

Neil Krutz
City Manager
City of Sparks

Eric Brown
County Manager
Washoe County

Kevin Dick
District Health Officer
Washoe County Health
District

Emergency Medical Services Advisory Board

WASHOE COUNTY
HEALTH DISTRICT
ENHANCING QUALITY OF LIFE

Doug Thornley
City Manager
City of Reno

Dr. John Hardwick
Emergency Room Physician

Joe Macaluso
Director of Risk Management
Renown

MEETING NOTICE AND AGENDA

Date and Time of Meeting: Thursday, August 5, 2021, 9:00 a.m.
Place of Meeting: Washoe County Health District
1001 E. Ninth Street, Building B, South Auditorium
Reno, Nevada 89512

1. ***Roll Call and Determination of Quorum**
2. ***Public Comment**
Limited to three (3) minutes per person. No action may be taken.
3. **Consent Items** (For Possible Action)
Matters which the Emergency Medical Services Advisory Board may consider in one motion. Any exceptions to the Consent Agenda must be stated prior to approval.
 - A. **Approval of Draft Minutes**
May 6, 2021
4. ***Prehospital Medical Advisory Committee (PMAC) Update**
Dr. John Hardwick
5. ***EMS Oversight Program and Performance Data Updates**
Andrea Esp
6. **Presentation, discussion, possible approval, and recommendation to present the revised REMSA Exemption Guidelines Letter to the District Board of Health (For Possible Action)**
Julie Hunter
7. ***REMSA Quarterly EMS Advisory Report**
Adam Heinz
8. ***City of Sparks Fire Department EMSAB Report**
Chief Jim Reid
9. ***Truckee Meadows Fire Protection District (TMFPD) Advisory Board Update**
Chief Joe Kammann
10. ***Reno Fire Department EMS Advisory Board Update**
Reno Fire Department Staff Representative

11. *City of Reno and REMSA CAD-to-CAD Implementation Project Update

Cody Shadle

12. Discussion and possible approval of moving the November 4, 2021 meeting to November 5, 2021 (For Possible Action)

Andrea Esp

13. *Board Comment

Limited to announcements or issues for future agendas. No action may be taken.

14. *Public Comment

Limited to three (3) minutes per person. No action may be taken.

Adjournment

Items on the agenda may be taken out of order, combined with other items, withdrawn from the agenda, moved to the agenda of a later meeting; or they may be voted on in a block. Items with a specific time designation will not be heard prior to the stated time, but may be heard later. An item listed with asterisk (*) next to it is an item for which no action will be taken.

The Emergency Medical Services Advisory Board meetings are accessible to the disabled. Disabled members of the public who require special accommodations or assistance at the meeting are requested to notify Administrative Health Services at the Washoe County Health District, 1001 E. 9th St, Reno, NV 89512, or by calling 775.326-6049, at least 24 hours prior to the meeting.

Time Limits: Public comments are welcome during the Public Comment periods for all matters whether listed on the agenda or not. All comments are limited to three (3) minutes per person. Additionally, public comment of three (3) minutes per person may be heard during individual action items on the agenda. Persons are invited to submit comments in writing on the agenda items and/or comment on that item at the Board meeting. Persons may not allocate unused time to other speakers.

Response to Public Comments: The Emergency Medical Services Advisory Board can deliberate or take action only if a matter has been listed on an agenda properly posted prior to the meeting. During the public comment period, speakers may address matters listed or not listed on the published agenda. The Open Meeting Law does not expressly prohibit responses to public comments by the Emergency Medical Services Advisory Board. However, responses from the Board members to unlisted public comment topics could become deliberation on a matter without notice to the public. On the advice of legal counsel and to ensure the public has notice of all matters the Emergency Medical Services Advisory Board will consider, Board members may choose not to respond to public comments, except to correct factual inaccuracies, ask for Health District Staff action or to ask that a matter be listed on a future agenda. The Emergency Medical Services Advisory Board may do this either during the public comment item or during the following item: "Board Comments – Limited to Announcements or Issues for future Agendas."

Pursuant to NRS 241.020, Notice of this meeting was posted electronically at the following locations:

Washoe County Health District Website www.washoecounty.us/health

State of Nevada Website: <https://notice.nv.gov>

Pursuant to the Declaration of Emergency Directive 006, NRS 241 (1)(b), the requirement to physically post agendas is hereby suspended.

Supporting materials are also available at the Washoe County Health District Website www.washoecounty.us/health pursuant to the requirements of NRS 241.020. Ms. Dawn Spinola, Administrative Secretary to the Emergency Medical Services Advisory Board, is the person designated by the Emergency Medical Services Advisory Board to respond to requests for supporting materials. Ms. Spinola is located at the Washoe County Health District and may be reached by telephone at (775) 326-6049 or by email at dspinola@washoecounty.us.

Neil Krutz
City Manager
City of Sparks

Eric Brown
County Manager
Washoe County

Kevin Dick
District Health Officer
Washoe County Health
District

Emergency Medical Services Advisory Board

WASHOE COUNTY
HEALTH DISTRICT
ENHANCING QUALITY OF LIFE

Doug Thornley
City Manager
City of Reno

Dr. John Hardwick
Emergency Room Physician

Joe Macaluso
Director of Risk Management
Renown

MEETING MINUTES

Date and Time of Meeting: Thursday, May 6, 2021, 9:00 a.m.

This meeting was held by teleconference.

1. *Roll Call and Determination of Quorum

Chair Krutz called the meeting to order at 9:27 a.m.

The following members and staff were present:

Members present: Neil Krutz, Chair
Kevin Dick
Eric Brown
Joe Macaluso
Dr. John Hardwick
Doug Thornley

Members absent: None

Ms. Spinola verified a quorum was present.

Staff present: Dania Reid, Deputy District Attorney
Andrea Esp, Preparedness and EMS Program Manager
Julie Hunter, EMS Program Coordinator
Anastasia Gunawan, EMS Statistician
Dawn Spinola, Administrative Secretary, Recording Secretary

2. *Public Comment

Limited to three (3) minutes per person. No action may be taken.

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

3. Consent Items (For Possible Action)

Matters which the Emergency Medical Services Advisory Board may consider in one motion. Any exceptions to the Consent Agenda must be stated prior to approval.

A. Approval of Draft Minutes

February 4, 2021

Mr. Dick moved to approve the minutes. Mr. Thornley seconded the motion, which passed unanimously.

B. Introduction and welcome to new Board member Dr. John Hardwick

Neil Krutz

Chair Krutz welcomed Dr. Hardwick.

Dr. Hardwick stated he had been practicing in Reno since 2017. In 2020 he became the Medical Director for Sparks and Reno-Tahoe Airport fire departments. He operates out of all the local hospitals except for St. Mary's. He serves as the president of PMAC and is a Board member of the Washoe County Medical Society.

4. *Prehospital Medical Advisory Committee (PMAC) Update

Dr. John Hardwick

Dr. Hardwick reported that the protocol meeting had been held to introduce Ketorolac which is a strong nonsteroidal anti-inflammatory drug (NSAID), a non-narcotic for the treatment of acute pain. That is being brought into the protocols as an adjunct instead of just using narcotics for pain, which he opined was encouraging.

5. Discussion and possible approval of EMSAB revised bylaws (For Possible Action)

Julie Hunter

Ms. Hunter introduced herself for the record. She began by noting the EMSAB bylaws were revised to closer align with the language in the Interlocal Agreement (ILA) for purposes of consistency. There were only a few suggested revisions, and those were outlined in the staff report.

Mr. Brown moved to approve. Mr. Macaluso seconded the motion, which was approved unanimously.

6. *Program and Performance Data Updates

Andrea Esp

Program Updates – Program Activities, Data Performance and Mass Gatherings Updates

Ms. Esp introduced herself for the record. She began by indicating there were a few items she wished to highlight for the Board. Most importantly, she acknowledged the work of the local fire agencies and REMSA. Since the beginning of the year, they had worked on reviewing the Tri-Data report, the Center for Public Safety Management (CPSM) report from Reno, as well as the Washoe County EMS strategic plan. They were able to come to a consensus on some key priorities that they want to make sure the region carries forward, which would be discussed further in another agenda item. She made it a point to reiterate that their commitment to the region and making sure that continuing improvements to patient care has remained a top priority for them.

7. Presentation, discussion, possible approval, and recommendation to present the revised

Washoe County EMS Strategic Plan (2019-2023), as a requirement of the Interlocal Agreement for the Emergency Medical Services Oversight, to the District Board of Health (For Possible Action)

Julie Hunter

Ms. Hunter began by reminding the Board that the Washoe County EMS Strategic Plan is a requirement of the ILA for the Emergency Medical Services Oversight program. The mission of the plan is to coordinate the delivery of efficient and effective medical services to the citizens, businesses, and visitors of Washoe County through the collaboration of the EMS providers. The strategic plan was approved by the EMSAB on May 2, 2019, and the last progress report was given to the board on February 6, 2020. Goal # 6 sets timelines for providing updates to EMSAB, and staff are working to get those back on schedule.

Ms. Hunter reiterated that the EMS Oversight staff had worked with the EMS Task Force and its partners in February to review the recommendations in the Tri-Data and the CPSM report to come up with items that were a priority to the group, and to incorporate those into the goals and objectives of the strategic plan. The main focus was on training, legal protection, priority response, automatic response agreements, and standardized performance measures across all agencies. These priorities were incorporated into Goals #1, #2 and #4. Goal #7 was added to include legal protection for all agencies. An outline of the summary of the recommendations and additions were outlined in the staff report.

Mr. Dick requested some background on the thinking behind the legal protections and in general what is being sought there. Ms. Hunter replied that it had come up often in discussions and was a recommendation from one of the two reports. It is to research legal protection for all agencies to ensure that staff understand their legal protection. The planned strategy is to research and identify legal gaps and deficiencies, and to determine if maybe there needs to be a new bill that should be sponsored for the 2022 legislative session containing language that protects EMS responders. In the meantime, they will research those gaps and see if there is anything that can be done to protect EMS response in the community.

Mr. Dick moved to approve the strategic plan revisions and to have this presented to the District Board of Health. Mr. Macaluso seconded the motion, which was approved unanimously.

8. Presentation and possible approval of the 2019 Washoe County Trauma Data Report (For Possible Action)

Anastasia Gunawan

Nancy Diao introduced herself for the record, and explained she was filling in for Miss Anastasia Gunawan, who was the lead in compiling the Trauma Data Report for 2019 that summarizes the prevalence, morbidity and mortality associated with patterns of fatal and non-fatal injuries due to trauma. Ms. Diao highlighted that there had been a decrease in the rate of trauma incidence per 100,000 population in the year 2019 compared to the previous two years. However, despite overall rate drops, there were noticeable increases in trauma patients 65 years and older this particular year. For this age group, the top contributors to injuries are unintentional, such as falling, stumbling, and slipping. For 2019 overall, there was an increase in unintentional injuries and a decrease in intentional injuries. Among intentional injuries, two out of three trauma cases reported were due to assault by a sharp or blunt object, and bodily force. Firearm-related incidents only accounted for 20% of intentional injuries. Accidental falls are the

primary mechanism of unintentional injuries, followed by motor vehicle accidents. Details of other mechanisms of injury breakdown as spatial patterns were also available in the report for reference.

Mr. Dick noted the Health District worked with the District Board of Health (DBOH) on a strategic plan that included a Health Educator position to focus on unintentional injuries but had been unable to fill that position this past year because of the COVID-19 response. He was hopeful that the district would soon have a staff member that will be focusing on that area.

Dr. Hardwick added some context, explaining that in 2019 Renown implemented a TBI protocol, dictating that anyone over the age of 65 who had struck their head with an associated loss of consciousness or struck their head and was on blood thinners went immediately to CT imaging. He opined there is potential that more of these injuries were caught due to this. Renown had also provided further education on the topic. An aging population is, at least in part, to blame for that increase, but they were likely also capturing more trauma patients because they were scanning more of them with the new protocols.

Mr. Dick moved to approve the 2019 Trauma Data Report. Dr. Hardwick seconded the motion, which was approved unanimously.

9. *REMSA Update

Adam Heinz

REMSA Quarterly EMS Advisory Report

Adam Heinz, Executive Director Integrated Health Services, introduced himself to the Board. He indicated he would like to introduce some upcoming things to the Board that were not included in the staff report. He began by noting the week of May 16th is EMS week and the theme is “This is EMS – Caring for our Communities.” REMSA has things planned to recognize and celebrate the brave men and women that work for their organization every day and are thankful for the community that has participated in many of the scheduled events. In addition, many of the Board members, as well as other important community stakeholders, had been invited to celebrate REMSA’s 35th anniversary and Care Flight’s 40th anniversary. On May 18 REMSA will be hosting a breakfast and will have a special announcement.

Mr. Heinz went on to note that REMSA had a record-breaking day during the past weekend, with 265 responses and 182 transports. Over the past few weeks, they and the co-response partners have experienced a 25% increase with many significant traumas. In order to meet the demand of paramedics in light of the national shortage, the Center for Pre-Hospital Education at REMSA has historically hosted two public paramedic programs and one fire-based program that works with the response partners, usually on a B shift, so that the fire partners can be trained. REMSA will be adding an additional paramedic program this fall to keep up with the region’s demand and likely that is going to be a non-traditional, evening-based paramedic program, to see if that helps recruit some talent within the region.

Mr. Heinz noted that on May 5 Dr. Wilson and some of REMSA’s co-response partners got together, and she facilitated a talk about ketamine and behavioral health emergencies in response with law enforcement. Their intention is to work proactively with local law enforcement to ensure responder safety, patient safety, and optimized care. There has been a lot of national news media about the way in which patients are cared for during behavioral emergencies and they want to make sure that the region is doing what is evidence-based as well as what is best for the community. Those dialogs will continue and include law enforcement partners.

Mr. Heinz stated that REMSA recently took delivery of a high-fidelity mannequin that allows for electronic birthing. They are aware that obstetric emergencies are something that do not happen often, and in which mainly the mother does most of the work. But when they do, they want to make sure that they feel comfortable being able to provide that care. They intend to invite the co-response partners to train for those emergencies.

Mr. Heinz went on to thank Ms. Esp and Ms. Hunter for their work in coordinating and facilitating regional dialogs. He opined they were meeting very frequently and there has been quite a bit of communication happening.

10. *Sparks Fire Department Updates

Chief Jim Reid

EMS Updates

Captain Sullivan, EMS training captain from Sparks Fire, introduced himself and noted he was filling in for Chief Reid. All information was in the staff report, and he offered to answer any questions.

11. *Truckee Meadows Fire and Rescue Updates

Chief Joe Kammann

Truckee Meadows Fire Protection District (TMFPD) Advisory Board Update

Division Chief Kammann, TMFPD, introduced himself for the record. He began by noting that the most important thing that they wanted to update the Board on was the addition of mutual aid response via ambulance. Medic 30 is in Washoe Valley and Medic 45 is in Sun Valley providing mutual aid response to assist REMSA in transports in those areas. That began November 7th and is still in progress. They were averaging about 120 transports until recently, when they began to be utilized on a more expanded mutual aid basis. Instead of those units being geographically isolated to the Sun Valley and Washoe Valley areas, they are now also responding to the closest immediately outlying areas. Another 10-15 transports per month are anticipated due to that change.

Chief Kammann went on to report that TMFPD COVID activities were winding down and after June 1 will go to as-needed PODs instead of a scheduled weekly basis. Additionally, there are 19 firefighter paramedics currently on probation and 10 of them are in the academy and will be graduating June 18. That brings their total to 101 State-certified paramedics on staff. 25 of those are wildland qualified paramedics that are gearing up for this summer and ready to assist as needed around the country when wildfires start.

Mr. Dick acknowledged all the fire agencies and REMSA and thanked them for their efforts in providing vaccination PODs and vaccinations for the community. It has been a fantastic help to have them engaged in those operations.

12. *City of Reno and REMSA CAD-to-CAD Implementation Project Update

Kathleen Nickel

Ms. Esp noted that Ms. Nickel had had to leave the meeting but had left a note in the Chat area for the Board. Ms. Reid requested that the Chair read the note into the record, which he agreed to do.

“Good morning Chairman and members of the Board and guests. Kathleen Nickel, Senior Systems Analyst, City of Reno. As we worked through the CAD-to-CAD project it was necessary to scale it back tremendously due to Central Square’s inability to provide complete functionality between two separate CAD environments. We ended up with base functionality, which has been met and is being reviewed by departments to allow them proper planning to reduce liability since it will have a big impact on our current procedures. Training is being scheduled with a tentative of go-live by the end of June.”

Ms. Hunter noted she had received an email from Ms. Nickels offering to email the group, and Chair Krutz opined that would be helpful. While he appreciated the note, he indicated it would be nice to understand what the inability to provide complete functionality really means. Ms. Hunter indicated she would make that request.

13. *Board Comment

Limited to announcements or issues for future agendas. No action may be taken.
None of the members had comments or requests.

14. *Public Comment

Limited to three (3) minutes per person. No action may be taken.

Chair Krutz opened the public comment period.

Dave Cochran, Reno Fire Chief, introduced himself and noted he would like to share what they had been doing on the vaccination front. He acknowledged Mr. Dick’s gratitude. Reno Fire has administered over 8,800 vaccines and expect to get to over 10,000. Immunize Nevada has been very active in the community.

Chief Cochran went on to say that this month is Older Americans Month, and they were partnering with Councilmembers Delgado and Jardon to get vaccinations out to the older members of the community in addition to some other PODs that they were doing. He closed by explaining that Reno Fire had a 15-member recruiting academy as of approximately five weeks ago. As part of the academy this year they were adding a few EMS-specific weeks at the end, so the trainees had a better idea of their EMS obligations and duties before they begin work to serve the public and others in the region.

Chair Krutz closed the public comment period.

Adjournment

Chair Krutz adjourned the meeting at 9:54 a.m.

STAFF REPORT
REGIONAL EMERGENCY MEDICAL SERVICES ADVISORY BOARD
MEETING DATE: August 5, 2021

TO: Regional EMS Advisory Board Members
FROM: Andrea Esp, Public Health Preparedness and EMS Program Manager
775-326-6042, aesp@washoecounty.us
SUBJECT: EMS Oversight Program and Performance Data Updates

EMS Partners – Joint Advisory Committee (JAC)

The EMS Oversight Program has been hosting bi-weekly meetings with the JAC (REMSA, Reno Fire, Sparks Fire, Truckee Meadows Fire EMS) to accomplish the revisions of the Strategic Plan approved by EMSAB and the DBOH. The team has been working on the following strategies in Goal #1:

Objective 1.1. Develop appropriate protocols to determine service level for low acuity EMS calls that receive an alternative response by July 1, 2019.

- Strategy 1.15: EMS first response; prioritize and determine who responds to what calls by January 1, 2022 (added May 2021)
 - REMSA will come back to the JAC on August 4th with proposed determinants for responding with lights and sirens and calls Fire should/should not respond to. Discussion about the implementation of a cancellation policy between Fire and REMSA was proposed.

Objective 1.2. Develop standardized procedures for eligible patients to receive funded alternative transportation to obtain medical care at an alternative destination by November 4, 2021.

- REMSA does have an alternative transportation policy. the JAC will continue to research and develop a regional policy. Fire agencies agreed to develop alternative transportation policies within 30 to 60 days and will present these policies to the Board in November.

Additionally, Program staff recently revised the EMS Oversight Program Investigation Procedures. The revisions were presented to the JAC on July 21st. The recommendation from all agencies was to further revise the procedures to simplify the language. Once the procedures are finalized, they will be distributed to Fire and REMSA and posted on the EMS Oversight Program website.

EMS Planning

The Mutual Aid Evacuation Agreement (MAEA) was approved by the Inter-Hospital Coordinating Council (IHCC) on June 11, 2021 and was approved and signed by the District Health Officer on June 23, 2021. Planning meetings for the revisions to the Multi-Casualty Incident Plan (MCIP) will begin in July, with the revisions of the MCIP being completed by June 2022.



Data Performance:

The EMS Oversight Program is conducting data analysis and ambulance response performance for all EMS calls occurring within the Sparks Fire jurisdiction monthly. The Program received several data requests from fire agencies. The details and summary of those requests are outlined in the data performance report table.

Data Performance Reports			
Requestor	Summary of request	Date of request	Request completed
Sparks Fire Department	Ambulance performance for REMSA/SFD in City of Sparks for all EMS incidents occurring in April 2021.	05/19/2021	06/04/2021
Reno Fire Department	Matching call report for Fiscal Year 2019-20	05/27/2021	06/04/2021
Reno Fire Department	Medicaid Request for Fiscal Year 2019-20	06/15/2021	06/17/2021
Sparks Fire Department	Ambulance performance for REMSA/SFD in City of Sparks for all EMS incidents occurring in May 2021.	05/19/2021	07/19/2021
Sparks Fire Department	Ambulance performance for REMSA/SFD in City of Sparks for all EMS incidents occurring in June 2021.	05/19/2021	07/21/2021

REMSA Franchise Agreement Updates

The EMS Oversight Program is working with Regional Services - Geographic Information System (GIS) to conduct the annual review of the REMSA Franchise Map for FY19-20 and FY20-21. The Program reviewed call volume comparisons between Year 1 (FY 2015) to Year 6 (FY 2020). Population census data will be available in July 2021 and will be used for the FY20-21 review along with call volume comparisons.

The Program is also working with REMSA to revise the Exemption Letter that became effective July 1, 2016. The revisions will include consistency to the number of days for REMSA to submit requests as well as for the Program to review and approve requests. Additionally, language will be added to further clarify the Declaration of Emergencies and Construction exemptions.

REMSA Exemption Requests

On June 28, 2021, REMSA transported a record number of patients (190) and had a record number of Hospital offload delays: 30 total Status 99s for a total loss of 20 hours and 57 minutes waiting for hospital beds to become available. Table 1 summarizes REMSA Exemption Requests.

Table 1. REMSA Exemption Requests							
Exemption	System Overload	Status 99	Weather	Other	Total	Under Review	Approved
January 2021	23	2	*3 (BWE)		28		28
February 2021	5				5		5
March 2021	13				13		13
April 2021	52				52		52
May 2021	34						34
June 2021	118	40			*158		158

*Blanket Weather Exemption (BWE) requests received were for three separate weather incidents which lead to 13 late calls. Of the total System Overload and Status 99 exemptions, 24 of those qualified for both System Overload and Status 99 for the call and are not double counted.

Community Services Department – Memo Review/Mass Gatherings & Special Events

The EMS Oversight Program reviews and analyzes project applications received from the Planning and Building Division of the Community Services Department (CSD) and provides comments and/or conditions for the applications. Relevant agency comments are included in the staff report and agency conditions are incorporated as Conditions of Approval. The Program reviewed seven project applications for the month of June and had no comments.

The EMS Oversight Program has reviewed three special events from April to June, with no comments or concerns. These events did not meet the requirements for EMS Mass gathering EMS criteria.

**STAFF REPORT
EMERGENCY MEDICAL SERVICES ADVISORY BOARD
MEETING DATE: August 5, 2021**

TO: EMS Advisory Board Members
FROM: Julie Hunter, EMS Coordinator
jdhunter@washoecounty.us
SUBJECT: Presentation, discussion, possible approval, and recommendation to present the revised REMSA Exemption Guidelines Letter to the District Board of Health (For Possible Action).

SUMMARY

The EMS Oversight Program and REMSA worked to revise the 2016 Exemption Guidelines. The revisions were made to better define the criteria used by the District Health Officer (DHO) for approval of late call exemptions requested by REMSA Health. This agenda item is for discussion, possible approval, and recommendation to present the revised REMSA Exemption Guidelines Letter to the District Board of Health (DBOH).

PREVIOUS ACTION

- On May 26, 2016, the DHO approved the Exemption Guidelines.

BACKGROUND

Previous exemption criteria approved in 2016 is recommended to be updated to better meet the needs of the current EMS system. The EMS Oversight Program and REMSA Health is recommending language to:

- Add language to account for impacts to response times during multiple construction projects affecting traffic congestion, and intermittent road or lane closures during known construction times.
- Activation of the Multi Agency Evacuation Agreement (MAEA) plan to accomplish emergency evacuation of hospitals.
- Changing due dates for exemption requests to meet a five-day deadline for all requests (previous was three or five days).
- Language amendments to better define exemption criteria for local, state, or federal declared emergencies that also accounts for recovery phases of a response and local disaster responses.

FISCAL IMPACT

There is no fiscal impact to the Board on this agenda item.

RECOMMENDATION

Staff recommends the Board to approve the presentation and recommend staff present the revised Exemption Guideline the District Board of Health.



Subject: Revised REMSA Exemption Guidelines

Date: August 5, 2021

Page 2 of 2

POSSIBLE MOTION

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

“Move to approve the presentation and recommend staff present the revised Exemption Guidelines to the District Board of Health.”

ATTACHMENTS

Exemption Guidelines Letter May 26, 2016

Revised Exemption Guidelines Redline

Final Exemption Guidelines

~~May 26, 2016~~ July 1, 2021

Dean Dow, President/CEO REMSA
450 Edison Way
Reno, NV 89502-4117

RE: Exemption Guidelines

Dear Mr. Dow,

The Washoe County Health District (WCHD) revised the list of allowable exemption requests for Priority 1 calls in the REMSA Franchise service area. The following exemptions will be effective ~~July 1, 2016~~ July 1, 2021

All exemptions shall be reviewed by the WCHD EMS Oversight Program. Additionally, for the purpose of all compliance calculations, approved exemptions shall not be included as part of the calculation process.

Exemptions to be reviewed by REMSA and the WCHD:

1. MCI/MAEA

An exemption will be granted during a declared multi-casualty incident (MCI) or Multi Agency Evacuation for which REMSA's resources have been requested. The exemption automatically begins at the time the MCI and/or evacuation is declared. However, the first responding unit must meet response requirements if the MCI incident occurs within the Franchise service area.

2. Incorrect Address

In the event a calling party gives dispatch an incorrect address, and the stated address is verified by the Communications Specialist and confirmed by the caller to be the correct address, response time shall be measured from the time REMSA receives, or otherwise discovers, the correct address until the unit arrives on scene.

Exemptions to be reviewed and approved by the WCHD:

1. Miscellaneous

A request for a miscellaneous exemption must be submitted in writing within 5 business days following the end of the month in from which the event occurred. Miscellaneous exemptions may include requests like units driving "off road" or AVL clock stop confirmation, etc.

Miscellaneous exemptions are granted on a per call basis following a review of the documentation provided by REMSA and/or investigation by the EMS Oversight Program. The request must include all applicable supporting reports and documentation in order for the EMS Oversight Program to approve a miscellaneous exemption.

2. Weather

Pursuant to Article 7.6 of the Amended and Restated Franchise, "an exemption to response time penalties may be granted by the District Health Officer ([DHO](#)), or designee, when adherence to response time requirements under extreme weather conditions would jeopardize public safety or the safety of ambulance personnel."

REMSA shall use the ~~District Health Officer approved~~ [approved REMSA Communications Blanket Weather Exemption Request Form checklist](#) for blanket weather exemption requests to determine the necessity and validity of the request. Upon completion of the checklist, if the request is outside the hours of 7am-8pm, REMSA shall grant a preliminary blanket weather exemption status to ensure the safety of crews. If REMSA is granting a preliminary blanket weather exemption, an email correspondence is required to the EMS Oversight Program at EMSPProgram@washoecounty.us to notify staff of the exemption status start time. The EMS Oversight Program staff will acknowledge the preliminary exemption notification ~~at the earliest convenience~~ [within 3 business days](#).

Blanket weather exemptions will be granted for 12 hours, or less. At, or before, the eleventh hour of the request, REMSA must re-examine the weather conditions and outlook using information from NWS Reno and information from field providers and supervisors. Based on the findings, REMSA will either (1) request additional exemption hours, or (2) terminate the requested blanket exemption. REMSA must notify the WCHD immediately of their determination.

Blanket weather exemptions will be granted with the expectation that additional field staffing will be used to mitigate the impact of known severe weather condition on REMSA's response to priority 1 calls. The additional field staffing used must be included in the written request, if applicable. Written documentation to support the blanket weather exemption request must be submitted within ~~three~~ [5](#) business days of the verbal request or email notification. If there is not enough supporting documentation, the WCHD may deny the exemption.

Individual weather exemptions for weather related hazardous driving conditions affecting individual ground ambulances are a matter to be negotiated between REMSA and the Contractor. The individual weather exemption is applicable when a single region of the ambulance franchise service area is impacted by a weather event. If a weather event impacts more than one region within a one-hour period of time, REMSA should closely monitor these conditions and begin to utilize the checklist for a blanket weather exemption request if conditions become widespread.

In the event that REMSA is made aware that multiple isolated weather exemptions were utilized when a blanket was more appropriate, a retroactive request for a blanket weather exemption may be made. A request for a retrospective request must be submitted in writing within 5 business days following the end of the month in which the event occurred. All documentation supporting the request would need to be submitted with the request.

The EMS Oversight Program will review such individual weather exemptions within 3 business days and may recommend denying the exemption if there is not sufficient supporting documentation to justify the individual weather exemption.

3. Local, State or Federal Declared Emergency

A ~~blanket~~ exemption will be granted for late calls occurring during a local, state or federally declared emergency for which REMSA's resources have been utilized, formally requested through the appropriate emergency management process or as a function of managing the local EMS system. The exemption begins at the time the declared emergency is affirmed or the event causing the declaration occurs. Applicable documentation for this exemption must be provided to the EMS Oversight Program for review.

Calls to be exempted will be tracked and documented through the regular exemption process for tracking and data collection purposes. REMSA will be provided the option to continue to be assessed for fines associated with the late calls, to be accrued in the penalty fund, or discontinue fines, until the emergency event is declared over. REMSA may petition the District Health Officer to continue the exemptions for ongoing impacts for a period of time after the declaration of emergency has ended. The DHO may elect to continue the blanket exemption for a specified period of time to account for recovery phases of the response. If the exemption extension is denied, REMSA may petition the Washoe County District Board of Health for approval.

4. System Overload

REMSA shall use a third-party vendor to calculate system overload with the following equation:

$$\text{System Overload} = \text{Average Demand (20 weeks)} + 2X \text{ Standard Deviation,}$$

EMS Oversight Program staff shall receive real-time system information through a notification from the third party-vendor concerning REMSA surpassing the overload threshold. This will serve as notification only and is not actionable as an exemption request. Once overload is reached, REMSA shall monitor the system and determine if an exemption request is necessary.

A request for a system overload exemption should be made to the EMS Oversight Program, within three-5 business days of the initial real time system overload notification. The submitted documentation should include quantitative system information and will encompass the timeframe of beginning no sooner than one hour after the system overload trigger is recognized and ending no later than one hour after the system returns below the system overload threshold.

If there is not enough supporting documentation, then the ~~WCH~~WCHD may deny the exemption.

5. Construction

An exemption due to road construction may be considered if a written request is submitted to the EMS Oversight Program within three-5 business days of the incident~~call~~. The written exemption request must demonstrate the following:

- Management received updates from the Nevada Department of Transportation, the Regional Transportation Commission and/or other jurisdictional divisions and used that information to review the System Status Management Plan and made necessary adjustments.
- REMSA sent notifications to field staff of closures and delays.
- REMSA authorized ~~utilized~~ additional unit hours (staffing) for large road construction projects (i.e. major lane closures).
- REMSA validated that the crew experienced conditions beyond their control.

If the scene is in the middle of a construction zone or there are no feasible alternate routes to reach the scene, an exemption may be approved based on review of documentation provided by REMSA. Additionally, intermittent closures for construction operations during a known project are unpredictable. REMSA may submit for exemptions related to intermittent closures for known project.

REMSA is expected to be aware of and plan for road construction. Response time exemptions for construction will not be automatic. Requests for exemptions due to construction will be considered on a case by case basis by the EMS Oversight Program within 3 business days.

Aggregate multiple construction projects occurring throughout the franchise area are likely to cause overall traffic congestion and emergency response alternative routing and preposition/posting delays. REMSA may submit exemption requests for aggregate construction-related delays within 5 business days following the end of the month for consideration. The DHO may approve exemptions for response delays.

6. Status 99

Status 99 is a term used to describe the situation when an ambulance cannot offload its patient(s) at the hospital because staff and/or facilities are not available at the hospital to receive the patient(s). REMSA shall keep a daily Status 99 Report (the "Daily Report") detailing each Status 99 delay and list the specific times of those delays. A Status 99 delay will be included in the Daily Report when the ambulance has been at the hospital for twenty 20 minutes or more, as that is the average drop off time. Written documentation to support the Status 99 exemption request must be submitted within 5 business days to the EMS Oversight Program.

The process for the Status 99 exemptions is based on criteria agreed to by both parties in writing. The EMS Oversight Program will review and Status 99 exemption requests within 3 business days and verify the date and time of the call with the Daily Report to determine if an exemption is warranted.

No other reasons for late response, such as equipment failure, vehicular accident - regardless of cause - or any other causes within REMSA's reasonable control, shall justify an exemption from response time requirements.

Subject: Exemption Guidelines
Date: ~~May 26, 2016~~ July 1, 2021
Page 5 of 5

Sincerely,

Kevin Dick
District Health Officer

July 1, 2021

Dean Dow, President/CEO REMSA
450 Edison Way
Reno, NV 89502-4117

RE: Exemption Guidelines

Dear Mr. Dow,

The Washoe County Health District (WCHD) revised the list of allowable exemption requests for Priority 1 calls in the REMSA Franchise service area. The following exemptions will be effective July 1, 2021.

All exemptions shall be reviewed by the WCHD EMS Oversight Program. Additionally, for the purpose of all compliance calculations, approved exemptions shall not be included as part of the calculation process.

Exemptions to be reviewed by REMSA and the WCHD:

1. MCI/MAEA

An exemption will be granted during a declared multi-casualty incident (MCI) or Multi Agency Evacuation for which REMSA's resources have been requested. The exemption automatically begins at the time the MCI and/or evacuation is declared. However, the first responding unit must meet response requirements if the incident occurs within the Franchise service area.

2. Incorrect Address

In the event a calling party gives dispatch an incorrect address, and the stated address is verified by the Communications Specialist and confirmed by the caller to be the correct address, response time shall be measured from the time REMSA receives, or otherwise discovers, the correct address until the unit arrives on scene.

Exemptions to be reviewed and approved by the WCHD:

1. Miscellaneous

A request for a miscellaneous exemption must be submitted in writing within 5 business days from which the event occurred. Miscellaneous exemptions may include requests like units driving "off road" or AVL clock stop confirmation, etc.

Miscellaneous exemptions are granted on a per call basis following a review of the documentation provided by REMSA and/or investigation by the EMS Oversight Program. The request must include all applicable supporting reports and documentation in order for the EMS Oversight Program to approve a miscellaneous exemption.

2. Weather

Pursuant to Article 7.6 of the Amended and Restated Franchise, "an exemption to response time penalties may be granted by the District Health Officer (DHO), or designee, when adherence to response time requirements under extreme weather conditions would jeopardize public safety or the safety of ambulance personnel."

REMSA shall use the approved REMSA Communications Blanket Weather Exemption Request Form for blanket weather exemption requests to determine the necessity and validity of the request. Upon completion of the checklist, if the request is outside the hours of 7am-8pm, REMSA shall grant a preliminary blanket weather exemption status to ensure the safety of crews. If REMSA is granting a preliminary blanket weather exemption, an email correspondence is required to the EMS Oversight Program at EMSProgram@washoecounty.us to notify staff of the exemption status start time. The EMS Oversight Program staff will acknowledge the preliminary exemption notification within 3 business days.

Blanket weather exemptions will be granted for 12 hours, or less. At, or before, the eleventh hour of the request, REMSA must re-examine the weather conditions and outlook using information from NWS Reno and information from field providers and supervisors. Based on the findings, REMSA will either (1) request additional exemption hours, or (2) terminate the requested blanket exemption. REMSA must notify the WCHD immediately of their determination.

Blanket weather exemptions will be granted with the expectation that additional field staffing will be used to mitigate the impact of known severe weather condition on REMSA's response to priority 1 calls. The additional field staffing used must be included in the written request, if applicable. Written documentation to support the blanket weather exemption request must be submitted within 5 business days of the verbal request or email notification. If there is not enough supporting documentation, the WCHD may deny the exemption.

Individual weather exemptions for weather related hazardous driving conditions affecting individual ground ambulances are a matter to be negotiated between REMSA and the Contractor. The individual weather exemption is applicable when a single region of the ambulance franchise service area is impacted by a weather event. If a weather event impacts more than one region within a one-hour period of time, REMSA should closely monitor these conditions and begin to utilize the checklist for a blanket weather exemption request if conditions become widespread.

In the event that REMSA is made aware that multiple isolated weather exemptions were utilized when a blanket was more appropriate, a retroactive request for a blanket weather exemption may be made. A retroactive request must be submitted in writing within 5 business days following the end of the month in which the event occurred. All documentation supporting the request would need to be submitted with the request.

The EMS Oversight Program will review such individual weather exemptions within 3 business days and may recommend denying the exemption if there is not sufficient supporting documentation to justify the individual weather exemption.

3. Local, State or Federal Declared Emergency

A blanket exemption will be granted for late calls occurring during a local, state or federally declared emergency for which REMSA's resources have been utilized, formally requested through the appropriate emergency management process or as a function of managing the local EMS system. The exemption begins at the time the declared emergency is affirmed or the event causing the declaration occurs. Applicable documentation for this exemption must be provided to the EMS Oversight Program for review.

Calls to be exempted will be tracked and documented through the regular exemption process for tracking and data collection purposes. REMSA will be provided the option to continue to be assessed for fines associated with the late calls, to be accrued in the penalty fund, or discontinue fines, until the emergency event is declared over. REMSA may petition the District Health Officer to continue the exemptions for ongoing impacts for a period of time after the declaration of emergency has ended. The DHO may elect to continue the blanket exemption for a specified period of time to account for recovery phases of the response.

4. System Overload

REMSA shall use a third-party vendor to calculate system overload with the following equation:

$$\text{System Overload} = \text{Average Demand (20 weeks)} + 2X \text{ Standard Deviation,}$$

EMS Oversight Program staff shall receive real-time system information through a notification from the third party-vendor concerning REMSA surpassing the overload threshold. This will serve as notification only and is not actionable as an exemption request. Once overload is reached, REMSA shall monitor the system and determine if an exemption request is necessary.

A request for a system overload exemption should be made to the EMS Oversight Program, within 5 business days of the initial real time system overload notification. The submitted documentation should include quantitative system information and will encompass the timeframe of beginning no sooner than one hour after the system overload trigger is recognized and ending no later than one hour after the system returns below the system overload threshold.

If there is not enough supporting documentation, then the WCHD may deny the exemption.

5. Construction

An exemption due to road construction may be considered if a written request is submitted to the EMS Oversight Program within 5 business days of the incident. The written exemption request must demonstrate the following:

- Management received updates from the Nevada Department of Transportation, the Regional Transportation Commission and/or other jurisdictional divisions and used that information to review the System Status Management Plan and made necessary adjustments.

- REMSA sent notifications to field staff of closures and delays.
- REMSA authorized additional unit hours (staffing) for large road construction projects (i.e. major lane closures).
- REMSA validated that the crew experienced conditions beyond their control.

If the scene is in the middle of a construction zone or there are no feasible alternate routes to reach the scene, an exemption may be approved based on review of documentation provided by REMSA. Additionally, intermittent closures for construction operations during a known project are unpredictable. REMSA may submit for exemptions related to intermittent closures for known project.

REMSA is expected to be aware of and plan for road construction. Response time exemptions for construction will not be automatic. Requests for exemptions due to construction will be considered on a case by case basis by the EMS Oversight program within 3 business days.

Aggregate multiple construction projects occurring throughout the franchise area are likely to cause overall traffic congestion and emergency response alternative routing and preposition/posting delays. REMS may submit exemption requests for aggregate construction-related delays within 5 business days following the end of the month for consideration. The DHO may approve exemptions for response delays.

6. Status 99

Status 99 is a term used to describe the situation when an ambulance cannot offload its patient(s) at the hospital because staff and/or facilities are not available at the hospital to receive the patient(s). REMSA shall keep a daily Status 99 Report (the "Daily Report") detailing each Status 99 delay and list the specific times of those delays. A Status 99 delay will be included in the Daily Report when the ambulance has been at the hospital for twenty 20 minutes or more, as that is the average drop off time. Written documentation to support the Status 99 exemption request must be submitted within 5 business days to the EMS Oversight program.

The process for the Status 99 exemptions is based on criteria agreed to by both parties in writing. The EMS Oversight Program will review and Status 99 exemption requests within 3 business days and verify the date and time of the call with the Daily Report to determine if an exemption is warranted.

No other reasons for late response, such as equipment failure, vehicular accident - regardless of cause - or any other causes within REMSA's reasonable control, shall justify an exemption from response time requirements.

Sincerely,

Kevin Dick
District Health Officer



**STAFF REPORT
EMERGENCY MEDICAL SERVICES ADVISORY BOARD
MEETING DATE: August 5, 2021**

TO: EMS Advisory Board Members
FROM: Adam Heinz, MBA, NRP, AEMD, Executive Director of Integrated Healthcare
 775-353-0782, aheinz@remsa-cf.com
SUBJECT: REMSA Quarterly EMS Advisory Report

SUMMARY

A brief overview of operational, clinical and community highlights from the past quarter.

DATA PERFORMANCE REPORTS.

REMSA Ground EMS			
	April	May	June
REMSA Responses	6614	6997	7461
REMSA Transports	4046	4099	4258
ILS unit Responses	50	53	29
ILS unit Transports	29	31	20
REMSA Clinical Communications			
EMS calls triaged by our medically trained Emergency Medical Dispatchers	6219	6767	7188
Average time from call to EMS unit assigned	28 seconds	27 seconds	32 seconds
Low Acuity EMS calls transferred to Emergency Communications Nurse for secondary triage	117	120	97

Mutual Aid Received to REMSA			
	April	May	June
Reno Fire Department	16	18	30
Truckee Meadows Fire Rescue	229	234	308
Storey County Fire	6	3	18
North Lake Tahoe Fire	0	0	2

Mutual Aid Provided by REMSA			
	April	May	June
Storey County Fire	1	3	4
Plumas County	2	0	0
Carson City	0	3	0
Lassen County	1	7	3
Truckee Fire Protection District	6	1	1

Hospital Offload Delays			
	April	May	June
Offload Delays	137	233	349
Median Offload Delay	25m55s	22m36s	26m18s
Maximum Offload Delay	2h05m	2h34m	2h28m

COMMUNITY RELATIONS, EMPLOYEE ENGAGEMENT & CELEBRATIONS

Announcements

In mid-May, REMSA officially became REMSA Health! This name more accurately reflects all that are and all that we do. Our healthcare providers deliver out-of-hospital healthcare through a commitment to our four brand pillars: Community, Innovation, Care, and Urgency. The announcement received news coverage in local news outlets as well as in industry publications.

Employee Announcements

REMSA Health's Executive Director of Healthcare, Adam Heinz was named vice-chair of the Professional Standards Committee of the American Ambulance Association.

Stacie Selmi, Paramedic and EMS Operations Supervisor was honored as REMSA Health's Woman of Achievement during a community-wide event hosted by the Nevada Women's Fund.

Digital Announcements

REMSA Health launched a new social media channel @LifeAtREMSAHealth on Instagram. The profile highlights the benefits of being a REMSA Health employee, as well as the perks of living and working in Washoe County and the Reno-Lake Tahoe region.

REMSA in the News

REMSA Health pros have offered interviews to local news media about ways to stay safe in the extreme heat.

REMSA Health hosted a media event with a mock pediatric drowning scenario to draw awareness to the importance of identifying a Water Watcher whenever children are in or near bodies of water to prevent accidental drownings. All three local television stations covered the event.

CLINICAL STANDARDS & PRACTICES REPORT

	April	May	June
Clinical cases reviewed by Clinical Standards & Practices	498	390	186*
STEMI Alerts	41	23	10*
Stroke Alerts	32	24	28*
Cardiac Arrests	37	42	11*
Advanced Airways	38	33	8*
Drug Facilitated Airways	8	2	3*

*Pending final Clinical Review, incomplete data as of this report



**SPARKS FIRE DEPARTMENT
EMERGENCY MEDICAL SERVICES ADVISORY BOARD
STAFF REPORT
MEETING DATE: August 5th, 2021**

TO: EMS Advisory Board Members
FROM: Jim Reid, Fire Chief
 (775) 353-2254, Email: jreid@cityofsparks.us
SUBJECT: City of Sparks Fire Department EMSAB Report

SUMMARY

Brief update for the second quarter of 2021.

DATA PERFORMANCE REPORTS

Sparks Fire Department				
	April	May	June	Total
EMS Responses	950	995	1099	3,044
EMS Automatic Aid Given	12	7	8	27
EMS Mutual Aid Given	6	12	10	28
EMS Mutual Aid Canceled Responses	9	8	9	26

EMS Operations Report

1. The Sparks City Council approved a new EMS Division Chief position (July 12th, 2021).
2. The City of Sparks Fire Department is in the process of hiring seven Firefighters/Paramedics.



**TRUCKEE MEADOWS FIRE PROTECTION DISTRICT
STAFF REPORT**

Meeting Date: August 22, 2021

TO: Emergency Medical Services Advisory Board
FROM: Joe Kammann, Division Chief
Phone: (775) 240-5863 Email: jkamman@tmfpd.us
SUBJECT: Truckee Meadows Fire Protection District (TMFPD) Advisory Board update

SUMMARY

Brief update of Emergency Medical Services (EMS) Operation and incident Data for Quarter 2 of 2021

DATA PERFORMANCE REPORTS

TMFPD Incident Response Data:

Truckee Meadows Fire Protection District			
	April	May	June
District Wide EMS Responses	660	656	728
Mutual Aid Responses	147	175	190
Mutual Aid Transports	131	158	168

COVID -19 News

1. Our TMFR Vaccine Coordinator has scaled back vaccination events and primarily focusing now on COVID-19 testing and contact tracing as needed.

EMS Operations Report

1. 10 new probationary Firefighters/Paramedics (FFPM) currently on their “4th-rider” training assignments
2. All end-of-probation FF/PMs have successfully passed their final EMS Paramedic Assessment Center
3. 102 Total State Certified Paramedics on TMFPD Staff
4. 25 Qualified Wildland Fire-Line Medics are available to provide Advanced Life Support medical care to wildland firefighting personnel throughout the United States

5. Medic 30 and Medic 45 ambulances are still staffed and responding to mutual aid requests in Washoe Valley and Sun Valley. One new ambulance acquired and placed in service as a front-line apparatus.
6. New EMS Coordinator Rob Harper has been hired and working to expand TMFR's EMS training program
7. TMFR has begun training paramedic student interns with the TMCC Paramedic Program. WNC expansion is planned for the fall of 2021



**STAFF REPORT
EMERGENCY MEDICAL SERVICES ADVISORY BOARD**

TO: EMS Advisory Board Members
FROM: Reno Fire Department
SUBJECT: *Reno Fire Department EMS Advisory Board Update*

SUMMARY

Reno Fire Department EMS update.

DATA PERFORMANCE REPORTS

Apr-21 Incident Code/Description

32	BLS/EMS		11
311	Medical Assist		1
321	EMS Medical		2302
322	Veh Accident		53
323	Auto/Pedestrian		12
611	Cancelled/Enroute-Prior		492
622	No Prob. Found		20
Total			2891

Mutual Aid Requests			17*
	Transports		5
	Eng. Co, EMS		2
	Cancelled		10

**May-
 21 Incident Code/Description**

32	BLS/EMS		11
311	Medical Assist		1
321	EMS Medical		2536
322	Veh Accident		26
323	Auto/Pedestrian		12
324	MVA w/o injuries		139
342	Pos	Drown	1
352	MVA w/extricate		8
353	Trapped		11
360	Rescue ice/pond		6
363	Rescue ice/pond	River	6
553	EMS Assist		6
611	Cancelled/Enroute- Prior		532
622	No Prob. Found		12

Total 3307

Mutual Aid Requests			17
	Transports		7
	Eng. Co, EMS		5
	Cancelled		9

**Jun-
 21 Incident Code/Description**

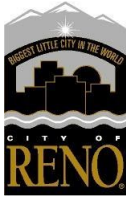
32	BLS/EMS		2
311	Medical Assist		1
321	EMS Medical		2686
322	Veh Accident		45
323	Auto/Pedestrian		11
324	MVA w/o injuries.		130
342	Pos	Drown	1
352	MVA w/extricate		18
353-55	Trapped		14
360	Rescue pond/pool- ice		10
363	Rescue ice/pond	River	9
553	EMS Assist		8
611	Cancelled/Enroute- Prior		562
622	No Prob. Found		23

Total 3520

Mutual Aid Requests			33
	Transports		11
	Eng. Co, EMS		5
	Cancelled		9

ADDITIONAL UPDATES

- **RFD has “beta-tested” new medical bags**, which were recently deployed on front line apparatus. The focus was to establish better efficiency with regards having the correct medical equipment and supplies on scene without creating clutter of unnecessary items. Additionally, the bags selected are very similar to REMSA’s compliment of medical bags, which will make it easier for crews from both agencies to locate needed items in each other’s bags.
- RFD has stood up a REM and Line Medics; Anticipating a very active wildland fire season, the EMS Division worked with Operations to ensure the four man Rapid Extrication Module (REM) team, as well as six Line-Medics (deployable single resource wildland paramedics) were fully stocked and equipped. These personnel have been actively deployed throughout the west.
- EMS Division level training is training that is conducted two to three times a year for all RFD personnel over a period of several weeks. The three-hour training slots always includes a practical scenario “hands-on” component. This training held in early may include a hands-on pediatric drowning /cardiac arrest scenario, a critical wildland firefighter extrication scenario and a classroom discussion of new protocols, documentation and emotional self-help.
- In cooperation with Reno’s Emergency Manager, (Chief Ancho) and the WCHD, the EMS Division coordinated several Covid-19 vaccination PODs (points of distribution) since the last EMSAB. To date RFD has delivered over ten thousand vaccinations. Current focus is on homeless, under-privileged and anticipating future escalation.
- RFD in cooperation with the Reno Police Department (RPD), conducted cooperative training with all members of each department in Rescue Task Force (RTF). RTF also known as TECC (Tactical Emergency Critical Care) is the response to an active shooter situation in which trained RFD personnel enter a scenario under the protective cover of RPD officers, providing immediate lifesaving care and extraction of victims from the scene. The drills are life like simulations using real persons (TMCC Students) as simulated victims and simulation rounds in the training. This training takes several weeks and a great deal coordination between the agencies in order to allow all personnel the opportunity to receive this critical training.



City of Reno Public Safety Dispatch



STAFF REPORT
EMERGENCY MEDICAL SERVICES ADVISORY BOARD
MEETING DATE: August 5, 2021

TO: EMS Advisory Board Members
FROM: Cody Shadle, Dispatch Manager
775-334-2212, shadlec@reno.gov
SUBJECT: City of Reno and REMSA CAD-to-CAD Implementation Project Update

SUMMARY

The purpose of this item is to provide an update on the City of Reno and REMSA CAD-to-CAD implementation project.

PREVIOUS ACTION

During the EMS Advisory Board on May 6, 2021 the board was provided an update stating that base functionality of the solution had been successfully demonstrated through testing. Additional work was required to adapt business practices and reduce liability concerns. End user training was tentatively scheduled for July 2021 with final implementation to follow.

UPDATE

During the testing phase of base functionality additional concerns were identified, specifically related to the City of Reno CAD (Tiburon) and REMSA CAD (Tritech) operating disparate mapping systems, as well as, the unauthorized transmission of confidential information. These issues had previously been reported but were originally assessed to be resolved through business practice adaptation. Testing over the previous 12 months proved that neither of these issues can simply be resolved through adapting dispatch practices and would require additional work by one or both of the partnering agencies.

On July 1, 2021, representatives from City of Reno and REMSA met to discuss the obstacles preventing implementation. Both agencies agreed that the issues needed to be address due to liability and procedural burden and developed new strategies that may allow the project to move towards implementation. The strategies include: 1) Evaluate the current mapping systems and GIS databases to determine if and how to combine or utilize a single mapping source and 2) Evaluate if the CAD-to-CAD solution can be adapted to transmit less information to avoid the unauthorized release of confidential information. Both City of Reno and REMSA representatives agreed to meet regularly to discuss any progress or amend the strategies.

Project implementation, including the Official Go-live, are postponed at this time. Once the stated issues are resolved then implementation may proceed, starting with agency training and finally setting an official Go-Live date.

From: Kathleen Nickel <nickelk@reno.gov>

Sent: Monday, August 02, 2021 8:45 AM

To: Hunter, Julie D. <JDHunter@washoecounty.us>

Cc: Spinola, Dawn <DSpinola@washoecounty.us>; Esp, Andrea <AEsp@washoecounty.us>; Doug Thornley <thornleyd@reno.gov>; David Cochran <cochrand@reno.gov>

Subject: Re: EMSAB

[**NOTICE:** This message originated outside of Washoe County -- **DO NOT CLICK** on links or open **attachments** unless you are sure the content is safe.]

Good morning Julie,

This is the most recent update I provided for the project. Cody Shadle from Reno Dispatch will provide a project update at the meeting. Please let me know if you have any questions.

Attached is the original Scope of Work, updated Scope of Work and all related documents.

From a technical standpoint, Central Square has provided the specified functionality within the scope of work. I understand issues have been identified through the build-out process which are being discussed by the team. The remaining tasks for this project are listed below.

Please let me know if you need additional information.

SOW - original dated

<https://drive.google.com/file/d/1EaeYthmBqDyWHxsPo0S7AfPINSge3u2g/view?usp=sharing>

SOW - updated 2-25-2019 (Refer to V6 Cad2Cad user Guide -- below)

<https://drive.google.com/file/d/0BzhMTKmdisLXRjg5OG9pTVI3V1N1OW1nNWJ3VFJEajQ5Sk1N/view?usp=sharing&resourcekey=0-V5Yx2O4T1q0JWWK4LHVIIJA>

V6 Cad2Cad user Guide referred to in updated SOW 2-25-2019

<https://drive.google.com/file/d/0BzhMTKmdisLXeVo5Q2JrbU1PTUV3dEtabEU0QzdiUEVxRkdr/view?usp=sharing&resourcekey=0-G7pwBgtp1FaOXPYIFCqnJw>

Cad2Cad Feature Summary (Advanced CAD to CAD Interface was purchased)

https://drive.google.com/file/d/1q6TMDaZv_7jGR1wQFq-kAMZwNKfEnBNk/view?usp=sharing

Cad2Cad User Guide V10.2 (provides specific details for all functionality included in the Advanced Interface)

<https://drive.google.com/file/d/16ZJCBq9kLboNsFOU-cIipLDMAmALcUZn/view?usp=sharing>

Remaining Tasks:

Schedule admin training from Central Square (Train the trainers)

Dispatch to schedule training of staff

Define official Go-Live date

Create a monthly Change Advisory Board meeting to include representation including but not limited to City of Reno Dispatch, REMSA and DoIT

Thank you.

