICS for all hospital facilities with opportunities for integration of first responders with hospital leadership and incident commanders.	Progress to date: Ongoing Coalition Coordination moved underPublic Health Med/Health Coalition activity reporting continues thru EMCC. LEMSA in support and will participate in update of operational area planning and exercises.
5.08	Trauma Planning	Yes	Update of Trauma plan	Progress to date: Ongoing Annually submit updated trauma system plan to EMSA
5.10	Pediatric Emergency and Critical Care System	Yes	Continued networking with pediatric emergency care advocates throughout the local, regional and state EMS systems supporting pediatric emergency care best practices.	Progress to date: Ongoing CCEMS and Alameda County (ALCO) EMS have collaborative program of active advocacy for emergency preparedness for children and EMSC systems of care.
5.13	Specialty System Design	Yes	Annual Stroke, STEMI, Trauma and Cardiac Arrest System Evaluation. Exploring partnerships with Contra Costa Health services to reduce 5150 and support appropriate use of sobering centers.	Progress to date: Ongoing Continuous CQI program & participation in California Stroke Registry, Cardiac Arrest Registry for Enhanced Survival (CARES), Trauma Registry and California EMS Information System (CEMSIS).
5.14	Public Input	Yes	Active program of engagement with public including quarterly Emergency Medical Care Committee (EMCC) meetings. EMCC bylaw update	Progress to date: Ongoing. Public and EMCC comment to be included as part of ambulance ordinance review and update process.
6.01	6.01 QA/QI Program	04/01/0	Monthly "live stories" public reporting EMS Hospital transfer of care never event monitoring. Implementation of Quality Review Team (QRT) for review of event reports concerning clinical care concerns.	Progress to date: Met Hospitals public reporting continues. Implementation of first pass tool launch planned support provider level improvement by December 2020.
0.01		am Yes	Exploring HIE with hospitals to support exchange of patient outcome information. Hospital and ambulance provider electronic Patient Care Record (ePCR) data exchange. Stakeholders informed and advised to support HIE	Progress to date: In progress Exploration continues between EMS agency, American Medical Response (AMR), Kaiser, California Office of Health Information Integrity (CALOHII) and EMS Authority.
7.01	Public Education	Yes	Expansion of <i>HeartSafe</i> Communities to include support for CPR, Public Access Defibrillation (PAD), Heart Attack, Stroke and Healthy Lifestyle.	Progress to date: Ongoing Continue countywide expansion of outreach in progress with stakeholders and health services.

No.	Standard	Meets State Standard	FY 2018-2019 Objectives	Progress to Date
7.03	Disaster Preparedness Promotion	Yes	Annual advocacy and implementation of regional pediatric medical surge planning. Develop policies and work with stakeholders for implementation and use of BLS providers to backup 911 system in surge	Progress to date: Met and Ongoing CCEMS participating in National, regional and statewide efforts supporting Med/Health Preparedness. MCI plan and workflows to integrate non-emergency BLS ambulance in place.
8.13	Disaster Medical Response	Yes	Sustain Contra Costa Medical Reserve Corp and demonstrate effective deployment Medical Reserve Corps (MRC) for medical health response as needed.	Progress to date: Ongoing Support transition of MRC coordinator to Public Health with LEMSA providing support for deployment and coordination activities
8.15	Interhospital Communications	Yes	Address ongoing gaps in emergency communications e.g. ReddiNet, evaluate emergency communication tools and apps. Identify and address gaps in East Bay Regional Communications System (EBRCS) hospital radio system.	Progress to date: Ongoing. Annually monitor, exercise support and upgrade as fiscally able inter-hospital communications. Hospital HavBed and bed status reporting in place.
8.18	Enhanced Level: Specialty Care Systems	Yes	Update of new state regulations for specialty care systems e.g. Trauma, ST Elevation Myocardial Infarction (STEMI), Stroke, EMSC.	Progress to date: Met Stroke, STEMI and EMSC regulations approved in 2019.

2019 TIMELINE & ACTIONS TO BE ADDRESSED

All State standards have been met. We plan to address or reassess the following SMART objectives.

No.	Standard	Meets State Standard	2019 Objectives	Time Frame
1.06	Annual System Plan Update	Yes	Update and submit to EMSA Annually. Transportation plan denial and status in appeals	Annually
1.08	ALS Planning	Yes	Assure countywide continuity of emergency ambulance operations with Fire-EMS ambulance providers monitor for system gaps	Annually
1.10	Special Populations	Yes	Exploration of alternative delivery models to match patient need to resource. Evaluate pilots for alternative destination and programs addressing homelessness, excessive EMS system utilization and substance abuse.	Annually
1.11	System Participants	Yes	Continue to work with county and EMS System Stakeholder in the successful implementation of an updated ambulance ordinance.	12-18months
1.13	Coordination	Yes	Exploration of EMS dispatch service enhancement during suspected CPR calls, exploration of coordination with Nurse Call centers to support appropriate utilization of 9-1-1 services.	1-5 years
1.14	Policy and Procedure Manual	Yes	Update of prehospital care policies and procedures based on prehospital evidence-based care. Implementation of new American Heart Association Guidelines for ALS.	Annually
1.14	Policy and Procedure Manual	162	Continue to evaluate policies and standard operating procedures for patient benefit, delay in definite care and patient safety. Revise protocols to control cost while prioritizing patient safety.	Annually
1.16	System Finances	Yes	Review of fees and costs to support sustainable delivery of EMS services. Support stakeholder dialogue for funding to improve EMS System services and infrastructure.	Annually
1.27	Pediatric Emergency Medical and Critical Care System	Yes	Engage stakeholders in development and implementation of Pediatric EMSC system of care plan in collaboration with Alameda EMSC	12-24 months
1.28	Exclusive Operating Area	Yes	Re-evaluation EOA IV (San Ramon Fire Protection District) exclusivity. Address appeal of 2015 Alliance award. Address countywide ERA exclusivity challenges.	12-24 months
2.01	Local EMS Agency Staffing and Assessment of Needs	Yes	Annual review of EMS Staffing needs and workflows to support statutory requirements. Support Health Services EMS Director and EMS Medical Director succession planning	12 months
2.04	Dispatch Training	Yes	Continue to advocate and support high quality unified EMD and dispatcher training for Center of Excellence Accreditation.	Annually

No.	Standard	Meets State Standard	2019 Objectives	Time Frame
2.12	Early Defibrillation	Yes	Expand and enhance Public Access AED and Law AED programs within fiscal resources. Sustain AED registry participation.	Annually
5.08	Trauma Planning	Yes	Update and submit of county trauma plan to State	Annually
5.10	Pediatric Emergency and Critical Care System	Yes	Continued networking with pediatric emergency care advocates throughout the local, regional and state EMS systems supporting pediatric emergency care best practices.	Annually
5.13	Specialty System Design	Yes	Sustain Stroke, STEMI, Cardiac Arrest, Trauma and engage stakeholders in the EMS for Children System of care.	Annually
5.14	Public Input	Yes	Sustain and support EMCC engagement on EMS system issues	Annually
6.01	Quality Assurance (QA) /Quality Improvement (QI) Program	Yes	Advocate for feasibility and implementation of EMS-Hospital data system integration supporting patient safety and prehospital care. Develop Health Information Exchange between EMS ePCR and EPIC (hospital medical record platform)	1-4 years
7.01	Public Education	Yes	Sustain <i>HeartSafe</i> Communities to include support for CPR, PAD, Heart Attack, Stroke and Healthy Lifestyle. Expand Health services participation in Child Injury Prevention Bay Area Network.	Annually
7.03	Disaster Preparedness Promotion	Yes	Continued advocacy and implementation of statewide pediatric medical surge planning. Support engagement in development of a multi-state regional pediatric disaster response in collaboration with the Western Regional Alliance for Pediatric Emergency Management WRAP-EM led by UCSF Benioff	1-2 yrs
0.12	Discotor Madical Decrease	Vac	Support development and recruitment of Contra Costa Medical Reserve Corp volunteers.	Ammundlis
8.13	Disaster Medical Response	Yes	Support effective MRC capability for medical health deployment as needed.	Annually
8.15	Interhospital Communications	Yes	Address ongoing gaps and continue to explore improvement opportunities for intraio to support reliable use by hospitals. Routinely exercise med/health emergency communications	Annually