

AGENDA

KERN COUNTY EMERGENCY MEDICAL CARE ADVISORY BOARD (EMCAB)

**Kern County Administrative Center
Board of Supervisors Chambers
1115 Truxtun Avenue
Bakersfield CA, 93301**

REGULAR MEETING

THURSDAY – August 14th, 2025

4:00 P.M.

Roll Call:

Supervisor Flores, Sheriff Youngblood, Deputy Chief Linville, Leslie Wilmer, Orchel Krier, Scott Hurlbert, Dr. Franklin, Tyler Whitezell, John Surface, Dr. Lyon

SALUTE TO FLAG

Consent Agenda (CA):

All items listed with a “CA” are considered by program staff to be routine and non-controversial. The “CA” represents the consent agenda for the Board members of EMCAB. Consent items will be considered first and may be approved in one motion. If a member of the audience wishes to comment or ask questions regarding an item or items on the consent agenda, they may do so prior to a vote being taken on the consent agenda. A member of EMCAB may remove any item from the consent agenda and it will be considered in listed sequence with an opportunity for any member of the public to address EMCAB concerning the item before action is taken.

PUBLIC PRESENTATIONS

1) This portion of the meeting is reserved for persons to address the Board on any matter not on this Agenda but under the jurisdiction of the Board. Board members may respond briefly to statements made or questions posed. They may ask a question for clarification, make a referral to staff for factual information or request staff to report back to the Board at a later meeting. Also, the Board may take action to direct the staff to place a matter of business on a future agenda. **SPEAKERS ARE LIMITED TO TWO MINUTES. PLEASE STATE AND SPELL YOUR NAME BEFORE MAKING YOUR PRESENTATION.**

Grounded in Health

BOARD MEMBER ANNOUNCEMENTS OR REPORTS

2) Board Member Announcements or Reports:

On their own initiative, Board members may make an announcement or report on their own activities. They may ask a question for clarification, make a referral to staff, or take action to have staff place a matter of business on a future agenda. (Government Code Section 54954.2[a][2])

EMERGENCY MEDICAL SERVICES PROGRAM REQUESTS

3) Managers' report – RECEIVE AND FILE

4) APOT Task Force Report – RECEIVE AND FILE

CA – 5) Quarterly Maddy Fund Report – RECEIVE AND FILE

CA – 6) Legislation Report – RECEIVE AND FILE

CA – 7) Quarterly APOT Report – RECEIVE AND FILE

CA – 8) Quarterly Ambulance Response Compliance – RECEIVE AND FILE

CA – 9) Maddy Fund Release Request – Approve

MATTERS FOR EXECUTIVE APPROVAL

CA-10) Review and Approval of May 8, 2025, Minutes – APPROVE

11) Adjournment:

The deadline for submitting public requests for the next EMCAB meeting is Thursday, October 30, 2025 at 5:00 PM to the EMS Program Manager.

Adjourn to Thursday, November 13, 2025, at 4:00 PM at the Kern County Administrative Center in the Kern County Board of Supervisors Chambers at 1115 Truxtun Avenue, Bakersfield, CA 93301 – ADJOURN

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AMERICAN'S WITH DISABILITIES ACT

(Government Code Section 54953.2)

The Board of Supervisors Chamber is accessible to persons with disabilities. Disabled individuals who need special assistance to attend or participate in a meeting of the Kern County Emergency Medical Care Advisory Board may request assistance at the Kern County Public Health at 1800 Mount Vernon Avenue, Bakersfield, 93306 or by calling (661) 321-3000. Every effort will be made to reasonably accommodate individuals with disabilities by making meeting materials available in alternative formats. Requests for assistance should be made at least three (3) working days in advance whenever possible.

Grounded in Health

**EMERGENCY MEDICAL CARE ADVISORY BOARD
Membership Roster**

<i>Name and Address</i>	<i>Representing</i>
Jeff Flores, Supervisor Third District 1115 Truxtun Avenue Bakersfield, CA 93301 (661) 868-3672	Board of Supervisors
<u>Alternate</u> Phillip Peters, Supervisor First District 1115 Truxtun Avenue Bakersfield, CA 93301 (661) 868-3652	
Donny Youngblood, Sheriff Kern County Sheriff's Department 1350 Norris Road Bakersfield, CA 93308 (661) 391-7500	Police Chief's Association
<u>Alternate</u> Alex Ghazalpour, Chief Arvin Police Department 200 Campus Dr, Arvin, CA 93203 (661) 854-5583	
Kain Linville, Deputy Chief Kern County Fire Department 5642 Victor Street Bakersfield, CA 93308 (661)	Fire Chief's Association
<u>Alternate</u> Kevin Albertson, Chief Bakersfield Fire Department 2101 H St. Bakersfield, CA 93301 (661)	
Member	Urban Consumer
<u>Alternate</u> Peter Brandon 11204 Cave Ave Bakersfield, CA 93312 (661) 428-4563	

Leslie Wilmer
1110 Bell Ave.,
Taft, CA 93268
(661) 304-1106

Rural Consumer

Alternate
Vacant

Orchel Krier
Mayor Pro Tem, City of Taft
209 E. Kern Street
Taft, CA 93268
661-763-1222

City Selection Committee

Alternate
Cathy Prout
Councilmember, City of Shafter
435 Maple Street
Shafter, CA 93263
(661) 746-6409

Scott Hurlbert
City of Wasco
746 8th Street
Wasco, CA 93280
(661) 758-7214

Kern Mayors and City Managers Group

Alternate
Maribel Reyna
City of Delano
1015 11th Avenue
Delano, CA 93215
(661)720-2269

Member
William Franklin, DO
Kern County Medical Society
4900 California Ave, Suite 210B
Bakersfield, CA 93309

Kern County Medical Society

Alternate
Soham Shah, MD
Kern County Medical Society
4900 California Ave. Suite 210B
Bakersfield, CA 93309

Tyler Whitezell, Chief Operating Officer
Kern Medical
1700 Mt. Vernon
Bakersfield, CA 93306
(661)

Kern County Hospital Administrators

Alternate

John Surface
Hall Ambulance Inc.
1001 21st Street
Bakersfield, CA 93301
(661) 322-8741

Kern County Ambulance Association

Alternate

Kristopher Lyon, M.D.
1800 Mount Vernon Avenue, 2nd floor
Bakersfield, CA 93306
(661) 321-3000

EMS Medical Director

Support Staff

Jeff Fariss, EMS Program Manager
1800 Mount Vernon Avenue, 2nd floor
Bakersfield, CA 93306
(661) 321-3000

EMS Division

Jennifer Feige, Deputy
1115 Truxtun Avenue, 4th Floor
Bakersfield, CA 93301
(661) 868-3638

County Counsel

Alex Alva
1115 Truxtun Avenue, 5th Floor
Bakersfield, CA 93301
(661) 868-3198

County Administrative Office

5. Quarterly Maddy Fund Report

**EMS DIVISION
KERN COUNTY PUBLIC HEALTH SERVICES DEPARTMENT
MADDY EMS FUND
FISCAL YEAR 2024-2025 ACTIVITY**

	MADDY Deposits + Interest AS (10 & 12)	RICHIE'S Deposits AS (11)	Other EMS 17% RICHIE'S Balance AS (34)	Admin 10% of Each Fund AS (14 & 15)	Richie's Fund (15%) Distribution AS (17)	Total Physician Claims Submitted In Quarter PC (8)	Physicians 58% both funds Balance AS (24)	Physician Payments in Quarter PC (16)	Percent Paid to Physicians H16/F16	Hospitals 25% of Both Fund Balance AS (28)	Hospital Payments in Quarter HP (17 & 19)	Other EMS 17% MADDY Balance FY 2425 (Jul 2024- Jun 2025) AS (33)	Other EMS 17% MADDY Rollover Balance FY 1819 (Nov 2018-Jun 2019)	Other EMS 17% MADDY Rollover Balance FY 1920 (Jul 2019-Jun 2020)	Other EMS 17% MADDY Rollover Balance FY 2021 (Jul 2020-Jun 2021)	Other EMS 17% MADDY Rollover Balance FY 2122 (Jul 2021-Jun 2022)	Other EMS 17% MADDY Rollover Balance FY 2223 (Jul 2022-Jun 2023)	Other EMS 17% MADDY Rollover Balance FY 2324 (Jul 2023-Jun 2024)	EMCAAB Transfers- JV33023 10/1/21 To pay for EMS warehouse lease	EMCAAB Transfers- JV19463 04/02/24 To pay for EMS warehouse lease
JULY 2024	56,448.68	56,586.26	7,214.75	11,303.50	8,487.94		54,081.23				23,310.88	8,636.65								
AUGUST 2024	88,614.02	68,288.98	8,706.84	15,690.30	10,243.35		76,301.71				32,742.34	13,557.95								
SEPTEMBER 2024	82,013.67	62,440.19	7,961.12	14,445.39	9,366.03		69,972.62				30,160.61	12,548.09								
Total for Quarter 1	227,076.37	187,315.43	23,882.71	41,439.19	28,097.32	143,959.87	200,355.56	71,984.24	50%	86,213.83	138,193.86	34,742.69							(285,868.80)	(150,716.60)
OCTOBER 2024	68,056.73	60,331.48	7,692.26	12,838.82	9,049.72		61,769.81				26,624.92	10,412.68								
NOVEMBER 2024	72,766.17	56,906.91	7,255.63	12,967.31	8,536.04		62,738.44				27,042.43	11,133.22								
DECEMBER 2024	45,920.00	46,453.53	5,922.83	9,237.35	6,968.03		44,223.87				19,042.04	7,025.76								
Total for Quarter 2	186,742.90	163,691.92	20,870.72	35,043.48	24,553.79	265,925.13	168,732.12	132,968.86	50%	72,709.39	118,133.90	28,571.66								
JANUARY 2025	70,036.10	49,357.62	6,293.10	11,939.37	7,403.64		58,399.18				25,012.68	10,715.52								
FEBRUARY 2025	69,633.18	57,674.31	7,353.47	12,730.75	8,651.15		63,369.89				26,481.40	10,653.88								
MARCH 2025	70,734.42	55,422.24	7,066.34	12,615.67	8,313.34		61,032.04				26,306.91	10,822.36								
Total for Quarter 3	210,403.70	162,454.17	20,712.91	37,285.79	24,368.13	181,920.11	182,801.11	90,965.72	50%	77,800.99	109,176.81	32,191.76								
APRIL 2025	16,976.18	760.35	96.94	1,773.66	114.05		9,921.44				3,962.21	2,597.36								
MAY 2025	62,670.90	62,393.28	7,955.14	12,506.42	9,358.99		60,039.64				25,799.69	9,588.65								
JUNE 2025	-	-	-	-	-		61.28				-	-								
Total for Quarter 4	79,647.08	63,153.63	8,052.08	14,280.08	9,473.04	239,198.49	70,022.36	119,608.89	50%	29,761.90	46,394.17	12,186.01								
YEAR-END SUP.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
YEAR TO DATE	703,870.05	576,615.15	73,518.42	128,048.54	86,492.28	831,003.60	621,911.15	415,527.71	50%	266,486.11	138,193.86	107,692.12	135,711.45	177,421.30	171,266.68	150,941.55	147,695.34	150,535.29	(285,868.80)	(150,716.60)
Total												604,678.33								

6. Legislative Reports

EMSAAC
Monday, July 07, 2025

[AB 55](#)

(Bonta D) Alternative birth centers: licensing and Medi-Cal reimbursement.

Current Text: Amended: 5/29/2025 [html](#) [pdf](#)

Last Amend: 5/29/2025

Status: 6/30/2025-In committee: Referred to APPR. suspense file.

Location: 6/30/2025-S. APPR. SUSPENSE FILE

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered	
1st House				2nd House								

Summary: Existing law provides for the licensure and regulation of various types of clinics, including alternative birth centers, by the State Department of Public Health, and makes a violation of those provisions a crime. Existing law defines an alternative birth center as a clinic that is not part of a hospital and that provides comprehensive perinatal services and delivery care to pregnant women who remain less than 24 hours at the facility. Existing law requires a licensed alternative birth center specialty clinic, and a licensed primary care clinic that provides services as an alternative birth center, to meet certain criteria, including, among others, being located in proximity to a facility with the capacity for management of obstetrical and neonatal emergencies, as specified. Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Existing law sets forth certain criteria for Medi-Cal reimbursement to alternative birth centers for facility-related delivery costs. Under existing law, as a criterion under both the licensing provisions and the Medi-Cal reimbursement provisions described above, the facility is required to be a provider of comprehensive perinatal services as defined in the Medi-Cal provisions. This bill would remove, under both sets of criteria, the certification condition of being a provider of comprehensive perinatal services as defined in the Medi-Cal provisions. The bill would require the facility to provide pregnancy and postpartum services, consistent with certain standards. The bill would remove the above-described proximity requirement and would instead require a written policy for hospital transfer. The bill would require the policy to include certain requirements with regard to providing the hospital with specified medical records, speaking with the receiving provider, and providing patients and clients with the estimated transfer time, including a clear explanation of the facility's overall emergency transfer plan, as specified. This bill contains other related provisions and other existing laws.

Organization	Position
EMSAAC	Watch/Study

[AB 228](#)

(Sanchez R) Pupil health: epinephrine delivery systems.

Current Text: Introduced: 1/13/2025 [html](#) [pdf](#)

Status: 5/23/2025-In committee: Hearing postponed by committee.

Location: 4/9/2025-A. APPR. SUSPENSE FILE

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered	
1st House				2nd House								

Summary: Existing law requires school districts, county offices of education, and charter schools to provide emergency epinephrine auto-injectors to school nurses or trained volunteer personnel, and authorizes school nurses and trained personnel to use epinephrine auto-injectors to provide emergency medical aid to persons suffering, or reasonably believed to be suffering, from an anaphylactic reaction, as provided. Existing law requires school districts, county offices of education, and charter schools to, among other things, store those emergency epinephrine auto-injectors in an accessible location upon need for emergency use and include that location in specified annual notices. Existing law authorizes a pupil to carry and self-administer prescription auto-injectable epinephrine if the school district receives specified written statements from a physician and surgeon or a physician assistant, and from the parent, foster parent, or guardian of the pupil, as specified. This bill would replace all references to epinephrine auto-injectors or auto-injectable epinephrine in the above-described provisions with references instead to epinephrine delivery systems, as defined, and would require school districts, county offices of education, and charter schools to instead provide at least one type of United States Food and Drug Administration-approved epinephrine delivery system, as specified. To the extent the bill would impose additional duties on local educational agencies, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Organization	Position
EMSAAC	Support

Notes: Probably support.

[AB 261](#)

(Quirk-Silva D) Fire safety: fire hazard severity zones: State Fire Marshal.

Current Text: Amended: 3/26/2025 [html](#) [pdf](#)

Last Amend: 3/26/2025

Status: 6/24/2025-From committee: Do pass and re-refer to Com. on N.R. & W. with recommendation: To Consent Calendar. (Ayes 15. Noes 0.) (June 24). Re-referred to Com. on N.R. & W.

Location: 6/24/2025-S. N.R. & W.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/8/2025 9 a.m. - State Capitol, Room 112 SENATE NATURAL RESOURCES AND WATER, LIMON, MONIQUE, Chair

Summary: Existing law requires the State Fire Marshal to classify lands within state responsibility areas into fire hazard severity zones, and, by regulation, designate fire hazard severity zones and assign to each zone a rating reflecting the degree of severity of fire hazard that is expected to prevail in the zone. Existing law requires the State Fire Marshal to periodically review designated and rated zones and, as necessary, revise zones or their ratings or repeal the designation of zones. Existing law also requires the State Fire Marshal to identify areas in the state that are not state responsibility areas as moderate, high, and very high fire hazard severity zones based on consistent statewide criteria and based on the severity of fire hazard that is expected to prevail in those areas, and to periodically review and make recommendations relative to very high fire hazard severity zones. This bill would, as applied to both state responsibility areas and lands that are not state responsibility areas, authorize the State Fire Marshal, in periods between the State Fire Marshal's review of areas of the state for recommendations regarding an area's fire hazard severity zone, to confer with entities, including, but not limited to, public agencies, tribes, nonprofit organizations, project applicants, and members of the public, on actions that may impact the degree of fire hazard in an area or the area's recommended fire hazard severity zone designation. The bill would authorize the State Fire Marshal to provide a written response to an entity on actions that may impact the degree of fire hazard, and would require this written response to be posted on the State Fire Marshal's internet website. This bill contains other related provisions and other existing laws.

Organization **Position**
EMSAAC Watch/Study

AB 302 **(Bauer-Kahan D) Protected individuals.**

Current Text: Amended: 7/3/2025 [html](#) [pdf](#)

Last Amend: 7/3/2025

Status: 7/3/2025-From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on JUD.

Location: 6/25/2025-S. JUD.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/15/2025 9:30 a.m. - State Capitol, Room 112 SENATE JUDICIARY, UMBERG, THOMAS, Chair

Summary: The California Consumer Privacy Act of 2018 (CCPA) grants a consumer various rights with respect to personal information, as defined, that is collected or sold by a business, as defined, including the right to request that a business delete any personal information about the consumer that the business has collected from the consumer. The California Privacy Rights Act of 2020, approved by the voters as Proposition 24 at the November 3, 2020, statewide general election, amended, added to, and reenacted the CCPA and establishes the California Privacy Protection Agency (agency) and vests the agency with full administrative power, authority, and jurisdiction to enforce the CCPA. The Information Practices Act of 1977 regulates the use of personal information by certain state agencies, including by requiring a state agency to maintain in its records only personal information that is relevant and necessary to accomplish a purpose of the agency required or authorized by the California Constitution or statute or mandated by the federal government. This bill would authorize a protected individual, or the agency on behalf of a protected individual, to request a business, as defined, to refrain from selling the protected individual's personal information, as defined, or to delete the protected individual's personal information, as specified. The bill would also authorize a protected individual, or the protected individual's authorized representative, to request a governmental entity, defined, in part, to mean a local agency, to refrain from publishing the protected individual's personal information or to remove the protected individual's personal information from any existing publication, as prescribed. Upon receipt of the request, the bill would require a governmental entity to take prescribed action, including taking steps reasonably necessary to ensure that the personal information is not published. By imposing additional duties on local agencies, the bill would impose a state-mandated local program. The bill would authorize a protected individual and certain public attorneys, including the Attorney General, to punish noncompliance with those provisions with a certain civil action. This bill contains other related provisions and other existing laws.

Organization **Position**
EMSAAC Watch/Study

AB 339 **(Ortega D) Local public employee organizations: notice requirements.**

Current Text: Amended: 6/18/2025 [html](#) [pdf](#)

Last Amend: 6/18/2025

Status: 6/18/2025-From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on L., P.E. & R.

Location: 6/11/2025-S. L., P.E. & R.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/9/2025 9:30 a.m. - 1021 O Street, Room 2200 SENATE LABOR, PUBLIC EMPLOYMENT AND RETIREMENT, SMALLWOOD-CUEVAS, LOLA, Chair

Summary: Existing law, the Meyers-Milias-Brown Act, contains various provisions that govern collective bargaining of local represented employees and delegates jurisdiction to the Public Employment Relations Board to resolve disputes and enforce the statutory duties and rights of local public agency employers and employees. Existing law requires the governing body of a public agency to meet and confer in good faith regarding wages, hours, and other terms and conditions of employment with representatives of recognized employee organizations. Existing law requires the governing body of a public agency, and boards and commissions designated by law or by the governing body, to give reasonable written notice, except in cases of emergency, as specified, to each recognized employee organization affected of any ordinance, rule, resolution, or regulation directly relating to matters within the scope of representation proposed to be adopted by the governing body or the designated boards and commissions. This bill would require the governing body of a public agency, and boards and commissions designated by law or by the governing body of a public agency, to give the recognized employee organization no less than 60 days' written notice before issuing a request for proposals, request for quotes, or renewing or extending an existing contract to perform services that are within the scope of work of the job classifications represented by the recognized employee organization. The bill would require the notice to include specified information, including the anticipated duration of the contract. The bill would also require the public agency, if an emergency or other exigent circumstance prevents the public agency from providing the written notice described above, to provide as much advance notice as is practicable under the circumstances. If the recognized employee organization demands to meet and confer after receiving the written notice, the bill would require the public agency and recognized employee organization to meet and confer in good faith within a reasonable time, as specified. By imposing new duties on local public agencies, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Organization Position
EMSAAC Watch/Study

Notes: Possibly oppose.

AB 384

(Connolly D) Health care coverage: mental health and substance use disorders: inpatient admissions.

Current Text: Amended: 3/17/2025 [html](#) [pdf](#)

Last Amend: 3/17/2025

Status: 5/23/2025-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/14/2025)(May be acted upon Jan 2026)

Location: 5/23/2025-A. 2 YEAR

Desk	Policy	2 year	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care, and makes a willful violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires a health care service plan or health insurer to ensure that processes necessary to obtain covered health care services, including, but not limited to, prior authorization processes, are completed in a manner that assures the provision of covered health care services to an enrollee or insured in a timely manner appropriate for the enrollee's or insured's condition, as specified. This bill, the California Mental Health Protection Act, would prohibit a health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2027, that provides coverage for mental health and substance use disorders from requiring prior authorization (1) for an enrollee or insured to be admitted for medically necessary 24-hour care in inpatient settings for mental health and substance use disorders, as specified, and (2) for any medically necessary health care services provided to an enrollee or insured while admitted for that care. The bill would authorize the Director of the Department of Managed Health Care or the Insurance Commissioner, as applicable, to assess administrative or civil penalties, as specified, for violations of these provisions. Because a willful violation of these provisions by a health care service plan would be a crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Organization Position
EMSAAC Watch/Study

AB 438

(Hadwick R) Authorized emergency vehicles.

Current Text: Amended: 5/29/2025 [html](#) [pdf](#)

Last Amend: 5/29/2025

Status: 6/24/2025-Read second time. Ordered to third reading.

Location: 6/24/2025-S. THIRD READING

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/7/2025 #79 SENATE ASSEMBLY BILLS - THIRD READING FILE

Summary: Existing law authorizes the Commissioner of the California Highway Patrol to issue authorized emergency vehicle permits for certain vehicles, including any vehicle owned and operated by a public utility and any vehicle owned and operated by a fire company, as specified, upon a finding that the vehicle is used in responding to emergency calls for fire or law enforcement, the immediate preservation of life or property, or the apprehension of law violators. This bill would authorize the commissioner to issue an emergency vehicle permit to any vehicle owned by a county, city, or city and county office of emergency services only while that vehicle is being used by a public employee who is employed by the office in responding to any disaster.

Organization EMSAAC
Position Watch/Study

AB 463

(Rodriguez, Michelle D) Emergency medical services: dogs and cats.

Current Text: Amended: 6/13/2025 [html](#) [pdf](#)

Last Amend: 6/13/2025

Status: 7/2/2025-From committee: Do pass and re-refer to Com. on APPR. with recommendation: To Consent Calendar. (Ayes 13. Noes 0.) (July 1). Re-referred to Com. on APPR.

Location: 7/2/2025-S. APPR.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/14/2025 10 a.m. - 1021 O Street, Room 2200 SENATE APPROPRIATIONS, CABALLERO, ANNA, Chair

Summary: Existing law authorizes a private ambulance owner to operate an emergency ambulance service upon obtaining a license from the Department of the California Highway Patrol, as specified. This bill would authorize those license holders or a person who operates ambulances owned or operated by a fire department of a federally recognized Indian tribe to transport a police canine, as defined, or a search and rescue dog, as defined, that is injured in the line of duty, to a veterinary clinic or similar facility if there is no other person requiring medical attention or transport at that time. The bill would require an ambulance operator, except as specified, that provides transport to police canines or search and rescue dogs injured in the line of duty to develop policies regarding the transport of these dogs. The bill would require these policies to be submitted to, and approved by, the local emergency medical services agency. This bill contains other related provisions and other existing laws.

Organization EMSAAC
Position Watch/Study

AB 469

(Gabriel D) Crimes: impersonation of first responders.

Current Text: Introduced: 2/6/2025 [html](#) [pdf](#)

Status: 5/8/2025-Failed Deadline pursuant to Rule 61(a)(3). (Last location was PRINT on 2/6/2025) (May be acted upon Jan 2026)

Location: 5/8/2025-A. 2 YEAR

2 year	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law, the California Emergency Services Act, authorizes the Governor to proclaim a state of emergency, as defined, under specified circumstances. Existing law defines a "first responder" as an employee of the state or a local public agency who provides emergency response services. Existing law makes it a misdemeanor to impersonate certain first responders, including a member of a fire department. This bill would state the intent of the Legislature to enact legislation relating to the impersonation of first responders during a state of emergency.

Organization EMSAAC
Position Two Year Bill

Notes: Possible support

AB 601

(Jackson D) Child abuse: reporting.

Current Text: Amended: 4/10/2025 [html](#) [pdf](#)

Last Amend: 4/10/2025

Status: 6/23/2025-In committee: Hearing postponed by committee.

Location: 6/11/2025-S. HUM. S.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar:

7/7/2025 3 p.m. or upon adjournment of Session - 1021 O Street, Room 2200 SENATE HUMAN SERVICES, ARREGUÍN, JESSE, Chair

7/15/2025 9 a.m. - 1021 O Street, Room 2200 SENATE PUBLIC SAFETY, ARREGUÍN, JESSE, Chair

Summary: Existing law, the Child Abuse and Neglect Reporting Act, establishes procedures for the reporting and investigation of suspected child abuse or neglect. The act requires certain professionals, including specified health practitioners and social workers, known as “mandated reporters,” to report known or reasonably suspected child abuse or neglect to a local law enforcement agency or a county welfare or probation department, as specified. This bill would require the State Department of Social Services, through the State Office of Child Abuse Prevention, to, by no later than July 1, 2027, develop a standardized curriculum for mandated reporters, and to make that training available on its internet website. The bill would, except as provided, require an employer having one or more mandated reporters to ensure completion of the training within the first 3 months of the mandated reporter’s employment, or on or before March 1, 2030, whichever is later. The bill would require completion of the training to be documented in a manner that would allow the department to verify completion upon request. This bill contains other related provisions and other existing laws.

Organization Position
EMSAAC Watch/Study

AB 615 (Davies R) Power facilities: emergency response and action plans.

Current Text: Amended: 5/5/2025 [html](#) [pdf](#)

Last Amend: 5/5/2025

Status: 6/4/2025-Referred to Com. on E., U & C.

Location: 6/4/2025-S. E. U., & C.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/7/2025 3 p.m. or upon adjournment of Session - 1021 O Street, Room 1200 SENATE ENERGY, UTILITIES AND COMMUNICATIONS, BECKER, JOSH, Chair

Summary: Existing law requires an application to be filed with the State Energy Resources Conservation and Development Commission for certification of a site and related facility which includes an electric transmission line or thermal powerplant, or both. Existing law requires the application to contain, among other things, safety and reliability information, including planned provisions for emergency operations and shutdowns, as specified. Existing law authorizes a person proposing an energy storage system to file an application for certification with the commission in lieu of any permit, certificate, or similar document required by any state, local, or regional agency, or federal agency, as provided. This bill would require that those applications also contain emergency response and action plans, to be paid for by the applicant, that incorporate impacts to the surrounding areas in the event of an emergency and that would be conducted and coordinated with local emergency management agencies, unified program agencies, and local first response agencies. The bill would require that applications for an energy storage system also contain emergency response and action plans, to be paid for by the applicant, and that the plans include, as applicable, analysis and feedback from the local emergency management agencies as to whether the proposed facilities require supplemental first responder capabilities and meet the National Fire Protection Association 855 Standard as it relates to setbacks, as specified.

Organization Position
EMSAAC Watch/Study

AB 645 (Carrillo D) Emergency medical services: dispatcher training.

Current Text: Amended: 4/24/2025 [html](#) [pdf](#)

Last Amend: 4/24/2025

Status: 5/28/2025-Referred to Com. on HEALTH.

Location: 5/28/2025-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/16/2025 1:30 p.m. - 1021 O Street, Room 1200 SENATE HEALTH, MENJIVAR, CAROLINE, Chair

Summary: Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act (act), establishes the Emergency Medical Services Authority, which is responsible for the coordination of various state activities concerning emergency medical services (EMS). The act authorizes a county to develop an EMS program by designating a local EMS agency. Existing law also requires the Commission on Emergency Medical Services to review and approve regulations, standards, and guidelines to be developed by the authority. Existing law generally makes a violation of the act a misdemeanor. This bill would require the authority, by January 1, 2027, to develop and, after approval by the commission, adopt minimum standards for emergency medical dispatcher training. The bill would require a public safety dispatcher or public safety telecommunicator, as defined, to complete that training. By expanding the scope of a crime, and to the extent that the bill

would create new duties for a public safety dispatcher or public safety telecommunicator, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Organization **Position**
EMSAAC Oppose

AB 719 **(Calderon D) County emergency plans.**

Current Text: Introduced: 2/14/2025 [html](#) [pdf](#)

Status: 5/1/2025-Failed Deadline pursuant to Rule 61(a)(2). (Last location was EMERGENCY MANAGEMENT on 3/3/2025)(May be acted upon Jan 2026)

Location: 5/1/2025-A. 2 YEAR

Desk	2 year	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered	
1st House				2nd House								

Summary: Existing law, the California Emergency Services Act, among other things, creates the Office of Emergency Services, which is responsible for the state’s emergency and disaster response services, as specified. Existing law requires the Governor to coordinate the State Emergency Plan and the preparation of plans and programs for the mitigation of the effects of an emergency by the political subdivisions of this state. Existing law defines the terms “political subdivision” and “emergency plans” for purposes of emergency services provided by local governments. Existing law requires the governing body of each political subdivision of the state to carry out the provisions of the State Emergency Plan. Existing law requires the office to establish best practices for counties developing and updating a county emergency plan and a process for a county to request that the office review a county’s emergency plan by January 1, 2022. This bill would require each county to review and update its emergency plan at least every 2 years. Because the bill would require local officials to perform additional duties, the bill would impose a state-mandated local program. The bill would remove the January 1, 2022, date specified above, and would remove another reference to that date. This bill contains other related provisions and other existing laws.

Organization **Position**
EMSAAC Watch/Study

AB 1005 **(Davies R) Drowning prevention: public schools: informational materials: swim lesson vouchers and swim lesson directory.**

Current Text: Amended: 5/23/2025 [html](#) [pdf](#)

Last Amend: 5/23/2025

Status: 6/18/2025-Referred to Coms. on ED. and HEALTH.

Location: 6/18/2025-S. ED.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered	
1st House				2nd House								

Calendar:

7/9/2025 9 a.m. - 1021 O Street, Room 2100 SENATE EDUCATION, PÉREZ, SASHA RENÉE, Chair
7/16/2025 1:30 p.m. - 1021 O Street, Room 1200 SENATE HEALTH, MENJIVAR, CAROLINE, Chair

Summary: Existing law authorizes specified drowning or injury prevention organizations (DIP organization) to provide informational materials, in electronic or hardcopy form, to a public school regarding specified topics relating to drowning prevention. Existing law requires a DIP organization that chooses to provide informational materials to provide, upon request by a public school, the informational materials in the 3 most commonly spoken languages associated with the population attending the school. This bill would instead require a DIP organization that chooses to provide informational materials to provide, upon request by a public school, the informational materials in English and would encourage the DIP organization to provide informational materials in the other most commonly spoken languages associated with the population attending the school. The bill would require a DIP organization that chooses to provide informational materials to a public school to provide those materials at no cost to the public school, allow the school to offer copies of the materials to pupils and parents, and provide written evidence to a school administrator that demonstrates that the informational materials provided by the DIP organization align with the drowning, drowning prevention, water safety, rescue, and swim skills lesson information found on the drowning prevention web page of the federal Centers for Disease Control and Prevention, as provided. The bill also would require the State Department of Education to gather and make available on its internet website school-based water safety and drowning prevention education resources and curriculum, as provided. The bill would authorize public schools to provide to their pupils those water safety informational materials identified by the department and provided by a DIP organization, as provided. This bill contains other related provisions and other existing laws.

Organization **Position**
EMSAAC Support

AB 1172 **(Nguyen D) Adult day programs: administration of inhalable emergency antiseizure medications.**

Current Text: Amended: 4/23/2025 [html](#) [pdf](#)

Last Amend: 4/23/2025

Status: 7/1/2025-From committee: Do pass and re-refer to Com. on JUD. with recommendation: To Consent Calendar. (Ayes 5. Noes 0.) (June 30). Re-referred to Com. on JUD.

Location: 7/1/2025-S. JUD.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/15/2025 9:30 a.m. - State Capitol, Room 112 SENATE JUDICIARY, UMBERG, THOMAS, Chair

Summary: Existing law, the California Community Care Facilities Act, provides for the licensing and regulation of community care facilities by the State Department of Social Services, including adult day programs and residential facilities. A violation of provisions relating to these facilities is a misdemeanor. This bill would authorize a licensed facility, as defined, upon receipt of a request from an individual, or the authorized representative of an individual, who has been diagnosed with seizures, a seizure disorder, or epilepsy and who has been prescribed inhalable emergency antiseizure medication, to authorize any volunteer, as defined, to administer inhalable emergency antiseizure medication to the individual during a seizure emergency. The bill would require the department, on or before January 1, 2027, to establish minimum standards for this training, as specified. The bill would prohibit inhalable emergency antiseizure medication from being administered to an individual unless the licensed facility has a seizure action plan for the individual that contains specified information, including, among other things, a signed written authorization verifying that a seizure experienced by the individual may be responded to at the licensed facility by a nonmedical professional, including through the administration of emergency antiseizure medication, as specified. The bill would require licensed facilities to provide a specified notice to all volunteers that, among other things, informs them of their right to rescind an offer to volunteer at any time, as specified, and explains the liability protections and indemnification requirements described below. The bill would require any licensed facility that authorizes volunteers to ensure that each volunteer will be provided defense and indemnification for any and all civil liability, as specified. The bill would prohibit a volunteer who administers inhalable emergency antiseizure medication, any person who provides training to a volunteer, or any person who otherwise complies with the requirements of the above-described provisions, in good faith and not for compensation, from being subject to professional review, civil liability, or criminal prosecution for their actions or omissions, as specified. By expanding the scope of an existing crime, this bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Organization EMSAAC
Position Watch/Study

AB 1200 (Caloza D) Emergency services: disaster preparedness.

Current Text: Amended: 5/23/2025 [html](#) [pdf](#)

Last Amend: 5/23/2025

Status: 6/11/2025-Referred to Com. on G.O.

Location: 6/11/2025-S. G.O.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/8/2025 9 a.m. - 1021 O Street, Room 1200 SENATE GOVERNMENTAL ORGANIZATION, PADILLA, STEPHEN, Chair

Summary: Existing law, the California Emergency Services Act, authorizes the Governor to proclaim a state of emergency, and local officials and local governments to proclaim a local emergency, when specified conditions of disaster or extreme peril to the safety of persons and property exist. Existing law establishes the Office of Emergency Services (OES) within the office of the Governor and sets forth its powers and duties relating to responsibility over the state's emergency and disaster response services for natural, technological, or man-made disasters and emergencies, including responsibility for activities necessary to prevent, respond to, recover from, and mitigate the effects of emergencies and disasters to people and property. This bill would require OES to biennially convene key personnel and agencies that have emergency management roles and responsibilities to participate in tabletop exercises in which the participant's emergency preparedness plans are discussed and evaluated under various simulated catastrophic disaster situations, as specified. This bill contains other related provisions.

Organization EMSAAC
Position Watch/Study

AB 1278 (Harabedian D) Emergency Management Assistance Compact.

Current Text: Introduced: 2/21/2025 [html](#) [pdf](#)

Status: 5/8/2025-Failed Deadline pursuant to Rule 61(a)(3). (Last location was PRINT on 2/21/2025) (May be acted upon Jan 2026)

Location: 5/8/2025-A. 2 YEAR

2 year	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law ratifies the Emergency Management Assistance Compact entered into by California and other party states for the provision of mutual assistance in managing emergencies or disasters, as specified. Existing law sets forth the intent of the state to continue its long history of sharing emergency response resources with other states during times of disaster. This bill would make a technical, nonsubstantive change to these provisions.

Organization **Position**
 EMSAAC Watch/Study

AB 1283 (Committee on Emergency Management) Office of Emergency Services: firefighting mutual aid.

Current Text: Introduced: 2/21/2025 [html](#) [pdf](#)

Status: 5/1/2025-Failed Deadline pursuant to Rule 61(a)(2). (Last location was EMERGENCY MANAGEMENT on 3/10/2025)(May be acted upon Jan 2026)

Location: 5/1/2025-A. 2 YEAR

Desk	2 year	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law, the California Emergency Services Act, establishes the Office of Emergency Services within the Governor’s office under the supervision of the Director of Emergency Services and makes the office responsible for the state’s emergency and disaster response services for natural, technological, or manmade disasters and emergencies. Existing law requires, during any state of war emergency, or state of emergency when the need arises for outside aid in any county, city and county, or city, aid to be rendered in accordance with approved emergency plans. In periods other than a state of war emergency, a state of emergency, or a local emergency, existing law authorizes state agencies and political subdivisions to exercise mutual aid powers in accordance with the Master Mutual Aid Agreement and local ordinances, resolutions, agreements, or plans. The act requires the Office of Emergency Services, in consultation with relevant local and state agencies, to develop and adopt a state fire service and rescue emergency mutual aid plan that meets specified criteria. This bill would require the Office of Emergency Services to establish the Firefighting Mutual Aid and Prepositioning Program for specified purposes, including to support the implementation of the state fire service and rescue emergency mutual aid plan, as described above, and to establish a reimbursement program to allow firefighting agencies deployed under the state’s Master Mutual Aid Agreement to pay for costs, as specified.

Organization **Position**
 EMSAAC Watch/Study

AB 1328 (Rodriguez, Michelle D) Medi-Cal reimbursements: nonemergency ambulance transportation.

Current Text: Amended: 5/23/2025 [html](#) [pdf](#)

Last Amend: 5/23/2025

Status: 6/11/2025-Referred to Com. on HEALTH.

Location: 6/11/2025-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/16/2025 1:30 p.m. - 1021 O Street, Room 1200 SENATE HEALTH, MENJIVAR, CAROLINE, Chair

Summary: Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services, including emergency or nonemergency medical or nonmedical transportation services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Under this bill, commencing on January 1, 2026, and subject to an appropriation, Medi-Cal fee-for-service reimbursement for nonemergency ambulance transportation services, as defined, would be in an amount equal to 80% of the amount set forth in the federal Medicare ambulance fee schedule for the corresponding level of service, adjusted by the Geographic Practice Cost Index, as specified. The bill would require the department to establish a directed payment program for Medi-Cal managed care in order to follow a similar treatment to reimbursement rates for nonemergency ambulance transportation services. This bill contains other related provisions.

Organization **Position**
 EMSAAC Watch/Study

Notes: Possible support

AB 1331 (Elhawary D) Workplace surveillance.

Current Text: Amended: 6/19/2025 [html](#) [pdf](#)

Last Amend: 6/19/2025

Status: 6/25/2025-From committee: Do pass and re-refer to Com. on JUD. (Ayes 4. Noes 1.) (June 25). Re-referred to Com. on JUD.

Location: 6/25/2025-S. JUD.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf.	Enrolled	Vetoed	Chaptered
1st House				2nd House				Conf.			
								Conc.			

Calendar: 7/15/2025 9:30 a.m. - State Capitol, Room 112 SENATE JUDICIARY, UMBERG, THOMAS, Chair

Summary: Existing law establishes the Division of Labor Standards Enforcement within the Department of Industrial Relations. Existing law authorizes the division, which is headed by the Labor Commissioner, to enforce the Labor Code and all labor laws of the state the enforcement of which is not specifically vested in any other officer, board or commission. This bill would limit the use of workplace surveillance tools, as defined, by employers, including by prohibiting an employer from monitoring or surveilling workers in employee-only, employer-designated areas, as specified. The bill would provide workers with the right to leave behind workplace surveillance tools that are on their person or in their possession during off-duty hours, as specified. This bill would subject an employer who violates the bill to a civil penalty of \$500 per employee for each violation and would authorize a public prosecutor to bring specified enforcement actions.

Organization **Position**
 EMSAAC Watch/Study

AB 1337 **(Ward D) Information Practices Act of 1977.**

Current Text: Amended: 5/23/2025 [html](#) [pdf](#)

Last Amend: 5/23/2025

Status: 6/11/2025-Referred to Com. on JUD.

Location: 6/11/2025-S. JUD.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf.	Enrolled	Vetoed	Chaptered
1st House				2nd House				Conf.			
								Conc.			

Calendar: 7/15/2025 9:30 a.m. - State Capitol, Room 112 SENATE JUDICIARY, UMBERG, THOMAS, Chair

Summary: Existing law, the Information Practices Act of 1977, prescribes a set of requirements, prohibitions, and remedies applicable to agencies, as defined, with regard to their collection, storage, and disclosure of personal information, as defined. Existing law exempts from the provisions of the act counties, cities, any city and county, school districts, municipal corporations, districts, political subdivisions, and other local public agencies, as specified. This bill would recast those provisions to, among other things, remove that exemption for local agencies, and would revise and expand the definition of "personal information." The bill would make other technical, nonsubstantive, and conforming changes. Because the bill would expand the duties of local officials, this bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Organization **Position**
 EMSAAC Watch/Study

AB 1403 **(Hart D) Emergency services.**

Current Text: Amended: 3/24/2025 [html](#) [pdf](#)

Last Amend: 3/24/2025

Status: 5/8/2025-Failed Deadline pursuant to Rule 61(a)(3). (Last location was EMERGENCY MANAGEMENT on 3/24/2025)(May be acted upon Jan 2026)

Location: 5/8/2025-A. 2 YEAR

Desk	2 year	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf.	Enrolled	Vetoed	Chaptered
1st House				2nd House				Conf.			
								Conc.			

Summary: Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act, governs local emergency medical services (EMS) systems, authorizes each county to develop an EMS program and designate a local EMS agency, and requires the Emergency Medical Services Authority to receive plans for the implementation of EMS systems from local EMS agencies, as specified. Existing law requires a county to enter into a written agreement with a city or fire district that contracted for or provided prehospital EMS as of June 1, 1980. Existing law requires, until that written agreement is reached, prehospital EMS to be continued at not less than the existing level and the administration of prehospital EMS by cities and fire districts contracting for or providing those services as of June 1, 1980, to be retained by those cities and fire districts, as specified. This bill would authorize a county board of supervisors or the governing body of an entity or a joint powers agency designated as the local EMS agency by the board of supervisors to provide ambulance services to persons located within the county's jurisdiction by specified means, including assigning the duty of providing ambulance services to residents of the county to an existing county department and providing the department with the necessary staffing, vehicles, and equipment to provide ambulance services. The bill would require a county board of supervisors or a local EMS agency to adopt a written policy, including specified requirements, for an emergency ambulance services provider in order to enter into a contract with a provider for emergency ambulance services and would include required provisions for those contracts. The bill would make related findings and declarations.

Organization **Position**

EMSAAC Two Year Bill
Notes: 2 -year bill. Left on the list for monitoring.

SB 6 (Ashby D) Controlled substances: xylazine.

Current Text: Introduced: 12/2/2024 [html](#) [pdf](#)

Status: 7/2/2025-From committee: Do pass and re-refer to Com. on APPR. (Ayes 9. Noes 0.) (July 1).
Re-referred to Com. on APPR.

Location: 7/1/2025-A. APPR.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law, the California Uniform Controlled Substances Act, categorizes controlled substances into 5 schedules and places the greatest restrictions on those substances contained in Schedule I. Under existing law, the substances in Schedule I are deemed to have a high potential for abuse and no accepted medical use while substances in Schedules II through V are substances that have an accepted medical use, but have the potential for abuse. Existing law restricts the prescription, furnishing, possession, sale, and use of controlled substances, and makes a violation of those laws a crime, except as specified. Existing law defines drug paraphernalia and prohibits, among other things, the manufacture, sale, and possession, as specified, of drug paraphernalia. Existing law excludes from these prohibitions any testing equipment that is designed, marketed, used, or intended to be used to analyze a substance for the presence of fentanyl, ketamine, gamma hydroxybutyric acid, or any analog of fentanyl. This bill would add xylazine to the list of Schedule III substances, as specified. If an animal drug containing xylazine that has been approved under the federal Food, Drug and Cosmetic Act is not available for sale in California, the bill would create an exception for a substance that is intended to be used to compound an animal drug, as specified. The bill would exclude from the prohibitions on paraphernalia any testing equipment to analyze a substance for the presence of xylazine. By creating a new crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Organization Position
EMSAAC Watch/Study

SB 294 (Reyes D) The Workplace Know Your Rights Act.

Current Text: Amended: 7/1/2025 [html](#) [pdf](#)

Last Amend: 7/1/2025

Status: 7/1/2025-From committee with author's amendments. Read second time and amended. Re-referred to Com. on JUD.

Location: 6/26/2025-A. JUD.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Calendar: 7/8/2025 8:30 a.m. - State Capitol, Room 437 ASSEMBLY JUDICIARY, KALRA, ASH, Chair

Summary: Existing law establishes the Division of Labor Standards Enforcement, headed by the Labor Commissioner, within the Department of Industrial Relations, for the purpose of enforcing labor laws. Existing law prescribes the duties and rights of employers and employees relating to specified labor laws, including, among other things, paid sick days, workers' compensation, and notice requirements related to inspections conducted by an immigration agency. This bill would establish the Workplace Know Your Rights Act. The bill would require an employer, within 30 days after the Labor Commissioner posts a template notice on its internet website, and annually thereafter, to provide a stand-alone written notice to each current employee of specified workers' rights, including, among other things, the categories described above, as well as constitutional rights of an employee when interacting with law enforcement at the workplace, as specified. The bill would also require the employer to provide the written notice to each new employee upon hire and to provide the written notice annually to an employee's authorized representative, if any. This bill would require the Labor Commissioner to develop a template notice and would authorize an employer to use the template notice to comply with the notice requirement described above. The bill would also require the Labor Commissioner, on or before July 1, 2026, to develop a video for employees advising them of their rights under the areas described above and to develop a video for employers advising them of their requirements under those areas. This bill would require an employer, if an employee has designated an emergency contact for this purpose, to notify the designated emergency contact if the employee is arrested or detained on their worksite. If the arrest or detention occurs during work hours, or during the performance of the employee's job duties, but not on the worksite, the bill would require the employer to notify the employee's designated emergency contact only if the employer has actual knowledge of the arrest or detention of the employee. This bill contains other related provisions.

Organization Position
EMSAAC Watch/Study

SB 465 (Pérez D) Governor's Office of Emergency Services: California Alert.

Current Text: Amended: 3/24/2025 [html](#) [pdf](#)

Last Amend: 3/24/2025

Status: 5/23/2025-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/5/2025)(May be acted upon Jan 2026)

Location: 5/23/2025-S. 2 YEAR

Desk	Policy	2 year	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered	
1st House				2nd House								

Summary: The California Emergency Services Act authorizes the Governor to declare a state of emergency, and local officials and local governments to declare a local emergency, when specified conditions of disaster or extreme peril to the safety of persons and property exist. Existing law establishes the Office of Emergency Services within the office of the Governor and charges it with responsibility for the state’s emergency and disaster response services for natural, technological, or manmade disasters and emergencies, including responsibility for activities necessary to prevent, respond to, recover from, and mitigate the effects of emergencies and disasters upon people and property. Existing law requires the Office of Emergency Services, in consultation with, at minimum, telecommunications carriers, the California cable and broadband industry, radio and television broadcasters, the California State Association of Counties, the League of California Cities, the access and functional needs community, appropriate federal agencies, and the Standardized Emergency Management System Alert and Warning Specialist Committee, to develop guidelines for alerting and warning the public of an emergency. This bill would require the office to establish a statewide emergency alert system called California Alert. The bill would require California Alert to utilize Wireless Emergency Alerts authorized by the Integrated Public Alert Warning System, the Federal Emergency Management Agency’s national system for local alerting that provides authenticated emergency information to the public through mobile phones within a designate cell tower’s coverage area. The bill would require the office to contract with a private vendor that provides alerting systems to send California Alerts to registered phone numbers that are not location based. The bill would require the office to establish standards for issuing emergency alerts to California residents across local jurisdictional boundaries.

Organization Position
 EMSAAC Watch/Study

SB 582 (Stern D) Health and care facilities: licensing during emergencies or disasters.

Current Text: Amended: 6/26/2025 [html](#) [pdf](#)

Last Amend: 6/26/2025

Status: 6/26/2025-Read second time and amended. Re-referred to Com. on HEALTH.

Location: 6/24/2025-A. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered	
1st House				2nd House								

Calendar: 7/15/2025 1:30 p.m. - 1021 O Street, Room 1100 ASSEMBLY HEALTH, BONTA, MIA, Chair

Summary: Existing law provides for the licensure of clinics and various health facilities, including skilled nursing facilities and intermediate care facilities, by the State Department of Public Health. Existing law, the Long-Term Care, Health, Safety, and Security Act of 1973, generally requires the department to license, inspect, and regulate long-term health care facilities, including skilled nursing facilities. Existing law makes it a misdemeanor for any person to willfully or repeatedly violate the act, as specified. Existing regulations require skilled nursing facilities to adopt and follow a written external disaster and mass casualty program plan developed with the advice and assistance of county or regional and local planning offices. This bill would require skilled nursing facilities to update the external disaster and mass casualty program plan at least once per year. The bill would require, in adopting and updating the plan, skilled nursing facilities to, among other things, seek input from county or regional and local planning offices, including the medical health operational area coordinator (MHOAC). By expanding the scope of an existing crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.

Organization Position
 EMSAAC Watch/Study

SB 588 (Ochoa Bogh R) Health facilities: freestanding emergency center study.

Current Text: Amended: 4/21/2025 [html](#) [pdf](#)

Last Amend: 4/21/2025

Status: 5/1/2025-April 30 set for first hearing. Testimony taken. Further hearing to be set.

Location: 4/2/2025-S. HEALTH

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered	
1st House				2nd House								

Summary: Existing law authorizes a general acute care hospital, as defined, to offer special services, including, but not limited to, emergency medical services. Existing law establishes the Department of Health Care Access and Information to oversee and administer various health programs related to health care infrastructure, such as health policy and planning, health professions development, and facilities design review and construction, among others. This bill would require the Department of

Health Care Access and Information to conduct a feasibility study on the implementation of freestanding emergency departments, as defined, in rural, disadvantaged, and underserved areas with limited access to emergency care. The bill would require that the study be conducted in collaboration with certain stakeholders and that the department issue a report to the Legislature, on or before January 1, 2027, with its findings and recommendations. The bill would appropriate an unspecified amount from the General Fund to the department for those purposes. The bill would repeal these provisions on January 1, 2031.

Organization **Position**
 EMSAAC Watch/Study

SB 660

(Menjivar D) California Health and Human Services Data Exchange Framework.

Current Text: Amended: 6/23/2025 [html](#) [pdf](#)

Last Amend: 6/23/2025

Status: 7/2/2025-From committee: Do pass and re-refer to Com. on P. & C.P. (Ayes 14. Noes 0.) (July 1). Re-referred to Com. on P. & C.P.

Location: 7/1/2025-A. P. & C.P.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law establishes the Department of Health Care Access and Information to oversee and administer various health programs related to health care infrastructure, such as health policy and planning, health professions development, and facilities design review and construction, among others. Existing law requires the California Health and Human Services Agency to establish the California Health and Human Services Data Exchange Framework to require the exchange of health information among health care entities and government agencies in the state, among other things. Existing law requires the agency to convene a stakeholder advisory group to advise on the development of implementation of the California Health and Human Services Data Exchange Framework. This bill would require the Department of Health Care Access and Information, on or before January 1, 2026, and subject to an appropriation in the annual Budget Act, to take over the establishment, implementation, and all of the functions related to the California Health and Human Services Data Exchange Framework, including the data sharing agreement and policies and procedures, from the agency. The bill would expand the entities that are specifically required to execute a data sharing agreement with the California Health and Human Services Data Exchange Framework and authorize the department to determine other categories of entities required to execute a data sharing agreement, as specified. The bill would require the department, no later than July 1, 2026, to establish a process to designate qualified health information organizations as data sharing intermediaries that have demonstrated their ability to meet requirements of the California Health and Human Services Data Exchange Framework. The bill would require the department to annually report to the Legislature on the California Health and Human Services Data Exchange Framework, including compliance with data sharing agreements. This bill contains other related provisions.

Organization **Position**
 EMSAAC Watch/Study

SB 669

(McGuire D) Rural hospitals: standby perinatal medical services.

Current Text: Amended: 7/3/2025 [html](#) [pdf](#)

Last Amend: 7/3/2025

Status: 7/3/2025-Read second time and amended. Re-referred to Com. on APPR.

Location: 7/1/2025-A. APPR.

Desk	Policy	Fiscal	Floor	Desk	Policy	Fiscal	Floor	Conf. Conc.	Enrolled	Vetoed	Chaptered
1st House				2nd House							

Summary: Existing law finds and declares that prenatal care, delivery service, postpartum care, and neonatal and infant care are essential services necessary to assure maternal and infant health, and that these services are not currently distributed so as to meet the minimum maternal and infant health needs of many Californians. Existing law requires the State Department of Public Health to develop and maintain a statewide community-based comprehensive perinatal services program, as specified, to deliver services in medically underserved areas or areas with demonstrated need. This bill would require the department, in consultation with specified stakeholders, to establish a 5-year pilot project to allow critical access and individual and small system rural hospitals to establish standby perinatal medical services, as defined. To qualify for participation in the pilot project, the bill would require a critical access or individual and small system rural hospitals to meet specified requirements, including, among others, that the hospital (1) be greater than 60 minutes from the nearest hospital providing full maternity services, (2) not have closed a full maternity or labor and delivery department on or after January 1, 2025, and (3) agree to provide maternal and neonatal services, as specified. The bill would require a hospital selected for a pilot program to comply with certain requirements, including among others, having and maintaining specified staff, services, and equipment. The bill would require a physician, as specified, to have overall responsibility for a pilot program under these provisions. This bill would require the department, in consultation with specified stakeholders, to develop a monitoring

plan and reporting template to collect and evaluate data on safety, outcomes, utilization, and populations served using stratified demographic data to the extent statistically reliable data is available and complies with medical privacy laws and practices. The bill would require the department to compile the data and prepare an evaluation to be submitted to the Legislature on or before 2 years after the completion of the pilot project, and made publicly available.

Organization **Position**
 EMSAAC Watch/Study

SB 796 (Richardson D) Emergency medical services: state-employed public safety personnel: optional first aid skills.

Current Text: Amended: 4/28/2025 [html](#) [pdf](#)

Last Amend: 4/28/2025

Status: 5/23/2025-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/12/2025)(May be acted upon Jan 2026)

Location: 5/23/2025-S. 2 YEAR

Desk	Policy	2 year	Floor	Desk	Policy	Fiscal	Floor	Conf.	Enrolled	Vetoed	Chaptered
1st House				2nd House				Conc.			

Summary: Existing law requires specified lifeguards, firefighters, and peace officers to be trained to administer first aid and cardiopulmonary resuscitation (CPR). Existing law requires the training to meet standards prescribed by the Emergency Medical Services Authority, and to be provided at no cost to the lifeguard or firefighter employee. Existing regulations authorize those lifeguards, firefighters, and peace officers to perform specified optional first aid and CPR skills if the lifeguard, firefighter, or peace officer has been trained and tested to demonstrate competence and if authorized by the medical director of the local emergency medical services agency. This bill would require the authority to act as the authorizing entity for the optional first aid and CPR skills for the lifeguards, firefighters, and peace officers described above that are employed by a state agency, and would require the authority to develop and implement quality assurance and improvement measures, as specified, to ensure the safe and effective use of those skills.

Organization **Position**
 EMSAAC Watch/Study

Total Measures: 30

Total Tracking Forms: 30



AB 645 ([Carrillo D](#)) Emergency medical services: dispatcher training.

Status

7/7/2025 - From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on HEALTH.

Calendar:

7/16/2025 1:30 p.m. - 1021 O Street, Room 1200 SENATE HEALTH, MENJIVAR, CAROLINE, Chair

Summary

Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act (act), establishes the Emergency Medical Services Authority, which is responsible for the coordination of various state activities concerning emergency medical services (EMS). The act authorizes a county to develop an EMS program by designating a local EMS agency. Existing law also requires the Commission on Emergency Medical Services to review and approve regulations, standards, and guidelines to be developed by the authority. Existing law generally makes a violation of the act a misdemeanor. This bill would require, by January 1, 2027, a public safety agency that provides "911" call processing services for emergency medical response to provide prearrival medical instructions to "911" callers requiring medical assistance, including, among other things, airway and choking medical instructions for infants, children, and adults and administration of naloxone for narcotics overdoses. The bill would require prearrival medical instructions to be approved by the local EMS agency medical director and implemented consistent with the medical protocols and procedures adopted by the public safety agency. By expanding the scope of a crime, and to the extent that the bill would create new duties for a public safety agency, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws. (Based on text date 7/7/2025)

Bill Text

07/07/2025 Amended [pdf](#) [htm](#)

04/24/2025 Amended [pdf](#) [htm](#)

03/24/2025 Amended [pdf](#) [htm](#)

02/13/2025 Introduced [pdf](#) [htm](#)

Analysis

05/15/2025 [Assembly - Floor Analysis](#)

05/12/2025 [Assembly - Appropriations](#)

04/25/2025 [Assembly - Emergency Management](#)

04/18/2025 [Assembly - Health](#)

Votes

05/19/2025 [Asm. Third Reading](#) (Y: 70 N: 0 A: 9) (Pass)

05/14/2025 [Asm. Appr.](#) (Y: 15 N: 0 A: 0) (Pass)

04/28/2025 [Asm. Emergency Management](#) (Y: 6 N: 0 A: 1) (Pass)

04/22/2025 [Asm. Health](#) (Y: 13 N: 0 A: 3) (Pass)

History

07/07/2025 From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on HEALTH.

05/28/2025 Referred to Com. on HEALTH.

05/20/2025 In Senate. Read first time. To Com. on RLS. for assignment.

05/19/2025 Read third time. Passed. Ordered to the Senate.

05/15/2025 Read second time. Ordered to third reading.

05/14/2025 From committee: Do pass. (Ayes 15. Noes 0.) (May 14).

04/29/2025 Measure version as amended on April 24 corrected. From committee: Do pass and re-refer to Com. on APPR. (Ayes 6. Noes 0.) (April 28). Re-referred to Com. on APPR.

04/28/2025 Re-referred to Com. on E.M.

04/24/2025 From committee chair, with author's amendments: Amend, and re-refer to Com. on E.M. Read second time and amended.

04/23/2025 Coauthors revised. From committee: Do pass and re-refer to Com. on E.M. (Ayes 13. Noes 0.) (April 22). Re-referred to Com. on E.M.

04/02/2025 In committee: Hearing postponed by committee.

03/25/2025 Re-referred to Com. on HEALTH.

03/24/2025 Referred to Coms. on HEALTH and E.M. From committee chair, with author's amendments: Amend, and re-refer to Com. on HEALTH. Read second time and amended.

02/14/2025 From printer. May be heard in committee March 16.

02/13/2025 Read first time. To print.

7/8/2025 11:55:22 AM

AMENDED IN SENATE JULY 7, 2025
AMENDED IN ASSEMBLY APRIL 24, 2025
AMENDED IN ASSEMBLY MARCH 24, 2025
CALIFORNIA LEGISLATURE—2025–26 REGULAR SESSION

ASSEMBLY BILL

No. 645

**Introduced by Assembly Member Carrillo
(Coauthor: Assembly Member Aguiar-Curry)**

February 13, 2025

An act to add Section 1797.161 to the Health and Safety Code, relating to emergency medical services.

LEGISLATIVE COUNSEL'S DIGEST

AB 645, as amended, Carrillo. Emergency medical services: dispatcher training.

Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act (act), establishes the Emergency Medical Services Authority, which is responsible for the coordination of various state activities concerning emergency medical services (EMS). The act authorizes a county to develop an EMS program by designating a local EMS agency. Existing law also requires the Commission on Emergency Medical Services to review and approve regulations, standards, and guidelines to be developed by the authority. Existing law generally makes a violation of the act a misdemeanor.

~~This bill would require the authority, by January 1, 2027, to develop and, after approval by the commission, adopt minimum standards for emergency medical dispatcher training. The bill would require a public safety dispatcher or public safety telecommunicator, as defined, to~~

~~complete that training.~~ require, by January 1, 2027, a public safety agency that provides “911” call processing services for emergency medical response to provide prearrival medical instructions to “911” callers requiring medical assistance, including, among other things, airway and choking medical instructions for infants, children, and adults and administration of naloxone for narcotics overdoses. The bill would require prearrival medical instructions to be approved by the local EMS agency medical director and implemented consistent with the medical protocols and procedures adopted by the public safety agency. By expanding the scope of a crime, and to the extent that the bill would create new duties for a public safety ~~dispatcher or public safety telecommunicator,~~ agency, the bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that with regard to certain mandates no reimbursement is required by this act for a specified reason.

With regard to any other mandates, this bill would provide that, if the Commission on State Mandates determines that the bill contains costs so mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: yes.

The people of the State of California do enact as follows:

1 ~~SECTION 1. Section 1797.161 is added to the Health and~~
2 ~~Safety Code, to read:~~
3 ~~1797.161. (a) By January 1, 2027, the authority shall develop~~
4 ~~and, after approval by the commission pursuant to Section 1799.50,~~
5 ~~adopt minimum standards for emergency medical dispatcher~~
6 ~~training.~~
7 ~~(b) A public safety dispatcher or public safety telecommunicator~~
8 ~~shall complete emergency medical dispatcher training that complies~~
9 ~~with the minimum standards adopted by the authority.~~
10 ~~(c) For purposes of this section, “public safety dispatcher or~~
11 ~~public safety telecommunicator” means an individual employed~~
12 ~~by a public safety agency, as the initial first responder, whose~~
13 ~~primary responsibility is to receive, process, transmit, or dispatch~~

1 emergency and nonemergency calls for fire or emergency medical
2 services, by telephone, radio, or other communication device, and
3 includes an individual who promotes from this position and
4 supervises individuals who perform these functions.

5 *SECTION 1. Section 1797.161 is added to the Health and
6 Safety Code, to read:*

7 *1797.161. (a) By January 1, 2027, a public safety agency that
8 provides “911” call processing services for emergency medical
9 response shall provide prearrival medical instructions to “911”
10 callers requiring medical assistance, including, but not limited to,
11 all of the following:*

12 *(1) Airway and choking medical instructions for infants,
13 children, and adults.*

14 *(2) Automatic external defibrillator (AED) and CPR instructions
15 for children and adults.*

16 *(3) Childbirth.*

17 *(4) Bleeding control and hemorrhage.*

18 *(5) Administration of epinephrine by auto-injector for suspected
19 anaphylaxis.*

20 *(6) Administration of naloxone for suspected narcotics
21 overdoses.*

22 *(b) A public safety agency may satisfy the requirements of
23 subdivision (a) by contracting with another public safety agency
24 that provides prearrival medical instructions.*

25 *(c) Prearrival medical instructions developed pursuant to
26 subdivision (a) or (b) shall be approved by the local EMS agency
27 medical director pursuant to subdivisions (c) and (d) of Section
28 1797.223 and implemented consistent with the medical protocols
29 and procedures adopted by the public safety agency.*

30 *(d) This section does not require a public safety agency to
31 update its policies and procedures if the public safety agency
32 already provides prearrival medical instructions through
33 emergency medical dispatch or other means and those instructions
34 have been approved by the local EMS agency medical director.*

35 *(e) This section shall not be construed to alter, modify, abridge,
36 diminish, enlarge, or constrain the authority’s ability to adopt
37 guidelines or regulations for emergency medical dispatch,
38 including dispatcher training, under existing law, including, but
39 not limited to, Sections 1797.103 and 1797.107.*

1 (f) *This section does not supersede Section 1797.201, 1797.223,*
2 *1798.6, or 1798.8, or Section 53110 of the Government Code.*

3 SEC. 2. No reimbursement is required by this act pursuant to
4 Section 6 of Article XIII B of the California Constitution for certain
5 costs that may be incurred by a local agency or school district
6 because, in that regard, this act creates a new crime or infraction,
7 eliminates a crime or infraction, or changes the penalty for a crime
8 or infraction, within the meaning of Section 17556 of the
9 Government Code, or changes the definition of a crime within the
10 meaning of Section 6 of Article XIII B of the California
11 Constitution.

12 However, if the Commission on State Mandates determines that
13 this act contains other costs mandated by the state, reimbursement
14 to local agencies and school districts for those costs shall be made
15 pursuant to Part 7 (commencing with Section 17500) of Division
16 4 of Title 2 of the Government Code.



AB 1328 ([Rodriguez, Michelle D](#)) Medi-Cal reimbursements: nonemergency ambulance transportation.

Status

6/11/2025 - Referred to Com. on HEALTH.

Calendar:

7/16/2025 1:30 p.m. - 1021 O Street, Room 1200 SENATE HEALTH, MENJIVAR, CAROLINE, Chair

Summary

Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services, including emergency or nonemergency medical or nonmedical transportation services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Under this bill, commencing on January 1, 2026, and subject to an appropriation, Medi-Cal fee-for-service reimbursement for nonemergency ambulance transportation services, as defined, would be in an amount equal to 80% of the amount set forth in the federal Medicare ambulance fee schedule for the corresponding level of service, adjusted by the Geographic Practice Cost Index, as specified. The bill would require the department to establish a directed payment program for Medi-Cal managed care in order to follow a similar treatment to reimbursement rates for nonemergency ambulance transportation services. This bill contains other related provisions. (Based on text date 5/23/2025)

Bill Text

05/23/2025 Amended [pdf](#) [htm](#)

04/28/2025 Amended [pdf](#) [htm](#)

04/10/2025 Amended [pdf](#) [htm](#)

03/24/2025 Amended [pdf](#) [htm](#)

02/21/2025 Introduced [pdf](#) [htm](#)

Analysis

05/28/2025 [Assembly - Floor Analysis](#)

05/12/2025 [Assembly - Appropriations](#)

04/18/2025 [Assembly - Health](#)

Votes

06/02/2025 [Asm. Third Reading](#) (Y: 78 N: 0 A: 1) (Pass)

05/23/2025 [Asm. Appr.](#) (Y: 11 N: 0 A: 4) (Pass)

04/22/2025 [Asm. Health](#) (Y: 16 N: 0 A: 0) (Pass)

History

06/11/2025 Referred to Com. on HEALTH.

06/03/2025 In Senate. Read first time. To Com. on RLS. for assignment.

06/02/2025 Read third time. Passed. Ordered to the Senate. (Ayes 78. Noes 0.)
05/27/2025 Read second time. Ordered to third reading.
05/23/2025 Assembly Rule 63 suspended. (Ayes 51. Noes 16.) From committee: Amend, and do pass as amended. (Ayes 11. Noes 0.) (May 23). Read second time and amended. Ordered returned to second reading.
05/14/2025 In committee: Set, first hearing. Referred to APPR. suspense file.
04/29/2025 Re-referred to Com. on APPR.
04/28/2025 Read second time and amended.
04/24/2025 From committee: Amend, and do pass as amended and re-refer to Com. on APPR. (Ayes 16. Noes 0.) (April 22).
04/21/2025 Re-referred to Com. on HEALTH.
04/10/2025 From committee chair, with author's amendments: Amend, and re-refer to Com. on HEALTH. Read second time and amended.
03/25/2025 Re-referred to Com. on HEALTH.
03/24/2025 Referred to Com. on HEALTH. From committee chair, with author's amendments: Amend, and re-refer to Com. on HEALTH. Read second time and amended.
02/24/2025 Read first time.
02/22/2025 From printer. May be heard in committee March 24.
02/21/2025 Introduced. To print.

7/8/2025 11:55:55 AM

AMENDED IN ASSEMBLY MAY 23, 2025

AMENDED IN ASSEMBLY APRIL 28, 2025

AMENDED IN ASSEMBLY APRIL 10, 2025

AMENDED IN ASSEMBLY MARCH 24, 2025

CALIFORNIA LEGISLATURE—2025–26 REGULAR SESSION

ASSEMBLY BILL

No. 1328

Introduced by Assembly Member Michelle Rodriguez

February 21, 2025

An act to add Section 14124.151 to the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 1328, as amended, Michelle Rodriguez. Medi-Cal reimbursements: nonemergency ambulance transportation.

Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services, including emergency or nonemergency medical or nonmedical transportation services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions.

Under this bill, commencing on January 1, 2026, and subject to an appropriation, Medi-Cal fee-for-service reimbursement for nonemergency ambulance transportation services, as defined, would be in an amount equal to 80% of the amount set forth in the federal Medicare ambulance fee schedule for the corresponding level of service, adjusted by the Geographic Practice Cost Index, as specified. The bill would require the department to establish a directed payment program

for Medi-Cal managed care in order to follow a similar treatment to reimbursement rates for nonemergency ambulance transportation services.

The bill would require the department to maximize federal financial participation in implementing the above-described provisions to the extent allowable. To the extent that federal financial participation is unavailable, the bill would require the department to implement the provisions using state funds, as specified.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 14124.151 is added to the Welfare and
2 Institutions Code, immediately following Section 14124.15, to
3 read:

4 14124.151. (a) (1) Commencing on January 1, 2026, subject
5 to an appropriation made by the Legislature to fund, in whole or
6 in part, the reimbursement rates described in this subdivision,
7 Medi-Cal fee-for-service reimbursement for nonemergency
8 ambulance transportation services shall be in an amount equal to
9 80 percent of the amount set forth in the federal Medicare
10 ambulance fee schedule established pursuant to Section 1395m of
11 Title 42 of the United States Code, for the corresponding level of
12 service.

13 (2) The reimbursement described in paragraph (1) shall be
14 adjusted by the Geographic Practice Cost Index under the federal
15 Centers for Medicare and Medicaid Services, specific to the area
16 of California in which the services are provided.

17 (3) The department shall establish a Medi-Cal managed care
18 directed payment program pursuant to the authority described in
19 Section 438.6(c) of Title 42 of the Federal Code of Regulations to
20 increase the reimbursement rates for nonemergency ambulance
21 transportation services in an amount equal to the amount set forth
22 in paragraph (1), for the corresponding level of service. The
23 department shall adjust the directed payment amount annually
24 pursuant to paragraph (2). The directed payments shall commence
25 on January 1, 2026, subject to an appropriation made by the
26 Legislature to fund, in whole or in part, the reimbursement rates
27 described in this paragraph.

1 (b) (1) The department shall maximize federal financial
2 participation in implementing this section to the extent allowable.
3 For purposes of implementing this section, the department shall
4 claim federal financial participation to the extent that the
5 department determines it is available.

6 (2) To the extent that federal financial participation is
7 unavailable, the department shall implement this section using
8 state funds, if appropriated as described in subdivision (a).

9 (3) It is the intent of the Legislature that the appropriation
10 described in subdivision (a) be sufficient to fund the reimbursement
11 levels in whole.

12 (c) Notwithstanding the rulemaking provisions of Chapter 3.5
13 (commencing with Section 11340) of Part 1 of Division 3 of Title
14 2 of the Government Code, the department may implement,
15 interpret, or make specific this section, in whole or in part, by
16 means of plan letters, plan or provider bulletins, or similar
17 instructions without taking any further regulatory action.

18 (d) For purposes of this section, “nonemergency ambulance
19 transportation services” means nonemergency medical
20 transportation services, as described in Section 51323 of Title 22
21 of the California Code of Regulations, that are conducted by ground
22 ambulance. The term “nonemergency ambulance transportation
23 services” does not include emergency medical transport services,
24 as defined in subdivision (g) of Section 14129.



SB 582 ([Stern D](#)) Health and care facilities: licensing during emergencies or disasters.

Status

6/26/2025 - Read second time and amended. Re-referred to Com. on HEALTH.

Calendar:

7/15/2025 1:30 p.m. - 1021 O Street, Room 1100 ASSEMBLY HEALTH, BONTA, MIA, Chair

Summary

Existing law provides for the licensure of clinics and various health facilities, including skilled nursing facilities and intermediate care facilities, by the State Department of Public Health. Existing law, the Long-Term Care, Health, Safety, and Security Act of 1973, generally requires the department to license, inspect, and regulate long-term health care facilities, including skilled nursing facilities. Existing law makes it a misdemeanor for any person to willfully or repeatedly violate the act, as specified. Existing regulations require skilled nursing facilities to adopt and follow a written external disaster and mass casualty program plan developed with the advice and assistance of county or regional and local planning offices. This bill would require skilled nursing facilities to update the external disaster and mass casualty program plan at least once per year. The bill would require, in adopting and updating the plan, skilled nursing facilities to, among other things, seek input from county or regional and local planning offices, including the medical health operational area coordinator (MHOAC). By expanding the scope of an existing crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws. (Based on text date 6/26/2025)

Bill Text

06/26/2025 Amended [pdf](#) [htm](#)
 05/05/2025 Amended [pdf](#) [htm](#)
 04/22/2025 Amended [pdf](#) [htm](#)
 04/08/2025 Amended [pdf](#) [htm](#)
 03/24/2025 Amended [pdf](#) [htm](#)
 02/20/2025 Introduced [pdf](#) [htm](#)

Analysis

06/23/2025 [Assembly - Aging And Long-Term Care](#)
 05/26/2025 [Senate - Floor Analyses](#)
 05/16/2025 [Senate - Appropriations](#)
 04/28/2025 [Senate - Health](#)
 04/16/2025 [Senate - Human Services](#)

Votes

06/24/2025 [Asm. Aging & L.T.C.](#) (Y: 7 N: 0 A: 0) (Pass)
 06/03/2025 [Sen. Senate 3rd Reading](#) (Y: 39 N: 0 A: 1) (Pass)
 05/23/2025 [Sen. Appr.](#) (Y: 6 N: 0 A: 1) (Pass)

05/19/2025 [Sen. Appr.](#) (Y: 5 N: 0 A: 2) (Pass)
04/30/2025 [Sen. Health](#) (Y: 11 N: 0 A: 0) (Pass)
04/21/2025 [Sen. Hum. S.](#) (Y: 5 N: 0 A: 0) (Pass)

History

06/26/2025 Read second time and amended. Re-referred to Com. on HEALTH.
06/25/2025 From committee: Do pass as amended and re-refer to Com. on HEALTH. (Ayes 7. Noes 0.) (June 24).
06/12/2025 Re-referred to Coms. on AGING & L.T.C and HEALTH pursuant to Assembly Rule 96.
06/09/2025 Referred to Coms. on HEALTH and AGING & L.T.C.
06/04/2025 In Assembly. Read first time. Held at Desk.
06/03/2025 Read third time. Passed. (Ayes 39. Noes 0. Page 1452.) Ordered to the Assembly.
05/29/2025 From special consent calendar on motion of Senator Stern. Ordered to third reading.
05/27/2025 Ordered to special consent calendar.
05/23/2025 From committee: Do pass. (Ayes 6. Noes 0. Page 1205.) (May 23). Read second time. Ordered to third reading.
05/20/2025 Set for hearing May 23.
05/19/2025 May 19 hearing: Placed on APPR. suspense file.
05/09/2025 Set for hearing May 19.
05/05/2025 Read second time and amended. Re-referred to Com. on APPR.
05/01/2025 From committee: Do pass as amended and re-refer to Com. on APPR. with recommendation: To consent calendar. (Ayes 11. Noes 0. Page 965.) (April 30).
04/22/2025 From committee: Do pass and re-refer to Com. on HEALTH with recommendation: To consent calendar. (Ayes 5. Noes 0. Page 812.) (April 21). Re-referred to Com. on HEALTH. From committee with author's amendments. Read second time and amended. Re-referred to Com. on HEALTH.
04/10/2025 Set for hearing April 30 in HEALTH pending receipt.
04/08/2025 Set for hearing April 21. From committee with author's amendments. Read second time and amended. Re-referred to Com. on HUMAN S.
04/03/2025 Withdrawn from committee. Re-referred to Coms. on HUMAN S. and HEALTH.
04/02/2025 Re-referred to Coms. on HEALTH and HUMAN S.
03/24/2025 From committee with author's amendments. Read second time and amended. Re-referred to Com. on RLS.
03/05/2025 Referred to Com. on RLS.
02/21/2025 From printer. May be acted upon on or after March 23.
02/20/2025 Introduced. Read first time. To Com. on RLS. for assignment. To print.

7/8/2025 11:57:15 AM

AMENDED IN ASSEMBLY JUNE 26, 2025

AMENDED IN SENATE MAY 5, 2025

AMENDED IN SENATE APRIL 22, 2025

AMENDED IN SENATE APRIL 8, 2025

AMENDED IN SENATE MARCH 24, 2025

SENATE BILL

No. 582

Introduced by Senator Stern

(Principal coauthors: Senators Cervantes, Cortese, Gonzalez, Pérez, Reyes, Richardson, Smallwood-Cuevas, and Umberg)

February 20, 2025

An act to amend Section 1569.695 of, to add Section 1418.23 to, to add Article 6 (commencing with Section 11834.60) to Chapter 7.5 of Part 2 of Division 10.5 of, and to add Chapter 15 (commencing with Section 1796.80) to Division 2 of, the Health and Safety Code, relating to health and care facilities.

LEGISLATIVE COUNSEL'S DIGEST

SB 582, as amended, Stern. Health and care facilities: licensing during emergencies or disasters.

Existing law provides for the licensure of clinics and various health facilities, including skilled nursing facilities and intermediate care facilities, by the State Department of Public Health. Existing law, the Long-Term Care, Health, Safety, and Security Act of 1973, generally requires the department to license, inspect, and regulate long-term health care facilities, including skilled nursing facilities. Existing law makes it a misdemeanor for any person to willfully or repeatedly violate the act, as specified. Existing regulations require skilled nursing facilities

to adopt and follow a written external disaster and mass casualty program plan developed with the advice and assistance of county or regional and local planning offices.

This bill would require skilled nursing facilities to update the external disaster and mass casualty program plan at least once per year. The bill would require, in adopting and updating the plan, skilled nursing facilities to, among other things, seek input from county or regional and local planning offices, including the medical health operational area coordinator (MHOAC). By expanding the scope of an existing crime, the bill would impose a state-mandated local program.

Existing law provides for the licensure of residential care facilities for the elderly (RCFEs) by the State Department of Social Services. Existing law requires an RCFE to have an emergency and disaster plan that includes specified information, including evacuation procedures. Under existing law, an RCFE is encouraged to have the plan be reviewed by local emergency authorities. Violation of these provisions is a crime.

This bill would instead require an RCFE to provide a copy of its emergency and disaster plan to the MHOAC, as specified, for the purposes of local disaster coordination. By expanding the scope of an existing crime, the bill would impose a state-mandated local program.

Existing law provides for the licensure of various facilities, including community care facilities, RCFEs, child daycare facilities, and medical foster homes for veterans by the State Department of Social Services. Existing law provides for the licensure of alcohol or other drug recovery or treatment facilities by the State Department of Health Care Services.

This bill would set forth provisions for the licensing status of certain entities that are made nonoperational, due to its destruction, significant damage, or through a prolonged closure or otherwise, during and as a result of a state of emergency proclaimed by the Governor, a federal emergency declaration, a federal major disaster declaration, or a federal fire management assistance declaration. The bill would apply to clinics, certain health facilities, certain community care facilities, RCFEs, child daycare facilities, medical foster homes for veterans, and alcohol or other drug recovery or treatment facilities.

This bill would authorize the State Department of Health Care Services to allow a facility that is made nonoperational as described above, and require the State Department of Public Health and the State Department of Social Services to allow an entity, when nonoperational due to its destruction, significant damage, or prolonged closure, to obtain a disaster suspension of its active license if the facility or entity notifies

the department that it intends to become operational again in the same or alternative location. The bill would require the entity to notify the applicable department within 6 months of the proclamation or declaration if the entity seeks to obtain a disaster suspension of its active license.

In the case of an entity that was destroyed in a fire and is being rebuilt for the same purpose, and that is allowed to obtain a disaster suspension of its active license, ~~the~~ *this* bill would authorize the applicable department to waive the annual state licensing fees for the entity on a year-by-year basis.

If an entity is licensed or certified by more than one state department within the California Health and Human Services Agency, and is made nonoperational and obtains a disaster suspension of its active license, ~~the~~ *this* bill would require the governing state departments to coordinate operational steps, as specified.

~~The~~

~~*This bill would require the State Department of Public Health or the State Department of Social Services, as applicable, for the duration of the first 30 calendar days following a proclamation or declaration, to waive in-person or daily attendance requirements for Community-Based Adult Services (CBAS) or childcare programs, for purposes of an entity made nonoperational. Health Care Services, for the duration of the first 30 calendar days following a proclamation or declaration, to require Medi-Cal managed care plans to presume that conditions are met for Emergency Remote Services in Community-Based Adult Services programs for purposes of an entity made nonoperational. The bill would also require the State Department of Social Services, for the duration of the first 90 calendar days following a proclamation or declaration, to waive in-person or daily attendance requirements for childcare programs for purposes of an entity made nonoperational.*~~

~~The~~

~~*This bill would require the State Department of Social Services to collaborate with local building, planning, and permitting officials, the local fire marshal, and local childcare agencies and regional centers, to ensure swift and seamless processes for inspecting and licensing entities that are subject to the above-described provisions, as applicable.*~~

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares all of the
2 following:

3 (a) On January 7, 2025, the Los Angeles area experienced the
4 development of two massive wildfires, sweeping through
5 established communities, leveling thousands of homes and
6 businesses, and changing the course of people's lives.

7 (b) Among the losses were dozens of state-licensed entities,
8 including, but not limited to, skilled nursing facilities, adult
9 residential facilities, other assisted living facilities, childcare
10 centers and homes, and children's residential care facilities. Each
11 of these losses is compounded by other facilities or other entities
12 becoming nonoperational in the fires.

13 (c) Replacing the lost licensing capacity, or maintaining the
14 licensing capacity, of these entities will be critical to returning
15 these communities to their former vibrancy.

16 (d) It is the intent of the Legislature to facilitate the recovery
17 and rebuilding of state-licensed facilities and other entities as
18 quickly as possible.

19 SEC. 2. Section 1418.23 is added to the Health and Safety
20 Code, to read:

21 1418.23. (a) The Legislature finds and declares that it is the
22 public policy of this state to ensure the health and safety of highly
23 vulnerable persons residing in skilled nursing facilities during an
24 emergency, natural disaster, wildfire, or other cause requiring the
25 evacuation of residents.

26 (b) The external disaster and mass casualty program plan
27 required to be adopted pursuant to Section 72551 of Title 22 of
28 the California Code of Regulations shall be updated at least once
29 per year. In adopting and updating the plan, a skilled nursing
30 facility shall do all of the following:

31 (1) Seek input from county or regional and local planning
32 offices, including the medical health operational area coordinator
33 (MHOAC).

1 (2) Incorporate, to the extent feasible, lessons learned from any
2 recent major disasters that impacted skilled nursing facilities in
3 California.

4 (3) Provide copies of the plan, including updates, to local or
5 regional emergency planning offices, including the MHOAC.

6 SEC. 3. Section 1569.695 of the Health and Safety Code is
7 amended to read:

8 1569.695. (a) In addition to any other requirement of this
9 chapter, a residential care facility for the elderly shall have an
10 emergency and disaster plan that shall include, but not be limited
11 to, all of the following:

12 (1) Evacuation procedures, including identification of an
13 assembly point or points that shall be included in the facility sketch.

14 (2) Plans for the facility to be self-reliant for a period of not less
15 than 72 hours immediately following any emergency or disaster,
16 including, but not limited to, a short-term or long-term power
17 failure. If the facility plans to shelter in place and one or more
18 utilities, including water, sewer, gas, or electricity, is not available,
19 the facility shall have a plan and supplies available to provide
20 alternative resources during an outage.

21 (3) Transportation needs and evacuation procedures to ensure
22 that the facility can communicate with emergency response
23 personnel or can access the information necessary in order to check
24 the emergency routes to be used at the time of an evacuation and
25 relocation necessitated by a disaster. If the transportation plan
26 includes the use of a vehicle owned or operated by the facility, the
27 keys to the vehicle shall be available to staff on all shifts.

28 (4) A contact information list of all of the following:

29 (A) Emergency response personnel.

30 (B) The Community Care Licensing Division within the State
31 Department of Social Services.

32 (C) The local long-term care ombudsman.

33 (D) Transportation providers.

34 (5) At least two appropriate shelter locations that can house
35 facility residents during an evacuation. One of the locations shall
36 be outside of the immediate area.

37 (6) The location of utility shut-off valves and instructions for
38 use.

39 (7) Procedures that address, but are not limited to, all of the
40 following:

1 (A) Provision of emergency power that could include
2 identification of suppliers of backup generators. If a permanently
3 installed generator is used, the plan shall include its location and
4 a description of how it will be used. If a portable generator is used,
5 the manufacturer's operating instructions shall be followed.

6 (B) Responding to an individual resident's needs if the
7 emergency call buttons are inoperable.

8 (C) Process for communicating with residents, families, hospice
9 providers, and others, as appropriate, that might include landline
10 telephones, cellular telephones, or walkie-talkies. A backup process
11 shall also be established. Residents and their responsible parties
12 shall be informed of the process for communicating during an
13 emergency.

14 (D) Assistance with, and administration of, medications.

15 (E) Storage and preservation of medications, including the
16 storage of medications that require refrigeration.

17 (F) The operation of assistive medical devices that need electric
18 power for their operation, including, but not limited to, oxygen
19 equipment and wheelchairs.

20 (G) A process for identifying residents with special needs, such
21 as hospice, and a plan for meeting those needs.

22 (H) Procedures for confirming the location of each resident
23 during an emergency response.

24 (b) A facility shall provide training on the plan to each staff
25 member upon hire and annually thereafter. The training shall
26 include staff responsibilities during an emergency or disaster.

27 (c) A facility shall conduct a drill at least quarterly for each
28 shift. The type of emergency covered in a drill shall vary from
29 quarter to quarter, taking into account different emergency
30 scenarios. An actual evacuation of residents is not required during
31 a drill. While a facility may provide an opportunity for residents
32 to participate in a drill, it shall not require any resident
33 participation. Documentation of the drills shall include the date,
34 the type of emergency covered by the drill, and the names of staff
35 participating in the drill.

36 (d) A facility shall review the plan annually and make updates
37 as necessary, including changes in floor plans and the population
38 served. The licensee or administrator shall sign and date
39 documentation to indicate that the plan has been reviewed and
40 updated as necessary.

- 1 (e) A facility shall have all of the following information readily
2 available to facility staff during an emergency:
- 3 (1) A resident roster with the date of birth for each resident.
 - 4 (2) An appraisal of resident needs and services plan for each
5 resident.
 - 6 (3) A resident medication list for residents with centrally stored
7 medications.
 - 8 (4) Contact information for the responsible party and physician
9 for each resident.
- 10 (f) A facility shall have both of the following in place:
- 11 (1) An evacuation chair at each stairwell, on or before July 1,
12 2019.
 - 13 (2) A set of keys available to facility staff on each shift for use
14 during an evacuation that provides access to all of the following:
 - 15 (A) All occupied resident units.
 - 16 (B) All facility vehicles.
 - 17 (C) All facility exit doors.
 - 18 (D) All facility cabinets and cupboards or files that contain
19 elements of the emergency and disaster plan, including, but not
20 limited to, food supplies and protective shelter supplies.
 - 21 (g) A facility shall make the plan available upon request to
22 residents onsite, any responsible party for a resident, the local
23 long-term care ombudsman, and local emergency responders.
24 Resident and employee information shall be kept confidential.
 - 25 (h) An applicant seeking a license for a new facility shall submit
26 the emergency and disaster plan with the initial license application
27 required under Section 1569.15.
 - 28 (i) The department's Community Care Licensing Division shall
29 confirm, during annual licensing visits, that the emergency and
30 disaster plan is on file at the facility and includes required content.
 - 31 (j) A facility shall provide a copy of its emergency and disaster
32 plan to the medical health operational area coordinator described
33 in Section 1797.153 for the purposes of local disaster coordination.
 - 34 (k) Nothing in this section shall create a new or additional
35 requirement for the department to evaluate the emergency and
36 disaster plan.
- 37 SEC. 4. Chapter 15 (commencing with Section 1796.80) is
38 added to Division 2 of the Health and Safety Code, to read:

1 CHAPTER 15. LICENSING DURING EMERGENCIES OR DISASTERS

2
3 1796.80. This chapter shall apply to all of the following entities:

4 (a) The following entities within the jurisdiction of the State
5 Department of Public Health:

- 6 (1) Clinic, as defined in Section 1200.
- 7 (2) The following entities, as defined in Section 1250:

 - 8 (A) Skilled nursing facility.
 - 9 (B) Intermediate care facility.
 - 10 (C) Intermediate care facility/developmentally disabled
 - 11 habilitative.
 - 12 (D) Intermediate care facility/developmentally disabled.
 - 13 (E) Intermediate care facility/developmentally disabled-nursing.
 - 14 (F) Congregate living health facility.
 - 15 (G) Intermediate care facility/developmentally
 - 16 disabled-continuous nursing.
 - 17 (H) Hospice facility.

18 (3) *Adult day health center or adult day health care center, as*
19 *defined in Section 1570.7.*

20 (b) The following entities within the jurisdiction of the State
21 Department of Social Services:

- 22 (1) The following entities, as defined in Section 1502:

 - 23 (A) Residential facility.
 - 24 (B) Adult day program.
 - 25 (C) Foster family home.
 - 26 (D) Small family home.
 - 27 (E) Transitional shelter care facility.
 - 28 (F) Transitional housing placement provider.
 - 29 (G) Enhanced behavioral supports home.
 - 30 (H) Community crisis home.
 - 31 (I) Crisis nursery.
 - 32 (J) Short-term residential therapeutic program.

- 33 (2) Adult residential facility, as defined in Section 1562.1.
- 34 (3) Medical foster home for veterans, as defined in Section
- 35 1568.21.
- 36 (4) Residential care facility for the elderly, as defined in Section
- 37 1569.2.
- 38 (5) Child daycare facility, as defined in Section 1596.750,
- 39 including, but not limited to, the following:

 - 40 (A) Daycare center, as defined in Section 1596.76.

1 (B) Employer-sponsored childcare center, as defined in Section
2 1596.771.

3 (C) Family daycare home, as defined in Section 1596.78.

4 (D) Schoolage childcare center, as defined in Section 1596.7915.

5 (E) Drop-in childcare center, as defined in Section 1596.7916.

6 1796.81. This chapter shall apply to all of the following
7 proclamations or declarations:

8 (a) A state of emergency, as proclaimed by the Governor
9 pursuant to Section 8625 of the Government Code.

10 (b) A federal emergency declaration by the President of the
11 United States pursuant to Section 5191 of Title 42 of the United
12 States Code under the federal Robert T. Stafford Disaster Relief
13 and Emergency Assistance Act (42 U.S.C. Sec. 5121 et seq.)
14 (Stafford Act).

15 (c) A federal major disaster declaration by the President of the
16 United States pursuant to Section 5170 of Title 42 of the United
17 States Code under the federal Stafford Act.

18 (d) A federal fire management assistance declaration approved
19 by the Federal Emergency Management Agency (FEMA) pursuant
20 to Section 5187 of Title 42 of the United States Code under the
21 federal Stafford Act and pursuant to Part 204 (commencing with
22 Section 204.1) of Subchapter D of Chapter I of Title 44 of the
23 Code of Federal Regulations.

24 1796.82. (a) In the case of an entity listed in Section 1796.80
25 that is made nonoperational, due to its destruction, significant
26 damage, or through a prolonged closure or otherwise, during and
27 as a result of an emergency or disaster proclaimed or declared as
28 described in Section 1796.81, both of the following shall apply:

29 (1) Notwithstanding any other law, and in accordance with this
30 chapter, the State Department of Public Health or the State
31 Department of Social Services, as applicable, shall allow the entity,
32 when nonoperational due to its destruction, significant damage,
33 or prolonged closure, to obtain a disaster suspension of its active
34 license if the entity notifies the department that it intends to become
35 operational again, by being rebuilt or reopening or otherwise, in
36 the same or alternative location.

37 (2) The entity shall notify the applicable department within six
38 months of the proclamation or declaration if the entity seeks to
39 obtain a disaster suspension of its active license pursuant to
40 paragraph (1).

1 (b) This chapter shall not be construed as waiving any applicable
2 inspection requirements under existing law for purposes of making
3 entities operational again.

4 1796.83. In the case of an entity listed in Section 1796.80 that
5 is nonoperational due to its destruction, significant damage, or
6 prolonged closure, and is being rebuilt for the same purpose, if the
7 State Department of Public Health or the State Department of
8 Social Services, as applicable, has allowed the entity to obtain a
9 disaster suspension of its active license pursuant to Section
10 1796.82, the department may waive, in whole or in part, the annual
11 state licensing fees for the entity on a year-by-year basis.

12 1796.84. If an entity subject to this chapter is licensed or
13 certified by more than one state department within the California
14 Health and Human Services Agency, and is made nonoperational
15 and obtains a disaster suspension of its active license pursuant to
16 Section 1796.82, the governing state departments shall coordinate
17 operational steps, including the utilization of concurrent processes.

18 1796.85. (a) For the duration of the first 30 calendar days
19 following a proclamation or declaration as described in Section
20 1796.81, the State Department of ~~Public Health or the State~~
21 ~~Department of Social Services, as applicable, shall waive in-person~~
22 ~~or daily attendance requirements for Health Care Services shall~~
23 ~~require Medi-Cal managed care plans to presume that conditions~~
24 ~~are met for Emergency Remote Services in Community-Based~~
25 ~~Adult Services (CBAS); (CBAS) programs, as described in Section~~
26 ~~14184.201 of the Welfare and Institutions Code, or for childcare~~
27 ~~programs; Code, for purposes of an entity made nonoperational,~~
28 as described in Section 1796.82, during those 30 calendar days.

29 (b) *For the duration of the first 90 calendar days following a*
30 *proclamation or declaration as described in Section 1796.81, the*
31 *State Department of Social Services shall waive in-person or daily*
32 *attendance requirements for childcare programs for purposes of*
33 *an entity made nonoperational, as described in Section 1796.82,*
34 *during those 90 calendar days.*

35 1796.86. The State Department of Social Services shall
36 collaborate with local building, planning, and permitting officials,
37 the local fire marshal, and local childcare agencies and regional
38 centers, to ensure swift and seamless processes for inspecting and
39 licensing entities that are subject to this chapter and that are being

1 made operational again after a proclaimed or declared emergency
2 or disaster as described in Section 1796.81.

3 SEC. 5. Article 6 (commencing with Section 11834.60) is
4 added to Chapter 7.5 of Part 2 of Division 10.5 of the Health and
5 Safety Code, to read:

6

7

Article 6. Licensing During Emergencies or Disasters

8

9 11834.60. This article shall apply to alcohol or other drug
10 recovery or treatment facilities, as defined in Section 11834.02,
11 within the jurisdiction of the State Department of Health Care
12 Services.

13 11834.61. This article shall apply to all of the emergency or
14 disaster proclamations or declarations that are listed in Section
15 1796.81.

16 11834.62. (a) In the case of an alcohol or other drug recovery
17 or treatment facility that is made nonoperational, due to its
18 destruction, significant damage, or through a prolonged closure
19 or otherwise, during and as a result of an emergency or disaster
20 proclaimed or declared as described in Section 11834.61, the
21 following shall apply:

22 (1) Notwithstanding any other law, and in accordance with this
23 article, the department may allow the facility to obtain a disaster
24 suspension of its active license if the facility notifies the department
25 that it intends to become operational again, by being rebuilt or
26 reopening or otherwise, in the same or alternative location.

27 (2) The facility shall notify the department within six months
28 of the proclamation or declaration if the facility seeks to obtain a
29 disaster suspension of its active license pursuant to paragraph (1).

30 (b) This article shall not be construed as waiving any applicable
31 inspection requirements under existing law for purposes of making
32 facilities operational again.

33 11834.63. In the case of an alcohol or other drug recovery or
34 treatment facility that was destroyed in a fire and is being rebuilt
35 for the same purpose, if the department has allowed the facility to
36 obtain a disaster suspension of its active license pursuant to Section
37 11834.62, the department may waive, in whole or in part, the
38 annual state licensing fees for the facility on a year-by-year basis.

39 11834.64. If an alcohol or other drug recovery or treatment
40 facility subject to this article is licensed or certified by one or more

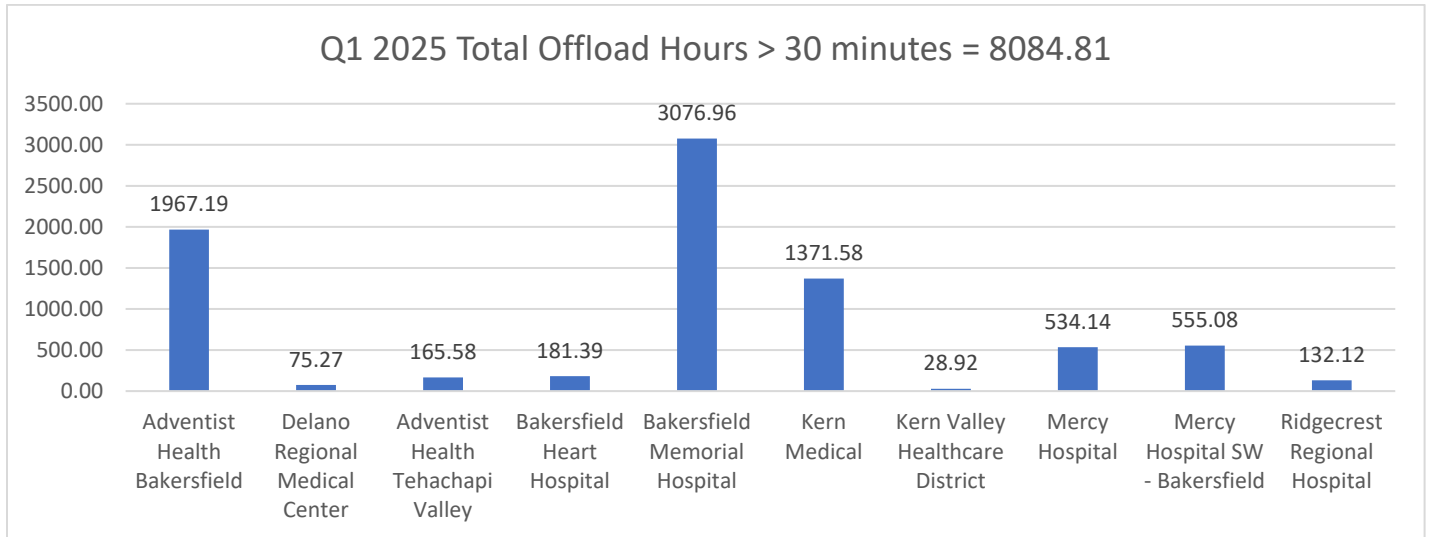
1 other state departments within the California Health and Human
2 Services Agency in addition to the State Department of Health
3 Care Services, and is made nonoperational and obtains a disaster
4 suspension of its active license pursuant to Section 11834.62, the
5 governing state departments shall coordinate operational steps,
6 including the utilization of concurrent processes.

7 SEC. 6. No reimbursement is required by this act pursuant to
8 Section 6 of Article XIII B of the California Constitution because
9 the only costs that may be incurred by a local agency or school
10 district will be incurred because this act creates a new crime or
11 infraction, eliminates a crime or infraction, or changes the penalty
12 for a crime or infraction, within the meaning of Section 17556 of
13 the Government Code, or changes the definition of a crime within
14 the meaning of Section 6 of Article XIII B of the California
15 Constitution.

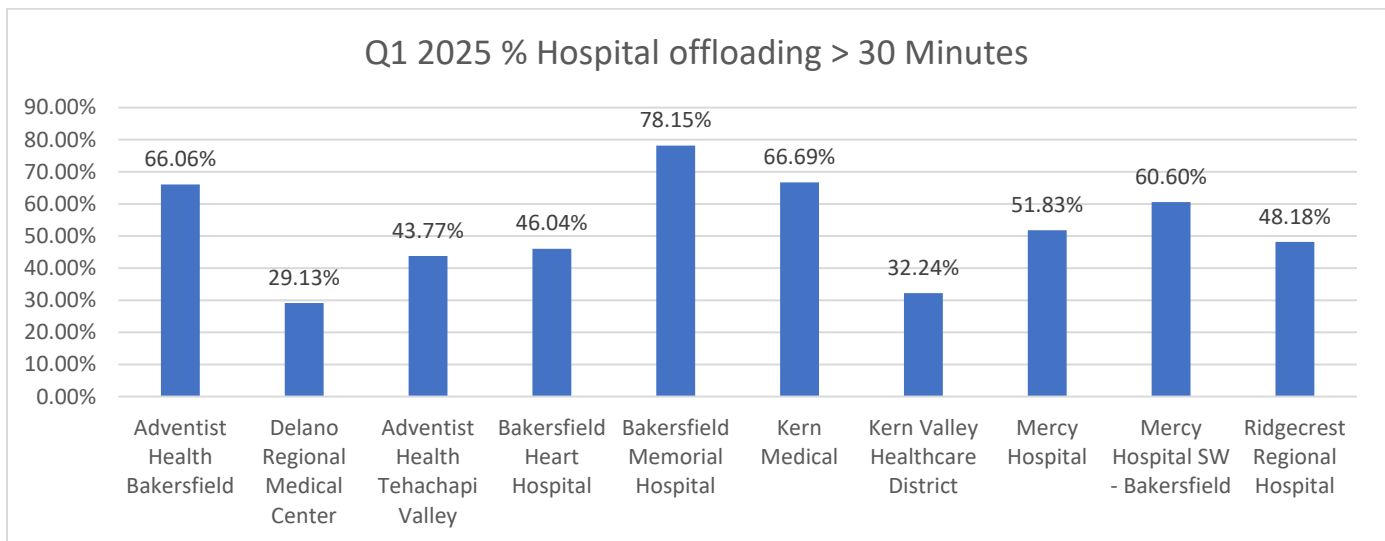
7. Quarterly APOT Report



Assembly Bill 40, signed into law by the governor on October 13th, 2023, requires every local EMS agency, by July 1, 2024, to develop a standard not to exceed 30 minutes, 90% of the time, for ambulance patient offload time and report the standardized time to the authority.



For hospitals to meet the AB 40 mandates, the graph below would need to be reporting at the 10% line or below.



8. Quarterly Ambulance Response Time Compliance



Compliance Reporting 2025/01/01 - 2025/01/31														Compliance Period reporting for repetitive non-compliance		
Zone	Priority	On Time	Late	Total Incidents	Do Not Count	Adjusted Total Incidents	Adjusted Late	Exemptions Requested	Exemptions Approved	Time Corrections Approved	Compliance Calculated Incidents	Compliance Calculated Late	Response Time Compliance	Response Time Penalty	Consecutive Periods Out of Compliance Including Current Period	Out of Compliance Count for 12 Periods Including Current Period
EOA 1 Metro	1	20	8	28	0	28	8	4	4	1	24	3	87.50%	\$1,000	1	0.88
	2	35	1	36	0	36	1	1	1	0	35	0	100.00%	\$0	0	1.00
	C3A	72	11	83	0	83	11	5	5	0	78	6	92.31%			0.92
	C3B	24	4	28	0	28	4	3	3	0	25	1	96.00%			0.96
	3	3	0	3	0	3	0	0	0	0	3	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	1	1	0	1	1	1	1	1	0	0	0				0.00
EOA 1 Rural	1	2	0	2	0	2	0	0	0	0	2	0	100.00%	\$0	0	1.00
	2	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0	1.00
	C3A	5	0	5	0	5	0	0	0	0	5	0	100.00%			1.00
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 1 Suburban	1	7	0	7	0	7	0	0	0	0	7	0	100.00%	\$0	0	1.00
	2	7	0	7	0	7	0	0	0	0	7	0	100.00%	\$0	0	1.00
	C3A	7	0	7	0	7	0	0	0	0	7	0	100.00%			1.00
	C3B	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00
	3	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 1 Urban	1	4	1	5	0	5	1	1	1	0	4	0	100.00%	\$0	0	1.00
	2	22	4	26	1	25	4	2	2	0	23	2	91.30%	\$0	0	0.91
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00
	C3B	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
	10	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 1 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 2 Metro	1	21	3	24	0	24	3	3	3	0	21	0	100.00%	\$0	0	1.00
	2	21	7	28	0	28	7	3	3	0	25	4	84.00%	\$1,000	1	0.84
	C3A	49	9	58	0	58	9	4	4	0	54	5	90.74%			0.91
	C3B	23	0	23	0	23	0	0	0	0	23	0	100.00%			1.00
	3	13	1	14	0	14	1	0	0	0	14	1	92.86%			0.93
4	0	0	0	0	0	0	0	0	0	0	0				0.00	
5	0	0	0	0	0	0	0	0	0	0	0				0.00	



Kern County - Hall Ambulance Response Compliance and Penalty

Period: Jan 2025

Report Status: FINAL

	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00
	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00
	8	3	0	3	0	3	0	0	0	0	3	0	100.00%				1.00	
	10	0	0	0	0	0	0	0	0	0	0	0					0.00	
EOA 3 Urban	1	7	0	7	0	7	0	0	0	0	7	0	100.00%	\$0	0		1.00	
	2	114	14	128	1	127	14	10	10	0	117	4	96.58%	\$0	0		0.97	
	C3A	22	0	22	0	22	0	0	0	0	22	0	100.00%				1.00	
	C3B	9	0	9	0	9	0	0	0	0	9	0	100.00%				1.00	
	3	38	1	39	0	39	1	1	1	0	38	0	100.00%				1.00	
	4	0	0	0	0	0	0	0	0	0	0	0					0.00	
	5	0	0	0	0	0	0	0	0	0	0	0					0.00	
	6	0	0	0	0	0	0	0	0	0	0	0					0.00	
	7	0	0	0	0	0	0	0	0	0	0	0					0.00	
	8	0	0	0	0	0	0	0	0	0	0	0					0.00	
10	0	0	0	0	0	0	0	0	0	0	0					0.00		
EOA 3 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0		0.00	
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0		0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0					0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0					0.00	
	3	0	0	0	0	0	0	0	0	0	0	0					0.00	
	4	0	0	0	0	0	0	0	0	0	0	0					0.00	
	5	0	0	0	0	0	0	0	0	0	0	0					0.00	
	6	0	0	0	0	0	0	0	0	0	0	0					0.00	
	7	0	0	0	0	0	0	0	0	0	0	0					0.00	
	8	0	0	0	0	0	0	0	0	0	0	0					0.00	
10	0	0	0	0	0	0	0	0	0	0	0					0.00		
EOA 4 Metro	1	780	305	1085	0	1085	305	264	264	1	821	40	95.13%	\$0	0		0.95	
	2	1202	377	1579	3	1576	377	346	346	3	1230	29	97.64%	\$0	0		0.98	
	C3A	2489	587	3076	8	3068	585	537	537	4	2531	44	98.26%				0.98	
	C3B	647	207	854	0	854	207	186	186	4	668	17	97.46%				0.97	
	3	483	95	578	2	576	95	80	80	8	496	7	98.59%				0.99	
	4	0	0	0	0	0	0	0	0	0	0	0					0.00	
	5	6	0	6	0	6	0	0	0	0	6	0	100.00%				1.00	
	6	128	52	180	0	180	52	0	0	0	180	52	71.11%				0.71	
	7	270	92	362	0	362	92	0	0	0	362	92	74.59%				0.75	
	8	7	0	7	0	7	0	0	0	0	7	0	100.00%				1.00	
10	78	59	137	1	136	59	5	5	54	131	-1	100.76%				1.01		
EOA 4 Rural	1	1	1	2	0	2	1	1	1	0	1	0	100.00%	\$0	0		1.00	
	2	0	1	1	0	1	1	1	1	0	0	0		\$0	0		0.00	
	C3A	1	0	1	0	1	0	0	0	0	1	0	100.00%				1.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0					0.00	
	3	0	0	0	0	0	0	0	0	0	0	0					0.00	
	4	0	0	0	0	0	0	0	0	0	0	0					0.00	
	5	0	0	0	0	0	0	0	0	0	0	0					0.00	
	6	0	0	0	0	0	0	0	0	0	0	0					0.00	
	7	0	0	0	0	0	0	0	0	0	0	0					0.00	
	8	0	0	0	0	0	0	0	0	0	0	0					0.00	
10	0	0	0	0	0	0	0	0	0	0	0					0.00		
EOA 4 Suburban	1	9	1	10	0	10	1	1	1	0	9	0	100.00%	\$0	0		1.00	
	2	15	1	16	0	16	1	1	1	0	15	0	100.00%	\$0	0		1.00	
	C3A	4	0	4	0	4	0	0	0	0	4	0	100.00%				1.00	
	C3B	1	0	1	0	1	0	0	0	0	1	0	100.00%				1.00	
	3	6	0	6	0	6	0	0	0	0	6	0	100.00%				1.00	
	4	0	0	0	0	0	0	0	0	0	0	0					0.00	
	5	0	0	0	0	0	0	0	0	0	0	0					0.00	
	6	0	0	0	0	0	0	0	0	0	0	0					0.00	
	7	0	0	0	0	0	0	0	0	0	0	0					0.00	
	8	2	0	2	0	2	0	0	0	0	2	0	100.00%				1.00	
10	0	0	0	0	0	0	0	0	0	0	0					0.00		
EOA 4 Urban	1	22	2	24	0	24	2	2	2	0	22	0	100.00%	\$0	0		1.00	
	2	21	3	24	0	24	3	3	3	0	21	0	100.00%	\$0	0		1.00	
	C3A	34	5	39	0	39	5	4	4	0	35	1	97.14%				0.97	
	C3B	9	0	9	0	9	0	0	0	0	9	0	100.00%				1.00	
	3	7	0	7	0	7	0	0	0	0	7	0	100.00%				1.00	
4	0	0	0	0	0	0	0	0	0	0	0					0.00		
5	0	0	0	0	0	0	0	0	0	0	0					0.00		



Kern County - Hall Ambulance Response Compliance and Penalty

Period: Jan 2025

Report Status: FINAL

6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00
8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00
10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00

TOTAL: \$10,000

142

138.73
97.70%

EOA 2 Urban	2	6	1	7	1	6	1	0	0	0	6	1	83.33%	\$1,000	1
EOA 9 Urban	2	6	1	7	0	7	1	0	0	0	7	1	85.71%	\$1,000	1
EOA 8 Rural	C3A	5	1	6	0	6	1	0	0	0	6	1	83.33%		
EOA 2 Suburban	8	2	1	3	0	3	1	0	0	0	3	1	66.67%		
EOA 1 Urban	3	5	1	6	0	6	1	0	0	0	6	1	83.33%		



Compliance Reporting 2025/02/01 - 2025/02/28															Compliance Period reporting for repetitive non-compliance		
Zone	Priority	On Time	Late	Total Incidents	Do Not Count	Adjusted Total Incidents	Adjusted Late	Exemptions Requested	Exemptions Approved	Time Corrections Approved	Compliance Calculated Incidents	Compliance Calculated Late	Response Time Compliance	Response Time Penalty	Consecutive Periods Out of Compliance Including Current Period	Out of Compliance Count for 12 Periods Including Current Period	
EOA 1 Metro	1	16	1	17	0	17	1	0	0	0	17	1	94.12%	\$0	0		0.94
	2	26	5	31	0	31	5	1	1	0	30	4	86.67%	\$1,000	1		0.87
	C3A	58	7	65	0	65	7	3	3	0	62	4	93.55%				0.94
	C3B	18	0	18	0	18	0	0	0	0	18	0	100.00%				1.00
	3	7	1	8	0	8	1	1	1	0	7	0	100.00%				1.00
	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	0	0	0	0	0	0	0	0	0	0	0					0.00
	6	0	0	0	0	0	0	0	0	0	0	0					0.00
	7	0	0	0	0	0	0	0	0	0	0	0					0.00
	8	0	0	0	0	0	0	0	0	0	0	0					0.00
10	1	0	1	0	1	0	0	0	0	0	1	0	100.00%				1.00
EOA 1 Rural	1	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0		1.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0		0.00
	C3A	2	0	2	0	2	0	0	0	0	2	0	100.00%				1.00
	C3B	2	0	2	0	2	0	0	0	0	2	0	100.00%				1.00
	3	0	0	0	0	0	0	0	0	0	0	0					0.00
	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	0	0	0	0	0	0	0	0	0	0	0					0.00
	6	0	0	0	0	0	0	0	0	0	0	0					0.00
	7	0	0	0	0	0	0	0	0	0	0	0					0.00
	8	0	0	0	0	0	0	0	0	0	0	0					0.00
10	0	0	0	0	0	0	0	0	0	0	0					0.00	
EOA 1 Suburban	2	3	0	3	0	3	0	0	0	0	3	0	100.00%	\$0	0		1.00
	C3A	11	1	12	0	12	1	1	1	0	11	0	100.00%				1.00
	C3B	1	0	1	0	1	0	0	0	0	1	0	100.00%				1.00
	3	0	0	0	0	0	0	0	0	0	0	0					0.00
	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	0	0	0	0	0	0	0	0	0	0	0					0.00
	6	0	0	0	0	0	0	0	0	0	0	0					0.00
	7	0	0	0	0	0	0	0	0	0	0	0					0.00
	8	0	0	0	0	0	0	0	0	0	0	0					0.00
	10	1	0	1	0	1	0	0	0	0	1	0	100.00%				1.00
EOA 1 Urban	1	2	0	2	0	2	0	0	0	0	2	0	100.00%	\$0	0		1.00
	2	24	2	26	0	26	2	1	1	1	25	0	100.00%	\$0	0		1.00
	C3A	3	0	3	0	3	0	0	0	0	3	0	100.00%				1.00
	C3B	0	0	0	0	0	0	0	0	0	0	0					0.00
	3	5	0	5	0	5	0	0	0	0	5	0	100.00%				1.00
	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	0	0	0	0	0	0	0	0	0	0	0					0.00
	6	0	0	0	0	0	0	0	0	0	0	0					0.00
	7	0	0	0	0	0	0	0	0	0	0	0					0.00
	8	0	0	0	0	0	0	0	0	0	0	0					0.00
10	0	0	0	0	0	0	0	0	0	0	0					0.00	
EOA 1 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0		0.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0		0.00
	C3A	0	0	0	0	0	0	0	0	0	0	0					0.00
	C3B	0	0	0	0	0	0	0	0	0	0	0					0.00
	3	0	0	0	0	0	0	0	0	0	0	0					0.00
	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	0	0	0	0	0	0	0	0	0	0	0					0.00
	6	0	0	0	0	0	0	0	0	0	0	0					0.00
	7	0	0	0	0	0	0	0	0	0	0	0					0.00
	8	0	0	0	0	0	0	0	0	0	0	0					0.00
10	0	0	0	0	0	0	0	0	0	0	0					0.00	
EOA 1	1	15	4	19	1	18	4	4	4	0	14	0	100.00%	\$0	0		1.00
	2	31	7	38	0	38	7	3	3	0	35	4	88.57%	\$1,000	2		0.89
	C3A	44	8	52	0	52	8	5	5	0	47	3	93.62%				0.94
	C3B	13	3	16	0	16	3	1	1	0	15	2	86.67%				0.87
	3	11	2	13	0	13	2	1	1	0	12	1	91.67%				0.92



Kern County - Hall Ambulance Response Compliance and Penalty

Period: Feb 2025

Report Status: FINAL

EOA 2 Metro	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 2 Rural	1	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0		1.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0		0.00
	C3A	2	0	2	0	2	0	0	0	0	2	0	100.00%				1.00
	C3B	1	0	1	0	1	0	0	0	0	1	0	100.00%				1.00
	3	0	0	0	0	0	0	0	0	0	0	0					0.00
EOA 2 Suburban	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	0	0	0	0	0	0	0	0	0	0	0					0.00
	6	0	0	0	0	0	0	0	0	0	0	0					0.00
	7	0	0	0	0	0	0	0	0	0	0	0					0.00
	8	0	0	0	0	0	0	0	0	0	0	0					0.00
EOA 2 Urban	1	7	0	7	0	7	0	0	0	0	7	0	100.00%	\$0	0		1.00
	2	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0		1.00
	C3A	6	0	6	0	6	0	0	0	0	6	0	100.00%				1.00
	C3B	0	0	0	0	0	0	0	0	0	0	0					0.00
	3	0	0	0	0	0	0	0	0	0	0	0					0.00
EOA 3 Metro	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	0	0	0	0	0	0	0	0	0	0	0					0.00
	6	0	0	0	0	0	0	0	0	0	0	0					0.00
	7	0	0	0	0	0	0	0	0	0	0	0					0.00
	8	8	1	9	0	9	1	0	0	0	9	1	88.89%				0.89
EOA 3 Rural	10	0	0	0	0	0	0	0	0	0	0	0					0.00
	1	6	1	7	1	6	1	1	1	1	5	0	100.00%	\$0	0		1.00
	2	0	1	1	0	1	1	1	0	0	1	1	0.00%	\$1,000	2		0.00
	C3A	16	2	18	0	18	2	1	1	0	17	1	94.12%				0.94
	C3B	6	0	6	0	6	0	0	0	0	6	0	100.00%				1.00
EOA 3 Suburban	3	1	0	1	0	1	0	0	0	1	0	100.00%					1.00
	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	0	0	0	0	0	0	0	0	0	0	0					0.00
	6	0	0	0	0	0	0	0	0	0	0	0					0.00
	7	0	0	0	0	0	0	0	0	0	0	0					0.00
EOA 3 Urban	8	0	0	0	0	0	0	0	0	0	0	0					0.00
	10	3	0	3	0	3	0	0	0	0	3	0	100.00%				1.00
	1	29	4	33	0	33	4	2	2	0	31	2	93.55%	\$0	0		0.94
	2	56	5	61	1	60	5	3	3	0	57	2	96.49%	\$0	0		0.96
	C3A	79	11	90	0	90	11	9	9	0	81	2	97.53%				0.98
EOA 3 Metro	C3B	13	1	14	0	14	1	1	1	0	13	0	100.00%				1.00
	3	23	2	25	0	25	2	2	2	0	23	0	100.00%				1.00
	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	1	0	1	0	1	0	0	0	0	1	0	100.00%				1.00
	6	18	5	23	0	23	5	0	0	0	23	5	78.26%				0.78
EOA 3 Rural	7	35	3	38	0	38	3	0	0	0	38	3	92.11%				0.92
	8	0	0	0	0	0	0	0	0	0	0	0					0.00
	10	1	0	1	0	1	0	0	0	0	1	0	100.00%				1.00
	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0		0.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0		0.00
EOA 3 Suburban	C3A	0	0	0	0	0	0	0	0	0	0	0					0.00
	C3B	0	0	0	0	0	0	0	0	0	0	0					0.00
	3	0	0	0	0	0	0	0	0	0	0	0					0.00
	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	0	0	0	0	0	0	0	0	0	0	0					0.00
EOA 3 Urban	6	0	0	0	0	0	0	0	0	0	0	0					0.00
	7	0	0	0	0	0	0	0	0	0	0	0					0.00
	8	0	0	0	0	0	0	0	0	0	0	0					0.00
	10	0	0	0	0	0	0	0	0	0	0	0					0.00
	1	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0		1.00
EOA 3 Metro	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0		0.00
	C3A	0	0	0	0	0	0	0	0	0	0	0					0.00
	C3B	0	0	0	0	0	0	0	0	0	0	0					0.00



Kern County - Hall Ambulance Response Compliance and Penalty

Period: Feb 2025

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EOA 4 Urban	2	15	11	26	1	25	11	8	8	1	17	2	88.24%	\$1,000	1	0.88
	C3A	47	9	56	0	56	9	6	6	2	50	1	98.00%			0.98
	C3B	13	1	14	0	14	1	1	1	0	13	0	100.00%			1.00
	3	2	1	3	0	3	1	1	1	0	2	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
	10	1	3	4	0	4	3	0	0	3	4	0	100.00%			1.00
EOA 4 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 8 Metro	1	36	26	62	0	62	26	20	20	0	42	6	85.71%	\$5,000	4	0.86
	2	64	24	88	0	88	24	16	16	1	72	7	90.28%	\$0	0	0.90
	C3A	144	30	174	0	174	30	20	20	1	154	9	94.16%			0.94
	C3B	39	11	50	0	50	11	9	9	0	41	2	95.12%			0.95
	3	30	3	33	0	33	3	1	1	0	32	2	93.75%			0.94
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	5	0	5	0	5	0	0	0	0	5	0	100.00%			1.00
	6	16	3	19	0	19	3	0	0	0	19	3	84.21%			0.84
	7	68	10	78	0	78	10	0	0	0	78	10	87.18%			0.87
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 8 Rural	1	3	0	3	0	3	0	0	0	0	3	0	100.00%	\$0	0	1.00
	2	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0	1.00
	C3A	6	1	7	0	7	1	1	1	0	6	0	100.00%			1.00
	C3B	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	10	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 8 Suburban	1	16	3	19	0	19	3	3	3	0	16	0	100.00%	\$0	0	1.00
	2	42	2	44	0	44	2	0	0	0	44	2	95.45%	\$0	0	0.95
	C3A	36	6	42	0	42	6	3	3	0	39	3	92.31%			0.92
	C3B	7	2	9	0	9	2	1	1	1	8	0	100.00%			1.00
	3	6	0	6	0	6	0	0	0	0	6	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	10	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 8 Urban	1	19	4	23	0	23	4	4	4	0	19	0	100.00%	\$0	0	1.00
	2	14	6	20	1	19	6	3	3	0	16	3	81.25%	\$1,000	1	0.81
	C3A	41	4	45	0	45	4	3	3	0	42	1	97.62%			0.98
	C3B	14	1	15	0	15	1	1	1	0	14	0	100.00%			1.00
	3	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00



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EOA 8 Wilderness	10	0	1	1	0	1	1	0	0	1	1	0	100.00%			1.00
	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	C3A	1	2	3	0	3	2	0	0	1	3	1	66.67%			0.67
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
8	0	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 9 Metro	1	24	4	28	0	28	4	3	3	0	25	1	96.00%	\$0	0	0.96
	2	26	14	40	0	40	14	6	6	1	34	7	79.41%	\$1,000	1	0.79
	C3A	65	8	73	0	73	8	7	7	1	66	0	100.00%			1.00
	C3B	19	3	22	0	22	3	3	3	0	19	0	100.00%			1.00
	3	11	2	13	0	13	2	2	2	0	11	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00	
EOA 9 Rural	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	C3A	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 9 Suburban	1	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00
	2	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0	1.00
	C3A	6	1	7	0	7	1	1	1	0	6	0	100.00%			1.00
	C3B	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 9 Urban	1	11	2	13	0	13	2	1	1	0	12	1	91.67%	\$0	0	0.92
	C3A	15	1	16	0	16	1	1	1	0	15	0	100.00%			1.00
	C3B	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	3	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
	10	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 9 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00



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	7	0	0	0	0	0	0	0	0	0	0	0						0.00	
	8	0	0	0	0	0	0	0	0	0	0	0						0.00	
	10	0	0	0	0	0	0	0	0	0	0	0						0.00	
EOA 11 Metro	1	52	13	65	0	65	13	6	6	2	59	5	91.53%	\$0	0			0.92	
	2	68	8	76	0	76	8	3	3	1	73	4	94.52%	\$0	0			0.95	
	C3A	194	13	207	0	207	13	8	8	1	199	4	97.99%					0.98	
	C3B	83	4	87	0	87	4	4	4	0	83	0	100.00%					1.00	
	3	16	0	16	0	16	0	0	0	0	16	0	100.00%					1.00	
	4	0	0	0	0	0	0	0	0	0	0	0						0.00	
	5	0	0	0	0	0	0	0	0	0	0	0						0.00	
	6	0	1	1	0	1	1	0	0	0	0	1	1	0.00%					0.00
	7	1	0	1	0	1	0	0	0	0	0	1	0	100.00%					1.00
	8	0	0	0	0	0	0	0	0	0	0	0	0					0.00	
10	2	1	3	0	3	1	0	0	0	1	3	0	100.00%					1.00	
EOA 11 Rural	1	3	0	3	0	3	0	0	0	0	3	0	100.00%	\$0	0			1.00	
	2	3	0	3	0	3	0	0	0	0	3	0	100.00%	\$0	0			1.00	
	C3A	6	0	6	0	6	0	0	0	0	6	0	100.00%					1.00	
	C3B	2	0	2	0	2	0	0	0	0	2	0	100.00%					1.00	
	3	2	0	2	0	2	0	0	0	0	2	0	100.00%					1.00	
	4	0	0	0	0	0	0	0	0	0	0	0						0.00	
	5	0	0	0	0	0	0	0	0	0	0	0						0.00	
	6	0	0	0	0	0	0	0	0	0	0	0						0.00	
	7	0	0	0	0	0	0	0	0	0	0	0						0.00	
	8	0	0	0	0	0	0	0	0	0	0	0						0.00	
10	0	0	0	0	0	0	0	0	0	0	0						0.00		
EOA 11 Suburban	1	5	0	5	1	4	0	0	0	0	4	0	100.00%	\$0	0			1.00	
	2	6	0	6	0	6	0	0	0	0	6	0	100.00%	\$0	0			1.00	
	C3A	15	0	15	0	15	0	0	0	0	15	0	100.00%					1.00	
	C3B	1	0	1	0	1	0	0	0	0	1	0	100.00%					1.00	
	3	1	0	1	0	1	0	0	0	0	1	0	100.00%					1.00	
	4	0	0	0	0	0	0	0	0	0	0	0						0.00	
	5	0	0	0	0	0	0	0	0	0	0	0						0.00	
	6	0	0	0	0	0	0	0	0	0	0	0						0.00	
	7	0	0	0	0	0	0	0	0	0	0	0						0.00	
	8	5	0	5	0	5	0	0	0	0	5	0	100.00%					1.00	
10	0	0	0	0	0	0	0	0	0	0	0						0.00		
EOA 11 Urban	1	6	0	6	0	6	0	0	0	0	6	0	100.00%	\$0	0			1.00	
	2	10	0	10	0	10	0	0	0	0	10	0	100.00%	\$0	0			1.00	
	C3A	9	2	11	0	11	2	1	1	1	10	0	100.00%					1.00	
	C3B	7	0	7	0	7	0	0	0	0	7	0	100.00%					1.00	
	3	0	0	0	0	0	0	0	0	0	0	0						0.00	
	4	0	0	0	0	0	0	0	0	0	0	0						0.00	
	5	0	0	0	0	0	0	0	0	0	0	0						0.00	
	6	0	0	0	0	0	0	0	0	0	0	0						0.00	
	7	0	0	0	0	0	0	0	0	0	0	0						0.00	
	8	0	0	0	0	0	0	0	0	0	0	0						0.00	
10	0	0	0	0	0	0	0	0	0	0	0						0.00		
EOA 11 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0			0.00	
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0			0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0						0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0						0.00	
	3	0	0	0	0	0	0	0	0	0	0	0						0.00	
	4	0	0	0	0	0	0	0	0	0	0	0						0.00	
	5	0	0	0	0	0	0	0	0	0	0	0						0.00	
	6	0	0	0	0	0	0	0	0	0	0	0						0.00	
	7	0	0	0	0	0	0	0	0	0	0	0						0.00	
	8	0	0	0	0	0	0	0	0	0	0	0						0.00	
10	0	0	0	0	0	0	0	0	0	0	0						0.00		
OUT OF SERVICE AREA	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0			0.00	
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0			0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0						0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0						0.00	
	3	0	0	0	0	0	0	0	0	0	0	0						0.00	
4	0	0	0	0	0	0	0	0	0	0	0						0.00		



Zone	Priority	Compliance Reporting 2025/03/01 - 2025/03/31											Compliance Period Reporting for repetitive non-compliance		Out of Compliance Count for 12 Periods Including Current Period		
		On Time	Late	Total Incidents	Do Not Count	Adjusted Total Incidents	Adjusted Late	Exemptions Requested	Exemptions Approved	Time Corrections Approved	Compliance Calculated Incidents	Compliance Calculated Late	Response Time Compliance	Response Time Penalty		Consecutive Periods Out of Compliance Including Current Period	
EOA 1 Metro	1	12	3	15	0	15	3	1	1	1	14	1	92.86%	\$0	0	0.93	
	2	28	3	31	0	31	3	2	2	0	29	1	96.55%	\$0	0		0.97
	C3A	58	3	61	0	61	3	2	2	0	59	1	98.31%				0.98
	C3B	17	2	19	0	19	2	1	1	0	18	1	94.44%				0.94
	3	8	1	9	0	9	1	0	0	0	9	1	88.89%				0.89
	4	0	0	0	0	0	0	0	0	0	0	0					0.00
	5	0	0	0	0	0	0	0	0	0	0	0					0.00
	6	0	0	0	0	0	0	0	0	0	0	0					0.00
	7	0	0	0	0	0	0	0	0	0	0	0					0.00
	8	0	0	0	0	0	0	0	0	0	0	0					0.00
10	1	0	1	0	1	0	0	0	0	0	1	0	100.00%			1.00	
EOA 1 Rural	1	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00	
	2	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0	1.00	
	C3A	5	0	5	1	4	0	0	0	0	4	0	100.00%			1.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00	
	3	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0	0				0.00		
EOA 1 Suburban	1	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00	
	2	7	0	7	0	7	0	0	0	0	7	0	100.00%	\$0	0	1.00	
	C3A	11	0	11	0	11	0	0	0	0	11	0	100.00%			1.00	
	C3B	3	0	3	0	3	0	0	0	0	3	0	100.00%			1.00	
	3	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	8	3	1	4	0	4	1	0	0	0	4	1	75.00%			0.75	
10	0	0	0	0	0	0	0	0	0	0	0				0.00		
EOA 1 Urban	2	12	5	17	0	17	5	2	2	1	15	2	86.67%	\$1,000	1	0.87	
	C3A	4	0	4	0	4	0	0	0	0	4	0	100.00%			1.00	
	C3B	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00	
	3	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	1	1	2	0	2	1	0	0	0	2	1	50.00%			0.50	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0	0				0.00	
	10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 1 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00	
	3	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 2 Metro	1	21	6	27	0	27	6	2	2	0	25	4	84.00%	\$1,000	1	0.84	
	2	23	9	32	0	32	9	7	7	0	25	2	92.00%	\$0	0	0.92	
	C3A	52	2	54	0	54	2	0	0	1	54	1	98.15%			0.98	
	C3B	11	0	11	0	11	0	0	0	0	11	0	100.00%			1.00	
	3	4	1	5	0	5	1	0	0	0	5	1	80.00%			0.80	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	10	0	0	0	0	0	0	0	0	0	0	0				0.00	



Kern County - Hall Ambulance Response Compliance and Penalty

Period: Mar 01 2025 to Mar 31 2025

Report Status: FINAL

EOA 2 Rural	1	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0	1.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 2 Suburban	1	8	0	8	2	6	0	0	0	0	6	0	100.00%	\$0	0	1.00
	C3A	12	0	12	0	12	0	0	0	0	12	0	100.00%			1.00
	C3B	1	1	2	0	2	1	1	1	0	1	0	100.00%			1.00
	3	1	1	1	0	1	0	0	0	0	1	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	16	3	19	0	19	3	0	0	0	19	3	84.21%			0.84
	10	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 2 Urban	1	11	1	12	2	10	1	0	0	1	10	0	100.00%	\$0	0	1.00
	2	4	1	5	0	5	1	1	1	0	4	0	100.00%	\$0	0	1.00
	C3A	14	3	17	0	17	3	2	2	0	15	1	93.33%			0.93
	C3B	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	10	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 3 Metro	1	38	9	47	1	46	8	5	5	0	41	3	92.68%	\$0	0	0.93
	2	58	4	62	1	61	4	2	2	0	59	2	96.61%	\$0	0	0.97
	C3A	81	5	86	0	86	5	2	2	1	84	2	97.62%			0.98
	C3B	25	1	26	0	26	1	1	1	0	25	0	100.00%			1.00
	3	26	3	29	1	28	3	3	3	0	25	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	6	0	6	0	6	0	0	0	0	6	0	100.00%			1.00
	6	7	4	11	0	11	4	0	0	0	11	4	63.64%			0.64
	7	48	13	61	0	61	13	0	0	0	61	13	78.69%			0.79
	10	0	1	1	0	1	1	0	0	0	1	1	0.00%			0.00
EOA 3 Rural	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	10	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 3 Suburban	1	3	1	4	0	4	1	1	1	0	3	0	100.00%	\$0	0	1.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	10	0	0	0	0	0	0	0	0	0	0	0				0.00
Total	1	12	0	12	0	12	0	0	0	0	12	0	100.00%	\$0	0	1.00
	2	138	16	154	1	153	16	9	9	0	144	7	95.14%	\$0	0	0.95
	C3A	21	0	21	0	21	0	0	0	0	21	0	100.00%			1.00



Kern County - Hall Ambulance Response Compliance and Penalty

Period: Mar 01 2025 to Mar 31 2025

Report Status: FINAL

	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00			0.00
	10	1	0	1	0	1	0	0	0	0	0	1	0	100.00%			1.00		1.00	
EOA 9 Rural	1	0	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00		0.00	
	2	0	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00		0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	3	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	6	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	8	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	10	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
EOA 9 Suburban	1	8	1	9	0	9	1	1	1	1	0	8	0	100.00%	\$0	0	1.00		1.00	
	2	4	0	4	0	4	0	0	0	0	0	4	0	100.00%	\$0	0	1.00		1.00	
	C3A	7	0	7	0	7	0	0	0	0	0	7	0	100.00%			1.00		1.00	
	C3B	1	0	1	0	1	0	0	0	0	0	1	0	100.00%			1.00		1.00	
	3	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	6	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	8	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	10	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
EOA 9 Urban	1	8	2	10	0	10	2	2	2	0	8	0	100.00%	\$0	0	1.00		1.00		
	2	9	1	10	0	10	1	1	1	0	9	0	100.00%	\$0	0	1.00		1.00		
	C3A	12	1	13	0	13	1	1	1	0	12	0	100.00%			1.00		1.00		
	C3B	1	1	2	0	2	1	1	1	0	1	0	100.00%			1.00		1.00		
	3	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00		1.00		
	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	6	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	8	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	10	0	2	2	0	2	2	0	0	2	2	0	100.00%			1.00		1.00		
EOA 9 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00		0.00	
	2	0	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00		0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	3	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	6	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	8	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	10	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
EOA 11 Metro	1	61	3	64	0	64	3	1	1	1	63	1	98.41%	\$0	0	0.98		0.98		
	2	77	7	84	1	83	7	6	6	0	77	1	98.70%	\$0	0	0.99		0.99		
	C3A	193	19	212	0	212	19	14	14	0	198	5	97.47%			0.97		0.97		
	C3B	64	6	70	1	69	6	5	5	0	64	1	98.44%			0.98		0.98		
	3	8	2	10	0	10	2	2	2	0	8	0	100.00%			1.00		1.00		
	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	6	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00		1.00		
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	8	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	10	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
EOA 11 Rural	1	6	0	6	1	5	0	0	0	0	5	0	100.00%	\$0	0	1.00		1.00		
	2	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00		1.00		
	C3A	12	0	12	0	12	0	0	0	0	12	0	100.00%			1.00		1.00		
	C3B	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00		1.00		
	3	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	6	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
	8	2	5	7	0	7	5	0	0	0	7	5	28.57%			0.29		0.29		
	10	0	0	0	0	0	0	0	0	0	0	0	0				0.00		0.00	
11	11	0	11	0	11	0	0	0	0	11	0	100.00%	\$0	0	1.00		1.00			



Kern County - Hall Ambulance Response Compliance and Penalty

Period: Mar 01 2025 to Mar 31 2025

Report Status: FINAL

EOA	Station	1	2	3	4	5	6	7	8	9	10	11	12	Compliance %	Penalty	Penalty	Penalty	
EOA 11 Suburban	2	10	0	10	0	10	0	0	0	0	0	10	0	100.00%	\$0	0	1.00	
	C3A	17	0	17	0	17	0	0	0	0	0	17	0	100.00%			1.00	
	C3B	6	0	6	0	6	0	0	0	0	0	6	0	100.00%			1.00	
	3	2	0	2	0	2	0	0	0	0	0	2	0	100.00%			1.00	
	4	0	0	0	0	0	0	0	0	0	0	0	0			0.00		
	5	0	0	0	0	0	0	0	0	0	0	0	0			0.00		
	6	0	0	0	0	0	0	0	0	0	0	0	0			0.00		
	7	0	0	0	0	0	0	0	0	0	0	0	0			0.00		
	8	6	3	9	0	9	3	0	0	0	0	9	3	66.67%			0.67	
	10	1	0	1	1	0	0	0	0	0	0	0	0			0.00		
EOA 11 Urban	1	14	0	14	0	14	0	0	0	0	0	14	0	100.00%	\$0	0	1.00	
	2	3	0	3	0	3	0	0	0	0	0	3	0	100.00%	\$0	0	1.00	
	C3A	17	1	18	0	18	1	0	0	1	0	18	0	100.00%			1.00	
	C3B	4	0	4	0	4	0	0	0	0	0	4	0	100.00%			1.00	
	3	0	0	0	0	0	0	0	0	0	0	0	0			0.00		
	4	0	0	0	0	0	0	0	0	0	0	0	0			0.00		
	5	0	0	0	0	0	0	0	0	0	0	0	0			0.00		
	6	0	0	0	0	0	0	0	0	0	0	0	0			0.00		
	7	0	0	0	0	0	0	0	0	0	0	0	0			0.00		
	10	0	0	0	0	0	0	0	0	0	0	0	0			0.00		
EOA 11 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	2	0	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	3	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	10	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
OUT OF SERVICE AREA	1	0	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	2	0	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	3	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	10	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
MUTUAL AID GIVEN	1	0	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	2	0	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	3	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
	10	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
TOTAL:															\$4,000		140	131.27

EOA 1 Urban	1	2	1	3	0	3	1	0	0	0	3	1	66.67%	\$1,000	1
EOA 2 Suburban	2	5	1	6	0	6	1	0	0	0	6	1	83.33%	\$1,000	1



Kern County - Liberty Ambulance Response Compliance and Penalty

Period: Jan 2025

Report Status: In Progress with 89 calls in Working Status

Zone	Priority	Compliance Reporting 2025/01/01 - 2025/01/31											Compliance Period Reporting for repetitive non-compliance		Out of Compliance Count for 12 Periods Including Current Period	
		On Time	Late	Total Incidents	Do Not Count	Adjusted Total Incidents	Adjusted Late	Exemptions Requested	Exemptions Approved	Time Corrections Approved	Compliance Calculated Incidents	Compliance Calculated Late	Response Time Compliance	Response Time Penalty		
EOA 6 Metro	1	11	1	12	0	12	1	0	0	0	12	1	91.67%	\$0	0	0.92
	2	20	1	21	0	21	1	0	0	21	1	95.24%	\$0	0	0.95	
	C3A	33	5	38	0	38	5	0	0	38	5	86.84%			0.87	
	C3B	14	0	14	0	14	0	0	0	14	0	100.00%			1.00	
	3	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0				0.00		
EOA 6 Rural	1	7	0	7	0	7	0	0	0	7	0	100.00%	\$0	0	1.00	
	2	3	0	3	0	3	0	0	0	3	0	100.00%	\$0	0	1.00	
	C3A	3	2	5	0	5	2	0	0	5	2	60.00%			0.60	
	C3B	2	0	2	0	2	0	0	0	2	0	100.00%			1.00	
	3	1	0	1	0	1	0	0	0	1	0	100.00%			1.00	
	4	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0				0.00		
EOA 6 Suburban	1	9	1	10	0	10	1	0	0	10	1	90.00%	\$0	0	0.90	
	2	9	0	9	0	9	0	0	0	9	0	100.00%	\$0	0	1.00	
	C3A	25	1	26	0	26	1	0	0	26	1	96.15%			0.96	
	3	2	0	2	0	2	0	0	0	2	0	100.00%			1.00	
	4	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0				0.00	
	10	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 6 Urban	1	11	0	11	0	11	0	0	0	11	0	100.00%	\$0	0	1.00	
	2	12	1	13	0	13	1	0	0	13	1	92.31%	\$0	0	0.92	
	C3A	36	0	36	0	36	0	0	0	36	0	100.00%			1.00	
	C3B	16	0	16	0	16	0	0	0	16	0	100.00%			1.00	
	3	6	0	6	0	6	0	0	0	6	0	100.00%			1.00	
	4	0	0	0	0	0	0	0	0	0	0				0.00	
	5	1	0	1	0	1	0	0	0	1	0	100.00%			1.00	
	6	24	10	34	0	34	10	0	0	34	10	70.59%			0.71	
	7	2	0	2	0	2	0	0	0	2	0	100.00%			1.00	
	8	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0				0.00		
EOA 6 Wilderness	1	2	0	2	0	2	0	0	0	2	0	100.00%	\$0	0	1.00	
	2	4	0	4	0	4	0	0	0	4	0	100.00%	\$0	0	1.00	
	C3A	3	0	3	0	3	0	0	0	3	0	100.00%			1.00	
	3	1	0	1	0	1	0	0	0	1	0	100.00%			1.00	
	4	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0				0.00	
	10	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 7 Metro	1	40	5	45	0	45	5	1	1	44	4	90.91%	\$0	0	0.91	
	2	56	5	61	0	61	5	0	0	61	5	91.80%	\$0	0	0.92	
	C3A	118	6	124	0	124	6	0	0	124	6	95.16%			0.95	
	C3B	29	2	31	0	31	2	0	0	31	2	93.55%			0.94	
	3	8	0	8	0	8	0	0	0	8	0	100.00%			1.00	
	4	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0				0.00	
	6	40	27	67	0	67	27	0	0	67	27	59.70%			0.60	
	7	34	12	46	0	46	12	0	0	46	12	73.91%			0.74	
	8	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0				0.00		



Kern County - Liberty Ambulance Response Compliance and Penalty

Period: Jan 2025

Report Status: In Progress with 89 calls in Working Status

EOA 7 Rural	1	6	0	6	0	6	0	0	0	0	6	0	100.00%	\$0	0	1.00	
	2	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0	1.00	
	C3A	4	0	4	0	4	0	0	0	0	4	0	100.00%			1.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00	
	3	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0	0				0.00		
EOA 7 Suburban	1	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00	
	2	2	0	2	0	2	0	0	0	0	2	0	100.00%	\$0	0	1.00	
	C3A	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00	
	3	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0	0				0.00		
EOA 7 Urban	1	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0	1.00	
	2	2	0	2	0	2	0	0	0	0	2	0	100.00%	\$0	0	1.00	
	C3A	8	0	8	0	8	0	0	0	0	8	0	100.00%			1.00	
	C3B	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00	
	3	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00	
	8	0	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0	0				0.00		
EOA 7 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00	
	3	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0	0				0.00		
TOTAL:														\$0		45	42.88
EOA 6 Metro	3	3	1	4	0	4	1	0	0	0	4	1	75.00%			95.29%	
EOA 6 Suburban	C3B	7	7	1	8	0	8	1	0	0	8	1	87.50%				
EOA 6 Wilderness	C3B	2	2	1	3	0	3	1	0	0	3	1	66.67%				



Kern County - Liberty Ambulance Response Compliance and Penalty

Period: Feb 2025

Report Status: In Progress with 67 calls in Working Status

Zone	Priority	Compliance Reporting 2025/02/01 - 2025/02/28											Compliance Period Reporting for Repetitive non-Compliance		Out of Compliance Count for 12 Periods Including Current Period	
		On Time	Late	Total Incidents	Do Not Count	Adjusted Total Incidents	Adjusted Late	Exemptions Requested	Exemptions Approved	Time Corrections Approved	Compliance Calculated Incidents	Compliance Calculated Late	Response Time Compliance	Response Time Penalty		
EOA 6 Metro	1	18	4	22	0	22	4	2	2	2	20	0	100.00%	\$0	0	1.00
	2	12	1	13	0	13	1	0	0	1	13	0	100.00%	\$0	0	1.00
	C3A	51	2	53	0	53	2	0	0	0	53	2	96.23%			0.96
	C3B	11	1	12	0	12	1	0	0	0	12	1	91.67%			0.92
	3	3	1	4	0	4	1	0	0	0	4	1	75.00%			0.75
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	2	2	0	2	2	0	0	0	2	2	0.00%			0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 6 Rural	1	7	0	7	0	7	0	0	0	0	7	0	100.00%	\$0	0	1.00
	2	4	1	5	0	5	1	0	0	1	5	0	100.00%	\$0	0	1.00
	C3A	7	0	7	0	7	0	0	0	0	7	0	100.00%			1.00
	C3B	3	0	3	0	3	0	0	0	0	3	0	100.00%			1.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 6 Suburban	1	9	0	9	0	9	0	0	0	0	9	0	100.00%	\$0	0	1.00
	2	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00
	C3A	30	0	30	0	30	0	0	0	0	30	0	100.00%			1.00
	C3B	9	0	9	0	9	0	0	0	0	9	0	100.00%			1.00
	3	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 6 Urban	1	11	0	11	0	11	0	0	0	0	11	0	100.00%	\$0	0	1.00
	2	13	2	15	0	15	2	0	0	2	15	0	100.00%	\$0	0	1.00
	C3A	29	0	29	0	29	0	0	0	0	29	0	100.00%			1.00
	C3B	7	0	7	0	7	0	0	0	0	7	0	100.00%			1.00
	3	6	0	6	0	6	0	0	0	0	6	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	3	0	3	0	3	0	0	0	0	3	0	100.00%			1.00
	6	27	9	36	0	36	9	0	0	0	36	9	75.00%			0.75
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 6 Wilderness	1	2	0	2	0	2	0	0	0	0	2	0	100.00%	\$0	0	1.00
	2	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0	1.00
	C3A	7	0	7	0	7	0	0	0	0	7	0	100.00%			1.00
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 7 Metro	1	28	1	29	0	29	1	0	0	0	29	1	96.55%	\$0	0	0.97
	2	45	6	51	0	51	6	1	1	3	50	2	96.00%	\$0	0	0.96
	C3A	123	6	129	0	129	6	0	0	0	129	6	95.35%			0.95
	C3B	21	0	21	0	21	0	0	0	0	21	0	100.00%			1.00
	3	14	0	14	0	14	0	0	0	0	14	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
6	29	22	51	0	51	22	0	0	0	51	22	56.86%			0.57	
7	32	5	37	0	37	5	0	0	0	37	5	86.49%			0.86	



Kern County - Liberty Ambulance Response Compliance and Penalty

Period: Feb 2025

Report Status: In Progress with 67 calls in Working Status

EOA	1	2	3	4	5	6	7	8	9	10	11	12	Compliance %	Penalty	Penalty	Penalty
EOA 7 Rural	8	0	3	3	0	3	3	0	0	0	3	3	0.00%			0.00
	10	0	0	0	0	0	0	0	0	0	0	0				0.00
	1	3	0	3	0	3	0	0	0	0	3	0	100.00%	\$0	0	1.00
	2	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0	1.00
	C3A	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	C3B	3	0	3	0	3	0	0	0	0	3	0	100.00%			1.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 7 Suburban	1	2	0	2	0	2	0	0	0	0	2	0	100.00%	\$0	0	1.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	C3A	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00
	C3B	0	1	1	0	1	1	0	0	0	1	1	0.00%			0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 7 Urban	1	2	0	2	0	2	0	0	0	0	2	0	100.00%	\$0	0	1.00
	2	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00
	C3A	6	0	6	0	6	0	0	0	0	6	0	100.00%			1.00
	C3B	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
EOA 7 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
TOTAL:														\$0		45

40.69
90.43%



Kern County - Liberty Ambulance Response Compliance and Penalty

Period: Mar 2025

Report Status: In Progress with 93 calls in Working Status

Compliance Reporting 2025/03/01 - 2025/03/31															Compliance Period Reporting for Repetitive non-Compliance	
Zone	Priority	On Time	Late	Total Incidents	Do Not Count	Adjusted Total Incidents	Adjusted Late	Exemptions Requested	Exemptions Approved	Time Corrections Approved	Compliance Calculated Incidents	Compliance Calculated Late	Response Time Compliance	Response Time Penalty	Consecutive Periods Out of Compliance Including Current Period	Out of Compliance Count for 12 Periods Including Current Period
EOA 6 Metro	1	20	2	22	0	22	2	0	0	0	22	2	90.91%	\$0	0	0.91
	2	30	0	30	0	30	0	0	0	0	30	0	100.00%	\$0	0	1.00
	C3A	48	2	50	0	50	2	0	0	0	50	2	96.00%			0.96
	C3B	16	0	16	0	16	0	0	0	0	16	0	100.00%			1.00
	3	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 6 Rural	1	5	0	5	0	5	0	0	0	0	5	0	100.00%	\$0	0	1.00
	2	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00
	C3A	4	0	4	0	4	0	0	0	0	4	0	100.00%			1.00
	C3B	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 6 Suburban	1	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00
	2	11	1	12	0	12	1	0	0	0	12	1	91.67%	\$0	0	0.92
	C3A	27	0	27	0	27	0	0	0	0	27	0	100.00%			1.00
	C3B	6	0	6	0	6	0	0	0	0	6	0	100.00%			1.00
	3	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 6 Urban	1	12	2	14	0	14	2	1	1	1	13	0	100.00%	\$0	0	1.00
	2	35	3	38	0	38	3	0	0	0	38	3	92.11%	\$0	0	0.92
	C3A	32	0	32	0	32	0	0	0	0	32	0	100.00%			1.00
	C3B	8	0	8	0	8	0	0	0	0	8	0	100.00%			1.00
	3	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	6	27	19	46	0	46	19	0	0	0	46	19	58.70%			0.59
	7	5	0	5	0	5	0	0	0	0	5	0	100.00%			1.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 6 Wilderness	1	1	0	1	0	1	0	0	0	0	1	0	100.00%	\$0	0	1.00
	2	3	0	3	0	3	0	0	0	0	3	0	100.00%	\$0	0	1.00
	C3A	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	C3B	1	1	2	0	2	1	0	0	0	2	1	50.00%			0.50
	3	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 7 Metro	1	36	6	42	0	42	6	0	0	2	42	4	90.48%	\$0	0	0.90
	2	51	2	53	0	53	2	0	0	0	53	2	96.23%	\$0	0	0.96
	C3A	108	5	113	0	113	5	0	0	0	113	5	95.58%			0.96
	C3B	25	1	26	0	26	1	0	0	0	26	1	96.15%			0.96
	3	8	0	8	0	8	0	0	0	0	8	0	100.00%			1.00
	4	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00
	6	37	42	79	0	79	42	0	0	0	79	42	46.84%			0.47
	7	31	2	33	0	33	2	0	0	0	33	2	93.94%			0.94
	8	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0				0.00	



Kern County - Liberty Ambulance Response Compliance and Penalty

Period: Mar 2025

Report Status: In Progress with 93 calls in Working Status

EOA 7 Rural	1	0	0	0	0	0	0	0	0	0	0	0	0	0	\$0	0	0.00
	2	1	0	1	0	1	0	0	0	0	0	1	0	100.00%	\$0	0	1.00
	C3A	5	0	5	0	5	0	0	0	0	0	5	0	100.00%			1.00
	C3B	0	0	0	0	0	0	0	0	0	0	0	0				0.00
	3	0	0	0	0	0	0	0	0	0	0	0	0				0.00
	4	0	0	0	0	0	0	0	0	0	0	0	0				0.00
	5	0	0	0	0	0	0	0	0	0	0	0	0				0.00
	6	0	0	0	0	0	0	0	0	0	0	0	0				0.00
	7	0	0	0	0	0	0	0	0	0	0	0	0				0.00
	8	0	0	0	0	0	0	0	0	0	0	0	0				0.00
10	0	0	0	0	0	0	0	0	0	0	0	0				0.00	
EOA 7 Suburban	1	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00	
	2	3	0	3	0	3	0	0	0	0	3	0	100.00%	\$0	0	1.00	
	C3A	4	1	5	0	5	1	0	0	0	5	1	80.00%			0.80	
	C3B	3	0	3	0	3	0	0	0	0	3	0	100.00%			1.00	
	3	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0	0				0.00		
EOA 7 Urban	1	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00	
	2	4	0	4	0	4	0	0	0	0	4	0	100.00%	\$0	0	1.00	
	C3A	1	0	1	0	1	0	0	0	0	1	0	100.00%			1.00	
	C3B	2	0	2	0	2	0	0	0	0	2	0	100.00%			1.00	
	3	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0	0				0.00		
EOA 7 Wilderness	1	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	2	0	0	0	0	0	0	0	0	0	0	0		\$0	0	0.00	
	C3A	0	0	0	0	0	0	0	0	0	0	0				0.00	
	C3B	0	0	0	0	0	0	0	0	0	0	0				0.00	
	3	0	0	0	0	0	0	0	0	0	0	0				0.00	
	4	0	0	0	0	0	0	0	0	0	0	0				0.00	
	5	0	0	0	0	0	0	0	0	0	0	0				0.00	
	6	0	0	0	0	0	0	0	0	0	0	0				0.00	
	7	0	0	0	0	0	0	0	0	0	0	0				0.00	
	8	0	0	0	0	0	0	0	0	0	0	0				0.00	
10	0	0	0	0	0	0	0	0	0	0	0				0.00		
TOTAL:														\$0	0	41.79	

44

94.97%

9. Maddy Fund Request

MADDY FUND REQUEST

Continued Purchase of ReddiNet

Background

ReddiNet is a real-time, secure, web-based communication network that connects Kern County EMS providers, hospitals, emergency departments, and other Kern public safety agencies. It provides instant messaging, resource status tracking, hospital bed availability, and incident reporting features. This system enhances situational awareness and decision-making capabilities for Kerns emergency responders and healthcare professionals.

Importance of ReddiNet in our EMS System

1. Improved Communication and Coordination

- ReddiNet enables seamless, real-time communication between EMS units, hospitals, and emergency operations centers. This reduces delays in information sharing and ensures that all stakeholders are updated simultaneously.
- During mass casualty incidents or multi-agency responses, ReddiNet helps coordinate efforts by providing a unified communication platform that replaces fragmented and unreliable communication methods.

2. Efficient Resource Management

- The Kern EMS system relies heavily on knowing the availability of ambulances, medical personnel, and hospital resources. ReddiNet provides dynamic tracking of hospital bed capacity, ambulance status, and equipment availability.
- This facilitates efficient patient distribution and resource allocation, preventing hospital overcrowding and ensuring patients receive timely care.

3. Enhanced Patient Care

- By providing real-time updates on hospital capabilities, Kerns EMS providers can make informed decisions about destination choice for patients, leading to improved patient outcomes.
- The system allows rapid notification of hospitals about incoming patients, enabling better preparation for patient arrival and immediate treatment.

4. Support for Disaster and Mass Casualty Management

- In large-scale emergencies such as natural disasters, accidents, or pandemics, ReddiNet's integrated platform supports coordinated response across multiple agencies and jurisdictions.
- The system helps track multiple incidents simultaneously, prioritize resource allocation, and communicate critical information efficiently to manage the crisis effectively.

5. Documentation and Reporting

- ReddiNet logs communications and resource movements, creating an audit trail useful for post-incident analysis, quality improvement, and compliance with regulatory requirements.

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- Accurate documentation improves accountability and helps refine future emergency response plans.

6. Cost Efficiency and Reliability

- By improving resource utilization and reducing miscommunication, ReddiNet contributes to cost savings within EMS systems.
- Its secure, reliable network minimizes communication failures that can lead to errors or delays in patient care.

ReddiNet plays a pivotal role in Kern County's EMS systems by enhancing communication, coordination, and resource management. Its ability to provide real-time data and connectivity between EMS providers, hospitals, and emergency agencies significantly improves patient care and operational efficiency. As emergency response demands continue to grow in complexity, tools like ReddiNet are indispensable for ensuring effective, timely, and coordinated emergency medical services.

Recently, Kern has seen a withdrawal of funding from both the federal and state governments grant streams that has directly affected our ability to continue to cover the costs of ReddiNet that has been in use in our system for many years. The loss of ReddiNet would be catastrophic to the Kern County Public Health/EMS system.

Intent of Release of Maddy Funds

As approved by County Counsel, "The intent for releasing the discretionary Maddy funds by the county is to heighten, increase and improve, from the normal and customary base operations, the delivery of prehospital care to the people of Kern County. This would include programs, services, training, equipment and/or learning materials that would have a high likely hood to improve the Kern County EMS System of care from its normal and customary base operations. The requested item, service or training must benefit all EMS stakeholders, especially the community at large, in such a way that it improves the quality and delivery of prehospital care."

Therefore, Kern County Public Health/EMS is requesting the release of \$53,598, from Maddy Fund to cover the cost of ReddiNet for the next 12 months.

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10. Approval of Minutes

Meeting Minutes**KERN COUNTY EMERGENCY MEDICAL CARE ADVISORY BOARD (EMCAB)**

**Kern County Administrative Center
Board of Supervisors Chambers
1115 Truxtun Avenue
Bakersfield CA, 93301**

REGULAR MEETING**THURSDAY – May 8th, 2025****4:00 P.M.**

Call to Order – Jeff Flores Chair

Roll Call:

Supervisor Jeff Flores, Sheriff Youngblood, Orchel Krier, Scott Hurlbert, Dr. Franklin, Tyler Whitezell, John Surface, Dr. Lyon, Chief Albertson.

We have a quorum.

SALUTE TO FLAG – Dr. Lyon

Consent Agenda (CA):

All items listed with a “CA” are considered by program staff to be routine and non-controversial. The “CA” represents the consent agenda for the Board members of EMCAB. Consent items will be considered first and may be approved in one motion. If a member of the audience wishes to comment or ask questions regarding an item or items on the consent agenda, they may do so prior to a vote being taken on the consent agenda. A member of EMCAB may remove any item from the consent agenda and it will be considered in listed sequence with an opportunity for any member of the public to address EMCAB concerning the item before action is taken.

CA – 5) Annual Maddy Fund Report – RECEIVE AND FILE

CA – 6) Legislation Report – RECEIVE AND FILE

CA – 7) Annual APOT Report – RECEIVE AND FILE

CA – 8) Annual Ambulance Response Time Compliance – RECEIVE AND FILE

CA – 9) Annual EMCAB Agenda Summary - RECEIVE AND FILE

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CA-10) Annual EOA Reports - RECEIVE AND FILE

CA-11) Annual EMS System Report – RECEIVE AND FILE

CA-12) Annual EMCAB Member Report - RECEIVE AND FILE

No board or public comment.

Motion to Approve – Sheriff Youngblood

Second – Dr. Lyon

Motion Passes.

PUBLIC PRESENTATIONS

1) This portion of the meeting is reserved for persons to address the Board on any matter not on this Agenda but under the jurisdiction of the Board. Board members may respond briefly to statements made or questions posed. They may ask a question for clarification, make a referral to staff for factual information or request staff to report back to the Board at a later meeting. Also, the Board may take action to direct the staff to place a matter of business on a future agenda. **SPEAKERS ARE LIMITED TO TWO MINUTES. PLEASE STATE AND SPELL YOUR NAME BEFORE MAKING YOUR PRESENTATION.**

No public comment.

BOARD MEMBER ANNOUNCEMENTS OR REPORTS

2) Board Member Announcements or Reports:

On their own initiative, Board members may make an announcement or report on their own activities. They may ask a question for clarification, make a referral to staff, or take action to have staff place a matter of business on a future agenda. (Government Code Section 54954.2[a][2])

Comment – Deputy Chief Youngblood, introducing his alternate in the case of his absence naming Chief of Police Alex Ghazalpour of the city of Arvin.

EMERGENCY MEDICAL SERVICES PROGRAM REQUESTS

3) Managers' report – RECEIVE AND FILE

No board or public comment.

Motion to Approve – Sheriff Youngblood

Second – John Surface

Motion Passes.

4) APOT Task Force Report – RECEIVE AND FILE

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Director of Public Health Brynn Carrigan is called upon to report out, regarding APOT. Discussions are named fruitful and gaining participation with a 7% decrease in comparison of three months for overall APOT hours. The top five key challenges that are believed to be contributing to the APOT times in our county. 1.) Overuse of EMS and ER services, 2.) Limited resources and capacity issues within our hospitals, 3.) Ambulance overload in the ERs. 4.) Throughput and system inefficiencies with discharging patients, and 5.) 5150 and behavioral health strain that our hospitals ambulance companies are experiencing. Meeting with the APOT taskforce will continue while we work towards identifying objectives to address the challenges identified.

*No board or public comment.
Motion to Approve – Dr, Lyon
Second – Scott Hurlbert
Motion Passes.*

CA – 5) Annual Maddy Fund Report – RECEIVE AND FILE

CA – 6) Legislation Report – RECEIVE AND FILE

CA – 7) Annual APOT Report – RECEIVE AND FILE

CA – 8) Annual Ambulance Response Time Compliance – RECEIVE AND FILE

CA – 9) Annual EMCAB Agenda Summary - RECEIVE AND FILE

CA-10) Annual EOA Reports - RECEIVE AND FILE

CA-11) Annual EMS System Report – RECEIVE AND FILE

CA-12) Annual EMCAB Member Report - RECEIVE AND FILE

MATTERS FOR EXECUTIVE APPROVAL

CA-13) Review and Approval of February 13, 2025, Minutes – APPROVE

14) Adjournment:

The deadline for submitting public requests for the next EMCAB meeting is Thursday, July 31, 2025, at 5:00 PM to the EMS Program Manager.

Adjourn to Thursday, August 14, 2025, at 4:00 PM at the Kern County Administrative Center in the Kern County Board of Supervisors Chambers at 1115 Truxtun Avenue, Bakersfield, CA 93301 – ADJOURN

AMERICAN'S WITH DISABILITIES ACT

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(Government Code Section 54953.2)

The Board of Supervisors Chamber is accessible to persons with disabilities. Disabled individuals who need special assistance to attend or participate in a meeting of the Kern County Emergency Medical Care Advisory Board may request assistance at the Kern County Public Health at 1800 Mount Vernon Avenue, Bakersfield, 93306 or by calling (661) 321-3000. Every effort will be made to reasonably accommodate individuals with disabilities by making meeting materials available in alternative formats. Requests for assistance should be made at least three (3) working days in advance whenever possible.

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1800 Mt. Vernon Ave., Bakersfield, CA. 93306 | 661.321.3000 | www.kernpublichealth.com