

## **Regional Services Subcommittee**

### **Medic One/EMS Strategic Plan and Levy Reauthorization**

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Tuesday, May 15, 2018

1:30 PM – 3:30 PM

2100 24<sup>th</sup> Avenue S, Community Room A

Seattle, WA 98144

Chair: Tom Agnew, Councilmember, City of Bothell

#### **Agenda**

- |  |                     |
|--|---------------------|
| ➤ <b>Opening Remarks &amp; Introductions</b>   | 1:30-1:40 (10 min.) |
| ➤ <b>Recap of Subcommittees</b>  | 1:40-1:50 (10 min.) |
| ➤ <b>Strategic Initiative Proposals</b>  | 1:50-2:30 (40 min.) |
| ➤ <b>Preliminary Regional Services 2020-2025 Financial Plan</b>  | 2:30-3:00 (30 min.) |
| ➤ <b>Review of Regional Services Subcommittee Report to Finance Subcommittee and Taskforce</b>                                 | 3:00-3:20 (20 min.) |
| ➤ <b>Next Steps</b>  | 3:20-3:30 (10 min.) |
| <ul style="list-style-type: none"><li>▪ Finance Subcommittee – 5/17</li><li>▪ EMS Advisory Task Force meeting – 5/30</li></ul> |                     |
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#### **Future Regional Services Subcommittee Meetings**

**Please note new location and time**

**Tuesdays, 1:30 p.m. – 3:30 p.m.**

June 19, 2018	2100 Building, 2100 24 <sup>th</sup> Ave S., Seattle (Community Room A)
July 17, 2018	2100 Building, 2100 24 <sup>th</sup> Ave S., Seattle (Community Room A)
August 21, 2018	2100 Building, 2100 24 <sup>th</sup> Ave S., Seattle (Community Room A)
September 18, 2018	2100 Building, 2100 24 <sup>th</sup> Ave S., Seattle (Community Room A)

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Regional Services Subcommittee Contact:  
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## **EMS STAKEHOLDER PRINCIPLES**

As regional EMS Stakeholders, we are committed to these fundamental principles:

**1. REGIONAL SYSTEM**

The Medic One/EMS system is based on partnerships that are built on regional, collaborative, cross-jurisdictional coordination. This seamless cohesion allows the system to excel in pre-hospital emergency care.

**2. TIERED MEDICAL MODEL**

The medical model, with its tiered system and intensive dispatch, EMT and paramedic training and protocols, has led to our success in providing high quality patient care throughout the region.

**3. PROGRAMS & INNOVATIVE STRATEGIES**

State of the art science-based strategies and programmatic leadership have allowed us to meet the needs and expectations of our residents and our system.

**4. FOCUS ON COST EFFECTIVENESS AND EFFICIENCIES**

The Medic One/EMS system has maintained financial viability and stability due to the region's focus on operational and financial efficiencies, effectiveness and cost savings.

**5. MAINTAINING AN EMS LEVY AS FUNDING SOURCE**

The EMS levy is a reliable and secure source of funding our world-renowned system.

## **REGIONAL SERVICES SUBCOMMITTEE GUIDING PRINCIPLES**

As members of the Regional Services Subcommittee, we remain committed to this fundamental Regional Services principle:

Decisions regarding programs and Initiatives will be viewed in respect to patient outcomes and high quality services.

- Collaboratively develop programs with partners that meet the emergent community needs to ensure standards of patient care are maintained or improved.
- Use existing resources efficiently to improve operations of the system and to help contain costs, with no degradation of services or the system.
- Seek system effectiveness and efficiencies that focus on:
  - improving the quality of EMS services
  - managing the rate of growth; and
  - containing costs
- Maintain Strategic Initiatives that meet the directives of system effectiveness and efficiencies, and create new Initiatives as appropriate.

# MEDIC ONE/EMERGENCY MEDICAL SERVICES STRATEGIC PLAN & LEVY REAUTHORIZATION

## Future Meetings

### EMS Advisory Task Force:

✓ Thursday, January 18, 2018	1pm – 3 pm	Tukwila Community Center
<b>Wednesday, May 30, 2018</b>	<b>1 pm – 3 pm</b>	<b>Tukwila Community Center</b>
Tuesday, July 31, 2018	1 pm – 3 pm	2100 Building Community Room B
Tuesday, October 16, 2018	1 pm – 3 pm	Tukwila Community Center

### SUBCOMMITTEES:

#### **Advanced Life Support (ALS)** - Tuesdays from 1:00 – 3:00, South Seattle location

✓ February 15, 2018	Renton Fire Station 14
✓ March 15, 2018 (1:30 – 3:30)	2100 Building Community Room B
✓ April 10, 2018	2100 Building, Community Room A
✓ May 8, 2018	2100 Building, Community Room A
June 12, 2018	2100 Building, Community Room A
July 10, 2018	2100 Building, Community Room A
August 14, 2018	2100 Building, Community Room A
September 11, 2018	2100 Building, Community Room A
October 9, 2018	TENTATIVE - 2100 Building

#### **Basic Life Support (BLS)** - Thursdays from 1:00 – 3:00, various Renton sites

✓ February 8, 2018	Renton Fire Station 14
✓ March 8, 2018	Renton Fire Station 14
✓ April 5, 2018	Renton City Hall, Council Chambers, 7 <sup>th</sup> Floor
✓ May 3, 2018	Renton City Hall, Council Chambers, 7 <sup>th</sup> Floor
June 7, 2018	Renton Fire Station 14
July 12, 2018	Renton City Hall, Council Chambers, 7 <sup>th</sup> Floor
August 9, 2018	Renton City Hall, Council Chambers, 7 <sup>th</sup> Floor
September 6, 2018	Renton City Hall, Council Chambers, 7 <sup>th</sup> Floor
October 4, 2018	TBD

#### **Regional Services (RS)** - Tuesdays from 1:00 – 3:00, Renton location

✓ February 20, 2018		City of Seattle Joint Training Facility
✓ March 20, 2018		Renton Highlands Library conference room
✓ April 17, 2018		Renton Highlands Library conference room
➔ <b>May 15, 2018</b>	<b>1:30 – 3:30</b>	<b>2100 Building, Community Room A</b>
June 19, 2018	<b>1:30 – 3:30</b>	<b>2100 Building, Community Room A</b>
July 17, 2018	<b>1:30 – 3:30</b>	<b>2100 Building, Community Room A</b>
August 21, 2018	<b>1:30 – 3:30</b>	<b>2100 Building, Community Room A</b>
September 18, 2018	<b>1:30 – 3:30</b>	<b>2100 Building, Community Room A</b>

#### **Finance** - Tuesdays or Thursdays 1:00 – 3:00, Kirkland location

✓ February 1, 2018 (Thursday)		Renton Fire Station 14 (1900 Lind Ave SW)
<b>May 17, 2018 (Thursday)</b>	<b>12:00 – 2:00</b>	<b>Peter Kirk Room, Kirkland City Hall</b>
July 24, 2018 (Tuesday)		Peter Kirk Room, Kirkland City Hall
September 25, 2018 (Tuesday)		Peter Kirk Room, Kirkland City Hall

**Bold = recently revised**

**LOCATIONS:**

Renton Fire Station 14  
1900 Lind Ave SW, Renton

Phone: (425) 430-7000

City of Seattle Joint Training Facility  
9401 Myers Way South, Seattle

Phone: (206) 386-1600

The 2100 Building  
2100 24th Ave S, Seattle

Phone: (206) 407-2100

Renton City Hall  
1055 South Grady Way, Renton

Phone: (425) 430-6400

Kirkland City Hall  
123 5<sup>th</sup> Ave, Kirkland, WA

Phone: (425) 587-3000

Renton Highland Library Conference Room  
2801 NE 10<sup>th</sup> Street, Renton

Phone: (425) 277-1831

Tukwila Community Center  
12424 42<sup>nd</sup> Ave South, Tukwila

Phone: (206) 768-2822

**EMS Advisory Task Force**  
**Medic One/EMS Levy Reauthorization Calendar**

**2018**

**JANUARY**

S	M	T	W	Th	F	S
	H1	2	3	4	5	6
7	8	9	0	11	12	13
14	H15	16	17	IF 18	19	20
21	22	23	24	25	26	27
28	29	30	31			

**FEBRUARY**

S	M	T	W	Th	F	S
				FIN 1	2	3
4	5	6	7	BLS 8	9	10
11	12	ALS 13	14	15	16	17
18	19	RS 20	21	22	23	24
25	26	27	28			

**MARCH**

S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	BLS 8	9	10
11	12	13	14	ALS 15	16	17
18	19	RS 20	21	22	23	24
25	26	27	28	29	30	31

ALS - revised

**APRIL**

S	M	T	W	Th	F	S
1	2	3	4	BLS 5	6	7
8	9	ALS 10	11	12	13	14
15	16	RS 17	18	19	20	21
22	23	24	25	26	27	28
29	30					

**MAY**

S	M	T	W	Th	F	S
		1	2	BLS 3	4	5
6	7	ALS 8	9	10	11	12
13	14	RS 15	16	FIN 17	18	19
20	21	22	23	24	25	26
27	H28	29	TF 30	31		

Finance and Task Force meetings - revised

**JUNE**

S	M	T	W	Th	F	S
					1	2
3	4	5	6	BLS 7	8	9
10	11	ALS 12	13	14	15	16
17	18	RS 19	20	21	22	23
24	25	26	27	28	29	30

**JULY**

S	M	T	W	Th	F	S
1	2	3	H4	5	6	7
8	9	ALS 10	11	BLS 12	13	14
15	16	RS 17	18	19	20	21
22	23	FIN 24	25	26	27	28
29	30	TF 31				

**AUGUST**

S	M	T	W	Th	F	S
			1	2	3	4
5	6	7	8	BLS 9	10	11
12	13	ALS 14	15	16	17	18
19	20	RS 21	22	23	24	25
26	27	28	29	30	31	

**SEPTEMBER**

S	M	T	W	Th	F	S
						1
2	H3	4	5	BLS 6	7	8
9	10	ALS 11	12	13	14	15
16	17	RS 18	19	20	21	22
23	24	FIN 25	26	27	28	29
30						

**OCTOBER**

S	M	T	W	Th	F	S
	1	2	3	BLS 4	5	6
7	H8	ALS 9	10	11	12	13
14	15	TF 16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

**NOVEMBER**

S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	H12	13	14	15	16	17
18	19	20	21	H22	H23	24
25	26	27	28	29	30	

**DECEMBER**

S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	H25	26	27	28	29
30	31					

Econ forecasts: 3/7-3/14; 7/18-7/27; 8/17-8/27

3/30/2018





## Vulnerable Populations Strategic Initiative (VPSI)

<https://www.kingcounty.gov/depts/health/emergency-medical-services/vulnerable-populations.aspx>

The EMS Vulnerable Populations Strategic Initiative (VPSI) is a collaboration between the EMS Division, Public Health – Seattle & King County, fire departments, community-based organizations, and the University of Washington. The goal of VPSI is to *conduct programmatic, scientific and case-based evaluations to ensure that the interface between EMS and vulnerable populations is of the highest quality.*

Between 2014-2018 VPSI activities have focused on:

1. Conducting **education and outreach activities** on 9-1-1 and emergency response in vulnerable communities (limited English proficiency [LEP] and seniors),
2. Conducting **pilot studies on alternative EMS care delivery** to vulnerable populations (elderly; LEP; mental health and intoxicated patients), and
3. Supporting regional **diversity in the workforce** efforts.

More recently VPSI assisted in designing and conducting a **county-wide wellness needs assessment among 9-1-1 personnel.**

**Impact:** In partnership with community-based organizations, fire departments and the University of Washington undergraduate and graduate programs in public health:

- Over **12,000** LEP residents from diverse language communities were reached with 9-1-1/CPR education.
- **750** seniors received 911/CPR/Stroke education.
- **Four fire-based pilot projects** were developed, implemented and evaluated by graduate students resulting in a set of recommendations for implementation of alternative care delivery strategies for vulnerable populations (i.e. patients with mental health disorders; vulnerable adults; intoxicated patients).
- **A county-wide mental wellness needs assessment** identified gaps in availability and access to mental wellness resources such as leadership training; easily accessible and standardized peer support programs, and mental wellness awareness campaigns.
- Several activities to **increase EMS workforce diversity** (STAR Program; Future Women in EMS/Fire Academy) were sponsored by VPSI.

**Proposal for 2020-2025:** We propose continued outreach to vulnerable communities in partnership with academic and practice partners, and continued collaborative pilot projects with fire departments on how to ensure the highest quality prehospital care delivery for vulnerable populations. In addition, we propose supporting Equity and Social Justice (ESJ) work related to workforce diversity (such as the STAR scholarship and Future Women in EMS/Fire Academy) and coordination of regional activities related to improving mental wellness among our EMS providers. These efforts will interface closely with the other proposed regional efforts, including Mobile Integrated Health, AEIOU, and EMS Training and QI.

### Budget (including Mental Wellness Initiative):

2020	2021	2022	2023	2024	2025	Total
\$323,559	\$336,275	\$349,154	\$362,527	\$375,997	\$389,625	\$2,137,117

## KCFCA Mental Wellness Subcommittee

### Recommendations for a Regional Mental Wellness Program

Due to the recognition of issues involving mental health fatigue, stress and even suicide, the King County Fire Chiefs Association (KCFCA) Mental Wellness Subcommittee sent out a survey to assess the resources needed to improve wellness of our King County first-responders, which includes Fire and EMS personnel, 9-1-1 call receivers and dispatchers as well as administrative and support staff. The survey was conducted between January and March of 2018 and almost one-thousand individuals (N=984) responded. Based on the survey results, the Subcommittee recommends several strategies, some of which can be addressed at the agency level and some that can be addressed at the regional level.

#### Regional level:

- Training: Develop and offer regular training on mental wellness for FD leadership/Chief Officers; First Responders and other 9-1-1 personnel including retirees. Trainings can include annual face-to-face workshops; CBT on-line training or other ad hoc events.
- Conduct Gap Analysis and support pilot studies of FD mental wellness programs.
- Program Support: Organize and coordinate regular standing Mental Wellness Subcommittee meetings (Chair: Chief Heitman: KCEMS (Michele Plorde); Peer Support Training Coordinator (FF Browning); Website updates (Cpt. Rawson); Chaplaincy (Chaplain Ellis).

#### Local/Agency level:

- Adopt Policies to improve mental wellness culture; access to resources
- Offer targeted, regular Mental wellness training for First Responders in King County (including in the Fire Academy)
- Manage common registry of Peer Support Counselors in King County and increase awareness of Peer Support training opportunities
- Increase awareness and availability of Wellness (prevention) training/programs at agency level.
- Improve access to Health Professionals/Counselors (both in-person and “virtual” (on-line; phone etc.)

#### Proposed Budget:

2020	2021	2022	2023	2024	2025	Total
\$42,705	\$44,383	\$46,084	\$47,849	\$49,624	\$51,425	\$282,070*

\*The budget excludes regional project staff support which is included as part of the VPSI line-item.



## **Accelerating Evaluation and Innovation: An Opportunity for Unprecedented (AEIOU) Quality Improvement (QI)**

### **AEIOU QI Strategic Initiative (SI)**

Complementing our EMS system's motto of "measure and improve," this Initiative provides support to more systematically and uniformly review data and develop consistent training based on the results of the data review. More importantly, this Initiative concentrates on strategies to ensure the system provides the best possible patient care. In the 2014-2019 levy period, the following regional services supported quality improvement efforts by:

1. Conducting **regional medical quality improvement** by providing evidence-based, best practice in pre-hospital emergency treatment and care through dedicated medical direction, patient-specific case reviews
2. **EMS data management** efforts focused on monitoring the performance of the EMS system by collecting and analyzing EMS data into a regional records management system to evaluate the EMS system
3. **Managing EMS system growth** through dispatch performance management and emergency medical dispatch-oriented activities including criteria-based guideline revisions, dispatch review, and enhanced rapid dispatch

We support continuing the regional services listed above along with this strategic initiative to bolster the region's quality improvement efforts. In partnership with dispatch centers, fire departments, hospitals, the University of Washington, and KC EMS, this Initiative builds upon the foundation of the last decade of good work involving information technology and will focus on:

- **Accelerating case-based feedback and outcome** by improving the timeliness, quality, and access to data and information through investments in technology and integration between platforms across dispatch, agencies, and hospitals
- **Evaluating near real-time information** through system-wide surveillance that can be used to monitor key conditions of focus and increasing support to EMS agencies to conduct operational and clinical run reviews of EMS care and patient outcomes at the regional and local agency level
- **Innovation** by conducting innovative programs to strengthen quality improvement capabilities
- **Opportunities** to increase KC EMS coordination role to convene regional partners to lead quality improvement projects and to address the real challenge and need to leverage the electronic data record to generate meaningful clinical information
- **Unprecedented ability** to improve our approaches to quality improvement through training and education across our region

These efforts will continue to support and enhance the region's use of the ESO Electronic Health Record (EHR) system and Health Data Exchange (HDE) and fund region-specific enhancements that result in efficiencies. This strategic initiative will also interface closely with the other proposed regional efforts and strategic initiatives, including the EMS Strategic Transition in Regionalized Innovation, Value, and Education (S.T.R.I.V.E) and Vulnerable Populations Strategic Initiative (VPSI).

#### **Budget**

2020	2021	2022	2023	2024	2025	Total
\$266,788	\$277,273	\$287,893	\$298,919	\$310,009	\$321,262	<b>\$1,762,145</b>

**EMS Online** is an interactive web-based teaching tool, offering low-cost, high-fidelity online learning to King County EMS partners. This tech-savvy approach to continuing education uses current web-based technologies and allows user access to training modules any time of day or night. In addition to producing all course content, the King County EMS Training and Education Section provides technical support for the website and an instructor hotline for questions about the courses and treatment protocols.

Between 2002-2018, EMS Online activities have focused on:

1. Providing **high-quality on-line learning for a fraction of the cost** associated with the traditional classroom;
2. Offering EMTs, paramedics, and EMD the opportunity to **master skills and concepts without real-world risk**;
3. Providing individual agencies and training officers with the data support services to **meet Washington State EMT recertification requirements and support paramedic continuing education**; and
4. Supporting the **partnerships and collaborative efforts** throughout the region.

More than 15 years since its inception, EMS Online now requires strategic investments to keep pace with the changing educational, data and technological needs. Regionalism and collaboration are key concepts driving this realignment initiative, which will include:

- Enhanced cross-functionality between EMS Online and King County partners, including:
  - Implementing a Learning Management System (LMS) with agency-division integration
  - Realigning focus to King County and partner agency guidelines/protocols
  - Meeting the adult learners expectations for eLearning experiences
- Support for both King County's BLS and Harborview's ALS OTEP plans
- Collaboration with training officers to meet identified needs, including:
  - Individualized OTEP tracking and customized reports for staff
  - Increased support for the instructor/student relationship using discussion boards, feedback portals and other communications platforms
- LMS functionality for agencies not yet using LMS platform
- Data export to other agency LMS platforms to reduce duplication and increase efficiency
- Rapid deployment of customized micro-learning opportunities to partners
- Reduced overall costs as KCIT expenses transition into maintenance/support expenditures

## Budget

	2020	2021	2022	2023	2024	2025	Total
Total	634,151	655,326	466,567	480,471	494,218	507,970	3,238,702

## RSSI -- 2014-2019 Inflated to 2020-2025

### Preliminary Status Quo

(In Millions)

RSSI Funding Categories	2014-2019	2020-2025	Difference
Regional Services	\$59.4	\$76.0	\$16.6
Rgn'l Records SI*	\$0.9	\$1.1	\$0.2
Initial EMT RGNL Training SI*	\$0.6	\$1.4	\$0.7
SI - Vulnerable Populations	\$1.5	\$2.0	\$0.5
SI - AEIOU (QI)			
SI - STRIVE (Training)			
To BLS Funding:			
<i>BLS QI &amp; Training SI #</i>	\$1.5	\$2.7	\$1.2
<i>BLS Efficiencies SI #</i>	\$0.2	\$0.3	\$0.1
<i>E&amp;E Studies SI #</i>	\$0.8	\$1.1	\$0.2
<i>ALT to CMT #</i>	\$0.5	\$0.6	\$0.1
<i>Regional CMT Units #</i>	\$3.9	\$7.5	\$3.6
<b>TOTAL RSSI</b>	<b>\$69.4</b>	<b>\$92.7</b>	<b>\$23.3</b>
<i>Projects to BLS(?) #</i>	(\$7.0)	(\$12.2)	(\$5.2)
<b>Potential Rev RSSI</b>	<b>\$62.4</b>	<b>\$80.5</b>	<b>\$18.1</b>

### Initial Proposed

2014-2019	2020-2025	Difference
\$59.4	\$77.6	\$18.2
\$0.9	\$1.5	\$0.6
\$0.6	\$1.4	\$0.7
\$1.5	\$2.1	\$0.6
\$0.0	\$1.8	\$1.8
\$0.0	\$3.3	\$3.3
\$1.5	\$2.7	\$1.2
\$0.2	\$0.3	\$0.1
\$0.8	\$1.1	\$0.2
\$0.5	\$0.6	\$0.1
\$3.9	\$7.5	\$3.6
<b>\$69.4</b>	<b>\$99.9</b>	<b>\$30.5</b>
(\$7.0)	(\$12.2)	(\$5.2)
<b>\$62.4</b>	<b>\$87.7</b>	<b>\$25.3</b>

Initial		Difference	% Change
Status Quo	Proposed		
2020-2025	2020-2025		
\$76.0	\$77.6	\$1.6	2%
\$1.1	\$1.5	\$0.4	36%
\$1.4	\$1.4	\$0.0	0%
\$2.0	\$2.1	\$0.1	7%
\$0.0	\$1.8	\$1.8	N/A
\$0.0	\$3.3	\$3.3	N/A
\$2.7	\$2.7	\$0.0	0%
\$0.3	\$0.3	\$0.0	0%
\$1.1	\$1.1	\$0.0	0%
\$0.6	\$0.6	\$0.0	0%
\$7.5	\$7.5	\$0.0	0%
<b>\$92.7</b>	<b>\$99.9</b>	<b>\$7.2</b>	<b>8%</b>
(\$12.2)	(\$12.2)	\$0.0	0%
<b>\$80.5</b>	<b>\$87.7</b>	<b>\$7.2</b>	<b>9%</b>

5/12/2018

# RSSI -- 2014-2019 Inflated to 2020-2025 Initial Proposed

5/11/2018

(In Millions)

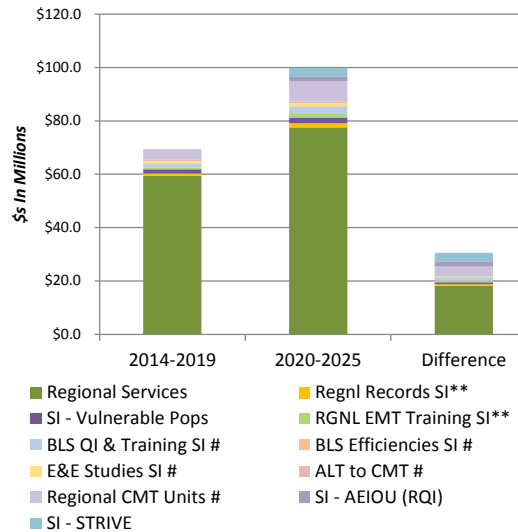
RSSI Funding Categories	2014-2019	2020-2025	Difference	% Incr*
Regional Services	\$59.4	\$77.6	\$18.2	31%
Regnl Records SI**	\$0.9	\$1.5	\$0.6	76%
RGNL EMT Training SI**	\$0.6	\$1.4	\$0.7	116%
SI - Vulnerable Pops	\$1.5	\$2.1	\$0.6	39%
SI - AEIOU (RQI)		\$1.8	\$1.8	N/A
SI - STRIVE		\$3.3	\$3.3	N/A
BLS QI & Training SI #	\$1.5	\$2.7	\$1.2	82%
BLS Efficiencies SI #	\$0.2	\$0.3	\$0.1	27%
E&E Studies SI #	\$0.8	\$1.1	\$0.2	27%
ALT to CMT #	\$0.5	\$0.6	\$0.1	19%
Regional CMT Units #	\$3.9	\$7.5	\$3.6	92%
<b>TOTAL RSSI</b>	<b>\$69.4</b>	<b>\$99.9</b>	<b>\$30.5</b>	<b>44%</b>
Projects to BLS #	(\$7.0)	(\$12.2)	(\$5.2)	75%
<b>Potential Rev RSSI</b>	<b>\$62.4</b>	<b>\$87.7</b>	<b>\$25.3</b>	<b>41%</b>

\*Increase at CPI-W+1=25.5%

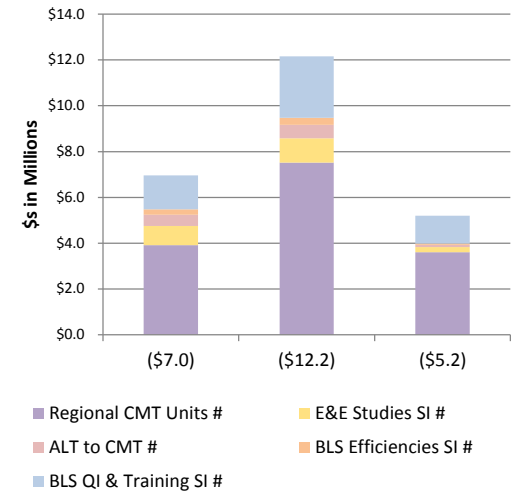
\*\*2014 to 2019 SI converting to RSS

# There has been some preliminary discussion of moving these projects to BLS.

RSSI Funding by levy period

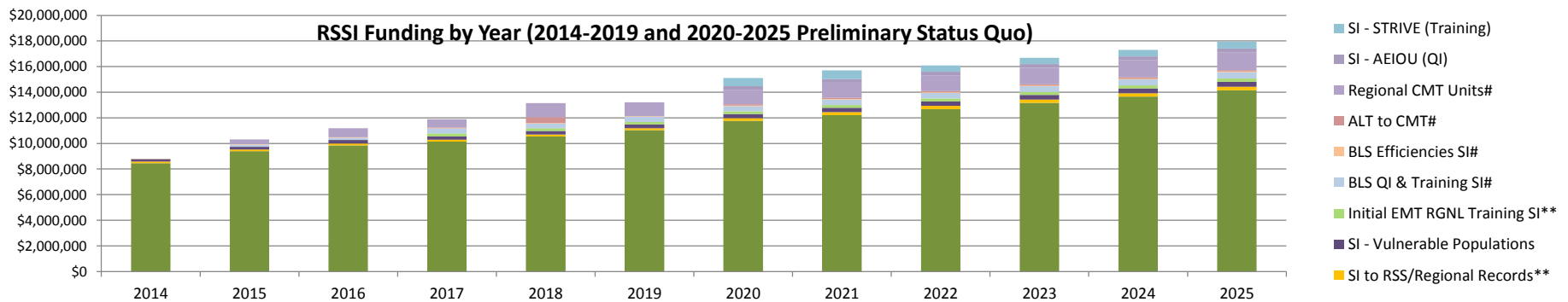


Projects Potentially to BLS



RSSI Funding Categories	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2014-2019	2020-2025	Difference
Regional Services	8,460,204	9,385,566	9,842,690	10,136,986	10,545,507	11,033,764	11,751,048	12,212,864	12,680,617	13,166,285	13,654,754	14,150,421	59,404,717	77,615,988	18,211,271
SI to RSS/Regional Records**	126,443	132,210	138,771	145,000	152,299	159,989	227,154	236,081	245,123	254,511	263,954	273,535	854,712	1,500,358	645,646
Initial EMT RGNL Training SI**				236,507	200,000	200,000	208,600	216,798	225,101	233,723	242,394	251,193	636,507	1,377,809	741,301
SI - Vulnerable Populations	179,062	219,281	291,183	271,850	281,229	291,044	323,559	336,275	349,154	362,527	375,977	389,625	1,533,649	2,137,117	603,468
SI - AEIOU (QI)							266,788	277,273	287,893	298,919	310,009	321,262	0	1,762,144	1,762,144
SI - STRIVE (Training)							648,424	670,017	481,674	496,005	510,174	524,345	0	3,330,639	3,330,639
BLS QI & Training SI#		170,833	176,539	365,046	377,640	390,820	407,625	423,645	439,871	456,718	473,662	490,856	1,480,878	2,692,376	1,211,498
BLS Efficiencies SI#	35,246	36,762	38,342	39,991	41,711	43,504	45,375	47,158	48,964	50,840	52,726	54,640	235,556	299,702	64,147
E&E Studies SI#	124,628	129,987	135,576	141,406	147,487	153,829	160,443	166,749	173,135	179,766	186,436	193,203	832,913	1,059,732	226,819
ALT to CMT#				49,433	450,567		90,000	93,537	97,119	100,839	104,580	108,377	500,000	594,452	94,452
Regional CMT Units#		363,546	704,299	649,502	1,104,770	1,091,217	1,138,139	1,182,868	1,228,172	1,275,211	1,322,521	1,370,529	3,913,334	7,517,441	3,604,107
<b>TOTAL Current RSSI</b>	<b>8,925,583</b>	<b>10,438,185</b>	<b>11,327,401</b>	<b>12,035,722</b>	<b>13,301,209</b>	<b>13,364,167</b>	<b>15,267,156</b>	<b>15,863,265</b>	<b>16,256,824</b>	<b>16,875,343</b>	<b>17,497,186</b>	<b>18,127,985</b>	<b>69,392,267</b>	<b>99,887,759</b>	<b>30,495,492</b>
Projects to BLS #	-159,874	-701,128	-1,054,757	-1,245,378	-2,122,174	-1,679,370	-1,841,583	-1,913,957	-1,987,262	-2,063,374	-2,139,925	-2,217,604	-6,962,681	-12,163,704	-5,201,023
<b>TOTAL Rev RSSI</b>	<b>8,765,709</b>	<b>9,737,057</b>	<b>10,272,644</b>	<b>10,790,344</b>	<b>11,179,035</b>	<b>11,684,797</b>	<b>13,425,573</b>	<b>13,949,308</b>	<b>14,269,562</b>	<b>14,811,969</b>	<b>15,357,261</b>	<b>15,910,381</b>	<b>62,429,586</b>	<b>87,724,055</b>	<b>25,294,469</b>

RSSI Funding by Year (2014-2019 and 2020-2025 Preliminary Status Quo)



# MEDIC ONE/EMERGENCY MEDICAL SERVICES STRATEGIC PLAN & LEVY REAUTHORIZATION

**DRAFT**

## Regional Services Subcommittee Report to the Finance Subcommittee 5/17/18

### **Accomplishments to Date:**

- Members were oriented to levy planning process, milestones, roles and responsibilities of members and expectations;
- Endorsed items to be reviewed as part of the Work Plan, and Regional Services Subcommittee-specific principles to guide Subcommittee decision making;
- Reviewed the focus, costs and benefits of the Regional Services and Strategic Initiatives currently supporting the system through the 2014-2019 levy;
- Identified system needs, regional interests and priorities, and methods to increase cost efficiencies and provide greater overall system effectiveness; and
- Developed an on-going list of ideas and considerations for future planning.

### **Principles leading the Subcommittee:**

Decisions regarding programs and Initiatives will be viewed in respect to patient outcomes and high quality services. This includes:

- Collaboration with regional partners
- Meeting emergent community needs
- Maintaining and/or improving standards of patient care
- Efficiently use resources
- Improve system operations and contain costs;
- Ensure no degradation of services or the system
- Maintain and/or identify new Strategic Initiatives that provide system effectiveness and efficiencies to
  - Improve the quality of EMS services
  - Manage the rate of growth
  - Contain costs

### **Decisions made by the Subcommittee:**

1. Support the continuation, and development, of Strategic Initiatives that increase standardization, coordination, interconnectedness, partnerships and regionalism.

### **Next Steps:**

- Present Subcommittee update at the May 30, 2018 *EMS Advisory Task Force* meeting
- Proceed with tasks as directed by the *EMS Advisory Task Force* at May meeting
- Refine expenditures; incorporate into Financial Plan
- Prepare recommendations for July 31<sup>st</sup> *EMS Advisory Task Force* meeting