

**PCEMS COUNCIL – GO TO MEETING
OPERATIONS COMMITTEE MINUTES
September 30, 2020 – 10:00 AM**

Attendance:

Membership Attendance Roster on File.

Call to Order:

Russ McCallion called the meeting to order at 10:00 am. Attendance to the Go-To-Meeting was verified. Meeting minutes from May 27, 2020 were voted on and accepted as written.

Unfinished Business/Standing Reports:

A. ‘Divert Committee’ – Dr.Waffle

Dr. Waffle mentioned that the Divert Committee has not met due to COVID. Tom Lamanna called for a meeting yesterday to discuss some divert issues. Tom Lamanna continued, there was an interesting situation a couple weeks ago where Madigan was on complete divert because their ICU was full. Later that night, St. Anthony’s went on divert for surge. He is trying to identify if we are using the WATRAC tool correctly at an informal meeting yesterday with representatives from each facility. It is up to the facilities to create more ownership get all ER managers and directors in the county to have some standardized language for the use of WATRAC and divert and what goes in that comment field. Dr. Waffle mentioned that WATRAC was developed as a disaster management tool. It would work great if we have an earthquake, but it does not work well on day to day business. Tom and his group are trying to perfect the comment section so it will be more useful for everyone. Feedback from EMS is that they don’t always have the capability or time to check WATRAC before choosing the destination for the patient. Dr. Mizener said that Madigan is not a participant on the no divergent agreement. He offered to work with them and try to get their agreement. Norma Pancake mentioned that with the turnover in all three (3) health systems, we should revisit the whole divert document.

B. TPCHD Update -Cindy Miron

We have an increase of cases. We are seeing more outbreaks in the Long-Term Care facilities, both staff and residents. We are starting to do some planning around COVID vaccines. We have initiated our influenza vaccine campaigns and drive through’s which are scheduled throughout December. Norma Pancake mentioned that in regards to the ability for EMS to assist with the Flu vaccinations, the state EMS office was asked to remove one (1) sentence for jurisdictions to provide vaccinations by Paramedics. Cindy has assured us that once the verbiage is out, Dr. Chen will work on a statewide amendment to the Governor’s proclamation that COVID is an emergency and add to that as an amendment that Flu is as well so we can use the same incident number that is required by DOH. TPCHD has requested two (2) people to assist with a COVID testing of 174 people at a nursing facility in Puyallup tomorrow morning. Falck has provided one (1) person. CPFRR has no one to help within their jurisdiction so we are reaching out to other agencies to see if someone can provide one more person to help. Email Norma if you have

someone available at 9:00 AM tomorrow.

C. Hospital Data Information Exchange- Russ McCallion

The only thing that is new is that the Off Campus EDs do have the hospital data exchange linkage so now we can look up outcomes for the patients which is great for quality assurance.

D. Wellfound Behavioral Health Hospital – Matt Crockett - Tabled

E. Madigan Base Station Replacement Update – Dr. Waffle

There was a meeting last week regarding the proposals that have been submitted (one from CHI Franciscan and one from Multicare). Both are comprehensive in approach. We have a solution for the problem. They are putting together the proposals and some accompanying information. We will send that out to all the EMS council members for their review. At the EMS Council meeting on October 22, 2020, any final commentary or questions will be reviewed, and a vote done to select the proposal that would be best for EMS.

F. MCI- Plan Scenes of Violence Protocol- James Jacques/Russ McCallion/Jeff Moore-Tabled

G. Ebola & Other Highly Infectious Disease Transport Plan – In Process-Tabled

New Business:

A. Pierce County Fires (EPFR & GFR) Lessons Learned- Russ & Matt, et al

An after-action review has not been done yet. They will be happy to get back at the next meeting with all the lessons learned. Calling State mobilization and strike teams were critical. Evacuation was key with DEM. From an EMS perspective, we are fortunate that there were no EMS injuries from the fires. They did go into HIRL – High intensity call volume where dispatch stops sending low acuity calls and sends calls via fax to a server which are then screened by staff to determine if/when they will respond. They still need to go back to reprocess how that program worked. Norma Pancake requested that all agencies educate your staff about the different levels of evacuations (which are not just for fires) and educate your battalion chiefs about what is needed when requesting an evacuation for an area. She is willing to send information out to everyone.

B. Pierce County EDs extended wait times- Ryan McGrady

Ryan discussed the google app. From WPFRR experience, most of their issues have been isolated to one facility in the county. They have had very extended wait times at St. Claire hospital. There are a number of cases there 45 minutes up to a 95-minute wait time. We have WATRAC and the Pre-hospital tool that was developed as a county. It is not being utilized very well as a county. The crews are not opposed to waiting a reasonable period of time, but the extended wait times is unacceptable. We need to have a realistic expectation of how busy a hospital is. Some instances when they show up, they have empty rooms, but they are short on staffing. We need to work together to find some kind of solution to this. This has become a pretty significant problem at WPFRR.

Dr. Waffle said that if the hospitals are having problems with staffing issues, this is not an EMS problem. We do need solid data to take to the hospital CEOs to show that they are not providing good service to the communities. If it is used, the google sheet tracking log does show the data and it is easy and quick to use. It is all up to the agencies to record the data.

Russ McCallion made a motion that Dr. Waffle re-engage the community access committee meetings dealing with increasing hospital turnover times. Dr. Mizener seconded the motion. All voted in favor, no opposition. Motion carried.

C. Ambulance Services in Pierce County- underserved/unserved?- Chief Thirkfield

Recently we had Olympic Ambulance and NW Ambulance seeking different allowances in Pierce County. It sounds like there are some issues with private ambulance services whether hospital based or with fire. It warrants all parties getting involved to discuss the issues and give the current providers (AMR and Falck) an opportunity to fix them. We haven't gotten together and identify as a group where the problems are and to come up with a solution. Norma mentioned that the West Region Strategic Plan in which we outline the min-max numbers and put the caveats for anything coming in for unserved/underserved. An Ad-hoc committee was formed with the following people:

ALS Fire – Calvin Johnson

BLS Fire Agency – Chief Thirkfield

ALS Private Ambulance – Aaron Karejwa

BLS Private Ambulance – (Ride to Wellness?) Norma will contact them for a member.

Hospital – Karmella Palmer

EMS Office – Norma Pancake

Unscheduled:

There are some administration changes at Good Samaritan Hospital:

Shannon Pulley – Interim Director – pullesh@multicare.org

Matt Hooper – Interim Manager – mdhooper@multicare.org

Announcements:

The next meeting will be on November 25, 2020.

Adjournment: 11:01 AM

Scribe: Donna Vitale