

THURSTON COUNTY MEDIC ONE  
OPERATIONS COMMITTEE ~ REGULAR MEETING  
**VIRTUAL ZOOM MEETING**

**AGENDA**

December 2, 2021 - 2:00 PM

- I. CALL TO ORDER/ROLL CALL
  - II. APPROVAL OF AGENDA
  - III. PUBLIC PARTICIPATION
  - IV. REVIEW AND APPROVAL OF MINUTES
    - A. Operations Committee November 4, 2021
    - B. EMS Council November 17, 2021 - (Informational Only)
  - V. COMMITTEE REPORTS
    - A. West Region EMS Council
    - B. Subcommittees
      - 1. Equipment Committee (EqC) – Chair or Representative
      - 2. Mass Casualty Incident (MCI) Committee – Chair or Representative
      - 3. Training Advisory Committee (TAC) – Chair or Representative
      - 4. Transportation Resource Utilization Committee (TRU) – Chair or Representative
      - 5. ePCR Committee – Chair or Representative
    - C. Staff Report - <https://www.thurstoncountywa.gov/m1/Pages/meetings.aspx>
  - VI. OLD BUSINESS

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- |    | ITEM                      | PRESENTER | EXPECTED OUTCOME |
|----|---------------------------|-----------|------------------|
| A. | EMS Council Action Report | VanCamp   | Information      |
| B. | Transport Issues          | Hardin    | Update           |
| C. |                           |           |                  |
- VII. NEW BUSINESS

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- |    | ITEM   | PRESENTER | EXPECTED OUTCOME |
|----|--|-----------|------------------|
| A. | 2022 Ambulance License Applications (AMR, Falck & Olympic Ambulance) | Hardin    | Discussion       |
| B. |  |           |                  |
- VIII. GOOD OF THE ORDER
  - IX. ADJOURNMENT

**This meeting is being held virtually. To attend this meeting, please follow the instructions below:**

**December 2, 2021, 2:00 (PDT)**

**You can also dial in using your phone.**

Join Zoom Meeting  
<https://us02web.zoom.us/j/86297865054?pwd=RDZGUVJYcIRZbFpEamd2OEFHeUFtUT09>

Meeting ID: 862 9786 5054  
Passcode: 634954

**Dial by your location**  
+1 312 626 6799 US  
+1 646 558 8656 US  
Meeting ID: 862 9786 5054  
Passcode: 634954

*Persons with hearing or speaking impairments can call Washington Relay Service at 711 or 1-800-833-6388*

**THURSTON COUNTY MEDIC ONE  
OPERATIONS COMMITTEE ~ MEETING MINUTES  
VIRTUAL  
November 4, 2021**

**PRESENT:** Brian VanCamp, Larry Fontanilla, Wendy Rife, Steve Brooks, Karen Weiss, Chris Clem, Mark Gregory, Brian Hurley, Keith Flewelling, Russ Kaleiwahea, Mindy Churchwell, Mark John, Dave Johnson

**ABSENT:** LouAnn Morriss

**EXCUSED:**

**GUESTS:** Jennifer Schmidt, Leonard Johnson

**STAFF:** Kurt Hardin, Sandra Bush, Ben Miller-Todd

- I. CALL TO ORDER/ROLL CALL** – The meeting was called to order at 2:00.
- II. APPROVAL OF AGENDA –MSC** – New Business, Item A, Ambulance License Applications, was added to the agenda. (Brooks/Flewelling) move to approve the agenda as amended, and this carried.
- III. PUBLIC PARTICIPATION** – None
- IV. REVIEW AND APPROVAL OF MINUTES**
1. Operations Committee – October 7, 2021 – (Flewelling/Brooks) move to approve and this carried.
  2. EMS Council – No October meeting
- V. COMMITTEE REPORTS**
- A. **West Region EMS Council** – Clem reported highlights from the October 25<sup>th</sup> board meeting: The cadaver lab was successful with good participation, and a small profit was netted which will be used to support future training programs. Budget amendments were also made which brought them up into the black. Chair VanCamp asked if there will be a 2022 WREMS conference and Clem believes there will not be due to the uncertainty of COVID, however because the cadaver lab was successful, if WREMS is able to hold a number of training throughout the year, a lot of the same material can be delivered that was being done at the conference.
- B. **Subcommittees**
1. Equipment Committee (EqC) – There has not been a meeting since the last Ops meeting, however Miller-Todd reported that Medic One will continue purchasing nasopharyngeal airways independently, and not as a kit. Also, medics were notified of an ET Tube recall, and the Equipment Committee has decided to continue supporting the Envo-Mask parts and filters.
  2. Mass Casualty Incident (MCI) Committee – No meeting, no report.
  3. Training Advisory Committee (TAC) – Clem reported: There has been progress on the 2022 OTEP plan and working on job descriptions for evaluators that each agency would be putting forward as well as the lead evaluator position. TAC has also been working on the development of the evaluators which could eliminate the requirement of being an instructor for one year, prior to being an evaluator, and substitute it with a workshop and significant mentoring and requirements on the back end.
  4. Transportation Resource Utilization Committee (TRU) / Hospital Diversion – Miller-Todd reported: 1) The HPU will continue operating on Mondays and Fridays through December 31, 2021, and then re-evaluate it. AMR has been struggling with the vaccine mandate and they've have had a couple of on the job injuries, which put them down about 6 people, so they are trying to staff back up. 2) The PSPH entry way process was discussed. The MOUs sent to all agencies need to be signed and returned to Medic One. 3) There was a miscommunication that came out the weekend of October 30<sup>th</sup> between AMR dispatch and TOCMM regarding AMR availability. 4) The dashboard has been very stable, it's the messaging and the fact that there is no longer 10,000 at the end of the URL anymore that has been unstable in the process. If agencies have the URL cached in the browser, or saved, removed the 10,000 from the end. Miller-Todd will send out the correct URL.
  5. ePCR Committee – All tablets are now serviced and were sent back out. There will be a battery replacement after the first of the year and the old battery will be placed in the keyboard.
- C. **Staff Report** – Staff report is located on the website at – <https://www.thurstoncountywa.gov/m1/Pages/meetings.aspx>

**VI. OLD BUSINESS**

- A. EMS Council Action Report - No October meeting.

- B. Transport Issues – Hardin reported: Currently the HPU is staffed Mondays and Fridays and this will be extended through December 31<sup>st</sup>. Hardin asked at what point do we stand down the HPU, which was designed to be a surge capacity, and it's been running since August. TRU will evaluate this and report back to Ops in January. Chair VanCamp will brief the EMSC at the November meeting.
- C. L/E & EMS Intelligence Sharing and Pre-Event Communications – Dave Johnson with the Sheriff's department will send someone to the Fire Chiefs Association meeting for discussion on communication between L/E and EMS regarding potentially violent situations. Flewelling asked for TCOMM to be included in these discussions.
- D. COVID-19 Vaccine Mandates – Hardin reported: Based on a survey Medic One sent out to the agencies, there were no agencies who required additional resources from the State. L&I criteria on the mandate will come out in December and OSHA criteria will come out in January, so additional information will be provided once the new criteria comes out.

## **VII. NEW BUSINESS**

- A. Ambulance License Applications – The 2022 applications will be reviewed at Ops in December and acted on in January. Future applications will be reviewed by Ops in November and acted on in December. The 2022 applications for review will include AMR, Olympic and Falck.

## **VIII. GOOD OF THE ORDER** – Hardin said there has been some discussion and news reports that PSE and the City of Olympia will be doing some construction work around Lilly Rd, and it appears this will have minimal impact on EMS response vehicles transporting to PSPH.

## **IX. ADJOURNMENT** – (Brooks/Clem) move to adjourn at 2:42, and this carried.

**Thurston County Medic One  
Emergency Medical Services Council – Regular Meeting  
Virtual – Zoom Meeting  
November 17, 2021**

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**PRESENT:** Cindy Hambly, Frank Kirkbride, John Ricks, Margaret McPhee, Brian VanCamp, Stan Moon, Paul Perz, Angela Jefferson, Sheila Fay, Harry Miller, Lenny Greenstein

**ABSENT:** Renata Rollins, Wayne Fournier

**EXCUSED:** Larry Fontanilla, Gary Edwards

**GUESTS:** Chris Clem, Shawn Crimmins, Alessandra Ramirez, Cara Abubakar, Dan Bivens, Brian Hurley

**STAFF:** Kurt Hardin, Sandra Bush, Ben Miller-Todd, Joy Miller, Daphne Reaves, Anna Lee Drewry

**CALL TO ORDER/ROLL CALL** – Chair Moon called the regular meeting of the Emergency Medical Services Council (EMSC) to order at 3:30 PM.

- I. APPROVAL OF AGENDA – MSC** – Chair Moon made a recommendation to move New Business, Item A (Concierge Care Advisors) to Public Participation. (Ricks/Kirkbride) move to approve the agenda as amended, and this carried.
- II. PUBLIC PARTICIPATION** – Alessandra Ramirez and Cara Abubakar with Concierge Care Advisors provided a summary of what Concierge Care provides. Concierge Care is a senior care and transitions company partnering with hospitals, skilled nursing facilities, clinics, physicians, etc. for referrals on seniors who are needing a transition from home to assisted living. The council recommended Alessandra to reach out to the Fire Chiefs Association, Fire Commissioners Association, Senior Services of South Sound, and large retirement communities in the area (Panorama, Jubilee, etc.). Concierge's website is [www.conciergecareadvisors.com](http://www.conciergecareadvisors.com). Alessandra's phone number is 206-747-3568 and her email is [alessandra@conciergecareadvisors.com](mailto:alessandra@conciergecareadvisors.com).
- III. REVIEW AND APPROVAL OF MINUTES**
  - A. EMS COUNCIL – September 15, 2021 (October meeting was cancelled) (Kirkbride/Ricks) move to approve the minutes, and this carried.
  - B. OPERATIONS COMMITTEE – October 7, 2021, November 4, 2021 (informational only)
- IV. COMMITTEE REPORTS**
  - A. **OPERATIONS COMMITTEE:** VanCamp reported: 1) Medic One has been struggling with filling Instructor and Evaluator positions for EMT classes. TAC's recommended plan to Ops is to rely more heavily on individual agencies for instructors and lead instructors. 2) There was continued discussion on transport issues, which is on today's EMSC meeting agenda. 3) There was discussion about communications and relations between LE and EMS, and the sharing of intelligence. LE has been invited to the December Fire Chief's Association meeting for further discussion. 4) EMS calls to the assisted living facilities is on today's EMSC meeting agenda. 5) There is a planned MCI drill regarding Amtrack since it is now being moved from the Point Defiance route to the new route through Tacoma. This will most likely be a table-top exercise and will focus on the needs and capabilities of Thurston County. 6) The TRU committee was meeting weekly for discussion on the transport issues. Staffing the HPU and PSPH breezeway, as well as private ambulance companies staffing up, has improved the transport delay issue. The issue still exists; however, it is less critical, therefore TRU will go back to meeting monthly. 7) 2022 ambulance license applications will be reviewed at the December Ops meeting, acted on at the January Ops meeting and presented to the EMSC in January.
  - B. **WEST REGION:** Perz reported: A couple of months ago a committee was appointed to review vacancies on the WREMS council. The committee discussed bringing on 6 more individuals (surgeon, emergency room nurse, elected official, OPD rep, emergency management rep, and a dispatch rep), making representation as broad as possible. The next WREMS meeting is December 1<sup>st</sup>.
  - C. **STAFF REPORT:** Staff report is available on the website. [Thurston County | Medic One | Committee Meeting](#)

[Information \(thurstoncountywa.gov\)](http://thurstoncountywa.gov). Hardin pointed out the final OTEP topic for 2021 is MCI and was released on October 31<sup>st</sup>. This will be an on-line only class for EMTs.

**V. OLD BUSINESS**

- A. Governor's Vaccine Mandate – Hardin reported: There was minimal impact to Thurston County EMS agencies, and it was not significant enough to request additional resources from the state. There has been discussion about the Governor requiring companies with 50 or more employees to be vaccinated.
- B. Long Term Care Facility EMS Responses – VanCamp reported: This was discussed at the Ops and Fire Chief's meeting, and those agencies affected by this are already addressing it. Chair Moon asked VanCamp to ask Ops if there is anything the EMSC can do to help support a county wide policy.
- C. Hospital Entry/Ambulance Delays/HPU – The HPU is mostly staffed by agency personnel, however the Ops committee (thru TRU) is looking at Medic One's role with the HPU and identifying how to keep Medic One from being in an operational capacity. Clem reported staffing improvements with Olympic Ambulance.

**VI. NEW BUSINESS**

- A. 2022-2023 Budget Update – Hardin said the 2022-2023 budget, recommended by the EMSC, is proceeding along and final action by the BoCC is scheduled for December 17<sup>th</sup>.
- B. 3<sup>rd</sup> Qtr 2021 Budget vs. Actual – This was presented by Joy Miller, which shows an overall used rate of 66%. Hardin reminded the council that because we are in the last quarter, we will have 4 months of billing because December bills will be paid in January, which is the 13<sup>th</sup> month. It was also pointed out that under BLS Salaries/Benefits, on the summary sheet, it says, "This decrease" and it should say "This increase".

**VII. PUBLIC PARTICIPATION – None**

**VIII. GOOD OF THE ORDER** – Chair Moon said due to an expected light agenda, the December EMSC meeting has been cancelled.

**IX. ADJOURNMENT** – Meeting adjourned at 4:18.



## THURSTON COUNTY BUSINESS LICENSE APPLICATION

### *AMBULANCE LICENSE – 2022*

<b>APPLICATION FEE: \$100.00</b>  <b><i>Please make checks payable to:</i></b> <b>THURSTON COUNTY AUDITOR</b>	<i>Medic One Use Only</i>  \$ _____ <input type="checkbox"/> Check # _____ Rec'd _____ <input type="checkbox"/> Cash _____ <small>Date &amp; Initial</small>
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**1. COMPANY (Thurston County Code [TCC] Chapter 6.16.030(B))**

Name under which the ambulance service will be operated within Thurston County.

NAME American Medical Response Ambulance Services Inc.  
ADDRESS 1210 Eastside St SE, Olympia, WA 98501  
ADDRESS \_\_\_\_\_  
BUSINESS PHONE 206-444-4444 EMERGENCY PHONE 253-405-7094

**2. CORPORATION/PARTNERSHIP (TCC 6.16.030(C))**

Names and addresses of corporate officers and directors, or names and addresses of general or limited partners.

NAME Edward Van Horne  
TITLE COO  
ADDRESS 6363 Fiddlers Green Greenwood Village, CO 80111  
  
NAME Randall Strozyk  
TITLE Senior Vice President- Executive Operations  
ADDRESS 13075 Gateway Drive #100 Seattle, WA 98168  
  
NAME \_\_\_\_\_  
TITLE \_\_\_\_\_  
ADDRESS \_\_\_\_\_

**3. INSURANCE CARRIER (TCC 6.16.040)**

Name and address of insurance carrier. Attach a copy of current Certificate of Insurance.

NAME AON Risk Services Central, Inc.  
ADDRESS 1650 Market Street, Suite 1000 Philadelphia, PA 19103  
BUSINESS PHONE 866-283-7122

**MUST COMPLY WITH AMBULANCE ORDINANCE (TCC 6.16.040) BEFORE LICENSE WILL BE ISSUED**

**4. LOCATIONS (TCC 6.16.030(E))**

Locations (addresses) from which the ambulance services is intended to operate within Thurston County.

1) 1210 Eastside St. SE #100 Olympia, WA 98501

2) 300 Kenyon St. NW #B6, Olympia, WA 98502

3)

4)

5)

6)

**5. LEVEL OF SERVICE (i.e. ALS (Advanced Life Support), BLS (Basic Life Support), etc.)**

BLS

**6. TYPE OF TRANSPORT (i.e. trauma, non-trauma, inter-facility transport, etc.)**

Trauma verified and interfacility

**7. DESIGNATING FEATURES OF AMBULANCES (TCC 6.16.030(D))**

Color scheme, insignia, name, monogram or other distinguishing characteristics used to designate applicant's ambulances.

White ambulance with red, white and blue AMR logo

**8. VEHICLES (TCC 6.16.030(D))**

List requested information for each ambulance to be operated within Thurston County.

MAKE	MODEL	YEAR	VIN #	LICENSE #
Ford	E350	2011	1FDWE3FS2BDA19825	C76587M
Ford	E350	2010	1FDWE3FS7ADA34660	C22564D
Ford	E350	2012	1FDWE3FS8CDB31448	B68611X
Ford	E350	2016	1FDWE3FS1GDC53090	C56102H
Ford	E350	2010	1FDWE3FS7ADA99430	C22571D
Ford	E350	2003	1FDXE45F33HA46122	C89838J
Ford	E350	2019	1FDWE3FS0KDC66146	C92036V
Ford	Expedition	2007	1FMFU16517LA01654	231YKW

**7. LICENSED MEDICAL ATTENDANTS (TCC 6.16.030(F))** Number to be initially employed: 20**8. EMPLOYEES (TCC 6.16.030(F))**

List of current employees and emergency medical technician certification for such employees including the certification expiration date.

Attach a copy of each employee's current Washington State EMS Certification card.

A. Employee list shall be updated quarterly and submitted in writing to:

THURSTON COUNTY MEDIC ONE  
Attn: Sandra Bush  
2703 PACIFIC AVE SE, SUITE C  
OLYMPIA WA 98501

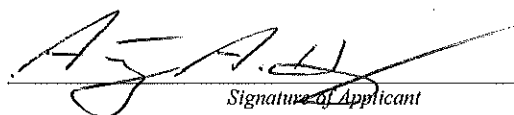
**9. RATES (TCC 6.16.050)**

Schedule of rates to be charged for services for the duration of the calendar year.

A. Schedule of rates must be filed with Thurston County Medic One thereafter on an annual basis (on or before the first day of December of year proceeding the year that rates apply).

Any revisions during the calendar year shall also be filed with the Medic One office at least thirty (30) days prior to the rate change becoming effective.

**THIS APPLICATION DOES NOT PRECLUDE CITY AND STATE LICENSING REQUIREMENTS**

  
\_\_\_\_\_  
*Signature of Applicant*

Operations Manager

11/22/2021

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

HOME ADDRESS

9506 Phillips Rd SE Port Orchard, WA 98367

BUSINESS PHONE

253-405-7094

HOME PHONE

**APPROVALS**

THURSTON COUNTY MEDIC ONE  
EMS COUNCIL

BOARD OF COUNTY COMMISSIONERS  
Thurston County, Washington

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice-Chair

ATTEST:

\_\_\_\_\_  
Commissioner

\_\_\_\_\_  
Clerk of the Board

\_\_\_\_\_  
Date





# EMS Online Agency Roster

Report Date: 11/22/2021 1:59:21 PM

Agencies Selected: 34X01-American Medical Response (Expr. 05/31/2022)

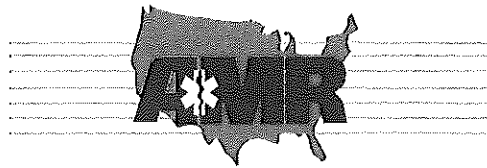
Name	Credential Number	Expiration Date	Agency Name	Primary	IVTherapy Training	Supraglottic	ESE	SEI
Barndt, Travis Justin	EMT.ES.60905 215	5/31/2022 12:00:00 AM	34X01-American Medical Response	Yes		04/01/2020		
Bernard, Desiree	EMT.ES.60988 330	1/31/2023 12:00:00 AM	34X01-American Medical Response	No				
Carroll, Casey Michael	EMT.ES.60926 412	8/31/2022 12:00:00 AM	34X01-American Medical Response	Yes		04/02/2020		
Cavaness, Jonathan Andrew	EMT.ES.61234 102	5/31/2025 12:00:00 AM	34X01-American Medical Response	Yes				
de Bont, Sebastian Wilhelmus	EMT.ES.60763 517	8/31/2023 12:00:00 AM	34X01-American Medical Response	Yes		04/22/2017		
de Bont, Sebastian Wilhelmus	EMT.ES.60763 517	8/31/2023 12:00:00 AM	34X01-American Medical Response	No		04/22/2017		
Dods, Amanda Joy	EMT.ES.60500 488	5/31/2024 12:00:00 AM	34X01-American Medical Response	Yes		04/02/2020		
Getchman, Darrin Leslie	EMT.ES.60828 657	5/31/2024 12:00:00 AM	34X01-American Medical Response	Yes		04/02/2020		
Gilbert, Andrew Grant	EMT.ES.61174 541	5/31/2024 12:00:00 AM	34X01-American Medical Response	Yes				
Grimm, Jonathan Marc	EMT.ES.60931 597	1/31/2023 12:00:00 AM	34X01-American Medical Response	Yes				
Klotz, Tobias David	EMT.ES.61229 507	5/31/2025 12:00:00 AM	34X01-American Medical Response	Yes		08/14/2021		
Kruse, Timothy R	EMT.ES.60929 504	5/31/2025 12:00:00 AM	34X01-American Medical Response	Yes				
Lanter, Sarah Elizabeth	EMT.ES.61160 770	5/31/2024 12:00:00 AM	34X01-American Medical Response	Yes		12/05/2020		
Mangiaracina, Mikela Hardy	EMT.ES.61117 593	5/31/2024 12:00:00 AM	34X01-American Medical Response	Yes				
Moe, Andrew Alfred	EMT.ES.60546 291	1/31/2022 12:00:00 AM	34X01-American Medical Response	No				
Pauley, Mark Allen	EMT.ES.60879 219	7/31/2024 12:00:00 AM	34X01-American Medical Response	No		04/23/2018		
Sawyer, Jeremy Stewart	EMT.ES.60863 731	1/31/2022 12:00:00 AM	34X01-American Medical Response	Yes		04/01/2020		

## EMS Online Agency Roster

Report Date: 11/22/2021 1:59:21 PM

Agencies Selected: 34X01-American Medical Response (Expr. 05/31/2022)

Name	Credential Number	Expiration Date	Agency Name	Primary	IVTherapy Training	Supraglottic	ESE	SEI
Wagoner, Jedidiah Joseph	EMT.ES.61179 509	4/30/2025 12:00:00 AM	34X01-American Medical Response	No		04/17/2021		



## AMERICAN MEDICAL RESPONSE

Tony Kuzma  
Operations Manager, Rainier Division

253-405-7094  
fax 360-736-8081

**Date:** 11/22/2021

**To:** Thurston County Medic One

**From:** Tony Kuzma

**Subject:** AMR Transport Rates for 2022

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Please consider this American Medical Response's official notice of a rate change for 2022. Our new rates will be a base rate of \$1,268 and \$31.75/mile starting January 1, 2022.

Sincerely,

Anthony Kuzma

Operations Manager  
253-405-7094

*Patient Focused*

*Customer Centered*

*Caregiver Inspired*



## THURSTON COUNTY BUSINESS LICENSE APPLICATION

### *AMBULANCE LICENSE – 2022*

**APPLICATION FEE: \$100.00**

***Please make checks payable to:  
THURSTON COUNTY AUDITOR***

*Medic One Use Only*

\$ \_\_\_\_\_ ☐ Check # \_\_\_\_\_

Rec'd \_\_\_\_\_ ☐ Cash \_\_\_\_\_  
Date & Initial

**1. COMPANY (Thurston County Code [TCC] Chapter 6.16.030(B))**

Name under which the ambulance service will be operated within Thurston County.

NAME FALCK NORTHWEST  
ADDRESS 5102 20<sup>TH</sup> ST E, SUITE 101  
ADDRESS SUITE 101  
BUSINESS PHONE 425-582-1516 EMERGENCY PHONE 425-248-4100

**2. CORPORATION/PARTNERSHIP (TCC 6.16.030(C))**

Names and addresses of corporate officers and directors, or names and addresses of general or limited partners.

NAME ADAM KOONTZ  
TITLE PRESIDENT & CEO  
ADDRESS 1517 W BRADEN COURT ORANGE CA 92868

NAME MIRA NIELSEN  
TITLE CFO  
ADDRESS 1517 W BRADEN COURT ORANGE CA 92868

NAME BRIAN RICHMOND  
TITLE SECRETARY  
ADDRESS 9309 CALIFORNIA DRIVE SW SEATTLE WA 98135

**3. INSURANCE CARRIER (TCC 6.16.040)**

Name and address of insurance carrier. Attach a copy of current Certificate of Insurance.

NAME MCGRIFF INSURANCE SERVICES  
ADDRESS 3400 OVERTON PARK DRIVE SE SUITE 300 ATLANTA GA 30339  
BUSINESS PHONE 404-497-7500

**MUST COMPLY WITH AMBULANCE ORDINANCE (TCC 6.16.040) BEFORE LICENSE WILL BE ISSUED**

**4. LOCATIONS (TCC 6.16.030(E))**

Locations (addresses) from which the ambulance services is intended to operate within Thurston County.

1) 400 UNION AVE SE SUITE 200 OLYMPIA WA 98501

2)

3)

4)

5)

6)

**5. LEVEL OF SERVICE (i.e. ALS (Advanced Life Support), BLS (Basic Life Support), etc.)**

BLS AND CRITICAL CARE TRANSPORT

**6. TYPE OF TRANSPORT (i.e. trauma, non-trauma, inter-facility transport, etc.)**

INTER-FACILITY

**7. DESIGNATING FEATURES OF AMBULANCES (TCC 6.16.030(D))**

Color scheme, insignia, name, monogram or other distinguishing characteristics used to designate applicant's ambulances.

WHITE, BLACK WITH RED FALCON

**8. VEHICLES (TCC 6.16.030(D))**

List requested information for each ambulance to be operated within Thurston County.

MAKE	MODEL	YEAR	VIN #	LICENSE #
CHEVROLET	3500	2015	1GB3G2CL0F1241708	C65830E

**7. LICENSED MEDICAL ATTENDANTS (TCC 6.16.030(F))** Number to be initially employed: 9

**8. EMPLOYEES (TCC 6.16.030(F))**

List of current employees and emergency medical technician certification for such employees including the certification expiration date.

Attach a copy of each employee's current Washington State EMS Certification card.

A. Employee list shall be updated quarterly and submitted in writing to:

THURSTON COUNTY MEDIC ONE  
Attn: Sandra Bush  
2703 PACIFIC AVE SE, SUITE C  
OLYMPIA WA 98501

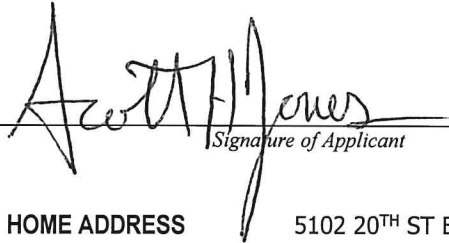
**9. RATES (TCC 6.16.050)**

Schedule of rates to be charged for services for the duration of the calendar year.

A. Schedule of rates must be filed with Thurston County Medic One thereafter on an annual basis (on or before the first day of December of year proceeding the year that rates apply).

Any revisions during the calendar year shall also be filed with the Medic One office at least thirty (30) days prior to the rate change becoming effective.

**THIS APPLICATION DOES NOT PRECLUDE CITY AND STATE LICENSING REQUIREMENTS**

	CLINICAL MANAGER	11/23/2021
<i>Signature of Applicant</i>	<i>Title</i>	<i>Date</i>
HOME ADDRESS	5102 20 <sup>TH</sup> ST E, SUITE 101 FIFE WA 98424	
BUSINESS PHONE	425-582-1516	HOME PHONE 425-582-1516

**APPROVALS**

THURSTON COUNTY MEDIC ONE  
EMS COUNCIL

BOARD OF COUNTY COMMISSIONERS  
Thurston County, Washington

Chair

Chair

Date

Vice-Chair

ATTEST:

Commissioner

Clerk of the Board

Date



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
09/28/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> McGriff Insurance Services, Inc. 3400 Overton Park Drive SE Suite 300 Atlanta, GA 30339	<b>CONTACT NAME:</b> Vera Neville	
	<b>PHONE (A/C, No, Ext):</b> 404 497-7500	<b>FAX (A/C, No):</b>
<b>INSURED</b> Falck Northwest Corp. 1517 West Braden Court Orange, CA 92868	<b>E-MAIL ADDRESS:</b> vneville@mcgriff.com	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A :</b> Lexington Insurance Company	
	<b>INSURER B :</b> Greenwich Insurance Company	
	<b>INSURER C :</b> XL Insurance America, Inc.	
	<b>INSURER D :</b>	
<b>INSURER E :</b>		
<b>INSURER F :</b>		

**COVERAGES** **CERTIFICATE NUMBER:** S5GBGQA7 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:		X	6798591	10/01/2021	10/01/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 25,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
B	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			RAD500047606	10/01/2021	10/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 3,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <b>EXCESS LIAB</b> DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/>						EACH OCCURRENCE \$ AGGREGATE \$ \$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A	N/A	RWD3000955-06	10/01/2021	10/01/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 \$ \$ \$ \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Pierce County is included as an Additional Insured as respects to General Liability where required by written contract.

## CERTIFICATE HOLDER

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



Last Name	First Name	Certification		Expiration Date	Other		Expiration Date
		Level	Number		License/Cert	Number	
Frasier	David A.	EMT	ES00119823	3/31/2024	EMS Evaluator	ES000003981	3/31/2024
Everdell	Paula Jean	EMT	ES01167204	3/31/2024	EMS Evaluator	ES000006028	3/30/2024
Fitzgerald	Jake Ronald	EMT	ES61182651	3/31/2025	N/A		
Lara-Castandea	Irvin A.	EMT	ES61191739	3/31/2025	N/A		
Jones	Scott H.	EMT	ES01173059	3/31/2024	EMS Evaluator	ES61213924	3/31/2024
Doyle	Lance William	EMT	ES60523268	3/31/2024	Registered Nurse	RN00150444	12/18/2022
Blankenbijn	Robin H.	EMT	ES60167447	3/31/2024	Registered Nurse	RN00132431	6/22/2022
Pirkey	Sarina Joy	EMT	ES60888703	1/31/2022	Registered Nurse	RN00106288	4/4/2022
Atkins	Matthew	EMT	ES61008060	1/31/2023	Registered Nurse	RN60295215	6/7/2022

**FALCK NORTHWEST**  
**AMBULANCE TRANSPORT RATES**

ALS Non-emergency Level 1	\$2,429.46
ALS Emergency Level 1	\$2,532.60
BLS Non-emergency	\$2,257.20
BLS Emergency	\$2,133.00
ALS 2	\$2,779.92
SCT	\$5,922.18
ALS/BLS Mileage	\$38.02 per loaded mile

Falck NW will bill patients insurance and accepts assignment for Medicare and Medicaid patients.



## THURSTON COUNTY BUSINESS LICENSE APPLICATION

### AMBULANCE LICENSE – 2022

**APPLICATION FEE: \$100.00**

***Please make checks payable to:***  
**THURSTON COUNTY AUDITOR**

*Medic One Use Only*

\$ \_\_\_\_\_ ☐ Check # \_\_\_\_\_

Rec'd \_\_\_\_\_ ☐ Cash \_\_\_\_\_  
Date & Initial

**1. COMPANY (Thurston County Code [TCC] Chapter 6.16.030(B))**

Name under which the ambulance service will be operated within Thurston County.

NAME	Olympic Ambulance		
ADDRESS	1205 Ruddell Rd SE		
ADDRESS	Lacey, WA 98503		
BUSINESS PHONE	360-459-5680	EMERGENCY PHONE	360-461-3105

**2. CORPORATION/PARTNERSHIP (TCC 6.16.030(C))**

Names and addresses of corporate officers and directors, or names and addresses of general or limited partners.

NAME	JD Fuiten
TITLE	President
ADDRESS	5475 NE Dawson Creek Dr, Hillsboro, OR 97124
NAME	Shawn Baird
TITLE	Chief Operating Officer
ADDRESS	5475 NE Dawson Creek Dr, Hillsboro, OR 97124
NAME	Chris Clem
TITLE	Regional Director
ADDRESS	1205 Ruddell Rd SE, Lacey, WA 98503

**3. INSURANCE CARRIER (TCC 6.16.040)**

Name and address of insurance carrier. Attach a copy of current Certificate of Insurance.

NAME	Admiral Insurance Company
ADDRESS	P.O. Box 1347, Port Angeles, WA 98362
BUSINESS PHONE	360-457-1144

**MUST COMPLY WITH AMBULANCE ORDINANCE (TCC 6.16.040) BEFORE LICENSE WILL BE ISSUED**

**4. LOCATIONS (TCC 6.16.030(E))**

Locations (addresses) from which the ambulance services is intended to operate within Thurston County.

- 1) 1205 Ruddell Rd SE, Lacey, WA 98503
- 2) 1541 Vista Loop SW, 33-104, Tumwater, WA 98512
- 3) 10910 Yelm Hwy SE. Olympia, WA 98513
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_
- 6) \_\_\_\_\_

**5. LEVEL OF SERVICE (i.e. ALS (Advanced Life Support), BLS (Basic Life Support), etc.)**

BLS 911 and Interfacility. ALS Interfacility Only

**6. TYPE OF TRANSPORT (i.e. trauma, non-trauma, inter-facility transport, etc.)**

All types of 911 and Interfacility, Trauma and Non-Trauma patients

**7. DESIGNATING FEATURES OF AMBULANCES (TCC 6.16.030(D))**

Color scheme, insignia, name, monogram or other distinguishing characteristics used to designate applicant's ambulances.

White with blue stripes and Star of Life. Units are marked with blue lettering. Unit numbers are on front fenders and rear doors, and ambulance designator placards are on rear door

**8. VEHICLES (TCC 6.16.030(D))**

List requested information for each ambulance to be operated within Thurston County.

MAKE	MODEL	YEAR	VIN #	LICENSE #
See Attached				

**7. LICENSED MEDICAL ATTENDANTS (TCC 6.16.030(F))** Number to be initially employed: 63

**8. EMPLOYEES (TCC 6.16.030(F))**

List of current employees and emergency medical technician certification for such employees including the certification expiration date.

Attach a copy of each employee's current Washington State EMS Certification card.

A. Employee list shall be updated quarterly and submitted in writing to:

THURSTON COUNTY MEDIC ONE  
Attn: Sandra Bush  
2703 PACIFIC AVE SE, SUITE C  
OLYMPIA WA 98501

**9. RATES (TCC 6.16.050)**

Schedule of rates to be charged for services for the duration of the calendar year.

A. Schedule of rates must be filed with Thurston County Medic One thereafter on an annual basis (on or before the first day of December of year proceeding the year that rates apply).

Any revisions during the calendar year shall also be filed with the Medic One office at least thirty (30) days prior to the rate change becoming effective.

**THIS APPLICATION DOES NOT PRECLUDE CITY AND STATE LICENSING REQUIREMENTS**

  
\_\_\_\_\_  
*Signature of Applicant*

Regional Director

11/22/2021

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

**HOME ADDRESS**

6612 Brinkwood St NE, Olympia, WA 98506  
\_\_\_\_\_

**BUSINESS PHONE**

360-459-5680  
\_\_\_\_\_

**HOME PHONE**

360-461-3105  
\_\_\_\_\_

**APPROVALS**

**THURSTON COUNTY MEDIC ONE  
EMS COUNCIL**

**BOARD OF COUNTY COMMISSIONERS  
Thurston County, Washington**

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice-Chair

ATTEST:

\_\_\_\_\_  
Commissioner

\_\_\_\_\_  
Clerk of the Board

\_\_\_\_\_  
Date





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/20/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION** IS **WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Fryer Insurance Agency Inc. PO Box 1347 Port Angeles WA 98362	<b>CONTACT NAME:</b> Brenda DeChant	
	<b>PHONE (A/C, No, Ext):</b> 360-683-7988 <b>FAX (A/C, No):</b> 360-683-2508	
	<b>E-MAIL ADDRESS:</b> fryer.sq@fryerins.com	
	<b>INSURER(S) AFFORDING COVERAGE</b>	<b>NAIC #</b>
	<b>INSURER A:</b> Admiral Insurance Company	
<b>INSURED</b> Olympic Ambulance Inc. Bremerton Ambulance Inc. Olympic Oxygen Service Sequim WA 98382	<b>INSURER B:</b> Progressive	24260
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES****CERTIFICATE NUMBER:** 370652852**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CO000000290	6/1/2021	6/1/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
B	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY			CPW68739771	7/15/2021	7/15/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liability			CO000000290	6/1/2021	6/1/2022	Per Claim Aggregate \$1,000,000 \$3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Operations of the above named insured. Also to include 540 W. Hendrickson Rd; Sequim, WA 98382. CERTIFICATE ONLY  
Also to include 540 W Hendrickson Rd. Sequim, WA 98382. Certificate only.

**CERTIFICATE HOLDER****CANCELLATION**

Olympic Ambulance	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE <i>Brenda DeChant</i>

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MERCEDES SPRINTER 2500	2012	WD3PE7CCXC5664743	B11954X
FORD E-350	2006	1FDWE35P16DB31437	C88858L
GMC G4500	2015	1GD675CL1F1222053	C74295D
MERCEDES SPRINTER 2500	2014	WD3PE7CC1E5878068	APW4602
FORD E-350	2010	1FDSS3EP9ADA34969	ABY2650
FORD E-450	2008	1FDXE45P48DB56913	395-ZOD
FORD TRANSIT 250	2015	1FDBW2XM0FKB29635	C47843F
GMC SAVANA G4500	2011	1GD372CL7B1181097	AFP6902
GMC SAVANA G4500	2015	1GD675CL5F1220015	C74294D
FORD TRANSIT 250	2017	1FDYR2XM2HKA28598	C96947K
FORD E-350	2010	1FDWE3FP8ADA27955	AFP6903
MERCEDES SPRINTER 2500	2014	WD3PE7CCXE5878067	APW4601
FORD TRANSIT 350	2020	1FDBW1XG6LKA31788	C18372U
Ford F-350	2021	1FDRF3HT9MED59700	BZJ3386



**Olympic Ambulance Thurston 2022 Rates**

	Base	\$ 1,218.80
	Mileage	\$ 25.36



**OLYMPIC AMBULANCE THURSTON COUNTY  
EMS PROVIDER ROSTER**

<b>NAME</b>	<b>LEVEL</b>	<b>CERTIFICATION NUMBER</b>	<b>CERTIFICATION EXPIRATION</b>
Adams, Andrew	EMT	ES.01176192	5/31/2023
Allen, Jonathan	EMT	ES.60717778	5/31/2024
Andrade, Nikoly	EMT	ES.61073524	1/31/2024
Arbuckle, Gary	EMT/PM	ES.60429818	5/31/2023
August, Craig	EMT/PM	ES.60828670	1/31/2025
Berry, Sierra	EMT	ES.61231644	5/31/2025
Bickett, Jerry	EMT	ES.00127727	1/31/2024
Brock, Amber	EMT	ES.60789914	5/31/2024
Brown, Hadley	EMT	ES.61100857	11/30/2023
Brown, Trevor	EMT	ES.61117656	5/31/2024
Buckner, Edward	EMT	ES.60596741	1/31/2022
Bushaw, Bladden	EMT	ES.61000481	1/31/2023
Clem, Chris	Admin/EMT	ES.60537559	5/31/2024
Cook, Emilee	EMT	ES.61036066	1/31/2023
Diaz, Mark	EMT	ES.61188282	5/31/2025
Dulaney (Watckins), Melissa	EMT	ES.60988427	12/31/2022
Edwards, Mark	EMT	ES.60986250	1/31/2023
Ferguson, Bryan	EMT/PM	ES.61157071	5/31/2024
Fitch, Amanda	EMT	ES.61127935	5/31/2024
Flores, Jonathan	EMT	ES.60583071	5/31/2023
Frost, Danielle	EMT	ES.61132595	5/31/2024
Gaffney, Jon	EMT	ES.60859643	5/31/2022
Gettle, Eric	EMT	ES.61036116	1/31/2023
Gormley, Robert	Admin/EMT	ES.60142208	1/31/2022
Groeser, Matthew	EMT	ES.61039686	6/30/2023
Hardesty, Zachary	EMT	ES.61217612	1/31/2025
Heckard, Jailsin	EMT	ES.61231736	10/31/2024
Heim, McCale	EMT	ES.60499204	5/31/2024
Hellebore, Daniel	EMT/PM	ES.60143742	1/31/2024
Huffer, Sarah	EMT/PM	ES.60787894	1/30/2025
Jorstad, Brady	EMT	ES.61117071	5/31/2024
Josselyn, Jesse	EMT	ES.61139223	1/31/2024
Kesler, Nicole	EMT	ES.61139229	5/31/2024
Kleine, Robert	EMT	ES.61174507	5/31/2024
Kraft, Bethany	EMT	ES.60931736	1/31/2022
Leneau (Rice), Alisa	EMT	ES.61221366	5/31/2025
Leopardo, Samuel	EMT	ES.60516409	5/31/2024
Lindley, Kaela	EMT	ES.60964665	1/31/2022
Malloy, James	EMT	ES.61243603	5/31/2025
Maxwell, Dale	EMT	ES.60731122	5/31/2024
Monkman, Ian	EMT	ES.61227151	5/31/2025
Monson, Joshua	EMT	ES.61006986	3/31/2023
Montgomery, Bret	EMT	ES.61193934	5/31/2025
Palmer, Britney	EMT	ES.61217493	5/31/2025

**NOVEMBER 2021**



**OLYMPIC AMBULANCE THURSTON COUNTY  
EMS PROVIDER ROSTER**

Pecheny, Maxim	EMT	ES.60825581	5/31/2024
Peterson, Brock	EMT	ES.61012333	5/31/2023
Platt, Madison	EMT	ES.61223803	5/31/2025
Raffelson, Caylie	EMT	ES.60659578	5/31/2023
Ridgeway, Connor	EMT	ES.60915055	3/31/2022
Robinette, Lester	Admin/EMT	ES.01168836	5/31/2023
Rock, Taylor	EMT	ES.60902962	1/31/2022
Sanders, Steven	EMT	ES.60917517	1/31/2022
Savenok, Daniel	EMT/PM	ES.61053101	9/30/2023
Scheer, Nicole	EMT	ES.61101983	5/31/2024
Shelley, Kyle	EMT	ES.61040023	1/31/2023
Smith, Derek	Admin/EMT	ES.01175621	5/31/2024
Spiegelberg, John	EMT	ES.60539293	1/31/2022
Strawn, Kaleb	EMT	ES.61193747	5/31/2025
Terrill, Catarina	EMT	ES.61238601	5/31/2025
Welch, Jordan	EMT	ES.61238898	5/31/2025
Wilson, Jessica	EMT	ES.61101993	5/31/2024
Youngs, John	EMT	ES.60931750	1/31/2022
Zvirzdys, Joshua	EMT	ES.60895461	1/31/2022

