

**Washington State Department of Health**  
**EMS & Trauma Care Steering Committee**

Draft MEETING MINUTES

May 18, 2022

Meeting held virtually via ZOOM Meeting

**ATTENDEES:**

**Committee Members:**

Tim Bax, MD	Beki Hammons	Lila O'Mahony, MD
Carly Bean	Mike Hilley	Scott Phillips, MD
Cameron Buck, MD	Joe Hoffman, MD	Bryce Robinson, MD
Tom Chavez	Tim Hoover	Eric Roedel, MD
Chris Clem	David Likosky, MD	Peter Rutherford, MD
Christine Clutter	Shaughn Maxwell	Susan Stern, MD
Eric Cooper, MD	Denise McCurdy	Mark Taylor
Brian Fuhs, MD	Patricia McMahon	Ken Woffenden
	Brenda Nelson	

**DOH Staff:**

Tony Bledsoe	Dawn Felt	John Nokes
Christy Cammarata	Adam Gallion	Jason Norris
Lori Clary	Catie Holstein	Tim Orcutt
Ian Corbridge	Jim Jansen	Conrad Otterness
Xinyao deGrauw	Jennifer Landacre	Ann Oxenbridge
Dolly Fernandes	Ihsan Mahdi	Jeff Sinanian
Nicole Fernandus	Matt Nelson	Sarah Studebaker
		Hailey Thacker

**Guests:**

Emily Agudo	Jenna Hannity	Greg Perry
Nadja Baker	Brian Ireton	Brian Pulse
Kristopher Basil	Barb Jensen	Wendy Rife
Katherine Bendickson	Jennifer Johnston	Joseph Rodrigues
Martin Betony	Sandra Kellso	Paul Ross
Mark Blaney	Tom Lamanna	Randi Riesenberg
Melanie Brandt	Jennifer Lataquin	Michelle Schmidt
Shelley Briggs	Michael Lopez	Max Severeid
Cindy Button	Amy Milne	Dawn Shimabukuro
Rinita Cook	Jamie Minnock	Bradley Stanbary
Carrie Cook-Picus	Martina Nicolas	Cody Staub
Martin Cozart	Carolynn Morris	Becky Stermer
Becky Dana	Christopher Montera	Tracy Stockwell
Annette Davis	Jim Nania, MD	Cheryl Stromberg
Lisa Edwards	Jaclyn Numata	Deborah Walker
Gretchen Eslick	Norma Pancake	Anthony Wilhite
Mary Flick	Richard Paris	Zita Wiltgen
Julie Gautreaux	Tammy Pettis	Deborah Woolard, MD
Megan Grinnel	Jennifer Pepperd	Scott Zachau

**Call to Order and Introductions:** Eric Cooper, MD, Chair

**Minutes from March 16, 2022:** Eric Cooper, MD  
*Handout*

**Motion #1**

Approval of meeting minutes.  
Approved unanimously.

**EMS Week Proclamation and Trauma Month:** Dolly Fernandes

Gov. Jay Inslee has proclaimed May 15-21, 2022, as Emergency Medical Services Week for Washington state to recognize the value and accomplishments of emergency medical services providers.

Dolly read the Proclamation and the letter from Dr. Shah, Secretary of Health thanking the EMS providers for their service.

- The emergency medical services system consists of emergency physicians, emergency nurses, emergency medical technicians, paramedics, firefighters, educators, and others who are on the front lines caring for patients needing emergency medical care.
- Members of emergency medical services teams are ready to provide life-saving care to those in need 24 hours a day, seven days a week.
- EMS providers have always been there for their communities, but never more so than during the COVID-19 pandemic. Despite the many challenges and personal risk, emergency medical responders are on the job, caring for the most vulnerable among us.

**DOH and OCHS Updates:** Ian Corbridge, DOH  
*PowerPoint Presentation*

Ian echoed appreciation for EMS and Trauma and presented updates on COVID. He indicated that EMS has been instrumental in the state's COVID response and recovery efforts. Ian appreciated hearing from the Medical Program Directors Workgroup on their insights, ideas and opportunities for EMS. COVID shined a light on the fragility of the public health system that has existed for years. He acknowledged there is also a greater need than ever for a robust cardiac and stroke care system in Washington State given the growing population. In addition, there is opportunity to think about infusing equity in the system. There is a need for discussions around ingress and egress, to ensure that the system doesn't collapse because hospitals can't discharge to long-term care. That, in turn, impacts EMS wall time at the hospitals and creates pinch points. Last, COVID is still with us and admissions and hospitalizations from COVID are increasing. But DOH is hoping that we will find ourselves in a better position than we were in the early part of this year.

**DOH Rules Updates:****EMS Rules:** Dolly Fernandes, DOH

The EMS team is making good progress on the CR 102 package, and Catie hopes to have the EMS rules ready for review towards the end of summer. There is a lot of work that's involved, including doing the significant analysis and any small business impacts that must be done on these rules.

**WEMISIS Rules:** Jim Jansen, DOH

The WEMISIS rule making is on a similar timeline to EMS rulemaking process. The two processes overlap quite a bit; so, we are making changes to the same rule sections and working in close coordination with the EMS program. We are also working on our CR 102 package and plan to conclude the process towards the end of summer.

**Trauma Designation Rules:** Tony Bledsoe, DOH

The last workshop for the Trauma Designation rules was on April 14. We have been reviewing some draft language concepts and heard from most of the stakeholders. We plan to get a draft rule document out for review sometime late this summer or early fall.

**Trauma Registry:** Jim Jansen, DOH

The Washington Trauma registry continues to be unable to receive trauma data submissions from the hospitals. This pause took effect 1/2021 and we continue to work with the vendor, ESO, and Washington Chief Information Office to address necessary security processes. One issue we need to resolve is the ESO platform which is unable to receive submissions through the Secure Access Washington (SAW) System which is a state security requirement. DOH is seeking a waiver to utilize ESO's alternative security processes rather than the SAW system. We hope for a quick resolution.

**Cardiac and Stroke Study:** Cameron Buck, MD and Dolly Fernandes

Dr. Buck informed that the purpose of the legislation is to conduct a study to evaluate Washington State's system for cardiac and stroke emergencies and provide recommendations for improvement. Dolly led the Request for Proposal to secure a consultant to conduct this study. There were no bids to conduct the study.

Dr. Buck wants the committee to understand that this was not completely unanticipated. In fact, there are a lot of competing priorities now. Consultants and consulting healthcare agencies have a lot of other work prospects and they may not see this as a cost effective project.

At yesterday's Emergency Cardiac and Stroke TAC meeting they took a step back and thought about the next steps. We are going to reach out to the state's academic institutions and healthcare organizations and make a personal connection with those that have done studies and encourage them to apply, find out what may be their challenges and seek to address the challenges if possible. The TAC also has a backup plan of doing the work within the ESC TAC.

Dolly pointed out that DOH was awarded \$100,000 for the study and DOH is looking into increasing that amount to hopefully incentivize proposals or bids. DOH must follow very specific contracting guidelines on how we reach out to potential bidders and make sure that there is fair opportunity for anyone to apply. The legislature did indicate that the study needs to be conducted by a qualified

consultant who will do the gathering of the information and put it together in a report with recommendations. The report must be submitted to the Legislature by October 1, 2023. However, it really needs to be ready by June of 2023, because DOH will need time to review it.

Dr. Hoffman suggested contacting the UW, Daniel J. Evans School of Public Policy & Governance who are constantly looking for project ideas.

**Recognitions:** Eric Cooper and Dolly Fernandes

Dr. Susan Stern served three terms or nine years on the committee and has been a great advocate for improving the Washington State Emergency Care System. She helped on various workgroups and activities. Dr. Stern received many thanks from the committee and others attending the meeting.

Martina Nicolas, who has worked with the North Region for 12 years, is also leaving for a new adventure and a career change. Dolly thanked Martina for all her contributions and leadership of the North Region EMS and Trauma Council.

Mike Lopez, Spokane FD & East Region Council Chair is retiring from the Spokane Fire Department at the end of June. Mike has dedicated his entire career to EMS and Trauma and worked for the state, county and city. Mike came to DOH in 2004 and led the EMS Education and Training section for 10 years. Then he went back to his hometown of Spokane in 2014 where he has worked for Spokane Fire Department for the past 8 years as their Integrated Health Services Manager.

Everyone thanked Mike for all of his contributions to EMS and making our Emergency Care System one of the best in the nation.

**Committee Business:** Eric Cooper, MD

Chris Clem has been appointed the new RAC TAC chair, taking over from Tim Hoover. Shawn Maxwell has been appointed the new Prehospital chair, taking over from Scott Dorsey. Both Tim and Scott have been great chairs for these TACs and are much appreciated.

**Regional Plan Changes:**

**North Central Region: Grant County BLS trauma verification min/max change:** Rinita Cook

Grant County proposed increasing their BLS Ambulance maximum by 1 (changing from a maximum of 8 to a maximum of 9). The reason for the increase is increasing population, call volume, and private ambulance providers not available and some AID services having to do transports.

**Motion #2**

Increase Grant County BLS ambulance max from 8 to 9.

Approved unanimously

**East Region: Stevens County BLS and ALS trauma verification min/max change:** Mike Lopez

Stevens County proposed increasing their BLS AID maximum by 1 (changing from a maximum of 8 to a maximum of 9) and increasing their ALS Ambulance maximum by 1 (changing from a maximum of 1 to a maximum of 2). The reason for the increase is lack of ALS coverage in the central/northern part of Stevens County and not enough call volume to support an increase of more than 1. The BLS AID increase is to allow for currently non-trauma verified BLS AID service to upgrade to verified.

**Motion #3**

Stevens County BLS AID max from 8 to 9; ALS Ambulance max from 1 to 2.

Approved unanimously

**RAC TAC Strategic Plan Annual Report:** Hailey Thacker, DOH

The RAC TAC presented their strategic plan update. This year they focused on improving regional council engagement with stakeholders, which stemmed from an ACS recommendation. One of their strategies is to reach 70% occupancy or membership on each of the EMS and Trauma Region Councils. Last September the TAC presented to the Rural EMS Workgroup, which is led by John Nokes, DOH, informing the participating Rural EMS agencies on the roles and activities of regional councils in hopes of finding areas for collaboration. The RAC also supported the regional response to COVID, sharing tactics and lessons learned with DOH and regional partners. The TAC plans to continue working on improving engagement with stakeholders and exploring social media and gathering feedback on areas of improvement from council members. They also begin Regional Planning; this staged work will run from July 2022 to June 2023. The TAC plans to meet and learn with DOH and other system partners on how we can improve and support response in emergencies. And lastly, continue to collaborate with DOH to improve WEMESIS and Regional QI activities. The TAC thanked Tim Hoover for his leadership as Chair, and welcome Chris Clem as the new oncoming RAC TAC chair.

**RAC Data – WEMESIS & Data Quality by Region:** Adam Rovang, DOH

*PowerPoint Presentation*

Adam Rovang, epidemiologist with the DOH's WEMESIS team, presented on WEMESIS data quality by EMS and Trauma regions. Topics included trends in WEMESIS participation, the percent of EMS responses captured in WEMESIS, the timeliness of records submitted, and the numbers of records submitted each quarter. The total number of records submitted to WEMESIS has increased each year since 2018, with 1,275,000 records submitted in 2021.

The presentation also identified data quality issues in entries needed for measuring EMS KPIs, and highlighted areas for improvement for certain regions. Resources were also presented for regions or EMS services interested in improving their WEMESIS data quality.

## **Injury & Violence Prevention TAC Annual Report:** Mike Hilley, Chair and Lori Clary, DOH

The TAC is a robust group of 30 – 40 participants from around the State. The Fall Prevention Coalition has joined meetings with the IVP TAC. There have been some great presentations.

Some accomplishments of the IVP TAC include:

- Fall Prevention Coalition created a website which got 272 average hits pre new site and 354.2 average hits post new website, for an increase of 30% post hits. The top two pages are Stay Active and Independent for Life and Fall prevention resources page.
- A Fall Prevention social Media campaign which got 3.5% increase in “followers” (5000 new followers) across all DOH social media accounts. It reached 68,600 Instagram account holders. The message that received the greatest engagement was an Instagram post: *“Balance everything in the new year, including your health. Strength and balance exercises prevent falls. Be safe and independent in your home in 2022.”*
- Created flyers with simple prevention tips for fall prevention, a home safety checklist as well as another flyer that focuses on exercise.
- Created a fall prevention packet that is given out to every single patient who is discharged from the ED for a fall.
- Collaborated with the Traumatic Brain Injury Council and Confluence Health, to create a flyer that addressed both traumatic brain injury and falls.

The TAC wants to develop partnerships with community-based organizations and business partnerships for funding and sustainability. They want to continue assisting fire departments, hospitals and EMS regions in their prevention programming.

One of their goals is to have a fall prevention coalition in every county. The TAC is also working to award more grants and looking for grant opportunities and collaboration.

## **Injury Data Presentation:** Conrad Otterness, DOH Injury Epidemiologist **Drug Overdose Deaths and Hospitalizations**

The number of drug overdose deaths significantly increased from 2019 (n=1259) to 2020 (n=1731) and the upward trend has continued through 2021 (n=2167). Synthetic opioids (including fentanyl) and psychostimulants involved overdose deaths make up a substantial proportion of the overall overdose deaths.

Nearly all counties are experiencing overdose deaths, however some areas experience the largest numbers (King, Pierce, Snohomish), and King, Pierce, Spokane are experiencing increases in OD deaths.

Overall, more males die from overdoses, however males and females are experiencing dramatic increases from 2019, 2020 and 2021.

## **Drug Overdoses**

Drug overdose deaths occur predominantly among White, Non-Hispanics. But American Indian/Alaskan Native, Hispanics, Blacks are experiencing increases since 2019.

Hospitalizations due to drug overdoses have decreased over the past 5 years, except for hospitalizations involving stimulant overdoses.

## **Suicide Deaths and Intentional Self-Harm Hospitalizations**

Suicide death rates in Washington state have been above the national average in the last few years. There has been no indication of an increase in suicide deaths in recent years.

However, some communities are showing an increase in suicide deaths for American Indian/Alaskan Natives, Asians, Blacks, people 19 and under, and people 65 and older.

## **Homicides**

Homicides in Washington state remain lower than national average but continue to increase each year. In 2020, homicides increased by 35%.

## **Older Adult Falls**

In 2020, Washington state had the 15th highest rate of unintentional fall-related deaths among adults ages 60 and older.

The rate of fall-related deaths in Washington state has increased 37% since 2000 and was 63.7 per 100,000 in 2020 (compared to 50.2 nationally).

## **Technical Advisory Committee (TAC) Reports:**

### **Rehab TAC:** Chris Clutter, chair

They will have a meeting on Monday, May 23 to discuss the rehab data Uniform Data Services (UDS). We will be working with Tim to slice and dice the data. They are trying to figure out the best way to see how the data can help them to meet their rehab objectives. They plan to share the rehab data with the Steering Committee in November.

### **Pediatric TAC:** Matt Nelson, DOH

Dr. Eileen Kline from Seattle Children's updated the TAC on research projects they are doing in collaboration with Medic One. They also reviewed the pediatric suicide presentation that was presented to the steering committee. It is very sobering, and they discussed possible campaign prevention efforts to address it. The TAC is meeting after this meeting. They are going to have a discussion on the need for requiring a pediatric trauma score to be collected and uploaded or inputted by trauma registrars.

**Outcomes TAC:** Cameron Buck, MD, Chair

Outcomes TAC met and reviewed the IVP data presentation that was shown today. They reviewed the updated Outcomes TAC charter and accepted and finalized that version. The next meeting will be for the purpose of reviewing the ECS TAC, and the Prehospital TAC data presentations for the September committee meeting.

**ECS TAC:** Cameron Buck, MD

The bulk of the conversation was on the Cardiac and Stroke legislation. The TAC has embraced that work and is committed to making it work whether it is helping the consultant or coming together and doing some work of supporting plan B.

They talked about outcome measures for the Outcomes TAC and came up with about 4 – 5 possibilities. Then the TAC did the same exercise for Stroke and came up with their top 4 to 5 measures. The TAC will meet again on 8/16.

**Medical Directors:** Joe Hoffman, MD

Dr. Shah, the Department of Health Secretary, addressed the group and had an open questions and answers session. There was a discussion about standardized ALS airway course and some alternatives that are out there.

**Cost TAC:** Dolly Fernandes, DOH

The Cost TAC will likely meet in September because the revenue is decreasing, especially on the fines side, and we may need to dial down the spending plan. Eric Dean, DOH is monitoring the revenue closely and will have more to share with the TAC in September.

Meeting adjourned at 12:53 PM.