

Kitsap County EMS and Trauma Care Council EMS Operational Meeting Minutes

September 16, 2009
Readiness Center
Bremerton, WA

Attendees:

Barb Lovato	KCEMS	Martin Bennett, MD	KCEMS
Stan Plyler	BFD	Steve Engle	NKFR
Rhonda Roberts	KCEMS	Mike Wernet	SKFR
John Burch	PSNS	Lori Bisping	KCEMS
Joe Repar	CKFR	Butch Lundin	BIFD

Visitors:

Randal J Kochel	Miller Woodlawn Funeral Home
Sean Cochran	Miller Woodlawn Funeral Home
Laura Jull	Harrison
Jessica Guidry	KC Heath District

Called to order by Chair Steve Engle at 10:15 am.

I. Approval of July 15, 2009 Minutes

John made a motion to approve July's minutes with change, motion seconded by Joe. Minutes were approved with change.

II. Old Business

A. Policy Review

Dr. Bennett made the motion to approve with changes the Changing Status from Paramedic Policy to EMT, Stan seconded the motion. Motion approved the Changing Status from Paramedic to EMT with changes.

Stan made the motion to approve with changes the Choking Victim Policy, John seconded the motion. Motion approved the Choking Victim with changes.

III. New Business

A. Kitsap Alternate Care Plan

Laura Jull and Jessica Guidry presented the Kitsap Alternative Care Plan (See [Attachment 1](#)). They briefly covered this plan which is a medical surge plan. This document deals with caring for the public and the patients. Currently, there are discussions with local hotels to become overflow for the hospital in an emergency. For more information about the draft medical surge plan, contact Jessica Guidry at guidrj@health.co.kitsap.wa.us.

B. Family Emergency Response Program

Randal Kochel from Miller Woodlawn Funeral Home presented the Family Emergency Response Program. This program was set up to help contact individuals the patient would like to have notified in case of an emergency. The patient would have a card in their wallet labeled Dignity Memorial Family Emergency Response Program. It would have a phone number to reach a service that would have four contacts who know pertinent information about the patient. They encourage the patient to have at least one individual that could be at the hospital in one to two hours. This service is free to the patient. Miller Woodlawn Funeral Homes is trying to notify all emergency personnel that would need to identify next of kin that these cards may be in the patient's wallet.

C. Protocols

The protocols are currently being reviewed for 2010 updates. There will be a form emailed out to all the Medical Officers and Paramedics asking the providers if they have any feedback about the 2009 protocols. The form will be requesting information on oversights in the protocols or typographical errors. It will also ask if they like the current format. Dr. Bennett is also looking at the Regional Protocols with some simple changes for our county. Rhonda will send out the email with the form and a request for volunteers to be members of the Protocol Committee. The form will be sent to the Medical Officers to forward to the EMTs too.

D. Child Death Injury Form

There will be a presentation at the November Base Station Meeting on the new child RCWs. At the Base Station Meeting Mike and Steve will go over the form created by the Medical Officers. The form, after being filled out, will stay at the agencies with the patient report.

E. CPAP

Central Kitsap Fire and Rescue has included CPAP machines in their budget. They will be purchasing the same brand as the hospital so they are compatible.

F. CME Paramedics

There was a question about revisiting how many CME hours are available for online classes. There are increasing numbers of quality classes available online. The group is satisfied with the current hours at this point.

G. QI Plan

The biggest question to answer is should the quality improvement plan focus on treating the patient that is here or the possible patient that will come. Downgrading and not having a clear report on why it was downgraded is an issue. The suggestion is to make sure the EMTs are correctly trained on what is a paramedic evaluation. Lori will work on the current paramedic exam; possibly combine it with the protocol exam so the potential new paramedics will only have to take one exam. Lori was then asked to present more at the next meeting due to time constraints.

IV. Good of the Order

1. The State is currently reviewing having the option of paramedics give flu shots in an emergency situation. The medics will only vaccinate first responders.
2. H1N1 Responder Meeting is being held September 22 at Kitsap County Operations Center. It will be at 1400.

Meeting Adjourned: 13:06 pm

Next meeting will be scheduled for October 21 at 10:00 am.

Attachment 1

Kitsap County Medical Surge Plan Kitsap County, WA

Purpose:

The purpose of this plan is to identify the coordinated response of public health, emergency management, hospitals, and other medical practitioners during an event that overwhelms the health system within Kitsap County. These types of events could include, but are not limited to, earthquakes, terrorism events, or pandemics.

Continuum of Patient Care Coordination - Definitions:

The Continuum of Patient Care Coordination (see attached) identifies the different types of healthcare delivery systems used within Kitsap County during an overwhelming (requiring more resources than available) medical or health event. Tiers may be activated simultaneously and not necessarily by tier number. The four tiers are defined as follows:

Tier 1 - Includes telephone triage and health information, family home care, and professional home care.

- Telephone triage and health information – Is utilized to disseminate information to the general public regarding how, when, and where to receive care. Information may include self-care tips so people can treat themselves and their loved ones at home.
- Family home care – Treatment advice can be acquired through the telephone triage line or via individual medical practitioners.
- Professional home care – Home health and home care agencies can provide in-home care to patients who stay at home.

Tier 2 – Includes triage centers, specifically the major clinics and urgent care centers represented in the Kitsap County Health District Mass Vaccination/Prophylaxis Plan.

- Major clinics and urgent care centers who have the staff to remain open and treat “walking-wounded” patients and others who do not require hospitalization.

Tier 3 – Includes the hospitals within Kitsap County, Harrison Medical Center – Bremerton, Harrison Medical Center – Silverdale, and Naval Hospital – Bremerton. Also includes the possibility of opening an Alternate Care Facility.

- The hospitals need to be kept available for the patients who need a hospital setting the most. Typically, these patients will require surgery, ventilators, or other hospital-specific equipment or services.
- An Alternate Care Facility can open for those who need specialized care when the area hospitals become overrun with patients.

Tier 4 – Includes home care, long-term care, coroner and/or funeral homes.

- Home care in this situation applies to those who are not likely to recover from illness or injury. Family members will take care of the patient or call in professional help from home health or home care agencies.
- The coroner and funeral homes are utilized for individuals who do not survive the event.

Tier Details:

Tier 1 – Telephone health information and triage lines will be established. Triage lines will provide guidance to the public on whether to stay home or go to a triage center, hospital, or alternate care facility. Health information lines will be used to provide basic health information to prevent additional illness or injury and information on how to provide at-home care or access professional home care.

The ultimate purpose of these information and triage lines is to prevent the spread of disease (e.g. during an influenza pandemic) and the overcrowding of Kitsap's medical facilities, especially Harrison Medical Center and Naval Hospital-Bremerton.

The triage criteria, triage script, and health information scripts will be developed by the Kitsap County Emergency Operations Center, Kitsap County Health District, and Harrison Medical Center. Templates of these documents will be created by the Kitsap County Health District specific to pandemic influenza that can be edited for other types of medical and public health emergencies.

Staffing for Tier 1 response will be coordinated by the Kitsap County Emergency Operations Center with support from Kitsap County Health District.

Additional agencies, such as those listed below, may be called upon to assist in the telephone triage:

- Teletech - *to provide staffing and a facility for a health information and/or triage call center*
- Medical Reserve Corps (through the Emergency Operations Center) - *to provide staffing for triage and health information lines (when possible)*
- Kitsap County Central Communications – *to forward medical or health calls that meet certain criteria to the telephone triage line*
- Kitsap County Emergency Medical Services (EMS) agencies – *to provide input on the triage process*

Tier 2 – Triage Centers are clinics, urgent care centers, and surgery centers that may be asked to voluntarily suspend their normal operations in order to assist in an emergency.

The purpose of activating these Triage Centers is to provide care to Kitsap residents who are too sick to stay home while ensuring that only critical patients are treated at Harrison Medical Center and Naval Hospital – Bremerton campuses during emergencies.

Triage Centers will be asked to provide services to patients who display certain symptoms/conditions that require physical examination and/or care by a medical professional, but not hospitalization. The Kitsap County Health Officer, along with the County Emergency Operations Center and Harrison Medical Center, will determine these exact symptoms/conditions, but they may include:

- Minor injuries
- Influenza-like systems

Triage Centers may be asked to provide services such as:

- Physical assessment of patients
- Treatment per standing protocols – provided by the Kitsap County Health Officer and may include:
 - Antiviral medication distribution
 - IV antibiotic treatment
 - Oral hydration
 - Supplemental oxygen
 - Vital signs monitoring
 - Limited airway management

- Triage decisions to either return home or be sent to Harrison Medical Center

For a list of clinics eligible to be Triage Centers, please refer to the Medical Treatment Facility section of the Kitsap County Mass Prophylaxis/Vaccination Plan.

Neighborhood Distribution Centers (NDCs) may be used to supplement Triage Centers. NDCs are churches and/or schools that have signed agreements with Kitsap County Government to act as mass prophylaxis/vaccination sites. These sites will be staffed with medical personnel who will assess patient eligibility for prophylaxis/vaccinations and monitor for adverse reactions. The NDCs may be activated to assist in mass triage or, if already activated for prophylaxis/vaccinations, may be asked to assist in mass triage in addition to their existing mission. For a list of NDCs, please see the Kitsap County Health District Mass Prophylaxis/Vaccination Plan.

The decision to activate Triage Centers will be made by the Kitsap County Emergency Operations Center with input from the Kitsap County Health Officer and Harrison Medical Center. This decision will be based on several factors including:

- The ability of Harrison Medical Center to treat patients if their facilities are damaged, full, or compromised.
- A marked increase of patients needing immediate care or assessment

Certain or all eligible medical clinics, urgent care centers, and surgery centers may be asked to voluntarily suspend their operations to act as Triage Centers. Activation will likely be done through a conference call and/or in-person meeting between the Kitsap County Emergency Operations Center, Kitsap County Health Officer, Harrison Medical Center, and Medical Directors of the potential Triage Centers. Facilities may be notified of potential triage center request through the Health District blast communications system and/or other notification systems.

Kitsap County Health District and the Kitsap County Department of Emergency Management will work with these facilities before an actual emergency to discuss expectations, mutual needs, liability, and other issues.

Activated Triage Centers will use their existing staff and facilities to carry out their emergency roles and may be augmented by the MRC.

Tier 3 – Harrison Medical Center – Bremerton is the Disaster Medical Control Center (DMCC) for hospitals within Kitsap County. In addition, bed availability status for all hospitals in Western Washington can be accessed via WATrac. WATrac is a web-based health incident management system that can display the types of beds each hospital has available. This aids EMS, public health, and other hospitals with locating a place to house and potentially transport patients to for care.

Should the Kitsap County hospitals not be able to accommodate all patients or find beds within the Western Washington area, notification should be made to Kitsap County Department of Emergency Management, Kitsap County Health District, and WA State Department of Health to request help with relocating patients. The National Disaster Medical System (NDMS) can be utilized to transfer patients out of the area in the case of a localized event.

Decisions will need to be made during events that impact the healthcare arena nationally or internationally, like pandemics. In this type of situation, it may be necessary to open an Alternate Care Facility.

In Kitsap County, these sites have been identified as potential locations for Alternate Care Facilities:

- **Comfort Inn & Suites, 5640 Kitsap Way, Bremerton**
This facility is just off Hwy. 3 at Kitsap Way. It has 155 guest rooms and 11,000 square feet of meeting/banquet space. In room amenities include a refrigerator, microwave, coffee pot. Wireless/Ethernet access and guest laundry services are available.
- **Bremerton Inn & Suites, 4303 Kitsap Way, Bremerton**
This facility is just off Hwy. 3 at Kitsap Way. It has 103 rooms, includes a Guest Business Center with Internet access and on-site laundry facilities.

Opening of an Alternate Care Facility requires a disaster declaration by Kitsap County Department of Emergency Management/Kitsap County Health District and permission from WA State Department of Health.

The Alternate Care Facility will be operated under Harrison Medical Center's license. Revenues and expenses would funnel through Harrison Medical Center, with Federal reimbursement for hotel utilization coordinated through the Kitsap County Department of Emergency Management.

Staffing of the Alternate Care Facility will happen in a variety of ways, including:

- Medical Staff – will be directed to work at the Alternate Care Facility by Harrison Medical Center or the Kitsap County Health Officer.
- Nurses, therapists, social workers and other clinical staff – will be directed to work at the Alternate Care Facility by Harrison Medical Center or the Kitsap County Health Officer.
- Administrative staff - will be directed to work at the Alternate Care Facility by Harrison Medical Center or the Kitsap County Health Officer.
- Dietary staff – A hospital dietitian/chef will oversee the hotel's cooking staff or catering company to ensure appropriate meals for patients.
- Laboratory staff – A laboratory manager and phlebotomists will be assigned, as appropriate.
- Medical Imaging – Medical Imaging services will be limited to portable equipment that can be transported to the facility. Appropriate staff will accompany equipment, as needed.
- Environmental Services – A hospital EVS manager will supervise the hotel's housekeeping staff to ensure appropriate cleaning and disinfecting of rooms and linens.
- Warehouse staff – A warehouse worker will be assigned to work with public health to receive supplies and keep inventory of equipment.
- The Medical Reserve Corps may be a resource to assist at the Alternate Care Facility; however, it is agreed that the MRC volunteers will first be used for telephone triage and other public health duties to limit the spread of virus or disease.
- Patients' families may have the ability to stay in the room with the patient to provide non-clinical care.

A suggested minimum staffing per 12 hour shift (based on University of Michigan plan) is as follows:

	50 beds	Total for 250 patients
Physicians	1-2	5-10
Physician Assistants or Nurse Practitioners	1	5
Registered Nurses	4-6	20-30
Nursing assistants/techs	4-6	20-30
Clerks	2	10
Respiratory therapists	1	5
Social work/case manager	1	5
Environmental services	2	10

Pharmacist	2	10
Pharmacy technician	1	5
Security	3-4	15-20
Transport Officer	1	5
Mental Health Specialist	1	5
Total	22-28	110-140

Supplying the Alternate Care Facility will occur in a variety of ways:

- Emergency Preparedness trailers can be hauled to the hotel site. Current supplies are available to help treat 100 patients. (See supply list at back of document).
- Harrison Medical Center's warehouse will deliver supplies daily.
- Harrison Medical Center can order supplies from vendors to be directly delivered to the hotel.
- Medications and supplies from the Strategic National Stockpile or a Federal Medical Station can be delivered directly to the site when available (See information about Federal Medical Stations at back of document)

Kitsap County Health District may support the operations of the Alternate Care Facility in one or more of the following ways:

- Provide infection prevention recommendations
- Provide guidance/recommendations on disease surveillance issues
- Provide information on how to request medications and other resources from the Washington State Department of Health, who can then facilitate the ordering of a Federal Medical Station or supplies from the Strategic National Stockpile, if necessary
- Provide health education materials to the Alternate Care Facility staff, patients, or patient families, if necessary
- Provide guidance on usage and reporting requirements when State and Federal supplies and medications (such as the Strategic National Stockpile) are used at Kitsap County facilities

Demobilization will occur when the hospitals, Kitsap County Health District, and Kitsap County Department of Emergency Management agree there is no longer a need for the Alternate Care Facility. Coordination related to the stand down of personnel and supplies will take place between the four agencies.

Tier 4 - Home care in this situation applies to those who are not likely to recover from illness or injury. Family members will likely take care of the patient or call in professional help from home health or home care agencies. Palliative care is essential for these patients.

The coroner and funeral homes are utilized for individuals who do not survive the event. Refer to the Kitsap County Mass Fatality Plan.

Communication

Communication refers to a variety of types and mediums. Communication must be available within an Alternate Care Facility, between facilities and public agencies, within the medical community, and with the public.

Communications within the Alternate Care Facility can be handled via:

- Harrison Medical Center Motorola Radios
- Harrison Medical Center cell phone cache
- Kitsap County Department of Emergency Management Radio cache
- Kitsap County Department of Emergency Management cell phone cache
- Alternate Care Facility phone system (hotel room phones)

Communications between facilities and public agencies can be handled via:

- Land-line phone systems
- Cell Phones

- HAM Radio
- Satellite phones
- E-mail
- Fax

Communications with the Medical Community can be handled via:

- Land-line phone systems
- Cell Phones
- E-mail
- Health District's blast fax/email system
- Medical Staff Update (Harrison Medical Center weekly newsletter to physicians)

Communication with the public will be handled in a variety of ways, including:

- Press releases distributed by the Joint Information Center
- Websites including those of Kitsap County Health District, Kitsap County Department of Emergency Management, and Kitsap County Government, Harrison Medical Center, and Naval Hospital – Bremerton.
- Mass messaging through the PIER system.

Transportation

Emergency Medical Services (EMS) and Olympic Ambulance will transport patients, as needed, to appropriate care facilities as deemed by the DMCC. If transportation is needed for large numbers of patients, may call Kitsap Transit for assistance.

Taxi cabs and public transportation can be utilized for patients being discharged that do not have private transportation.

Monitoring

Kitsap County Health District will monitor pandemic disease through its Epidemiology Department. Harrison Medical Center and Naval Hospital will report disease issues as directed by public health.

Demobilization and Deactivation of Medical Surge Response

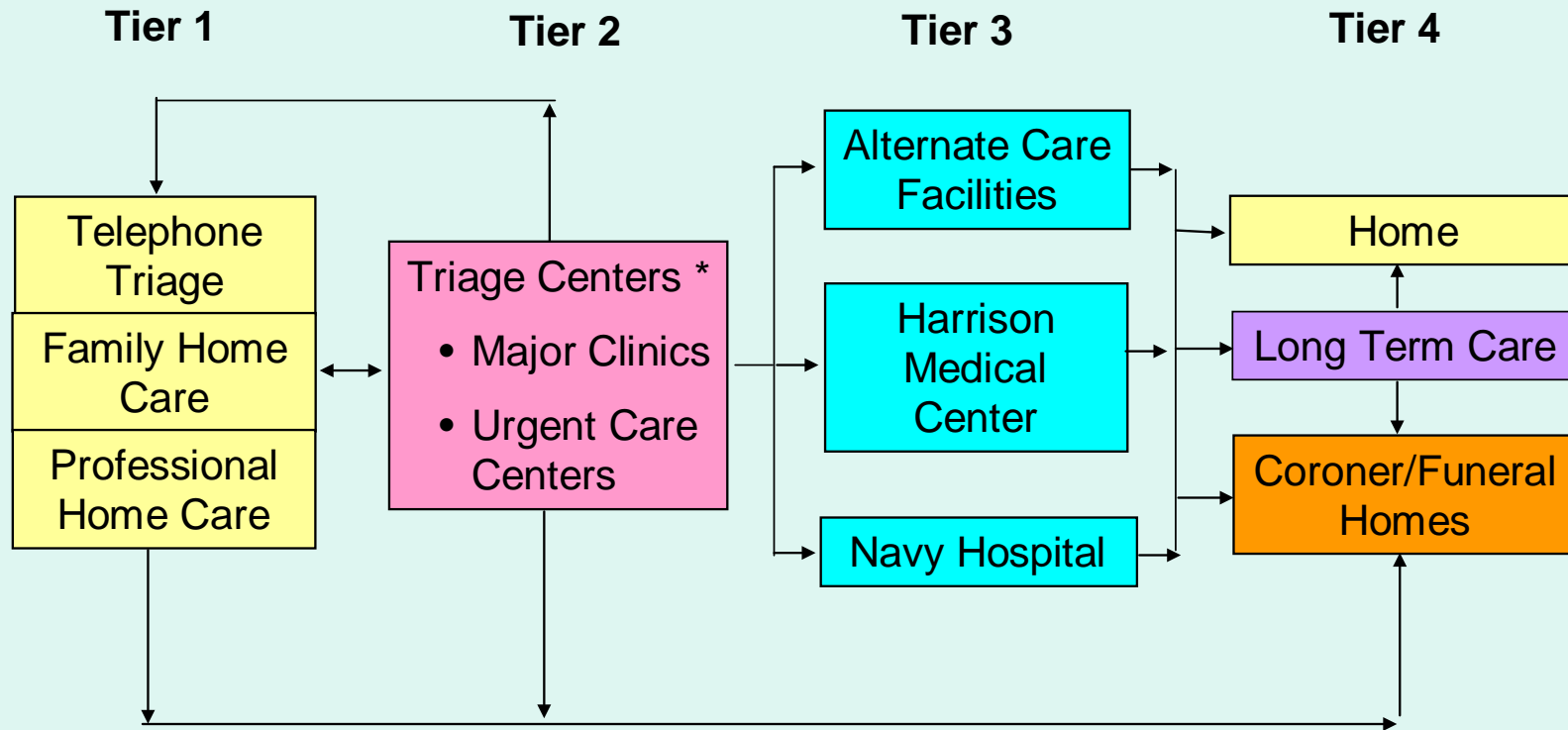
Daily monitoring of healthcare utilization will be conducted by Harrison Medical Center, Naval Hospital – Bremerton, and Kitsap County Public Health.

Hospital bed tracking can be done via WA Trac. Bed tracking at the Alternate Care Facility will be done via the Charge Nurse located at the facility.

Kitsap County Public Health will gather information related to number of visits related to the event by Triage Centers.

Harrison Medical Center, Naval Hospital Bremerton, Kitsap County Health District, and Kitsap County Department of Emergency Management will determine when medical surge response is no longer needed. These agencies will work together to systematically ensure that the tiers are deactivated and that participating response agencies return to normal operations. In addition, they will participate in after action report development.

Continuum of Patient Care Coordination



* Includes Clinics and Urgent Cares represented in KCHD NDC plan