



Emergency Medical Services
Technical Advisory Board
March 7, 2018
Minutes

BOARD MEMBERS IN ATTENDANCE:

Asst. Chief Bill Hewett, *City of Bellingham Admin.*

Therese Williams, *BTC*

Chief McLane, *WCETCC*

Dr. Marvin Wayne, *Medical Program Director (phone)*

Division Chief Rob Wilson, *What-Comm Dispatch*

Mike Hilley, *EMS Manager*

Tyler Schroeder, *County Administration*

Chief Larry Hoffman, *WCFD #7*

Chief DeBruin, *WC Fire Chiefs Assoc.*

Mannix McDonnell, *MSO, Bellingham Fire Dept.*

Brian Wilson, *Manager Emergency Services*

=not present

STAFF PRESENT:

Tawni Helms, *WC Administration*

GUESTS:

Emily Junck, *Supervising Physician, BFD*

Captain Boyko, *MSO, Fire District 7*

WELCOME:

T. Schroeder welcomed everyone and introduced the new EMS Manager, Mike Hilley to the Board. Most had already met Mr. Hilley through the interview process. He was welcomed to the Board and the new position. The Board and entire EMS community is excited to have him serving in the new EMS Manager position.

The draft agenda was reviewed and a few more items were added; Paramedic Training and confirmation of the 2018 meeting schedule.

REVIEW AND CONFIRMATION OF 01.17.18 MINUTES

The Board reviewed and approved the 01.17.18 draft minutes. The minutes were accepted as written and submitted into the record.

EPCR CONTRACT UPDATE

T. Schroeder reported that the Image Trend contract for the implementation of a county wide electronic patient care reporting system (ePCR) was approved by County Council. Council had several questions regarding the benefits of the new records management system. Ultimately, the ePCR system will allow greater opportunity to develop the data needed to look at system wide efficiencies and resource distribution.

EPCR Subcommittee confirmed:

- Ben Boyko, MSO/FD7
- Mannix McDonnell, MSO/BFD
- Tyler Schroeder, County Administration
- Mike Hilley, EMS Manager
- Brian Wilson, Hospital Representative
- Josh Morrell, Whatcom County EMS Trauma Care Council
- Chief Hollander, North Whatcom Fire and Rescue
- Chief Ralston, South Whatcom Fire Authority

Meetings will begin soon and occur frequently. It was suggested that they be scheduled after the TAB meetings. The subcommittee will work with district contacts to establish the Image Trend implementation schedule and as well as operation level tasks. The Image Trend Project Manager will also meet with the subcommittee to help determine the rollout schedule. **ACTION ITEM: B. Hewett to submit completed District IT/ImageTrend contact list to County.**

McDonnell reported that Bellingham Fire Department is 2 months into the Image Trend implementation. Still in transition, they have found the biggest challenge so far to be adjusting to the ICD-10 coding system. He is working to make the ICD-10 coding more relevant for users.

Schroeder reported that the BLS agreement was approved and signed by all districts (with the exception of District 5) allowing the County to pay for the countywide ePCR system. Although the District chose not to sign onto the countywide agreement they have expressed a willingness to provide their data which will generate countywide information.

EMS LEVY NEXT STEPS

M. McDonnell followed up on CAD analytics he reported on at the last meeting. The analysis was initiated to look into the disposition of calls that were sometimes questioned in the field. The resulting analysis reflected the appropriate disposition of the calls. *(Analysis was distributed to the TAB following the meeting.)*

M. McDonnell reported on the Community Paramedic Program emphasizing the need for expansion. The need surpasses the current capacity. Discussion ensued regarding the many benefits of the program and the opportunities to collaborate with resources, such as the GRACE program, throughout the County. M. Hilley recommended flagging calls for Community Paramedic referrals in the new Image Trend system. Creating a centralized system allows the Community Paramedic to provide the medical contact while resource coordination can be provided by social workers. M. Hilley also suggested looking into Accountable Communities of Health funding, which is based on Medicaid populations, for the Community Paramedic program.

B. Boyko reported on the alternate (EMS Transport) destination designation for Whatcom County. The mechanism is now available for Whatcom County. Protocols for determining when to use an alternate destination must be established; fortunately protocols can be developed from Snohomish County's recently approved protocols. The new Triage Center, once completed, will become a designated Alternate Destination. The Incarceration Prevention and Reduction Task Force are developing the methodology and protocols which are different for EMS and Law Enforcement first responders. Chief DeBruin is now participating on the Task Force and will help to foster dialogue and collaboration. B. Wilson reported on the capacity issues at the hospital for receiving MH patients. They exceed their bed capacity for MH patients on a regular basis. He reminded the Board that the not all patients are transported, many are walk-ins. The new Triage Center will help address this huge need.

ACTION ITEM: M. Hilley to follow up with Community Paramedic, Jeff Brubaker and ACH funding opportunities.

PARAMEDIC TRAINING

M. McDonnell reported that upcoming paramedic attrition has escalated the paramedic training needs. Bellingham Fire Department anticipates attrition rates will include 10 paramedics over the next 2 years.

Industry average for career paramedics is 7 years. Bellingham Fire Department averages 10 years. The 14 month program will require paramedic training classes to begin soon in order to fill upcoming vacancies. Because the Assistance to Firefighter's (AFG) grant was unsuccessful, the funding need is even more critical. M. McDonnell expressed concern that the funding was not included in the per-unit cost in the EMS Levy. Discussion ensued about the rationale for the .295 cent levy amount and the cost for paramedic training. At an estimated \$106k/per paramedic, questions were raised about potential cost savings and efficiencies. Additionally, the question was raised whether the EMS levy should pay for the Fire based training imbedded in the cost as well as hiring lateral vs. training existing staff. M. McDonnell inquired as to who the responsible party is for covering the training costs. He further stated that the paramedic training costs should ultimately be reflected in the per-unit cost. The question was raised why the training costs were not included in the ALS agreement. Determining what those costs include was discussed. D. McLane emphasized the importance over the next 4 years of the EMS Levy to demonstrate efficiencies, justify spending and have the data to illustrate it. The recent What-Comm budget increase demonstrates how easily the bottom line can be affected.

T. Schroeder emphasized that all funding decisions must reflect real numbers and be based on having a good understanding of the costs. It's also important to look for and create program efficiencies while recognizing year-end projections. The challenges as presented can be overcome while also striving to make the system sustainable. It can be done. T. Williams reported that the BTC paramedic classes are in the last two phases of the pre-certification process. She also reported that the Department of Labor has training grants available for paramedic training opportunities.

Funding requests must be made through recommendation to the Executive Oversight Board.

WRAP UP

- EPCR subcommittee will begin meeting soon.
- Districts to provide designated IT contact for EPCR subcommittee
- Continued integration and build out of Community Paramedic Program
- TAB reps to present paramedic training issues to EOB
- TAB Meetings confirmed for first Wed. every other month (2:00pm)

MEETING ADJOURNED AT 3:50pm

Next Meeting: May 2, 2018 (2:00 – 3:00)
Executive Conference Room

Standing Agenda Items:

- EPCR update
- Community Paramedic Update