Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
1.01	Standard & Objective met	Policy 1700 has recently been removed due to changes in structure. An updated Policy will be promulgated within 1 year. Policy 1760 will also be updated, although it is still in effect.	Prepare updated policies within 1 year.
1.02	Annual Implementation	QA program in County is ongoing – the CQI Committee meets on a bi-monthly basis and includes representation from all first responder organizations as well as hospitals, ambulance providers, medical directors and EMS Staff.	Continue providing leadership in effective QA for County personnel.
1.03	Standard & Objective met	Active committees in the Solano County EMS System include Physician's Forum, PCC/CQI, and Pre-TAC. We maintain a Health Consumer on the SEMSC Board of Directors.	No further action required.
1.04	Standard & Objective met	Solano County EMS has a contracted Medical Director who provides medical oversight & guidance for Solano County pre-hospital care providers. He participates in all committees (including the SEMSC Board) and actively review/promulgates all policies & protocols.	Note that this is a change from previous – the Health Officer is NOT the EMS Medical Director.
1.05	Annual Implementation	These were completed, and presented to SEMSC Board in March 1999.	Complete
1.06	Annual Implementation	1st revision presented here and annual updates will follow.	Annual updates will be submitted.
1.07	Annual Implementation	Solano County Trauma Plan currently being updated. Agreements with Contra Costa & Sacramento County EMS Agencies regarding utilization of their in-county trauma centers being executed.	Letters of agreement have been requested and should be received by year-end.
1.08	Standard & Objective met	This has been met.	No further Action required.
1.09	Long Range	Daily assessment of county medical facilities is accomplished via ReddiNet system. First Responder Fire Departments also accomplish periodic assessments.	This standard requires further work and will be addressed in each annual review.
1.10	Long Range	First responders in the Solano County EOA have inventory available for Special populations in the system. There is also a Bariatric unit for the transport of the morbidly obese. The response units have inventory for	This standard is met based on details provided in the "Progress" column.

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		pediatric, elderly & handicapped responses. Solano County utilizes the AT&T language services when necessary for non-English speaking persons.	
1.11	Annual	The SEMSC operates as an EOA with a contracted ambulance company. Additionally, it operates as a Public Private Partnership (PPP) between the ambulance company and four-city fire departments. The Ambulance Agreement & PPP are currently being re-negotiated.	This standard is met based on details provided in "Progress" column.
1.12	Annual	Solano County EMS prepares/reviews compliance data for ambulance and fire department response performance on a monthly basis. Also a process is in place to address and correct "unusual occurrences for ambulance and fire responses.	This standard is met based on details provided in "Progress" column.
1.13	Annual	Solano County has established "Base Hospital Agreements" with each of the hospitals within the County. Additionally, Solano County has several existing "standing committees" – SEMSC, PCC/CQI, Physicians' Forum & Pre-TAC (Pre-hospital Trauma Advisory Committee). These committees are designed to provide opportunity to evaluate, via group process, consensus on standards.	This standard is met based on details provided in "Progress" column.
1.14	Standard & Objective met	Policies/Procedures manual continually evaluated and updated as required.	This standard is met based on details provided in "Progress" column.
1.15	Standard & Objective met	Current "standing committees" consist of: Physician's Forum (meets monthly); PCC/CQI & Pre-TAC, which meet bimonthly on alternating months.	This standard is met based on details provided in "Progress" column.
1.16	Long Range	In addition to tobacco fund monies being received, additional funds are obtained via the Ambulance Contract (fines, franchise fee, etc) and the Public Private Partnership (PPP).	
1.17	Standard & Objective Met	This standard was met in 1999.	Review/evaluation on an annual basis.
1.18	Standard & Objective met	This standard continues to be met via the standing committees and the active QA program monitored by the Agency	
1.19	Annual	Solano has achieved the minimum standard for all sections except Part "C" (Dispatch protocols & Pre-arrival/Post-dispatch Instructions). Three (3) out	This is an ongoing effort, and due to budgetary

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		of Seven (&) PSAPs are using pre-arrival/post-dispatch instructions. The EMS Agency is currently working to attain centralized dispatch and system wide use of pre-arrival/post-dispatch instruction.	constraints regarding centralized dispatch, this should be a "long-range" objective.
1.20	Standard & Objective met	This objective has been recently re-evaluated and updated based on the new State-wide DNR policy.	
1.21	Standard & Objective Met	Policy 6160 was combined into Policy 6155 (effective 30 Nov 2009) and addresses determination of death.	
1.22	Standard & Objective met	This policy was updated on 10/21/2004.	
1.23	Standard & Objective met	Policy 7200 remains in effect (dated 1/1/96)	
1.24	Annual	All ALS providers in Solano County have current written agreements with the EMS Agency	This standard is met based on details provided in the "Progress" Column.
1.25	Annual	The EMS System in Solano County has evolved: 1. All of the hospitals are Paramedic Base Hospitals capable of providing physician directed on-line medical control when necessary. 2. The EMS Agency has a MOU with each of the Base Hospitals in Solano County. 3. Each ALS provider agency has a physician Medical Director who is capable of providing in-house medical direction. 4. All of the physician medical directors participate in the Physician's Forum Committee (meeting monthly) which provides medical guidance from the EMS Medical Director	This standard is met based on details provided in the "Progress" column.
1.26	Annual	Solano County EMS is currently revising & updating its Trauma Plan. The low volume of trauma patients in Solano County may sustain a Level III Trauma Center located in the county. Solano County falls within the catchment area of a Level I and Level II Trauma Center. The trauma triage algorithm was recently updated to redirect less severe trauma to the local	Solano County has letters of concurrence from Sacramento & Contra Costa Counties regarding utilization of their Trauma

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		hospitals and severe trauma to the appropriately closest trauma center. Additionally, the Bi-monthly Pre-TAC Committee evaluates & discusses Solano County Trauma Cases and determines appropriate treatment methodology, etc.	Facilities by Solano County in case of need. With these letters are on file, this standard should be considered closed
1.27	Long Range	All base hospitals in Solano County have undergone pediatric training and have appropriately sized equipment to deal with pediatric emergencies. Due to Solano County's close proximity to two Pediatric Trauma Centers, severe pediatric trauma is immediately taken to the appropriate center. The system paramedics must have PALS or PEPP training to maintain their accreditation to practice in Solano County. Pediatric trauma emergencies are also evaluated at the bi-monthly Pre-TAC Committee meeting.	
1.28	Annual	Solano County established an Exclusive Operating Area (EOA) for a single provider throughout the County, excluding the City of Vacaville (Health & Safety Code 1797.201 and 1797-224). After completing the competitive bidding process for an ambulance contract, Solano County is currently undergoing another contract negotiation for ambulance provider in the EOA.	
2.01	Standard & Objective met	In addition to on-going training for all of the provider agencies, each provider agency, on a rotating basis, provides a "Lessons Learned" briefing to members about a special event, issue or concern that is of interest to the Solano County EMS Provider community.	
2.02	Standard & Objective met	EMS programs continue to be reviewed & evaluated by the Pre-hospital Care Coordinator.	
2.03	Standard & Objective met	Program continues to be reviewed and updated as needed. Focus audits are performed by member organizations and results presented at the PCC/CQI Committee meeting.	
2.04	Annual	Three of seven PSAP currently provide some degree of pre-arrival instructions & post-dispatch instructions. All of the city police forces and Sheriffs' Office have AED, CPR and First Aid programs for their patrol	

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		officers. All of the Fire Districts serving Solano County have AED programs with these programs integrated into the system.	
2.05	Standard & Objective met	This standard continues to be met & objective achieved.	
2.06	Long range	All city police forces & Sheriff's Office have an AED, CPR & First Aid programs for their patrol officers. All of the Fire Districts serving Solano County have AED programs. These programs are integrated into the system. A number of the large employers have emergency response teams that provide care to injured or ill workers until EMS can arrive. A number of them have completed drills with the local fire departments within their jurisdictions. The companies which do have medical aid response teams follow the EMS protocols. The challenge is to identify businesses which do not have any emergency/medical trained teams or individuals and encourage their participation in the EMS System.	
2.07	Standard & Objective met	This standard continues to be met.	
2.08	Standard & Objective met	This standard continues to be met.	
2.09	Standard & Objective met	This standard continues to be met.	
2.11	Standard & Objective met	This standard continues to be met.	
2.12	Standard & Objective met	This standard continues to be met.	
2.13	Standard & Objective met	This standard continues to be met.	
3.01	Annual	Cell phones are in use by pre-hospital emergency personnel for communication with base hospitals, home base, etc. ALS protocols have been revised to allow more latitude for EMT-P determination of contact requirements.	This standard is met based on details provided in the "Progress" Column.

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
3.02	Annual	In addition to radios, ambulance crews have cell phones for contact with base hospitals, etc.	This standard is met based on details provided in the "Progress" Column.
3.03	Annual	All permitted emergency ambulances are required to have two-way radio communications with local hospitals. Ambulance crews also have cell phones available for two-way communication.	This standard is met based on details provided in the "Progress" Column.
3.04	Annual	No change to this standard. Solano County is in the research/planning phase for determining feasibility of Centralized Dispatch.	This should be changed to LONG RANGE Objective
3.05	Long Range	In addition to minimum standard already met, the hospitals have the ReddiNet (Rapid Emergency Digital Data Information Network) system available to provide communications among member organizations.	
3.06	Annual	The ReddiNet system is available to provide communications among all member organizations.	This standard is met based on details provided in the "Progress" Column.
3.07	Annual	(no change to this standard)	
3.08	Annual	(no change to this standard)	
3.09	Long Range	Solano County has established written guidelines in place to determine transport types. This is the Emergency Call Priority Classification System. It is designed to classify transports from BLS interfacility transfers through Critical Care Transport (CCT).	This standard is met based on details provided in the "Progress" column.
3.10	Annual	Solano County operates within an Exclusive Operating Area, with Public Private Partnership arrangements between the four PPP City members and the Ambulance Provider (approved by SEMSC). This arrangement provides for a single contracted ALS transport provider ensuring consistent 911 responses throughout the EOA. The Vacaville FD provides ALS Transport support to 911 calls within the City of Vacaville and its sphere of influence (Zone C).	This standard is met based on details provided in the "Progress" column.
4.01	Annual	Solano County operates within an Exclusive Operating Area (EOA) and PPP arrangement via the SEMSC. This arrangement provides for a single contracted ALS transport provider ensuring consistent 911 responses	This standard is met based on details provided in the "Progress" column.

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		throughout the EOA. The City of Vacaville, through Vacaville FD, provides city-wide 911 response within that city.	
4.02	Annual	The current method of licensure of Emergency Medical Transport Services exists through an ALS EOA Transport Contract. This contract contains provisions which are designed to promote compliance with overall system management and medical control and medical quality standards. In addition, there exists a County ordinance permitting the operation of emergency ambulance vehicles within the County. Monthly, response time performance statistics are generated by the EMS Agency. The exclusive ALS ambulance provider is held accountable for performance within the established performance standards. The EMS Agency also maintains and staffs one (1) FTE Prehospital Care Coordinator position that is responsible for investigation, follow-up and resolution of all unusual occurrences that are reported to the EMS Agency.	This standard is met based on details provided in the "Progress" column.
4.03	Annual	(refer to Standard 3.09) Solano County has established written guidelines in place to determine transport types. This is the Emergency Call Priority Classification System. It is designed to classify transports from BLS interfacility transfers through Critical Care Transport (CCT).	This standard is met based on details provided in the "Progress" column.
4.04	Annual	This standard is met and not an issue due to the EOA Contract. There is no ambulance rotation in the Solano EOA.	
4.05	Standards & Objectives met	This standard continues to be met.	
4.06	Annual	Monthly Physician's Forum meetings as well as bimonthly PCC/CQI & Pre-TAC Meetings are held. Additionally, necessary updates are provided via email, fax & US Mail, as required.	
4.07	Annual	(Refer to Standard 2.06). All city police forces & Sheriff's Office have an AED, CPR & First Aid programs for their patrol officers. All of the Fire Districts serving Solano County have AED programs. These programs are integrated into the system. A number of the large employers have emergency response teams that provide care to injured or ill workers until EMS can arrive. A number of them have completed drills with the local fire departments within	

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		their jurisdictions. The companies which do have medical aid response teams follow the EMS protocols. The challenge is to identify businesses which do not have any emergency/medical trained teams or individuals and encourage their participation in the EMS System.	
4.08	Standard & Objective met	This standard continues to be met.	
4.09	Standard & Objective met	This standard continues to be met.	
4.10	Standard & Objective met	This standard continues to be met.	
4.11	Long Range	There is no change from previous EMS Plan.	
4.12	Long Range	Solano County has participated in various local and state-wide exercises to evaluate the capabilities of the County EMS/OES System. This is an ongoing activity.	Request change in status to "annual" or "standards met" due to comments in "Progress" column.
4.13	Standard & Objective met	This standard continues to be met.	
4.14	Standard & Objective met	This standard continues to be met.	
4.15	Long Range	(See Standard 4.12)	
4.16	Standard & Objective met	This standard continues to be met.	
4.17	Standard & Objective met	This standard continues to be met.	
4.18	Annual	There is no change from previous EMS Plan	
4.19	Annual	Accomplished. The Solano Emergency Medical Services Cooperative (SEMSC) operates as an EOA with a contracted ambulance company. Additionally it operates as a Public Private Partnership (PPP) between the ambulances and four city fire departments (Benicia, Dixon, Fairfield & Vallejo).	
4.20	Annual	The EMS Agency employs the competitive bid process to award the SEMSC	

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		EOA Contract.	
4.21	Annual	The ALS EOA Contract is written to comply with Health & Safety Code. CCT and BLS transport companies have written agreements with the SEMSC. The following applies: 1. A mandatory written agreement to provide CCT and BLS emergency services and disaster/medical response; 2. An acceptance of conditions and compliance statement that the service shall adhere to all EMS Agency Medical Policy and Protocols; 3. A copy of the Agency's initial or revised QA plan for EMS Agency approval; and other administrative requirements for the permits process.	This standard is met based on details provided in the "Progress" column.
4.22	Annual	The EOA is in place and monitored routinely.	This standard is met based on details provided in the "Progress" column.
5.01	Long Range	Current status: Each of the hospitals in Solano County has a written agreement with the EMS Agency. David Grant Medical Center (military hospital) on Travis AFB is in the process of reviewing a written agreement with the EMS Agency. The EMS Agency has worked with each of the hospitals to have formal facility assessment using EMS Authority standards. The EMS Agency will work with the hospitals to continue to update the assessments of each hospital.	
5.02	Long range	Current status: In November 2007, the Trauma Triage Algorithm was evaluated and changed by the Physician Forum, lead by the EMS Medical Director. This change was the result of a detailed assessment of the trauma occurring in Solano County. (See policy 6105). The EMS Agency has worked closely with our hospital partners to help them obtain written agreements whenever needed to facilitate patients' needs.	
5.03	Annual	(See 5.02 above). Solano County's Trauma Plan is undergoing revision currently and should be ready for formal review in the very near future.	
5.04	Long range	Current Status: NorthBay Medical Center is certified as a Chest Pain Center.	Solano County is in the

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		They perform percutaneous coronary interventions (PCI) and cardiovascular surgery and are working to become a STEMI Receiving Center in the near future. The EMS Agency continues to work with them to achieve their goal. Solano County has a protocol for the use of 12-lead EKG in anticipation of the possibility of a chest pain center being certified in the County (see policy 6602). None of the other hospital facilities within Solano County have pursued any other advanced certification.	process of designating STEMI Receiving Centers in Sacramento and Contra Costa Counties to receive Solano EMS patients with STEMI directly from the field.
5.05	Long range	Current status: Each of the area hospitals has been active with the EMS Agency in planning for disasters. The EMS Agency has been the lead agency on a number of disaster drills to challenge the area hospital capabilities. In addition to the drills, the HRSA grants have allowed the EMS Agency to provide equipment such as surge capacity tents, portable heaters, outdoor kitchens, cots and other medical supplies which can be set up and used in the event of a disaster. Each of the area hospitals has used the drills to set up their equipment and prepare for a disaster.	
5.06	Long Range	Current status. Each of the local hospitals has an evacuation plan for their facility; the individual plans are not well integrated into the EMS System. This remains a challenge for EMS.	
5.07	Standard & Objective met	This standard continues to be met.	Base hospital agreements will be reviewed/updated as required within next calendar year.
5.08	Standard & Objective met	This standard continues to be met. The Solano County Trauma Plan is undergoing revision at this time and should be finalized within very near future. The Pre-TAC Committee, comprised of Trauma coordinators from area hospitals & out-of-area trauma centers meets on a bi-monthly basis to review cases and determine appropriate care requirements.	
5.09	Standard & Objective met	The Pre-TAC Committee, comprised of Trauma coordinators from area hospitals & out-of-area trauma centers meets on a bi-monthly basis to review cases and determine appropriate care requirements.	
5.10	Annual	Documentation of training in either pediatric advanced life support or	

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		equivalent course is a requirement for accreditation as an EMT-Paramedic in Solano County. Pediatric trauma is pre-designated to either Children's Hospital (Oakland) or UC Davis (Sacramento) by the field triage guidelines.	
5.11	Annual	This standard is still met by Policy 7300, Pediatric Emergency Medical Care and Critical Care System Guidelines. This policy will be reviewed by the Physician's Forum within next calendar year.	
5.12	Standard & Objective met	This standard continues to be met.	
5.13	Standard & Objective met	This standard continues to be met.	
5.14	Long range	NorthBay Medical Center is certified as a Chest Pain Center. They perform percutaneous coronary interventions (PCI) and cardiovascular surgery and are working to become a STEMI Receiving Center in the near future. With the chest pain center, the EMS Agency has adopted a new 12-lead EKG Policy and has been active in discussing how this may affect the system, providers, local area hospitals and out-of-county hospitals with agreements.	Solano County is in the process of designating STEMI Receiving Centers in Sacramento and Contra Costa Counties to receive Solano EMS patients with STEMI directly from the field.
6.01	Standard & Objective met	This standard continues to be met.	
6.02	Standard & Objective met	This standard continues to be met. Solano County is currently reviewing ePCR utilization to further enhance medical record review & coordination.	
6.03	Standard & Objective met	This standard continues to be met.	
6.04	Annual	At present, medical dispatching is not uniform throughout the County. Three of seven primary PSAPs utilize a modified system of pre-arrival instruction and emergency medical dispatch. Each of the systems utilizing pre-arrival instructions has a Quality Improvement Committee to evaluate calls on a quarterly basis.	
6.05	Standard &	This standard continues to be met.	

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
	Objective met		
6.06	Annual	The EMS Agency has an annual evaluation and reporting system which provides summary reports. The current committee system (Physician's Forum, PCC/CQI & Pre-TAC Committees) respond to community needs by using the summary reports provided by the EMS Agency. The process tends to be more reactive because we are looking at established data. As items arise, the committee process can evaluate and provide recommendations to the EMS Agency to enhance the local system as we move towards complying with all of the state guidelines.	
6.07	Standard & Objective met	This standard continues to be met.	
6.08	Annual	Quarterly meetings are held with the Solano Emergency Medical Services Cooperative (SEMSC). This is the unique shared governance system that Solano County has developed which has representatives of the County, Cities, Emergency Medical Providers and Hospitals. This Board also has special meetings as necessary given the needs of the EMS System.	
6.09	Standard & Objective met	This standard continues to be met.	
6.10	Annual	Solano County EMS has changed the trauma triage algorithm and re-evaluated the trauma program within the county. We receive regular trauma registry reports from the trauma centers which serve our county. Each of the trauma centers participates in the Pre-TAC committee. The committee evaluates those calls which fall outside the established trauma criteria bi-monthly. It also serves as an advisory body to the Physician's Forum Committee and the PCC/CQI committees in helping them develop new policies and procedures for the care of trauma victims.	
7.01	Long range	Solano County EMS maintains a public website which addresses issues raised in standard 7.01. The EMS Agency provides technical assistance and support to private and public agencies that are attempting to address objectives	

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		covered in this standard.	
7.02	Long range	In conjunction with EMS, 1. The contracted EOA Ambulance Provider and the Fire Departments perform periodic presentations to the public; 2. The Westfield Mall in Solano County hosts an annual event where ambulance, fire, CHP and air ambulance provide education topics to the public.	
7.03	Long range	Public Health, of which the EMS Agency is a part, promotes disaster preparedness and has activities in place. EMS participates in these events in conjunction with the County Office of Emergency Services (OES).	
7.04	Long range	There is no change to the standard.	
8.01	Annual	The EMS Agency has worked with OES to participate in all hazards disaster drills to test the capabilities of the medical response portion of the plan. There have been a number of issues brought to light (most notably, communication issues – with more training needed to increase the efficiency among all agencies). .	
8.02	Annual	The EMS Agency has worked with OES to participate in all hazards disaster drills to test the capabilities of the medical response portion of the plan. There have been a number of issues brought to light (most notably, communication issues – with more training needed to increase the efficiency among all agencies). The County has a HAZMAT team that will respond with EMS in the event of a toxic exposure. A number of the HAZMAT team members are locally accredited Paramedics. The County OES activates the team in event of need. The EMS Agency is currently working with OES and other community partners to develop a response plan in the event of a pandemic.	
8.03	Standard & Objective met	This standard continues to be met.	
8.04	Standard & Objective met	This standard continues to be met.	

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
8.05	Annual	Solano County EMS Agency at present does not have the resources or staffing to address the requirements of Standard 8.05. We are attempting to work toward this standard by slowly creating written procedures dealing with the distribution of disaster patients. Currently we use the ReddiNet to help distribute disaster patients within our region.	
8.06	Annual	The EMS Agency will use the ReddiNet system for local hospital needs assessments in the event of a disaster. We will also use RACES (Emergency HAM Radio network) to communicate with the hospital. The local hospital needs assessment and other vital information will be communicated to the local OES, then to be passed on to the Region II. Communication with Region II and State OES will be done via fax, cell phone, telephone, and if necessary, HAM radio.	
8.07	Annual	The EMS Agency currently does not have the resources or staffing to address the requirements of Standard 8.07. Solano County uses "White Fire 1" (154.280) and "White Fire 2" (154.265) to communicate in the event of a disaster.	
8.08	Long Range	Solano County EMS regularly participates in the local DMAT (Disaster Medical Assistance Teams) and the County Health Officer is an Alternate Regional Disaster Medical Health Coordinator. Solano County participates in Region II and they have a DMAT.	
8.09	Long range	Solano County EMS Agency received funds from HRSA Grants and has been able to purchase a cache of disaster supplies and station them at each of the hospitals within the county. The Agency has also developed disaster trailers which have been strategically placed in the county to respond to a disaster.	
8.10	Long range	There is no change to the standard. Solano County EMS includes a provision in the agreement with the exclusive ambulance provider so that they may be called upon for mutual aid in the event of a disaster.	
8.11	Long range	There is no change to the standard. Solano County has not designated any casualty collection points (CCPs). There are areas within the county that have been identified as possible CCPs.	
8.12	Long range	There is no change to the standard. No casualty collection points (CCPs)	

Standard	Current Status as noted in EMS PLAN	Progress	Objective/Comment on Status
		have been designated. Communication between CCPs would fall under the operations sections in ICS in the event of a disaster. Solano County EMS would work in conjunction with OES and use their radio cache to provide communication to a CCP.	
8.14	Long Range	Solano County EMS has been responsible to help the local hospitals plan for surge capacity response and this has helped integrate portions of the disaster plans. The drills that have been conducted have helped identify areas of concern for further training.	
8.15	Long Range	Solano County is using ReddiNet as an intra-hospital communication tool. Each of the hospitals within the county has been trained and is proficient at sending and receiving messages. The ReddiNet system also allows hospitals in our county to communicate with hospitals in surround counties. The EMS Agency has established limited procedures for using this tool.	
8.16	Long Range	Solano County EMS, in conjunction with OES and other partners have conducted at least 6 full-scale drills to evaluate disaster preparedness. Each of the drills has involved the use of disaster supplies purchased via HPP/HRSA grant funds. All of the partners have developed specific plans to address the weaknesses identified during each drill. In August 2008, the plans were implemented with a real-world fire disaster at Casa de Vallejo, an older/disabled retirement home in Vallejo. The County, in conjunction with the City of Vallejo, evacuated over 150 individuals. In addition to the evacuation, long term shelter had to be found, health care and serious mental health issues were managed.	
8.17	Standard & Objective met	This standard continues to be met.	
8.18	Annual	There is no change to this standard.	