

CENTRAL REGION EMS AND TRAUMA COUNCIL
Minutes for March 8, 2023, 2:30pm-4pm



Attendees: Mark Taylor, Randi Riesenber, Brant Butte, Matt Gau, Vonnie Mayer, Charles DeSmith, Traci Stockwell, Jim Whitney, Andrea Coulson, Barb Jensen, Kate Bendickson, Emily Agudo, Celeste Etherington, Michael Pirri, Tom Rea, John Herbert, Marla Emde, Michael Sayre, Eric Brown, Jessica Wall, Cheryl Stromberg, Kara Welchel, Ashley Christoff, Hailey Thacker, Steven Pettit, Heath Ackley, Patrician Lynn Anderson, Sue Theiler, Cameron Buck, Sid Beers, Eric Brown, Andy McCoy, Jason Nagle, Rachel Weber, Sue Theiler, Ellie Maletta

1. Call to Order - Mark Taylor, Chair
2. Review of Minutes from 1.11.23 - *Karen motion to approve, Barb seconds. All in favor.*
3. Financial Report – Brant Butte, Treasurer - *Brant reviewed.*
4. Reports and Updates
 - a. KC EMS- *Dr. Rea informed the group of a pilot project beginning around BLS management of cardiac arrest looking further at the use of iGel and compression rates.*
 - b. NWHRN & WATrac - *Kara updated the group and introduced Ashley Christoff who has joined NWHRN. Previewed upcoming training, and open to conducting additional training and input. Provided email's in the chat: kara.welchel@nwhrn.org and ashley.christoff@nwhrn.org*
 - c. WMCC - *Mark provided a review of current status*
 - d. DOH -

EMS and Trauma Rulemaking

- **Legislation Update** – *Legislative session began January 9, 2023. This is a long session, and it will end in April. Bills still alive as of February 28th you may be interested in that impact EMS include:*
 - **SB 1134 – 988 System** – *Allows ambulances / EMS providers to meet the organization / vehicle types that make up crisis response teams and to be recognized as a crisis response team if they are in a county with a population of less than 60,000 in Eastern Washington and have taken the required training.*
 - **SB 5120 - 23 Hour Crisis Relief Centers** – *Directs the DOH to develop guidance for protocols and procedures to allow EMS to transport patients to 23-hour crisis relief centers and allows EMS to transport to crisis relief centers*

- **EMS Rulemaking** – EMS rules were opened November 2017. 33 sections in WAC 246-976 were opened to consider updates to align with current national standards, make regulations clearer and concise, respond to statutory requirements, streamline initial and renewal application processes for pre-hospital agency license and EMS provider certification. EMS held 40 stakeholder meetings between December 2017 and August 2022 which included review of the 33 sections, two new sections, and seven pieces of legislation that impacted rules. The EMS team updated the CR101 in May of 2022 to reflect the scope of new work due to legislation that had passed and revised the timeline for completion. Primary delay to rulemaking was the COVID-19 pandemic in which the EMS team was activated to the agency IMT and prioritized COVID work between March 2020 and March 2022. We are working very hard to finish our CR102 package and we appreciate your grace and patience as our workload is unprecedentedly high as our healthcare system is still experiencing impacts from the pandemic. Final draft version rules will be available for you soon. Anticipated date of updated effective rules is by April/May 2023.
- **WEMSIS Rules:** Stakeholder meetings for EMS data system rulemaking concluded in March. The rules are in response to the amendment made to RCW 70.168.90 which requires licensed ambulance and aid services to report to the statewide data system. We are working on the draft for public comment then we'll move to CR-102 process. WEMSIS rulemaking timeline is aligned with the EMS rulemaking process timeline.

Projects

- **Community paramedic programs** - In 2022, Washington State Legislature approved a request for a one-time \$1.5 million appropriation from General Fund-State in the 2022 Supplemental Operating Budget ([ESSB 5693](#)) to the Greater Columbia Accountable Community of Health (GCACH) to develop and implement an innovative emergency medical services program (EMSI) to bridge the gap of unmet healthcare needs in the community. The Department of Health was identified as the agency responsible for distribution of the funds to GCACH. DOH has contracted with the GCACH to provide the funding and is monitoring and providing support for the project.
 - The following EMS services are participating in the project. Rural EMSTC Councils might want to consider inviting representatives from these organizations to come to the regional council meeting and talk about their program and partnership with GCACH.
 - Benton County FD #4
 - Columbia County FD #3
 - Garfield County FD # 1
 - Upper Kittitas Medic One (Kittitas County Public Hospital #2)
 - Kittitas County Fire Protection District #6
 - City of Sunnyside
 - City of Walla Walla Fire and Ambulance Department

- **Health Equity Education for EMS** – Dawn Felt is working with DOH equity team and EMS educators to update the EMS Multicultural Awareness Training to include content required in newly adopted [WAC 246-12-830](#) which requires all health care professions including EMS to take health equity continuing education every four years in response to Legislation that passed into law in 2021 (ESSB 5229). The goal is for the EMS curriculum to be updated by July 1, 2023.
- **EMS and Law Enforcement Response to Uncooperative People** – DOH EMS staff are participating on a workgroup led by the Washington State Association of Sheriffs and Police Chiefs (WSASPC), the University of Washington, Criminal Justice Training Center, and representatives from POC advocacy organizations to develop a state model policy and training guideline to improve EMS and LE response to uncooperative people experiencing excited delirium. WSASPC asked DOH EMS staff to collaborate with them to proactively work to improve response models for this purpose because of some high-profile cases with poor outcomes that have occurred in other states. This work is ongoing and expected to conclude by summer 2023.
- **Dementia Collaborative** – Dawn Felt is working with the Dementia Collaborative to evaluate the need for tools, resources, education and training for EMS to improve how EMS responds to persons with Dementia. DOH EMS is scheduled to present an overview of EMS and current challenges EMS experiences with this population on April 26, 2023. This work is just beginning.
- **BH Co-Responder Education** – Dawn Felt continues to represent EMS on a workgroup led by UW to develop best practices, recommendations, and a model training curriculum for first responders and behavioral health professionals working on co-response teams. (SSB 5644, 2022). This work is ongoing.
- **OIC – Balanced Billing Workgroup** – Catie Holstein and Jason Norris are participating on the Balanced Billing Workgroup lead by the Office of Insurance Commissioner (OIC) in response to recent legislation that tasked the OIC with determining if ambulance services should be subject to balanced billing laws. The final draft report is due to the Legislature by October 1, 2023.
- **DOH EMS Controlled Substance Guidance** – We are working with DOH Pharmacy Commission staff to begin updating guidance for MPDs for developing policies and procedures related to controlled substances, use of expired medications when EMS experiences medication shortages, and guidance for Hospital Pharmacy Provision of Drugs to Ambulance or Aid Services after RCW 18.64.540 passed in 2015.

Some certified EMS providers are authorized by physician standing orders (protocols) to administer controlled substances to patients in the course of their duties. Historically, EMS services have ordered, stored, and managed controlled substances under the MPD or physician delegates' DEA license. [WAC 246-976-920\(3\)\(c\)](#) states "The certified MPD must establish policies for storing, dispensing, and administering controlled substances. Policies must be in accordance with state and federal regulations and guidelines." In the past, our EMS section worked with the Pharmacy team to develop guidance to help MPD's with this task. We have old guidance that needs updating and there are new controlled substance requirements for EMS under the [Protecting Patient Access to Emergency Medications Act of 2017](#). Our MPDs and EMS Chiefs are asking us for updated guidance because they are running into some issues with regional DEA offices that impacts their ability to manage controlled substances for their ambulances.

- **Move Over, Slow Down Campaign Washington Traffic Safety Commission (WTSC)** – Jason Norris participated on a workgroup with WTSC to develop a campaign and public service messaging to encourage the public to move over and slow down when driving and encountering public works and safety personnel on our roads. Jason provided technical guidance related to emergency care personnel and their on scene activities in high traffic areas such as freeways, and advocated for traffic safety for our profession. Jason has lived experience as a Paramedic and EMS supervisor for EMS personnel who were injured from being hit by a vehicle on the freeway while on an emergency scene, so this is a subject he is passionate about.

These are the two public service announcements developed for Move Over, Slow Down campaign which Jason helped create. They started running last week, and you may have seen one or both. The “Toy Cars” ran multiple times on KIRO channel 7. We found in our market research that there was much less understanding of the law as it applies to tow trucks and utility vehicles (e.g., WSDOT, etc.), so we emphasized those vehicle types in the messaging.

The first is a live action video called “Toy Cars,” and it is airing on broadcast and digital TV services right now: [Toy Cars on Vimeo](#)

The second, “Achievement Unlocked,” was created as an animated video game. It has been translated into multiple languages and will play primarily on digital and social media, where we can target specific demographics and language speakers. Here are the English and Spanish versions posted on YouTube.

ENG - <https://youtu.be/KPJ-FBhfXrg>

SPN - https://youtu.be/L-fcg_Ol7S0

You can find all of the campaign materials on our WTSC Partners site here: [Move Over, Slow Down Campaign – WTSC Partners](#). The overview tab includes still images from both campaigns. The video and radio tab includes all of the video and audio spots, including those translated into Spanish, Vietnamese, Tagalog, Somali, Russian, Korean, Mandarin, and Cantonese. The social media tab includes images and sample text for social media posts.

The paid media campaign will run for two more weeks, so please keep these in mind for social media posts during and after the paid campaign.

- **Provisional certification** – Draft rules were socialized with EMS stakeholders in July and August of 2022. The DOH EMS team worked with OCS and AAG to identify if EMS providers who satisfy all other licensing requirements and qualifications may receive a temporary practice permit (which is different than a provisional certification) while the national background check is completed - as authorized in 2013 for other professions under WAC 246-12-050 (RCW 43.70.040, 18.130.064 and 18.130.075). Yes – EMS can be included. Our credentialing team built the new credentials in ILRS for temporary practice permit and Dawn Felt worked with our credentialing team to develop the process for how a temporary practice permit can be requested and approved and this option was implemented in October of 2022.
- **Rural EMS Flex Supplemental Grant 2022-2025** – EMS staff working on implementation of the grant which includes a role for clinical faculty & MPD’s. The purpose of this project is to develop and implement strategies to establish quality assurance and improvement plans, improving data submission, data quality, and

analysis of EMS key performance indicators to assess baseline performance and identify areas for quality improvement. The participants will implement quality assurance and improvement activities, using the Institute for Healthcare Improvement (IHI) Model for Improvement and Plan-Do-Study-Act (PDSA) cycles on time sensitive emergencies. Rural EMS services will test, adopt, and continually improve clinical practices to achieve improvements in clinical outcomes for time sensitive emergencies. Initially, we had envisioned that EMS fellows from UW could be used to support this work. However, MPDs have voiced that they would rather be included in the work than delegate to EMS fellows. We are currently working to garner MPD commitment for the clinical faculty model component of this work. MS instructors.

Other EMS Education Updates

- ***NREMT Cognitive and Psychomotor & Certification Examination Updates*** – NREMT is sunsetting the psychomotor examination in 2024. The cognitive exam is being re-designed as a part of this work. Dawn Felt is participating in NREMT workgroups leading this work and keeping our EMS stakeholders informed of progress, changes, and implementation dates.
 - *Rural EMS services continue to express concerns for lack of access to NREMT testing sites. Dawn is working with Wenatchee Valley College to see if they would be willing become a host for a NREMT testing site.*
 - *The DOH EMS program continues to partner with Rural Health Section who provides FLEX grant funding to support vouchers for rural EMS providers to take the NREMT certification exam.*
5. Grant report - Chief DeSmith Renton RRFA - *Provided how RRFA planned, requested and implemented additional training equipment to prepare providers for Scenes of Violence training. For example this included more realistic tourniquets, arms with vessels and more.*
6. High Patient Census
- a. Wall Times - Summarize Thurston County Dashboard & Entryway EMT program *Dr. Rea reviewed the activities of the last subgroup meeting. Including the Thurston County's dashboard of wall times, this required the integration of CAD data. Also discussed was the entry-way EMT program taking place in Thurston County. AMR is in the process of developing and formalizing this protocol of cohorting EMT crews for multiple patients, with more work to be done. Noted that these measures do not address the root causes of the issues. Need names ideas for this group / project.*
 - b. Psych Patient Task Force & ED Psych Divert - *Celeste provided an update from our recent meeting on January 19th. Looking for more information and data, such*

as ED beds at each facility, volume of detained patients, the group reviewed past signed letters. Discussion around sending an updated letter of commitment to all facilities once again. The group will work to draft a letter for review at the May meeting.

7. Housekeeping: members, alternates, meetings, etc. - *Randi reminded the group about membership, vacancies, and meeting attendance.*
8. Good of the Order
9. Adjourn

Next meeting scheduled for **May 10, 2023** at 2:30 pm