## RESOLUTION APPROVING REPLACEMENT OF SKAGIT COUNTY EMERGENCY MEDICAL SERVICES AND TRAUMA CARE COUNCIL ADVISORY BOARD MEMBER

WHEREAS Skagit Commissioners executed Skagit County Resolution R20190037 establishing the Skagit County Emergency Medical Services and Trauma Care Council Advisory Board initial members serving on said Advisory Board; and

WHEREAS David Jefferson was appointed as one of the initial Advisory Board members representing the category of Prevention Specialist; and

WHEREAS David Jefferson has tendered his resignation from the Advisory Board; and

WHEREAS Amie Tidrington is qualified and willing to assume the Prevention Specialist position on the Advisory Board for the remainder of David Jefferson's five year term.

NOW, THEREFORE, BE IT RESOLVED AND IT IS HEREBY ORDERED that, effective immediately, Amie Tidrington is hereby appointed as the replacement member of the Skagit County Emergency Medical Service and Trauma Care Council Advisory Board filling the Prevention Specialist category for the remainder of the David Jefferson's five year term.

DATED this 20th day of May, 2019

SKAGIT COUNTY, WASHINGTON

Lisa Janicki, Chair

**BOARD OF COUNTY COMMISSIONERS** 

Ron Wesen, Commissioner

Kenneth A. Dahlstedt, Commissioner

Attest:

Clerk of the Board

Approved as to form:

Civil Deputy Prosecuting Attorney

Approved as to Content:

Department H

## RESOLUTION APPROVING REPLACEMENT OF SKAGIT COUNTY EMERGENCY MEDICAL SERVICES AND TRAUMA CARE COUNCIL ADVISORY BOARD MEMBER

WHEREAS Skagit Commissioners executed Skagit County Resolution R20190037 establishing the Skagit County Emergency Medical Services and Trauma Care Council Advisory Board initial members serving on said Advisory Board; and

WHEREAS Tyler Dalton was appointed as one of the initial Advisory Board members representing the category of Local Hospital Representative; and

WHEREAS Tyler Dalton has tendered his resignation from the Advisory Board; and

**WHEREAS** Kandi Devenere is qualified and willing to assume Local Hospital Representative position on the Advisory Board for the remainder of Tyler Dalton's five year term.

**NOW, THEREFORE, BE IT RESOLVED AND IT IS HEREBY ORDERED** that, effective immediately, Kandi Devenere is hereby appointed as the replacement member of the Skagit County Emergency Medical Service and Trauma Care Council Advisory Board filling the Local Hospital Representative category for the remainder of Tyler Dalton's five year term.

PASSED this 1 day of June, 2021.

SEAL COURT WASHING

BOARD OF COUNTY COMMISSIONERS SKAGIT COUNTY, WASHINGTON

Lisa Janicki, Chair,

Peter Browning, Commissioner

Ron Wesen, Commissioner

Attest:

Clerk of the Board

Approved as to form:

Civil Deputy Prosecuting Attorney

Approved as to Content:

Department Head

## RESOLUTION APPROVING REPLACEMENT OF SKAGIT COUNTY EMERGENCY MEDICAL SERVICES AND TRAUMA CARE COUNCIL ADVISORY BOARD MEMBER

**WHEREAS** Skagit Commissioners executed Skagit County Resolution R20190037 establishing the Skagit County Emergency Medical Services and Trauma Care Council Advisory Board initial members serving on said Advisory Board; and

**WHEREAS** Joan Cromley was appointed as one of the initial Advisory Board members representing the category of Elected Official – Town of population < 7,500; and

WHEREAS Joan Cromley has tendered her resignation from the Advisory Board; and

**WHEREAS** Eddie Hills is qualified and willing to assume the Elected Official – Town of population < 7,500 position on the Advisory Board for the remainder of Joan Cromley's three year term.

**NOW, THEREFORE, BE IT RESOLVED AND IT IS HEREBY ORDERED** that, effective immediately, Eddie Hills is hereby appointed as the replacement member of the Skagit County Emergency Medical Service and Trauma Care Council Advisory Board filling the Elected Official – Town of population < 7,500 category for the remainder of Joan Cromley's three year term.

PASSED this 1 day of June, 2021.

SEAL COURT OF WAST

BOARD OF COUNTY COMMISSIONERS SKAGIT COUNTY, WASHINGTON

Lisa Janicki, Chair

Peter Browning, Commissioner

Ron Wesen, Commissioner

Attest:

Clerk of the Board

Approved as to form:

Civil Deputy Prosecuting Attorney

Approved as to Content:

Department Head

#### ARTICLE I ORGANIZATION NAME

The name of this group shall be the Skagit County Emergency Medical Services (EMS) and Trauma Care Advisory Board, hereinafter, "The Advisory Board."

#### ARTICLE II ORGANIZATION AND OBJECTIVES

#### 1.0 Organization

- 1.1 The Advisory Board is created by Skagit County Resolution number R20190037 to form a Local Emergency Medical Services and Trauma Care Advisory Boards as authorized in accordance with WAC 246-976-970 and RCW 70.168.120
- 1.2 The Advisory Board consists of volunteer representatives as designated in Skagit County Resolution number R20190037, from public and private agencies <u>licensed in the County</u> responsible for the delivery of emergency medical services and/or are consumers of emergency medical services in Skagit County.
- 1.3 This Advisory Board will follow the Open Public Meetings Act.

#### 2.0 Purpose

2.1 The purpose of The Advisory Board is to serve as an Local Emergency Medical Services (EMS) and Trauma Care advisory board to Skagit County Board of County Commissioners (SCBOCC), to disperse information from the North Region EMS and Trauma Care Council (NREMSTCC) and the State Department of Health, Office of EMS and Trauma Care Systems (DOH) to local providers, pursuant to WAC 246-976-970.

#### 3.0 General Objectives

- 3.1 Review, evaluate, and provide recommendations to the Skagit County EMS Director regarding the provision of emergency medical services and trauma care in the region, and provide recommendations on the regional emergency medical services and trauma care plan.
- 3.2 Recommend individuals as participants on the Regional Emergency Medical Services and Trauma Care Advisory Board.
- 3.3 Review and make recommendations, for individuals applying for recognition or renewal of recognition as senior EMT instructors for final review and approval by the Skagit County Medical Program Director.
- 3.4 Review applications for initial training classes and Ongoing Training and Evaluation Program (OTEP) programs and make recommendations to the department for final review and approval by the Skagit County Medical Program Director.

- 3.5 Make recommendations regarding the minimum and maximum number of verified prehospital transport and aid providing agencies needed in the County for the regional EMS and trauma plan.
- 3.6 Review and recommend new initiative funding proposals.
- 3.7 Make prioritized recommendations to the North Region EMS & Trauma Care Council (NREMSTCC) regarding grants from the NREMSTCC requested by local ems agencies.
- 3.8 Work on Prevention and Education for EMS and Health-related issues in partnership with other agencies.
- 3.9 Provide quarterly communication to EMS providers and stakeholders.
- 3.10 Develop strategic recommendations on Dispatch/911 EMS priorities for presentation to the 911 Board.

#### ARTICLE III ORGANIZATION MEMBERSHIP

- 1.0 Advisory Board membership makeup
- 1.1 The Advisory Board shall be limited to fourteen (14) members and two additional Ex-Officio positions.
- 1.2 Members will consist of a maximum of two representatives from local hospitals, one BLS transport provider, a maximum of two ALS transport providers, one rural fire responder or agency designee, the Skagit County Medical Program Director or designee, the Skagit County EMS Director, one consumer, three elected officials—cone City of population over 7,500, one Town of population under 7,500 and one Skagit County Commissioner (County Commissioner serving as an exofficion), one prevention specialist, 911 Board Chair (ex-officio) and one local Law Enforcement representative. If there is a lack of people willing to serve in the above listed positions, the size of the Board shall be decreased.
- 1.3 Recommendation for appointment will be made by agencies types listed above, to the EMS Director for appointment by the Skagit County Board of County Commissioners.
- 1.4 Approved members shall serve for a three-year period, provided they remain in good standing, except for some initial appointments that exceed three years as specified in Skagit County Resolution number R20190037.
- 1.5 Unexcused absences from two consecutive meetings shall be cause for removal from the Advisory Board.

**Commented [BB1]:** May need clarification to specify that the three elected are the positions listed as towns and city.

- 1.6 Any member may be removed by the Advisory Board for inappropriate or disruptive behavior by recommendation to the Skagit County Board of County Commissioners by majority vote.
- 2.0 Conflict of interest
- 2.1 All members shall make a full disclosure of any conflicts of interests. New members shall be advised of this policy upon appointment to the advisory board.

#### ARTICLE IV MEETINGS

#### 1.0 Meetings and Attendance

- 1.1 Regular meetings shall occur at least once every quarter according to a schedule and place established by the Advisory Board.
- 1.2 Special meetings of the Advisory Board may be called by the Chairperson, Skagit County Board of County Commissioners or the EMS Director
- 1.3 Members can call-in to meetings for valid attendance

#### 2.0 Minutes

2.1 Minutes shall be <a href="the-responsibility of the EMS">the responsibility of the EMS office and</a> taken at all meetings of the Advisory Board and shall include an accurate summary of all recommendations, discussion and actions. Minutes shall <a href="https://example.com/beavailable-be-available-

#### 3.0 Quorum

3.1 Quorum for the Advisory Board shall be a majority of the voting Board.

#### 4.0 Voting

- 4.1 A simple majority of votes shall be required for action on an issue.
- 4.2 New Initiative Fund or grant funding votes shall require a 60% super majority for action on an issue.
- 4.3 General business may be voted on at the same meeting that it was introduced on the meeting agenda
- 4.4 No proxy for voting.

#### ARTICLE V OFFICERS

#### 1.0 OFFICERS

- 1.1 The Chair and Vice Chair shall be elected annually at the first meeting by a simple majority vote of a quorum of the voting members. Nominations must be accepted in person or via written statement presented at the meeting in which the nomination occurred.
- 1.2 The term for Officers will be a two year term total.
- 1.3 If the Chair cannot fulfill the entire term due to timing out on the advisory board or not reelected, the vice chair will serve as chair for the remaining term.
- 1.11.4 If the Chair or Vice-Chair are from elected positions and are not re-elected or term out, then a special election will be held to select a new Chair/Vice-Chair to fill the position for the remainder of the term.
- 1.21.5 The Chair shall preside at all meetings.
- 1.31.6 The Vice Chair In the absence of the Chair, shall preside at all meetings.
- 1.41.7 In the absence of both Chair and Vice Chair, the Chair can appoint a designee to preside over the meeting.

#### ARTICLE VI COMMITTEES

#### 1.0 AD HOC COMMITTEES

1.1 The Advisory Board may appoint ad-hoc committees and determine membership as the need may arise. Members of the committee whether Members of the Advisory Board or not, shall be voting members of the Ad-hoc committees. Ad-hoc committees shall report recommendations to the Advisory Board.

#### ARTICLE VII AMENDING BY-LAWS

#### 1.0 AMENDMENTS

- 1.1 Amendments to these by-laws may be recommend by a simple majority affirmative vote of the voting members at a meeting, provided that the following requirements have been met: Copies of the amendment or amendments are made available to the voting members at least thirty (30) days in advance of the meeting and that the notice of the meeting states that recommended amendments to this document will be considered and voted upon.
- 1.2 Recommended amendments to the bylaws will be presented to the Skagit County Board of County Commissioners by The EMS Director for final approval.



# North Region EMS & Trauma Care Council 2021-2022 Grant Application Packet

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## **Grant Timeline**

July 1 <sup>st</sup> , 2021	Grant Application Period Opens			
July-October	Grant Applications are submitted to the Local Councils from			
	July 2021-October 2021.			
	Local Councils will review and assess applications according to			
	the Regional Council approved criteria and make			
	recommendations to the Regional Council. Local Councils may set			
	their own deadline for review.			
<b>October 25th, 2021</b>	Applications are due to the Regional Council in preparation for the			
	Council meeting on November 4th, 2021. Local EMS offices will			
	forward applications electronically to			
	Martina@northregionems.com			
November 4th, 2021	Regional Council reviews applications for funding. Award letters			
	are signed, and recipients notified via email.			
June 1 <sup>st</sup> , 2022	Reimbursement request and report due to Regional Council office			
	by 5pm.			

## **Mailing Information**

Please send your application to your Local EMS Council Office listed below:

Island County EMS Council	San Juan EMS Council	
Attn: Rusty Palmer	Attn: Lainey Volk	
chief@swfe.org	lvolk@sanjuanems.org	
5535 Cameron Road	P.O. Box 2178	
Freeland, WA 98249	Friday Harbor, WA 98250	
Skagit EMS	Snohomish Council EMS	
Attn: Freya Peebles	Attn: Kelly Fox	
freyaxp@co.skagit.wa.us	Kelly.fox@snocountyems.org	
2911 East College Way, Ste. C	12425 Meridian Ave S	
Mount Vernon, WA 98273	Everett, WA 98208	
Whatcom County EMS Council		
Attn: Andrea Doll		
Andrea@whatcomcountyems.com		
1212 Indian St/ PO Box 5125		
Bellingham, WA 98227		

If you are unsure of what Local EMS Council you belong to, please contact the Regional EMS office by email: <a href="martina@northreigonems.com">martina@northreigonems.com</a> or by phone: 360-708-2454.

### **Guidelines and Application Instructions**

According to RCW 70.168.130 (1) and (2), the State Department of Health provides disbursement of funds to regional emergency medical services and trauma care councils. ~Part of the funds budgeted by the North Region EMS & Trauma Care Council are for an Annual Community Based Training (CBT) Grant.

Grants are awarded to Prehospital Agencies, within the North Region, for the purpose of assisting the provision and support of community-based prehospital education as part of the regional EMS and Trauma System. This year grants will also be award to applications that enhance existing quality of prehospital EMS activities or services, decrease patient mortality and morbidity; or expand the extent, size or number of existing prehospital activities or services

In an effort to best serve the most EMS Providers, grants are awarded based on need and benefit to the Region. Applicants may choose to coordinate the training through their County EMS Council or their Agency. The intent is that the Regional Council will provide the opportunity for individual agencies to voice their need and apply for funding support.

This year, grants will be reviewed according to the Regional Council's Grant Criteria and based on the overall benefit to the Region. Depending on the number of and types of requests in these grant submissions, the Regional Council may fund different amounts per county. Future funding will likely be tied to participation in the Regional Council.

#### Information about the grant application:

#### **Eligible applicants:**

Local EMS Agencies and Trauma Designated Facilities in the North Region.

#### **Deadline:**

Your application must be received by your local EMS before their designated review deadline date. You may submit your application by email. No faxed applications will be accepted.

#### **Available funds:**

There will up to \$40,000.00 available to fund local EMS projects or training.

#### **Project period:**

July 1, 2021 – June 30, 2022

(All charges occurring within FY21-22 may be submitted if you have been awarded the grant)

#### **Reimbursement Requirements:**

You may submit expenses and equipment purchases consistent with your grant from July 1<sup>st</sup>, 2021, until June 1<sup>st</sup>, 2022. Please submit your reimbursement invoice in one package (all at once) to avoid any confusion or missed invoices, and clearly state what Hospital or EMS Agency the reimbursement check is to be made to.

North Region EMS & Trauma Care Council				
Community Based Training Grant Application				
Application must be submitted and reviewed by your Local EMS Council Office.	<ul> <li>Applications must be evaluated by your Local EMS Council to be eligible. Your local council may have a more specific deadline. Late or incomplete applications will not be accepted.</li> <li>Answer all questions in the spaces and format provided. Do not use smaller than 10 point type.</li> <li>Signature of the applicant and/or authorized representative is required.</li> <li>Submit support materials behind the application (brochures, references, samples, equipment descriptions, etc.).</li> </ul>			
1. Contact	Organization: [Type text]			
Information	Primary Contact: [Type text]			
	Address: [Type text]			
	City: [Type text]		Phone: [Type text]	
	Zip: [Type text]		Fax: [Type text]	
	E-mail: [Type text]		Website: [Type text]	
	Federal Tax ID#: [Type text]			
	Fiscal Year End Date: [Type text]			
	County: [Type text]			
2. Summary	Project/Equipment/Grant Title: [Typ	pe text]		
Short Description (Limit 5 Lines): [Type text]				
Project Budget: S	\$ [Type text]	Amount R	Requested: \$ [Type text]	
3. Detailed Description: Explain the proposal/activity/project/training and how it benefits the North Region. How will you spend the money? What do you plan to do? When? Where? Include specific information regarding cost, dates, location, and activities, as well as general information regarding the content and significance of the proposal.  [Type text]				

### North Region EMS & Trauma Care Council

Detailed Description – continued [Type text]
4. Summarize the Three Principal Objectives:
1. [Type text]
2. [Type text]
3. [Type text]
<b>5. Agency Information:</b> Describe the mission and/or goals of your organization. How does the proposed project relate to and enhance them? Why is the proposed funding request a priority at this time?
[Type text]

6. BUDGET: Expenditures and Income					
Description	North Region Grant	Matching/In-Kind *Include agencies providing support	Grand Total		
Meetings/Events/Education (e.g. room rental, mileage, travel expenses)	[Type text]	[Type text]	[Type text]		
Equipment (e.g. safety devices, manikins, educational supplies & materials)	[Type text]	[Type text]	[Type text]		
Contractual Services  (e.g. printing, postage, ads/media)	[Type text]	[Type text]	[Type text]		
Other Expenses (describe)	[Type text]	[Type text]	[Type text]		
Other Expenses (describe)	[Type text]	[Type text]	[Type text]		
Grand Totals	[Type text]	[Type text]	[Type text]		
<b>7. Budget Narrative:</b> Use this space to provide additional information about your budget and expenses. Is this a continuing project? If so, how will it be funded in the future?					
[Type text]					
<b>8. Signature:</b> The signatory declares that she/he is an authorized official of the applicant and is authorized to make this application. She/he will assure the funds received as a result of this application are used only for the purposes set forth herein.					
Signature of A	Applicant or Authorized	l Signer	Date		

## **Application Review Criteria**

Application will be reviewed for funding recommendation according to the following ranking criteria as listed in the Criteria Matrix. The Criteria Matrix is as follows:

- 1. Eligibility as a licensed EMS Provider in the North Region (licensed EMS providers, first responder organizations, injury prevention organizations, EMS training centers, academic institutions and others related to EMS).
- 2. Purpose- Does it improve the existing quality of prehospital EMS activities or services, decrease patient mortality and morbidity; or expand the extent, size or number of existing prehospital activities or services?
- 3. Does it provide for countywide or multiple agency application/participation?
- 4. Does the project include written, measurable, obtainable objectives?
- 5. The project is clearly described.
- 6. There is strong evidence that the project is responsive to the defined need and is service driven rather than agency driven.
- 7. The work plan is clearly identified/ defined.
- 8. There is strong indication the project is not replacing or unnecessarily duplicating existing equipment and is for only those items necessary to accomplish the objectives.
- 9. The budget is reasonable.
- 10. The project application, overall, is clear and complete.



