

1 August 12, 1991
MPMTN2:TH:ph

Introduced by: AUDREY GRUGER

2 Proposed No.: 91-567

3
4 MOTION NO. **8395**

5 A MOTION adopting the King County emergency
6 medical services master plan.

7 WHEREAS, the King County emergency medical services system
8 is a nationally-recognized regional delivery system, and

9 WHEREAS, the King County council, in Motions 7454 and 8007,
10 requested the executive to prepare and submit a master plan for
11 emergency medical services, and

12 WHEREAS, Motion 7454 authorized phase I of the emergency
13 medical services master plan, the purpose of which was to
14 describe the factors determining emergency medical services
15 workload levels and response times, project financial resources,
16 and project workload to the year 2000, and identify no-cost and
17 low-cost methods of improving the emergency medical service
18 system's performance, and

19 WHEREAS, Motion 8007 authorized phase II of the emergency
20 medical services master plan, the purpose of which was to
21 identify and evaluate alternative methods of paramedic service
22 delivery on the basis of cost and performance standards, and
23 recommend an alternative which will best meet the County's needs,
24 and

25 WHEREAS, the department of public health, emergency medical
26 services division, has conducted a master plan review process,
27 with the assistance of a consultant, and overseen by an emergency
28 medical services steering committee appointed by the executive
29 and which included broad representation from emergency
30 physicians, fire chiefs and fire commissioners familiar with the
31 delivery of basic life support services, paramedic program
32 administrators, paramedic medical directors, and representatives
33 from private ambulance companies and hospitals, and

1 WHEREAS, the department of public health, emergency medical
2 services division, has submitted to the council the report on
3 phase I of the master plan entitled "Emergency Medical Services
4 Paramedic Master Plan: Analysis of Current and Projected Trends,"
5 and the report on phase II entitled "Emergency Medical Services
6 Paramedic Master Plan: Final Report," and

7 WHEREAS, the emergency medical services master plan provides
8 a framework within which the County can effectively monitor,
9 coordinate, and manage the delivery of emergency medical services
10 in the County in the upcoming emergency medical services levy
11 period from 1992 to 1997, and

12 WHEREAS, the emergency medical services master plan is
13 specifically designed to manage a projected 57% growth in demand
14 for service through the most cost-effective service delivery
15 system while maintaining the high level of emergency medical
16 service currently provided to the County's residents;

17 NOW, THEREFORE, BE IT MOVED by the Council of King County:

18 To adopt the King County emergency medical services master
19 plan as described in attachment A (entitled "Phase 1: Analysis of
20 Current and Projected Trends") and attachment B (entitled
21 "Emergency Medical Services Paramedic Mater Plan: Final Report").
22 The emergency medical services master plan defines King County's
23 objectives and priorities in providing regional emergency medical
24 services, including the following recommendations and goals:

25 A. In order to reduce unnecessary ALS calls and to control
26 the growth in demand for service, it is recommended that the
27 following actions be undertaken by the appropriate agencies.

28 1. The King County emergency medical services division
29 should establish a public education program to increase consumer
30 knowledge about how and when to access emergency medical
31 services, how to use those services appropriately, how to prevent
32 medical injuries, and how services are delivered through the
33 basic life support and advanced life support layered response
34 system.

1 2. The King County emergency medical services
2 division should promote greater regionalization of dispatch
3 services.

4 3. The King County emergency medical services division
5 should strengthen its efforts to train dispatchers and provide
6 continuing dispatcher education.

7 4. The King County emergency medical services division
8 should enhance its role in paramedic and emergency medical
9 technician continuing education by developing improved curricula,
10 providing instructor training, and/or providing the training
11 itself.

12 5. King County should promote greater uniformity and
13 standardization in medical control by establishing a formal
14 quality improvement program, administered by the emergency
15 medical services division, with direct linkage to quality
16 improvement personnel employed by each sponsor and responsible
17 for each advanced life support unit.

18 B. In order to meet the growing demand for service and to
19 maintain the quality of care delivered, it is recommended that
20 the King County emergency medical services division undertake the
21 following actions:

22 1. The King County emergency medical services division
23 should maintain the current staffing pattern of two fully trained
24 paramedics per unit in the urban and suburban areas.

25 2. It should add one ALS unit in south King County now to
26 meet current demand for service in that area.

27 3. It should prepare to add one advanced life support
28 unit in east King County by 1995.

29 4. It should prepare to add one unit by 1997, using the
30 emergency medical services information management system computer
31 simulation software to assist in identifying the most appropriate
32 site configuration at that time.

33

1 5. It should consider alternative staffing plans as
 2 interim measures to handle growth in rural areas and during peak
 3 call periods until such time as the population grows to support
 4 fully staffed advanced life support units.

5 6. It should monitor and refine performance standards,
 6 balancing average response times and utilization with geographic
 7 dispersion, to recommend to the King County executive and King
 8 County council when a full advanced life support unit is
 9 warranted.

10 C. In order to provide service more cost effectively, it is
 11 recommended that the following actions be undertaken by the
 12 appropriate agencies:

13 1. King County should strive to limit the number of
 14 advanced life support sponsors by centralizing or regionalizing
 15 sponsoring agencies.

16 2. King County should take advantage of administrative
 17 cost efficiencies and economies of scale by encouraging each
 18 sponsor to manage up to six advanced life support units.

19 3. King County should strive to establish contractual
 20 relationships for delivering advanced life support services.
 21 Where this proves not be not feasible, service delivery by the
 22 King County emergency medical services division is warranted.

23 4. The King County emergency medical services
 24 division should continue and enhance its current role as a
 25 county-wide administering agency to assure effective management
 26 of emergency medical services.

27 PASSED this 9th day of September, 19 91.

28 KING COUNTY COUNCIL
 29 KING COUNTY, WASHINGTON

30 Lois North
 31 Chair

32 ATTEST:

33 Gerald A. Peterson
 34 Clerk of the Council

MOTION 8395

**A. EMERGENCY MEDICAL SERVICES
PARAMEDIC MASTER PLAN
PHASE 1 ANALYSIS OF CURRENT AND
PROJECTED TRENDS
APRIL 11, 1990
EXECUTIVE SUMMARY
FINAL DRAFT REPORT APRIL 10, 1990**

**B. EMERGENCY MEDICAL SERVICES
PARAMEDIC MASTER PLAN
EXECUTIVE SUMMARY MAY, 1991
FINAL REPORT MAY, 1991**