The meeting was called to order by Chair Dale Wilson at 1:37 p.m.

Roll call was conducted, and a quorum of members was present: Chair Dale Wilson, Vice Chair John Peters, Denise Pieroni, Bruce Vander Veen (arrived at 1:40 p.m.) and James Weiss. Dave Nelson and Lowell Hagen were absent.

James Weiss made a motion, seconded by Denise Pieroni, to consider agenda item 8. d., “Options for Super-EMS users” after public comment and to approve the agenda as amended. Motion carried 4-0.

Denise Pieroni requested the April 12, 2018 meeting minutes be amended on Page 3, the second paragraph, line 7, to read “Wilson stated members should not only represent their department, but to represent the body they were chosen to represent,” and to approve the minutes as amended. Motion carried 4-0.

Public comment period – County Administrator David Bretl introduced County Board Chair Nancy Russell and thanked her for attending. He noted his draft recommendations from the study committee were included with the agenda packet for review and modifications.

New Business
- Options for “Super-EMS” users

Bretl said one of the issues raised at a previous meeting are the “Super-EMS” users, who frequently call emergency dispatch for non-critical services such as transport, mental health issues, etc. He asked Health and Human Services (HHS) staff to collaborate on potential strategies and services to decrease the frequency of those calls. HHS Division Manager Lori Muzatko distributed a brochure from the Aging and Disability Resource Center (ADRC), which contains information on services the ADRC can provide to adults over the age of 60 and adults 18 and older with physical or developmental disabilities. Recently, the Adult Protective Services (APS) unit was transferred under ADRC. APS provides support and services to those suffering from self-neglect, neglect by others, sexual abuse, mental health issues, financial exploitation, etc. Crisis Intervention Supervisor Sonia Hill distributed information containing support links and phone numbers for various agencies, including the Solstice Warmline, which provides phone support to people with mental health and/or substance abuse issues. Hill said Crisis Intervention staff operates 24 hours a day for immediate short-term crises, which include behavioral, emotional, mental and physical issues. Intervention staff assesses individuals for risk, complete individual plans concerning addiction coordination, develop crisis stabilization strategies and provide resources for voluntary and involuntary hospitalization. Staff takes APS reports and will respond to calls to help manage a crisis situation. She encouraged fire and EMS professionals to give 911 frequent callers with non-medical issues the Crisis Intervention referral number. Staff can help talk individuals out of a crisis mode or refer them to other support links. Hill’s office prepares a report, opens cases, and talks with the consumer and their physicians and investigates in-home services. Muzatko cautioned that HHS cannot engage if an individual is deemed competent and refuses assistance. Discussion ensued on ways to distribute information and publicize ADRC and APS services. Hill encouraged departments to provide information to those frequent callers whom they feel would benefit from the services she discussed. Bruce Vander Veen
recommended that HHS staff attend a future Fire Chiefs division meeting to make a presentation on their services.

Public Health Officer Erica Bergstrom said her office can enforce statutes for human health risks, i.e. structural, sanitation issues. When a problem is identified, municipalities usually contact Crisis Intervention initially. Public Health investigates potential hoarder homes and communicable disease threats. Hill said in some cases, APS, ADRC, Public Health and the Children’s unit have worked collaboratively to resolve issues. There were over 300 APS reports in 2017, and she anticipates an increase this year. One of this year’s division goals is to become more mobile within the community and schools to support law enforcement during a crisis event.

Dr. MacNeal estimated that 15-20% of 911 calls do not need an EMT response. Case managers and mental health personnel have been added to emergency room services. Vice Chair Peters said it would be helpful to have volunteers who would assist residents to install assistive devices to ensure a safe living environment. His department has performed these services for individuals who have been frequent 911 callers. The HHS main phone number is (262) 741-3200 and is answered 24 hours a day.

Mobility Manager Al Stanek presented information on the County’s transportation services. All vehicles are equipped to accommodate wheelchairs, and rides are available to anywhere within the County from 6:00 a.m. to 7:00 p.m. on weekdays and 7:00 a.m. to 5:00 p.m. on Saturdays. Drivers are trained in first aid and certified in CPR. County Board Chair Russell suggested that the Volunteer Coordinator could advertise for volunteers to assist families who can’t afford to make safety improvements in their homes. **HHS staff will come to another Fire/EMS study committee meeting within 60-90 days to provide further information and recommendations for service collaboration.**

**Unfinished Business**

- Discussion regarding public survey

Bruce Vander Veen made a motion, seconded by James Weiss, to have the discussion regarding the public survey in 90 days. **Motion carried 5-0.**

- Follow-up on Pro-Phoenix discussion

Communications Captain Jamie Green presented information on options and pricing for putting 25 ambulances in the County on GPS mapping through the Dispatch Center. The least expensive option would be for GPS only through a separate source. Users would need GPS servers. Servers through a cloud based solution would cost approximately $4 per vehicle, or $1,200 per year; the GPS client licenses would cost $825/year; internet connectivity through a separate provider would be $40/month ($12,000 per year for 25 ambulances). Recurring costs would approximate $14,000 per year, plus $5,000 for hardware. This service would provide only the ability for dispatchers to see where the ambulances were, and dispatch would have to toggle between the ProPhoenix and GPS screens to utilize it.

ProPhoenix is the most expensive option, but would allow for a higher level of service and for fire departments countywide to get onto the model. Bruce Vander Veen noted departments are already paying separate vendors for software for reports, training and inventory and ProPhoenix could provide all of those services. The Sheriff’s Office would require two additional servers at a cost of $25,000. License fees for 25 vehicles would cost $50,000; a router/antenna for vehicles to use with the system would approximate $30,000, and internet connectivity would be $12,000 per year. Annual maintenance for all vehicles would cost $7,500. In addition, semi-rugged laptops for the vehicles would be approximately $2,000 per vehicle. Several agencies already have their own laptops in their rigs, and the laptops would only be necessary if calls were to be assigned to the rigs. The Committee concurred that in order to be effective, each department would have to abide by the same
uniform policy on timeframes for response and dispatch would have the authority to call another provider if response times aren’t met. Chair Wilson added that medical directors should have input into the protocols. The restructured emergency governing board should assist in setting policy and assigning authority over decisions. Committee consensus was to establish a preference for the ProPhoenix system for ambulances; and perhaps adding fire vehicles at a later date if deemed beneficial. Dr. MacNeal said it is crucial that private providers be on GPS and the appropriate radio channels. Dispatch must have the ability to know their locations at all times.

**New Business**

- **Potential of county-run or contracted ALS**

Denise Pieroni forwarded the sample Emergency Medical Ambulance Services Agreement as a template to use should departments choose to hire private providers for higher level calls. The contract covers pay rates, scope of services, training and insurance requirements, mutual aid agreements, indemnity, etc. Vice Chair Peters asked if this is the long-range service model the City of Delavan is considering. Pieroni responded she is looking for options to maintain services countywide, and asked if there was a possibility the County would take on ALS service provision, possibly at a shared cost. Peters suggested it might make better sense to train all staff to an ALS level. He added partnering for service provision is already taking place among some departments. Bretl said he wouldn’t agree to subsidize a system that isn’t working well; funds would be better used to facilitate consolidation when possible. Discussion ensued about community awareness of the issues with coverage and timely service provision. Vander Veen said municipalities need to be better informed of the dialogue on major issues identified by this committee, and feedback received from the surveys. Chair Wilson suggested having committee members speak at an upcoming Intergovernmental Cooperation Council (ICC) meeting after options and recommendations are finalized. **Bretl will include the presentation on the October 2018 ICC agenda.**

- **Billing between municipalities** - to be discussed at a future meeting.

- **Staffing models for fire and EMS departments** – to be postponed to the June 27, 2018 meeting.

- **Discussion of Medical Reserve Corps – Colleen Lesniak**

Walworth County Volunteer Coordinator Colleen Lesniak introduced herself. She was approached by Public Health to seek individuals with medical and non-medical skills to serve the Medical Reserve Corps (MRC). Bilingual people are being encouraged to join, along with social workers and those who have organizational experience. The MRC assists communities with activities to promote and strengthen public health, emergency response, and community resiliency. Members would assist in community emergencies and participate in local drills and exercises, such as mass vaccination clinics and emergency preparedness scenarios. Throughout the year the group performs outreach activities. The Corps provides training for volunteers. An MRC informational meeting is scheduled for May 22 at 6:00 p.m. at the Matheson Memorial Library in Elkhorn. Lesniak asked the group to distribute the information to their departments and fellow health providers. She will also email the flyers to committee members. Volunteers would not be asked to perform medical services.

- **Additions, deletions or edits to Committee Recommendations document**

Bretl drew attention to the committee recommendations in the packet and asked for input. Chair Wilson requested under III.B. that a number 3 be added: “Make recommendations on evaluating customer service levels,” and an item 4: “Review data and make recommendations on dispatch staff training and quality assurance.” Under Section III. C., add after “should be developed” the words, “to determine when to dispatch the closest ambulance.” Other recommendations were: encourage fire departments and EMS agencies to support the concept of utilizing the ProPhoenix fire module countywide; and develop protocols regarding response time standards and mutual aid agreements to ensure response.
Public comment period – County Board Chair Russell reported she has been asked to serve on Gateway’s EMS Advisory Committee, and she will be attending future Fire/EMS Study Committee meetings. The Gateway group only meets twice a year, and their focus is curriculum directed.

Next meeting date and time: The next meeting was confirmed for Wednesday, June 27, 2018 at 1:00 p.m. in County Board Room 114 at the Government Center.

Adjournment
On motion by Bruce Vander Veen, seconded by Vice Chair Peters, Chair Wilson adjourned the meeting at 4:00 p.m.

Submitted by Becky Bechtel, Administrative Assistant. Meeting minutes are not considered final until approved at the next regularly scheduled meeting.
Recommendations of the Walworth County Fire/EMS Study Committee
Table of Contents

I. Executive Summary

II. Background

III. Findings

IV. Recommendations

V. Appendices
   a. Appendix A: Fire/EMS Department Survey Data
   b. Appendix B: Governmental Bodies Survey Data
I. EXECUTIVE SUMMARY
(Reserved)

II. BACKGROUND
In response to the requests of numerous towns, cities, and villages located in Walworth County, in 2016 the County Board of Supervisors passed Resolution 31-11/16 establishing the Walworth County Fire/EMS Study Committee. Membership of the committee consisted of three fire and EMS professionals and four government representatives; one each representing town, village, city and county government. The following individuals were appointed to the committee: Lowell Hagen, Whitewater town chair; Jim Weiss, who served as both the Linn town chair and administrator for the village of Williams Bay; and Denise Pieroni, administrator for the city of Delavan. The fire and EMS perspective was represented by: Lake Geneva’s Fire Chief John Peters; Bruce Vander Veen, Chief of Sharon Fire and Rescue; and Dave Nelson, an Assistant Chief with the Lauderdale-LaGrange Fire/Rescue department. Dale Wilson, the County’s human resources director, represented Walworth County government. The county board eventually modified the structure of the committee to provide a number of alternate members and to create advisory seats for the county’s emergency medical directors, Doctors James MacNeal and Steven Andrews. County Board Supervisor Ken Monroe was the county government alternate while Dennis Martin, Fontan’s village administrator, was the local government alternate. Fred Schalow, Chief of the Bloomfield-Genoa City Fire and Rescue was the fire service’s alternate member. The Study Committee held its first meeting on March 23, 2017.

III. RECOMMENDATIONS
A. Walworth County should establish a consolidated-unified dispatch center that operates independently of the Sheriff’s Office and which would be responsible for.

B. The charter of the current 9-1-1 governing board should be modified to include Fire/EMS and law enforcement professionals and the duties of the committee should be changed to include the following:
   1. Review protocols and encourage common protocols;
   2. Make recommendations to the communications captain;
   3. Make recommendations on evaluating customer service levels;
   4. Review data and make recommendations on dispatch staff training and quality assurance.

C. GPS devices should be installed on all ambulances in the County with the capability to be located in real time by a centralized dispatch center. Protocols should be developed to determine when to dispatch the closest ambulance to respond to the emergency.
D. Since law enforcement is often first on the scene, encourage all law enforcement agencies to ensure that deputies and police officers receive first-responder training and have basic life-saving equipment in squad cars.

E. Encourage fire departments and EMS agencies to support the concept of utilizing the ProPhoenix fire module countywide.

F. Develop protocols regarding response time standards and mutual aid agreements to ensure response.