

**THURSTON COUNTY MEDIC ONE  
OPERATIONS COMMITTEE ~ MEETING MINUTES  
EMERGENCY SERVICES CENTER  
January 5, 2017**

**PRESENT:** Steve Brooks, Scott LaVielle, Alex Christiansen, Mary Campbell, Dave Pearsall, Kathy Pace, Larry Fontanilla, Keith Flewelling, Brian VanCamp, Greg Wright, Amy Larson (ALT for Mason), Jody Halsey (ALT for Rife)

**ABSENT:** Jim Fowler, Russ Kaleiwahea

**EXCUSED:**

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

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

- 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** Chair Wright asked who had items to add to the agenda. Chief VanCamp would like to add a discussion on Fire Fighters and CPR (item F under New Business). Kurt Hardin would like to add a discussion on the Business Associate Agreement (item G under New Business). (LaVielle/Flewelling) move to approve the agenda as modified and the motion carried unanimously.
- III. **PUBLIC PARTICIPATION** – Chief Wright asked Mary Campbell if she will be representing private ambulances for 2017 and Tony Kuzma will be the alternate. This was confirmed and staff will make record of it.
- IV. **REVIEW AND APPROVAL OF MINUTES**
  1. Operations Committee – December 1, 2016 – **MSC** (LaVielle/Brooks) moved to approve as submitted, and the motion carried.
  2. EMS Council – Draft December 21, 2016 Mtg. (Informational Only)
- V. **COMMITTEE REPORTS**
  - A. WEST REGION – Pace/Campbell reported: the conference is scheduled for February 24<sup>th</sup> & 25<sup>th</sup> at Ocean Shores.
  - B. SUBCOMMITTEES
    1. Equipment Committee (EqC) – No report.
    2. Mass Casualty Incident (MCI) Committee – No report.
    3. Training Advisory Committee (TAC) – No report
    4. Transportation Resource Utilization Committee (TRU) – Chief Brooks reported: 1) working on improved real time tracking when both private ambulance companies reach a “no units available” status. Ambulance companies are working with their dispatch centers to get hardware resources so TCOMM can program a “button push” informing agencies, with MDTs, in real time when ambulances are not available. 2) Flewelling will facilitate a workshop which will allow more time for discussion and action on transportation resource issues. Hardin will take the lead with staff to get the stakeholders together for this workshop (include key contacts for Providence and Capital Medical Center). Recommendations will come back to the Operations Committee and ultimately policy issues to the EMSC.
    5. STAFF REPORT – Hardin reported: 1) an updated Medic One Fund Balance report was presented to the BOCC on January 4<sup>th</sup>, as information only. 2) Four candidates are scheduled to interview for the ALS Program Manager position on January 12<sup>th</sup>. 3) Medic One will present MPD contract requirements to Olympia Emergency Services (OES) on January 12<sup>th</sup>. Once OES gets back to staff the process will move through Ops and then to EMSC and ultimately to the BOCC.

**VI. OLD BUSINESS**

A. EMS Council Action Report – Wright reported: 1) EMSC would like to be updated on TRU reports. 2) Hardin provided EMSC with the same fund balance presentation he provided to Ops. 3) Surplus vehicles were discussed which is on the Ops agenda. 4) Falck ambulance would like to do non-verified, non-trauma transports. This does not require EMSC recommendation; however, they must apply for a license with the Operations Committee before moving to the BOCC for approval. Brooks stated this will not impact MIN/MAX.

B. Clinical Agreement/Rotation - Drewry reported: For training purposes, EMTs must complete and document 10 patient care contacts. Patient contacts may be a combination of clinical and field or field only. Currently the EMTs have been documenting 2 patient contacts at Providence; however Providence is requiring extensive background checks on the EMTs and the cost is not in the Medic One budget (\$22 - \$47 per EMT). In addition, there is a new clinical agreement that has been drafted and sent to the agencies for review and approval. The agreement is between Providence and Medic One, but must also be signed by the agencies. (VanCamp/LaVielle) move to approve EMTs receiving 2 patient contacts at Providence, for agencies who choose to do so, and recommending to the EMSC that Medic One conduct the process for finding available funds to pay for the background checks. If Medic One cannot find the funds then there will be a back billing to the departments. The motion carried unanimously.

## **VII. NEW BUSINESS**

A. Ferno Power Gurney - Hardin reported: The gurneys in the current units are no longer supported by the vendor so Medic One is in the process of replacing them. There is a pilot tomorrow for a representative from each agency to test the Ferno power gurney. The power gurney is designed to reduce or eliminate back injuries on the medics. The replacement is part of the ER&R plan, and part of the \$1.6 mil equipment replacement budget.

B. Appoint Nominations Committee - LaVielle/Pace will serve as the Nominations Committee and will report candidates at the February Ops meeting.

C. Surplus Vehicle Policy & Procedure – Wright reported: When the surplus vehicle matrix was modified, concern for a tie-breaker was realized. This produced the need for a tie-breaker policy which was presented to the EMSC. EMSC asked about a policy that speaks about the vehicle distribution and suggested the tie-breaker be a part of the surplus vehicle policy and procedure. Wright suggests to take the policy that was going to be the surplus vehicle matrix tie-breaker and make it the surplus vehicle policy. The policy purpose will say “Thurston County Medic One desires to make vehicles retired from front line and back-up ALS use available to other Thurston County agencies”. The policy statement will say “The surplus vehicle matrix consists of a scoring mechanism developed by Operations Committee to assign vehicles”. The title will be changed to “The Thurston County Medic One Operations Committee Surplus Vehicle Disposal Recommendations Assignment Matrix”. Foot notes will be added to the Matrix regarding ties; “Ties will be decided by which department has never received a surplus vehicle, and if needed, by which agency has had a surplus vehicle the longest”. Also a note will be added that says “Operations Committee will present results each time to the EMSC and may consider special requests outside of this process with consent of the EMSC”. Brooks suggests the policy and matrix use “Vehicle & Related Equipment” in the title. (LaVielle/Brooks) move to forward the policy and matrix to the EMSC and the motion carried unanimously.

D. AMR & Olympic Ambulance – Ambulance license applications are submitted to Medic One annually. The applications are presented to the Operations Committee and then forwarded to EMSC. If EMSC recommends, the applications are presented to the BOCC for their approval. (Brooks/LaVielle) move to approve forwarding the applications as presented, along with the verified rates, to the EMSC. The motion carried unanimously.

E. Fire Department Tier-I Support (Safety Pad) – Scott Brownell (Medic One Staff) supports Safety Pad; however due to the overwhelming amount of time involved with this support (mostly BLS), staff is recommending the agencies to establish a first level technical response for basic level troubleshooting. Scott also suggests the agencies assume some of the admin responsibilities for Safety Pad (i.e. adding/removing users, setting up passwords, etc.), and having a liaison for each shift. Chief VanCamp suggested staff provide easily accessible resource material to each agency. Staff recommends utilizing Medic One’s website,

[www.support.medic-one.thurston.wa.us](http://www.support.medic-one.thurston.wa.us), and staff will also create cheat sheets for the top 10 problems. Staff may also attach documentation to the back of the safety pad so the information is easily accessible. This discussion will be presented to the next Chief's meeting.

F. Fire Fighters & CPR – Chief VanCamp reported a question that came up asking if non-EMT Fire Fighters can perform CPR and use AED's. Brooks said all Fire Fighters are required to be CPR trained so why should there be a legal issue? Dr. Fontanilla doesn't see a reason why anyone can't do compressions. It is Brooks' understanding that AED's in public owned vehicles cannot be used by anyone who isn't certified to use them. Anna Lee suggested non-EMT's go thru the same quarterly training EMT's go through. Dr. Fontanilla encourages this but said it would be up to the Chiefs to mandate it.

G. Business Associates Agreement (BAA) – In 2015 every department was issued a BAA. Some of these have come back but there are still quite a few that haven't made it back to staff. Thurston County Risk Management has asked for a signed copy of the BAAs for each department by the end of this month. Because of the transmission of digital patient data, the agreement is required for HIPAA purposes. Staff handed out (2) original BAAs to the agencies who have not returned them from 2015 and asked to have them signed and returned both by the end of January. Agencies will receive a signed original for their files.

**VIII. GOOD OF THE ORDER** – Hardin reported: 1) The Disaster Medical Coordination Center (DMCC) was activated Tuesday night because St. Peter's Hospital and Capital Medical Center went to divert status. At one point in time St. Peter's had 101 patients in the E.R. waiting to be seen. As a result of the divert status there were several out of county transports. DMCC was de-activated Wednesday morning and then went to case by case. Notification process was discussed and a policy will be written. In the meantime Brooks suggested an email be sent to all Chiefs when DMCC has been activated and there is a diversion status.

**IX. ADJOURNMENT** - 3:21 PM