

2015 Annual Report





This report is gratefully dedicated to all Public Safety and Allied Health professionals – paid and unpaid – who keep us safe every day. Thank you.

The Bonner County EMS 2015 Annual Report was produced by the BCEMS Marketing Team: Bob Abbott - Chairman, Sarah Schalk, Ross Crawford, and Bob Bussey.

Graphic Design by Jessica Herbig.



*Front Cover – Bonner County EMS paramedic Ben Dowdy
leads the team in a resuscitation drill.*

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A Message From The Chief



Robert Bussey is the Chief Officer of Bonner County Emergency Medical Services. He has served as Operations Captain for the Farmington, New Mexico Police Department and Bonner County Undersheriff. He has been with the agency since July 2014.

Each and every day Bonner County Emergency Medical Services EMTs and Paramedics serve the people of Bonner County with professionalism and pride. They deliver exceptional pre-hospital medical care 24 hours a day, 365 days of the year. The team at BCEMS strives to improve service delivery and elevate our standards of excellence.

I can proudly say that our greatest asset is our personnel. The accomplishments of 2015 are a direct result of the hard work and dedication of the entire BCEMS work force. While the public sees BCEMS providers in the field delivering excellent care, what you don't see is the countless hours of study, hands-on training and behind-the-scenes work to ensure a smooth and efficient operation.

We introduced a Patient Satisfaction Survey in May of 2015. This survey asks our customers to provide input on the services they receive from us. This survey assesses how they were treated from the time their call was answered at the dispatch center to the time they are delivered to their destination. We have seen a very high rate of returned surveys. Overwhelmingly, the response is

more than positive. This reinforces my belief that the personnel here at BCEMS are delivering outstanding pre-hospital care. For those few surveys that rated Fair or Poor, I made the effort to speak with those individuals personally.

In this year-end report you will see system improvements that have been put in place this year as well statistical reports.

For ten years, BCEMS has been on the front lines safeguarding your tomorrow if a medical need arises. The delivery of pre-hospital emergency medical care is what we specialize in and the team at BCEMS will continue to provide excellence thru service.

Respectfully,

Chief

Bonner County Emergency Medical Services

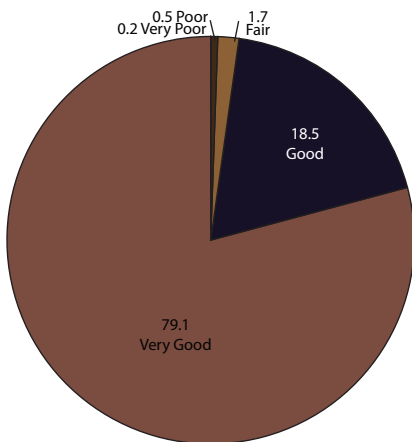
Patient Satisfaction Survey

Beginning in May 2015, we mailed a Patient Satisfaction Survey to every person who was transported to a hospital by a Bonner County EMS ambulance and crew. The survey consisted of several categories, with several questions in each category. In the interest of brevity, we tallied the results of three of those categories – Ambulance, BCEMS Providers and Overall Satisfaction.

Ambulance

Patients were asked to rate the BCEMS ambulance that responded to their emergency as Very Poor, Poor, Fair, Good or Very Good in the following categories: Timeliness, Cleanliness and Comfort.

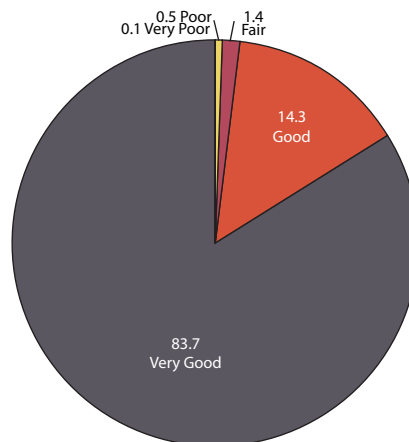
Very Poor – 0.2 percent
Poor – 0.5 percent
Fair – 1.7 percent
Good 18.5 percent
Very Good – 79.1 percent



BCEMS Providers

Patients were asked to rate the BCEMS EMTs, Advanced EMTs and Paramedics who responded and provided care as Very Poor, Poor, Fair, Good or Very Good in the following categories: Care, Listened, Skill, Informed, Included, Relieved Pain, Privacy, Care as a Person and Professionalism.

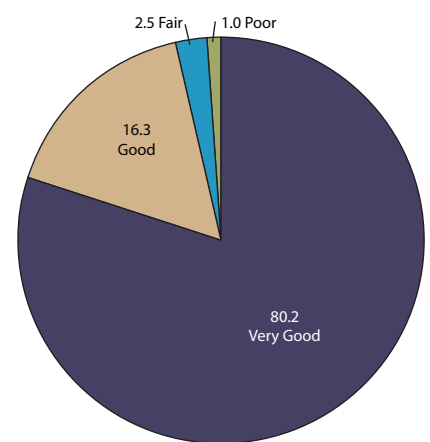
Very Poor – 0.1 percent
Poor – 0.5 percent
Fair – 1.4 percent
Good – 14.3 percent
Very Good – 83.7 percent



Overall Satisfaction

Patients were asked to rate their Overall Satisfaction with BCEMS as very Poor, Poor, Fair, Good or Very Good in the following categories: Care, Worth it and Overall Rating.

Very Poor – 0 percent
Poor – 1 percent
Fair – 2.5 percent
Good – 16.3 percent
Very Good – 80.2 percent



Mission Statement

FROM LEFT
Chief Robert Bussey,
Administrative Assistant
Sarah Schalk, & Deputy
Chief Ross Crawford.



VISION

Improve the quality of health in Bonner County.

MISSION

To assure a rapid response with Basic and Advanced levels of care as appropriate to each emergency, and to serve as a formal community resource for prevention, evaluation, care, triage, referral and advice.

OBJECTIVE

Operational Excellence.



History



PICTURED
The first BCEMS Bike
Team, June 2006.

***TOTAL EMS
RESPONSES IN 2015:
4,359.***

***POPULATION OF
BONNER COUNTY in
2010: 40,877.***

24 Hour Response.

Bonner County, located in the northern Idaho Panhandle, is 1,920 square miles with a 2010 population of 40,877. The county is bordered by Kootenai County to the south, Boundary County to the north, Sanders County, Montana to the east and Pend Oreille County, Washington to the west.

Bonner County EMS is a municipal, county-based rural/wilderness agency serving the residents and visitors of Bonner County with 9-1-1 response, critical care and inter-facility transports. Total EMS responses in the county in 2015 was 4,359.

Bonner County EMS was created by Ordinance 456 in 2005 after the private, for-profit company contracted to provide EMS service to Bonner County ceased operations – literally in the dead of night – in November 2004. The Board of County Commissioners designated the delivery of EMS response as a county function to ensure that these vital services would exist in perpetuity.

Bonner County EMS started responding with a temporary staff on August 13, 2005. Full-time operations in Sandpoint and Priest River began on August 30th of that year. BCEMS currently responds 24 hours a day, seven days a week out of one station in Sandpoint with two ambulances staffed at the Intermediate Life Support (ILS) and one Advanced Life Support (ALS) intercept vehicle, one station in Sagle with one ambulance staffed at the ALS level and one station in Priest River with one ambulance staffed at the ALS level. BCEMS also provides emergent, non-emergent and Critical Care transports from Bonner General Hospital to specialized care facilities in Kootenai County and Spokane.

Bonner County EMS contracts several other agencies in the county to provide EMS response and transport. Current contract partner agencies are Clark Fork Valley Ambulance, Schweitzer Fire District, Priest Lake EMTs and Newport Ambulance.

Operations



Ross Crawford is the Deputy Chief, Operations for Bonner County EMS. He has past command experience as a fire captain for the Matanuska-Susitna Borough in Alaska and as a Shift Lieutenant for BCEMS. He is an Instructor for the Incident Command System and the National Incident Management System. He has been with the agency since 2006.

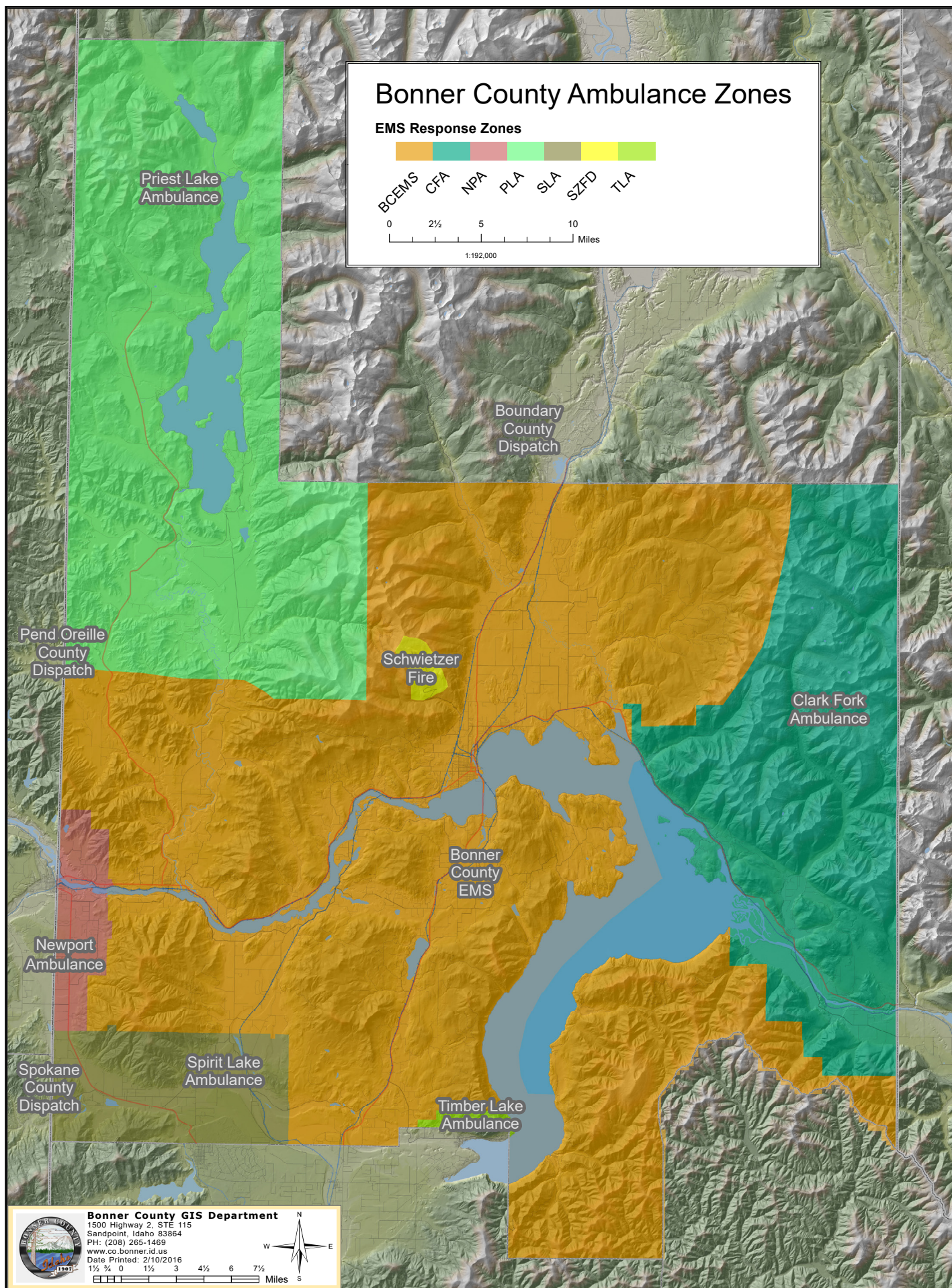
Although most of Bonner County's more than 1,900 square miles is rugged wilderness terrain, the majority of the county's 40,000 + population lives and works in a relatively small geographic area. The region of the county covered by the City of Sandpoint, Northside Fire District and Sagle Fire District spans more than 295 square miles and represents nearly 70 percent of all emergency responses.

Coordinating and managing scarce emergency resources over such a large and diverse area can prove to be very challenging. Bonner County EMS is a hybrid system made up of full-time response from BCEMS providers responding from stations in Sandpoint, Sagle and Priest River and partner agencies spread out through the rest of the county. Agency coordination and current knowledge of system resources is essential to maintain a coordinated response and appropriate resource allocation within an effective EMS system.

By far the largest operational challenge in 2015 was the upgrade of EMS response in the Sagle area to Advanced Life Support. On July

1, Bonner County EMS assumed transport responsibilities in Sagle. A BCEMS ambulance, paramedic and Advanced EMT are now stationed south of the Long Bridge for first-out ALS response. Accomplishing this major initiative involved hiring additional full-time personnel, acquiring, furnishing and equipping quarters for the crew and ambulance, updating the Medical Supervision Plan, revising dispatch protocols and rewriting the agency response plan.

A system for collecting and analyzing response data is in place (and is currently in the process of being upgraded) for timely analysis of the quantity, quality and overall utilization of resources. Bonner County EMS provides staffing to cover our primary response area, to assist partner agencies with experienced personnel in times of staffing shortages, to respond as mutual aid to neighboring counties when requested, to both respond to and manage large-scale medical incidents, to respond to incidents in austere environments and to staff the numerous community events that take place in Bonner County every year.



Operations

Bonner County EMS receives coordinated and ongoing assistance at the local, regional and state levels, obtaining both technical expertise and financial support.

BCEMS STAFFING REPORT

Bonner County EMS Station 1 Headquarters – 521 N. Third Ave., Sandpoint

- Primary EMS response to Sandpoint, Dover, Ponderay, Kootenai, Elmira and all areas with the 83864 Zip Code.
- Advanced Life Support (ALS), Hope, Sam Owen and Clark Fork.
- One Chief Officer, one Deputy Chief, Operations, one Administrative Assistant
- One Field Supervisor Captain on duty 24/7
- Two Intermediate Life Support (ILS) ambulances staffed with two Advanced EMTs 24/7
- One ALS chase vehicle staffed with a paramedic 24/7
- Two back-up ambulances

Bonner County EMS Station 2 –83 Airfield Way, Priest River

- Primary response area of Priest River and Laclede with ALS response to Priest Lake
- One ALS ambulance staffed with one Advanced EMT and one paramedic 24/7

Bonner County EMS Station 3- 11 Harbison Lane, Sagle

- Primary response area of Sagle, Cocolalla, Careywood and into Athol, Hwy 95 mile post 472 south to Hwy 95 mile post 452.
- One ALS ambulance staffed with one Advanced EMT and one paramedic 24/7

PARTNER AGENCIES - TRANSPORT



Clark Fork Valley Ambulance

- Primary response area east from Trestle Creek to Hope, East Hope, Sam Owen and Clark Fork to the Montana border
- Entirely volunteer – one unmanned station in Clark Fork, one ambulance housed in Sam Owen Fire District station
- Two ambulances staffed to the ILS level with Advanced EMTs and EMTs
- Contracted at \$27,500 per year plus billings – estimated 2014 revenue of \$60,000

Newport Ambulance

- Primary response area of Oldtown and Blanchard, coverage as needed to Priest River, Priest Lake and Laclede
- One station in Oldtown staffed 24/7
- One ambulance staffed to the ALS level with EMTs or Advanced EMTs and a paramedic

- Contracted at \$25,000 per year plus billings – estimated 2014 revenue of \$62,510

Priest Lake EMTs

- Primary response area of Priest Lake south to mile marker 18 on Highway 57
- Entirely volunteer – one unmanned station on Highway 57 in Priest Lake, one unmanned station in Coolin
- Two ambulances staffed at the Basic Life Support (BLS) level
- Contracted at \$33,500 per year plus billings – estimated 2014 revenue of \$35,000

Schweitzer Fire District

- Primary response area of Schweitzer Mountain
- One full-time chief officer, resident firefighters and volunteers
- One manned station staffed 24/7 during winter months
- One primary ambulance and one

Operations



backup, staffed to the BLS level

- Contracted at \$27,500 per year plus billings – estimated 2014 revenue of \$35,000

PARTNER AGENCIES - NON-TRANSPORT

Six area fire departments provide response in support of EMS calls in Bonner County. All of these partner agencies are provided with medical equipment and supplies and are reimbursed for mileage expenses. All responding agencies operate under BCEMS System Medical Direction and are subject to the BCEMS System Medical Supervision Plan and Clinical Practice Guidelines.

BLS = Basic Life Support

ILS = Intermediate Life Support

ALS = Advanced Life Support

The Selkirk Fire Department responds to all EMS calls – ALS, ILS and BLS

within Sandpoint City limits, as well as Sagle Fire District boundaries.

Five additional county fire departments – Northside Fire, Westside Fire, West Pend Oreille Fire, Sam Owen Fire and Clark Fork Fire – all respond in support of ALS calls only within their respective fire districts.

FLEET STATUS

TRANSPORT

- 3580 – 2011 Ford/Braun F350 4x4 Ambulance Station 1
- 3580 – 2003 Ford/Lifeline F350 4x4 Ambulance Station 1
- 3582 – 2012 Ford/Braun F350 4x4 Ambulance Station 2
- 3583 – 2013 Ford/Braun F350 4x4 Ambulance Station 3
- 3584 – 1999 Ford/ Wheeled Coach 2wd Ambulance Station 1
- 3585 – 2004 Ford/Medtech F350 4x4 Ambulance Station 1
- 3586 – 2003 Ford E350 4x4 Ambulance Station 1

ADMIN/OPERATIONS/SUPPORT VEHICLES

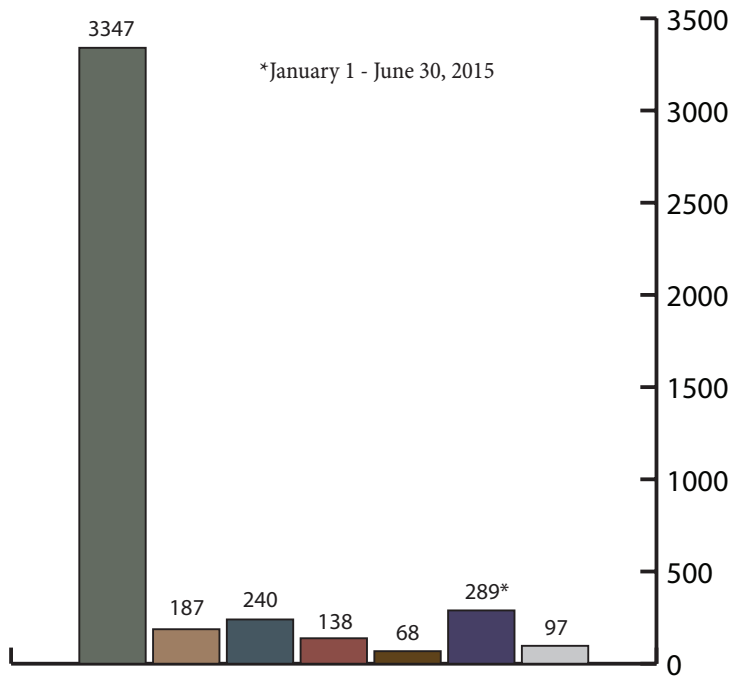
- 3501 – 2015 Ford Explorer AWD Admin
- 3502 – 2014 Ford Explorer AWD Operations
- 3590 – 2014 Ford Explorer AWD Operations
- 3591 – 2007 Ford F150 Truck 4X4 Training/Support
- 3592 – 2014 Ford Explorer AWD Operations/Training
- 3593 – 2014 Ford Explorer AWD Operations

ATYPICAL RESPONSE ASSETS

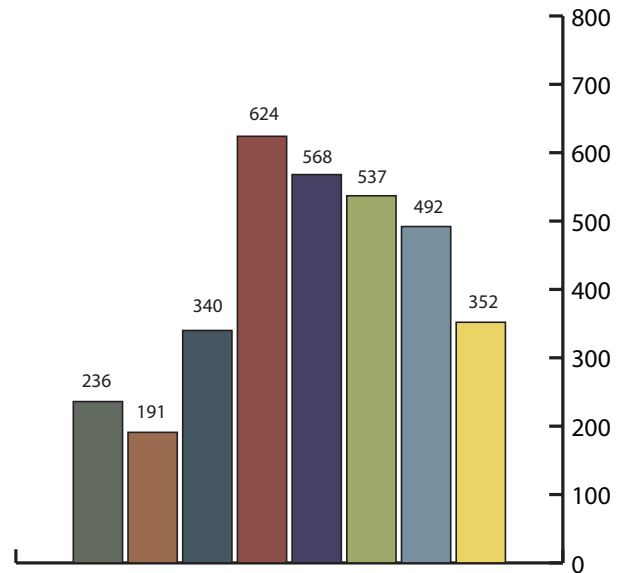
- 3561 – 2012 Ford F350 Dual-wheel Pickup Truck
- 3562 – 2012 Yamaha Rhino Side x side UTV
- 3563 – 2004 Yamaha Grizzly ATV
- 3564 – 2009 Polaris RMK snowmobile
- 3565 – 2002 Ski-Doo Scandic snowmobile
- 2015 22' 4-carry Special Operations trailer
- 2012 20' 4-carry Wilderness Medical Response trailer

SPECIAL SERVICE

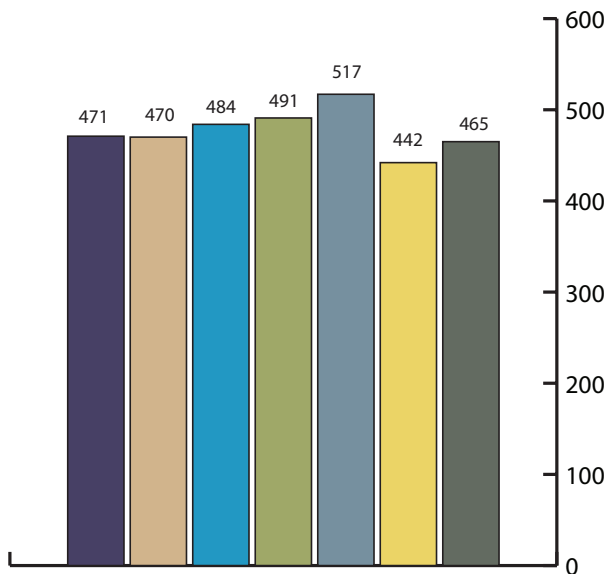
- 3598 Bicycle / 3599 Bicycle
- Chevy Suburban – Shared with Bonner County Emergency Management



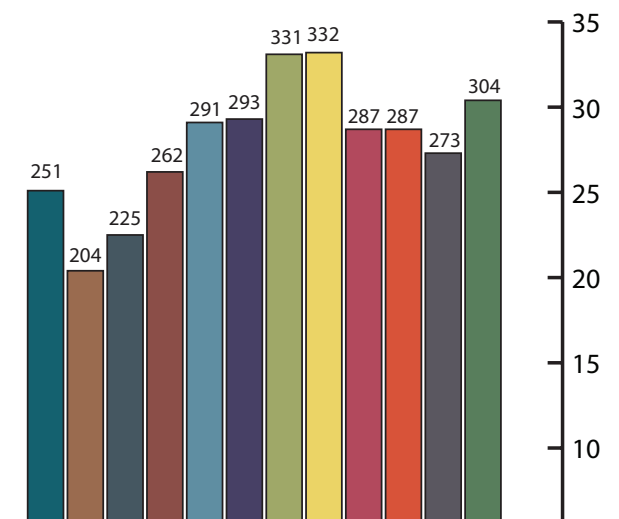
**BONNER COUNTY EMS RESPONSE 2015
TOTAL CALLS BY AGENCY**



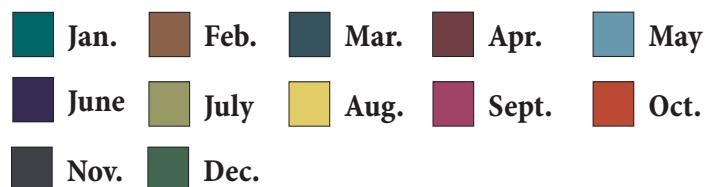
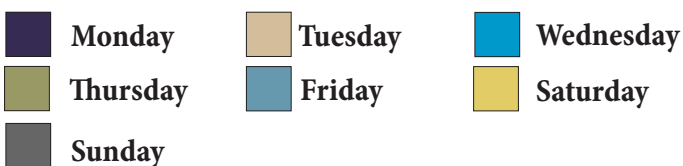
**BONNER COUNTY EMS RESPONSE 2015
TOTAL CALLS BY TIME OF DAY**



**BONNER COUNTY EMS RESPONSE 2015
TOTAL CALLS BY DAY OF WEEK**



**BONNER COUNTY EMS RESPONSE 2015
TOTAL CALLS BY MONTH**



Fiscal Year 2015 Budget

The business of emergency medical response is anything but predictable. We must be prepared mentally and physically for each incident. It is imperative we have proper equipment and the necessary training to respond appropriately. This takes planning, countless hours of training and adequate funding.

Our funding comes from two primary sources. The bulk of the funding comes from taxes, the remainder from revenues generated by response calls and transports. These are affected by property values, call volume, Medicare and Medicaid payment limits as well as uninsured individuals.

Bonner County has a fiscal year of October 1st to September 30th. Each year the county has an external auditing firm conduct an audit on all county budgets. For the fiscal year of 2014/15 there were no auditor comments that reflected negatively on the BCEMS budget.

2014/15 BCEMS Budget

Salaries—\$1,578,241.00, 49 percent of total budget

Salaries cover all full time and part time BCEMS employees. A partial breakdown of the positions includes:

One Chief, one Deputy Chief (doubles as an Advanced EMT), one Administrative Assistant (doubles as an EMT), three Field Supervisor Captains (two Paramedics, one Advanced EMT, \$18.27 per hour), seven full-time

Paramedics (13.03 per hour), six part-time Paramedics, 16 full-time Advanced EMTs (9.48 per hour), three part-time Advanced EMTs, one full-time EMT (9.10 per hour), three part-time EMTs.

Benefits—\$563,761.00, 18 percent of total budget

Benefits include retirement, social security, insurance, unemployment, workers compensation.

Expenses – \$891,983.87, 27 percent of total budget

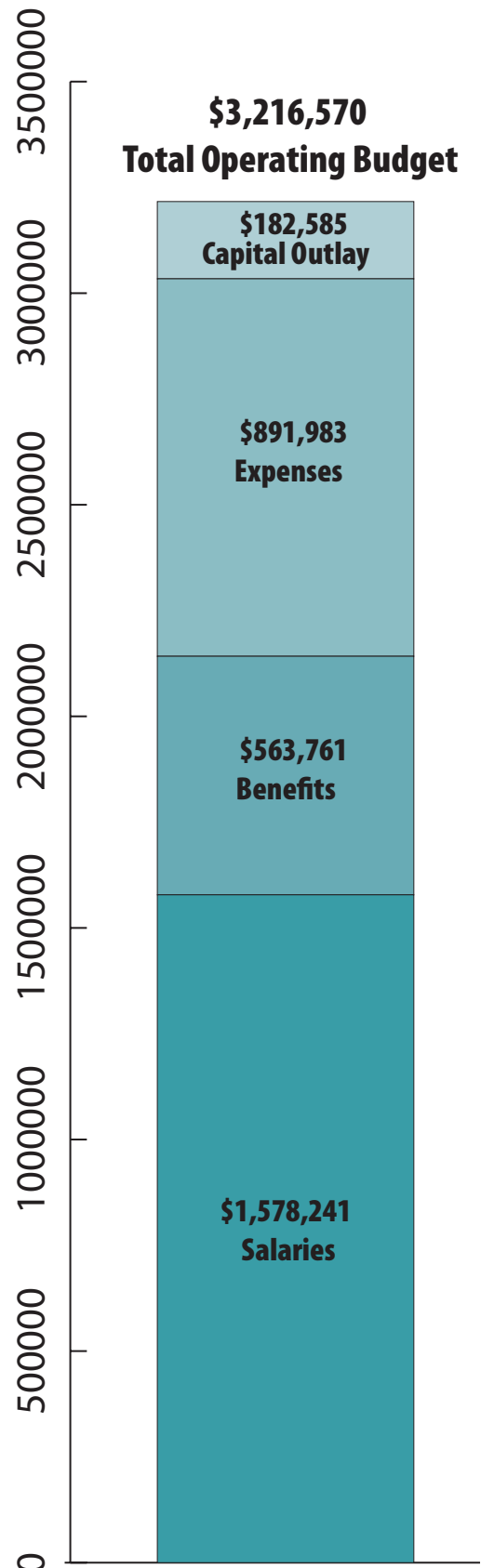
Day-to-day Operational Expenses include: fuel, travel, training, equipment and supplies, utilities, professional services (Medical Director), building rent/lease, repairs and Partner Agency contracts.

Capital Outlay – \$182,585, 6 percent of total budget

This section of the budget covers capital items that have a value greater than \$5,000.00 and service life of more than a year. Areas covered include vehicles, computers, buildings and lease/purchase agreements.

Our total operating budget for the 2014/15 budget was \$3,230,039.00 (this includes taxes and projected revenue). What we have listed here represents a broad overview of the BCEMS budget. A closer inspection of the budget in detail is certainly possible by contacting us anytime.

Total Fiscal year 2014/15 Budget - \$3,216,570.87



POSITIONS

Paramedic - Starting Wage \$13.03/Hr.

Advanced EMT - Starting Wage \$9.48/Hr.

EMT - Starting Wage \$9.10/Hr.

Special Operations



David Ramsey is Special Operations Captain and A-Shift Supervisor for Bonner County EMS. He is a Pre-Hospital Trauma Life Support Instructor, Wilderness Medicine Instructor and a Tactical Medic with the Bonner County Sheriff's Office Emergency Response Team. He has been with the agency since 2012.

The Bonner County EMS Special Operations Division consists of the Wilderness Response Team, the EMS Bike Team and the Tactical Medics.

The Wilderness Response Team was first formed in 2009 in response to a need for a small group of EMS providers with specialized training that could respond to patients in austere environments, challenging terrain, extreme weather conditions or lengthy evacuations. The team acts as a medical support service to Bonner County public safety agencies and Search and Rescue organizations and has, on occasion, even responded to neighboring counties to assist in backcountry rescue operations.

Wilderness Response Team members receive both initial and continuing education across a variety of diverse subjects and must demonstrate ongoing proficiency in:

- Wilderness Medicine
- Ropes Rescue
- Land Navigation
- Gear Deployment
- Patient Packaging
- Patient Evacuation
- Winter Survival
- Avalanche Awareness
- Shelter-in-Place

- Helicopter Operations
- ATV and UTV Operations
- Snowmobile Operations

In addition to a full complement of Intermediate and Advanced Life Support medical gear, the Wilderness Response Team also operates a Ford F-350 dual-wheeled pickup truck, a Special Operations Trailer, a Yamaha Rhino UTV, a Yamaha Kodiak ATV, a Polaris RMK snowmobile, a Ski Doo Skandic snowmobile, a Cascade Rescue litter and trail wheel and an Orion patient-transport sled that can be outfitted with either skis or tires, depending on the season.

In 2015, BCEMS Wilderness Response Team deployments included:

- Three team members responded to an ATV rollover in Lakeview on April 19.
- Two Wilderness team members responded to a call for missing mountain bikers up Schweitzer Creek on June 28.
- Two team members responded with Marine 6 to a cliff-jumping incident near Whiskey Rock on August 8.
- Three team members responded to a call for an ATV accident near Bayview on October 3.

Special Operations



- Two team members responded with snowmobiles to a call for hypothermia on Forest Service Rd 278 on Christmas night.

Seven Wilderness Team members attended Winter Survival Training January 24-25 with Priest Lake Search and Rescue, conducted by US Air Force Survival Instructors. Five team members completed a 40-hour Wilderness EMT Upgrade course in October and there were four additional Wilderness Team trainings over the course of 2015.

The BCEMS Tactical Medics are attached to and regularly train with the Bonner County Sheriffs Office Emergency Response Team (ERT) and serve as frontline medical support to law enforcement in situations that present enhanced danger to the responding officers such as active shooter, warrant service, hostage stand-offs and narcotics raids. Members of the Tactical Medic team receive intensive, specialized training in Tactical Combat Casualty Care and techniques necessary to work safely in a high-risk environment. There were five ERT Trainings in 2015, the ERT medic provided specialized training in Combat First Aid to patrol deputies at BCSO and the ERT responded to a call for a barricaded subject on December 15.

The EMS Bike Team was first formed in 2006 and responds to

special events in Bonner County that, due to crowd conditions or difficult terrain, would delay a traditional EMS response. Staffed by both Advanced EMTs and paramedics, the EMS Bike Team carries a full complement of medical equipment and supplies. In 2014, the EMS Bike Team deployed to Lost in the 50s and the Fourth of July Fireworks display. BCEMS also has a UTV with patient transport capabilities available at special events or for deployment to the bike path in Sandpoint and Ponderay. Deployments of the Bike Team/UTV in 2015 included:

- Two calls for seizure at Lost in the 50s on May 15
- A call for Altered Level of Consciousness at Lost in the 50s on May 16
- A call for Altered Level of Consciousness at Lost in the 50s on May 17
- UTV team assist with a call for Altered Level of Consciousness on the bike path on June 26
- A call for an Injury Motor Vehicle Crash at the Fourth of July Parade
- A Heat Exhaustion contact at the Fourth of July Parade
- A call for a shoulder injury at City Beach on July 4
- UTV team assist with a bicycle crash near Dog Beach on July 23
- UTV team assist with law enforcement near Dog Beach on July 23

Training



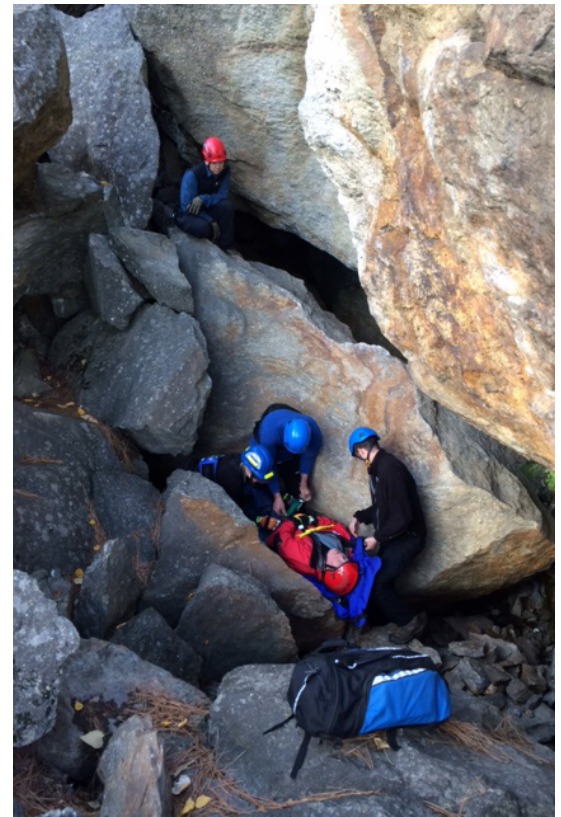
Bob Abbott is the Training Coordinator for Bonner County EMS. He is an Idaho EMS Instructor, Basic Life Support Instructor, Pre-Hospital Trauma Life Support Instructor and Wilderness Medicine Instructor. He has been with the agency since its inception in 2005.

2015 was as busy as ever for the BCEMS Training Division, with new initiatives and new challenges.

Training Division instructors successfully delivered a 180-hour Emergency Medical Technician course to Priest Lake EMTs that ran from February to May and an in-house 200-hour Advanced EMT course that ran from December 2014 through March 2015.

Through a combination of in-house training, online education and specialized outside courses, the BCEMS Training Division delivered 387 total training hours in 2015, including 184 hours of specialized training. Among the subjects covered were:

- Advanced 12-lead EKG Interpretation
- Acid-Base Derangements
- Pain Management
- Ventilator Management
- New Dislocation Protocols
- Selective Spinal Immobilization
- Nitrous Oxide Administration
- Autism Awareness
- Trauma Triage
- Community Paramedicine and Mobile Integrated Health
- CPR Renewal
- Critical Incident De-escalation
- Failed Airway Management
- Cardiac Emergencies
- Respiratory Emergencies
- Pediatric Emergencies
- Obstetric Emergencies
- Neurologic Emergencies
- Soft Tissue Trauma
- Chest Trauma
- Abdominal Trauma
- Injuries to the Head and Spine
- Neonatal Resuscitation Program for Advanced EMTs
- Advanced Cardiac Life Support Renewal
- Wilderness EMT Upgrade



For BCEMS providers renewing their licenses in 2015, EMTs averaged 104 hours of Continuing Medical Education over the three-year license cycle (48 hours required), Advanced EMTs averaged 100 hours for the two-year license cycle (54 hours required) and Paramedics averaged 118 hours (72 hours required). Two providers successfully passed random audits of their National Registry Recertification applications and two providers passed random audits of their Idaho EMS License Renewal applications.

For specialized training, seven Wilderness Team members attended Winter Survival Training in January, five BCEMS providers attended the 24-hour National Association of EMS Educators (NAEMSE) Instructor course in April, four personnel completed a 40-hour Field Training Officer (FTO) course in January, company officers completed a 40-hour Supervisor course in February, administrative staff attended a 16-hour Background Checks course, also in February and Special Operations Team members successfully completed a 40-hour Wilderness EMT course in October. Ten BCEMS paramedics worked on an online Critical Care refresher throughout 2015.

Perhaps the biggest challenge faced by the Training Division in 2015 was the question of how to effectively deliver consistent, challenging, high-quality training to providers working on three different shifts and spread out among three stations across the county. Last fall, we invested in additional training equipment for use by personnel responding out of the Priest River and Sagle stations and at the end of the year we started using the GoToWebinar system so that BCEMS personnel could attend training events at any location with a computer and an internet connection. There are still a few bugs to work out, but early reviews of the new system are quite encouraging and attendance by on-duty providers at our monthly Company Trainings has increased significantly.

BCEMS Instructors provided outreach training to Priest Lake EMTs, Priest Lake Search and Rescue, the Bonner County Sheriff's Office, the BCSO Marine Division, Pend Oreille Fire District 4, Northside Fire District, Schweitzer Fire District, Coolin-Cavanaugh Bay Fire District, Clark Fork Valley Ambulance and the Forrest Bird Charter School in 2015.

Medical Director



Ronald Jenkins, MD, FACC is the Medical Director for the Bonner County EMS System. He is an Interventional Cardiologist, a partner in Heart Clinics Northwest and one of the most accomplished and respected physicians in the region. He has been the BCEMS System Medical Director since 2009.

Overview

All Bonner County EMS services with the exception of Schweitzer Ski Resort are under the medical Direction of Ronald D Jenkins, MD.

Current Bonner County EMS Agencies under the Medical Direction of the Bonner County System Medical Director include:

- Bonner County EMS, ALS Provider, Transport
- Clark Fork Fire, First Responder, Non-Transport
- Clark Fork Valley Ambulance, ILS Provider, Transport
- Northside Fire, BLS Provider, Non-Transport
- Priest Lake Emergency Medical Technicians, Inc., ILS Provider, Transport
- Sagle Fire, ILS Provider, Non-Transport
- Sam Owen Fire, First Responder, Non-Transport
- Sandpoint Fire, ILS Provider, Non-Transport
- Schweitzer Fire, ILS Provider, Transport
- West Pend Oreille Fire, First Responder, Non-Transport
- Westside Fire, First Responder, Non-Transport

Credentialing, Training and Authorizations

The EMS Providers brought to my attention through the FTO process and newly credentialed to practice independently include Rex Nielsen, AEMT (5/15), Christina Uzeta, AEMT (9/15), and John Minden, Paramedic (10/15). There was no Provider whose license to practice was revoked in 2015.

Many Optional Modules required training in 2015 due to a revamping of the scope of practice for Basic and Advanced EMTs by the Idaho Physician's Commission. The Medical Supervision plan was updated in July 2015. Specifically, rosters of all agency providers within Bonner County will be provided and updated by the first day of every January and July of each year. Secondly, all Bonner County EMS Agencies must have a signed agreement or contract with Bonner County EMS in order for the agency providers to provide EMS services within Bonner County.

Quality Assessment

QA meetings were held each month for approximately two hours,



"It has been a pleasure to participate in the EMS system of Bonner County, and I appreciate the work and dedication of the many talented EMS providers and administrative staff, as well as the superior working relationships and high level of cooperation we have currently with the local and regional hospitals."

generally held on the third Wednesday of each month, held in the training room of Station 1, BCEMS. Under the direction of the Medical Director, 911 calls and Patient Care Reports were reviewed, and generally presented by a member of the team responding to the particular run. All Agency providers within Bonner County are welcome at these QA meetings. We continue to look at a more optimum procedure for outside agencies to participate remotely, and it is clear that this year the system for calling in have not worked well. At least 4-6 runs were reviewed each month, focusing on our response and scene times, quality of medical care delivered, adherence to guidelines, and adequacy of reporting. The focus has been on education, and helping providers have a wider scope of knowledge to be able to make good decision and know their alternatives.

We always look from a perspective of what else might be appropriate, what other care could be delivered, and the pros and cons of any actions to consider such as involving a higher level of care, downgrading to a lower level of care, and timeliness and appropriateness of involving air ambulance services. Generally, there are at least one and occasionally two or three Physicians attending QA which is helpful in providing multiple levels of experience and perspective. In addition to the runs reviewed with the whole group, a large selection of cases is reviewed per the QA guidelines in the Medical Supervision Plan, looking for protocol violations or omissions as well as quality of reporting.

Guidelines and Protocols

The entire System Guidelines was reviewed and updated in the spring of

2015. The Drug References Appendix was updated to include Ketamine and Ticagrelor. New protocols were added for the use of Ketamine and for simple joint dislocation. The policies for ordering, logging, dispersal and wasting of Controlled Substances were reviewed and updated. Master copies of the protocols are kept at Station One, BCEMS and with the Medical Director, and we continually attempt to keep the on-line protocols current via the BCEMS web site.

Actions

There were no formal disciplinary actions and no critical events in 2015 for the office of the Medical Director. There were no new concerns, serious incidents or complaints brought to the Medical Director during 2015.

Summary

It has been a pleasure to participate in the EMS system of Bonner County, and I appreciate the work and dedication of the many talented EMS Providers and Administrative staff, as well as the high level of cooperation we have currently with the local and regional hospitals.



CHEST PAIN

Prehospital Management of Chest Pain Including Possible STEMI.

HISTORY	SIGNS AND SYMPTOMS	ASSESSMENT
<ul style="list-style-type: none"> Age Medications Viagra, Levitra, Cialis Past Medical History <ul style="list-style-type: none"> MI, Angina, Diabetes, Post Menopausal, Cholecystectomy Allergies <ul style="list-style-type: none"> ASA, Morphine, Lidocaine Recent physical exertion Palliation/provocation Signs/symptoms time, quality, severity, location and duration Prior to arrival treatment 	<ul style="list-style-type: none"> Character and severity of chest pain Bradycardia or tachycardia Evidence for ventricular ectopy Breathing and Oxygen saturation Diaphoresis, nausea or vomiting Blood pressure and pulse Evidence for chest trauma Hemoptysis Pleural or pericardial rub Differential blood pressures New cardiac murmur GI bleeding Signs of drug abuse 	<ul style="list-style-type: none"> Trauma vs. Medical Angina vs. MI Pericarditis Pulmonary Embolism Asthma/COPD Pneumothorax Aortic dissection or aneurysm GI pain GI reflux or hiatal hernia Esophageal spasm Chest wall injury or pain Overdose (cocaine or meth)

TREATMENT GUIDELINES

R-EMR	E – EMT	A-AEMT	P-PARAMEDIC	**M-Medical Control**
Higher level of providers are responsible for lower level treatments				
<ul style="list-style-type: none"> Initial patient contact (2000). Place patient in position of comfort. Administer Oxygen (9000) as required to maintain Oxygen saturation between 91-95%. Obtain vitals every 5-10 minutes. 				R
<ul style="list-style-type: none"> If systolic BP is greater than 100 mmHg, assist patient with own nitroglycerin q 5 min x 3. Pulse Oximetry (9001). Assist ALS with Cardiac Monitor and 12-lead EKG data acquisition if indicated. Administer aspirin 324 mg po. Transport to receiving facility with ALS intercept, if ALS not already on-scene. 				E
<ul style="list-style-type: none"> Establish IV with NS, draw labs; do not delay transport for IV access.² Administer nitroglycerin spray 0.4 mg SL; repeat q 5 min x 3 as long as SBP >100 mmHg. Establish 2nd IV line (NS or hep lock) for persistent pain and or suspect MI.² 				A
<ul style="list-style-type: none"> ALS required for ongoing Chest Pain or presence of any other symptoms. 12-lead EKG; transmit when possible to Medical control. Administer nitroglycerin paste 0.5-2" transdermal (TD).³ Administer morphine sulfate 2 mg IVP or IM; may repeat q 5 min up to 10 mg/30 minutes. Alternatively, consider Fentanyl 25-100 mcg IV/IO q5 min. to a maximum dose of 300 mcg. For suspected STEMI (5010), complete reperfusion checklist (9045) if thrombolysis is anticipated, and complete STEMI Evaluation Tool (5011). 				P
<ul style="list-style-type: none"> ** Call Medical Control for suspected STEMI to determine receiving facility. Follow STEMI Guidelines when STEMI is confirmed and CCT transport for direct PCI.** 				M

²EMT and ³AEMT providers may perform these procedures if credentialed with the appropriate OM.

Pearls:

Patients without intact airway, breathing and circulation should be transported to the nearest emergency facility. Goal is to relieve chest pain, using caution for possible hypotension with right sided or inferior MI. Recent data suggests less optimal outcome with excessive oxygenation in STEMI patients.

QA EKGs will be attached to PCR.

Clinical

Drew Rinella is a shift paramedic and the Clinical Coordinator for Bonner County EMS. He has been with the agency since 2010.



Throughout my six years of employment with Bonner County EMS, as a member of the Clinical team, I have been proud to be a part of this agency's transformation from a fledgling municipal EMS provider into a cutting-edge prehospital healthcare service in pace with the industry's leaders. The work has been difficult at times, but well worth the effort. During 2015 your clinical team succeeded in implementing two major projects, which have helped us to modernize our quality standards.



In January, the Field Training staff attended a field training administrator course taught by emergency services educator Richard Whitehead. May saw the full implementation of our new Field Training system based on the Richard Whitehead model. This program is better than anything we have ever had, providing high quality preliminary training and bulletproof liability protection. We thank Mr. Whitehead for his continued guidance in this area of our operations.

Last year we identified numerous weaknesses in our Patient Care Reporting software. This included an inability

to accurately track even the simplest of metrics such as procedure success rates. I can't stress enough how unusual it is for an EMS agency to be unable to measure this type of information. So in April of 2015, BCEMS followed in the footsteps of Ada County Paramedics and Kootenai County EMS by transitioning to a new patient care reporting software system called ESO ePCR.

This simple act revolutionized our Quality Assurance capabilities. We are now able to collect accurate data, and mine that data through a combination of canned reports provided to us by ESO, and custom reports that we build ourselves. With this powerful software suite we have been able to objectively identify performance trends, track supply usage, and digitize processes that previously had to be hand written on paper. The interface is cleaner and more intuitive than our previous software, leading to faster chart completion times for our providers.

In the future, we plan to bring tablet charting to our agency in order to better meet the data collection needs of our local hospital, and to maneuver our clinical operations in line with Commission on Accreditation of Ambulance Services standards. We also hope to centralize the data collection for all agencies under the Bonner County EMS System umbrella in order to increase clinical oversight and decrease liability to our medical director. We will be incrementally working with individual agencies throughout 2016 in the furtherance of this goal.

I wish to thank the taxpayers of Bonner County for your hard work and sacrifice, which allows us to provide this high quality service to you. As a government agency we strive always to provide you with the best possible value for your tax dollars by placing a strong emphasis on quality assurance and quality improvement. Your Clinical team will continue to work hard for you into 2016 and beyond to make sure this happens.

Faces of Excellence



For more than 10 years, the dedicated professionals of Bonner County EMS have responded to medical emergencies in Bonner County, 24 hours a day, seven days a week. The full-time crews are divided into three shifts, supervised by a captain, are on duty for 48 hours at a time and run out of stations in Sandpoint, Priest River and Sagle. We are proud to present them here.

A Shift

Captain: David Ramsey



Lisa Hull
Advanced EMT



Cody Lile
Advanced EMT



Megan Arrants
Advanced EMT



Mark Earls
Advanced EMT



Drew Rinella
Paramedic



Joe Uzeta
Paramedic



Dan Garman
Advanced EMT



Anthony Emord
EMT

B Shift

Captain: Stephen Hill



Bob Abbott
Advanced EMT



Kelvin Hunt
Advanced EMT



Jeff Wilder
Advanced EMT



Nick Knaack
Advanced EMT



Alan Brinkmeier
Paramedic



Mark Rough
Advanced EMT



William Blackmore
Advanced EMT



Jason Creamer
Paramedic

C Shift

Captain: Brian Hutcherson



LeDon Sacksteder
Advanced EMT



Adam Dewey
Advanced EMT



Mark Croft
Paramedic



Karen Prince
Advanced EMT



Rex Nielsen
Advanced EMT



Kelly Hunt
Paramedic



Eric Wright
Advanced EMT



Jenessa Johns
Paramedic

Employee Spotlight

While we continue to provide the best medical care possible, unfortunately we cannot save all our patients. In the EMS field, you learn to deal with the up-and-down emotions of a major call, or you will not last long as an EMS provider. The national average of an EMT's career expectancy is three-to-five years. Bonner County EMS providers have hundreds of years of combined EMS experience and most

of our full-time Advanced EMTs have been with the agency for more than five years. We would like to acknowledge the following individuals for their accomplishments in 2015 and for their continued years of service with BCEMS. Building and maintaining a professional service would not be possible without these dedicated people.



LeDon Sacksteder
10 years full-time



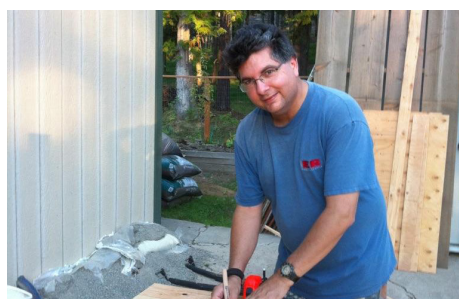
Lisa Hull
10 years full-time



Bob Abbott
10 years full-time



Sarah Schalk
5 years full-time



Joseph Ezeta
5 years full-time



Mark Rough
5 years full-time



Drew Rinella
5 years full-time



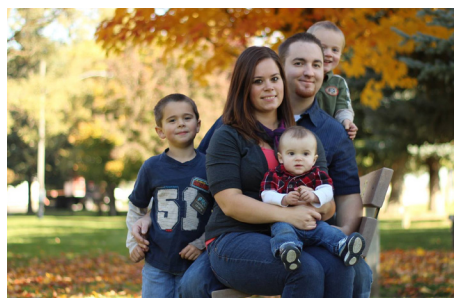
Alan Brinkmeier
5 years full-time



Brian Hutcherson
5 years full-time



Daniel Garman
Hired as full-time



Kelly Hunt
Hired as full-time
Paramedic



Jason Creamer
Hired as full-time
Paramedic



William Blackmore
Hired as full-time
Advanced EMT



Rex Nielsen
Hired as full-time
Advanced EMT



Anthony Emord
Hired as full-time
EMT



Eric Wright
Hired as full-time
Advanced EMT



Karen Prince
Earned Advanced EMT
Certification

**Bonner County Emergency Medical Services
Headquarters Station and Administrative Offices**

521 N. Third Ave.
Sandpoint, ID 83864
(208) 255-2194
www.bonnerems.com

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