

THURSTON COUNTY MEDIC ONE  
EMERGENCY MEDICAL SERVICES COUNCIL  
EMERGENCY SERVICES CENTER/EOC

# AGENDA

February 15, 2017, 3:30 PM

- I. CALL TO ORDER/ROLL CALL
- II. APPROVAL OF AGENDA
- III. PUBLIC PARTICIPATION
- IV. REVIEW AND APPROVAL OF MINUTES
  - A. EMS Council - January 18, 2017
  - B. Ops Committee - February 2, 2017 (Informational Only)
- V. COMMITTEE REPORTS
  - A. Operations Committee – Ops Chair or Representative
  - B. West Region EMS Council – WREMS Representative
  - C. Staff Report

VI. OLD BUSINESS

	ITEM	PRESENTER	EXPECTED OUTCOME
A.	Clinical Agreement/Rotation Funding	Hardin	Update
B.			
C.			

VII. NEW BUSINESS

	ITEM	PRESENTER	EXPECTED OUTCOME
A.	Brown/Fell Scholarship (AC Bates)	Fell	Presentation
B.	Appoint Nominations Committee	McPhee	Appointment
C.	2017 Budget Amendment	Hardin	Discussion
D.	2016 Cardiac Survival Rate	Hambly	Report
E.	EMSC Bylaws Proposed Changes	Hardin	Discussion

VIII. PUBLIC PARTICIPATION

IX. GOOD OF THE ORDER

X. ADJOURNMENT

**Thurston County Medic One  
Emergency Medical Services Council – Regular Meeting  
Emergency Operations Center/ECC  
January 18, 2017**

---

**PRESENT:** Jim Cooper, Rena Merithew, Frank Kirkbride, Tom Fell, Russ Hendrickson, Paul Perz, Stan Moon, Margaret McPhee, Scott LaVielle (ALT), John Ricks, Greg Wright, Bill Owens (ALT)

**ABSENT:** Bud Blake, Larry Fontanilla, Michael Steadman

**EXCUSED:** Roger McMaster

**GUESTS:** Terry Ware, Mary Campbell, Byron Hamilton, Meredith Hutchings, Tony Kuzma, Steve Brooks, Alex Christiansen, Gary Edwards

**STAFF:** Kurt Hardin, Sandra Bush, Anna Lee Drewry

- I. **CALL TO ORDER/ROLL CALL** – Chair McPhee called the regular meeting of the Emergency Medical Services Council (EMSC) to order at 3:31 PM. Roll was recorded by staff.
- II. **APPROVAL OF AGENDA – MSC** – Chair McPhee asked to add discussion under New Business for ALS & BLS Policy Development. (Moon/Hendrickson) move to approve and it carried unanimously.
- III. **PUBLIC PARTICIPATION** – None
- IV. **REVIEW AND APPROVAL OF MINUTES**
  - A. EMS COUNCIL – December 21, 2016 – **MSC** (Kirkbride/Cooper) move to approve, and this carried unanimously.
  - B. OPERATIONS COMMITTEE – January 5, 2017 (Information Only)
- V. **COMMITTEE REPORTS**
  - A. **OPERATIONS COMMITTEE:** Greg Wright's report is under old and new business. Paul Perz asked about the Business Associate Agreement and why so many agencies have not signed this. Greg Wright, speaking for Olympia, said attorneys are reviewing their agreement. Kurt Hardin explained how the County is going through a HIPAA process and they have hired a consultant which may require the Business Associate Agreement to be signed by each agency in order to continue with Safety Pad transmission of patient data. The County has asked to have these agreements signed by the end of this month.  
  
Paul Perz also asked about the \$1.6 million equipment replacement budget. Hardin explained the \$1.6 million includes 5 medic units, power gurneys, etc. Frank Kirkbride asked if the EMSC could receive a copy of the ER&R schedule.
  - B. **WEST REGION:** No report
  - C. **STAFF REPORT:** Hardin reported - 1) Medical Program Director Contract: Medic One presented the MPD requirements to the OES members on January 12<sup>th</sup> and are waiting on feedback from them. 2) Medic One Fund Balance: This was presented to the BOCC (copy of the presentation will be handed out to the council) and they were receptive to it, with a lot of questions. The only change made between the presentation shown to the EMSC and the one presented to the BOCC was instead of calling the decision point “the levy decision point”, it was simply called “the decision point” and it was explained that this is where the business model had to change because this is the point where the fund is running out of money.  
  
Stan Moon asked about the paramedic testing and expressed his concern about the hiring process and how it isn't working. Hardin reported that the two candidates who didn't pass, one has come in and subsequently passed the written exam, the other one is scheduled to come in next week to take the written exam. There will be additional testing in May and staff is looking at how to increase the pool of candidates. The ALS agencies are working on “home grown” candidates, and may possibly look nationally.
- VI. **OLD BUSINESS**
  - A. Surplus Vehicle & Related Equipment Policy and Matrix: A Surplus Vehicle Tie-Breaker policy was presented at the last EMSC meeting and the council asked Ops to write a Surplus Vehicle policy and include a tie-breaker

procedure. The Surplus Vehicle & Associated Equipment policy is included in the EMSC packet for today's<sup>4A</sup> meeting. Stan Moon asked about adding the matrix to section X (attachments). (Kirkbride/Cooper) move to approve the Surplus Vehicle & Associated Equipment policy, with the addition of the matrix to section X. The motion carried unanimously.

**VII. NEW BUSINESS**

- A. Clinical Agreement/Rotation Funding: EMTs, and occasionally paramedics, have patient contacts at Providence St. Peter Hospital as part of their training. Providence requires extensive background checks on the medics and the cost is not in the Medic One budget (approx., \$3,000 each year). The question is, should the agencies be responsible to pay for the background checks, or should Medic One find the money in the budget. Hardin explained the purpose of the Clinical Agreement (Providence would like the agencies to be responsible for any inappropriate actions of the EMTs while they are at the hospital). Hardin will bring to the next EMSC meeting his recommendation of where in the budget the money would come from, and he will also run the agreement by the Prosecutor's office for review. As a way to keep costs down, Chief LaVielle suggested that staff have a checklist on the background checks performed so duplicate background checks are not performed (some of the background checks are already performed before clinical rotations). (Kirkbride/Merithew) move to approve staff investigating the budget and if funds are found, staff can implement and report back to the EMSC, and the motion carried. Perz/Owens opposed.
- B. Brown/Fell Scholarship (AC Bates): (Cooper/Ricks) move to approve the \$1,000 scholarship for AC Bates, and this carried unanimously.
- C. AMR & Olympic Ambulance: (Cooper/Moon) move to approve the licensing applications for AMR & Olympic. This will be added to the BOCC consent agenda for 2 weeks from Tuesday.
- D. ALS & BLS Policy Development: Hardin discussed the need for ALS & BLS funding policy development. The policies will be developed by the Ops Committee and presented to the EMSC.

**VIII. PUBLIC PARTICIPATION** – Chair McPhee reported that Roger McMaster has resigned from the EMSC. There has not been any word from the Fire Commissioners on who will replace him.

**IX. GOOD OF THE ORDER** – 1) Dr. Fell had an accident while doing some logging and he shared his appreciation for 911 and EMS. 2) Mary Campbell shared a positive experience with Olympia Medics. Mary also wanted to express her appreciation to Medic One for the EMT testing process.

**X. ADJOURNMENT** – Meeting adjourned at 4:34 PM.

**THURSTON COUNTY MEDIC ONE  
OPERATIONS COMMITTEE ~ MEETING MINUTES  
EMERGENCY SERVICES CENTER  
February 2, 2017**

**PRESENT:** Steve Brooks, Scott LaVielle, Alex Christiansen, Mary Campbell, Dave Pearsall, Kathy Pace, Keith Flewelling, Brian VanCamp, Greg Wright, Stewart Mason, Russ Kaleiwahea, Bill Hurley

**ABSENT:** Jim Fowler, Larry Fontanilla

**EXCUSED:**

**GUESTS:** Terry Ware, Tony Kuzma, Byron Hamilton, Mark Gregory

**STAFF:** Kurt Hardin, Anna Lee Drewry, Cindy Hambly, Sandra Bush, Alan Provencher

- I. **CALL TO ORDER/ROLL CALL** – Chair Wright called the regular meeting of the Operations Committee to order at 2:00 PM. Staff recorded roll.
- II. **APPROVAL OF AGENDA –MSC** Chief VanCamp would like to add a discussion on LEPC as new business. (LaVielle/Pace) move to approve the agenda as modified and the motion carried unanimously.
- III. **PUBLIC PARTICIPATION** – None
- IV. **REVIEW AND APPROVAL OF MINUTES**
  1. Operations Committee – January 5, 2017 – **MSC** (Flewelling/LaVielle) moved to approve as submitted, and the motion carried.
  2. EMS Council – Draft January 18, 2017 Mtg. (Informational Only)
- V. **COMMITTEE REPORTS**
  - A. WEST REGION – Pace reported: WREMS meets next week. The conference is scheduled for February 24<sup>th</sup> & 25<sup>th</sup> at Ocean Shores.
  - B. SUBCOMMITTEES
    1. Equipment Committee (EqC) – Equipment Committee met on January 18, 2017. Items of discussion included: Update on National drug shortages; new style of gait belts; help building BLS Epi kits; saline locks, and saline bottles.
    2. Mass Casualty Incident (MCI) Committee – Add MCI Committee discussion to the March agenda for Ops.
    3. Training Advisory Committee (TAC) – Drewry reported: 1) Meetings are held on Mondays and is difficult for some to attend so Anna Lee will ask members for feedback on changing the day of week. 2) Epinephrine protocol will be in place this year and is expected to produce a savings of \$50,000 - \$90,000/annually. 3) Staff is working on streamlining the reciprocity process. 4) Spring EMT class will begin February 27<sup>th</sup>.
    4. Transportation Resource Utilization Committee (TRU) – Chief Brooks reported: 1) A 3 hour workshop was held on January 23<sup>rd</sup> and consisted of good representation. The objective was to evaluate, increase and sustain appropriate BLS transportation resources. The workshop consisted of 4 work groups (Metrics, Education and Training, Physical Resources, Policy and Protocol). 2) Committee will continue to meet the first Thursday of each month, 12:30 – 1:45.
    5. STAFF REPORT – Hardin reported: 1) Clinical Agreements – Staff has received a signed agreement back from one department. For those departments who have not signed the agreements, EMT students will not qualify for patient contacts at Providence St. Peter Hospital. 2) Flewelling asked about the hiring status. There are 3 open positions; BLS Training Coordinator, Training Assistant, and ALS Program Manager.

## VI. OLD BUSINESS

A. EMS Council Action Report – Wright reported: 1) EMSC approved the surplus vehicle policy. 2) Regarding the Clinical Agreement/Rotation funding, EMSC has asked staff to look in the budget for available funds. 3) AMR and Olympic Ambulance license applications were approved. These will go before the BOCC for final approval. 4) There is the need for additional policies, which will be discussed under new Business. The process for approving policies is; staff creates policy, policy is presented to Ops, and lastly reviewed by EMSC for their approval.

Brooks asked staff about new vehicle purchases. Staff will meet with Braun to review the specs, and all three ALS agencies and the mechanic will be represented. Vehicles are expected to come out this summer.

## VII. NEW BUSINESS

A. Ambulance Licensing Process – Hardin/Bush reported: There is no policy in place for the ambulance licensing; however, there is a process in place but it needs updating. There is conflicting information in the written process about whether the licensing application needs to go through EMSC. Staff will clean up the language and present to the Prosecutors office for review on the ordinance. A revised written process will be presented to Ops at the March meeting.

B. Falck Ambulance License – Falck Ambulance submitted an ambulance license application to Medic One; however, it is still unclear what their scope of service will be in Thurston County. Falck Ambulance will be invited to the March Ops meeting for further discussion and explanation. Staff will contact Thurston County Licensing department and ask for modification to the licence application so a narrative of the scope of service is required from the applicant.

C. ALS & BLS Funding Policy – A group will be established to draft an ALS & BLS Funding policy to determine eligibility of funds. The group will report the draft to Ops and forward to EMSC for approval. The group will consist of Steve Brooks, Brian VanCamp, Scott LaVielle, Greg Wright, Russ Kaleiwahea, and Mark Gregory. Hardin will assign staff.

D. 2016 Cardiac Survival Rate – Hambly presented: CPR Density Scores=94% (ALS & BLS combined); Cardiac Arrest survival rate = 47%

E. MPD Contract – Hardin presented the need for restructuring the MPD contract paradigm, which included a detail report of the MPD's responsibilities. Providence St. Peter Hospital Emergency Physicians group (OES) is interested in contracting with Medic One to provide one of their physicians to do a two year MPD commitment. The physician would provide 12 hours of service each week, 8 of them in the office, with scheduled times. The contract would be changed from a stipend contract to a market place value contract which means it will be based on what the cost of a shift would be at PSPH (the MPD salary will probably increase to over \$100,000 per year). This information will be presented to the Fire Chiefs and the Fire Commissioners and will eventually return to Operations Committee for their recommendation to EMSC. EMSC will then recommend a final candidate to Washington State DOH. DOH would then appoint the MPD in accordance to statute.

F. Nominations Committee – LaVielle/Pace solicited for input on who would like to run for chair and vice-chair. The only input received was recommending the current chair and vice-chair remain.

G. Operations Committee Officer Elections – Chair Wright opened the floor for nominations of Vice Chair. No other nominations were made so Vice Chair VanCamp was unanimously voted to continue as Vice-Chair. (Brooks/LaVielle) motioned to close the nominations and the motion carried unanimously. Vice Chair VanCamp opened the floor and called for nominations of Chair. No other nominations were made so Chair Wright was unanimously voted to continue as Chair. (Brooks/LaVielle) motioned to close the nominations and the motion carried unanimously.

H. LEPC (Local Emergency Planning Committee) - Sandy Eckker and Andrew Kinney with Emergency Management are trying to get this committee running again. VanCamp encourages the public safety representatives on Ops to support and encourage the development of LEPC. Sandy will be sending out information on the next meeting.

**VIII. GOOD OF THE ORDER** – Hardin reported: There will be a budget amendment for the 2017 budget. Capital asset expenditures were briefed to the EMSC and the BOCC, but they did not get entered into the new County budget system (Questica). It is anticipated the BOCC will view the budget amendment favorably since the funding is in the budget and the EMSC had recommended approval of the Capital Asset expenditures.

**IX. ADJOURNMENT** - 3:52 PM

DRAFT

Thurston County EMS Council  
Medic One Staff Report  
February 15, 2017

**Administration:**

ALS Program Manager Position: Interviews were conducted on January 12 – 13 but the candidates were not deemed a good fit for the position. The position is advertised with a revised position description.

Training Coordinator Position is currently advertised with the first application review conducted the week of February 13. The application is open until filled.

Training Assistant Position is currently advertised and closes on February 17.

Medical Program Director (MPD) contract: The potential new contracting process with OES (Olympia Emergency Services) Physicians Group at SPH is moving forward. At any time, the steps outlined below can result in the revised MPD contract process from going forward. The process is:

1. *Medic One presented the MPD requirements to the OES members on January 12 and received positive feedback. (completed)*
2. **Medic One is currently soliciting information and comments from stakeholders. (ongoing)**
3. **Medic One coordinates the contract process with the County Auditor for approval of the procurement process. (currently taking place)**
4. Prosecuting Attorney will review to ensure contracting and legal requirements are met. (if process moves forward)
5. The Operations Committee will review the proposal and make a recommendation to the EMS Council. (if process moves forward)
6. EMS Council makes a recommendation to the Thurston Board of County Commissioners (BOCC). Final approval rests with the BOCC for any change to the MPD contracting process.

Providence Saint Peter's Hospital (PSPH) Clinical Agreements. Per discussion at EMS Operations Committee, if fire departments/EMS agencies did not agree with the clinical agreement set forth by PSPH, their EMT candidates could receive additional field contacts in lieu of the emergency department rotation requirement. When agencies have agreed to the PSPH Clinical Agreement they must all sign the same copy of the agreement (not agency by agency). Then the agreement along with Medic One's signature will be forwarded to St Peter Hospital for their administrator's signature. Medic One will then forward to each agency a signed copy of the agreement. Please let Cindy Hambly know if your agency is in agreement and then she will facilitate the signing process.

Safety Pad was revised to include mandatory field for Private Ambulance Delayed/Not Available/cancelled criteria – Scott Brownell

**Paramedic Testing:**

Medic One is looking to move the next Paramedic testing from May to late March or early April. Dr. Hurley, the Assistant MPD, will sit in on the oral boards. The date will be advertised once it is finalized.

**BLS Training:**

Training Calendar and Training Record has been distributed to all Departments.

EMS Inst/Eval workshop occurred on January 28 – 29, 2017. There were 50 applications and 8 of these are for new Instructors.

EMT Course Applications were sent to all departments by the end of January. The BLS Provider CPR Pre-requisite Class will be held February 18, 2017.



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

**BYLAWS**

*Amended 3 February 2014*

*STAFF PROPOSED MODIFICATON 3/10/2016*

**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:

- 4.1. Shall review and evaluate the provision of the publicly funded emergency medical service system, known as "MEDIC ONE" for the residents of Thurston County.
- 4.2. 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.
- 4.3. 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~~ \$40,000.
  - 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.
- 4.4. 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.

Formatted: Underline

#### ARTICLE V. OFFICERS

- 4.1. The officers shall be Chairperson and Vice-chairperson elected by the majority of the Council for a one-year term. Only Article IV.1.C members may be elected as Officers.
- 4.2. The Chairperson shall preside at all regular and special meetings of the Council. The Vice-chairperson shall preside when Chairperson is absent.
- 4.3. In the absence of the Chairperson and Vice-chairperson, the Council will appoint an acting Chairperson.
- 4.4. Any vacancies in the above offices shall be filled by a special election of the EMS Council.
- 4.5. Nomination of officers will take place annually in the month of February or as soon thereafter as is possible.
- 4.6. Election of officers will take place annually in the month of March. Term of office shall begin in March.

#### ARTICLE VI. MEETINGS

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

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

**ARTICLE VII. EMS COUNCIL STANDING AND AD HOC COMMITTEES**

- 4.1. Nominating Committee: Three Council members, appointed by the Chairperson by December of each year, to nominate willing and capable (only Article IV.1.C are qualified) Council members as candidates for the offices of Chairperson and Vice chairperson.
- 4.2. 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.
- 4.3. Advanced Life Support (ALS) Contract Negotiations Committee: Three Council members appointed by the Chairperson (only Article IV.1.C. qualify) 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.
- 4.4. The EMS Council Chairperson, with the approval of the Council, may appoint ad hoc committees and/or task forces as deemed necessary.

Formatted: Underline

**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

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