



**Dispatch Operations Advisory Group
Regular Meeting**

Minutes

September 27, 2022 – 1:00 PM

In-person at Santa Rosa Fire Department

Training Tower

2126 West

College Ave Santa Rosa, CA 95403, or

Hybrid

Join by phone 1-323-886-6897 Conference ID number # 905 616 744#

Email Evonne.Stevens@gmr.net to request web link

Present:

Spencer Andreis - Chair - Sonoma Valley Fire
Shepley Schroth-Cary – Vice Chair- Gold Ridge Fire
Ambrose Stevens - AMR Operations Manager
Travers Collins – Santa Rosa Fire Department
Nica Vasquez – CALFIRE
James Salvante – Coastal Valley EMS

Others Present:

KT McNulty - AMR Executive Director
Brenda Bacigalupi – REDCOM Administrative Assistant
Evonne Stevens - REDCOM Operations Manager
Ken Reese
Ron Busch
Brian Crabb
Matthew Gloeckner
Jasmine Mitchell
Ken Tasseff
Steve Suter
Mark Luoto
Sundari Mase

I. Call to Order Made by Spencer Andreis @1303

II. Public Comment Period

In this time period, anyone may address the DOAG regarding any subject over which the DOAG has jurisdiction, but which is not on today's agenda. Individuals will be limited to a three-minute presentation. Members of the public will be given the opportunity to address the DOAG regarding items on the agenda at the time that the agenda item is taken up by the DOAG.

None

III. Approval of Minutes

- a) July 26, 2022, Meeting Minutes - Spencer Andreis - Motion to approve minutes made by Ambrose Stevens and Second James Salavante – Discussion – No Further Comments – Approved unanimously.

IV. New Business –

- a) Summer Swift Water Event Type – Ron Bush discussion – Action motion to approve Ron Busch - We are changing our RESCUE season response plan. Basically, the way the water rescue is right now. There is a ton of equipment, we do not feel it is necessary for that so we would like to scale it down for a water rescue summer mode. Then I think as we move along with the coast, we may be coming up with maybe a couple of other water rescue-related response times. I wanted to get this out there in front of everybody essentially, we wanted to move the summer water rescue down to a BC, a boat, a type 1 Engine, an ambulance, and an air rescue. This is the request.

Spencer Andreis - I am assuming you are going to align it with like summer vegetation, winter vegetation that kind of switch. As far as that would go into effect.

Ron Busch – Exactly, because right now there are multiple areas in the Russian River that you can walk across. It is not a huge threat to us. We still need to send something.

Spencer Andreis – I completely agree. Kenny any reservations on the CAD side?

Ken Reese – No, it can be either handled one of two ways. You could have the rescue Swiftwater event type and it can be toggled on condition so it adds or reduces equipment between certain dates, or we can just simply do like what we do with winter veg is that when we call winter veg, we just use separate event types. It can be handled either way.

Spencer Andreis - Ok, any other comments from the Board on the proposed event type?

KT McNulty - I think this is like the park rescue event type. I think that is something that should be managed through response plans instead of whole other event type.

Spencer Andreis – You cannot because it is summer versus winter. It is obvious with some of the rivers down at very minimal cubic feet of flow there is no way to reduce your response. It has to be seasonal.

KT McNulty – It cannot be a seasonal change to the response plan.

Spencer Andreis - So, we are going to change the response plans?

Ken Reese - We can use the RESCUE Swiftwater event type. Then if you have a particular condition, then you say between May and October the response is paired down to this and when it goes beyond a particular date it starts automatically adding stuff. Either way, somebody needs to call in and say we are going to change the date

either way. It is the same thing with CalFire notification and down staffing of stations we have to go in an adjusted the dates on the conditions. The Park Rescue requires us to actually put a ESZ around a park. Then you could use one of the normal rescue response plans. That does not change anything it just means that is now a ESZ specific around a park. The other ones are a little trickier, but either way it still requires somebody to say we are going to wintertime Swiftwater, or we are going to summertime Swiftwater. Either way, if there is a manual adjustment inside the response plan or is a notification made to the staff to use the other event type? It is six one, half dozen from a CAD perspective.

Spencer Andreis - We could just simply align that with our vegetation response assignments. That we must do every year right and just do both but that that would work pretty seamlessly?

Ken Reese – Yes, you could use a rescue Swiftwater summer different event type or we could toggle it on or off six one, half dozen other it will work either way.

Spencer Andreis – Ok

Ron Busch - Our goal is not to create a lot of work for everybody. If it is, Kenny tell me the simplest way and we are good we will do whatever we need to do to make that happen.

Ken Reese - I think ultimately, we just continue to use Swiftwater Rescue and it just will be that there will be a date condition in there that reduces the response it is pretty simple.

Ron Busch – Excellent, thank you.

Jason Boaz - Since that is an event-type change with that event type would be available to all users and REDCOM to be able to deploy that in their response plans?

Ken Reese - Yes, either way. If we do not change the event type, we just use standard Swiftwater. We put a condition in the response plan then it could be used by any agency that uses that event type. We could put a time condition and a date condition in it.

Spencer Andreis – It would be no different from your current winter versus summer vegetation responses. Where you have the ability to put whatever you want so you do not deviate from winter versus summer. Where most agencies do.

Jason Boaz – That is what I was wondering if you could just give us the ability to deviate if we want to make that decision.

Ken Reese – Yes, most definitely it will.

Spence Andreis - Any further discussions?

Ken Reese - To clarify we are going to stick with the existing event type and just put response plan conditions?

Spencer Andreis - Yes

Ken Reese – OK

Spencer Andreis - All right unless anybody else has any further discussion on it looking for a motion to approve.

Motion to approve minutes made by James Salvante and Second Shepley Schroth-Cary Discussion – No Further Comments – Approved unanimously.

- b) Agency 360 Training Program - Update - Evonne Stevens - Well in the spirit of simplifying things at REDCOM. We have recently purchased a public safety software called Agency 360 for our communication training officers. The main purpose here is to centralize and standardize our training and assemble cloud base. Right now we are using these really giant binders. They are thick and hard to maintain and update. This is going to be a really big improvement for our team. It will also allow us to streamline training for supervisors and education assignments for employees that need retraining so we can track those and see their process. Some of the other really good points are, if there is a trainee that needs some help or is not responding to training or retraining it automatically triggers emails to the supervisors and above. This way we are all aware of the situation and could talk to the training team. So far, our training team is taken on moving our very robust training plan into this program and so far, they have done about 1400 skills or activity points performance categories and that is just the call-taking mode. There is a lot that goes into this program. I am really excited about it. I am moving forward with our training team and going to announce that Greg Fontana is going to be taking over our training team as the lead training supervisor. I just wanted to give you guys an update on where we are in the training process.

Spencer Andreis – That is great news. Any questions for Evonne? Hearing none. Moving on.

VI. Work Group Reports/ Sub Committees

Work Groups developing dispatch implementation recommendations will present reports to the DOAG. The DOAG may take action on information contained in the reports.

- a) Dispatch Steering Committee (EMD or EFD topics)
EIDS Tool During EMD – Evonne Stevens – Pending Medical Director Approval - Discussion - Evonne Stevens – Today we are proposing our dispatchers start limiting the use of the EIDS work COVID tool during the EMD process to the protocols where it is included in the protocols. Currently, those protocols are the sick protocol, difficulty breathing and chest pain. I have checked with the other agencies surrounding our county like St. Helena, Marin County and San Francisco as well as some other counties around the country and it seems like the trend is everybody is just using this EIDS tool on those three protocols and have stepped away from using them on every single call. I think that using them on every call is leading to a lot of frustration from our callers. They will be calling about unrelated problems like traumatic injury, burns, or other medical problems that have nothing to do with COVID. We had the PPE precautions kind of going strong for the last three years since we have been in this pandemic for so long. I think it is natural for everyone to stop using them all the time. I just wanted to open this up to Dr. Luoto if you had anything you wanted to add to this subject.

James Salvante – Evonne, Dr. Luoto actually had a conflict with another meeting he will be here at 1330. Will it be possible to hold the discussion until he is on? He is aware of the need that you are talking about.

Evonne Stevens – Sounds good

b) EMD and EFD for Cloverdale – Evonne Stevens – Discussion

Evonne Stevens - We are happy to announce that REDCOM is going to be providing EMD once again for the community of Cloverdale for all of their medical calls. In the beginning of REDCOM's inception. We were providing these services on a daily basis for all of their EMD calls. Over the years these calls into REDCOM seemed to start dwindling down to mostly cardiac arrest and pediatric calls. There was never any official discussion to terminate this that I am aware. To have these calls stop coming into REDCOM. It just sort of naturally dwindle away and became really few and far between. We have had discussions for the last few months with Cloverdale and between both of our agencies. We agree that the benefits of the EMD process are a vital link and the chance of survival for these patients and the people of Cloverdale should be receiving those services and every opportunity. We wanted to offer to those folks. We started taking these calls officially on September 20th at 12:00 PM. It has only been a couple of days, but it seems like everything is going really well. I have been in close contact with Cloverdale and checking on how things are going on this side as well and everything is going smoothly. We are pretty excited. I will make a quick clarification Cal Fire St. Helena is still Cloverdale fire's primary dispatch center and they will continue providing the EFD to Cloverdale. However, we receive many of their fire calls because they are coming from agencies like Sonoma County Sheriff's or CHP and in those cases, REDCOM will continue to do EFD as we have been for the city of Cloverdale and just provide all their updates to the information that Cal Fire already gets directly through our CAD to CAD. There is no change on the EFD front. Does anyone have any questions about the EMD with Cloverdale or EFD?

James Salvante – Congratulations and thank you. I think this is a fabulous improvement. That is going to corner the county that needs that level of service. I think the pre-arrival instructions we hear at the survivors' reunion all the time make the difference, so hats off to your team, and thank you very much.

Evonne Stevens – Thank you, I am excited about being a Cloverdale resident. I am glad we finally got here.

Spencer Andreis - Any type of discussions taking place with them potentially coming over to REDCOM down the road?

Evonne Stevens - I heard there is some interest, but I believe we are still planning on having access to better radios. Ken can probably speak to that when he talks about his item on the radio updates with the repeater site. I think that is a possibility. If we had a better reception, there. I have used my radio personally in town and I actually get better reception currently on control four than I do on two from Cloverdale. That would be problematic at this point.

Spencer Andreis - Ok, good to know. That was kind of a long-standing concern of theirs, but I do not know if anybody has actually done testing up in that area of that county in the last several years to deter those numbers that potentially could be up there lingering that I know that potentially years ago were.

Evonne Stevens – I have gone out there and have done a few tests with different channels probably every six months. I have not seen too many improvements. I do think Kenny might have something on that front.

c) Radio – Ken Reese

1. **New Repeater Sites – Ken Reese** – There is a new repeater site on St. Helena, that is more of the REDCOM location. That will slowly be built out for other channels as well. Specifically for Control two and four. There should be an improvement in radio reception and pager activations and things like that in Cloverdale. That is something that we are going to have to get up there and do some testing on. As far as control two it was good for a lot of years and what happened was there some implementation of some radio equipment by SMART Train. Where they have a channel that was overpowering control two and they had to eventually turn control two power down, so it was not interfering with the SMART transmitters. It will have to have some discussion and come back to the table. If we ever want to make that transition back to Cloverdale back into REDCOM

2. **Update Station Alerting Issues – Ken Reese** – This should be tremendously better with the new repeater site up. Certainly, we need to go back and revisit the control two issues. I did do some testing myself and once you get into downtown Cloverdale to control two it is spotty and scratchy at best. Four is somewhat doable but even that is probably turned down up there simply because we are not having to do a lot of radio or CRO traffic up in that area. We will put that on our list of things to discuss with the radio shop for sure. The other thing, there is going to be a build out more on the West County side some increases in and better transmission and the Meyers grade area trying to reach down into some of these pockets down off of Cazadero and places of that nature. They are trying to enhance some of that radio coverage in those areas. That is what is going on with the repeater sites. You will notice that you know there have been some problematic things with radio coverage, especially on REDCOM and a lot of that has to do with the new St. Helena sites. They are constantly having to dial things in and raise the power on other sites and lower power in other places just to kind of make sure that they get all balanced in. If you have any problems with special station working, radio coverage, or anything in REDCOM do not hesitate to call and let us know so we can report that information to them. That kind of segues into we have had some significant issues as late as station alerting. Part of the problem is what we end up doing is, you put a new repeater site in and the other repeater sites fight with one another. We noticed that down along the Sonoma Valley corridor not so much when you got in Sonoma Valley but really in Kenwood, Santa Rosa Station 7 area, and stuff like that. There were problems where St. Helena was fighting with Barham and fighting with Sonoma. If

you are continuing to have station alerting issues, please let us know ASAP so we can get the radio shop on it. As always report where you are having the failures and are these pager failures or are these station failures you know the date and time and it all helps for them to be able to pinpoint down where the problems are lying. That is all I got for the radio world.

Spencer Andreis – Thank you, Kenny. Any questions for Kenny? Moving on

d) SOP- Training - Evonne Stevens – Forest is still working on our mutual move-up and monthly training. Nothing really new since our last meeting.

Ken Reese – I just wanted to ask one question. On the SOP. I know at a last-minute thing that LifeWest mentioned they have a TEMS tactical EMS ambulance. I do not believe that there is anything that prohibits us from going ahead and building them a radio identifier but that would have to end up in the SOGs. Just so that was memorialized is that correct?

Spencer Andreis – Is it a LifeWest resource that was under their memory systems or something different?

Kem Reese – I am gathering that this is something different it is something that they will use as a tactical EMS unit in pairing up with a swat team or something of that nature. It sounds like it is something that they have had for a while, and they are using their normal identifiers. They just wanted to have something that was in the CAD system that reflected that it was a tactical EMS unit. There might be other things surrounding that. I do not know if it is something that must be approved by Coastal Valleys and where that plays into the EOA and all those other things. Or just a numbering thing. I know we have them right now their supervisor IDs and of course their six hundred series unit. It sounded like they wanted to have something like L10, so we knew it was LifeWest and it was a tactical EMS ambulance.

James Salvante – In regard to what Kenny said. I am not really clear on exactly what it is and what role we fill in the system from an EMS perspective. I think we need to know more about it. When would they be activated and what are their capabilities and capacity is it an actual transport unit? Which it would make it an ambulance or are they simply offering some sort of responder service with trained people? It is getting into the public safety realm. Which is where we talk about the Law Enforcement angle that it is out of our wheelhouse as long as they are providing care that is in our treatment guidelines. They are an approved provider they can do that. Transport would be an issue within the EOA of course as Kenny said. More importantly what about scene safety acting within the command structure that is in place on these incidents? I am a little uncomfortable with how little I know about what the LifeWest unit does.

Spencer Andreis – That makes two of us James. You hit the nail on the head and normally if it is a tactical or some sort of a swat type resource that would be in conjunction with a Law Enforcement partner. I think Kenny maybe once they start asking, they need to come to this group and truly define what their intention is, and then we can go from there.

Ken Reese - You want them to come to this body or should they talk to Coastal Valley first to see if it fits and what wheelhouse it needs to fall into or both?

Spencer Andreis – I think start with James and his shop first and if it meets the needs then to us. I think the first stop would be Coastal Valley.

James Salvante - Can I ask, maybe get somebody from the DOAG safety side to sit and we could meet together with them? Because that way it might save you some time. There will be issues that may not be an expert on limitations on a non-jurisdictional provider for this kind of work.

Spencer Andreis – I could jump on that with you.

James Salvante – You and I could meet and will through it with them and figure out where they belong.

Spencer Andreis – Sounds good.

Ken Reese - I will work with Evonne to get something back to you. Abraham and I will set up the right group of people to chit-chat about.

Spencer Andreis – Any other discussion? Moving on.

e) CAD /Back –up – Ken Reese -

1. Tablet Command Ken Reese – Just a little update on where we are at on Tablet Command. We have a fair amount of users who are now on Tablet Command kind of the next segue that is happening is there is going to be out of cycle purchase using existing MDC replacement funds. To get some additional IPADS. This will be kind of the first movement into rolling agencies out of having MDC as their primary devices. Having the IPADS with Tablet Command and that is going to be Sonoma Valley, Petaluma, Rancho Adobe initially. That is going to solve many problems with shared crews and things of that nature for those agencies. Tablet Command is not affected by that. That is coming. I do not know how long it is actually going to take. We are purchasing the tablets and everything through the county. I am waiting for purchasing to get back to me with a quote.
2. Response Plan changes with the Sonoma County Fire Districts - Ken Reese– As you heard Chief Busch was talking about response plan changes within Sonoma County Fire District. There is kind of a whole new methodology laying out Response plans for the fire district and basically, what it has done is it is really helping not to tap anyone particular agency for multiple resources, and it kind of helps to resolve a lot of the problems we have had in the past. Where you know you have an agency that is got multiple type ones or multiple type threes and it looks for the closest units and knowing it tries to

tap the entire department for resources that they cannot staff. Those things are in the works. Most recently District 7 and Forestville Districts 3 and 2 and 6 are all slowly being worked on. There are some renumbering of the ESZ. So you can really tell from ESZ number what district is a part of that. That is all in the works. The agencies are all talking with one another, so everybody is aware of what the other departments are doing so we are good in that realm.

3. **Genesis Pulse** – Last but not least. We have one of our pieces of software that has finally come online and is available within the system. It is not 100% yet but it has some great features, and that is Genesis Pulse. Basically, Genesis Pulse is a live web version of everything that is going on in the CAD. It shows all of our incidents. We can go back and look at a snapshot of the units that are responding to calls. It has real-time Rapid SOS. It has caller information in there so we can see where the callers actually calling from versus where the incident is being placed. It has basically line of sight lines being drawn to that. We can replay everything. We have got weather overlays, we have got WAZE integration as of today. So if there was a traffic accident, we can actually see it on WAZE. If it is reported outside of our system and likewise if we create a traffic collision it will report that traffic collision to WAZE. There are some other things that we are trying to work out. Trying to figure out exactly all the different pieces of how we will use this product. It has been kind of a long time coming. There is a lot of little functionalities in there, but it is going to be a great situational awareness tool once we have it all dialed in. That is finally on board and functioning.

Evonne Stevens - I have a question for Genesis Pulse. As far as the WAZE integration for the accidents. Is it reporting accidents and reporting to CHP or is it showing the way the customers when they are reporting accidents? Since we just got it today. I have not had the chance to go out there and look at it.

Ken Reese - I have only seen two accidents one was from WAZE, and the other one was one of our calls. We created a traffic accident, and it got reported to WAZE, and then you were actually able to see it on the WAZE app itself. It is coming from multiple locations. Anybody that is reporting WAZE from the app, or another department has some sort of integration back to WAZE, we would also see that.

Evonne Stevens – I was on the floor Saturday helping and had to call CHP for an animal hazard on the road, and I was on hold for 36 minutes because they were so busy. I think it would be really fantastic if they were getting the information from WAZE customers automatically verse waiting for those calls.

Ken Reese – Absolutely. The live WAZE integration piece just came from a traffic collision standpoint, anyway. It just came from fruition at 11 am this morning, the two-way push. The other stuff was working as of yesterday. I am looking forward to seeing more of it myself. Like I have said I have only seen a couple so far today. We have not been relatively crash-free on our corridor.

Evonne Stevens - Maybe we could do some testing after this meeting is over. I would love to see it.

James Salvante – Spencer, Dr. Luoto has joined us when it is an opportune time to revisit the COVID question.

Spencer Andreis – I was going to circle back to make sure nobody had questions for Kenny on CAD backup, Tablet Command before we move back. All right we will go back to the COVID discussion with Dr. Luoto and turn it back over to you Evonne and James.

Evonne Stevens – I think Dr. Luoto is pretty familiar with this proposal. We had a quick discussion last week. Dr. Luoto to catch up really quickly. We talked about limiting our use of the EIDS tool to protocols like sick, difficulty breathing, and chest pain. Where EFD is currently sending us to use the EIDS tool and not have to use it on every single call whether it is related to COVID or not. We did check into other centers surrounding us in different counties. They are all currently using it the way we suggest using it now as well as the majority of the other centers that I have contacted around the country. I am proposing that we get that approval from you today and just wanted to see if you had any other comments to talk about with that.

Dr. Luoto - I think that it is a great idea. I think it is time to pare it down. Like you were saying. It is taking a lot of time, and it is probably being met with a lot of consternation by a lot of the patients and callers who do not feel it is appropriate anymore. I think this is a good change in a paring down. You know kind of makes a lot of sense practically and in every way.

Evonne Stevens - Thank you.

Dr. Luoto - Does anyone have a problem with that? In the group?

Spencer Andreis - Any discussion from the DOAG members on the methodology, thought process, changes?

Dr Mase – I am kind of coming in and out of this call a little bit. I am not familiar with this tool, and I know this may not be the correct discussion for the group, but can someone just give me like the thirty second overview.

Evonne Stevens - Currently we use this tool on every medical call that we receive and what it basically does is it starts with two questions, have you tested positive for COVID in the last 14 days, and then the next question is have you received the COVID vaccination. If the answer to the vaccination question is yes. Then we will go back and basically report that they did test positive and they have had a vaccination. We do not make any recommendations about PPE to the responders. If they have not received the vaccination, whether they are COVID-positive or not. We are calling about a knee injury. We are going to proceed to ask them about twelve questions. Two different ways. Do you have a fever? Have you been coughing or wheezing

there is just a lot of questions that go along with that unvaccinated person and has created a lot of frustration for the callers. They are calling about something that seemingly has nothing to do with any type of respiratory illness or even a cold. They must go through all of these questions because they are not vaccinated. The EMD protocols is only having us use that tool directly for people that are calling about sick problems. Like general sick illness, breathing problems or chest pain. That is the way the majority of the country is using the protocols right now. Not using it for every single medical call regardless of what the call is related to. That is what we are suggesting to go the methodology of pretty much the rest of the country. Using all those three protocols for the EMD directs us and not every single time someone calls something medical.

Dr. Luoto - Sundari if the patient self-reports and just tested positive for COVID. They will give that information to the responders. That information will get there. Obviously, the responders need to be wearing appropriate PPE.

Dr. Mase – Thanks, that makes much sense. Thanks for explaining.

Evonne Stevens - No problem.

Spencer Andreis- Any further discussions on the topic?

Dr. Luoto - When do you want to start implementing this change?

Spencer Andreis - First we need to do a motion and approval to amend and then we can. Whenever Evonne can make that happen on the EMD side of CAD as soon as possible.

Dr. Luoto – Great.

Spencer Andreis- Looking for a motion to a motion.

Motion to approve made by Shepley Schroth-Cary and Second Spencer Andreis – Discussion – No Further Comments – Approved unanimously.

f) Tiered Response-

1. Report out and Discussion on any updates from the Tiered Response Task Force meetings - Shepley Schroth-Cary and James Salvante

James Salvante – I would like to defer to Ken Tasseff is with us. He has been leading the process of facilitating on behalf of DHS administration, and he is prepared to give a report, and I will ask him to do so.

Ken Tasseff - Thank you all for inviting us here this afternoon to share the progress we have made on Tired Response. Let me just give you a brief background. Tiered Response was I goal of the BOARD and of the LEMSA Subcommittee for a while, it, in fact was one of the future enhancements that was listed in the original RFP that has been worked through for the past several years. With the ending of the last contract and the knowledge that the county was interested in moving forward with Tiered Response. AMR had

stated that they need to have that as part of their contract package in order to extend through January 16th, 2024. The BOARD approved that contract with the intention that Tiered Response would be phased in as approved by Dr. Luoto and so as part of that. We engaged a number of different organizations, including this one to join us in a stakeholder engagement ultimately, EMCC was one of the primary organizations to join. We have a broad-based stakeholder group that we call Tiered Response Task Force that has been looking at this matter for a while. This includes members of the EMCC includes any member of this DOAG committee. Shepley, as a matter of fact, is on the task force. Includes individuals from the community stakeholders such as Tuck Bierbaum , Art Ceija from Santa Rosa Community College, Tony Gossner, one of our Fire Chiefs here in our county, KT McNulty, Lucida Gardener sits in for some data. Scott Westrope and Steve Sutter are on it from Santa Rosa, and then from Base hospital Erin Olson and Dr. Omar Ferrari also sit on the task force. The goal of that task force of course is to advise Dr Luoto on the implementation of Tiered Response and within that a smaller data subcommittee was formed to look at data. That would support Tiered Responses and support good decision-making on Tiered Response. I believe we have had eighteen meetings now regarding the Tiered Response. We are ready to implement what we call phase one of Tiered Response, which essentially is a tandem deployment of both the ALS and BLS resources on alpha and bravo calls. It really is not tandem though ALS will continue to be dispatched as has been traditional right at the beginning of the call and BLS will be dispatched at the time of MPDS determinant has been established. That is going to remain in place we will not go any earlier than that. We want to wait until the MPDS tests the determination has been made and that is to establish a control group. That we can look at the data and understand exactly when the decision was made to rule the BLS. In support of this. There are three things that are happening. 1.) Dr. Luoto is issuing a special memorandum that will just articulate what is going to be happening. That special memorandum really does not establish any new rules or anything it simply establishes that his encouraging AMR to put in place more BLS resources and then those BLS resources will be deployed along with ALS. ALS will still continue to be on all calls and we will be conditional assessment and only after that assessment will they do a handoff to BLS. If I may share a screen to share the special memo. This special memo essentially all it does is talks about some historical backgrounds. The first paragraph discusses this status subcommittee's evaluation of past CAD and the limitation that we had. We were looking at a lot of data from various sources from historical data. Essentially trying to approach this from the perspective of, let's look at the most reasonable or most likely determinants that we think would have BLS response and let's see how the data supports the use of those. We found a lot of limitations on the ability to do that. So we shifted focus to discussing the review of the anecdotal case data on calls that were turned over to BLS. We found that to be a much more valuable data set to work with. What we have done is we have decided to let us implement this

phase one process and we will then take the data that we get from that and start evaluating further. What determinants would make most sense to do any kind of BLS only response. Only after we are very confident that it can be done. Will let Dr. Luoto move to the next phase of implementation. Essentially the memo also talks about some of the other organizations and some of the other providers that do provide Tiered Response or some form of Tiered Response. Coast Life Support, Petaluma, and AMR support. at this time is doing that as well. It is just an expansion of AMR's program. Then lastly, it just recently talked about consistency with the current practices, Dr Luoto is encouraging AMR to increase the availability of BLS resources. The goal is to hopefully reduce the impact on ALS resources to have them out in the field where they are most needed. If necessary that the BLS resources, like in terms of wall time, can be on wall while the BLS resources are still out there in the field available for the ECHO, DELTAS, and CHARLIE calls. That is the essence of the memo. Along with the memo. We have identified a group of data set that we plan on reviewing. The Task Force looked this over. The data subcommittee has refined this list. I will show you just briefly. I do not know that it is that important or that interesting. These are the metrics that we will be looking at a lot of operational measures.

Is the total number BLS requests by the unit on scene, time on scene, for both BLS and ALS units, response time, and so on. The percentage number of BLS cancellations. The reasons for those cancellations. Any BLS code three response. Any BLS code three returns. There are some of these that would be identified as Sentinel event. There is a whole bunch of different operational data that we will be looking at. Clinical measures, such as things that are dispatch related, such as what was the primary EMD determinant, primary complaint. We will be looking at pain issues as well as the outcome you know, reviewing all of unusual occurrences. Reviewing any BLS unit using any intervention after downgrade. Any adverse patient outcomes from ER reports. Particularly well-handled responses. We want to know about those. The difference in any ALS wall time before and after phase one implementation see how that reduces the amount of wall time that ALS resources are encountering. So these are the data points that we plan on looking at. Until we actually start pulling those data points and know that they are viable, this is a living document. We may have to make adjustments as time goes on.

The last thing we are going to be doing is we need to establish a team in generally what I believe will do is take the current data subcommittee of the Tiered Response Task Force and we will supplement them with the individuals that we think will help with the evaluation of this data. We have a Tiered Response Task Force meeting next Tuesday. We will be working with the Tiered Response Task Force to get recommendations on who should be involved in the group that will be evaluating the data. That is pretty much what is going. After the Tiered Response Task Force meeting next Tuesday Dr. Luoto will issue the special memo, and then AMR will start deploying BLS

resources That is in a nutshell what has been going on with Tiered Response. I am available for questions if that is ok with the chair.

Spencer Andreis – Absolutely. I have one question. Has the REDCOM Board been privy to all this information and included with I believe Scott Westrope is on the REDCOM Board but not 100% sure. I just want to make sure that they have some sort of representation at your meetings and/or presentations and such.

Ken Tasseff - We did a presentation at the last REDCOM meeting and the last EMCC as well.

Spencer Andreis – Ok, great.

I believe that is all our agenda items for today. We will go ahead and open it up for announcement from the membership. Go ahead and open that to anybody wishing to speak

VII. Announcement Items from the Membership

Conduct a roundtable of members

Ron Busch – I just wanted to get you guys in the loop that Sonoma County One, the partnership with Reach helicopter, is moving along rapidly. We are currently training all of our Chief Officer, and staff in helicopter operations. We are going to do a demo at the Marin County Chiefs as well as the Sonoma County Chiefs Association. I am not sure how it is going to roll out yet. I think it warrants having a discussion about possibly dedicating a Tac channel to air-to-ground for the ship and LRA incidents. It is going to roll out to the County Chiefs this next meeting. I do not know exactly what is going to look like, but it could we do have the ability to put it out on any local responsibility area fire currently as well as any SRA Fire within our own district. I want to get that discussion out there as far as is it possible for us to designate an air-ground channel for tactical air-ground operations versus just running it on the ground-to-ground attack.

Spencer Andreis – Yes, it is possible just. Just shoot me an e-mail, and I will take a look, and we can maybe identify a surplus tactical frequency that does not have a placeholder so to speak that we could possibly utilize, and we will have to amend the SOP. Definitely doable.

James Salvante – I have a question for Ron. Will you be working with us directly in regard to their personnel on that ship or be similar to say that with Con-air model where we are talking to reach in terms of credentialing, and you know paramedic accreditation and all that?

Ron Busch – That is a great question. Currently, the only thing we will provide for Sonoma County One is the fire service technician. The Reach program will continue to maintain the nurses and the paramedics. If that does change and

we start to staff medics on the ship, then we will definitely reach out to you but right now you should not see any change on that side of the house.

James Salvante - Very good thank you very much for that. Spencer, I am sure folks that there is much overlap here. It seems like discussions are starting to happen for next year's Homeland Security grant funding. I do not know if it is too early to think about it. Is there anything we need for our coordination and communications as REDCOM to be thinking about partnering? A few years back, with that Tablet project, that was sort of useful for folks to get iPads. I do not know if there is anything else in the pipeline that we should be collaborating on.

Spencer Andreis - That is a great point. Since Kenny is on the phone, you know infrastructure is always a big one with our communications countywide and if there is something that would make our communication system better. Something that we can identify would be, I think, collectively a great goal to put forth for that grant.

KT McNulty – We still have the Control two and four radio channel upgrades pending.

Spencer Andreis - I believe we discussed potentially simulcasting control three throughout the county as well, right? That would be another one that we could potentially look at. I think the big thing is prioritizing what is going to be priority one, priority two, and priority three and obviously going for that priority one giving some sort of figures and cost to make those amendments.

Ron Busch - I have not seen the notice of funding opportunity but does communications usually falls in there. Can we take a bigger whack at it we start looking at what it would take for us to replace the system as far as infrastructure goes or is that too big.

Spencer Andreis – That is too big.

I do not know the dollar figure, but it has dwindled yearly. Usually, it is a cost share between its Law and Fire. I am going to throw a number out. I have not looked at any emails in the last two weeks, but you know it is probably in the neighborhood of a half a million to three-fourths of million at tops for a full overhaul and updated systems. You know you are in the millions. Kenny, I do not know if that would be something you would be willing tackle look at it and potentially if there is something to prioritize what is going to be best suited for us as a op area and maybe look at pursuing that on behalf of the county.

KT McNulty - We still have the Glen Price Group Grant consulting firm.

Spencer Andreis -Ok

James Salvante - If I recollect from the meeting on Monday, they had suggested that they were going to have regular Monday webinars I believe beginning on the 10th to talk about what the details are.

Spencer Andreis – ok. Any other announcements or good to the order?

For our next scheduled meeting which is November 22nd and traditionally unless something is pending that is mission critical. Normally if it is pretty quiet as far as our agenda goes. We usually opt to cancel and defer to January because it is Thanksgiving week. Once that date and time get closer, we will let everybody know. With that, I will look for a motion to adjourn.

Motion to adjourn by Ambrose Stevens and Second James Salavante – Discussion – No Further Comments – Approved unanimously.

Spencer Andreis - I appreciate everybody's time today and have a safe rest of your week; we will talk to everybody soon.

Next Meeting January 2023, at 13:00 hybrid on teams and in person

Adjournment: Meeting adjourned at 1403