

Washoe County District Board of Health Meeting Minutes

Members

Kitty Jung, Chair
Julia Ratti, Vice Chair
Oscar Delgado
Dr. George Hess
David Silverman
Dr. John Novak
Michael D. Brown

**Thursday, April 28, 2016
1:00 p.m.**

**Washoe County Administration Complex
Commission Chambers, Building A
1001 East Ninth Street
Reno, NV**

1. *Roll Call and Determination of Quorum

Chair Jung called the meeting to order at 1:03 p.m.

The following members and staff were present:

Members present: Kitty Jung, Chair
Julia Ratti, Vice Chair (arrived at 1:13 p.m.)
Dr. George Hess
Dr. John Novak
Mike Brown
Oscar Delgado

Members absent: David Silverman

Ms. Spinola verified a quorum was present.

Staff present: Kevin Dick, District Health Officer, ODHO
Herbert Kaplan, Deputy District Attorney
Anna Heenan, Administrative Health Services Officer, AHS
Randall Todd, Division Director, EPHP
Mike Wolf, Air Quality Supervisor, AQM
Daniel Inouye, Air Quality Supervisor, AQM
Yann Ling-Barnes, Environmental Engineer II, AQM
Christina Conti, EMS Program Manager
Brittany Dayton, EMS Coordinator
Tony Macaluso, Environmental Health Specialist Supervisor, EHS
Dawn Spinola, Administrative Secretary/Recording Secretary, ODHO

2. *Pledge of Allegiance

Dr. Todd led the pledge to the flag.

3. *Public Comment

As there was no one wishing to speak, Chair Jung closed the public comment period.

4. Approval of Agenda

April 28, 2016

Mr. Brown moved to approve the agenda for the April 28, 2016, District Board of Health regular meeting. Dr. Novak seconded the motion which was approved five in favor and none against.

5. Approval of Draft Minutes

March 24, 2016

Dr. Novak moved to accept the minutes of the March 24, 2016 District Board of Health regular meeting as written. Dr. Hess seconded the motion which was approved five in favor and none against.

6. *Recognitions

A. Years of Service

1. Benjamin (Frank) Cauble, 25 years, hired 4/8/91 – CCHS

Mr. Cauble was not in attendance. He will receive a certificate and 25-year pin.

B. New Hires

1. Shawnette Andries, Public Health Nurse I, hired 4/21/16 – CCHS
2. Kelly Verling, Public Health Nurse I, hired 4/21/16 – CCHS

Mr. Kutz introduced Ms. Andries and Ms. Verling and reviewed their backgrounds and qualifications. Mr. Kutz stated CCHS was excited to have them on the team.

7. Proclamations

A. Bike Week

Accepted by: Julie Hunter

Mr. Dick read the proclamation.

Chair Jung noted that she and other Board of County Commission (BCC) members would be riding on Bike Day. She encouraged the Board, staff and visitors to join them at the event.

Mr. Brown moved to support the proclamation. Dr. Novak seconded the motion which was approved five in favor and none against.

[Vice Chair Ratti arrived and joined the meeting at 1:13 p.m.]

B. Emergency Medical Services Week

Accepted by: Christina Conti

Mr. Dick noted that there were a number of Emergency Medical Services (EMS) staff in the audience and requested they introduce themselves at the time the group photo was taken. He read the proclamation.

Chair Jung asked the EMS staff to come forward and introduce themselves.

Dr. Hess moved to accept the proclamation. Dr. Novak seconded the motion which was approved five in favor and none against.

EMS staff representing the City of Reno, Truckee Meadows Fire Protection District (TMFPD), Washoe County Emergency Management and REMSA came forward and

introduced themselves. Board members and the audience expressed their appreciation for the EMS staff and their services with a round of applause.

Chair Jung noted that the District Board of Health (DBOH) meetings were now being recorded and televised.

8. Consent Items

Matters which the District Board of Health may consider in one motion. Any exceptions to the Consent Agenda must be stated prior to approval.

Mr. Dick referred to Item 8.A.5., acknowledging the hard work of Stacy Hardie and the Family Planning Group to obtain Title X funds. Their efforts netted several hundred thousand more dollars for the upcoming fiscal year than in past years.

A. Budget Amendments/Interlocal Agreements

1. Approval of Interlocal Agreement between the Washoe County Health District and University of Nevada School of Medicine Integrated Clinical Services, Inc. and University of Nevada School of Medicine Multispecialty Group Practice North, Inc., dba MedSchool Associates North to provide physician consultant services for the Tuberculosis Program in the amount of \$14,400 annually (\$1,200 per month) for the period April 1, 2016 through June 30, 2017 unless extended by the mutual agreement of the Parties; with automatic renewal for successive one-year periods for a total of 3 years on the same terms unless either party gives the other written notice of nonrenewal at least 60 days prior to June 30 of each year; and if approved, authorize the Chair to execute the Interlocal Agreement.

Staff Representative: Patsy Buxton

2. Approval of Notice of Subgrant Award from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health in the total amount of \$110,000 for the period March 29, 2016 through March 28, 2017 in support of the Community and Clinical Health Services Division (CCHS) Tobacco Prevention and Control Grant Program, IO 11238; and if approved, authorize the Chair to execute the Notice of Subgrant Award.

Staff Representative: Patsy Buxton

3. Approval of Notice of Subgrant Award from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health in the total amount of \$129,629 for the period January 1, 2016 through December 31, 2016 in support of the Community and Clinical Health Services Division (CCHS) Sexually Transmitted Disease (STD) Grant Program, IO 10014; and if approved, authorize the Chair to execute the Notice of Subgrant Award.

Staff Representative: Patsy Buxton

4. Approval of Notice of Subgrant Award from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health in the total amount of \$107,327.79 for the period April 1, 2016 through March 31, 2017 in support of the Community and Clinical Health Services Division (CCHS) Ryan White Early Intervention Services Grant Program, IO 11302; and if approved, authorize the Chair to execute the Notice of Subgrant Award.

Staff Representative: Patsy Buxton

5. Approval of Notice of Award from the Nevada Department of Health and Human Services, Public Health Service for the period April 1, 2016 through March 31, 2017 in the total amount of \$1,209,536 (\$102,800 Health District match) in support of the

Community and Clinical Health Services Division (CCHS) Title X Family Planning Grant Program, IO 11304.

Staff Representative: Patsy Buxton

B. Recommendation to Uphold Citation(s) Not Appealed to the Air Pollution Control Hearing Board

Staff Representative: Charlene Albee

1. Desert Wind Homes, Case No. 1182, Citation No. 5527
2. Reds Development, Case No. 1181, Citation No. 5527
3. KDH Builders, Case No. 1183, Citation No. 5528

C. Acknowledge receipt of the Health District Fund Financial Review for March, Fiscal Year 2016

Staff Representative: Anna Heenan

D. Approval of Personal Protective Equipment and Isolation Pods donation to law enforcement, EMS transport capable agencies, and hospitals in the total amount of \$116,417 to enhance the ability to protect against infectious disease and other health hazards.

Staff Representative: Jeff Whitesides

Mr. Brown moved to accept the Consent Agenda as presented. Vice Chair Ratti seconded the motion which was approved six in favor and none against.

9. PUBLIC HEARING - Review, discussion, and adoption of the Business Impact Statement regarding the proposed revisions to the District Board of Health Regulations Governing Air Quality Management, Sections 040.051 (Wood Stove/Fireplace Insert Emissions), 040.052 (Hydronic Heaters), and 010.000 (Definitions), with a finding that the revised regulations do not impose a direct and significant economic burden on a business; nor do the revised regulations directly restrict the formation, operation or expansion of a business; and set a public hearing for possible adoption of the proposed revisions to the Regulations for May 26, 2016 at 1:00 pm.

Staff Representative: Yann Ling-Barnes

Chair Jung opened the public hearing.

Ms. Ling-Barnes gave an overview of the information provided in the staff report.

Jim Nadeau, representing the Reno/Sparks Association of Realtors, provided statistics regarding the number of wood burning devices that might be affected if the revisions are approved.

Dr. Hess expressed concern with the use of the term hydronic heater, as he felt it was unclear. Ms. Ling-Barnes explained staff had incorporated the term as defined by the Environmental Protection Agency (EPA) for consistency.

Mr. Dick noted the agenda item was for the review of the business impact statement, and the update would bring the wood stove regulations into conformance with EPA regulations. He reiterated that the regulations would be presented to the Board during the May meeting. Mr. Dick opined that when Dr. Hess had had the opportunity to review the complete regulation package, he would find that the descriptions were specific enough to be clear. Chair Jung indicated to Ms. Ling-Barnes that clarification should be contained within the May presentation.

Dr. Hess moved to adopt the Business Impact Statement and set a public hearing for

possible adoption of the proposed revisions to the Regulations for May 26, 2016 at 1:00 pm. Dr. Novak seconded the motion which was approved six in favor and none against.

10. *Update and Potential Discussion regarding Current Status of Emergency Medical Services in Northern Washoe County

Staff Representative: Aaron Kenneston

Mr. Kenneston, Washoe County Emergency Manager, thanked the Board for the invitation to speak. He explained he would be meeting with the Board of County Commissioners (BCC) in the near future to present a plan for Fire and EMS services in Northern Washoe County. Until that occurred, he was not at liberty to provide the information in its entirety to the DBOH, although he offered to return after that time if they would like him to.

Mr. Kenneston noted that TMFPD had been providing services in northern Washoe County since just before New Year's Eve. The BCC has approved two full-time positions beginning with the new fiscal year. He reviewed the history of the EMS coverage in the area and described the service territory.

Dr. Hess noted it was a large area for two people to cover and asked if volunteers were enlisted to assist. Mr. Kenneston explained there had been volunteers in Cedarville, CA, Alturas, CA and in the Red Rock area of NV. Additionally, TMFPD had conducted medical training in Gerlach. Mr. Kenneston indicated he was optimistic that a sustainable department would be established, utilizing the proposed permanent staff and recruited volunteers.

Chair Jung thanked him for his time and for all of his work County-wide.

11. Presentation, discussion and possible approval of the Fiscal Year 2015-2016 revisions to the Multi-Casualty Incident Plan (MCIP)

Staff Representative: Brittany Dayton

Ms. Dayton provided a PowerPoint presentation (Attachment A), explaining the updates to the plan. She acknowledged the participation of numerous agency partners, including audience members Kent Choma and Brian Taylor from IHCC and Tim Spencer from Reno Fire.

Mr. Brown moved to accept the revisions to the MCIP as presented. Dr. Hess seconded the motion which was approved six in favor and none against.

12. Presentation, discussion and possible approval of the use of IAED Omega determinant codes and REMSA's alternative response process within the REMSA Franchise area

Staff Representative: Brittany Dayton

Ms. Dayton noted the Board had heard the item previously and reminded them that the Omega protocol will allow some low acuity non-emergent 911 calls to be handled by an emergency communications nurse providing assistance and direction over the phone.

Ms. Dayton noted numerous meetings and significant discussion had occurred since the item was first presented and details regarding the alternative release process and call processing for Omega calls had been finalized in the proposed MOU. The EMS Advisory Board had recommended that the item be presented to the DBOH for approval. These and the proposed implementation timeline were explained with the assistance of a PowerPoint presentation (Attachment B).

Dr. Novak asked if the same group of classification criteria presented previously would still be used and Ms. Dayton stated it would.

Dr. Hess moved to approve the IAED Omega determinant codes and REMSA's

alternative response process within the REMSA Franchise area as presented. Dr. Novak seconded the motion which was approved six in favor and none against.

13. *Emergency Medical Services Advisory Board April Meeting Summary

Staff Representative: Christina Conti

Ms. Conti noted the EMSAB meeting had to be cut short so the CAD-to-CAD interface and the EMS state conference were not discussed.

Ms. Conti explained work continues on the 5-year strategic plan and the EMSAB accepted what has been completed thus far.

Vice Chair Ratti requested an update on the status of the CAD-to-CAD interface and Ms. Conti provided the Board members with copies of the staff report that had been presented to the EMSAB (Attachment C). Ms. Conti explained a subcommittee was working together to address the interface implementation. She noted REMSA has finalized the agreement with their CAD vendor, TriTech, and the public agencies are working on theirs with Tiburon. Anticipated timeline for full implementation is nine months from when the work begins.

Vice Chair Ratti asked what was holding it up and Ms. Conti informed her it was establishing the contract with Tiburon through the City of Reno. Vice Chair Ratti requested an update be presented at the May DBOH meeting.

14. Regional Emergency Medical Services Authority

Presented by Don Vonarx and Kevin Romero

A. Review and Acceptance of the Compliance Report for March 2016

Vice Chair Ratti moved to accept the report as presented. Dr. Novak seconded the motion which was approved unanimously.

*B. Operations Update for March 2016

Mr. Vonarx noted REMSA was still working with TMFPD on a Memorandum of Understanding regarding the TMFPD ambulance stationed in Washoe Valley. It is anticipated to be finalized shortly and provided to the Board at the May 2016 meeting.

Mr. Romero invited the Board members to the EMS Week celebration that will be held May 19 at noon at REMSA. Chair Jung requested the District Health Officer (DHO), through his secretary, assure that proper Open Meeting Law rules were observed in case a quorum of the Board was in attendance.

15. Presentation, discussion and possible adoption of proposed Rules, Policies and Procedures, to include additions, deletions or changes as requested by the Board

Staff Representative: Kevin Dick

Mr. Dick noted the item was in response to a request from Vice Chair Ratti to present updated bylaws and procedures to the Board for consideration. He acknowledged Ms. Spinola's work in compiling the draft.

Mr. Dick explained the proposed Rules, Policies and Procedures (RPPs) were a combination of the existing bylaws and procedural policies. He noted the current bylaws indicated that amendments were to be provided in writing to the Board and not acted on until the next meeting. He opined it was important for the Board to take no action at the current meeting. He stated he was happy to bring back revisions based on Board direction.

Mr. Dick reiterated the RPPs combined the existing bylaws and procedural policies, with the exception of the description of the functions of the Board, but those are described in NRS 439.

Some of the procedural policies had been enhanced for clarification.

Chair Jung invited the Board members to share their thoughts with Mr. Dick at any time before the next meeting. Dr. Novak expressed his appreciation for the document, as did Vice Chair Ratti. She opined the updated rules should contain a clause that requires them to be reviewed annually, and that new Board members should be provided a copy during orientation.

Dr. Hess indicated he was supportive in general but would like to propose some amendments. He pointed out most organizations have a charter, bylaws or some other document that forms a basic foundation that is generally more difficult to change than standard policies and procedures. He encouraged the Board to retain the existing bylaws and use the new RPPs instead of the previous policies and procedures. He opined there should be some explanation of the open meeting law (OML), as he found that topic challenging.

Dr. Novak asked Vice Chair Ratti if she wanted to see a regular review built into the rules. She stated she did, and went on to support Dr. Hess' statements regarding maintaining two separate documents. She indicated the review should be a part of the rules and policies as it was only intended to refresh their memories and offer an opportunity for updates.

Chair Jung explained that the OML trainings through the County had been reinstated and requested the DHO obtain the scheduling and pass it along to the Board members. Vice Chair Ratti opined it was valuable information for the Board and the public.

Mr. Dick requested clarification as to whether the Board preferred to go to one comprehensive document or to keep the bylaws separate. He suggested keeping them separate and requested Dr. Hess' assistance with their development, as he was very familiar with standard content. Mr. Dick stated the written documents would be brought back to the Board in May, with action to potentially adopt them in June.

Chair Jung suggested Dr. Hess present his proposed amendments to Mr. Dick as the documents were being developed. Vice Chair Ratti reiterated her support for the organizational document being separated.

16. *Staff Reports and Program Updates

- A. Air Quality Management, Charlene Albee, Director
Program Update, Divisional Update, Program Reports

Mr. Wolf stated he had nothing to add.

- B. Community and Clinical Health Services, Steve Kutz, Director
Program Report – National STD Awareness Month; Divisional Update – SNAP & Medicaid Enrollment, 2016 Training Day and Public Health Associate Program; Program Reports

Mr. Kutz pointed out the expanded Sexually Transmitted Disease (STD) program report highlighted STD Awareness Month. He thanked the Sexual Health program management and staff for their hard work and introduced Jennifer Howell, Sexual Health Program Coordinator.

Mr. Kutz noted the State Women, Infants and Children (WIC) program frequently brings visitors to Washoe County WIC because of the high quality of the program. USDA reviewers had visited and had provided good comments.

Dr. Hess, on behalf of the physicians of Washoe County, thanked Mr. Kutz and his staff for Epi-Info. Mr. Kutz noted that information was provided by Dr. Todd and EPHP, and explained the two divisions worked closely together to provide information to the public.

Dr. Hess noted he had received positive feedback and opined the publication was very helpful. Chair Jung agreed.

- C. Environmental Health Services, Bob Sack, Director
EHS Division Program Updates - Food, Land Development, Vector-Borne Disease, Waste Management and EHS Inspections / Permits / Plan Review

Mr. Macaluso stated he had nothing to add.

- D. Epidemiology and Public Health Preparedness, Dr. Randall Todd, Director
Program Updates for Communicable Disease, Public Health Preparedness, and Emergency Medical Services

Dr. Todd reported the influenza numbers are continuing to drop. Overall it has been a light flu season.

Dr. Hess reiterated his thanks and stated Epi-Info was a marvelous tool.

Dr. Novak asked when flu season ended in the area. Dr. Todd explained it ran roughly October through May but flu surveillance occurs year-round.

Dr. Novak asked how long mosquito surveillance was conducted. Dr. Todd explained EHS was responsible for mosquito control so he would not be able to answer any specific questions.

- E. Office of the District Health Officer, Kevin Dick, District Health Officer
Budget, Strategic Planning, Community Health Improvement Plan (CHIP), Truckee Meadows Healthy Communities (TMHC), Quality Improvement, Other Events and Activities and Health District Media Contacts

Mr. Dick noted the County manager had presented the proposed budget to the BCC on April 26. The Health District budget was included in that and no changes were proposed. The District's fiscal outlook continues to improve.

Mr. Dick stated the meeting with the strategic planning team had been very productive. He thanked the Board members for attending and opined it had been beneficial for the management team to be a part of that discussion.

Mr. Dick noted Ms. Dinga is working with the CHIP workgroups to develop and refine initiatives and goals. He presented photos and a video associated with the TMHC Photo Voice event that had been held on April 18. Link to video and pictures: <http://www.truckeemeadowshhealthycommunities.com/#!photovoice-video-and-pictures/p55y6>. He noted the success of the project was largely due to Ms. Dinga, who had committed a substantial amount of time and effort to the project.

Vice Chair Ratti opined the presentation had been quite powerful and the kids had provided great input.

Mr. Dick explained the input from the project would be wrapped into the planning for the 89502 regarding addressing pillars of food security.

Chair Jung suggested the video be sent to WCTV so that it may be seen by anyone watching the Washoe County channel.

17. Board Comment

None.

18. Public Comment

As there was no one wishing to speak, Chair Jung closed the public comment period.

19. Adjournment

Chair Jung adjourned the meeting at 2:28 p.m.

Respectfully submitted,



Kevin Dick, District Health Officer
Secretary to the District Board of Health



Dawn Spinola, Administrative Secretary
Recording Secretary

Approved by Board in session on May 26, 2016.

MULTI-CASUALTY INCIDENT PLAN

Fiscal Year 2015 – 2016 Revisions

MCIP Revisions Overview

Updates to existing plan information:

- Review/update the hospital baseline numbers.
- Review positions (i.e. Morgue Manager).
- Update the ICS language.
- Add references to other regional plans/MOUs/agreements, etc.

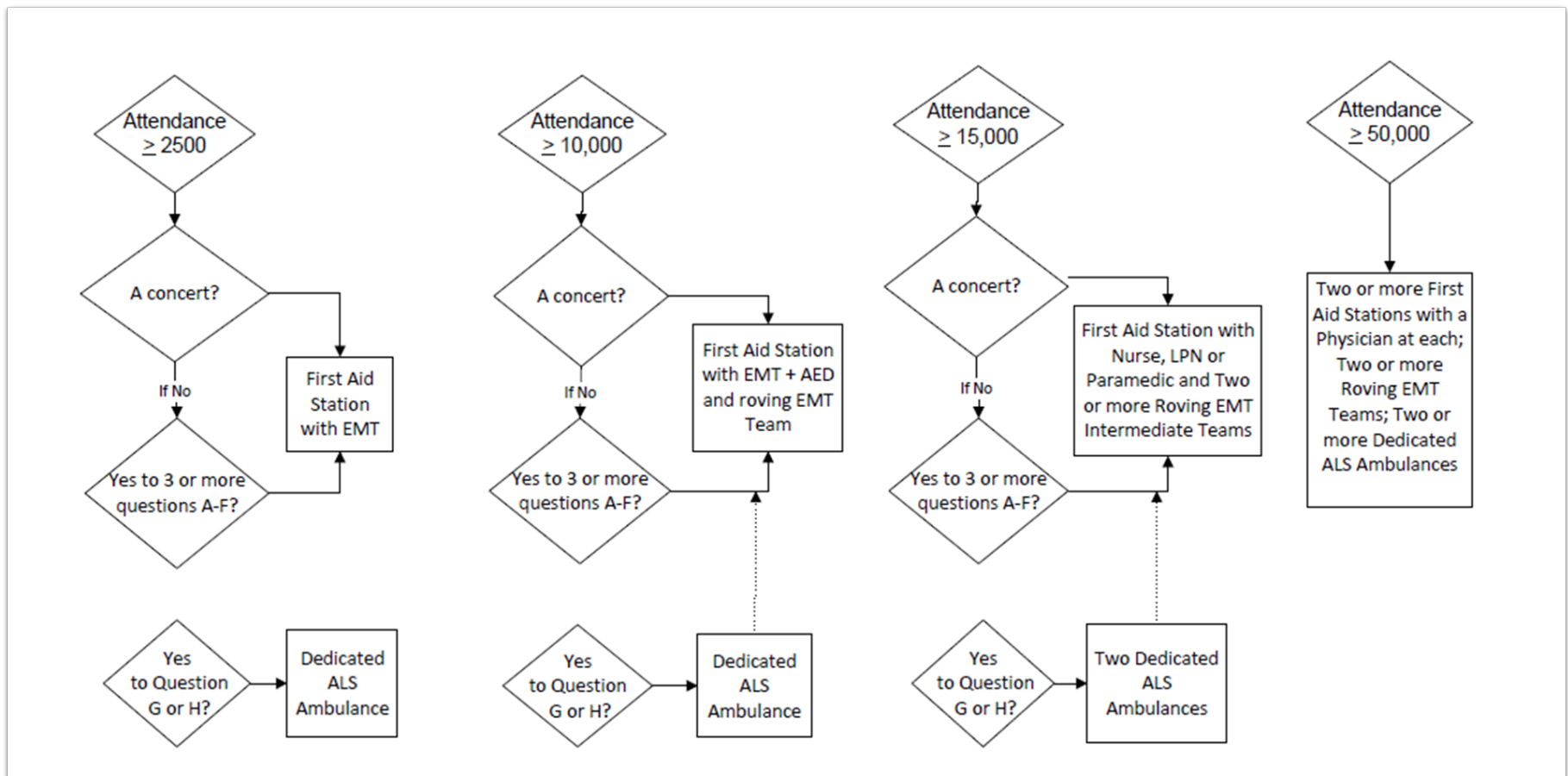
MCIP Revisions Overview

New plan information:

- Develop a section on EMS Coverage for Mass Gatherings as mitigation planning.
- Add American Burn Association information as an appendix (general location of burn beds and burn bed criteria).
- Create a Family Service Center (FSC) Annex to the MCIP.
- Develop a pre-built communications plan.
- Enhance the section on mental health and stress management.
- Provide executive level training on the MCIP. *(To be completed after possible approval.)*

MCIP Revisions

EMS Coverage for Mass Gatherings



MCIP Revisions

American Burn Association Information



Courtesy of the

American Burn Association

Advanced Burn Life Support (ABLS)

Learn more about the ABA and ABLIS at www.ameriburn.org

Burn Center Referral Criteria

A burn center may treat adults, children, or both.

Burn injuries that should be referred to a burn center include:

1. Partial thickness burns greater than 10% total body surface area (TBSA).
2. Burns that involve the face, hands, feet, genitalia, perineum, or major joints.
3. Third degree burns in any age group.
4. Electrical burns, including lightning injury.
5. Chemical burns.
6. Inhalation injury.
7. Burn injury in patients with preexisting medical disorders that could complicate management, prolong recovery, or affect mortality.
8. Any patient with burns and concomitant trauma (such as fractures) in which the burn injury poses the greatest risk of morbidity or mortality. In such cases, if the trauma poses the greater immediate risk, the patient may be initially stabilized in a trauma center before being transferred to a burn unit. Physician judgment will be necessary in such situations and should be in concert with the regional medical control plan and triage protocols.
9. Burned children in hospitals without qualified personnel or equipment for the care of children.
10. Burn injury in patients who will require special social, emotional, or rehabilitative intervention.

Severity Determination

First Degree (Partial Thickness)

Superficial, red, sometimes painful.

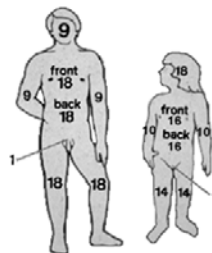
Second Degree (Partial Thickness)

Skin may be red, blistered, swollen. Very painful.

Third Degree (Full Thickness)

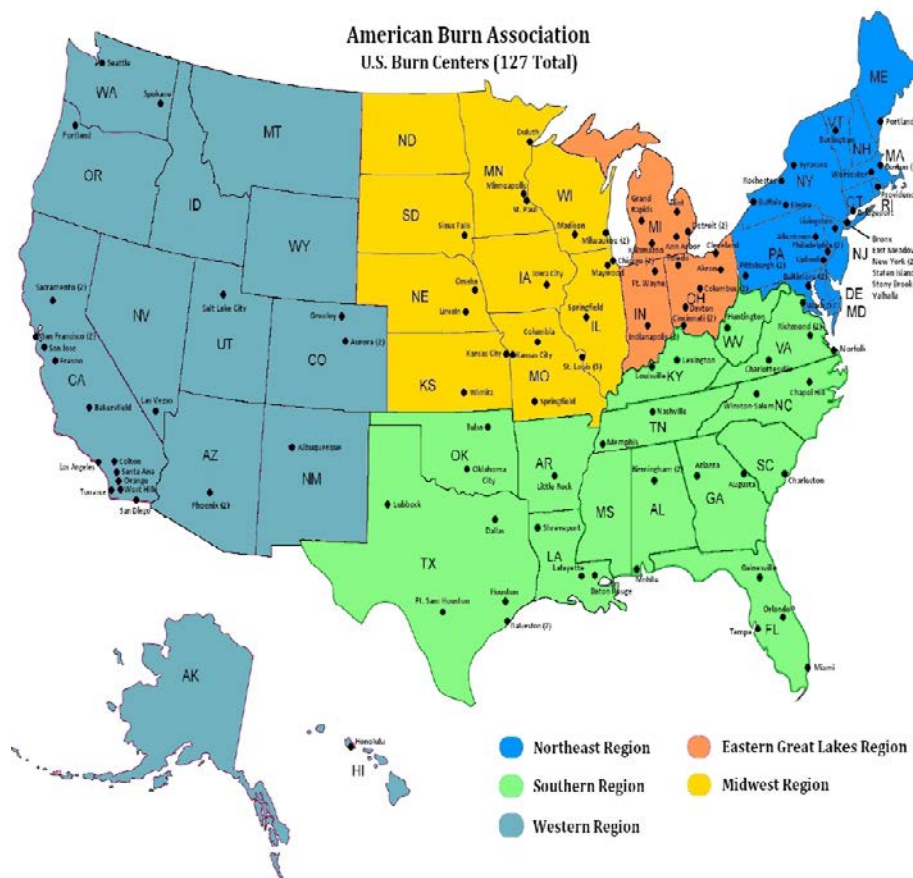
Whitish, charred or translucent, no pin prick sensation in burned area.

Percentage Total Body Surface Area (TBSA)



Excerpted from *Guidelines for the Operation of Burn Centers* (pp. 79-86), *Resources for Optimal Care of the Injured Patient 2006*, Committee on Trauma, American College of Surgeons

American Burn Association
U.S. Burn Centers (127 Total)



MCIP Revisions

Pre-Built Communications Plan (ICS 205)

INCIDENT RADIO COMMUNICATIONS PLAN			1. Incident Name	2. Date/Time Prepared	3. Operational Period Date/Time
4. Basic Radio Channel Utilization					
System/Cache	Channel	Function	Frequency/Tone	Assignment	Remarks
800 MHz	PS Fire 1	Command	WCRCS	PSAP Dispatch to Comm	Coordinated with PSAP
800 MHz	PS Fire 2	Tactical	WCRCS	Comm to Responders	Coordinated with PSAP
800 MHz	PS LE 1	Tactical	WCRCS	Comm to Responders	Coordinated with PSAP
800 MHz	PS LE 2	Command	WCRCS	PSAP Dispatch to Comm	Coordinated with PSAP
Med Radios	Mednet 3	EMS	UHF	Field to REMSA Dispatch	Subject to change depending on location
Med Radios	Mednet 8	EMS	UHF	REMSA Dispatch to hospitals	Subject to change depending on location
800 MHz	WC HDSUP	Command	WCRCS	Comm to WCHD	
VHF	NevCord 1	Air Resources	VHF	Air ambulance responders to ground crews	
800 MHz	PS Event 2	Tactical/Comm	WCRCS		
800 MHz	PS Event 3	Tactical/Comm	WCRCS	Optional – Comm to Responders	
5. Prepared by (Communications Unit)					

MCIP Revisions

Mental Health and Stress Management

Responder Resources:

- Employee Assistance Programs (EAPs)
- Share the Load: A Support Program for Firefighters and EMTs
- Share the Load National Fire/EMS Helpline: 1-888-731-3473
- SAMHSA Disaster Distress Line
- SAMHSA Disaster App

Planning Documents:

- A Guide to Managing Stress in Crisis Response Professions
- Tips for Disaster Responders: Identifying Substance Misuse in the Responder Community
- Tips for Disaster Responders: Preventing and Managing Stress
- A Post-Deployment Guide for Families of Emergency & Disaster Response Workers

MCIP Revisions

Family Service Center Annex

A Family Service Center (FSC) is a secure facility established by public health agencies to serve as a location to provide information and assistance about unaccounted persons during a disaster.

Regional Victim Information Form

The RVI form is utilized for the reporting and tracking of possible persons involved in a declared disaster in Washoe County. When completing this form please be specific and complete as much as possible:

Victim Information:

Adult Child Date/Time of Report: _____

Name of Missing Person: _____ Nickname: _____

Age: _____ Date of Birth (MM/DD/YY): _____ Gender: _____ US Citizen: Y / N

Hair Color/Style: _____ Eye Color: _____

Distinguishing Characteristics (scars, birth mark, tattoos, etc.): _____

Contact Information: _____

Any additional information regarding the victim not addressed on this form:

Reporting Party Information:

Name of Reporting Person: _____

Relationship to Missing: _____ Phone Number: _____

Other Contact Information: _____

Received By: _____

Hospital WCMECO FSC FRC Community FAC

MCIP Revisions

Executive Level Training on the MCIP

The WCHD will offer annual executive level training to agencies interested in learning more about MCI response and management in Washoe County.

MCIP Revision Partners

- Saint Mary's Regional Medical Center
- Renown Regional Medical Center
- Renown South Meadows Medical Center
- Northern Nevada Medical Center
- VA Sierra Nevada Healthcare System
- Incline Village Community Hospital
- Carson-Tahoe Hospital
- Carson Valley Medical Center
- State of Nevada EMS
- Washoe County Emergency Management
- Washoe County Medical Examiner and Coroner's Office
- Reno-Tahoe Airport Authority
- Reno Fire Department
- Sparks Fire Department
- North Lake Tahoe Fire Protection District
- Truckee Meadows Fire Protection District
- Reno Police Department
- REMSA and CareFlight
- Additional WCHD Staff

The Proposed Omega Process

SECOND TIER TRIAGE IN 911 CENTERS FOR LOW-ACUITY CALLS



What is an Omega?

A 911 call classified through the Emergency Medical Dispatch process as non-emergent low acuity call able to be referred to a Nurse Health Line for assessment and evaluation.

Proposed Omega Implementation for REMSA's Response Area

- ▶ Pending DBOH approval, REMSA will no longer immediately dispatch ambulances to Omega calls.
- ▶ Fire will cancel if notified the call is an Omega and they have not made patient contact.
- ▶ If the fire agencies arrive on scene, the crew will release from scene by verbal release from the ECN or REMSA dispatcher and/or utilizing the Omega form if desired.
 - ▶ If Fire crew assesses patient and determines Omega is not an appropriate determinant, a non-divertable resource will be requested and dispatched.

PSAP transfers
medical call →
REMSA EMDs
the call → low
acuity criteria
met → EMD
transfers call
to an ECN

Emergency
Communication Nurse
(ECN) specialists are
Registered Nurses with
acute care
experience, specially
trained and certified as
EMDs and then as
ECNs in the use of over
200 ECNS protocols.



- ▶ The RN is housed within the REMSA dispatch center, working in concert with the EMD and within the EMS system.

What is the best way for this patient to get to the destination? →



What will best meet this patient's needs?

SUBJECT INFO

Name: Conrad Fivaz

Sex: Male

Age: 44 years

Address: 110 S Regent Str, Salt Lake City, Utah, 84111

Reason: ankle injury

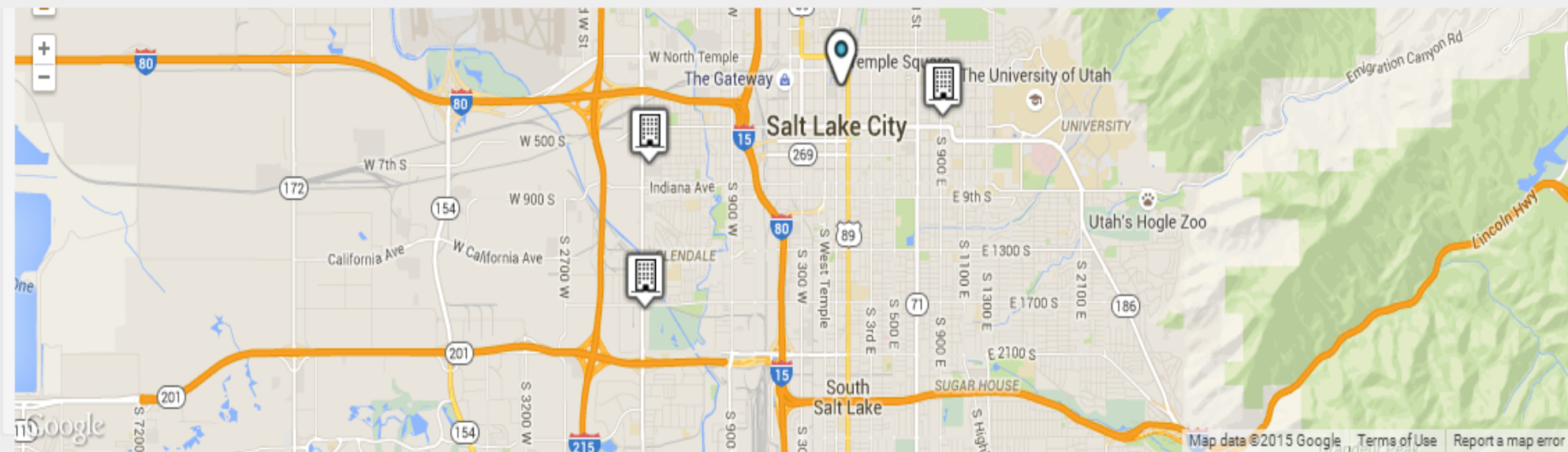
CASE SUMMARY

Algorithm: Ankle Injury

Level of care: Seek Face to Face Care within 1-4 Hours

Point of care: 1000 - Urgent Care Center:

Recommended service:



InstaCare , 389 South 900 East, Salt Lake City, Utah, 84102

1.4 mi

Urgent Care

Recommend



Pathology

Recommend



Radiology

Recommend



Firstmed Urgent Care , 441 S. Redwood Road, Salt Lake City, Utah, 84104

2.6 mi

Approvals & Next Steps

- ❖ EMSAB acceptance and recommendation to present to DBOH: 4/7/16
- ❖ DBOH possible approval of Omega protocols: 4/28/16
- ❖ City Council and Board of Fire Commissioners presentation by Fire/REMSA and approval: TBD
- ❖ Full Implementation: 7/1/16 recommended

STAFF REPORT

EMS ADVISORY BOARD MEETING DATE: April 7, 2016

TO: EMS Advisory Board Members

FROM: Brittany Dayton, EMS Coordinator
(775) 326-6043, bdayton@washoecounty.us

SUBJECT: Presentation, discussion and possible acceptance of an update on the CAD-to-CAD interface between the PSAP dispatch centers and REMSA.

SUMMARY

Computer-Aided Dispatch (CAD) software helps communications center personnel manage information, like pending and active calls and other critical data. With a CAD-to-CAD interface this vital call data can be linked and distributed to multiple agencies (Fire and EMS) with less manual effort.

The EMS Oversight Program is collaborating with regional partners to discuss the implementation of a CAD-to-CAD interface, which would technologically connect the primary Public Safety Answering Points (PSAPs) and REMSA dispatch. The interface would establish a virtual connection between the communications centers and create a more expedient process for EMS calls.

PREVIOUS ACTION

There has been no previous action by the EMS Advisory Board concerning this item.

BACKGROUND

Through research, the EMS Oversight Program has learned that such technology is becoming an industry standard and is instrumental in making the dispatch process more efficient. Part of the research included speaking with several other jurisdictions, including Fort Worth, Yolo County, Las Vegas and Santa Barbara County, which implemented CAD-to-CAD interfaces.

Article 5.2 of the Amended and Restated Franchise Agreement for Ambulance Service states, “that when the Washoe County/Reno PSAP and Sparks PSAP Tiburon CAD systems are installed and upgraded the REMSA CAD system shall, at a minimum, be capable of interfacing in real time with the Washoe County/Reno and Sparks CAD systems.” The completion of the regional Tiburon upgrade occurred in October 2015.

In November 2015, correspondence occurred with the partner agencies to determine if the region was ready to begin the interface process. The region was not yet prepared, however, it was determined that we should begin meeting to discuss what the interface should look like. The subcommittee was formed and is comprised of Fire and EMS operations personnel, dispatch personnel, IT personnel, and the EMS Oversight Program.

In January Washoe County PSAP personnel indicated their agency will soon be upgrading to CAD 2.9.1 and the new version has significant changes that could impact operations. This upgrade is a concern because there may be training issues, and the PSAP would like to introduce the interface after all dispatchers are completely comfortable with their systems.

To date, the region has held two meetings to discuss the CAD-to-CAD interface implementation. The first meeting included regional partners from the Health District, Fire agencies, Washoe County dispatch, Reno Ecomm, REMSA and IT personnel. The second meeting was a conference call with one of the CAD vendors where regional partners had an opportunity to ask questions about the CAD-to-CAD processes and interface functionality.

The two-way CAD-to-CAD interface requires fiscal investment from REMSA and City of Reno since those agencies maintain and operate the servers. REMSA has finalized the agreement with their CAD vendor, TriTech, and is able to be added to TriTech's schedule for implementation.

According to Reno IT system administrators, their PSAP CAD vendor, Tiburon, issued a proposal/quote for their portion of the interface which is currently being reviewed at the executive team level.

FISCAL IMPACT

There is no fiscal impact to the EMS Advisory Board. However, the two-way CAD-to-CAD interface requires fiscal investment from REMSA and City of Reno since those agencies maintain and operate the servers that would be linked.

RECOMMENDATION

EMS staff recommends the EMS Advisory Board accept the update on the CAD-to-CAD interface between the PSAP dispatch centers and REMSA.

POSSIBLE MOTION

Should the Board agree with staff's recommendation a possible motion would be:

"I move to accept the update on the CAD-to-CAD interface between the PSAP dispatch centers and REMSA."