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 offset a portion of 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	2010-11 Actual	2011-12 Actual	2012-13 Budget	2013-14 Budget
Charges for Services	\$313,217	\$305,998	\$248,725	\$233,111
Miscellaneous Revenue	15,357	18,111		
Total Revenues	\$328,574	\$324,109	\$248,725	\$233,111

Expenditures	2010-11 Actual	2011-12 Actual	2012-13 Budget	2013-14 Budget
Personnel Services	\$1,273,079	\$1,312,610	\$1,446,682	\$1,654,231
Materials and Services	425,364	408,446	558,376	546,980
Total Expenditures	\$1,698,443	\$1,721,056	\$2,005,058	\$2,201,211

PERSONNEL SUMMARY

Position	2010-11 Actual	2011-12 Actual	2012-13 Budget	2013-14 Budget
Division Chief	1.00	1.00	1.00	1.00
Battalion Chief	1.00	1.00	1.00	1.00
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
OHS Business Manager	0.00	0.00	0.00	1.00
Program Assistant	1.00	1.00	1.00	1.00
EMS Specialist	1.00	1.00	1.00	1.00
Nurse	1.00	1.00	1.00	1.00
Behavioral Health Specialist	1.00	0.50	0.50	1.00
Total Full-Time Equivalents (FTE)	9.00	8.50	8.50	10.00

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

2013-14 SIGNIFICANT CHANGES

Budgeted revenues for this cost center are \$233,111 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 (\$113,607), critical skills instructor training, EMS QI, and peer fitness training and instruction. In addition, the Behavioral Health Specialist position has been increased by 0.5 FTE to full-time, reflecting increased needs of employees, and one position has been added in the Occupational Health program to assist in management of the program, records, and to allow clinicians to more solely focus on the health needs of the workforce.

Materials and Services expenses include District-wide EMS Supplies (5320) for the vaccines and immunizations provided by OHS personnel and EMS response supplies for personnel not assigned to fire stations. Account 5366 provides for preventative maintenance and service for cardiac monitors 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 \$22,500, in addition to temporary services for nursing staff of \$15,000 and other temporary assistance for the EMS program. Account 5414 also includes \$74,350 for estimated lab services, \$12,000 in chest x-rays, \$8,000 for rehabilitative care for injured employees, among other services. In addition, the District must recertify its Paramedics every two years and accordingly, the certification fees account 5502 was decreased as this is not a recertification year.

STATUS OF 2012-13 SERVICE MEASURES

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

Goal(s)/Call(s) for Action: 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, bloodborne pathogens, and respiratory

protection.

Status or Outcome: Hearing protection policies and equipment were updated. Mandatory

compliance items are met/exceeded and best practices kept current.

• 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)/Call(s) for Action: IV/B, 2, and 8; VII/E, 1, 3, and 4

Service Type: Mandatory (DOT/CDL), Essential Measured By: Percentage of examinations completed.

Status or Outcome: 314 line pre-physicals were completed in record time. Testing continues

to support the IAFF/IAFC Wellness Initiative and operate per best

practices.

STATUS OF 2012-13 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)/Call(s) for Action: 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.

Status or Outcome: The annual Wellness survey was conducted and revealed increased

participation in aerobic activity and resistance training. Participation in flexibility training is down slightly and targeted for education in the coming year. The total number of employees who exercise at the

stations during all shifts has increased.

· Maintain cardiac arrest survival rate.

Goal(s)/Call(s) for Action:

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.

Status or Outcome: Awaiting ROC data from the District physician.

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

Goal(s)/Call(s) for Action: I/D; VII

Service Type(s): Discretionary

Measured By: Increased bystander training in Hands Only Cardiopulmonary

Resuscitation (CPR). New STEMI metrics per countywide OI effort.

Status or Outcome: ST-Segment Elevation Myocardial Infarction (STEMI) response guidelines

established for personnel at mandatory in-services. STEMI PAT is following the metrics and will report out performance in May 2013.

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

Goal(s)/Call(s) for Action: IV/1 and 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: Individual case management continues to return employees to work in a

timely manner. Training and relationships with SAIF have shortened time to accept claims. Battalion Chiefs now conduct return-to-work

evaluations without need of Training Officer attendance.

STATUS OF 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

Status or Outcome: A regional selection process was conducted by TVF&R's EMS Division

and a monitor was selected for purchase. Training and deployment will

occur during fiscal year 2012-13.

• 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.

Status or Outcome: An in-depth evaluation of Occupational Health/Wellness services was

conducted by the Planning Division. These findings will serve as a guide to develop a new operational plan for Occupational Health/Wellness

during the coming year.

• 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 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

Status or Outcome: After review of the wellness initiative, it was decided to utilize the

IAFF/IAFC Wellness Initiative as a reference document and maintain a current list of differences in TVF&R's local approach, in order to provide

best practice delivery of services. Change Strategy completed.

STATUS OF 2012-13 CHANGE STRATEGIES, CONTINUED

• 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

Status or Outcome: An EMR system (4Medica) was selected and annual subscription

purchased. Basic reports are being uploaded toward a goal of consolidating records and meeting Federal/State HITECH Act requirements. EMR needs will undergo reassessment as part of the overall operational plan being developed in 2013 for the Occupational

Health/Wellness program.

• 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

Status or Outcome: PulsePoint was successfully implemented in January 2013. Other

agencies are interested to expand PulsePoint into the region. The application finished fifth overall for top downloads in the 24-hour timeframe post-TVF&R announcement. The first PulsePoint activation occurred three days after implementation. Interest in CPR training has

risen dramatically as a result.

 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

Status or Outcome: Ratio of number of on-the-job-injury hours lost per hours worked was

added to current metrics. Changes in RMS reporting of injuries are being made to capture additional data. SAIF was consulted to locate a

standard of expected time loss/injury.

STATUS OF 2012-13 CHANGE STRATEGIES, CONTINUED

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

Goal(s)/Call(s) for Action: IV; 3

Budget Impact: Increase required

Duration: Year 1 of 2

Budget Description: Resources will be required Integrated Operations

Status or Outcome: Peer CISM training will result in placing six peers into the system. Six

additional peers are planned to be added in fiscal year 2013-14 to establish a core group of 12 trained peers to work with the Behavioral Health Specialist. A separate peer military support group is being established to assist District veterans. Discussions are occurring with other agencies to provide consistency in programs and back-up services during large events. Behavioral Health Specialist increased to 0.8 FTE.

ADDITIONAL 2012-13 ACCOMPLISHMENTS

• Top 10 Healthiest Businesses in Oregon per Portland Business Journal in 100-499 employee category.

- Implementation of PulsePoint application.
- Cardiac monitor selected and implemented in May 2013.
- EMS QI PATs on Cardiac Arrest, Airway, and STEMI care established and reporting out.
- CPR performance feedback being provided to responders post-cardiac arrest care.
- Began ROC ALPS study to determine the effectiveness of current cardiac medications.

2013-14 SERVICE MEASURES

EMS Service Measures	2010-11 Actual	2011-12 Actual	2012-13 Estimated	2013-14 Projected
Patient Care Reports Written	15,207	15,447	15,500	17,919
Number of EMS Responses	25,486	25,862	25,977	30,185
Cardiac Arrest Survival % V-Fib / Overall	16% / 8%	28% / 10%	41% / 18%	30% / 15%

Occupational Health & Wellness Program Status	2010-11 Actual	2011-12 Actual	2012-13 Estimated	2013-14 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%	98%	99%	99%
Workers' Compensation (calendar year)			2012 Actual	
Total number of cases	60	49	15	25
Total number of days away from work	484	183	168	225
Total number of days working with restrictions	328	188	93	150

2013-14 Service Measures, continued

• Ensure compliance for mandatory Centers for Disease Control (CDC), OSHA, NFPA, and public health mandates per industry best practices.

Goal(s)/Call(s) for Action: IV/A, B, and C; VI/A, B and 5

Service Type: Mandatory

Measured By: Percentage of District personnel completing mandated testing/training

in hearing conservation, bloodborne pathogens, and respiratory

protection.

• Provide appropriate testing and pre-physical services to support Department of Transportation/Commercial Driver's License (DOT/CDL) requirements, NFPA standards, and the IAFF/IAFC Wellness Initiative; expand applicable components to non-line employees.

Goal(s)/Call(s) for Action: IV/A, B, 2, and 3; VII/E and 1

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)/Call(s) for Action: 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.

• Maintain cardiac arrest survival rate.

Goal(s)/Call(s) for Action: I/D and 3

Service Type(s): Essential

Measured By: Sustained or improved percentage of survival of cardiac arrest patients

(V-fib and overall). Influenced by Hands-Only CPR training, Public Access to Defibrillators program, and PulsePoint implementation. Due to small

numbers per year, staff must look at long-term trending.

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

Goal(s)/Call(s) for Action: I/D and 3: VII/1

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)/Call(s) for Action: IV/1; VII/1

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, which manages employee leave due to injury and

illness.

2013-14 CHANGE STRATEGIES

• Complete an updated operational plan for Occupational Health and Wellness Services. Validate a manageable and strategically-defined program model for both internal and contracted services. Outline necessary changes in program structure, service delivery, resources, staffing, expertise, and infrastructure to support the model.

Goal(s)/Call(s) for Action: IV/5; VII

> **Budget Impact:** Increase required

> > Duration: 1 of 1

Budget Description: Budget increase proposed to engage a contractor to inform the

> operational planning process with expertise in best practices for administrative and business systems, technology and infrastructure, and specialized billing and records management functions for medical practices. Another budget increase was proposed for additional staff resources to manage key high-level administrative, project, and business management functions; position specifics to be informed by

the operational planning process.

Partner(s): Planning, Wellness Advisory Committee, Integrated Operations, Fire

Chief's Office, Human Resources, Finance, the contracted occupational

medical providers, the District's physician, contracted agencies.

• Rebuild the peer Critical Incident Stress Debriefing (CISM) program.

IV/3 Goal(s)/Call(s) for Action:

> Budget Impact: Increase required Year 1 of 2

Duration:

Budget Description: Budget request submitted for anticipated increase in Behavioral Health

Specialist's hours to support an expanded program.

Partner(s): **Integrated Operations**

• Develop 12-lead electrocardiogram (ECG) transmission process to area hospitals from the emergency scene to reduce door-to-balloon time in identified STEMI patients.

I/D Goal(s)/Call(s) for Action:

> **Budget Impact:** Resource neutral

> > Duration: Year 1 of 1, then ongoing

Budget Description: New cardiac monitors will be capable of transmitting ECGs from the

> incident scene to the hospital. Will need to work with Information Technology to develop transmission capability through apparatus communication systems. Cost associated will be staff time.

Partner(s): EMS, Integrated Operations, IT, hospital partners

• Refocus Critical Skills classes to emphasize single company response to medical calls and paramedic training.

Goal(s)/Call(s) for Action: I/D; VI/B, D and 5

Budget Impact: Increase required

Duration: Year 1 of 3

Budget Description: Explore new ways of training on critical skills for paramedics. This year's

process will emphasize single company drills instead of the dual house

training model. Future processes will involve technology over the

network to manage training, as well as alternate service delivery models.

Partner(s): Training, IT

2013-14 CHANGE STRATEGIES, CONTINUED

• Research innovative healthcare partnerships that benefit both District goals and Oregon's Triple Aim (Oregon's framework that describes an approach to optimizing health system performance).

Goal(s)/Call(s) for Action: 1/3; VI/4; VII/1

Budget Impact: Increase required

Duration: Year 1 of 2

Budget Description: Resources will be required to support involvement of a consultant with

expertise in community healthcare initiatives.

Partner(s): Planning, Training, IT, external healthcare organization(s), medical

directors



EMS/Health/Wellness, continued

			_1-15/11			<i></i>	
		Actual Prior FY 2011	Actual Prior FY 2012	Budget Prior FY 2013	Budget Proposed FY 2014	Budget Approved FY 2014	Budget Adopted FY 2014
10421	General Fund						
5001	Salaries & Wages Union	83,980	82,615	93,931	101,501	101,501	101,501
5002		569,691	592,198	615,894	719,655	719,655	719,655
	Vacation Taken Union	16,783	13,689	6,447	7,026	7,026	7,026
5004	Vacation Taken Nonunion	26,564	39,018	47,054	55,040	55,040	55,040
5005	Sick Leave Taken Union		,	1,842	2,008	2,008	2,008
5006	Sick Taken Nonunion	19,217	12,712	9,411	11,011	11,011	11,011
5007		,	,	921	1,004	1,004	1,004
5008	Personal Leave Taken Nonunion	3,269	1,922	4,033	4,722	4,722	4,722
5010	Comp Taken Nonunion	1,319	871	,	•	••-	,
5015	Vacation Sold	6,899	14,751	18,442	17,107	17,107	17,107
	Vacation Sold at Retirement	1,146	,	,	,	,	,
5020	Deferred Comp Match Union	3,389	3,461	3,684	4,015	4,015	4,015
5021	Deferred Comp Match Nonunion	10,462	19,876	26,887	31,453	31,453	35,039
5120	Overtime Union	140,734	118,375	150,650	156,853	156,853	156,853
5121	Overtime Nonunion	1,548	2,458	2,400	2,700	2,700	2,700
5201	PERS Taxes	156,517	169,106	195,926	240,585	240,585	240,585
5203	FICA/MEDI	62,712	61,364	75,092	85,766	85,766	85,766
5206	Worker's Comp	14,368	21,998	19,644	22,318	22,318	22,318
5207	TriMet/Wilsonville Tax	5,353	5,471	6,889	8,006	8,006	8,006
5208	OR Worker's Benefit Fund Tax	272	275	323	624	624	624
5210	Medical Ins Union	16,271	16,596	16,548	17,924	17,924	17,924
5211	Medical Ins Nonunion	107,360	110,016	120,858	120,764	120,764	120,764
5220	Post Retire Ins Union	600	600	600	600	600	600
5221	Post Retire Ins Nonunion	5,175	5,400	5,400	7,200	7,200	7,200
5230	Dental Ins Nonunion	14,028	13,884	15,715	15,103	15,103	15,103
5240	Life/Disability Insurance	5,029	4,727	6,941	9,310	9,310	9,310
5270	Uniform Allowance	394	1,227	1,150	1,390	1,390	1,390
5295	Vehicle/Cell Allowance		-,	1,100	6,960	6,960	6,960
0200	Total Personnel Services	1,273,079	1,312,610	1,446,682	1,650,645	1,650,645	1,654,231
5300	Office Supplies	893	730	1,000	1,000	1,000	1,000
5301	Special Department Supplies	2,895	8,508	9,500	8,500	8,500	8,500
5302	Training Supplies	2,935	4,044	6,800	6,800	6,800	6,800
5303	Physical Fitness	8,958	11,787	12,000	12,000	12,000	12,000
5320	EMS Supplies	60,254	64,959	87,038	60,768	60,768	60,768
5321	Fire Fighting Supplies	209	77	07,000	100	100	100
5325	Protective Clothing	2	77		480	480	480
5330	Noncapital Furniture & Equip	11,893	22,126		400	400	400
5340	Software Licenses/Upgrade/Host	11,000	۷۷, ۱۷				
5350	Apparatus Fuel/Lubricants	5,848	6,652	7,500	7,500	7,500	7,500
5364	M&R Fire Comm Equip	J,0 4 0	0,002	7,500	7,500	7,300 729	7,500
5365	M&R Firefight Equip	435			129	123	
5366	M&R EMS Equip	24,825	29,165	42,536	32,077	32,077	32,077
5367	M&R Office Equip	24,625	29,103	2,400	2,400	2,400	2,400
5413	Consultant Fees	90,610	90,870	109,100	2, 4 00 113,004	2, 4 00 113,004	2,400 113,004
	CONSULTED FES	30,010	30,070	109,100	113,004	113,004	113,004
5414	Other Professional Services	134,369	111,805	164,150	191,050	191,050	191,050

EMS/Health/Wellness, continued

		Actual Prior FY 2011	Actual Prior FY 2012	Budget Prior FY 2013	Budget Proposed FY 2014	Budget Approved FY 2014	Budget Adopted FY 2014
10421	General Fund						
5415	Printing	242	86		320	320	320
5417	Temporary Services	2,635	7,458	36,000	46,236	46,236	59,340
5419	Chaplains Reimbursement	15,822	16,981				
5445	Rent/Lease of Building				2,400	2,400	2,400
5461	External Training	8,354	5,517	9,535	9,260	9,260	9,260
5462	Travel and Per Diem	13,762	17,435	24,450	23,750	23,750	23,750
5471	Citizen Awards	38					
5472	Employee Recog & Awards	571	1,689	1,300	1,750	1,750	1,750
5484	Postage UPS & Shipping	1	25	200	200	200	200
5500	Dues & Subscriptions	1,082	1,931	2,150	2,436	2,436	2,436
5502	Certifications & Licensing	34,371	3,050	40,967	9,245	9,245	9,245
5570	Misc Business Exp	1,867	1,302	1,350	1,400	1,400	1,400
5571	Planning Retreat Expense	340	151	400	1,200	1,200	1,200
	Total Materials & Services	425,364	408,446	558,376	534,605	534,605	546,980
	Total General Fund	1,698,443	1,721,056	2,005,058	2,185,250	2,185,250	2,201,211

