

Skagit County EMS & Trauma Care Council Advisory Board Meeting

August 21, 2019, 10am-Noon

Present:

Bryan Brice – Mount Vernon Chief
Joan Cromley – Hamilton Mayor
Tyler Dalton – Skagit Regional Health RN
Lisa Edwards – Island Hospital RN
Chet Griffith – Fire District 8 Commissioner
Roy Horn – Fire District 13
Sandra Jensen – County Meadow Village Dir.
Josh Pelonio – EMS Interim Dir.
Steve Sexton – Burlington Mayor
Amie Tidrington – Skagit County Public Health
Nick Walsh – Anacortes Assistant Chief

Ex Officio:

Lisa Janicki – Skagit County Commissioner
Ron Wesen – Skagit County Commissioner

Absent:

Matthew Russell – EMS Medical Program Dir.
Jared Couch – Upper Skagit Sergeant

Observer:

Martina Nicolas – NREMS TCC - Presented
Katy Edwards

Non-Voting:

Renata Maybruck – Skagit EMS Projects Manager
Freya Peebles – Skagit EMS Admin. Coord.

Opens at 10am.

Welcome: N. Walsh

- Greets and welcomes group

Review/Approve May 22, 2019 meeting minutes: N. Walsh

- R. Maybruck sent out minutes from the last meeting.
- Were there any questions or issues with the minutes?

R. Horn Moves to Approve May 22nd, 2019 meeting minutes. B. Brice Seconds. Opposed, None.

Regional EMS Council Update: M. Nicholas

- M. Nicholas introduces self
- Passes around handout for their grant process
 - Council has to review by the end of September
 - They need to be reviewed and sent to M. Nicholas
- Council member application
 - Has received applications for positions where there's a member already in the appointed position
 - Can't process those applications
 - In order to move forward she needs
 - a letter from individuals resigning or
 - a letter from the Council stating that those individuals are no

- longer fulfilling their obligations
 - will work with member to get those positions filled
- Advanced Burn Life Support (ABLS) Course in Bellingham
 - \$250 per student
 - NW Region EMS Trauma Care Council is covering ½ of the cost.
 - Only offered once every 3 years in our region.
- October 3rd is Regional QI Council Meeting.
 - Covering stroke.
 - DOH released an assessment for WA State EMS & Trauma System.
 - It's available online for those interested.

Standard Operating Guidelines (SOG's): R. Maybruck

- The steering committee of Providers are working on these.
 - System and Structure needed to be created
 - Templates have been made
 - First was QA/QI System, with more to come
 - Waiting on the QA process in 911 and waiting the hospital providers to complete their section
 - QA/QI System has been Approved by Dr. Russell
 - Moving forward on additional QA/QI pieces.
 - Approved Patient Care Records SOG
- Meeting twice a month.
 - First meeting will be focusing on the draft.
 - Second meeting will include Dr. Russell.
- SOG's are being uploaded into Target Solutions and distributed.
- N. Walsh Important foundational work being worked on.
- B. Brice Providers were queried as to the most important SOG's and we are working on them in ranked order.
 - Working with other agencies, like the hospitals and 911, to work through various components.
- J. Pelonio Training component. There are differences on how documentation has been done. Completing these will help with consistency.

Updates: J. Pelonio

- **Fire District contracts**
 - 3 Fire District Contracts outstanding
 - One Fire District is currently working on finalizing their updated contract for County Routing
 - SAR working on finalizing theirs for County Routing
 - One Fire District who refuses to sign
 - Will have implications on funding, training opportunities, etc.
 - C. Griffith: Confirms that SAR is working on the Contract.
- **Criteria Based Dispatch (CBD) and ProQA**
 - Documentation and Data sent to 911 Board

- This group made a recommendation to pursue a solution
- EMS & Dr. Russell completed a recommendation letter
- Data reporting went to 911.
 - Determinant code average % currently averaging over 60% with no codes. Reports going out weekly.
- In discussion. Recommendation to move toward ProQA. Hoping that at September 911 meeting there would be action.
- L. Janicki: Previous discussions had ProQA as a 60k investment. Appears cost is more than triple.
- J. Pelonio: We're purchasing a package to include dispatcher training and certification. ProQA has an accredited program , higher costs include:
 - Certification for EMD for dispatchers
 - Training
 - Additional follow up course
 - Tablets
 - Continuing education piece
- L. Janicki: With the additional training, can a grant be applied for to cover some of these costs?
- M. Nicholas: It could, depending on how it's submitted. Willing to help if there's interest.
- R. Maybruck: 60k was for the initial consoles. The addition of everything else is why the cost changed.
- J. Pelonio: Also additional software that outlines the QA piece.
- L. Janicki: Could be timely given the grant process that was just talked about by Martina
- B. Brice: Is there a line item from EMS to offset the cost of training?
- J. Pelonio: Currently EMS is not paying for the training. Not certified EMD
- B. Brice: Some kind of training is being covered that could offset this cost
- J. Pelonio: Agrees
- **Recommended Units**
 - Approximately 2 ½ weeks ago we started using Recommended Units. Previously Dispatch sent what was within response plans. Recommended Units uses proximity. Known problems we working through is proximity, as the crow flies. Next piece is quickest routes which takes in considerations drive time, speed limits, etc. There has been instances where Dispatchers use their judgment. Asked that those be tracked so follow-ups can occur.
 - R. Wesen: Tracked by computer or hand written?
 - J. Pelonio: Working on a report to compare recommended unit vs assigned unit.
 - B. Brice: Has been huge benefit. Challenges thus far have been small. Expresses gratitude on progress made.
 - N. Walsh: Agrees that it's a good program and that ultimately it'll be for the better, but believes it being rolled out without quickest route has caused problems.

- B. Brice: Believes response plans had more issues with delays.
- R. Wesen: Question if Nick would tell a unit that they're not the quickest?
- N. Walsh: Theoretically the crews could sort that out. Historically if they've gotten the call they just went. Delays can occur. Believes Quickest Route will be instrumental in cleaning that up. Unsure of timeline.
- B. Brice: 18-24 months for Quickest Route, depending on who you ask.
- **SVC Training**
 - SVC County EMT course.
 - Fall Course beginning in September
 - About ½ full, we're still accepting registration
 - Approximately 22 students graduated in the Spring Course

New Initiative Application: R. Maybruck

- May meeting a draft for review was requested. (handout)
 - Funding is about \$100k
 - The thought process is on the last page
- B. Brice: Would like to see review and submission dates pushed to earlier in the year. Decision by this group prior to in Aug.
- N. Walsh: Agrees. Also, notification and invoices should be further apart.
- R. Maybruck: Revisions:
 - Submissions in April
 - EMS Office review by May 15th
 - EMS Council Meet at end of May
 - Notification by June 15th
 - Invoices in to EMS by Dec 15th
- B. Brice: Suggests no cap, but that criteria must be met.
- J. Pelonio: If Dr. Russell has a new piece of equipment, it could impact funding
- L. Edwards: Cap for one location vs no cap for wider benefit. Suggests modifying the form for the possibility of additional sponsors, partner agencies
- J. Cromley: Suggests the removal of number of awardees
- R. Maybruck: Will work on revisions and have a draft available for review at the next meeting.

EMS Rate Setting comparison: J. Pelonio

- We're looking at the county fee schedule for transport. Annually the ALS agencies will be meeting to discuss the fee schedule. We met yesterday and were able to get some comparable.
- Our current rates were changed in July of 2017. We don't want to raise rates significantly. We're hoping to do this on an annual basis. Currently they're lower than that of our neighbors. We're hoping to keep closer tabs on what's is going on in that timeframe. Decided to take difference from current resident fee and add ½ the difference. The non-resident fee would be moved to match the average nonresident fee.
- It's important to note that the way billing works, just because you charge a certain amount, doesn't mean that you collection a certain amount. There's a Medicare

allowable. Over 90% of our transports are Medicare/Medicaid

- Historical data shows the suggested increase is significantly less than in the 2015-2017 increase.
- S. Sexton: Thoughts on average. Is there a better way of analyzing on how we comparing? Could there be a CPI adjuster every year?
- J. Pelonio: That's something that came up and that we were looking into. We've been working on getting an understanding on what others are doing. There are some that use a CPI adjustment. Not right or wrong, this is the process that was used that last time. Wanted to bring it to this group so there's no surprises that it's being worked on. Not set in stone. Open to suggestions on how we get to that number.
- R. Wesen: Would like to know what the percentage is for the other agencies
- T. Dalton: Has reimbursement re patient satisfaction been discussed?
- J. Pelonio: That didn't come up. Non-transports did. Currently Medicaid and Medicare will not reimburse for non-transport services. Challenge is that we don't want to deter people from calling 911 because they don't want a bill. Not aware of anything tied to customer care.
- T. Dalton: There was some discussion, but wondered if there had been more
- R. Horn: Suggest looking at the State of Georgia. They bill for non-transports
- B. Brice: Even with changes, it doesn't affect actual cost to providers
- L. Edwards: Is there a way to do what AERO has done? Is there a way we could offer a service?
- J. Pelonio: We could look into it. Salem OR offers something similar
- N. Walsh: Intention is that even with the jump its lower, but comes closer to those around us. We need to come up with a program to bring us up to our neighbors
- L. Janicki: Should be able to demonstrate the cost of service provided compared to the recapture. If this Board is going to be more knowledgeable, the analysis needs to be done

Inter-Facility Transports: T. Dalton

- Last meeting brought up interfaculty transports. Reached out to get some data from the other hospitals. Received numbers from NW ambulance.
 - The 3 hospitals in this county, plus St. Joes, Bellingham, Cascade together average 6.72 ALS calls a day with. Skagit County comes out to 4.6 calls a day. One transport is dedicated to Skagit. Two are down in Marysville.
 - For the next meeting would like to divide it up on a quarterly basis to see if it's increasing or decreasing. Would like some real numbers. There were 3 calls in July were they waited over an hour for transport. One call involved a child that when the parents found the wait time they signed their child our AMA and transported the child themselves.
 - Would like to hone down on the numbers.
- L. Edwards: Daily challenge
- C. Griffith: In the past they had BLS that ran transports. Are you trying to implement in house interfaculty transports?
- T. Dalton: Working on seeing if we should have another dedicated interfaculty transport for the county. Doesn't believe we should take county transports out of service for interfaculty transports

- C. Griffith: Maybe we should have an additional BLS/ALS transport available for these kinds of transports
- T. Dalton: WA State doesn't have a clear definition for those kinds of transports
- L. Edwards: Under the WAC we can't go from higher to lower to higher levels of care
- T. Dalton: If there was more dedicated transports there would only be a charge if not in use
- J. Pelonio: Medically necessary transports that they get paid for by something, whether it be insurance or the hospital?
- T. Dalton: Correct. Would like to have more data to bring back to the next meeting

2019 Quarter EMS Training Report: J. Pelonio

- Training report. Provides Updates (handout)

Revisits EMS Rate Setting comparison: N. Walsh

- This group raises some good points. Will figure it out to justify the numbers.

Nick Walsh, Chair, adjourns meeting.

Votes:

1. Approval of May 22nd, 2019 Meeting Minutes: **All for, none opposed.**

Next meeting: November 20, 2019, 10am-Noon, Skagit County EMS Training Room