

**Thurston County Medic One
Emergency Medical Services Council – Regular Meeting
Emergency Operations Center/ECC
January 15, 2013**

PRESENT: Margaret McPhee, Dr. Tom Fell, M. John Way, Karen Valenzuela, John Ricks, Roger McMaster, Greg Wright, Frank Kirkbride, Russ Hendrickson, John Christiansen, Stan Moon

GUESTS: John Carpenter, Lenny Greenstein, Mel Low, Dale Putnam, Janet Kastl, Betty Schultz, Steve Brooks

STAFF: Steve Romines, Fay Flanery, Cindy Hambly

- I. **CALL TO ORDER/ROLL CALL** – Chairman McPhee called the regular meeting of the Emergency Medical Services Council (EMSC) to order at 3:34 PM. Roll was recorded by staff.
- II. **APPROVAL OF AGENDA – MSC** (Valenzuela/Way) move to approve agenda.
- III. **PUBLIC PARTICIPATION** – Romines recognized Janet Kastl – Retiring after 35 years as Director of the Washington State EMS system. Romines expanded that Janet has been an integral part in the development of the EMS system in Washington State. Chair McPhee presented her with a plaque acknowledging her contribution and dedication to the system.
- IV. **REVIEW AND APPROVAL OF MINUTES**
 - A. EMS COUNCIL – December 18 2013 – **MSC** (Kirkbride/Hendrickson) move to approve.
 - B. OPERATIONS COMMITTEE – January Meeting Cancelled. (Informational Only)
- V. **COMMITTEE REPORTS**
 - A. OPERATIONS COMMITTEE – Wright reported no January 2014 meeting. He added that Karen Roger’s last meeting was December 2013 and Steve Langer is the new representative but was not able to attend and would like to request the meeting be moved back to 5:30, consensus was to keep the current meeting time..
 - B. WEST REGION EMS COUNCIL– Romines reported the annual conference will be held at the Great Wolf Lodge February 7, 8 & 9, 2014.
 - C. STAFF REPORT– Romines highlight on the staff report included in the packet;
 - Working to finalize the 4th quarter Business Plan report.
 - EMT graduation was on January 7, 2014 with 14 graduating students.
 - Annual levy projections – Romines expanded on the updated annual levy/revenue/expense projection worksheet showing the current projections for restoring the levy lid. He noted that the year for the restoration continues to move out as Medic One targets to under expend their annual expense budget. Extensive Council discussion followed.
- VI. **OLD BUSINESS –**
 - A. TRPC EMS System Report Steering Committee Recommendations – Kirkbride gave an overview of the TRPC recommendations that were discussed at last month’s meeting. He handed out a recommendation summary to help elaborate on and clarify the TRPC recommendation and asked the group to help the Steering Committee by deciding what recommendations they want to move forward on. He added the Steering Committee is requesting 2 additional members be added to support the Steering Committee efforts and tasks. Extensive Council questions and discussions followed surrounding the recommendation summary handout. Kirkbride concluded the Steering Committee will bring back additional clarification with recommendations to Council at the March or April meeting. Questions arose regarding adding EMSC meeting materials to the Medic One website, Council discussion followed with a **MSC** (Valenzuela/Kirkbride) to have staff update the Medic One website to add EMSC meeting information. Follow up discussions surrounding the TRPC Steering Committee work and recommendations ended with Chair McPhee requesting any/all questions or comments be sent to staff for collection.
 - B. EMSC Bylaw Modification, TRPC Recommendation – Chair McPhee requested to separate out the two issues of adding a new Citizen/Physician position and adding back the Lacey representative position to the EMS Council. She requested Council discussion. Extensive Council discussion followed. **MSC** (Valenzuela/Way) move to approve the proposed language in 4.1.C to add a 4th Citizen/Physician at-large position to the EMS Council. **MSC** followed (Kirkbride/Valenzuela) move to adopt change to bylaws article 4.1.A as proposed to add the City of Lacey position back to the EMS Council. Council discussion followed.

VII. NEW BUSINESS –

- A. Nominations Committee – Chair McPhee asked for volunteers to the Nominations Committee, hearing none, Chair McPhee appointed Roger McMaster and M. John Way, in addition Karen Valenzuela volunteered. Nominations committee will bring a report back in February with a vote in March.

VIII. PUBLIC PARTICIPATION – None

- IX. GOOD OF THE ORDER –** Romines gave a health line update reporting that after the 2 month spike in calls which resulted from repeat callers, the call volume is back to a normal cycle. In addition, Medic One received two thank you letters from Lacey Fire District citizens who both wanted to express gratitude to the EMS system for the rendering excellent patient care.

- X. ADJOURNMENT – MSC Meeting adjourned at 5:11 PM.**

EMS Council Meeting

Medic One/EMS, Staff Report, Feb 2014

Retiring medics: Steve Rowe, OFD; Jeff Bostick, TFD

EMS System Operational Review, TRPC as Process Project Manager, proposed at July meeting, recommending contract to BOCC. Signed by BOCC September 25, TRPC initiating, last session 12/19, contacting Chiefs/Com, Report 6/19 EMS Council meeting 3:30, presented, to EMS community for comment. Presentations: EMSC 6/19, Fire Commissioner/Chiefs Assoc 7/16, BOCC 8/7 (Medic One website, System Reports), comments due, EMS Council accepts 9/18, to BOCC, **Steering Committee working, EMSC agenda/minutes recommendation 4.4 approved to staff, Governance recommendation 4.3.1 approved by BOCC.**

EMS Key Performance Indicators (KPI) in final draft.

Protocol app (iphone/android) contract signed, started July 5, 2013, received and functional, EMS agencies notified. Medic One website modified to include app links and provider registry number lookup. Expanding to EMT course, completed.

2014 Budget and Business plan drafted presented to EMSC, 9/18 meeting, budget approved, to BOCC, approved. **2013 Business plan Q4 report finalizing.**

Medic hiring and oral exams. May 2013 closed with 44 new apps/5 retest oral, 9 pass written, 7 pass oral board. Next exam, closed: written **Nov 2013** closed with 29 applications/3 retest oral, 6 pass written, 6 pass oral, 6 on list.

NurseLine Criteria Based Dispatch Program, started December 11, 8AM, calls routed to Evergreen Hospital "Healthline," contract completed, implemented: 15 in August 2003, 14 September, 15 October, 15 November, 16 December, 11 January 2004, 13 February, 11 March, 8 April, 11 May, 7 June, 11 July, 8 Aug, 12 Sept, 8 Oct, 8 Nov, 13 Dec, 11 Jan 2005, 13 Feb, 12 Mar, 10 Apr, 11 May, 10 June; 11 July; 6 Aug; 4 Sept; 9 Oct; 5 Nov; 12 Dec; 14 Jan 2006; 11 Feb; 4 Mar; 14 Apr; 4 May; 9 June; 9 July; 11 Aug; 8 Sep; 7 Oct; 15 Nov; 6 Dec; 10 Jan; 12 Feb; 13 Mar; 7 Apr; 20 May; 15 June; 18 July; 10 Aug; 13 Sept; 8 Oct; 15 Nov; 11 Dec; Jan '08 11, 15 Feb, 10 Mar, 12 Apr, 14 May, 11 June, 14 July, 15 Aug; 22 Sept; 11 Oct; 14 Nov; 7 Dec. 5 Jan '09, 7 Feb, 6 Mar, 17 Apr, 7 May; 10 Jun; 17 Jul; 7 Aug; 10 Sep; 11 Oct; 15 Nov; 14 Dec; 11 Jan 2010; 7 Feb; 14 Mar; 10 Apr; 10 May, 16 Jun, 21 Jul, 18 Aug, 23 Sep, 14 Oct, 10 Nov, 16 Dec; 11 Jan 2011, Feb 15, Mar 24, Apr 19, May 20, Jun 10, July 21, Aug 14, Sep 17, Oct 15, Nov 10, Dec 21; 12 Jan 23, Feb 16, Mar 17, Apr 18, May 19, Jun 14, Jul 9 Aug 25, Sep 16, Oct 13, Nov 14, Dec 16; **Jan 13, Feb 9, Mar 9, Apr 14, May 5, June 14, July 10, Aug 12, Sep 11, Oct 27, Nov 17, Dec 12: Total to date= 1,589/124** (avg 12.8/month) Rate \$16.10/call

EMS Data 2013 (TCOMM source), 26,570 system call volume +558 calls, +2.1% (2012 data volume 26,012). ALS response time 7.6 minutes average countywide, 93% goals achieved, call volume 8,327, -349 calls, responses -4.0% (2012 response time 7.2 minutes, 94% of goals, 8,676 responses). BLS call volume 18,243, +907, +5.2% (2012 17,336) Countywide BLS average response time 6.7 minutes, all BLS. BLS TCOMM Data Warehouse report, final draft to Chiefs Association then Ops Committee, to Chiefs Assoc, approved to Ops, Ops approved, to EMSC 9/18> to 10/16 approved, posted on website, **updating for 2013.**

Medic Unit in vehicle EMS data system. Field implementation beginning. Tiberon connectivity quote returned, \$33,000 plus \$4,000 annual maintenance cost, approved, interface completed. AVL Tiberon interface issue identified, AVL in test environment, mobile gateway/AVL interface created, ER&R completed, AVL operational test-halted CAD software issue, rewrite. EMS Council approves EMS agency by agency supervisor QI access to SafetyPad, interface stable, AVL trial, Restart Jan 9 7 AM to end May 12, reviewing. Initiating BLS data system pilot with Tenino (*Strategic area*)

WATRAC Advisory Group member added, meeting 9/9, **next meeting 3/3**

TRAINING: average pass rate NR EMT exam = national 79%, WA state 85%, WR 90%, CR 93%, TC 93%
First Responder Course, 2012?

EMT Course 13-1 scheduled, Station 9-5, completed, 28 enrolled, 23 graduated 6/27

EMT Course 13-2 scheduled, Station 9-5, start 9/3, 18 enrolled, **14 completed** Dec 14, **Grad 1/7**

EMT Course 14-1 scheduled, Station 9-5, application closes 2/12

Instructor/Evaluator workshop completed

NIMS online training available at <http://training.fema.gov/EMIweb/IS/is700.asp>

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02/11/2014

Introduction

This *Legislative Update* will be updated weekly and emailed to the members of the EMS and Trauma Care Steering Committee and its sub-committees every week during the 2014 Legislative Session. This update is being provided for information purposes only and is provided at the request of the EMS and Trauma Care Steering Committee. This update is not intended to convey support or opposition on any issue. If you have any questions, please contact Les Myhre at (360) 236-2831.

For additional information regarding the 2014 Legislative Session and Washington Legislative bills being introduced, please go to: www.leg.wa.gov.

Important 2014 Session Cut-off Dates

1/13 First Day of Session.

2/7 Last day to read in committee reports in house of origin, except House fiscal committees and Senate Ways & Means and Transportation committees.

2/11 Last day to read in committee reports from House fiscal committees and Senate Ways & Means and Transportation committees in house of origin.

2/18 Last day to consider bills in house of origin (5 p.m.).

2/28 Last day to read in committee reports from opposite house, except House fiscal committees and Senate Ways & Means and Transportation committees.

3/3 Last day to read in opposite house committee reports from House fiscal committee and Senate Ways & Means and Transportation committees.

3/7 Last day to consider opposite house bills (5 p.m.) (except initiatives and alternatives to initiatives, matters necessary to implement budgets, amendments, differences, and business related to the interim or closing the session).

3/13 Sine Die -- Last day allowed for regular session under state constitution. The Governor has five (5) days, excluding Sundays, to take action on any bill passed by the Legislature, provided adjournment does not occur within those five (5) days.

Bill # Sponsor	Bill Title	Brief Description	Status
HB 1263 Rep Angel	Reducing the financial loss to emergency medical care and transportation services by ensuring direct payment for emergency transportation services	This legislation is another 2013 holdover bill to address the issue of direct payment for EMS transportation services by fire districts and departments.	Jan 13 By resolution, reintroduced and retained in present status. Rules Committee relieved of further consideration. Referred to Health Care & Wellness Rules Committee relieved of further consideration. Referred to Health

			Care & Wellness
HB 2105 Rep Hawkins	Promoting transparency in government by requiring public agencies with governing bodies to post their agendas online in advance of meetings	This bill will require a public agency to post its agenda online at least 24 hours in advance of a meeting. Agency is not required if it employs five or fewer full time employees. Failure to post the agenda does not in-validate the actions taken at the meeting. The agency may modify the agenda prior to approval of the agenda at the meeting.	Passed House Government Operations and Elections Committee. Rules. Jan 30 Placed on second reading by Rules Committee.
HB 2109 Rep Haler, et al	Family practice Residencies	Allocates \$6.6 million GFS to the University of Washington (UW) School of Medicine (SOM) to expand family practice residencies in rural and underserved communities in the state.	Dec 5 – Prefiled for introduction Jan 13-First reading referred to Higher Education Jan 17- Work session and public hearing House Committee on Higher Education at 8:00am Jan 22- Executive action taken Higher Education-Majority 1st substitute passed Jan 27- Referred to Appropriations
SHB 2121 Rep Pollet	Requires Open Public Meetings Act Training.	This bill will require training of elected members of a governing body of a public agency on the Open Public Meetings Act. Requires other agency officials to be trained in records retention and preservation. The Attorney General may provide information, technical assistance and training on the provisions of the Public Records Act.	Jan 21 Executive action taken in the House Committee on Government Operations & Elections at 10:00 AM. (Committee Materials) GOE - Executive action taken by committee. GOE - Majority; 1st substitute bill be substituted, do pass. (View 1st Substitute) (Majority Report) Minority; do not

			<p>pass. (Minority Report) Jan 27 Passed to Rules Committee for second reading. Feb 7 Placed on second reading by Rules Committee.</p>
<p>HB 2127 Rep Van De Wege, and Tharinger</p>	<p>Relating to the authority of medical program directors</p>	<p>Adds clarifying language to RCW 18.71.212 about the authority of the physician Medical Program Directors (MPD's) in the State. The bill's language clarifies that MPD's may not independently impose restrictions on the certification or employment status of certified EMS personnel. The language prevents the MPD from doing so if the Department of Health (Department) has not imposed any restrictions on the individual's certification. The language is consistent with current practice.</p> <p>Currently, MPD's cannot take formal disciplinary action against a certified EMS provider's credential. The MPD may only provide counseling to certified EMS personnel on clinical practice issues. The MPD must consult with the Department on significant clinical practice matters prior to taking any actions. Only the Department may take formal disciplinary action against a certified EMS provider's credential.</p>	<p>Dec 18- Prefiled for introduction Jan 13-Public hearing in House Cmte on Health Care & Wellness at 1:30pm Jan 23-Executive action taken in House Committee on Health Care & Wellness at 10:00am, bill passed Jan 28-Passed to Rules Committee for second reading Jan 30-Placed on second reading by Rules Committee Feb 5 Rules suspended. Placed on Third Reading. Third reading, passed; yeas, 98; nays, 0; absent, 0; excused, 0 IN THE SENATE Feb 6 First reading, referred to Health Care.</p>
<p>HB 2255 Rep Van De Wege</p>	<p>Ambulance seat belt notification, air bags and driver training</p>	<p>Adds a new section to RCW 46.37 to include a lighted message alarm to notify the driver that a passenger has not fastened his or her seat belt. An audible alarm may also be included with the visual alarm. Airbags must meet federal regulations. Seat belt alarms are prohibited from activating until the ambulance is put in drive gear. Any ambulance manufactured after the effective date of the act must comply and current warning systems may be modified on any ambulance manufactured before the effective date of this act. Any ambulance manufactured after the effective date of this act must have air bags that meet federal regulations in the cab of the ambulance and cannot be modified, blocked, or turned off.</p>	<p>Jan 15-1st reading, referred to Transportation Jan 20-Public hearing in House Cmte on Transportation Jan 23-Executive session in House Cmte on Transportation but no action taken Jan 29-Scheduled for executive session in House Cmte on Transportation but no</p>

		The Washington Fire Chiefs and the Washington State Patrol are directed to design a program that trains emergency personnel on driving ambulances using driver simulators. A written report to the Legislature is due by December 1, 2014, which includes the design, administration requirements and funding options for the program.	<p>action taken</p> <p>Jan 30- Executive action taken on Transportation</p> <p>Jan 31- TR Executive action taken by committee</p> <p>TR - Majority; 1st substitute bill be substituted, do pass. (View 1st Substitute) (Majority Report)</p> <p>Minority; do not pass. (Minority Report)</p> <p>Feb 5 Passed to Rules Committee for second reading</p> <p>Feb 7 Placed on second reading by Rules Committee.</p>
<p>HB 2278 Rep Takko</p>	Utility service charge for ambulance services	This bill authorizes fire districts to enter into contracts with a contiguous city for the furnishing of ambulance services by the city to the fire district by imposing a utility service charge which would be equal to the amount imposed by a city on similar city developed residential property.	<p>Jan 22 Public hearing in the House Committee on Local Government at 8:00 AM. (Committee Materials)</p> <p>Feb 3 Executive action taken in the House Committee on Local Government at 1:30 PM. (Committee Materials)</p> <p>LG - Executive action taken by committee.</p> <p>LG - Majority; do pass. (Majority Report)</p> <p>Minority; do not pass. (Minority Report)</p> <p>Feb 5 Passed to Rules Committee for second reading</p> <p>Feb 7 Placed on second reading by Rules Committee.</p>
<p>HB 2315 Rep Orwal, et al Companion</p>	Concerning suicide prevention	Amends RCW 43.70.442 - Suicide Assessment, Treatment, and Management Training; and chapter 71.24 RCW - Community Mental Health Services Act; and adds a new section to chapter	<p>Jan 22 – Public hearing in the House Committee Health Care & Wellness at 8:00am</p>

<p>SB 6468</p>		<p>43.70 RCW.Substantive amendments and additions include: Adding the following professions to those that are already required to undertake approved continuing education in suicide assessment, treatment and management every six years: Chiropractors, Naturopaths, Licensed practical nurses, registered nurses, and advanced registered nurse practitioners, Osteopathic physicians and surgeons and Pas, Physical therapists and physical therapist assistants, Medical Pas. Requiring that medical physicians undertake approved continuing education in suicide assessment, treatment and management every eight years. Clarifying reporting periods for specified continuing education. Requiring that the department and disciplinary authorities update the model list of training programs in suicide assessment, treatment and management every two years, and endeavor to include content specific to veterans, in consultation with the Department of Veterans Affairs. Requiring the department to develop a statewide plan for suicide prevention in consultation with a steering committee with specified membership. The plan must be completed no later than November 15, 2015. Requiring DSHS (to the extent funds are available) implement a pilot consultation program to support primary care providers in assessment, treatment and management of adults with mental and behavioral health disorders, emphasizing timely case consultation between primary care providers and psychiatric specialists.</p>	<p>Feb 3-Scheduled for executive session in House Health Care & Wellness at 6:00pm Feb 5-Scheduled for executive session in House Health Care & Wellness at 8:00am HCW - Executive action taken by committee. HCW - Majority; 1st substitute bill be substituted, do pass. (View 1st Substitute) (Majority Report) Feb 6 Public hearing and executive action taken in the House Appropriations Subcommittee on Health & Human Services at 10:00 AM. (Committee Materials) APPH - Executive action taken by committee. APPH - Majority; do pass HCW 14 bill proposed by Health Care & Wellness</p>
<p>HB 2428 Rep S. Hunt</p>	<p>Re-imposition of EMS Levy at Lower Rate</p>	<p>HB 2428 would provide for a taxing district (including fire districts) to re-impose a future EMS levy at a lower rate than the previous levy with a simple majority vote. NOTE: This is a levy that was not a renewal but was re-imposed at a later date.</p>	<p>Jan 17 First reading, referred to Finance (Not Officially read and referred until adoption of Introduction report). (View Original Bill) Jan 28 Public hearing in the House Committee on Finance at 8:00 AM Feb 11 Executive action taken in the House Committee on Finance at 8:00 AM.</p>

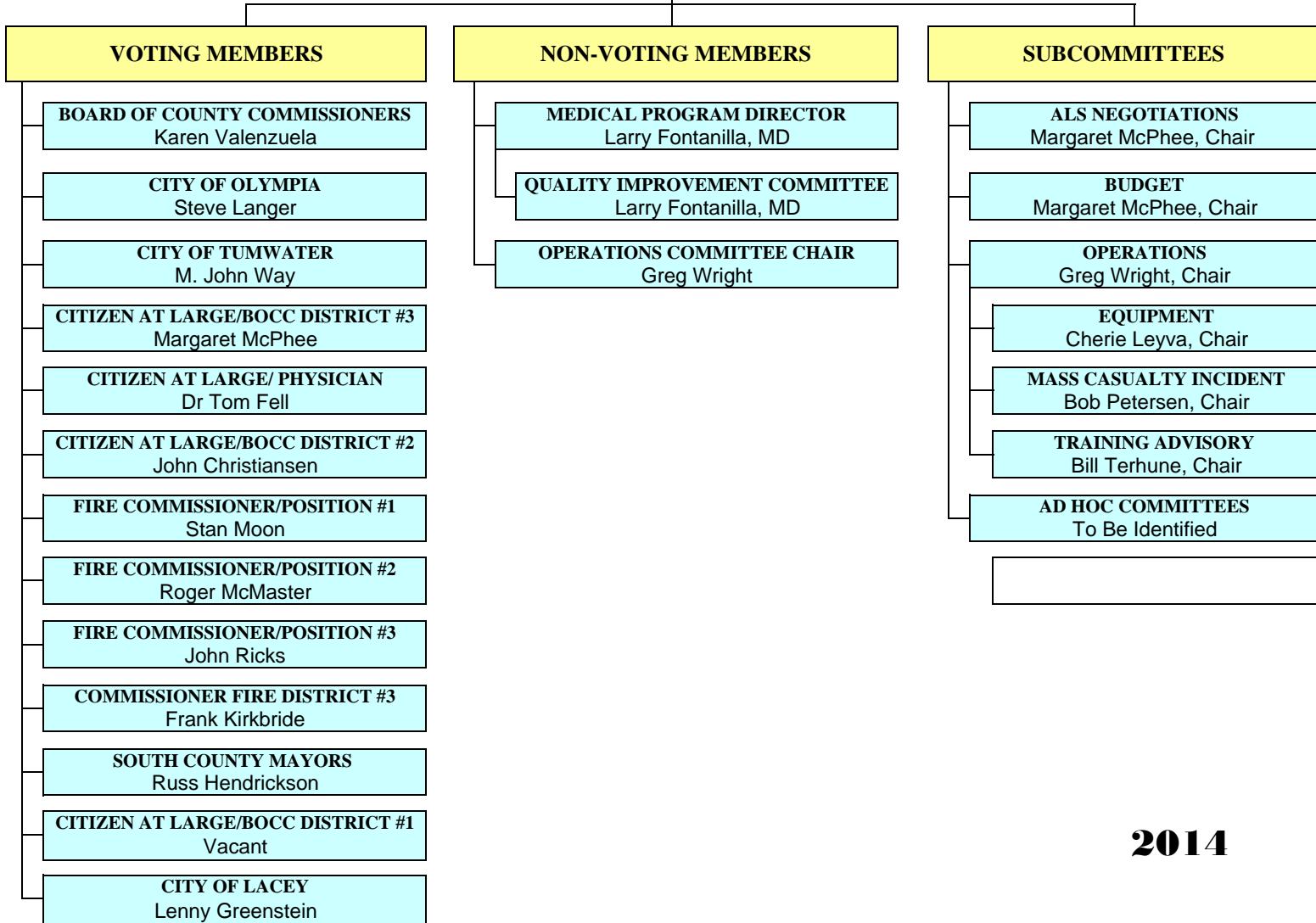
			<p>(Committee Materials)</p> <p>FIN - Executive action taken by committee.</p> <p>FIN - Majority; 1st substitute bill be substituted, do pass. (Majority Report)</p> <p>Minority; do not pass</p>
<p>HB 2576 Rep Reykdal</p>	<p>Establishing a mandatory occupational disease exposure reporting requirement for firefighters.</p>	<p>This bill would require the Department of Labor and Industries to commence rule making to require the reporting of all hazardous exposure suffered in the course of employment by firefighters. At a minimum, the rules must require that the records be kept/maintained for at least 61 months following the last date of the firefighter's employment.</p>	<p>Jan 21 First reading, referred to Labor & Workforce Development (Not Officially read and referred until adoption of Introduction report). (View Original Bill)</p> <p>Jan 31 Public hearing in the House Committee on Labor & Workforce Development at 1:30 PM. (Committee Materials)</p> <p>Feb 5 Executive action taken in the House Committee on Labor & Workforce Development at 3:30 PM. (Committee Materials)</p> <p>LWD - Executive action taken by committee.</p> <p>LWD - Majority; 1st substitute bill be substituted, do pass. (Majority Report)</p> <p>Minority; do not pass.</p> <p>Passed to Rules Committee for second reading.</p> <p>Feb 7 Placed on second reading by</p>

			Rules Committee
HB 2611 Rep Johnson, et al	Relating to encouraging training for medical students, nurses, and medical technicians and assistants to work with adult patients with developmental disabilities	Subject to funding, the bill requires the Washington Student Achievement Council (WSAC) to develop a grant program. The goal of the grant program is to improve care for adults with developmental disabilities by promoting specialized training for students in medical, nursing, and osteopathic schools, as well as “special and technical care students at technical schools.” WSAC may administer the grants in consultation with the Department of Health. Grants will be made to educational institutions to support programs designed to train students in the unique care needs of this population group.	Jan 22- First reading, referred to Higher Education Jan 31-Public hearing in House Cmte on Higher Education at 8:00am Feb 4 – Executive action taken in the House Committee on Higher Education at 10:00 AM. (Committee Materials) HE - Executive action taken by committee. HE - Majority; do pass Feb 5 Referred to Appropriations
SB 6229 Sen Mullet, et al	Concerning use of epinephrine autoinjectors by good samaritans	Adds a new section to chapter 70.54 RCW. This includes extending immunity from civil liability for any personal injury that results from the use of epinephrine auto-injectors in an emergency setting. New Section. Sec. 2 also requires the epinephrine auto-injector user to call 911 or its local equivalent as soon as possible after the emergency use of the auto-injector, and assure proper follow-up data is made available as requested by emergency medical service or other health care providers	Jan 17-1 st reading, referred to Health Care Feb 4-Scheduled for public hearing in Senate Cmte on Health Care at 10:00am Feb 6 Scheduled for executive session in the Senate Committee on Health Care at 10:00 AM.
SB 6306 Sen Braun	Use tax exemption on out-of-state purchases	This bill would provide some fire districts with a “use” tax exemption when purchasing vehicles from out of state. The ex-emption would apply to fire districts with an annual budget of less than \$1,000 per square mile served	Jan 20 Senate Government Operations Committee.
SB 6431 Sen Hargrove, et al	Concerning assistance for schools in implementing youth suicide prevention activities	Expands RCW 28A.300.288 by specifying youth suicide prevention activities and appropriating funds for these activities. Substantive additions include: Requires the Office of the Superintendent of Public Instruction (OSPI) to work with state agencies and community partners to assist schools in implementing youth suicide prevention activities, which may include: Training for school staff, students, parents, and community members in recognizing and responding to signs of suicide; Partnering with local youth suicide prevention	Jan 24-1 st reading, referred to Early Learning & K-12 Education Feb 5-Scheduled for Public Hearing in Senate Comte on Early Learning & K-12 Education at 1:30pm Feb 6 Executive action taken in the Senate Committee on Early Learning & K-12

		<p>coalitions; Responding to communities in crisis after a suicidal behavior. NOTE: The department of Health is not specifically named as a participant. OSPI shall prioritize funding for the above activities as follows: Schools identified by Department of Health as situated in a high-risk area or serving high-risk populations; tribal communities; Communities with a high percentage of students who speak English as a second language. \$430,000 is appropriated to OSPI for these activities.</p>	<p>Education at 5:30 PM. (Committee Materials) Feb 7 EDU - Majority; 1st substitute bill be substituted, do pass. (View 1st Substitute) (Majority Report) Passed to Rules Committee for second reading</p>

**THURSTON COUNTY MEDIC ONE
EMERGENCY MEDICAL SERVICES (EMS) SYSTEM**

EMERGENCY MEDICAL SERVICES COUNCIL
Margaret McPhee, Chair (elected)



2014

**THURSTON COUNTY MEDIC ONE
EMERGENCY MEDICAL SERVICES COUNCIL**

BYLAWS

Amended 3 February 2014

ARTICLE I. NAME

The name of the organization shall be known as the Thurston County Emergency Medical Services Council.

ARTICLE II. PURPOSE

To provide efficient and effective prehospital emergency medical services throughout Thurston County.

ARTICLE III. SCOPE

The Thurston County Emergency Medical Services (EMS) Council:

- 3.1. Shall review and evaluate the provision of the publicly funded emergency medical service system, known as "MEDIC ONE" for the residents of Thurston County.
- 3.2. Shall advise the Thurston County Commissioners regarding the development, policies, and planning for the system.
 - A. Identify needs and priorities including concerns of citizens and governmental agencies.
 - B. Recommend funding sources and priorities in support of the system.
- 3.3. Shall make recommendations to the County Commissioners in the following areas:
 - A. The planning process for the provision of emergency medical services provided by the system.
 - B. Annual budget and budget amendments, including the means of financing.
 - C. All purchase contracts in excess of \$15,000.
 - D. All intergovernmental agreements and personal services contracts.
 - E. All non-budgeted expenditures in excess of \$1,000.
 - F. The compliance of the Medical Program Director with his/her contract.
- 3.4. In addition to the above, the EMS Council has the authority:
 - A. To provide representation and advice to the West Region Emergency Medical Services and Trauma Care Council in the development of emergency medical services for the West Region.
 - B. To provide public education and information on public emergency medical services.
 - C. To review and evaluate the system's development as it relates to the emergency health care of citizens in Thurston County.

ARTICLE IV. COMPOSITION AND MEMBERSHIP

- 4.1. The composition of the Thurston County Emergency Medical Services Council, appointed by the Board of County Commissioners is as follows:
 - A. One Elected Official or designee, or designated alternate from each ALS contracting agency and Elected Official or designee, or designated alternate from the City of Lacey, as recommended by the Lacey City Council .
 - B. One County Commissioner or designee, or designated alternate.

- C. Four Citizens-at-Large consisting of: one from each of the County Commission Districts, plus one whom shall be a physician from any County Commissioner District.
 - D. One Elected Official or designee, or designated alternate representing all cities or towns such as Yelm, Rainier, Tenino and Bucoda, none of whom shall be from an agency as described in Article IX.4.1.A.,as recommended by the South County Mayors.
 - E. One Fire Commissioner from each of the County Commission Districts, not one of whom shall be from an agency as described in Article IX.4.1.A.,nor from the same Fire District, as recommended by the Thurston County Fire Commissioners' Association.
 - F. The Medical Program Director or designated alternate (non-voting).
 - G. The Operations Committee Chairperson or designated alternate (non-voting).
- 4.2. The term of appointment is to be determined by the recommending entity except for the citizen-at-large positions whose term will be in two-year increments.
- 4.3. The Board of County Commissioners may declare any position vacant if the member or alternate have three consecutive unexcused absences. The entity providing the member shall be asked to nominate a replacement.
- 4.4. The designated alternate(s) must be defined by letter to the EMS Council by the appointing entity.

ARTICLE V. OFFICERS

- 5.1. The officers shall be Chairperson and Vice-chairperson elected by the majority of the Council for a one-year term.
- 5.2. The Chairperson shall preside at all regular and special meetings of the Council. The Vice-chairperson shall preside when Chairperson is absent.
- 5.3. In the absence of the Chairperson and Vice-chairperson, the Council will appoint an acting Chairperson.
- 5.4. Any vacancies in the above offices shall be filled by a special election of the EMS Council.
- 5.5. Nomination of officers will take place annually in the month of February or as soon thereafter as is possible.
- 5.6. Election of officers will take place annually in the month of March. Term of office shall begin in March.

ARTICLE VI. MEETINGS

- 6.1. Meetings of the full body shall occur no less than once each quarter.
- 6.2. The fiscal year shall be the same as the calendar year.
- 6.3. A majority of voting positions currently filled and present at the meeting shall constitute a quorum of the body.
- 6.4. Special meetings may be called by the Chairperson or majority of the members consistent with requirements of the Open Public Meetings Act.

6.5. Robert's Rules of Order shall prevail, unless otherwise specified in the bylaws.

ARTICLE VII. EMS COUNCIL STANDING AND AD HOC COMMITTEES

- 7.1. Nominating Committee: Three Council members, appointed by the Chairperson by December of each year, to nominate willing and capable Council members as candidates for the offices of Chairperson and Vice chairperson.
- 7.2. Budget Committee: Three Council members, appointed by the Chairperson by April of each year shall review and make recommendations on the annual budget to the EMS Council, and assist in making presentations to the Board of County Commissioners concerning the EMS budget.
- 7.3. Advanced Life Support (ALS) Contract Negotiations Committee: Three Council members appointed by the Chairperson will assist in negotiating contracts between Medic One and the providers of ALS service for the ensuing year(s), and present contract recommendations to the EMS Council for approval prior to submission to the Board of County Commissioners. The members of the ALS Contract Negotiations Committee shall not be representatives of an agency as described in Article IV.4.1.A.
- 7.4. The EMS Council Chairperson, with the approval of the Council, may appoint ad hoc committees and/or task forces as deemed necessary.

ARTICLE VIII. OPERATIONS COMMITTEE

- 8.1. An Operations Committee, which shall be advisory to the EMS Council, is hereby established.
- 8.2. The Committee membership shall include persons vested with decision making authority, as follows:
 - A. One ALS Chief Officer representative or designee, or designated alternate from each ALS contracting agency.
 - B. BLS Chief Officer representative(s) or designee, or designated alternate as appointed annually by the Thurston County Association of Fire Chiefs, in an amount proportionate to the total of the ALS Chief Officer representation, none of whom shall be representatives of an agency as described in Article IV.4.1.A.
 - C. One representative or designated alternate of Providence St. Peter Hospital, as appointed by Hospital Administration.
 - D. One representative or designated alternate of Capital Medical Center, as appointed by Hospital Administration.
 - E. The Director or designee, or designated alternate of the Department of Communications.
 - F. One representative or designated alternate of Law Enforcement, as collaboratively selected by the chief officers of the Thurston County Law Enforcement entities.
 - G. The Medical Program Director or designee, or designated alternate.
 - H. One Paramedic representative or designated alternate as selected by the Paramedic Association.
 - I. One representative or designated alternate of the Thurston County-Licensed Private Ambulance Services, as collaboratively selected by the currently licensed private ambulance services.
 - J. One representative or designated alternate of local Air Ambulance Service, as designated by the air ambulance agency.

- 8.3. The term of appointment is to be determined by the recommending entity.
- 8.4. Designated alternates must be defined by letter to the Operations Committee by the appointing entity.
- 8.5. The Committee Officers will be in accordance with Article V.
- 8.6. Meetings shall be in accordance with Article VI.
- 8.7. The Chairperson, with approval of the Committee, may appoint ad hoc committees and/or task forces as deemed necessary.
- 8.8. The primary responsibility of the Operations Committee is to coordinate the provision of the Advanced Life Support (ALS) and Basic Life Support (BLS) services. The function of the Operations Committee shall be as follows:
 - A. Development of operational priorities, policies and procedures for system development, programming, operations, for adoption by the EMS Council.
 - B. To review and recommend for approval the Medic One proposed budget to the EMS Council.
- 8.9. The EMS Council may declare any position of the Operations Committee vacant if the member or designee, or designated alternate have three consecutive unexcused absences. The entity providing the member shall be asked to nominate a replacement.

ARTICLE IX. AMENDMENTS

Bylaws may be changed upon recommendation of the EMS Council to the Board of Commissioners. Amendments will be by County Resolution.

Adopted: 01/16/79

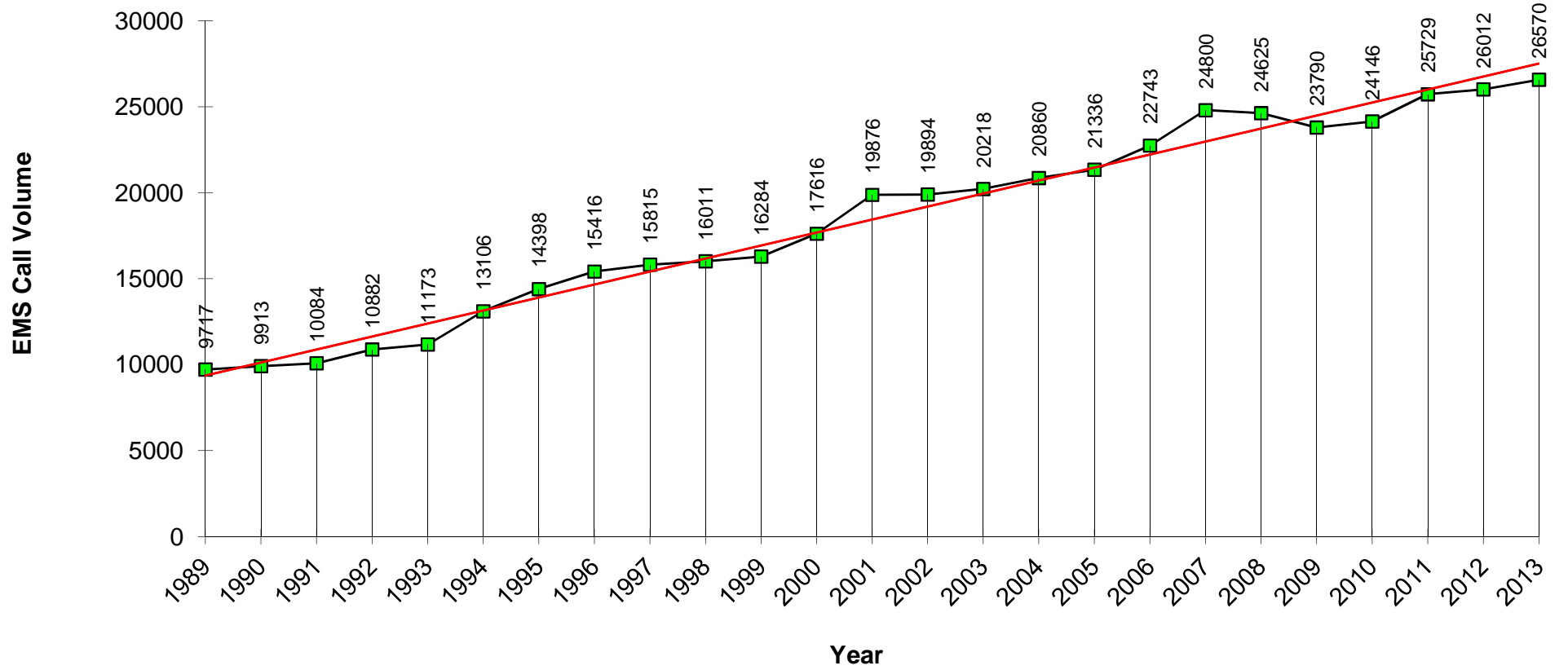
Amended: 07/22/80, 07/14/81, 10/09/84, 02/16/88, 01/03/95, 05/11/98, 01/07/02, 08/11/03, 01/12/04, 05/12/08, 04/07/09, **02/03/2014**

Edited: 06/19/02, to recognize Fire District 1 representation to EMS Council; to recognize FD1/FD14 merger; 03/01/06 to update West Region EMS information;

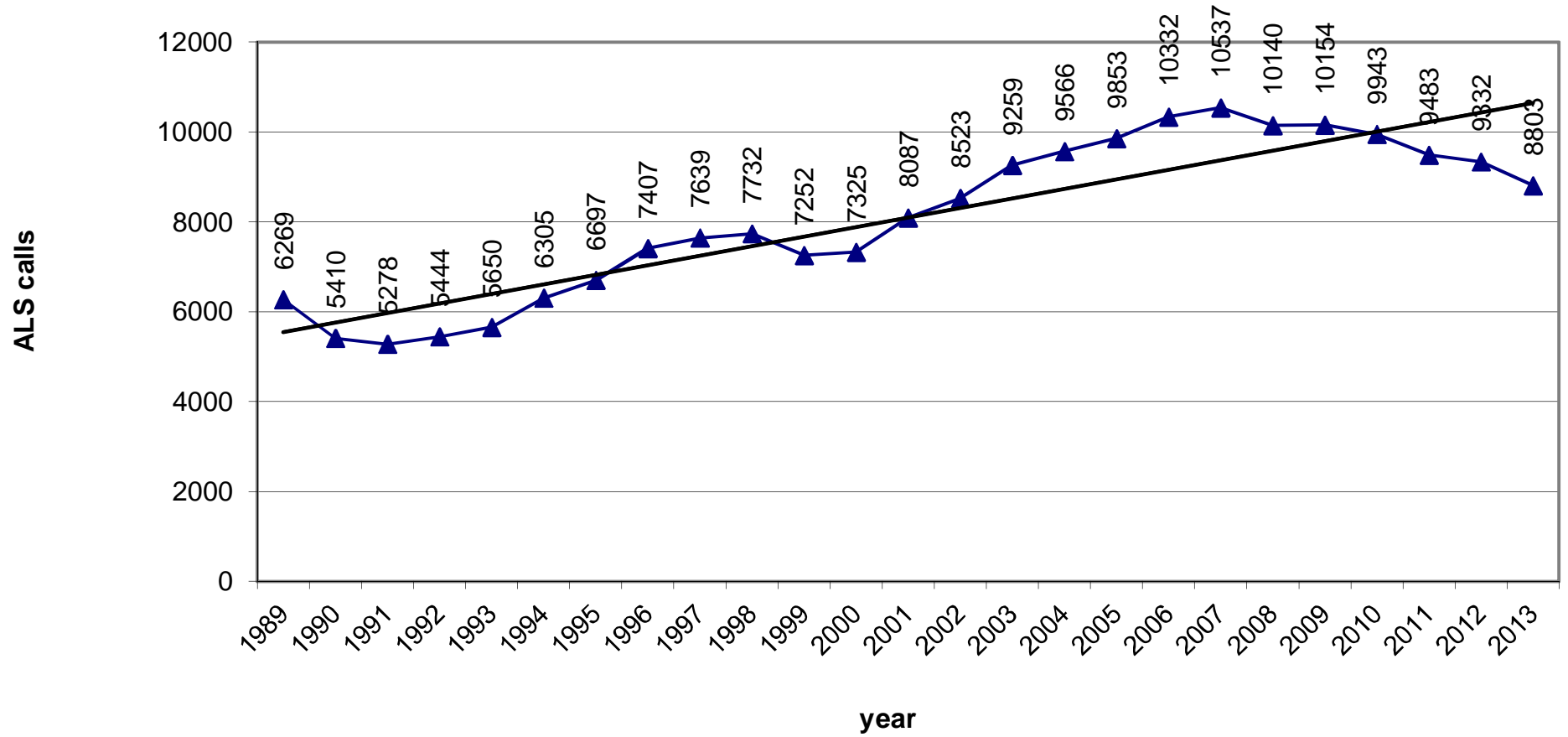
Reformatted: 05/14/03

/scl 041509 K:\New Directory\Administration\Committees\Bylaws\2013\Bylaws CURRENT APPROVED 020314.docx

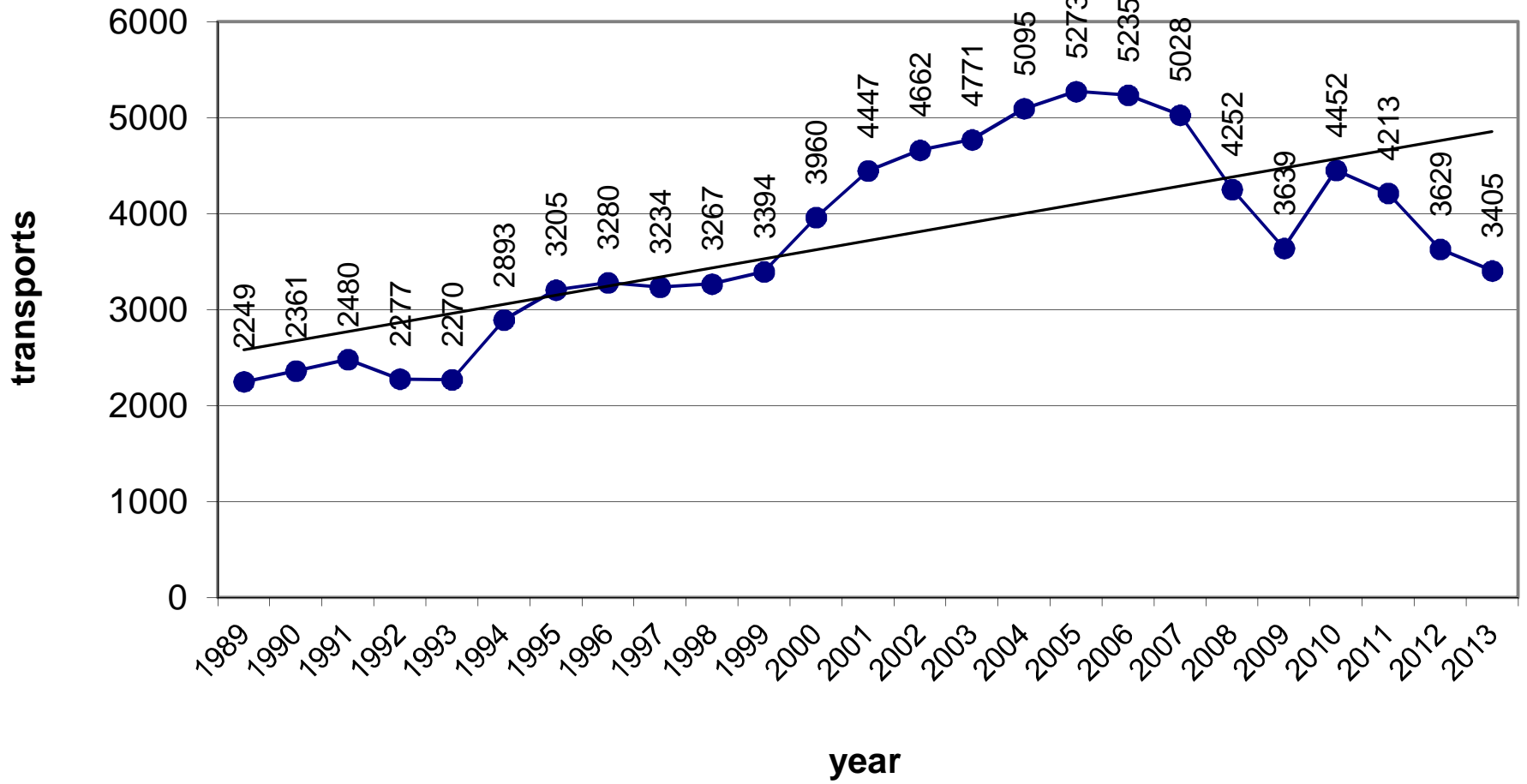
Thurston County Medic One/EMS Call Volume

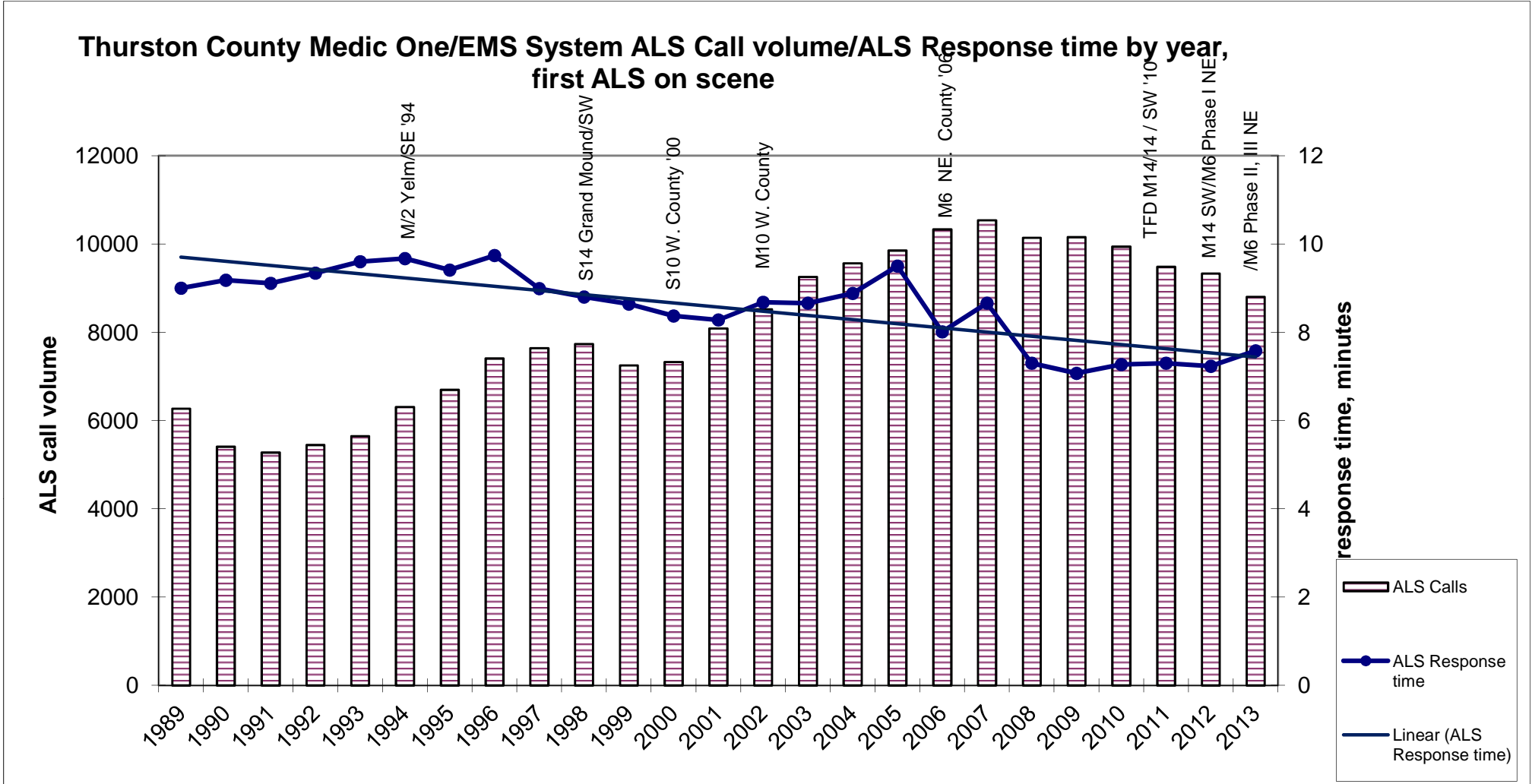


Medic One/ALS unit response volume

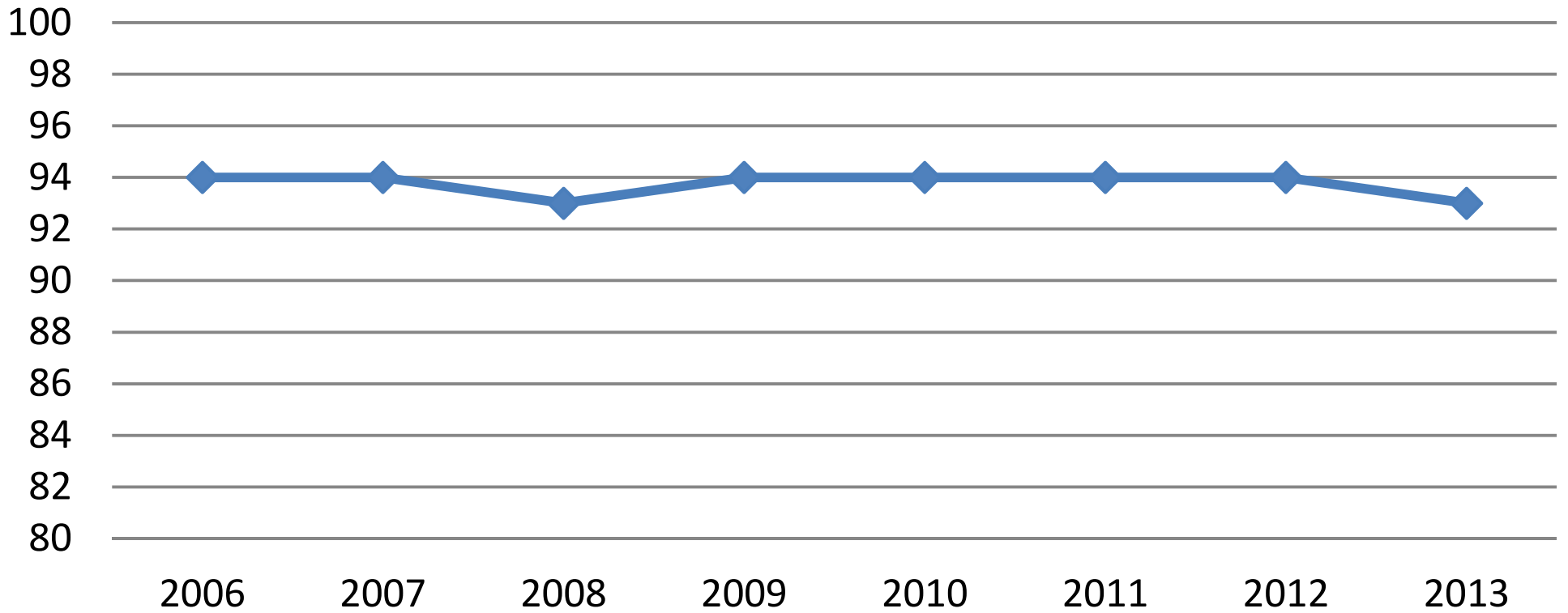


Medic One/ALS Transports





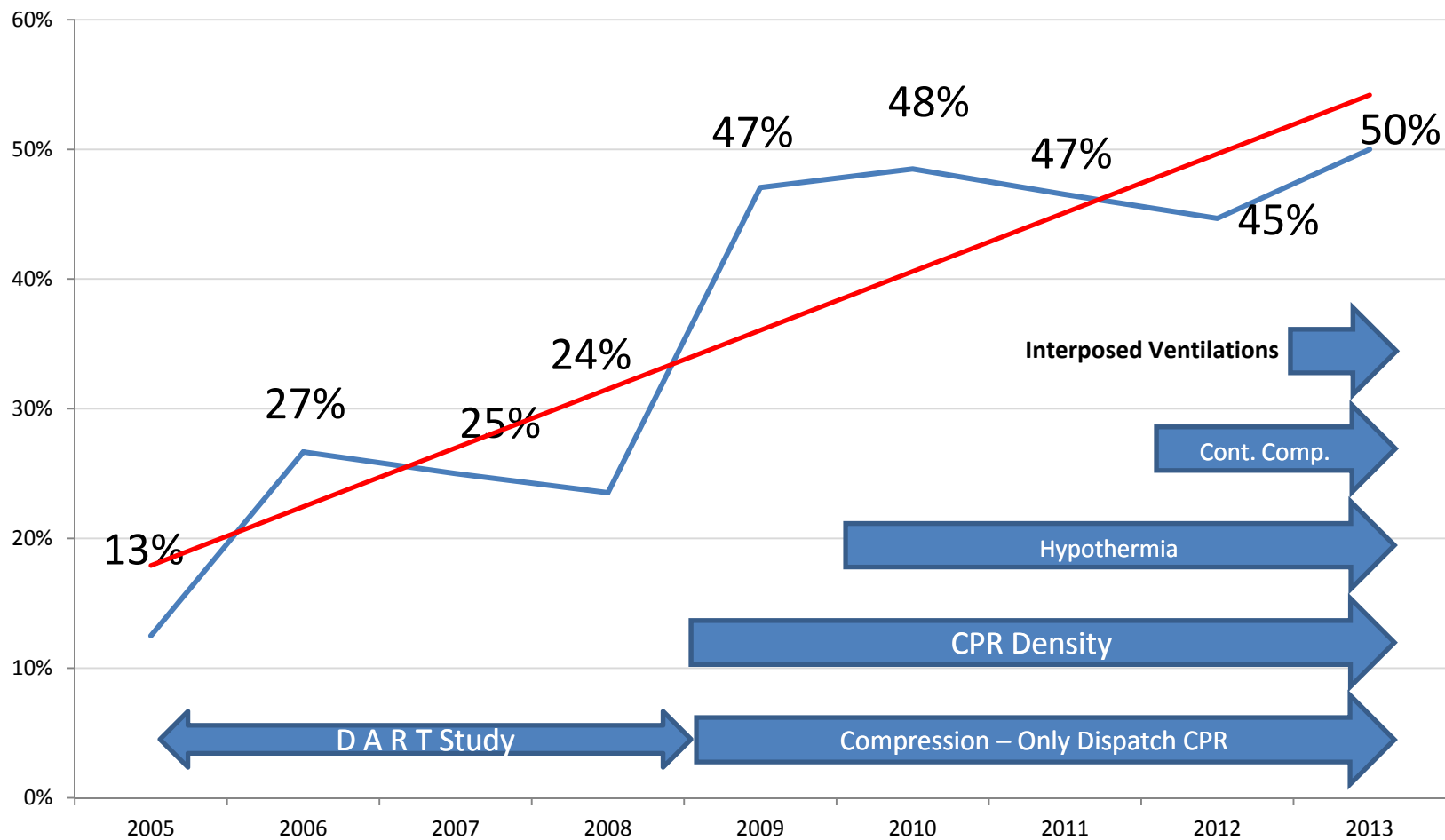
ALS response goal countywide performance



Thurston County Medic One
 2013 Response Time Compliance With Filters
 (Rxn Time Between 0 and 360 Seconds, Resp Time Between 0 and 3600 Seconds)

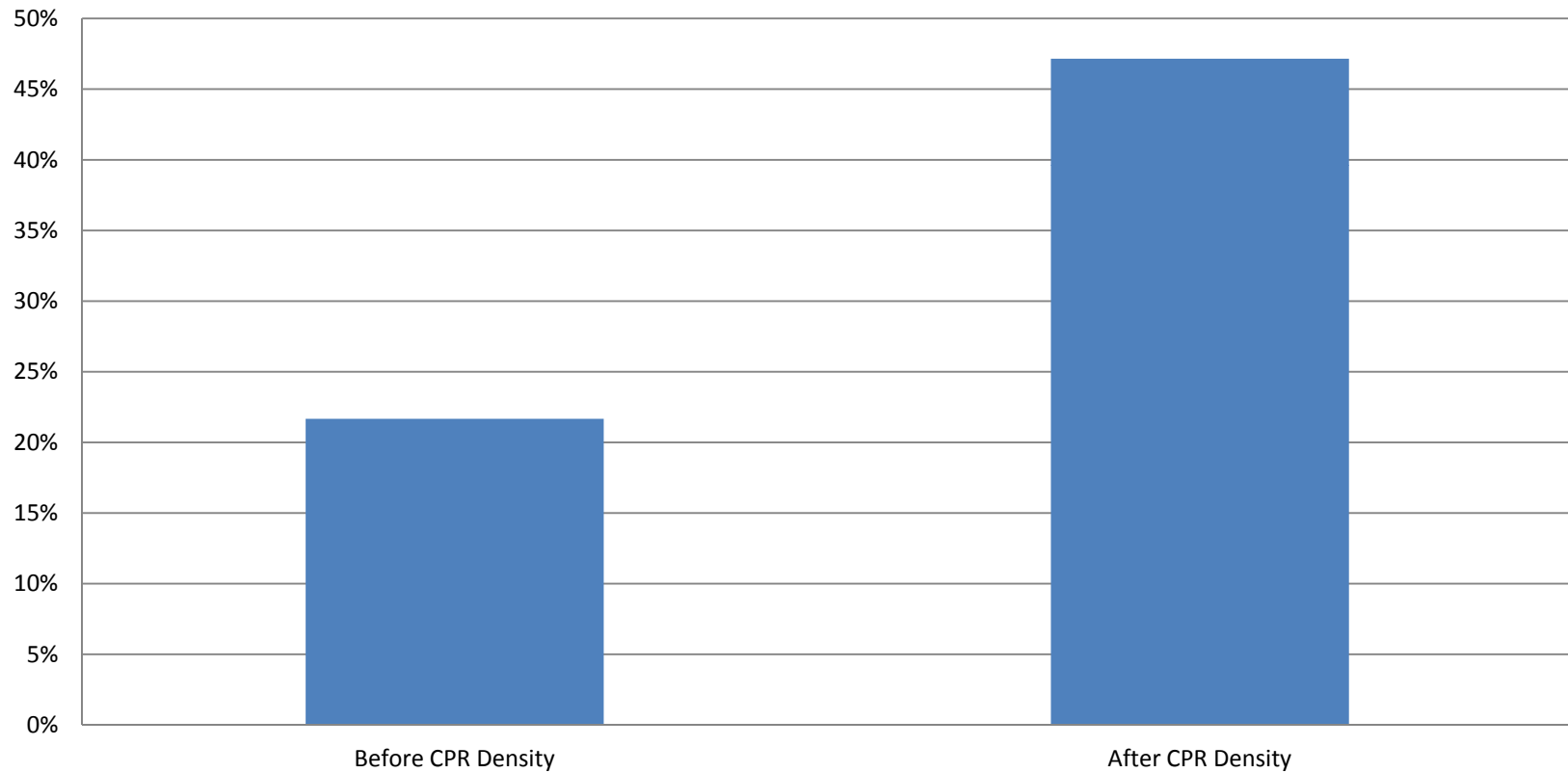
Jurisdiction	Response Area Classification	Response Time Target Min / Sec	Total Incidents Represented	n < Target	% < Target	Next Review	Mean Response Time Min : Sec	Notes
Olympia + UGA (OPD)	Urban	10 / 600	2267	2121	94%	Jan-15	5:03	0 < RXN Time < 360 0 < RESP Time < 3600
Lacey + UGA (LFD3)	Urban	10 / 600	2262	2030	90%	Jan-15	6:11	0 < RXN Time < 360 0 < RESP Time < 3600
Tumwater City (TFD)	"Urban"	10 / 600	671	614	92%	Jan-15	5:23	0 < RXN Time < 360 0 < RESP Time < 3600
Tumwater UGA only	Suburban	20 / 1200	109	106	97%	Jan-15	7:19	0 < RXN Time < 360 0 < RESP Time < 3600
FD1 (WTRFA)	Suburban	20 / 1200	437	418	96%	Jan-15	8:38	0 < RXN Time < 360 0 < RESP Time < 3600
Yelm + UGA (SETFA)	Suburban	20 / 1200	405	392	97%	Jan-15	6:53	0 < RXN Time < 360 0 < RESP Time < 3600
Town of Rainier (SETFA)	Suburban	20 / 1200	57	54	95%	Jan-15	10:32	0 < RXN Time < 360 0 < RESP Time < 3600
FD3	Suburban	20 / 1200	271	257	95%	Jan-15	10:08	0 < RXN Time < 360 0 < RESP Time < 3600
FD6	Suburban	20 / 1200	136	125	92%	Jan-15	12:49	0 < RXN Time < 360 0 < RESP Time < 3600
FD9	Suburban	20 / 1200	129	122	95%	Jan-15	10:12	0 < RXN Time < 360 0 < RESP Time < 3600
FD11 (WTRFA)	Suburban	20 / 1200	226	219	97%	Jan-15	12:05	0 < RXN Time < 360 0 < RESP Time < 3600
Tenino + UGA (FD12)	Suburban	20 / 1200	72	67	93%	Jan-15	13:12	0 < RXN Time < 360 0 < RESP Time < 3600
Bucoda (BFD)	Suburban	20 / 1200	30	25	83%	Jun-14	16:22	0 < RXN Time < 360 0 < RESP Time < 3600
FD2 (SETFA)	Rural	30 / 1800	281	280	100%	Jan-15	10:11	0 < RXN Time < 360 0 < RESP Time < 3600
FD4 (SETFA)	Rural	30 / 1800	93	91	98%	Jan-15	14:46	0 < RXN Time < 360 0 < RESP Time < 3600
FD5	Rural	30 / 1800	55	55	100%	Jan-15	10:22	0 < RXN Time < 360 0 < RESP Time < 3600
FD7	Rural	30 / 1800	73	73	100%	Jan-15	12:28	0 < RXN Time < 360 0 < RESP Time < 3600
FD8	Rural	30 / 1800	119	119	100%	Jan-15	9:17	0 < RXN Time < 360 0 < RESP Time < 3600
FD12	Rural	30 / 1800	99	98	99%	Jan-15	13:10	0 < RXN Time < 360 0 < RESP Time < 3600
FD13	Rural	30 / 1800	91	88	97%	Jan-15	15:56	0 < RXN Time < 360 0 < RESP Time < 3600
FD16	Rural	30 / 1800	8	8	100%	Jan-15	20:37	0 < RXN Time < 360 0 < RESP Time < 3600
FD17	Rural	30 / 1800	85	76	89%	Jun-14	21:14	0 < RXN Time < 360 0 < RESP Time < 3600
		2013	7976	7438	93%		07:35	
		2012	8596	8047	94%		07:14	
		2011	8364	7876	94%		07:18	
		2010	8211	7746	94%		07:16	
		2009	8077	7589	94%		07:04	

Survival to Discharge Cardiac Origin, Witnessed Arrest, VF/VT on arrival



Effective CPR

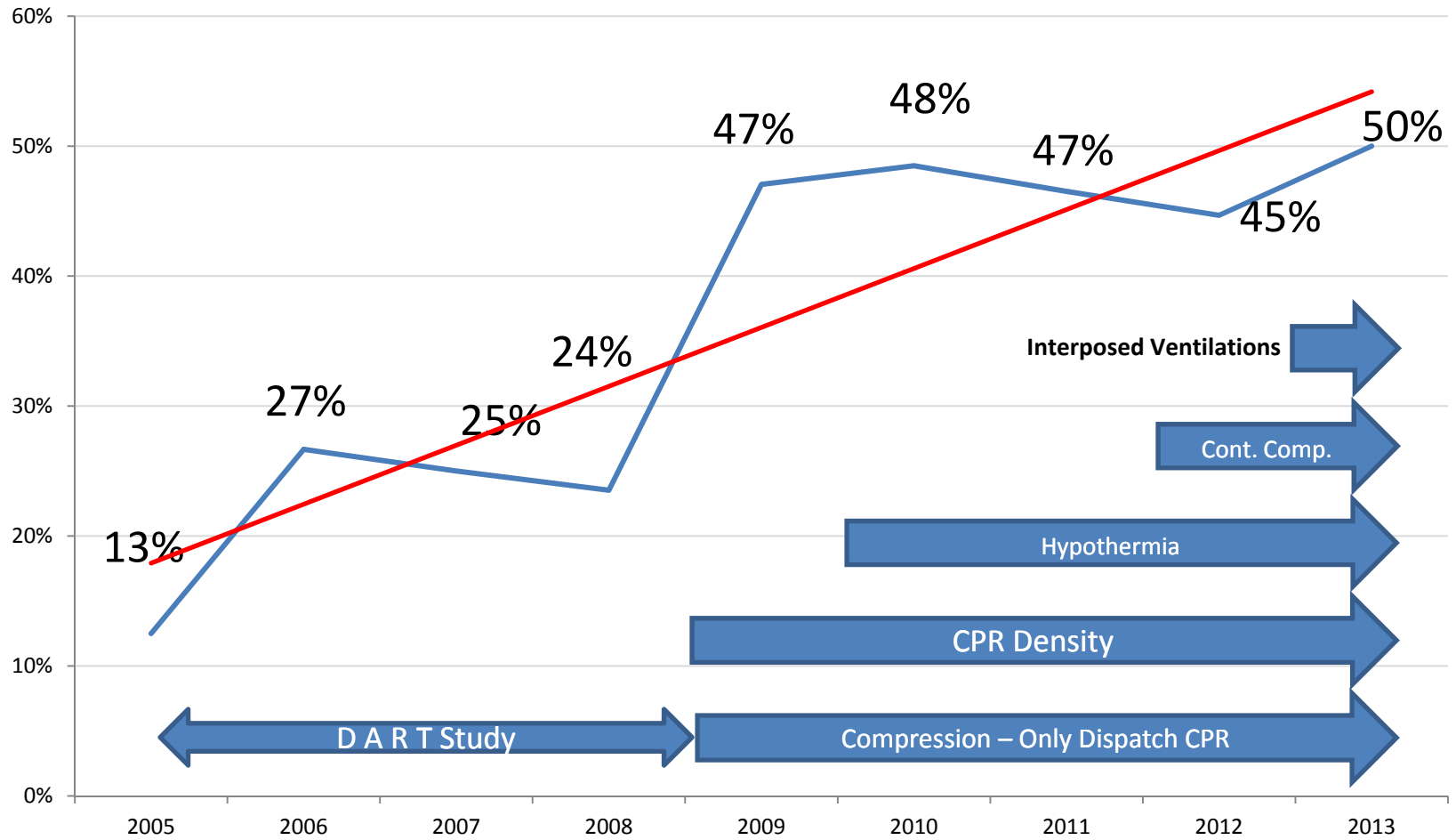
Survival to Discharge



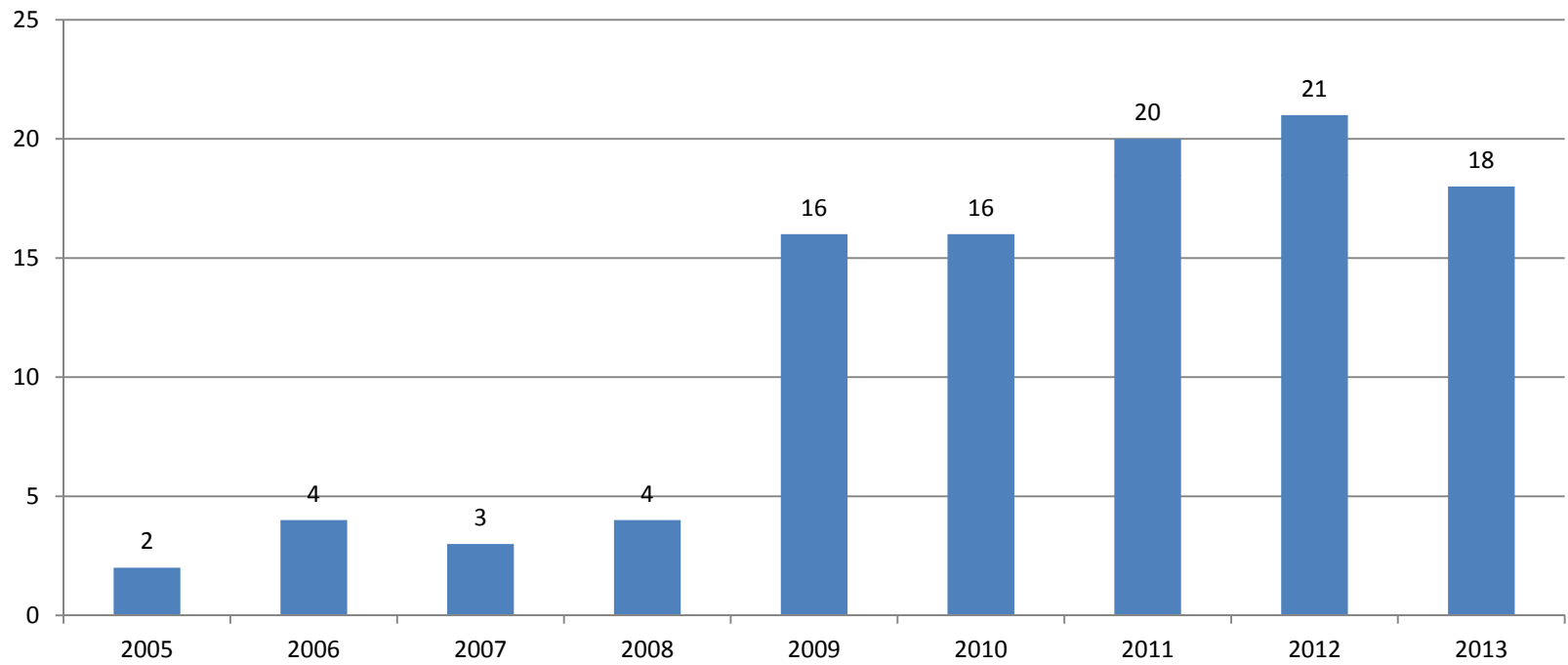
4 Years cumulative

5 Years cumulative

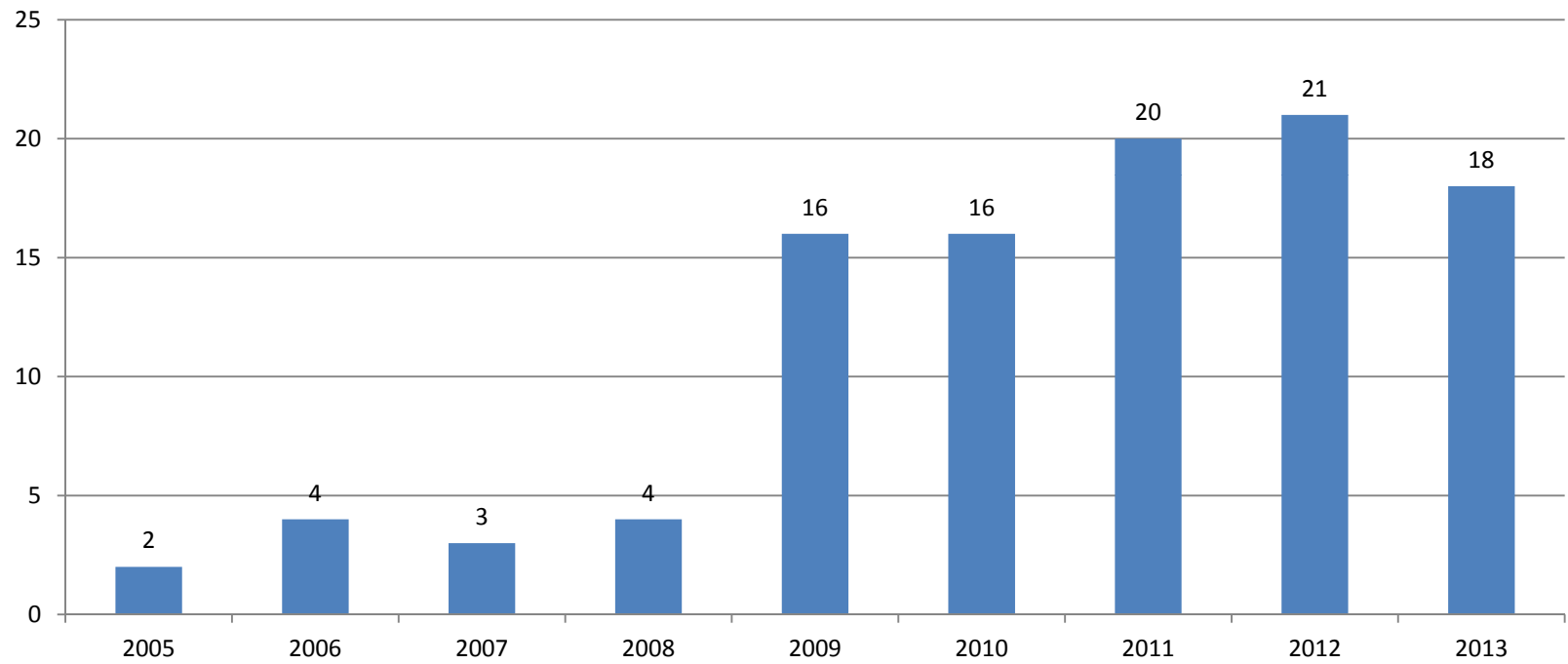
Survival to Discharge Cardiac Origin, Witnessed Arrest, VF/VT on arrival



***n* Survived to Discharge**
Witnessed Arrest, VF on Arrival, Cardiac Origin



***n* Survived to Discharge**
Witnessed Arrest, VF on Arrival, Cardiac Origin



BLS Agency average Emergency Response time by EMS agency (only EMS emergency responses)

Jan 1 – Dec 31, 2013				
Fire/EMS Agency <i>Click hyperlink to agency website for agency description</i>	Jurisdiction Area Sq Miles TRPC	Jurisdiction Population 2012 TRPC	EMS calls Emergency (lights/siren) Response 2013	Average response time MM:SS 2013
Lacey FD3	70.5	88,320	6914	06:53
Olympia Fire Dept (OFD)	19.7	47,500	6362	05:03
Tumwater Fire Dept (TFD)	17	19,150	2082	05:42
SETFA (Yelm/Rainier) (FD2, 4)	86.4	23,270	2094	08:24
WTRFA (Rochester/Littlerock)(FD1, 11, 14)	162	21,660	1664	08:43
McLane FD9/Black Lk FD5	84.5	15,710	706	07:13
E. Olympia FD6	30	12,650	564	08:32
Tenino FD12	46.4	6,060	412	08:38
S Bay FD8	23	7,810	378	07:56
Griffin FD13	24	5,030	267	07:51
Bald Hill FD17	26	4,020	209	10:27
N Olympia FD7	11	4,050	215	07:34
Bucoda Fire Dept	0.6	560	56	07:02
Gibson Valley FD16	31	570	31	13:37
County wide	632.1	256,360	21,954	6:41

Data selected for this annual EMS Agency Data Report:

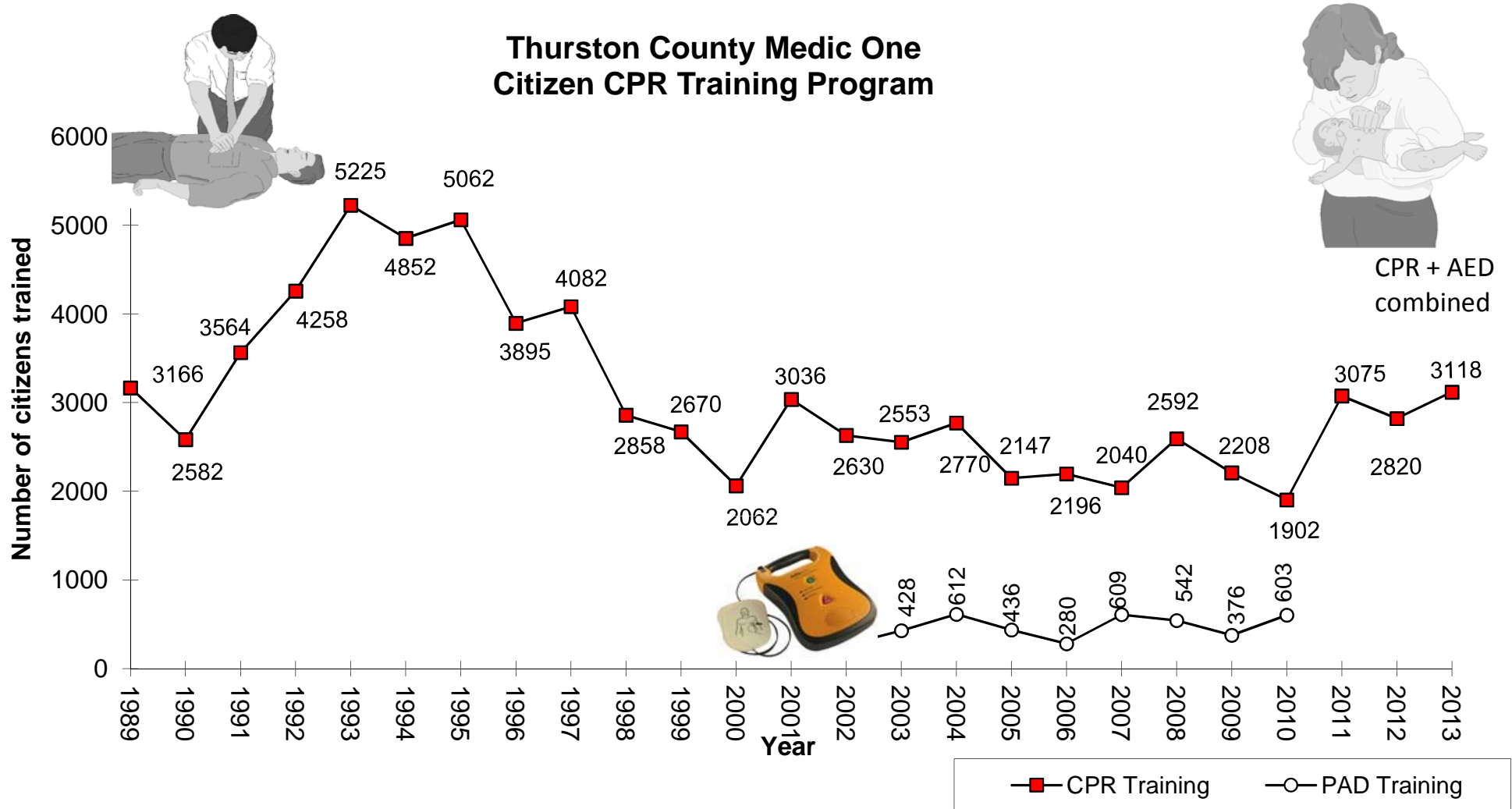
Only Emergency responses (lights and siren/EMS RED) on EMS calls: excludes non-emergency and non-EMS responses/calls for service

Data Integrity Filters applied to this report:

Reaction time between 0-360 seconds: excludes negative and errant reaction time data

Response time between 0-3600 seconds: excludes negative and errant response time data

Thurston County Medic One Citizen CPR Training Program



{CARSCALL.SEC_DISP_ONSC} in 0.01 to 3600.00 and
 {CARSCALL.SERVICE} = "F" and
 {CARSCALL.AGENCY} <> "PCF" and
 {CARSCALL.CALL_DISPATCH_DATE} in {?Start Date} to {?
 End Date} and
 {CARSCALL.SEC_DISP_ENRT} in 0.01 to 360.00 and
 {CARSCALL.CALL_TYPE_FINAL} in ["TR", "TBJ", "TB", "TA",
 "T", "B", "A"]



Thurston County Medic One
Average Response Time by Agency
CAD Call Types: A, B, T, TA, TB, TBJ, TR
01/01/2013 12:00:00AM - 12/31/2013 11:59:59PM
Source: TCOMM Data Warehouse

Agency	Incident Count	Avg MM:SS	80th % MM:SS	90th % MM:SS
FD 3	6914	06:53	08:45	10:39
Oly FD	6362	05:03	06:18	07:28
SET	2094	08:24	11:24	14:09
Tum FD	2082	05:42	07:10	08:14
WTF	1664	08:43	10:59	13:41
FD 9	706	07:13	09:03	11:07
FD 6	564	08:32	10:47	13:21
FD 12	412	08:38	12:22	15:04
FD 8	378	07:56	10:37	12:13
FD 13	267	07:51	10:00	12:30
FD 7	215	07:34	09:40	12:13
FD 17	209	10:27	13:35	16:51
Buc FD	56	07:02	10:31	13:12
FD 16	31	11:37	14:44	16:09
Incident Total	21,954	County Wide Avg 06:41	County Wide 80th % 08:40	County Wide 90th % 10:53