

EMS and Trauma Regional Deliverables Report

2017 – 2019 Regional EMS and Trauma Care System Plan Implementation

North Central Region EMS & Trauma Care Council Contract # N22655

PURPOSE: This report provides documentation to the Washington State Department of Health, Office of Community Health Systems, Emergency Care System Section, on regional system progress toward implementing and accomplishing the Goals, Objectives, and Strategies in the approved 2017-2019 Regional EMS and Trauma Care System Plan.

HOW TO USE THIS TEMPLATE:

Section1. Regional work on the Goals, Objectives, and Strategies in the Approved Regional Plan

- Insert all goals, objectives, and strategies from the approved Regional EMS and Trauma Care System Plan into the reporting template below. Use landscape orientation. For strategies, specify in parentheses, the date work is expected to begin on the strategy.

Example: Strategy 3. By June 2018 the Regional Council will ... (work expected to begin August 2017)

- **For each reporting period:**
 1. Give a summary of regional work done, and describe progress on the Regional Plan goals, objectives, and strategies. Progress means doing work or taking action to achieve the objectives and strategies that will fulfill the goal. Report work only under strategies. Report on all strategies that have work scheduled during the reporting period. For strategies with no work during the reporting period, specify “No work scheduled or done this reporting period” and explain.
 2. Changes to the Plan Goals, Objectives, and Strategies require DOH approval through the DOH Plan change process. Clearly identify and add any DOH-approved Plan changes for Goals, Objectives, and/or Strategies during the contract period). Use bold type, note the change, and give the date of DOH approval.
(Example: New objective: Obj. 5 By xxx the (DOH approved xxx date)).

3. Changes to Goals, Objectives, and Strategies need to be added to the report in the reporting period in which the Regional Council gets DOH approval.
4. When a strategy is done, report the completion date in the last column. Provide a brief description of work outcomes in the narrative column. Keep this language in all future reports to track work progress. Leave the strategy end date in the completion column, and the description of work outcomes in the narrative column. Report any other work or action on the strategy as an update, with the reporting date.
5. An objective is done when all strategies are complete. Suggest ongoing work is reported in dark green; and, completed work in black color with shaded background. Completed strategies do not need to be reported the following due date. However, in subsequent reports, note where to find the completed documentation in previous reports. Describe any accomplishments and outcomes achieved.

North Central Region EMS & Trauma Care Council Reporting for Months/Year(s) August-September 2017

Goals	Objectives	Strategies - Narrative on work done/outcomes	Strategy Completion Date
<p>Goal 1: A sustainable regional system of emergency care services that provide appropriate capacity and distribution of resources to support high quality trauma, cardiac, stroke, and other patient emergency care needs.</p>			
	<p>Objective 1. By November 2018, Regional Council will utilize Department of Health standardized methodology to determine minimum and maximum numbers and levels of trauma designated and rehabilitation services in</p>	<p>Strategy 1. By June 2018, Regional Council will request time on Regional QI agenda to present current trauma designated and rehab services min/max numbers and request input from Regional QI committee for any suggested revisions. (Work begins December 2017)</p>	

	<p>the North Central Region and forward any recommended revisions to the Department of Health.</p> <p><i>Open designation letter and intent to apply in 9/2017</i></p> <p><i>Department announced designation decisions in 4/2018</i></p>		
		<p>Strategy 2. By September 2018, Regional QI recommendations will be reported to the Regional Council for discussion. (Work begins July 2018)</p>	
		<p>Strategy 3. By October 2018 Regional Council will forward any recommended trauma designated and rehab services min/max revisions, including unserved or underserved areas to Department of Health. (Work begins September 2018)</p>	
	<p>Objective 2. By June 2019, the Regional Council will utilize the Washington State Department of Health standardized methodology to determine minimum and maximum numbers and levels of verified service types in each county and</p>	<p>Strategy 1. By October 2018, the Prehospital and Transportation Workgroup will provide the Department of Health Standardized Methodology to Local EMS Councils for determining min/max numbers, levels, and types of Prehospital verified services. (Work begins April 2018)</p>	

	provide recommendations to the Department of Health.		
		Strategy 2. By December 2018, Prehospital and Transportation Workgroup will request Local EMS Council submit recommended min/max changes for review. (Work begins October 2018)	
		Strategy 3. By February 2019, Prehospital and Transportation Workgroup will report any Local EMS Council min/max recommended changes to the Regional Council for approval. (Work begins December 2018)	
		Strategy 4. By April 2019, Regional Council will forward any recommended Prehospital min/max revisions, including any unserved or underserved areas to Department of Health. (Work begins February 2019)	
	Objective 3. By March 2018, the Regional Council will develop, review, revise and implement Regional Patient Care Procedures.	<p>Strategy 1. By August 2017, Prehospital and Transportation Workgroup will present current Regional Patient Care procedures and Department of Health PCP Guidelines to County MPDs with request for review and recommended revisions. (Work begins July 2017)</p> <p><u>July 2017:</u> During this reporting period Regional Patient Care Procedures and Department of Health PCP Guidelines were sent to County MPDs and County EMS Council Chairs with request for review and recommended revisions.</p>	Completed July 2017
		Strategy 2. By December 2017, Prehospital and Transportation Workgroup will review current approved Patient Care Procedures and recommended revisions from County MPDs and forward	

		recommended changes to Regional Council. (Work begins July 2017) August/September 2017: During this reporting period Regional Patient Care Procedures and Department of Health PCP Guidelines were reviewed by Prehospital and Transportation Workgroup Chair and the Executive Director.	
		Strategy 3. By February 2018, Regional Council will forward recommended revisions of Patient Care Procedures to the Department of Health for approval. (Work begins December 2017)	
		Strategy 4. On an ongoing basis, Regional Patient Care Procedures will be distributed to regional EMS providers, agencies, and MPD's, and placed on the NCECC.org website. (Work begins April 2018)	
	Objective 4. By October 2018, the Regional Council will review Local Council County Operating Procedures for congruency and alignment with Regional Patient Care Procedures.	Strategy 1. By June 2018, Prehospital and Transportation Workgroup will review County Operating Procedures for congruency with Regional Patient Care Procedures. (Work begins March 2018)	
		Strategy 2. By July 2018, Prehospital and Transportation Workgroup will request Local EMS Councils review and revise County Operating Procedures incongruent with Regional Patient Care Procedures utilizing the Department of Health approval process algorithm. (Work begins June 2018)	

		Strategy 3. By October 2018, Regional Council will assist Local EMS Councils in submitting updated County Operating Procedures to Department of Health for approval. (Work begins July 2018)	
		Strategy 4. On an ongoing basis, County Operating Procedures will be distributed to regional EMS providers, agencies, and MPD's and placed on the NCECC.org website. (Work begins December 2018)	
	Objective 5. By June 2018, the Region Council will reconcile Prehospital agency contact information, personnel resources, and level of service.	Strategy 1. By February 2018, the Prehospital and Transportation workgroup will obtain from the Department of Health a detailed list of Prehospital agency information. (Work begins January 2018)	
		Strategy 2. By May 2018, the Prehospital and Transportation workgroup and Local EMS Councils will utilize the agency survey to update contact information. (Work begins March 2018)	
		Strategy 3. By June 2018, the Prehospital and Transportation workgroup will reconcile the information to ensure it is correct and up to date. (Work begins May 2018)	
		Strategy 4. By June 2018, the Regional Council will provide updated agency information to Department of Health. (Work begins May 2018)	
	Objective 6. By November 2018, the Regional Council will review the categorization	Strategy 1. By June 2018, Regional Council will request time on Regional QI agenda to present current cardiac and stroke categorization numbers and request input from the QI Committee	

	<p>levels for Cardiac and Stroke facilities.</p> <p><i>Designation letter released 1/12/2018</i></p> <p><i>Applications due 3/13/2018</i></p> <p><i>Department announced designation decisions 5/13/2018</i></p>	for any revisions. (Work begins May 2018)	
		Strategy 2. By September 2018, regional Cardiac and Stroke QI recommendations will be reported to Regional Council for discussion. (Work begins June 2018)	
		Strategy 3. By October 2018, Regional Council will forward any recommended Cardiac and Stroke categorization revisions, including unserved or underserved areas to Department of Health. (Work begins September 2018)	
Goal 2: A strong, efficient region-wide system of emergency care services coordinated by the Regional Councils, comprised of health and medical care providers, and other partners, who are fully engaged in the regional and local emergency care services			

<p>system that supports the statewide system.</p>			
	<p>Objective 1. During July 2017 – June 2019, the Regional Council will implement the Regional EMS and Trauma Strategic Plan.</p>	<p>Strategy 1. By August 2017, or when the Plan is approved by Department of Health, the Regional Council will distribute the updated 2017-2019 Plan to Local Councils, MPDs, and post the Plan on the NCECC.org website. (Work begins July 2017)</p> <p><u>July 2017:</u> During this reporting period the Steering committee approved 2017-2019 Strategic Plan was uploaded to the ncecc.org website and emailed to the North Central Region Council members, County Council Chairpersons, and County MPDs. EMS Trauma Regional Deliverable Report and GANTT chart for work outline was created and distributed to the Region Executive Committee for review.</p>	<p>Completed July 2017</p>
		<p>Strategy 2. Throughout the Plan timeframe, contract deliverable reports will be shared at Regional Council meetings identifying plan work progress and accomplishments. (Work begins August 2017)</p> <p>August/September 2017: During this reporting period contract deliverable reports were distributed to Regional Council members and uploaded to the ncecc.org website.</p>	
	<p>Objective 2. By April 2019 Regional Council will develop a 2019- 2021 Emergency Medical Services and Trauma Care</p>	<p>Strategy 1. By October 2018, Plan Development Workgroup will use 2017-2019 Plan accomplishments to develop strategies for the 2019-2021 Strategic Plan. (Work begins June 2018)</p>	

	Council Strategic Plan.		
		Strategy 2. By December 2018, Regional Council will review the draft 2019-2021 Regional Strategic Plan for approval. (Work begins October 2018)	
		Strategy 3. By February 2019, Region approved 2019-2021 Strategic Plan will be submitted to Department of Health for review and approval. (Work begins December 2018)	
		Strategy 4. By April 2019, Department of Health reviewed and approved 2019-2021 Plan will go forward to Steering Committee for approval. (Work begins February 2019)	
	Objective 3. During the Plan cycle the Regional Council will facilitate the exchange of information throughout the emergency care system.	<p>Strategy 1. On an on-going basis, office staff will distribute and share via email and Regional Council website, pertinent local, regional, state and national information with emergency care system partners. (Work begins July 2017)</p> <p>August/September 2017: During this reporting period R7 Healthcare Coalition updates, WA State Injury Prevention updates, and DOH System information were distributed to system partners and posted on the NCECC.org website.</p>	
		<p>Strategy 2. During 2019-2021 Strategic Plan cycle, office staff will share contract deliverable report information with Local EMS Councils and MPDs. (Work begins August 2017)</p> <p>August/September 2017: During this reporting period contract deliverable reports were distributed to Local Council members and</p>	

		MPDs.	
	Objective 4. The Regional Council will work with the State Department of Health and the State Auditor’s Office to ensure the Regional Council business structure and practices remain compliant with RCW.	<p>Strategy 1. On an on-going basis, North Central Region representative will attend Department of Health meetings and trainings offered for Regional Councils to facilitate business practice compliance with RCW per State Auditor and Department of Health recommendations and guidance. (Work begins August 2017)</p> <p>August/September 2017: During this reporting period no trainings were attended.</p>	
		<p>Strategy 2. On an on-going basis, North Central Region Council will implement business practice recommendations from State Auditor’s Office and Department of Health for compliance with RCW. (Work begins August 2017)</p> <p>August/September 2017: During this reporting period WA State Auditors Office distributed 2017 BARS Roundtable training opportunities and registration information.</p>	
		<p>Strategy 3. By June annually, the North Central Region Council will review a year-end report compiled by the Executive Director, Regional Training and Education Committee, and members of the Executive and Finance Committees, for effective and efficient management of Regional Council activities and operations.(Work begins April 2018/2019)</p>	

		<p>Strategy 4. By June, bi-annually or as needed, Regional Council will review current Bylaws, Policies and Procedures, and facilitate Council elections as outlined as the business structure and RCW. (Work begins February 2018/2019))</p>	
		<p>Strategy 5. On an on-going basis, Regional Council will offer assistance to Local EMS Councils to review their current business structure for compliance with RCW. (Work begins August 2017)</p> <p>August/September 2017: During this reporting period no assistance from Local EMS Councils was requested.</p>	
		<p>Strategy 6. Annually, Region Council will work with Department of Health, state Regional Advisory Committee, and stakeholders to coordinate Board Development training opportunities that address business and Board best-practice education. (Work begins August 2017)</p> <p>August/September 2017: During this reporting period Executive Director and Executive Committee began planning of Board Development Workshop for FY18 and distributed survey of needs to regional council members.</p>	
	<p>Objective 5. During July 2017 - June 2019, the Regional Council will collaborate to educate the public and our partners on the Emergency Care System</p>	<p>Strategy 1. By October annually, current Regional and State Public Information presentations available will be reviewed and revised as needed by the Regional Council for education of the Emergency Care System. (Work begins August 2017/2018)</p> <p>August/September 2017: During this reporting period Executive Director reviewed Regional Public Information presentations and made recommended changes to Regional Council.</p>	

		Strategy 2. By November annually, Regional Council will approve updated Public Information brochures and media. (Work begins October 2017/2018)	
		Strategy 3. By December annually, updated approved Public Information brochures and media will be posted on the NCECC.org website and made available to regional and state partners. (Work begins November 2017/2018)	
		Strategy 4. On an on-going basis as requested, informational presentations on the regional and statewide Emergency Care System will be provided throughout the region to the public, healthcare facilities, and organizations utilizing Regional Council staff and representatives. (Work begins January 2018)	
Goal 3: A sustainable regional pre-hospital EMS system using standardized, evidence-based procedures and performance measures that address out-of-hospital emergency trauma and medical care.			
	Objective 1. By June annually, the Regional Council will allocate funding, as outlined in	Strategy 1. By March, annually, the Executive Committee and Executive Director will review available Department of Health contract funds to determine the Fiscal year allocations for Administrative and Regional Programs, to include training and	

	Department of Health contract, to support Emergency Care Education Programs.	education and injury and violence prevention programs and activities. (Work begins January 2018/2019)	
		Strategy 2. By June annually, the Executive Committee and Executive Director will submit the Fiscal year budget that includes Administrative and Program Budget items, to the Regional Council for approval. (Work begins March 2018/2019)	
	Objective 2. Annually by June, the Training and Education Committee will provide Emergency Care Education for providers in the North Central Region.	Strategy 1. Annually by May, the Training and Education Committee will determine a budget for Local County Councils pre-hospital training and education. (Work begins March 2018/2019)	
		Strategy 2. Annually by July, the Training and Education Committee will advise Local County Councils of budget and provide guidance for use of funds based off previous fiscal year agency training survey. (Work begins June 2018/2019)	
		Strategy 3. Annually by September, Local County Councils must provide an outline and/or proposal for use of training funds to the Regional Training and Education Committee for review and approval. (Work begins July 2017/2018) August/September 2017: During this reporting period Local County Councils approved their outlines for training and provided training information to Executive Director and/or Training and	Completed September 2017

		Education Committee.	
		Strategy 4. On an on-going basis, the Local County Councils will provide activity reports and participant feedback forms to the Regional Training and Education Committee. (Work begins November 2017)	
		Strategy 5. On an ongoing basis the Training and Education Committee will review Local County Councils activity reports and participant feedback and distribute report to the Regional Council, Local County Councils, and Medical Program Directors. (Work begins November 2017)	
	Objective 3. The Regional Training and Education Committee will work with Senior EMT Instructors, Department of Health, MPDs, and Local EMS Councils to maintain a quality Training Program for initial EMS courses.	<p>Strategy 1. On an ongoing basis, the Training and Education Committee will assist Senior EMS Instructors with Initial EMS Course approval, commencement, and completion. (Work begins July 2017)</p> <p>August/September 2017: During this reporting period the Training Program Coordinator assisted with ESE and EMT course paperwork.</p>	
		<p>Strategy 2. On an ongoing basis, the Training and Education Committee will correlate student completion of initial courses, completion of National Registry testing, and Department of Health Credentialing. (Work begins July 2017)</p> <p>August/September 2017: During this reporting period Training Program Coordinator provided DOH with student course completion to correlate with National Registry testing report.</p>	

		<p>Strategy 3. On an ongoing basis, the Training and Education Committee will report correlated data for student completion of Initial EMS Courses to County MPDs. (Work begins July 2017)</p> <p>August/September 2017: During this reporting period no was provide to County MPDs.</p>	
		<p>Strategy 4. Annually, by March, Training and Education Committee will hold a Senior EMS Instructor workshop for Instructors aligned with Regional Training Program. (Work begins July 2018/2019)</p>	
		<p>Strategy 5. On an ongoing basis, Senior EMS Instructors aligned with Regional Training Program will participate in Quality Assurance and Improvement Program requirements. (Work begins July 2017)</p> <p>August/September 2017: During this reporting period the Regional Training and Education Committee continued review and revisions of the Regional Training Program Policy and Procedures and QA/QI requirements for the Training Program.</p>	
		<p>Strategy 6. Annually, by June, the Regional Training and Education Committee will review the Regional Training Program Policy and Procedures manual and make necessary revisions congruent with WAC, RCW, and Department of Health guidance documents. (Work begins March 2018/2019)</p>	
	<p>Objective 4. By March 2018, the North Central Region Council will distribute Department of Health approved Key Performance Indicators</p>	<p>Strategy 1. By December 2017, the Regional Training and Education Committee will review the Regional QI plan for current Prehospital Key Performance Indicators. (Work begins October 2017)</p>	

	to stakeholders in the North Central Region.		
		Strategy 2. By March 2018, the Regional Training and Education Committee will provide County MPDs and Local EMS Councils with current Region QI Plan that includes Pre-hospital EMS Key Performance Indicators. (Work begins December 2017)	
		Strategy 3. Throughout the Plan timeframe, the Regional Training and Education Committee will distribute Regional QI updates on Prehospital Key Performance Indicators currently being monitored to regional Prehospital system stakeholders. (MPDs, SEIs, EMS Evaluators, agency directors and providers.) (Work begins March 2018)	
Goal 4: Reduce preventable/premature death and disability due to trauma, stroke, and cardiac illness.			
	Objective 1. Annually, the Regional Council will review relevant data from Department of Health and other data sources, and utilize regional injury and violence prevention partners to identify and recommend evidence-	Strategy 1. By August annually, the Injury and Violence Prevention workgroup will review relevant regional/injury data, and identify regional partners that will provide best-practice prevention programs. (Work begins July 2017/2018) <u>July 2017:</u> During this reporting period the Injury and Violence Prevention Workgroup was provided strategic plan work outline and links to WA State DOH injury prevention data tables and additional IVP TAC information with request to review in consideration of regional partners request for injury prevention	Completed July 2017

	based and/or best-practice activities to support prevention efforts in North Central Region.	funding.	
		<p>Strategy 2. By October annually, Regional Council will choose regionally funded prevention activities to support based upon presentations/recommendations provided by Injury and Violence Prevention workgroup. (Work begins August 2017/2018)</p> <p>August/September 2017: During this reporting period IVP proposals were accepted from regional partners for consideration of FY18 funding.</p>	
		<p>Strategy 3. By December annually, Executive Director will secure deliverable contracts with selected injury prevention partners to provide injury prevention programs. (Work begins October 2017/2018)</p>	
		<p>Strategy 4. Biannually, contracted injury prevention partners will provide Regional Council with program activity reports and accomplishments as outlined in the contract agreement; these reports will be posted on the NCECC.org website for viewing. (Work begins May 2018)</p>	
Goal 5: Work toward sustainable emergency care funding and enhancing workforce development to optimize			

patient outcomes.			
	<p>Objective 1. During July 2017- June 2019 Strategic Plan cycle, East and North Central Region Councils will continue sharing of coordinated resources and determine areas of possible consolidation.</p>	<p>Strategy 1. Annually, by April, the Administrative Services contract will be reviewed by the East and North Central Region Council, Executive Board, and Executive Director to determine revisions as needed. (Work begins February 2018/2019)</p>	
		<p>Strategy 2. Annually, by June, North Central Region Council will review and approve an Administrative Services Contract between the East and North Central Region Council. (Work begins February 2018/2019)</p>	
		<p>Strategy 3. Throughout the plan timeframe, the Executive Committee, Training and Education Committee, Injury and Violence Prevention Workgroup, and the Executive Director will review current training and education processes, injury and violence prevention programs, and regional office administration components to determine areas of viable consolidation and/or sharing of resources. (Work begins July 2017)</p> <p>August/September 2017: During this reporting period no additional areas of consolidation were identified.</p>	
	<p>Objective 2. During July 2017 – June 2019</p>	<p>Strategy 1. By June 2019, Community Paramedicine MI Workgroup will work collaboratively with healthcare providers to host an</p>	

	<p>Regional Community Paramedicine Mobile Integrated Healthcare Workgroup will establish collaborative multidisciplinary efforts to develop an affordable, efficient, and comprehensive community based system of care.</p>	<p>educational Summit for Community Paramedicine partners. (Work begins July 2018)</p>	
		<p>Strategy 2. Throughout the plan timeframe, Community Paramedicine MIH will establish workgroups and partnerships to promote Health Care Transformation and Telehealth. (Work begins July 2017)</p> <p>August/September 2017: During this reporting period the Community Paramedicine MIH workgroup met and included ACH, CHI, and Mobility Workgroup members in discussions.</p>	
		<p>Strategy 3. Throughout the plan timeframe, the Community Paramedicine MIH Workgroup will provide status reports, Department of Health updates, and stakeholder feedback to Regional Council. (Work begins July 2017)</p> <p>August/September 2017: During this reporting period the Community Paramedicine MIH workgroup purchased communication software for community health expansion. Molina presented Care Coordination for High EMS/ED Users. Beionka Moore, Ex. Dir., WA Rural Health Association provided a</p>	

		presentation on what the Rural Health Association does.	
	Objective 3. During July 2017-June 2019 Strategic Plan cycle, the Regional Council will determine methods to increase funding sources compliant with State regulations.	<p>Strategy 1. Throughout the plan timeframe, the Executive Director will collaborate with Regional Advisory Committee and the Department of Health to develop a fundraising template. (Work begins September 2017)</p> <p>August/September 2017: During this reporting period no discussion of fundraising was brought forth at the Regional Advisory Committee meeting.</p>	
		<p>Strategy 2. Throughout the plan timeframe, the Executive Director, Executive Committee, and Finance Committee will review and consider opportunities for Regional Grant funding. (Work begins September 2017)</p> <p>August/September 2017: During this reporting period no Grant opportunities were presented for the Council to consider.</p>	