

PROGRAM DESCRIPTION

The Emergency Medical Services (EMS) program is responsible to ensure the highest quality medical care is delivered to patients on emergency scenes by District responders.

The Occupational Health Services (OHS) portion of this program was established to provide OSHA blood and airborne pathogen compliance, vaccination and testing services, and other health monitoring for District personnel, as well as other contract agencies. OHS has expanded its range of services to include pre-physical examinations, lead and cholesterol testing, and respiratory protection compliance for outside clients. Contract revenues largely offset expenditures for this program.

The Wellness portion provides uniformed personnel an annual physical and fitness assessment as outlined in the District's Joint Wellness Fitness Initiative. The Wellness Program coordinates the new hire process for all District employees and works with Human Resources to facilitate the return-to-work and fit-for-duty processes. The program provides a variety of wellness and fitness resources for all District personnel.

BUDGET SUMMARY

Revenues	2009-10 Actual	2010-11 Actual	2011-12 Budget	2012-13 Budget
Charges for Services	\$207,754	\$313,217	\$269,797	\$248,725
Miscellaneous Revenue	15,683	15,357		
Total Revenues	\$223,437	\$328,574	\$269,797	\$248,725

Expenditures	2009-10 Actual	2010-11 Actual	2011-12 Budget	2012-13 Budget
Personnel Services	\$834,304	\$1,273,079	\$1,292,108	\$1,446,682
Materials and Services	506,969	425,364	498,434	558,376
Total Expenditures	\$1,341,273	\$1,698,443	\$1,790,542	\$2,005,058

Note: Amounts have been restated to reflect the consolidation of EMS/Health/Wellness as of July 1, 2010.

PERSONNEL SUMMARY

Position	2009-10 Actual	2010-11 Budget	2011-12 Budget	2012-13 Budget
Division Chief	0.00	1.00	1.00	1.00
Battalion Chief	0.00	1.00	1.00	1.00
EMS Chief	1.00	0.00	0.00	0.00
EMS Officer Paramedic	1.00	1.00	1.00	1.00
Program Manager	1.00	1.00	1.00	1.00
Wellness Coordinator	1.00	1.00	1.00	1.00
Program Assistant	1.00	1.00	1.00	1.00
Administrative Assistant	0.00	1.00	1.00	1.00
Nurse	1.00	1.00	1.00	1.00
Behavioral Health Specialist	0.00	1.00	0.50	0.50
Total Full-Time Equivalents (FTE)	6.00	9.00	8.50	8.50

Note: The Nurse employee positions reflect the sum of part-time nurses supporting external agency contracts.

EMS / Health / Wellness, continued

2012-13 SIGNIFICANT CHANGES

Budgeted revenues for this cost center are \$248,725 and come primarily from contracts and fees from area agencies served and a Clackamas County intergovernmental service agreement that provides revenue sharing from the ambulance provider for medical calls.

Personnel Services includes Union Overtime for three mandatory ALS in-service trainings (\$105,291), critical skills instructor training, EMS QI, and peer fitness training and instruction.

Materials and Services expenses include District-wide EMS Supplies (5340) for the vaccines and shots provided by OHS personnel and EMS response supplies for personnel not assigned to fire stations. Account 5366 provides for defibrillator and other EMS equipment maintenance. Medical supervision is provided for in Account 5413 and chaplains are paid for through a temporary agency in account 5417 for \$21,000, in addition to temporary services for nursing staff of \$15,000. Account 5414 includes \$97,950 for contract physician services for physicals and health services. In addition, the District must recertify its Paramedics every two years and accordingly, the certification fees account 5502 was increased as this is a recertification year.

STATUS OF 2011-12 SERVICE MEASURES

- **Provide compliance for mandatory OSHA, CDC, NFPA, and public health mandates as well as industry best practices.** This will include hearing conservation, bloodborne pathogen standards, and applicable portions of the Respiratory Protection Standard.

Goal(s):	IV/B/6, VI/A,B/5, VII/A
Service Type:	Mandatory
Measured By:	Percentage of District personnel and contract agencies who received mandatory or recommended services from the Occupational Health and Wellness Program. Data will be gathered based on a calendar year to facilitate timely budget documentation.
Status or Outcome:	Provided to the appropriate uniformed personnel, hearing conservation basics and respiratory medical clearance. Maximized District resources by collaborating with Respiratory and Emergency Equipment Technician to provide compliance with the Respiratory Protection Standard program. The Communicable Disease update, which includes blood and airborne pathogen education, has been revised and will be available for IMCT compliance by February 2012.

- **Provide appropriate testing and pre-physical services to support DOT/CDL, NFPA, and IAFF/IAFC Initiative (expand applicable components to non-line employees).**

Goal(s):	IV/B/2,4,8, VII/E/1,3,4
Service Type:	Mandatory (DOT/CDL), Essential
Measured By:	Percentage of examinations completed. Data will be gathered based on a calendar year to facilitate timely budget documentation.
Status or Outcome:	Due to provider changes, the pre-physical and physical process was completed by the end of January. A temporary clinic was established at the North Operating Center and with collaborative efforts and onsite physicians, 315 uniformed personnel were seen. Those individuals not seen will be triaged to a temporary provider system. Staff anticipates 100% compliance and look forward to the opportunity to establish a District clinical support system.

EMS / Health / Wellness, continued

STATUS OF 2011-12 SERVICE MEASURES, CONTINUED

- **Provide ongoing health education and fitness screening** as outlined in the IAFF/IAFC Wellness/Fitness Initiative (expand applicable components to non-line employees).

Goal(s):	IV/B/2, VII
Service Type(s):	Essential
Measured By:	The annual Wellness survey outlines staff participation as well as customer satisfaction. Fitness assessment data outlines year-to-year changes among individuals as well as aggregate District data.
Status or Outcome:	The Functional Movement Screen (FMS) was performed on line personnel to identify biomechanical limitations and asymmetries that can lead to injury. Individuals who scored low were referred to a physician specializing in FMS for evaluation and treatment. Outcome metrics will be reported as part of phase 2 of the performance therapy project. Many non-line employees and volunteers also participated in the FMS screening. A PFT was assigned as a targeted effort to educate non-line employees. A follow-up survey found 85% reporting they experienced a positive change in their level of health/wellness knowledge and 76% stated they increased their participation in wellness-related activities.
<ul style="list-style-type: none">• Cardiac arrest survival	
Goal(s):	I
Service Type(s):	Essential
Measured By:	Sustained or improved percentage of survival of cardiac arrest patients.
Status or Outcome:	Despite an overall drop in 2011, current trending shows an improvement in cardiac arrest survival since late 2011 and early 2012. Due to the small number of cardiac arrests in the District, this number could stay at the current level.

- Cardiac campaign

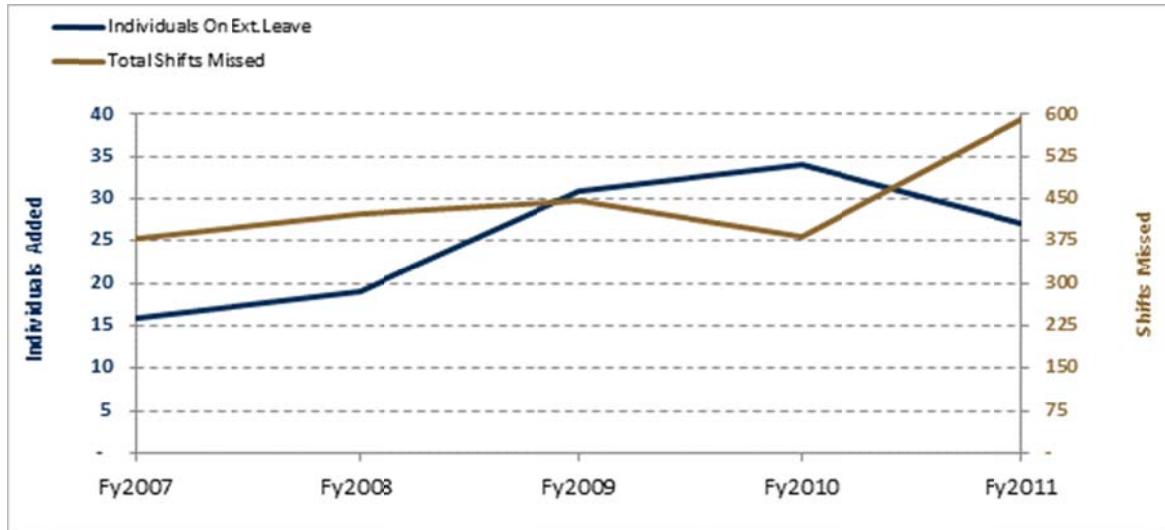
Goal(s):	I, VII
Service Type(s):	Discretionary
Measured By:	Increased awareness of heart attack symptoms by patients. Increased use of 9-1-1 for patients experiencing ST Elevated Myocardial Infarction (STEMI). Increased bystander hands-only cardiopulmonary resuscitation (CPR).
Status or Outcome:	A Washington County STEMI QI group was formed that includes responding EMS agencies and all three hospitals. They established new performance measures for the county that include: First medical contact to EKG < 10 minutes; EMS on-scene times < 15 minutes; FMC to balloon < 90 minutes; Correct diagnosis of STEMI - 80% of all cases and; transport of STEMI patients code 3 - 100% of all recognized cases. Further goals for 2012 include further decrease CVL cancellations, announce "at patient side" on the radio, teach all EMS providers to perform 12-lead EKG, assist those fire agencies that do not have 12-lead capability, and make STEMI activations on recorded radio or OLMC phone lines. WCCCA further implemented Hands-Only CPR for dispatchers. 100 students at Valley Catholic Middle School were taught AHA Hands-Only CPR and in turn, they taught over 600 friends and family, including TVF&R Board Members, Beaverton city staff, and other local businesses. Move to fiscal year 2012-13 and update to include new field performance measures and remove increased use of 9-1-1 by STEMI patients (but continue tracking).

EMS / Health / Wellness, continued

STATUS OF 2011-12 SERVICE MEASURES, CONTINUED

- Partner with HR, Training, Integrated Operations, the District physician, occupational health providers, and SAIF to provide a comprehensive return-to-work process.

Goal(s): IV/A,C/1,7, VII
Service Type(s): Essential
Measured By: Data collection from on- and off-duty illness, injury, exposure events, and Workers' Compensation claims. This will include the District case management process that manages employee leave due to injury and illness.
Status or Outcome: With the shift of allocated RN resources, the District has been able to effectively manage the majority of its Workers' Compensation claims, resulting in reduced time loss and claims cost. The District's return-to-work process has supported both on- and off-duty injuries and illness to assist with a timely outcome and return to work.



STATUS OF 2011-12 CHANGE STRATEGIES

- **Evaluate options to replace cardiac monitors** - Evaluate available monitors in the market to replace current fleet of aged machines. Replacement anticipated during fiscal year 2012-13 budget cycle.

Goal(s)/Call(s) for Action: I, VII/C
Budget Impact: Resource neutral
Duration: Year 1 of 2
Budget Description: Begin selection process to replace large capital item in subsequent budget year.
Partner(s): Information Technology, Finance
Status or Outcome: A taskforce from multiple agencies, both private and public, has been established to review the current offerings from the three major manufacturers of cardiac monitors. Evaluations should be beginning in late spring and into summer for a final recommendation.

EMS / Health / Wellness, continued

STATUS OF 2011-12 CHANGE STRATEGIES, CONTINUED

- Establishment of physical therapy assessment services for injured employees.

Goal(s)/Call(s) to Action: I/C, IV/E
Budget Impact: Increase requested to analyze validity of a pilot program.
Duration: Year 2 of 2
Budget Description: Funding for a pilot program.
Partner(s): Integrated Operations, Human Resources
Status or Outcome: Phase 1 of the Performance Therapy Project/evaluation of ADAPT physical therapy completed and metrics collected. Follow-up participant survey found 89% describing their condition upon discharge as improved or much improved; 80% rated their improvement as >50%. ADAPT summary evaluation scoring validated physical improvement of the 31 participants.

Phase 2 is underway to evaluate feasibility of the Functional Movement Screen (FMS). All line personnel, and many non-line and volunteer employees were evaluated per the FMS administered by the PFTs. Those who scored below industry standard are referred to a physician specializing in FMS for follow-up evaluation, treatment, and subsequent rescore to measure outcome. Results will be reported in fiscal year 2012-13 performance measures. A partnership with CCFD#1 is being explored to share expertise of a professional athletic trainer for one day per week for injury prevention and follow-up care.

- Synchronize existing partnerships to provide cost-effective Occupational Health and Wellness services to contract agencies.

Goal(s)/Call(s) for Action: IV/A and B, 1, 3, 4, 7, and 8; VII/A, C, and E, 1
Budget Impact: Resource neutral
Duration: Ongoing
Budget Description: Further expansion of services requires additional staffing; however, this is offset by contract revenues.
Partner(s): A dedicated District physician, occupational health providers, and contract agencies with a focus on expanding the District's relationship with CCFD #1.
Status or Outcome: The District is in the process of establishing a set occupational health clinic within its service area to provide occupational health services to personnel. Staff are exploring options and opportunities for on-site, pre-physical and physical services for contract agencies. This is in its initial stages of development. Staff are in the process of securing providers, clinical sites, equipment, a medical records system, and intergovernmental collaborations.

EMS / Health / Wellness, continued

STATUS OF 2011-12 CHANGE STRATEGIES, CONTINUED

- Update wellness initiative to reflect goals of prevention, early risk recognition, and inclusion of all members.

Goal(s)/Call(s) for Action: IV/A and B, 2 and 5
Budget Impact: Resource neutral
Duration: Year 1 of 2
Budget Description: Further develop the Wellness Program with emphasis toward early recognition/prevention of all members.
Partner(s): Division Managers, District physician, occupational health providers, Human Resources
Status or Outcome: The current Wellness Initiative is based on the first edition of the IAFF/IAFC Wellness/Fitness Initiative (WFI). Currently, the WFI is in its third edition and the District's initiative needs amended to reflect these changes. Current medical and educational methods are consistent with best practices. The District WFI document is scheduled for revision as a goal of the Wellness Program Manager. This year, the WFI program increased its efforts to reach non-line employees. A PFT on light duty was assigned to this project with the goal to increase knowledge and participation in wellness objectives. A follow-up survey of non-line personnel concluded that 85% experienced a positive change in their knowledge. Many have improved their health in measurable areas (blood pressure, cholesterol, weight loss, diet, etc.). This work group will be added to the WFI revision.

- Conduct a needs analysis for a medical records system to meet District occupational health needs.

Goal(s)/Call(s) for Action: IV/A and B, 4; VII/A, C, and E, 1, 3, and 4; VIII
Budget Impact: Resource neutral
Duration: Year 1 of 2 (needs analysis in year 1, with planned purchase in fiscal year 2012-13.)
Budget Description: Assess needs and select product for purchase the following fiscal year.
Partner(s): Information Technology, Finance, District physician, occupational health providers
Status or Outcome: Occupational Health and IT are in the process of evaluating different EMR systems and exploring their compatibilities for current and future requirements.

ADDITIONAL 2011-12 ACCOMPLISHMENTS

- A temporary clinic was established at the North Operating Center and with collaborative efforts of OHS personnel, onsite physicians, and a contracted medical assistant; 315 uniformed personnel physicals were performed in 18 days.
- Published three articles; two articles in *New England Journal of Medicine* and one in the *Journal of Trauma*.
- Implementation of countywide STEMI care criteria with county EMS and cath labs at all three receiving hospitals.
- Multiple Agency Training (MAT) implemented across both counties.
- Completed phase I of the Performance Therapy Project to help identify staff that are at an elevated risk of injury. Referred to specific treatment programs and collecting data to measure effectiveness.

EMS / Health / Wellness, continued

2012-13 SERVICE MEASURES

EMS Service Measures	2009-10 Actual	2010-11 Actual	2011-12 Estimated	2012-13 Projected
Patient Care Reports Written	15,294	15,207	15,447	15,500
Number of EMS Responses	24,671	25,486	25,862	25,977
Cardiac Arrest Survival % V-Fib/Overall	31/11%	16/8%	28/10%	28/10%

Occupational Health & Wellness Program Status	2009-10 Actual	2010-11 Actual	2011-12 Estimated	2012-13 Projected
Mandatory compliance with OSHA requirements including Hearing Conservation, Bloodborne Pathogen Standards, and applicable portions of the Respiratory Protection Standard.	100%	100%	100%	100%
Provide appropriate testing and pre-physicals services to support DOT/CDL, NFPA, and IAFF/IAFC Initiative.	99%	99%	98%	99%
Workers' Compensation (calendar year)				
Total number of cases	59	60	49	52
Total number of days away from work	402	484	183	250
Total number of days working with restrictions	457	328	188	200

- **Ensure compliance** for mandatory OSHA, CDC, NFPA, and public health mandates per industry best practices.

Goal(s): IV/B and 6; VI/A, B and 5; VII/A
Service Type: Mandatory
Measured By: Percentage of District personnel completing mandated testing/training in hearing conservation, blood borne pathogens and respiratory protection.

- **Provide appropriate testing and pre-physical services to support DOT/CDL, NFPA, and IAFF/IAFC Initiative** (expand applicable components to non-line employees).

Goal(s): IV/B, 2, and 8; VII/E, 1, 3, and 4
Service Type: Mandatory (DOT/CDL), Essential
Measured By: Percentage of examinations completed.

- **Provide ongoing health education and fitness screening** as outlined in the IAFF/IAFC Wellness/Fitness Initiative (expand applicable components to non-line employees).

Goal(s): IV/2
Service Type(s): Essential
Measured By: The annual Wellness survey outlines staff participation as well as customer satisfaction. Fitness assessment data outlines year-to-year changes among individuals as well as aggregate District data.

EMS / Health / Wellness, continued

2012-13 SERVICE MEASURES, CONTINUED

- Maintain cardiac arrest survival rate.

Goal(s): I
Service Type(s): Essential
Measured By: Sustained or improved percentage of survival of cardiac arrest patients (V-fib and overall). Due to small numbers per year, must look at long-term trending.

- Work with Cardiac Campaign partners to include new field performance measures for STEMI performance.

Goal(s): I/D, VII
Service Type(s): Discretionary
Measured By: Increased bystander training in hands-only cardiopulmonary resuscitation (CPR). New STEMI metrics per countywide QI effort.

- Partner with HR, Training, Integrated Operations, the District physician, occupational health providers, and SAIF to provide a comprehensive return-to-work process.

Goal(s): IV/1 and 7; VII
Service Type(s): Essential
Measured By: Data collection from on- and off-duty illness, injury, exposure events, and Worker's Compensation claims. This will include the District case management process that manages employee leave due to injury and illness.

2012-13 CHANGE STRATEGIES

- Select replacement cardiac monitors for purchase during fiscal year 2012-13.

Goal(s)/Call(s) for Action: I, VII/1
Budget Impact: Increase required
Duration: Year 2 of 2
Budget Description: Replace large capital item in 2012-2013 budget year.
Partner(s): Information Technology, Finance, external agencies

- Enhance internal service and synchronize existing partnerships to provide cost-effective Occupational Health and Wellness Services to District staff and contract agencies.

Goal(s)/Call(s) for Action: IV/8, VII
Budget Impact: Resource neutral
Duration: Year 1 of 3
Budget Description: Further expansion of services requires additional staffing; however, this is offset by contract revenues.
Partner(s): The District physician, occupational health providers, and contract agencies with a focus on expanding the District's relationship with strategically aligned outside public agencies.

2012-13 CHANGE STRATEGIES, CONTINUED

- Update wellness initiative to reflect goals of prevention, early risk recognition, and inclusion of all members.

Goal(s)/Call(s) for Action: IV/5
Budget Impact: Resource neutral
Duration: Year 2 of 2
Budget Description: Further develop Wellness Program with emphasis toward early recognition/prevention of all members.
Partner(s): Division Managers, District physician, occupational health providers, Human Resources

- Purchase an electronic medical records (EMR) system during fiscal year 2012-13.

Goal(s)/Call(s) for Action: IV/4, VIII
Budget Impact: Increase required
Duration: Year 1 of 1
Budget Description: Purchase selected EMR system during 2012-13 fiscal year.
Partner(s): Information Technology, Finance, District physician, occupational health providers

- **Implementation of PulsePoint.** PulsePoint ties together real time 9-1-1 CAD cardiac arrest data with public subscribers of a mobile smart phone application near a cardiac arrest to aid in CPR/AED response prior to 9-1-1 arrival.

Goal(s)/Call(s) for Action: I/D and 3; VII/A and 1
Budget Impact: Increase required
Duration: Year 1 of 1
Budget Description: Implement PulsePoint to aid in increasing cardiac arrest survival rate.
Partner(s): Information Technology, Finance, external agencies

- Develop metrics that improve ability to measure effectiveness of injury management and return-to-work program.

Goal(s)/Call(s) for Action: IV/A and 1
Budget Impact: Resource neutral
Duration: Year 1 of 1
Budget Description: Better metrics are required to improve management of on-the-job injuries, time loss, and return-to-work.
Partner(s): Information Technology, Finance, Human Resources, external agencies

- Rebuild Peer Critical Incident Stress Debriefing (CISM) program.

Goal(s)/Call(s) for Action: IV/6
Budget Impact: Increase required
Duration: Ongoing
Budget Description: Resources will be required
Partner(s): Integrated Operations.

EMS/Health/Wellness, continued

	Actual Prior FY 2010	Actual Prior FY 2011	Budget Prior FY 2012	Budget Proposed FY 2013	Budget Approved FY 2013	Budget Adopted FY 2013
10421 General Fund						
5001 Salaries & Wages Union	80,306	83,980	89,973	93,931	93,931	93,931
5002 Salaries & Wages Nonunion	348,381	569,691	532,959	615,894	615,894	615,894
5003 Vacation Taken Union	14,665	16,783	8,898	6,447	6,447	6,447
5004 Vacation Taken Nonunion	15,463	26,564	52,294	47,054	47,054	47,054
5005 Sick Leave Taken Union	1,443			1,842	1,842	1,842
5006 Sick Taken Nonunion	2,013	19,217		9,411	9,411	9,411
5007 Personal Leave Taken Union	559			921	921	921
5008 Personal Leave Taken Nonunion	1,388	3,269		4,033	4,033	4,033
5010 Comp Taken Nonunion	119	1,319				
5015 Vacation Sold	8,000	6,899	13,075	18,442	18,442	18,442
5016 Vacation Sold at Retirement			1,146			
5020 Deferred Comp Match Union	1,452	3,389	3,460	3,684	3,684	3,684
5021 Deferred Comp Match Nonunion	6,838	10,462	20,337	26,887	26,887	26,887
5120 Overtime Union	90,773	140,734	137,416	150,650	150,650	150,650
5121 Overtime Nonunion	2,629	1,548	3,000	2,400	2,400	2,400
5201 PERS Taxes	106,865	156,517	167,887	195,926	195,926	195,926
5203 FICA/MEDI	41,596	62,712	66,165	75,092	75,092	75,092
5206 Worker's Comp	7,697	14,368	22,135	19,644	19,644	19,644
5207 TriMet/Wilsonville Tax	3,698	5,353	5,984	6,889	6,889	6,889
5208 OR Worker's Benefit Fund Tax	188	272	323	323	323	323
5210 Medical Ins Union	15,514	16,271	18,203	16,548	16,548	16,548
5211 Medical Ins Nonunion	66,245	107,360	116,440	120,858	120,858	120,858
5220 Post Retire Ins Union	600	600	600	600	600	600
5221 Post Retire Ins Nonunion	3,600	5,175	5,400	5,400	5,400	5,400
5230 Dental Ins Nonunion	8,814	14,028	15,279	15,715	15,715	15,715
5240 Life/Disability Insurance	3,748	5,029	5,780	6,941	6,941	6,941
5270 Uniform Allowance	92	394	1,900	1,150	1,150	1,150
5280 Physical Exams/Shots	131					
5290 Employee Tuition Reimburse	1,488		4,600			
5295 Vehicle Allowance						
Total Personnel Services	834,304	1,273,079	1,292,108	1,446,682	1,446,682	1,446,682
5300 Office Supplies	1,117	893	1,350	1,000	1,000	1,000
5301 Special Department Supplies	5,202	2,895	9,000	6,000	6,000	9,500
5302 Training Supplies	4,593	2,935	6,800	6,800	6,800	6,800
5303 Physical Fitness	12,107	8,958	12,000	12,000	12,000	12,000
5320 EMS Supplies	227,150	60,254	83,800	79,038	79,038	87,038
5321 Fire Fighting Supplies	630	209	200			
5323 Food Service	658					
5325 Protective Clothing	165	2				
5330 Noncapital Furniture & Equip	1,133	11,893	30,000			
5350 Apparatus Fuel/Lubricants	3,926	5,848	10,000	9,450	9,450	7,500
5365 M&R Firefight Equip		435				
5366 M&R EMS Equip	22,957	24,825	47,981	43,286	43,286	42,536
5367 M&R Office Equip	730	2,153	2,400	2,400	2,400	2,400
5413 Consultant Fees	86,913	90,610	115,100	109,100	109,100	109,100

EMS/Health/Wellness, continued

	Actual Prior FY 2010	Actual Prior FY 2011	Budget Prior FY 2012	Budget Proposed FY 2013	Budget Approved FY 2013	Budget Adopted FY 2013
10421 General Fund						
5414 Other Professional Services	108,926	134,369	121,800	9,700	9,700	164,150
5415 Printing	1,586	242				
5417 Temporary Services	4,849	2,635	4,000	36,000	36,000	36,000
5419 Chaplains Reimbursement		15,822	20,000			
5430 Telephone	1,149					
5450 Rental of Equip	5					
5461 External Training	12,105	8,354	5,700	9,535	9,535	9,535
5462 Travel and Per Diem	6,466	13,762	19,000	24,450	24,450	24,450
5471 Citizen Awards		38				
5472 Employee Recog & Awards	210	571	900	1,300	1,300	1,300
5484 Postage UPS & Shipping	27	1	200	100	100	100
5500 Dues & Subscriptions	683	1,082	2,053	2,150	2,150	2,150
5502 Certifications & Licensing	2,780	34,371	4,350	40,967	40,967	40,967
5570 Misc Business Exp	903	1,867	1,300	1,350	1,350	1,350
5571 Planning Retreat Expense		340	500	400	400	400
Total Materials & Services	506,969	425,364	498,434	395,026	395,026	558,276
Total General Fund	1,341,274	1,698,443	1,790,542	1,841,708	1,841,708	2,004,958

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