

1 **VASHON ISLAND FIRE & RESCUE**
2 **BOARD OF FIRE COMMISSIONERS**

3 Minutes

4 **Date:** 08/19/2014

5 **Time:** 6:30 p.m.

6 **Place:** 10020 SW Bank Rd., Vashon, EOC Room

7 **SPECIAL MEETING**

8
9 **Present:** Camille Staczek, Chair

10 Rex Stratton, Commissioner

11 Ron Turner, Commissioner

12 Hank Lipe, Fire Chief

13 George Brown, Assistant Chief

14 Susan Wolf, Minute Taker

15 **Absent:** Candy McCullough, Commissioner (excused)

16 David Hoffmann, Vice-Chair (unexcused)

17 **Guests:** Jim Fogarty, Director of King County EMS; Chief John Herbert, King County Medic
18 One; Steve Palmer, IAFF Local #4189 Union President and Paramedic/Firefighter; Volunteer Lt.
19 Paul Schuster, MSO Mark Brownell, island resident and Medic One paramedic Mark Radford,
20 Volunteer Firefighter/EMT Mike Kirk, Volunteer Resident Ross Copland, Captain
21 Paramedic/Firefighter Chris Huffman, Volunteer Firefighter/EMT Steven Bussell, Volunteer Lt.
22 Charlie Krimmert, Captain Brodie Smith and Natalie Johnson, editor of the Vashon Beachcomber.

23 **Old Business**

24 Medic One Transition

25 *Jim Fogarty:*

- 26 • Jim Fogarty advised that he had a file of letters going back to the 1990's where VIFR
27 considered transitioning the paramedics back into the Medic One program. He provided a
28 copy of one from 2002 from the previous fire chief, Jim Wilson, so the issue is not a new
29 one.
- 30 • He's been working with Chiefs Lipe and Brown since March. He felt the King County
31 Medic One is a good plan, but the county is neutral on it. If the Board would like to move
32 forward, the county is good with that but if the Board decides to keep the status quo, they are
33 good with that, too.
- 34 • Director Fogarty believes most financial and operational components of the plan have been
35 addressed, however, there will always be scenarios that fall through the cracks and they can't
36 plan for every contingency – nor do they with their plans on the mainland.
- 37 • King County Medic One does understand the profile of our calls here. About 30% of
38 Advanced Life Support (ALS) are transported, and paramedics here do transport some Basic
39 Life Support (BLS) calls and that is not likely to change. Most go by ground; some by
40 helicopter - nothing in proposal changes transports.

- 41 • One document Director Fogarty handed out was a letter from Dr. Mickey Eisenberg and Dr.
42 Warren dated 3/20/2009 showing statistics showed that the recommended ratio was 10
43 paramedics to a population of 100,000. Their opinion at that time was that smaller island-
44 based communities would be better served by larger agencies. Right now, VIFR has eight
45 paramedics to a population of 12,000 so their proposal aligns itself to recommended ratios.
46 • The proposed plan also addresses the critical care skills of medics. While staffing
47 assignments are reviewed annually, they would designate Medic 9 to the island. That's two
48 medics in the truck, transport ready. They've used that system in places like North Bend for
49 years. For Vashon, 157 patients annually will be looking two paramedics in the eye for the
50 same standard throughout the county.
51 • When Medic 9 is dispatched to a call, another MSO will be added to the call. They can come
52 to the island if they aren't here already or deploy another MSO to the island. Seventy percent
53 of the time the Medics won't leave the island. They can use ferry holds for deployment.
54 MSOs visit each location of 8-9 different agencies. They are dividing South King County
55 into a North Battalion and South Battalion with an MSO for each. One to make sure Vashon
56 is covered and they will do time studies. An MSO can deploy an administrative MSO.
57 There may be a returning medic unit coming from Harborview that they could divert to
58 Vashon or send a medic here on a helicopter. Or they could split crews and it would be no
59 worse than staffing now. If there is a mass casualty incident, they could provide up to 18
60 medic units. Compared with what we have today, the proposal adds value to South County
61 (by hiring two more MSOs as additional supervisors) and adds value to the citizens of
62 Vashon by having a two-medic response.
63 • Director Fogarty referred to a document that compares the current VIFR model and the
64 available assets for a more standardized response model. They could send a Supervisor over
65 (from town) via ALNW or another medic unit by ground over here, the medics might decide
66 the patient only needs BLS treatment or the patient could be a "treat and release." It's not a
67 perfect system and while it adds costs to the county and the county is neutral, he thinks it's
68 the right thing to do.
69 • Objectively, for firefighters at South King there are 10 supervisor positions which provide
70 promotional opportunities in addition to hiring firefighters looking to enter the paramedic
71 program.
72 • Director Fogarty praised the chiefs for stepping up for the best interests of Vashon citizens.
73 If the Board decides to go forward, it will probably take place January 1, but will take six
74 months of reviewing the program to make those adjustments. On paper it looks good but in
75 practice there may be pieces missing. They would adjust it so it works for everybody. Some
76 components have been tested, others we can test now without making the transition.
77 • If we go forward, there will be negotiations with labor units, reviewing our current employee
78 base, analyzing leave balances and seniority. While Medic One has some history with the
79 unions, negotiations are not without pitfalls.

80 *John Herbert*

- 81 • Chief Herbert explained that South King is an area of 1,000 square miles with a diverse
82 community. Demographically, it has a large immigrant population of Ukrainians, Pacific
83 Islanders and Hispanics, which places different demands on Medic One. South King has
84 14,500 calls per year with eight medic units on duty. They also staff events such as the
85 Emerald Downs horse race track, Amphitheater, and Pacific Raceways for standby aid. This

- 86 time of year, they are staffing events using 10-14 units per weekend. Calls include one
87 cardiac arrest per day, 3-5 stabbing and shootings, 1,100 intubations, 1,000s of IVs.
- 88 • They enjoy a robust Training Division with Don Cloyd as Training Officer, who is a
89 demanding instructor. Medic One provides 82 hours of homegrown, continuing education
90 annually. All their people have all the different types of training needed. Chief Herbert said
91 most of their roster was hired before 1999 and he, himself, has 38 years in the system.
 - 92 • Promotional opportunities are available because 6-9 will be retiring in next 3-5 years. They
93 will be hiring 3-4 medics for training every year due to retirements. Most of their employees
94 have degrees.
 - 95 • They are a busy system with lots of patients and have a tight medical system to work within.
96 He gave the example that they have six physicians to review intubations. Some of the
97 doctors providing oversight are Associate Professors at Harborview.
 - 98 • They have a program for needle sticks, so if a paramedic is stuck by a needle, the on duty
99 MSO draws blood from the patient and drives the paramedic to Harborview for a check.
 - 100 • At a recent large fire in Renton, Medic One ran the rehab, treated two firefighters and one
101 cardiac arrest. They detail an MSO to a SWAT call, determine how many medic units
102 respond and stage them. Up to 12 times a year, if they need a medic for a rescue, they have
103 18 guys trained and certified for that type of hoisted rescue.
 - 104 • Three international airports are within their region, including SeaTac. SeaTac is a challenge;
105 they respond there once a day. One of the three area Boeing plants has hazmat stuff. During
106 one incident, Medic One transported 120 patients out of Boeing. They write the MCI plan
107 for SeaTac and had a drill with 265 live patients which they transported in 1 hour and 45
108 minutes. South King coordinates all the active shooting training. In addition, they train
109 teachers in local school districts for active shooters. Then there are presidential and dignitary
110 visits – in short, South King is a huge, well-run organization.
 - 111 • Chief Herbert shared that Vashon can teach us about small communities. He spent quite of
112 his childhood growing up in a beach house on Maury, which became (former VIFR
113 paramedic) Stan Horan’s old house. He spent time doing shifts here to relieve Stan and
114 Kathy Bonner as well as participating on interview panels for medics Vashon hired. He is
115 looking forward to learning more about the island and teaching VIFR medics the South King
116 culture.
 - 117 • South King has started construction on a 25,000 square feet training facility which Medic
118 One will share with Zone 3 entities such as White Center, Burien, Tukwila, Kent and others.
119 500 firefighters are taught per year.

120 *Questions/Comments from the Board, audience:*

- 121 • Question: What training will Medic One provide to make our EMTs “Super EMTs?”
122 Answer: While there is a BLS proposal, the focus of tonight’s meeting is ALS.
- 123 • Question: If Medic One paramedics are not busy, will they be hanging out or going to BLS?
124 Answer: ALS Medics are reserved for ALS calls. They will supply their own vehicles
125 because they are standardized and they want to make sure they are all similar. For instance
126 they are buying self-rising gurneys. Medic One would bring two vehicles to Vashon: one
127 manned, one on reserve. VIFR would still have their four aid cars for BLS calls.
- 128 • Chief Lipe affirmed that a careful look at the data sets will drive the decisions and response
129 times will not just be arbitrarily set. Comment from Chief Herbert was that all eight Medic
130 units reside at stations: six in stations but two in a mobile-home next to the apparatus bay.

131 Renton Station 11, for instance, had to be retrofitted for seismic safety so for two years they
132 stationed medic units nearby until they were able to move back into Station 11.

- 133 • Jim Fogarty stated he is comfortable they can make this work, not just because failure is not
134 an option, but due to the dedication of the folks in the room (paramedics). The issue is on the
135 second and third call. Medic One provided service to VIFR for a while, bringing rigs over on
136 the ferry and back. They could do that for a time, but having aid cars here would be the long
137 term plan.
 - 138 ○ In summary: they have smart people to explore issues and options, can provide a
139 rotation of medics, enjoy a robust system with a widely diverse population and
140 respond to tons of calls. They could discuss further the current practice in Enumclaw
141 where they go on the same amount of calls. They work medics there for a maximum
142 of three months of the year and then rotate them to other stations. Each shift decides
143 every two or three months where they want to go – they are free to go to different
144 stations, such as one where they have friends or one which is located near their home.
145 By providing the rotations, paramedics maintain their skill set. As part of learning
146 curve, they would team one of VIFR’s medics with their existing medics to learn the
147 island.
 - 148 ○ Medic One shifts are for a maximum 36 hours; on *rare* occasions of 48 hours with
149 permission of overseeing Doctor. No back-to-back 24 hour shifts; they aren’t
150 consecutive and they insist on an eight hour break between.
 - 151 ○ 16 medics are on shift at any one time plus a supervisor, for a total of 75 employees.
152 By adding VIFR medics (allowing that some might choose not to go back into Medic
153 One) they would have 18 people on duty every day, with a total of 80 to pick from.
154 Some paramedics are out on Military leave, but if they are out for 90 days, they have
155 a re-entry process. If someone is out on an injury, the pool is large enough that the
156 remaining paramedics don’t have to work a large amount of overtime as in the current
157 VIFR system.
- 158 • A clarification for Director Fogarty and Chief Herbert is that the ferry holds only for sick
159 patients and would not do so for bringing staff to the island. Both Director Fogarty and Chief
160 Herbert confirmed they have not talked with the Washington State Ferries but Medic One, as
161 a large emergency organization, can apply pressure if needed.
- 162 • MSO Mark Brownell stated that while he had developing concerns, the plan answers the
163 critical questions.
- 164 • Director Fogarty stated it was a good plan; not perfect, but workable.

165 Motion by Commissioner Turner:

166 **“I make a motion that we move forward with the plan as presented.”**

167 **MOTION PASSES 3-0**

168 **General Comments:**

- 169 • They will be reviewing the plan at 30, 60, 90 day intervals to make tweaks but not to cancel
170 the whole system, which isn’t feasible.
- 171 • At the EMS BLS Reserves meeting, Commissioner Stratton reported the county is excited
172 about the opportunity to serve the island.
- 173 • Cancelled runs from the ferry are a remaining concern.
- 174 • The primary logistical issue is the second call but there is a commitment with Medic One to
175 resolve that. In eight years, MSO Brownell related that four times there were no medics with
176 responders on two calls. On average, once a month we need a second ALS call medic.


- 177 • Medic One won't rely too heavily on boats and a helicopter for staffing.
178 • The MSO's focus is on logistics for medics in service, not on the patient.
179 • Medic One paramedics boast a high caliber of ALS skills versus the flexibility of splitting
180 medics. They would provide a top notch skill set; over 90% of their medics pass performing
181 intubations on the first try. The 70 medics perform 1,100 intubations under difficult
182 conditions.
183 • By transitioning our ALS program to the Medic One system, it will give VIFR depth whereas
184 now we are limited to eight paramedics and is in the best interests of the residents. Also
185 Zone 3 fire agencies created a new mutual aid pact.
186 • There were several letters from the medics to Medic One that they included (the
187 points/concerns) in the plan.

188 The Chair adjourned the meeting at 7:48 p.m.

189 *Next Regular Meeting will be Tuesday, 08/26/14 6:30 p.m. at 10020 SW Bank Rd, Vashon, EOC room*

190 Approved this 26 day of Aug, 2014.
191

192
193 
194 Camille Staczek, Chair


Susan Wolf, Minute Taker