

**THURSTON COUNTY MEDIC ONE
OPERATIONS COMMITTEE ~ MEETING MINUTES
EMERGENCY SERVICES CENTER
November 3, 2016**

PRESENT: Steve Brooks, Tony Kuzma, Keith Flewelling, Brian VanCamp, Kathy Pace, Larry Fontanilla, Greg Wright, Alex Christiansen, Russ Kaleiwahea, Jim McGarva, John Wood

ABSENT: Wendy Rife,

EXCUSED: Dave Pearsall, Stewart Mason,

GUESTS: Terry Ware, Byron Hamilton, Anne Benoist

STAFF: Cindy Hambly, Sandra Bush

- I. CALL TO ORDER/ROLL CALL** – Chair Wright called the regular meeting of the Operations Committee to order at 2:04 PM. Staff recorded roll.
- II. APPROVAL OF AGENDA –MSC** Cindy Hambly asked to move Staff Report Revision from New Business to Committee Reports. (Flewelling/Pace) move to approve as amended. The October 6, 2016 agenda was not approved at the October 6th meeting. (Brooks/Kuzma) move to approve.
- III. PUBLIC PARTICIPATION** – None
- IV. REVIEW AND APPROVAL OF MINUTES**
 1. Operations Committee – October 6, 2016 – **MSC** (Brooks/Pace) moved to approve as submitted. August 4, 2016 minutes need to be “re-approved” since the agenda was not approved at the October 6th meeting. (Flewelling/Brooks) move to approve.
 2. EMS Council – October 19, 2016 Mtg. (Informational Only)
- V. COMMITTEE REPORTS**
 - A. WEST REGION – Anne Benoist reported: 1) West Region is updating their bi-annual strategic plan which includes min/max numbers of verified agencies. The strategic plan is due to the state by March 2017 and from there it goes to the EMS & Trauma Steering Committee, and once they approve it, it gets published. Following the EMS & Trauma Steering Committee meeting on 11/16/16 there will be a select workgroup meeting to begin the review of EMS licensing and verification. 2) The WREMS conference will be held February 24 – 25 in Ocean Shores. Registration should be open by Veterans Day. 3) The Region 3 Healthcare Preparedness Coalition is considering using the WATrac system to get alerts and receive information from all hospitals. The State has asked West Region to appeal to EMS to see if they would use WATrac, or if dispatch would use it. 4) Willapa Harbor will be the fiscal agent for WHEELS.
 - B. SUBCOMMITTEES
 1. Equipment Committee (EqC) – No report.
 2. Mass Casualty Incident (MCI) Committee – No report. The two main people on this committee have retired (Bob Petersen & Pete Suver), therefore this committee will be considered inactive until further notice. This item will be placed on an upcoming OPS agenda
 3. Training Advisory Committee (TAC) – Hambly reported minutes from the October 17, 2016 meeting: 1) Expired Medications: The MPD put together a list of what to look for, i.e. if it's a medication for internal use and it says it's expired, consider it expired and replace it. If its bandages and supplies, use common sense to determine if the product can still be used. 2) Cindy provided the group with the OTEP 2017 subjects. Also working on provider safety. 3) West Thurston suggested a certificate of completion for practical skills evaluations so providers can use it when they recertify their National Registry. 3) Medic One is hoping to save about \$90,000 next year by training EMT's to administer epinephrine themselves, rather than use the epi-pen. 4) POLST form will be reviewed next year. 5) There was discussion about Hypothermic Arrest and when it's appropriate to provide CPR on a drowning victim. Dr. Fontanilla said medics need to be trained further on obvious signs of death. This will be a continuation for TAC.

4. Transportation Resource Utilization Committee (TRU) – Chief Brooks reported: TRU committee met just prior to the Operations Committee, and they will continue to meet just prior to the Operations Committee for the near future. TRU will continue working with TAC on alternative transportation. There have been inquiries about what has been perceived to be a crisis proportion of a lack of available BLS transport resources. This concern has been narrowed down to 3 areas of potential impact, both short and long term. TCOMM will take forward an attempt to automate the current system, which is when the primary dispatched BLS transport is unavailable, dispatchers reach out to the unit on the scene and ask if they want them to move down the list for an available resource. Flewelling has offered to work with TCOMM staff and trainers on this. Operations Committee has no opposition. TRU will continue to meet regarding alternative means of transportation and how it can be determined in real time when resources are unavailable.
5. STAFF REPORT –
 - A staff report was not provided in the Operations Committee packet because Medic One would like a discussion on what the committee would like to see in the staff report, to avoid redundant information. The general consensus was that staff would include their report with the packet and if there are questions or items that need discussion, then there will be discussion. The Committee will provide feedback at the next meeting.
 - Hospital Clinical Agreements: Hambly has a final draft and this has been handed out to the agencies for their review.

VI. OLD BUSINESS

- A. Housekeeping Issues from October – Wright said if you look at the minutes from the October meeting, there were changes made to the Surplus Vehicles Matrix and he would like to vote on this again, to make sure this was an appropriate decision because the agenda was not approved before the discussion. (Kuzma/Kaleiwahea) move to confirm the voting for the surplus matrix (remove the column for “years on list”, change the “BLS Agency” column to read “agency type”, remove the column for “prev received unit”, remove the “current # of B/U”, and change the “add or replace” to include maintain service, new service, or place in reserve).
- B. EMS Council Action Report – Wright reported: A levy restoration was the primary agenda item at the last meeting. There was a non-unanimous decision to move forward to the BOCC with a restoration recommendation of August 2017. The Operations Committee discussed how they would like to be involved in discussions about a levy restoration, at least going forward, and stated they would like to see the presentation that was provided to the EMSC. Wright was directed to report this at the next EMSC meeting and ask for the presentation to be on the December Ops agenda. Also, the committee wanted to be informed when the levy restoration will be on the docket.
- C. Surplus Vehicles Tiebreaker Policy – Staff developed a tiebreaker policy, based on input from the Operations Committee at the October meeting. The policy says “the tiebreaker will be determined first by which department has never received a surplus vehicle, and second by the date the application was received by Medic One”. There is concern about the date Medic One received the application because several applications could come in on the same date. The policy will change to say “the tiebreaker will be determined first by which department has never received a surplus vehicle, and second by which agency has had a surplus vehicle for the longest period of time”. Staff will look for approval at the next committee meeting.

VII. NEW BUSINESS

- A. AMR Rate Increase – Tony Kuzma asked what the process is for requesting a rate increase. The committee does not believe the County has anything to say about their rates, but the rates should be included on their license renewal form. Tony will bring the license renewal form to the next committee meeting for review.
- B. WREMS Min/Max – A WREMS document was shared with the committee showing the 2015 state approved min/max numbers, and the current status. The committee discussed, whether this document should move forward as written, or are there adjustments to be made? The committee determined that

the minimum number for Aid-BLS should be changed from 5 to 3, the maximum number should remain at 6, and the current status numbers will not be filled in. (Brooks/McGarva) move to approve, and the motion carried with two members abstaining (Kaleiwahea/VanCamp).

- C. Continue/Discontinue use of Tablets – The general consensus is to eliminate using the tablets, but make sure electronic copies of the packet are still sent out at least one week in advance of the meeting.

VIII. GOOD OF THE ORDER –

- A. MCI Committee: The need for an MCI Committee needs to be added to the December Ops meeting agenda.
- B. Add the Clinical Agreement to the December Ops meeting agenda.
- C. Add the Levy Restoration presentation to the December Ops meeting agenda.

IX. ADJOURNMENT - 3:54 PM