

Upcoming Training & Meetings:

3/14/2016	CPR	7pm	Fire District 10 Russell Rd. Station
3/15/2016	CPR/Code Review	7pm	Clear Lake Fire Station
3/16/2016	OTEP 1	6pm	Anacortes Fire Station
3/16/2016	CPR/Code Review	7pm	Search and Rescue

ePCR Documentation Reminder of the Week:

Please make sure all ePCRs with a patient contact include:

- **Past medical history**
- **Medication Allergies**
- **Complete set of vital signs - including SPO₂, and pain level if patient is complaining of any paeCin**

Equipment Workgroup

The EMS office is seeking BLS and ALS providers to be part of a workgroup that will evaluate the various pieces of EMS equipment on aid units and ambulance, and help develop a standardized list of equipment EMS levy funds would be used to purchase moving forward. For example, there are currently a variety of types of pulse oximeters in use throughout the county. We'd like the workgroup to evaluate the various types available, consider all the factors, and make a recommendation on the standard type / model to purchase moving forward; much like how the AEDs throughout the county have been standardized.

If you are interested in joining this workgroup, please contact Barb Jack at 416-1833 or bjack@co.skagit.wa.us

N. Region EMS & TCC

There are currently three open positions on the North Region EMS & Trauma Care Council for Skagit County. We would very much like to fill these positions by April 7th, the next Council meeting. The time commitment is very small, as the Council currently only meets four times a year, on the first Thursday of the first month of each quarter. Attached are both the North Region Council Member Introduction with background information on the Council for those considering joining, and the application form. For more information feel free to contact either Martina Requier, Executive Director North Region EMS & TCC at martina@northregionems.com, or Mark Raaka, Skagit County EMS Director at markr@co.skagit.wa.us.

Positions Available:

- At- Large Rep
- Consumer Rep
- Prehospital Rep



REGIONAL COUNCIL MEMBER INTRODUCTION

WELCOME! If you are considering accepting a position on the North Region Emergency Medical Services & Trauma Care Council (NREMS), this letter serves as a high level overview of what we do.

MEETING DATES

Bi-Monthly Meetings

The Regional Council meets the 1st Thursday of the last month of the quarter in Mount Vernon, Washington. Meetings are typically held at the Skagit 911 Center. Regional Council meetings typically last no more than two (2) hours.

Annual Meeting

NREMS & TCC operates on a fiscal year of July 1 through June 30 of each year. The Annual Meeting is usually the last month of the fiscal year.

BACKGROUND

NREMS & TCC was incorporated on June 12, 1979 as an IRS §501 (c) (3) non-profit corporation. The corporation's principal function was to advance and facilitate the delivery of emergency medical services in the counties we represent (Whatcom, Skagit, Snohomish, Island, and San Juan) by coordinating, advising and facilitating efforts by the Emergency Medical Services (EMS) providers, and any other functions approved by the Board of Directors consistent with this goal.

In 1990, the Washington State Legislature expanded RCW 70.168 and further defined NREMS responsibilities as:

- (1) Trauma is a severe health problem in the state of Washington and a major cause of death;
- (2) Presently, trauma care is very limited in many parts of the state, and health care in rural areas is in transition with the danger that some communities will be without emergency medical care;
- (3) It is in the best interest of the citizens of Washington state to establish an efficient and well-coordinated statewide emergency medical services and trauma care system to reduce costs and incidence of inappropriate and inadequate trauma care and emergency medical service and minimize the human suffering and costs associated with preventable mortality and morbidity;
- (4) The goals and objectives of an emergency medical services and trauma care system are to: (a) Pursue trauma prevention activities to decrease the incidence of trauma; (b) provide optimal care for the trauma victim; (c) prevent unnecessary death and disability from trauma and emergency illness; and



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(d) contain costs of trauma care and trauma system implementation; and

(5) In other parts of the United States where trauma care systems have failed and trauma care centers have closed, there is a direct relationship between such failures and closures and a lack of commitment to fair and equitable reimbursement for trauma care participating providers and system overhead costs.

WAC 246-976-960 provides additional details on the roles and responsibilities as follows:

(1) In addition to meeting the requirements of chapter 70.168 RCW and elsewhere in this chapter, regional EMS/TC councils must:

(a) Identify and analyze system trends to evaluate the EMS/TC system and its component subsystems, using trauma registry data provided by the department;

(b) Develop and submit to the department regional EMS/TC plans to:

(i) Identify the need for and recommend distribution and level of care (basic, intermediate or advanced life support) for verified aid and ambulance services for each response area. The recommendations will be based on criteria established by the department relating to agency response times, geography, topography, and population density;

(ii) Identify EMS/TC services and resources currently available within the region;

(iii) Describe how the roles and responsibilities of the MPD are coordinated with those of the regional EMS/TC council and the regional plan;

(iv) Describe and recommend improvements in medical control communications and EMS/TC dispatch, with at least the elements of the state communication plan described in RCW 70.168.060 (1)(h);

(v) Include a schedule for implementation.

(2) In developing or modifying its plan, the regional council must seek and consider the recommendations of:

(a) Local EMS/TC councils;

(b) EMS/TC systems established by ordinance, resolution, interlocal agreement or contract by counties, cities, or other governmental bodies.

(3) In developing or modifying its plan, the regional council must use regional and state analyses provided by the department based on trauma registry data and other appropriate sources;

(4) Approved regional plans may include standards, including response times for verified services, which exceed the requirements of this chapter.

(5) An EMS/TC provider who disagrees with the regional plan may bring its concerns to the steering committee before the department approves the plan.

(6) The regional council must adopt regional patient care procedures as part of the regional plans. In addition to meeting the requirements of RCW 18.73.030(14) and 70.168.015(23):

(a) For all emergency patients, regional patient care procedures must identify:

(i) Guidelines for rendezvous with agencies offering higher levels of service if appropriate and available, in

1130 E. Fairhaven Ave.
Burlington, WA 98233

E-Mail: info@northregionems.com

Phone: (360) 428-0404

Fax: (360) 336-9236

Website: www.northregionems.com



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accordance with the regional plan.

(ii) The type of facility to receive the patient, as described in regional patient destination and disposition guidelines.

(iii) Procedures to handle types and volumes of trauma that may exceed regional capabilities, taking into consideration resources available in other regions and adjacent states.

(b) For major trauma patients, regional patient care procedures must identify procedures to activate the trauma system.

(7) In areas where no local EMS/TC council exists, the regional EMS/TC council shall:

(a) Make recommendations to the department regarding appointing members to the regional EMS/TC council;

(b) Review applications for initial training classes and OTEP programs, and make recommendations to the department.

(8) Matching grants made under the provisions of chapter 70.168 RCW may include funding to:

(a) Develop, implement, and evaluate prevention programs; or

(b) Accomplish other purposes as approved by the department.

FUNDING

The Washington State Department of Health (WA DOH) provides funding from the EMS & Trauma Fund for each Regional Council. This funding provides training and education as well as maintains a cohesive EMS & TCC system in each county by bringing together local council. WA DOH also provides NREMS & TCC with funding to support emergency preparedness. Together we work with all entities of the healthcare spectrum to improve EMS & Trauma response from day to day functions to mass causality incidents.

ORGANIZATION

NREMS & TCC consists of three positions when fully staffed:

Executive Director
ASPR Coordinator
Office Assistant

The Executive Director reports to the Executive Board Chair. The Executive Board consists of:

Chair	Secretary	Immediate Past Chair
1 st Vice Chair	Treasurer	
2 nd Vice Chair	Committee Chairs (5)	

The Executive Board reports to the Regional Council. The Executive Board Chair is also the Regional Council Chair. The Regional Council consists of the following 30 positions appointed by county:

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Pre-Hospital Committee

Island County Representative
San Juan County Representative
Skagit County Representative
Snohomish County Representative
Whatcom County Representative

Healthcare Facility Committee

Island County Representative
San Juan County Representative
Skagit County Representative
Snohomish County Representative
Whatcom County Representative

At-Large Committee

Island County Representative
San Juan County Representative
Skagit County Representative
Snohomish County Representative
Whatcom County Representative

Consumer Committee

Island County Representative
San Juan County Representative
Skagit County Representative
Snohomish County Representative
Whatcom County Representative

Elected Official Committee

Island County Representative
San Juan County Representative
Skagit County Representative
Snohomish County Representative
Whatcom County Representative

Medical Control Committee

Island County Medical Program Director
San Juan County Medical Program Director
Skagit County Medical Program Director
Snohomish County Medical Program Director
Whatcom County Medical Program Director

There are four additional independent positions elected by a majority vote within their organizations:

Washington Ambulance Association Representative
Aero Medical Representative
Washington State Hospital Association Representative
Law Enforcement Representative

The Regional Council's work for the DOH EMS & Trauma System is conducted through 8 different committees, including:

Executive Board	
Regional Council	
Regional QI and Cardiac & Stroke	(standing committee)
Prehospital/Hospital	(standing committee)
Education	(standing committee)
Injury Prevention and Public Education	(standing committee)
Medical Control Committee	

In addition, to the Regional EMS & Trauma Committees the North Region EMS & TCC office facilitates the following committees in coordination with the Region 1 Healthcare Coalition and Snohomish Public Health in support of the ASPR work/deliverables:

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Burlington, WA 98233

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WSHA Region 1 Health Care Coalition Steering Committee
WSHA Region 1 Health Care Coalition (R1HCC)
R1HCC - Hospital Emergency Preparedness and Response
R1HCC Focus Area – ACF & Medical Surge
R1HCC Focus Area – Evacuation & Shelter in Place
R1HCC Focus Area - Training & Exercises
R1HCC Focus Area – Mass Fatality Management
R1HCC Focus Area - Interoperable Communications
R1HCC Focus Area – Patient Tracking & Bed Control

APPLICATION PROCESS

Please contact our office for an application and we will walk you through the application process. Each appointment is for two years, and will expire on September 30 of the outgoing year. The completed application form is then sent to Mary Roberts, Regional Council Appointments Coordinator; Office of EMS and Trauma Systems; P.O. Box 47853; Olympia, WA 98504-7853.

Congratulations, and welcome aboard the North Region EMS & Trauma Care Council!

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Burlington, WA 98233

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DEPARTMENT OF HEALTH
Health Systems Quality Assurance Division
Office of Community Health Systems

Regional EMS and Trauma Care Council
MEMBERSHIP APPLICATION
Please print all information and complete both sides of this application.

1. I, _____ am applying for appointment / reappointment
(Check One Above)
as the _____ representative on the
(please specify if "alternate")
_____ Region EMS/Trauma Care Council from _____ County.

2. Preferred mailing address for Regional Council business:

Contact information:
Work (____) _____ Home (____) _____
FAX (____) _____ Email: _____

3. LOCAL EMS COUNCIL RECOMMENDATION:
Chair / President: _____
Signature: _____ Date _____

4. Complete if you are formally representing an agency or organization:
(attach any letters of recommendation)
Agency / organization name: _____
Head of organization: _____

5. Please answer the following:

a) Why are you interested in serving on the Regional Council?

b) What are your abilities, i.e., education, employment and/or experience that qualify you for this position? (attach any additional information)

c) Current employment: _____

_____	_____
Applicant Signature	Date

[Reset Form](#)

[Print to Mail](#)

Return completed form to:

Mary Roberts
Regional Council Appointments Coordinator
Office of EMS and Trauma System
PO Box 47853
Olympia, WA 98504-7853

Questions? Call (360) 236-2804.

Personal Information (Optional):

NOTE: The Governor and the Department of Health desire a broad representation of backgrounds on boards, committees and councils. The information below will assist in this goal and is voluntary on your part.

Of what race or ethnicity do you consider yourself to be?

- Black/African-American
- Asian or Pacific Islander American

- White/Caucasian
- American Indian or Alaska Native

- Latino(a), Hispanic, or Spanish?

If you are Asian or Pacific Islander, please check one box below:

- Chinese
- Filipino
- Hawaiian
- Vietnamese
- Asian Indian
- Japanese

If you are American Indian or Alaska Native, please check one box below:

- Eskimo
- Aleut

If you are Latino(a), Hispanic, or Spanish, please check one box below:

- Mexican, Mexican-American, Chicano
- Puerto Rican
- Cuban

- Korean
- Cambodian

Enrolled or principal tribe if American Indian:

Tribe: _____

Other Latino(a), Hispanic, or Spanish
Enter group, such as Colombian, Dominican, etc.

Group: _____

- Samoan
- Guamanian
- Laotian
- Other: _____

Other Race: _____

Birth Date: ____/____/____

Female Male

Do you have a permanent physical, sensory, or mental condition that substantially limits your major life functions, such as working, caring for yourself, walking, doing things with your hands, seeing, hearing, speaking, and learning? Yes No

Have you ever been on active duty in the U.S. Armed Forces? Yes No



Skagit County Medic One Training Announcement



Tactical Combat Casualty Care (TCCC) May 13-15, 2016

- Course Location:** Skagit County Medic One
2911 E. College Way, Suite C. Mt. Vernon, WA 98273
- Dates/Times:** **Medical Providers**
May 13th 1800-2130 and May 14th -15th 0800-1630
- Law Enforcement Personnel**
May 14th -15th 0800-1630
- Course Description:** This course meets and exceeds the NAEMT standards for Tactical Combat Casualty Care. NAEMT's Tactical Combat Casualty Care course introduces evidence-based, life saving techniques and strategies for providing the best trauma care on the battlefield under the auspices of the PHTLS program. It is the only TCCC course endorsed by the American College of Surgeons.
- What sets this course apart is its extensive use of simulation. Participants will don body armor, helmets and will work in realistic, stressful conditions.
- Course Credits:** NAEMT TCCC Certification Card, 16hrs of CME
WA State CJTC Approved for LE Personnel
- Course Audience:** **Law Enforcement, EMT, Paramedic, ED Personnel**
- Cost:** **Skagit County Providers- \$100**
Out of County Providers- \$300
Cost includes:
Use of TCCC book
TCCC Certification card good for 4 years
Individual First Aid Kit (Tourniquet, pressure dressing, etc).
- Class Size:** Seats are VERY limited so sign up early to ensure your spot!!
- Registration:** Please email joelp@co.skagit.wa.us to reserve your slot(s).