VASHON ISLAND FIRE & RESCUE
BOARD OF FIRE COMMISSIONERS

Minutes

Date: 10/12/16
Time: 7:00 p.m.
Place: 10019 SW Bank Rd., Penny Farcy Training Center, Vashon

SPECIAL MEETING

Present: Candy McCullough, Chair
Brigitte Schran-Brown, Vice-Chair
David Hoffmann, Commissioner
Camille Staczek, Commissioner
Ron Turner, Commissioner
Robert Larsen, Interim Assistant Chief
Susan Wolf, Minute Taker

Guests: King County Medic One EMS Director Michelle Plorde and Chief Keith Keller, Annalei Fogt, editor of the Beachcomber; Lisa Devereau, Island Funeral Service, various members of the District and the public.

Question and Answer/Comment:

The Board Chair welcomed everyone and after the pledge of Allegiance, announced that the purpose of the meeting was for the public to pose questions and make comments. She asked that attendees limit their comments to two minutes and she would call on people to preserve order during the meeting.

- Lisa Devereau asked about the increased costs that would be borne by residents of Vashon with this change. Specifically, more airlifts and more transfers on the docks because of staffing issues (resulting in ambulance billings to the patient). She commented that those financial impacts will be large and haven't been brought out. The Board answered that Vashon Island Fire & Rescue (VIFR) already spends a great deal on overtime costs for medics. In addition, several years ago, as part of the eight medic plan, George and Hank (former Assistant Chief and Fire Chief, respectively) enhanced (the policy) of dock transfers when staffing runs short due to multiple calls.

- Doug Ostrom of the Park District expressed concern that if the fire district raised taxes, the park district could be devastated and asked if there had been discussion about this decision. The Board replied that they have talked about it at length. It was stated that we are facing rising financial costs and the public expectation of a response when they call 9-1-1. The District has not raised taxes for 25 years. Back then there were 600 calls a year and now we are approaching 1700 calls per year. It was expressed that there are different avenues such as benefit taxes, levy lid lifts, and so on. But a levy lid-lift would not meet VIFR needs and does have the very real possibility of severely impacting the Parks and Funeral budget. The Board expressed the desire to sit down with the Park District officials and bring in an expert

to discuss options. Mr. Ostrom remarked that it could be potentially devastating and "sink" the Park District. The Board affirmed they are not interested in sinking the Park District; however, the Fire District also has needs and all need to be addressed with a comprehensive solution. The Board stated that once the medic issue is solved then, they will look at financial strategies. The Board commented that our call volume is apt to increase due to our aging population. A Hospital district, while not here at present, unless Neighborcare clinic expanded into a hospital district, would be above the fire district for tax pro-rationing.

- A question was posed by Bob Hook who asked why we didn't form a relationship with other fire districts to have their paramedics come over to the island for back up and fill in. Director Michelle Plorde explained that Vashon medics, although they are part of the Medic One system and trained by Medic One, the programs work differently. The way Medic One city units respond is with two medics in one rig. They respond together and transport together. On Vashon, two medics are in separate rigs so they can separate when transporting a critical patient. One ALS (advanced life support) medic rides in the back of the aid car with the patient and one BLS (basic life support) EMT drives. Once in a while if it's a critical call and Airlift Northwest is not available, they go together. So VIFR splits the medics to transport in case there is another ALS call. When first planning the transition to King County employees, Medic One wanted the medics to transport together, but the Board said it won't work due to time constraints and ferry schedules. The intention was to make the medics employees of King County. The plan was altered to have the medics respond together in one medic unit but they can split if necessary to transport. Vashon medics are great, but they don't get the opportunities to practice their skills, which was brought to our attention by the Vashon Medical Supervisor and the Medical Program Director doctor. They felt the medics need to rotate and practice in the city. The two medic response and transport is a region-wide practice, but Medic One is willing to alter the plan to make the program work here. The advantage to Vashon is to have a pool to provide additional medics or units here, if available. VIFR stands a greater possibility of fulfilling 3-4 transports with that back up. It is the Medics decision whether and how to transport.

- It was pointed out by the Board that these conversations with county and meetings open to the community have been taking place the last couple of years.

- Vashon paramedic Andy Johnson, who worked for the Medic One system 16 years and has worked for VIFR for the past four years, was asked how many 24 hour shifts in a row he has worked. He responded that he personally has worked six and that seven has been done. VIFR ALS program is designed for eight paramedics to cover the shifts and, if they lose one for any reason, we are at a deficit to fill them. For the past several months, since last summer we've been down two, leaving six paramedics to fill eight positions and it became a real problem. Paramedic Johnson stated it's not healthy and they recognize it.

- Commissioner Brown stated that initially she had been vehemently opposed to this change. It represented denigration in service and left our island at risk. Thanks to due diligence by Michelle Plorde, her team and the unions these issues have been addressed and resolved. The plan provides for things that we have not had: The possibility of a realistic, working back-up system. It will probably be a work in progress and need modification as we discover what works and what doesn't, but for once we have the real possibility of back up. There will be funding which will allow us to hire replacement

firefighters for the next year until we can determine how best to re-vamp and gain the much-needed funding for this department. And, it eliminates the need for overtime, which is not good for our medics, their families, our patients and certainly not for the VIFR budget. As such, Commissioner Brown added; she cannot vote against it.

- That said, she pointed out that there is a very real and very human side. Our medics are among the best. They offer a service to the island that goes above and beyond. She has seen medics return to visit a family in the aftermath of an incident just to see how they are coping. She has seen them return to the home of a newly minted widow to have a cup of coffee with her and help her work through her grief and loss. She has seen the pride when they hold a newborn, the compassion with which they comfort a frightened child or an even more frightened parent. She has seen them hold the hands of a senior drawing their final breath. She has seen them laugh and she has seen them cry. She has seen them meet the needs of chronic or difficult patients. She added that if she could vote against this change simply from the heart and not let these amazing men and women go, she would. But a commissioner must vote facing forward and not backward.

- The Medic One program would have 74 medics (with Vashon's medics, 80) comprising eight other units, that can supply the shift rotation and backfill.

- When asked again about back-filling from other agencies, it was explained that they are separate programs – one of VIFR employees, the other with county employees. We do have a relationship with local agencies and King County, but each program has their own obligations. VIFR couldn't depend on another agency to transport, backfill, and so forth on a regular basis. In the business of EMS, there is zero probability that another program would be willing come in and help on a regular basis. By working for King County, there's a bigger pool to draw from.

- It was pointed out we have the same issues with VIFR's BLS pool. Some catastrophe can devastate what we have, but we would fill in and do the best we can.

- Sandy Hook commented that her 87-year-old dad had a medical emergency. When he went to bed he seemed fine, but woke up with pneumonia and sepsis. They called 9-1-1 and she accompanied her dad in the back of the aid car. During transport on the ferry, the crew's pagers went off and when they looked at them, they said, "Oh, shit!" There wasn't enough staff to fill. So they transferred her dad at the dock to another ambulance, so they could return to the island (to answer the other call).

- Then Ms. Hook asked if both medics were off the island, how soon would we call someone to come over and be ready? The answer was the medics would call for back-up as soon as they realized the need so the back-up unit would already be on the way – maybe even cross the ferry under ideal conditions. Every King County medic unit has a back-up – so there is wide depth. One unit here on Vashon can't rely on other agencies, but being part of Medic One is their job and obligation. VIFR would be part of the program.

- Paul Schuster asked about medics doing other things. He mentioned training EMTs, conducting run reviews, or providing community paramedicine such as (going to houses for

housebound patients) taking blood pressures, glucose checks, etc. He wondered if the community and new clinic could take advantage of those types of things. Director Plorde answered that in regard to additional duties, King County Medic One is now in the process of building a regional run review program. A run review, the Board explained to public members, is to review or look at the patient care notes EMTs make when responding to calls. Director Plorde explained that best practice is to have all EMT records reviewed by a paramedic. VIFR medics are doing it for Vashon EMTs. She found out that some agencies in the county did not have and were unwilling to pay for medics to review runs. So she initiated a program, now being tested at a few agencies, so every program is being reviewed. And the county is paying for this regional run review program. Medics look at the most critical calls – it's a type of Quality Assurance. Most agencies in the county now have ESO software which provides electronic notes. This program can be accessed by medics to review and send notes to the EMT. At some agencies paramedics sit in on shifts and observe, then teach a lesson for best practice. Zone 1, which is north and east, do it on shift. In Zone 3 the fire districts hire someone to do it.

- As far as community paramedicine, some communities have a medical technician, who addresses low acuity (not life-threatening) calls on a unit that can respond within 20 minutes. These medical technicians can spend more time with the patient. King County is in the process of testing this type of program. Three are being tested to see if the model works; to see if people get more appropriate care.

- Sandy Hook noted that when Chief Lipe, her neighbor, first moved to the island, Hank couldn't find his way around. If new people are coming to the island, will there be any cross training? Chief Keller replied they estimate for the first year they will be pairing a Vashon medic with one of the new people. VIFR medics will need to do some training over there (on the mainland). In the past, Seattle medics came over and served here and people here helped them get to the calls. Andy Johnson stated he worked in the south, a 500 square mile area and while it took a little time to learn the routes, he never knew every street. There was always someone he could call to find his way.

- A question was asked about the budget. The Board responded that the budget is a bigger picture than they can answer tonight. Director Plorde was asked about initial transition balances. She explained that any time a program transitions back to the county, the county's EMS funds, including all the program balances for personnel and equipment, returns to the county. In Vashon's case, she has agreed to leave all program balances minus liabilities for payroll such as paying out vacations and retiring expenses. The county will also leave one back-up vehicle. That will leave $400,000 for hiring new FF/EMTs and other transition costs.

- Someone asked if VIFR would have a hard time filling three firefighter positions. The answer was no, applicants are lining up for firefighter jobs. Chief Larsen clarified that he *wanted* to fill three positions, but not that he *was going to*. We have a budget process and he hopes that can happen by the end of the year. When the medic issue is resolved, then he can see what whole picture looks like it.

- Next Steps: The commissioners would need to approve the transition. Next King County Medic One has to approve and define operational logistics. After that, the two unions have to finalize negotiations. Then the whole package goes to the King County Council for approval. Medic One medics are formulating schedules for the year. They figure by first quarter (of 2017) maybe to the end of March or April for the transition to occur. Since this past June, Director Plorde has made this transition a priority; the VIFR Board has been working hard to form a decision. VIFR and the county deserve an answer. The greatest benefit is depth. Andy Johnson commented that he has worked six shifts and they recognize this is unfair.

- Joanne Hennessey stated she's never voted on a Medic One levy and asked what happens if it is defeated. The answer was yes, King County voters do vote on this issue. The Medic One EMS levy did fail once. When that happened, the county found the money to continue the program for three months until it was resubmitted to the voters and passed.

- The unions had to complete this plan first; that was Step One. For those medics working out of busy stations three quarters of the year, Vashon would be a nice place to rest. The other benefit is that, because of the extended time with a patient, two hours at a time instead of 5-10 minutes, it will expand their skills in different way. The medics bid on the stations they want work at so Vashon will see those faces again. And with the rotation, VIFR medics will see lots of critically ill patients.

- The Board stated that VIFR can't serve the island without citizen support.

The Chair announced that after taking comments and questions, a motion was made at last night's meeting and tabled until tonight.

Commissioner Turner:

"I call the question."

The Chair read the motion:

"I move that we proceed with the transition and that it be done by January 1."

MOTION PASSES, 5-0

- The Board asked that Chief Keller and Director Plorde continue the hard work that they are doing. It was noted that it is unlikely to happen by January 1, but they will work to make it happen as soon as possible.

The Chair adjourned the meeting at 7:57 p.m.

*The next **Special Meeting** (Executive Session) will be on 10/13/16 at 6:30 p.m. at 10020 SW Bank Rd, Vashon, EOC Room*

*The next **Regular Meeting** will be on 10/25/16 at 6:30 p.m. at 10020 SW Bank Rd, Vashon, EOC Room*

Approved this 25 day of Oct., 2016.

Candy McCullough, Chair

Susan Wolf, District Secretary